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Trauma Pause

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TRAUMA PAUSE: EBP GROUP PROJECT

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Purpose

- Enhance nursing knowledge of evidence based practice model via collaboration between hospital units.
- Does a hands-off pause for EMS report during patient arrival improve trauma team efficiency?

Background

- Current approach to St. Patrick Hospital trauma patient arrivals vary in routine, accuracy, and organization, putting patients at risk and resulting in time being lost.

Goals

- Adhere to St. Patrick Hospital trauma team protocol for standardized assembly
- Improve efficiency & accuracy of trauma patient care
- Improve staff satisfaction with trauma team resuscitation

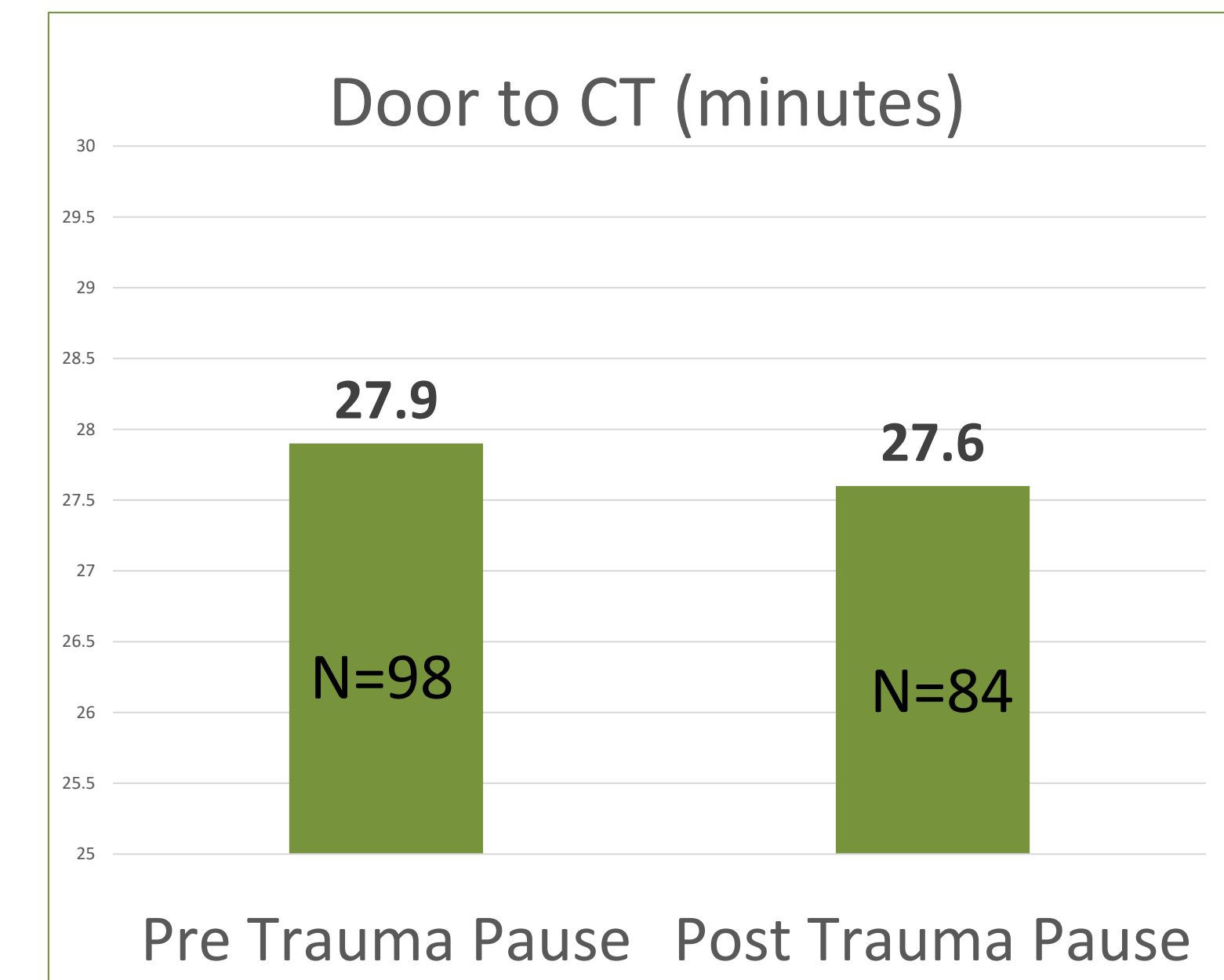
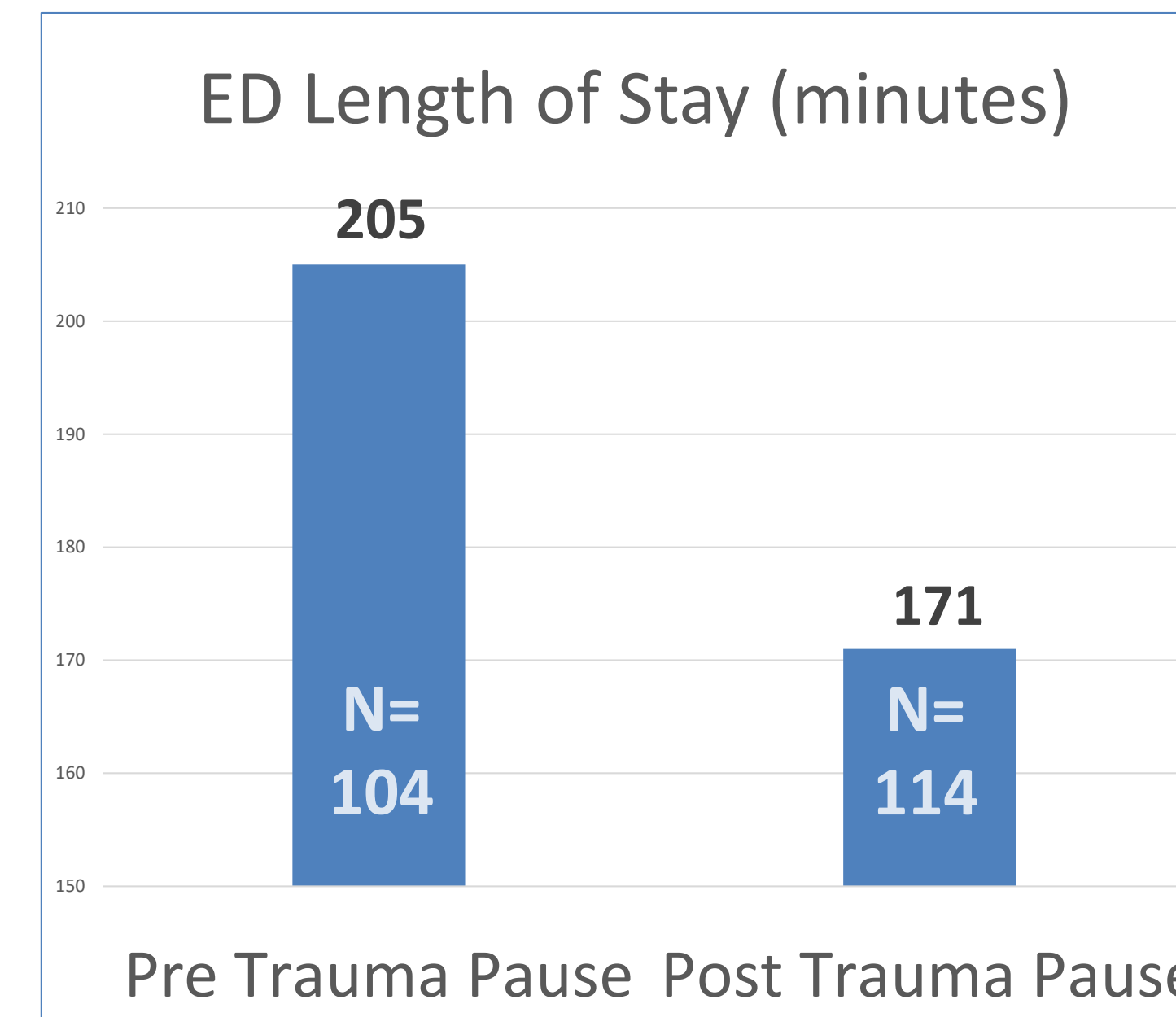
Assessment

- Literature review of emergency medical journals raised concerns about handovers
- Only 72.9% of key prehospital data was documented by a receiving level 1 academic trauma team.
- Poor handover more likely if staff attends to other tasks.
- "Inattention" cited as the primary cause of poor handover
- The Joint Commission reported communication failures resulted in \$1.7 billion in malpractice costs over 5 years

Intervention

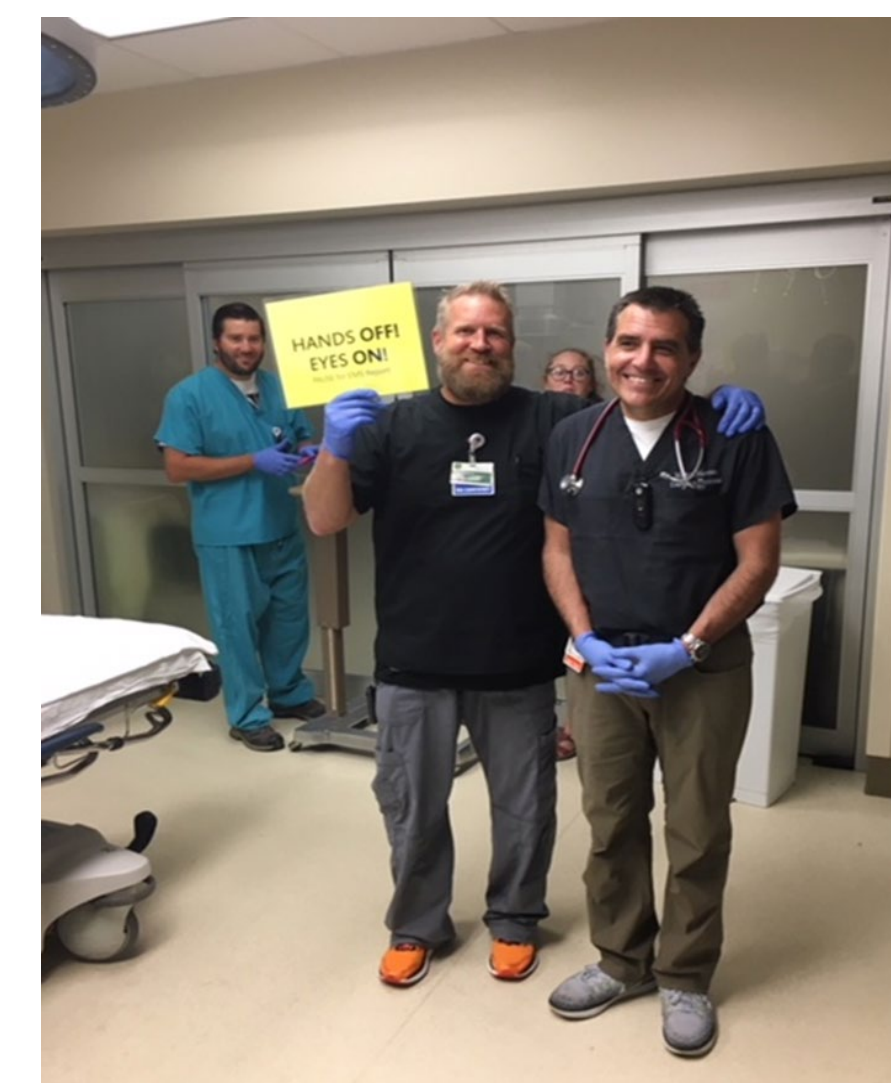
- Policy revision to include "Hands Off, Eyes On" pause for 30-60 seconds for EMS report

Evaluation



Next Steps

- Compliance to the Pause
- Physician, surgeon presence on arrival
- Mock trauma scenarios quarterly
- Orienting new hires for sustainability



References

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