

MEETING ABSTRACT

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Could the implementation of a trauma checklist improve quality of care?

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Background

Medical error in trauma care remains common [1]. Checklists are a cognitive aid that can be employed to standardise practice and minimise error. Their usage is ubiquitous in other high-intensity professions, such as aviation. Following the success of the World Health Organisation's surgical safety checklist they are now in the process of developing a trauma care checklist. My aim was to evaluate whether a checklist could be applied to the trauma setting to facilitate high quality, standardised care.

Method

1. Audit the prevalence of human factors during trauma calls in a major trauma centre in the UK
2. Literature review of the use of checklists in medicine

Results

- At least one incidence of negative human factors affecting trauma team performance was observed during each trauma call with the average incidence being three times per resuscitation.
- Evidence suggests that poor communication is the leading cause of medical error. This was corroborated by my audit findings.
- A review of literature shows that checklists in are effective tools for standardising care by reducing error and improving compliance with guidelines [2].

Conclusion

It is essential that organisational safety culture is addressed and the subject of human error is acknowledged to improve care provision and enhance patient safety. Checklists represent a promising method of tackling this issue

that should be used synergistically with existing management strategies.

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