

## SE10EOb – TEACHING AND ROLE DEVELOPMENT

### EDUCATION PLAN TARGETS LEARNING NEED ON IMPROVED COMMUNICATION AMONG TEAM MEMBERS AND IMPROVES RETAINED SURGICAL ITEMS RATES

*Using the required empirical outcomes (EO) presentation format, provide an example of an improved patient outcome associated with a nursing needs assessment and a related implementation plan in an ambulatory care setting.*

#### **Problem**

The NewYork-Presbyterian/Columbia University Irving Medical Center (NYP/Columbia) OR (MB3,4-605320) [OR] is committed to surgical quality and patient safety. In April 2021, the Nursing Professional Development department conducted an annual continuing education assessment, known as the learning needs assessment (LNA), through an online survey platform for all nurses, including clinical nurses. The organization uses the LNA results to develop and implement educational programs across NYP/Columbia. There are general questions for all respondents, and department specific questions based on the clinical nurse's assigned unit. Once the survey is completed, the Nursing Professional Development distributes LNA reports with collated responses from all participants.

For question 12, directed to OR clinical nurses, located on page 16 ([SE10EOb.1—2021 Learning Needs Assessment Results](#)) of the 2021 LNA report, OR nurses rated their learning needs on a scale of 1 to 4, 1 being the most needed and 4 being the least. "Improved communication among team members" was ranked as the third highest learning need identified, with a score of 2.50. This ranking indicated that clinical nurses in the OR would benefit from additional education on improved communication among team members. [SE10EOb.1—2021 Learning Needs Assessment Results](#)

Evidence suggests that ineffective communication practices among the surgical team may lead to adverse surgical safety events. During September 2021, Kerri Hensler, DNP, MPA, RN, CNOR, NEA-BC, Patient Care Director (nurse manager, at the time),

and Kellianne Earley, MSN, RN, PCCN, perioperative quality specialist, noted an increase in the retained surgical items (RSI) rate in the OR, leading to a close examination of the communication process among the OR surgical team.

### **Pre-Intervention**

September 2021:

- The OR RSI rate per 1,000 OR cases was 1.27 in September 2021.
- Dr. Hensler; Louise Kertesz, DNP, MSN, ANP-BC, CNS, CNOR, clinical nurse specialist (clinical nurse); and Ms. Earley conducted a formal chart review and staff interviews to further examine the 2021 LNA related to perceived need for education and associated improved communication topics. They interviewed the surgical team on case events, count process, contributing factors and barriers to communication.
- The root cause analysis (RCA) of the RSI cases revealed multiple communication breakdowns during the surgical count. From their investigation, Dr. Hensler, Ms. Kertesz, and Ms. Earley recommended the following action items:
  1. Educate perioperative nursing and surgery staff about the count policy, emphasizing the importance of visualizing laparotomy pads at the time of counts. Audits will be conducted on adherence of policy.
  2. Create structured communication between surgeons and perioperative nursing regarding the number of lap pads and surgical instruments entering the patient's body cavity.
- Dr. Hensler, Dr. Kertesz, and Ms. Earley partnered with Patricia Nelson, DNP, MSN-Ed, RN, CNOR, nurse educator, to formulate an education implementation plan to address the communication gaps among the surgical team, which correlated with the learning need expressed by the OR clinical nurses and the OR RSI rate. (Education was initially put on hold due to the COVID-19 pandemic surge.) The topics in the educational implementation plan included:
  1. E-learning Module:
    - RSI by definition
    - Regulatory requirements
    - RSI risk factors and complications
    - Significance
    - Best practices used to prevent RSIs

- When to perform a count
- SurgiCount, where applicable
- Surgical count process
- Sponge counter bags
- Counting needles
- Counting instruments
- Zone of silence
- Surgical pause
- Hand-off reporting of patient information
- Handling count discrepancy
- Wound packing
- X-rays required
- X-rays not required
- Handling of broken medical devices or instruments
- Handling of missing non-radiopaque items

2. Education on RCA Analysis Findings

- Root Cause #1: No visualization of lap pad
- Root Cause #2: Documentation of wound sweep
- Root Cause #3: Discrepancy in method of counting sponges

[SE10EOb.2—RSI Prevention Education Implementation Plan](#)

**Goal Statement**

To decrease the OR RSI rate per 1,000 OR cases

**Participants**

<b>Name/Credentials</b>	<b>Discipline</b>	<b>Title</b>	<b>Department/Unit</b>
Louise Kertesz, DNP, MSN, ANP-BC, CNS, CNOR	Nursing	Clinical Nurse Specialist (Clinical Nurse)	OR
Kerri Hensler, DNP, MPA, RN, CNOR, NEA-BC	Nursing	Patient Care Director (Nurse Manager, at the time)	OR
Patricia Nelson, DNP, MSN-Ed, RN, CNOR	Nursing	Nurse Educator	Nursing Professional Development
Kellianne Earley, MSN, RN, PCCN	Nursing	Perioperative Quality Specialist	OR

**Intervention**

October 2021:

- Dr. Hensler, Dr. Nelson, and Dr. Kertesz encouraged the OR nursing team to complete the mandatory e-learning module entitled, “Prevention of Retained Surgical Items (RSIs).” The module required the OR clinical nurses to read all slides presented in the module and achieve a passing score of 100 percent on the post-test before they are deemed compliant.

*Impact statement: The integration of the e-learning module and post-test in RSI prevention education provided a flexible and accessible way for OR clinical nurses to access the educational content at their own pace, considering their busy schedules. The post-test was an objective way to evaluate how well nurses attained mastery of RSI prevention, reinforcing structured communication between surgeons and perioperative nursing, thereby reducing the OR RSI rate.*

November 2021:

- Ms. Kertesz and Ms. Earley conducted in-services reviewing the key findings of the RCA, which included the following:
  1. Root Cause #1: No Visualization of Lap Pad
    - Pocket bags were used to batch the lap pads. They noted that during the closing count, there was a missing lap pad. The nurse verbally communicated there was a missing lap pad, and the surgeon responded that an additional lap pad was located on the sterile field. The nurse repeated the closing count and included the lap pad that was verbally accounted for by the surgeon. Using the verbally confirmed lap pad, the nurse documented that the closing count was correct.
    - In the absence of adhering to the policy of visualizing laparotomy pads during the closing counts, a verbal confirmation of the location of a missing laparotomy pad was accepted, and the closing count was considered correct when there was actually a missed lap pad in the patient’s abdomen.
  2. Root Cause #2: Documentation of Wound Sweep
    - Surgeon did not communicate a wound sweep at time of closing and it was not documented. Charted in intraoperative debrief under “Wound sweep performed?” - “N/A”
  3. Root Cause #3: Discrepancy in Method of Counting Sponges

- During discovery portion, it was found there was a discrepancy in standardized method of counting lap pads. Sponge counter bags were used correctly; there was a discrepancy in how lap pads were being counted during counts.

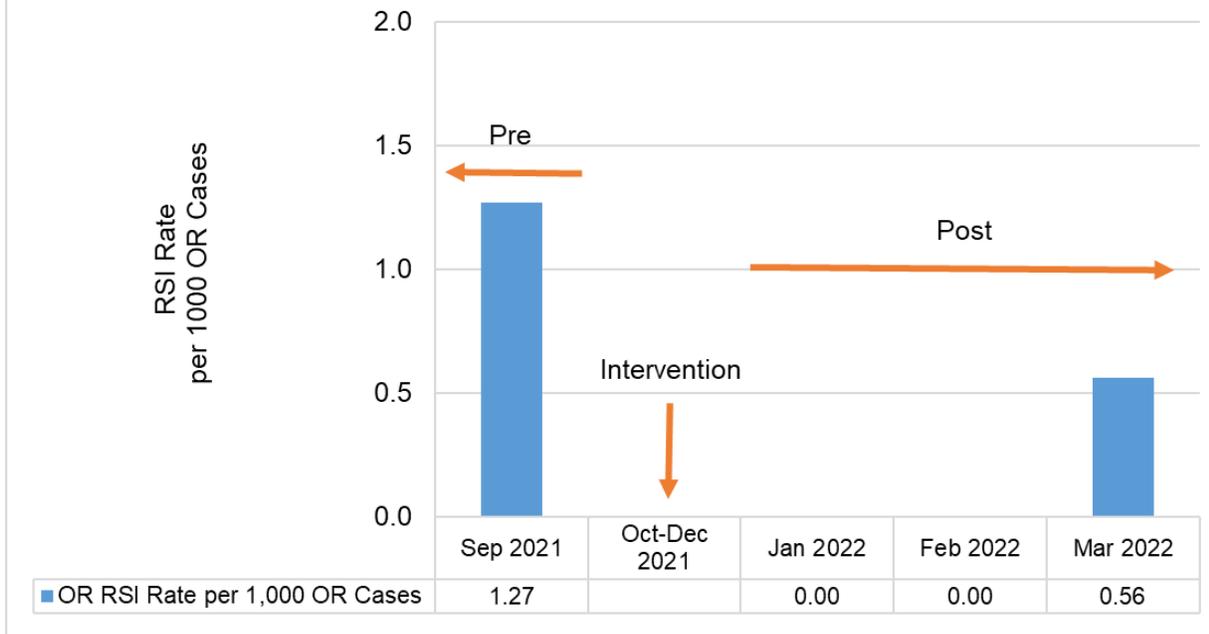
*Impact Statement: Identifying and addressing the root cause helped prevent the recurrence of RSI by reinforcing structured communication between surgeons and perioperative nursing as specified in NYP Policy I260 Count Policy and Prevention of Retained Surgical Items, thereby reducing the OR RSI rate.*

December 2021:

- By the end of December 2021, the intervention plan was fully implemented with 80 percent of the OR clinical nurses educated on RSI prevention. Learning need gaps were closed by the education on effective communication to prevent RSIs.
- **Key references:**
  - Kertesz, L., Cordella, C., Nadera, N., Nelson, P. E., Kahil, M., Shim, S., & Holtzman, J. S. (2020). No Surgical Items Left Behind: A Multidisciplinary Approach to the Surgical Count Process. *Journal of Radiology Nursing*, 39(1), 57-62.  
<https://doi.org/10.1016/j.jradnu.2019.09.004>
  - Nelson P. (2021). Incorrect Surgical Counts: A Potential for Retained Surgical Items. *Journal of Doctoral Nursing Practice*, 14(3), 213-224.
  - Riley, R., Manias, E., & Polglase, A. (2006). Governing the surgical count through communication interactions: implications for patient safety. *BMJ Quality & Safety in Health Care*, 15(5), 369–374.  
<https://doi.org/10.1136/qshc.2005.017293>.

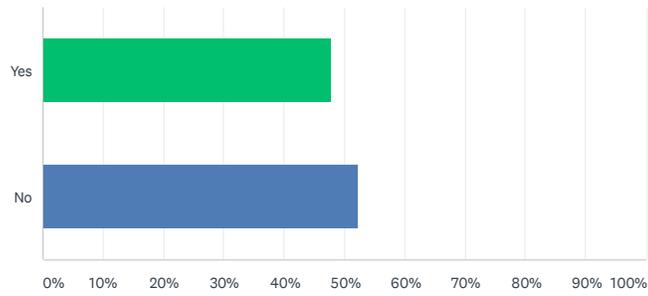
## **Outcome**

SE10EOb OR Retained Surgical Items (RSI) Rate per 1000 OR Cases



### Q1 1. Do you prefer virtual training over live training?

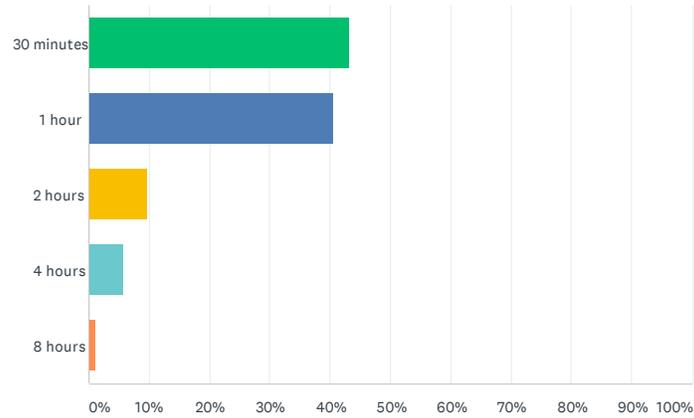
Answered: 197 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	47.72%	94
No	52.28%	103
TOTAL		197

Q2 2. In what time frame do you prefer virtual training sessions to occur?

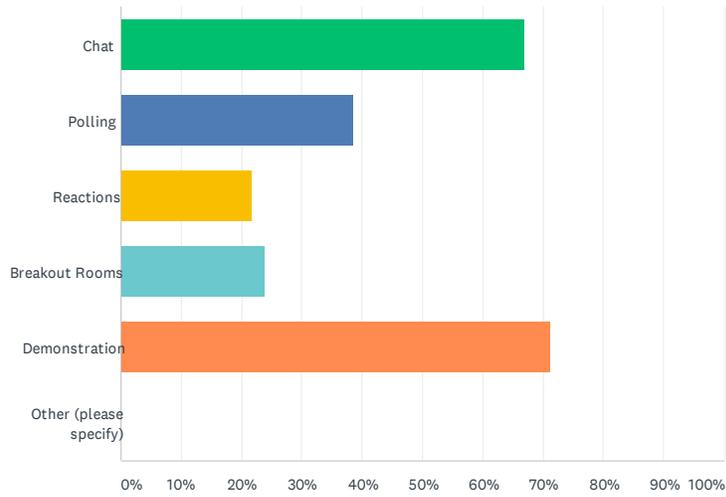
Answered: 197 Skipped: 0



ANSWER CHOICES	RESPONSES	
30 minutes	43.15%	85
1 hour	40.61%	80
2 hours	9.64%	19
4 hours	5.58%	11
8 hours	1.02%	2
TOTAL		197

Q3 3. What methods used during virtual training do you prefer to foster engagement? ( Please check all that apply)

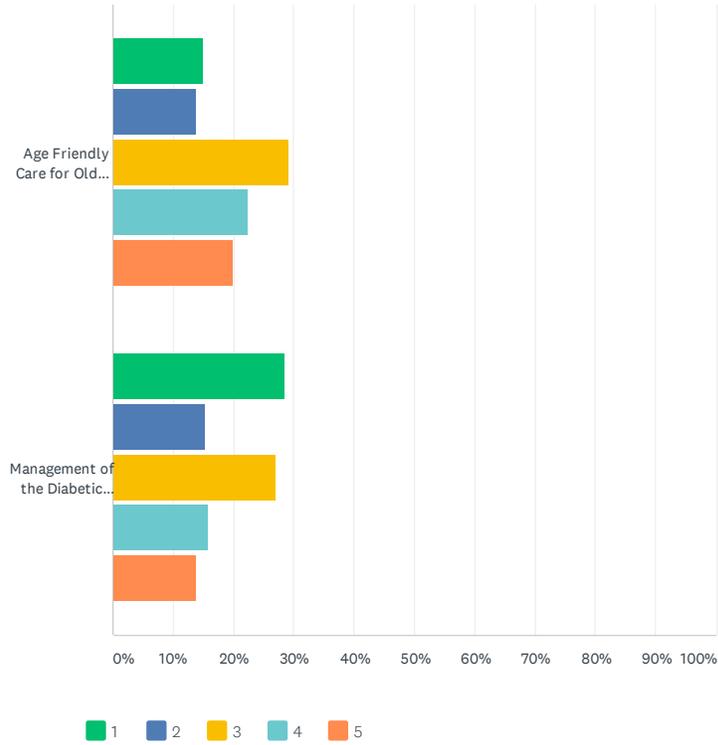
Answered: 197 Skipped: 0



ANSWER CHOICES	RESPONSES	
Chat	67.01%	132
Polling	38.58%	76
Reactions	21.83%	43
Breakout Rooms	23.86%	47
Demonstration	71.07%	140
Other (please specify)	0.00%	0
Total Respondents: 197		

Q4 4. Rank the following based on your perceived need for education 1 is the highest and 5 is the least need

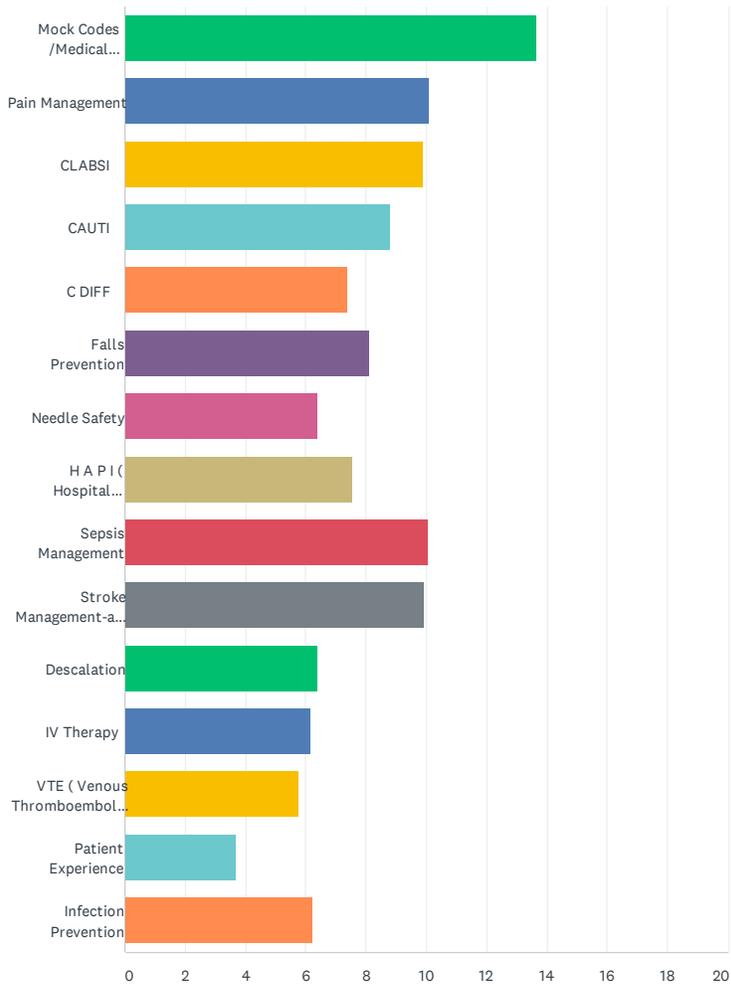
Answered: 197 Skipped: 0



	1	2	3	4	5	TOTAL	WEIGHTED AVERAGE
Age Friendly Care for Older Adults	14.80% 29	13.78% 27	29.08% 57	22.45% 44	19.90% 39	196	3.19
Management of the Diabetic Patient	28.43% 56	15.23% 30	26.90% 53	15.74% 31	13.71% 27	197	2.71

Q5 5. General Topics: Rank the following based on your perceived need for education. 1 is the most need and 15 is needed the least

Answered: 197 Skipped: 0



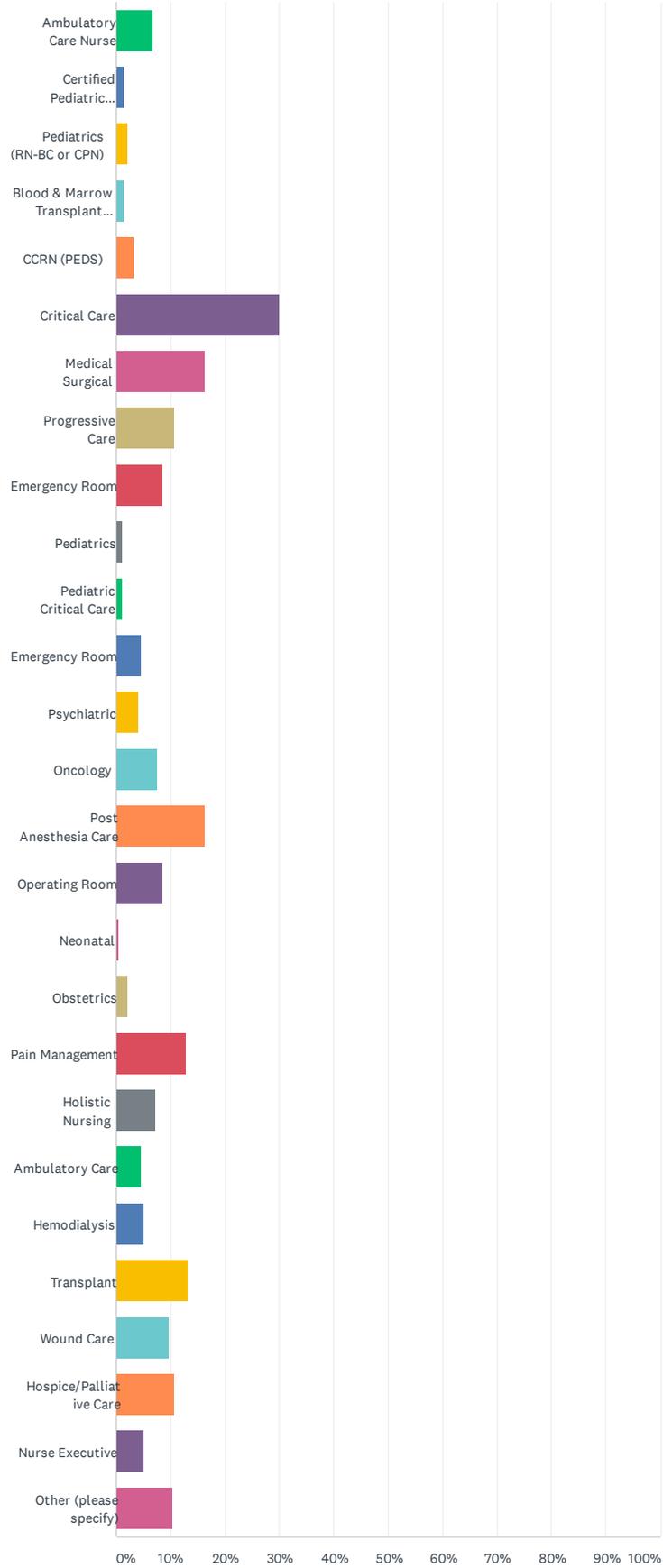
## 2021 Clinical Nurse Learning Needs Assessment\_Milstein

	1	2	3	4	5	6	7	8	9	10	11	12	13	1
Mock Codes /Medical Emergencies (RRT Emergencies)	69.54% 137	10.15% 20	5.58% 11	2.03% 4	2.03% 4	1.52% 3	0.51% 1	1.52% 3	1.02% 2	1.02% 2	0.51% 1	1.52% 3	1.02% 2	
Pain Management	5.08% 10	21.32% 42	16.24% 32	8.12% 16	5.58% 11	4.06% 8	7.61% 15	5.58% 11	5.58% 11	2.03% 4	6.09% 12	3.05% 6	1.52% 3	
CLABSI	1.52% 3	9.14% 18	17.77% 35	12.18% 24	10.66% 21	11.17% 22	8.63% 17	4.57% 9	4.57% 9	5.08% 10	6.60% 13	2.54% 5	1.52% 3	
CAUTI	1.02% 2	1.52% 3	4.06% 8	18.27% 36	10.66% 21	13.20% 26	12.18% 24	8.12% 16	6.60% 13	8.12% 16	3.05% 6	4.06% 8	3.55% 7	
C DIFF	0.51% 1	2.03% 4	0.51% 1	5.58% 11	11.17% 22	11.17% 22	9.64% 19	12.18% 24	8.63% 17	8.63% 17	7.61% 15	5.08% 10	6.60% 13	
Falls Prevention	1.02% 2	3.55% 7	7.61% 15	5.08% 10	9.64% 19	15.23% 30	7.61% 15	9.14% 18	8.12% 16	8.12% 16	6.09% 12	6.60% 13	3.05% 6	
Needle Safety	0.51% 1	3.05% 6	2.54% 5	3.05% 6	4.06% 8	5.08% 10	8.12% 16	12.69% 25	9.14% 18	8.63% 17	9.64% 19	9.64% 19	7.61% 15	
H A P I ( Hospital Acquired Pressure Injury) Prevention	1.52% 3	3.05% 6	1.52% 3	7.11% 14	4.57% 9	6.60% 13	7.61% 15	16.24% 32	17.26% 34	7.61% 15	10.15% 20	7.11% 14	5.08% 10	
Sepsis Management	4.06% 8	17.77% 35	16.75% 33	7.11% 14	7.61% 15	6.09% 12	4.57% 9	5.08% 10	10.66% 21	8.12% 16	2.03% 4	4.06% 8	4.06% 8	
Stroke Management-activation	6.09% 12	15.74% 31	13.71% 27	9.14% 18	6.09% 12	6.09% 12	6.09% 12	5.58% 11	4.57% 9	13.20% 26	6.09% 12	2.54% 5	2.03% 4	
Descalation	3.05% 6	2.03% 4	3.55% 7	6.60% 13	5.08% 10	2.54% 5	7.61% 15	3.55% 7	2.54% 5	6.60% 13	20.81% 41	13.20% 26	10.15% 20	
IV Therapy	1.02% 2	2.03% 4	1.02% 2	6.60% 13	8.63% 17	6.60% 13	3.55% 7	4.06% 8	4.57% 9	7.11% 14	7.61% 15	20.81% 41	11.17% 22	1
VTE ( Venous Thromboembolism)	0.00% 0	2.03% 4	2.54% 5	4.57% 9	5.58% 11	4.57% 9	7.11% 14	3.05% 6	7.11% 14	6.60% 13	6.09% 12	11.17% 22	25.38% 50	1
Patient Experience	1.02% 2	1.02% 2	1.52% 3	1.52% 3	2.54% 5	2.03% 4	3.05% 6	4.06% 8	3.05% 6	3.55% 7	3.05% 6	4.57% 9	10.15% 20	2
Infection Prevention	4.06% 8	5.58% 11	5.08% 10	3.05% 6	6.09% 12	4.06% 8	6.09% 12	4.57% 9	6.60% 13	5.58% 11	4.57% 9	4.06% 8	7.11% 14	

Q6 6. What nursing certification course would you be interested in taking in the next year? (Please check all that apply)

Answered: 197 Skipped: 0

# 2021 Clinical Nurse Learning Needs Assessment\_Milstein



## 2021 Clinical Nurse Learning Needs Assessment\_Milstein

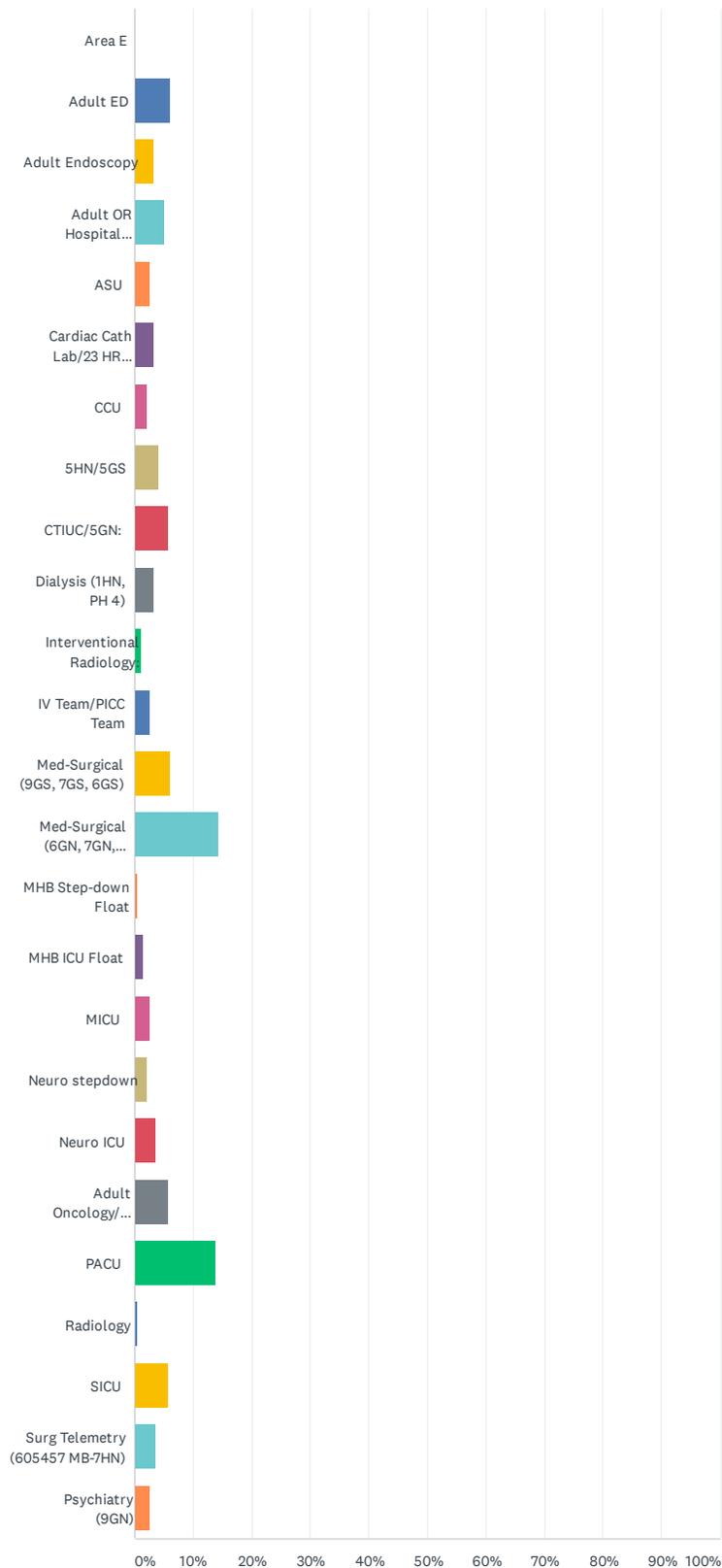
ANSWER CHOICES	RESPONSES	
Ambulatory Care Nurse	6.60%	13
Certified Pediatric Hematology Oncology Nurse (CPHON)	1.52%	3
Pediatrics (RN-BC or CPN)	2.03%	4
Blood & Marrow Transplant Certified Nurse (BMTCN)   ONCC	1.52%	3
CCRN (PEDS)	3.05%	6
Critical Care	29.95%	59
Medical Surgical	16.24%	32
Progressive Care	10.66%	21
Emergency Room	8.63%	17
Pediatrics	1.02%	2
Pediatric Critical Care	1.02%	2
Emergency Room	4.57%	9
Psychiatric	4.06%	8
Oncology	7.61%	15
Post Anesthesia Care	16.24%	32
Operating Room	8.63%	17
Neonatal	0.51%	1
Obstetrics	2.03%	4
Pain Management	12.69%	25
Holistic Nursing	7.11%	14
Ambulatory Care	4.57%	9
Hemodialysis	5.08%	10
Transplant	13.20%	26
Wound Care	9.64%	19
Hospice/Palliative Care	10.66%	21
Nurse Executive	5.08%	10
Other (please specify)	10.15%	20
Total Respondents: 197		

Q7 7. Please indicate any topic that you would like addressed in an all-day continuing education course? (Please write in)

Answered: 130 Skipped: 67

Q8 8. Please indicate any specialty areas you would like addressed in an all-day continuing education course? (Please select your area of clinical practice)

Answered: 197 Skipped: 0



## 2021 Clinical Nurse Learning Needs Assessment\_Milstein

ANSWER CHOICES	RESPONSES	
Area E	0.00%	0
Adult ED	6.09%	12
Adult Endoscopy	3.05%	6
Adult OR Hospital (Milstein)/Eye OR	5.08%	10
ASU	2.54%	5
Cardiac Cath Lab/23 HR Unit/TEE	3.05%	6
CCU	2.03%	4
5HN/5GS	4.06%	8
CTIUC/5GN:	5.58%	11
Dialysis (1HN, PH 4)	3.05%	6
Interventional Radiology:	1.02%	2
IV Team/PICC Team	2.54%	5
Med-Surgical (9GS, 7GS, 6GS)	6.09%	12
Med-Surgical (6GN, 7GN, HP-10, 9HN, 8GN, HP-10, Med-Surgical Float Pool)	14.21%	28
MHB Step-down Float	0.51%	1
MHB ICU Float	1.52%	3
MICU	2.54%	5
Neuro stepdown	2.03%	4
Neuro ICU	3.55%	7
Adult Oncology/ Infusion Suite/ BMT Unit	5.58%	11
PACU	13.71%	27
Radiology	0.51%	1
SICU	5.58%	11
Surg Telemetry (605457 MB-7HN)	3.55%	7
Psychiatry (9GN)	2.54%	5
<b>TOTAL</b>		<b>197</b>

Q9 Rank the following based on your perceived need for education 1 is the highest and 4 is the least need:

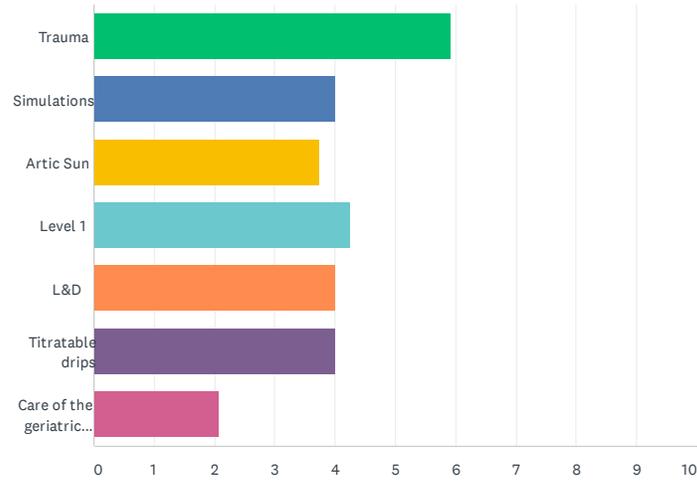
Answered: 0 Skipped: 197

 No matching responses.

	1	2	3	4	TOTAL	SCORE
Care of the geriatric patient	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Management of CIWA patient	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Accessing/de-accessing port-a-caths	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Team dynamics during a cardiac arrest	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00

Q10 Rank the following based on your perceived need for education 1 is the highest and 7 is the least need:

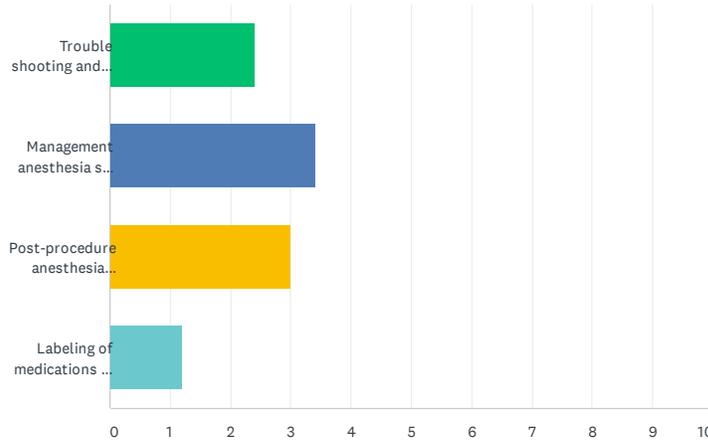
Answered: 12 Skipped: 185



	1	2	3	4	5	6	7	TOTAL	SCORE
Trauma	50.00% 6	16.67% 2	16.67% 2	8.33% 1	8.33% 1	0.00% 0	0.00% 0	12	5.92
Simulations	8.33% 1	16.67% 2	25.00% 3	8.33% 1	8.33% 1	25.00% 3	8.33% 1	12	4.00
Artic Sun	8.33% 1	8.33% 1	25.00% 3	8.33% 1	16.67% 2	25.00% 3	8.33% 1	12	3.75
Level 1	0.00% 0	33.33% 4	16.67% 2	16.67% 2	16.67% 2	8.33% 1	8.33% 1	12	4.25
L&D	16.67% 2	16.67% 2	0.00% 0	16.67% 2	25.00% 3	16.67% 2	8.33% 1	12	4.00
Titratable drips	16.67% 2	0.00% 0	8.33% 1	41.67% 5	16.67% 2	8.33% 1	8.33% 1	12	4.00
Care of the geriatric patient	0.00% 0	8.33% 1	8.33% 1	0.00% 0	8.33% 1	16.67% 2	58.33% 7	12	2.08

Q11 Rank the following based on your perceived need for education 1 is the highest and 4 is the least need:

Answered: 5 Skipped: 192

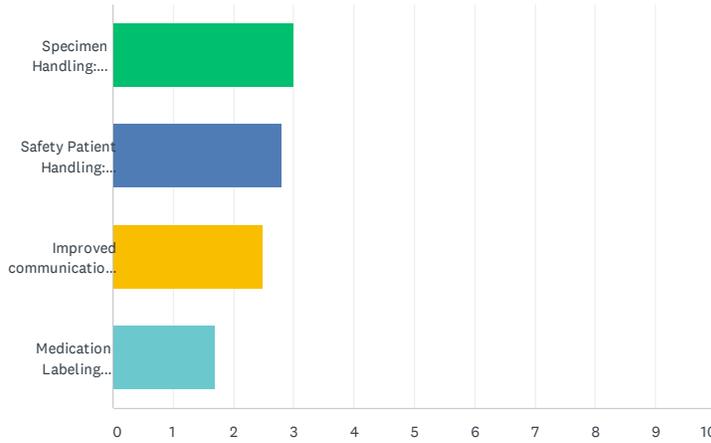


	1	2	3	4	TOTAL	SCORE
Trouble shooting and Managing Patient Controlled Analgesic (PCA) pumps	20.00% 1	20.00% 1	40.00% 2	20.00% 1	5	2.40
Management anesthesia side effects	60.00% 3	20.00% 1	20.00% 1	0.00% 0	5	3.40
Post-procedure anesthesia management	20.00% 1	60.00% 3	20.00% 1	0.00% 0	5	3.00
Labeling of medications on and off the sterile field	0.00% 0	0.00% 0	20.00% 1	80.00% 4	5	1.20

Question 12,  
Specific to  
OR nurses

Q12 Rank the following based on your perceived need for education 1 is the highest and 4 is the least need:

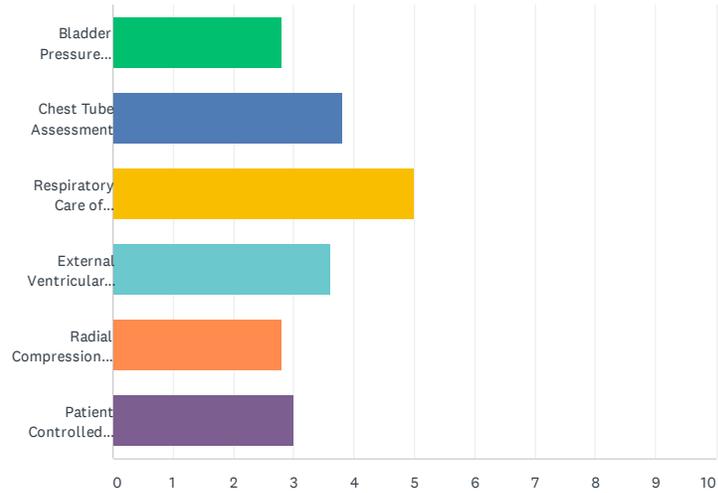
Answered: 10 Skipped: 187



	1	2	3	4	TOTAL	SCORE
Specimen Handling: Reducing Specimen Errors	30.00% 3	50.00% 5	10.00% 1	10.00% 1	10	3.00
Safety Patient Handling: Transfer Devices	40.00% 4	20.00% 2	20.00% 2	20.00% 2	10	2.80
Improved communication among team members	20.00% 2	30.00% 3	30.00% 3	20.00% 2	10	2.50
Medication Labeling (on/off sterile field)	10.00% 1	0.00% 0	40.00% 4	50.00% 5	10	1.70

Q13 Rank the following based on your perceived need for education 1 is the highest and 6 is the least need:

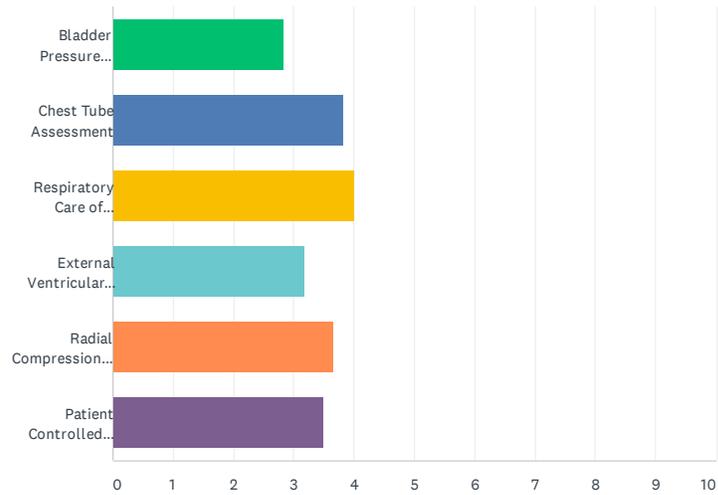
Answered: 5 Skipped: 192



	1	2	3	4	5	6	TOTAL	SCORE
Bladder Pressure Monitoring	20.00% 1	0.00% 0	0.00% 0	20.00% 1	40.00% 2	20.00% 1	5	2.80
Chest Tube Assessment	0.00% 0	40.00% 2	40.00% 2	0.00% 0	0.00% 0	20.00% 1	5	3.80
Respiratory Care of Patients on Ventilators	40.00% 2	40.00% 2	0.00% 0	20.00% 1	0.00% 0	0.00% 0	5	5.00
External Ventricular Drains	0.00% 0	20.00% 1	40.00% 2	20.00% 1	20.00% 1	0.00% 0	5	3.60
Radial Compression Devices	0.00% 0	0.00% 0	20.00% 1	40.00% 2	40.00% 2	0.00% 0	5	2.80
Patient Controlled Regional Anesthesia (PCRA) set-up and documentation	40.00% 2	0.00% 0	0.00% 0	0.00% 0	0.00% 0	60.00% 3	5	3.00

Q14 Rank the following based on your perceived need for education 1 is the highest and 6 is the least need:

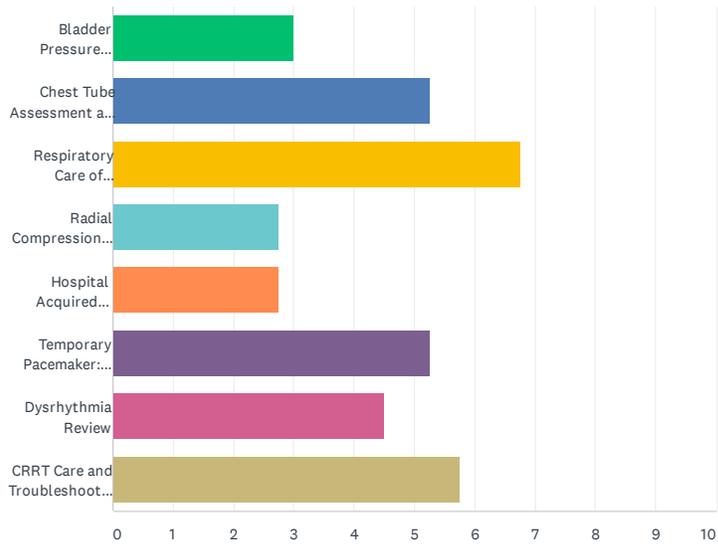
Answered: 6 Skipped: 191



	1	2	3	4	5	6	TOTAL	SCORE
Bladder Pressure Monitoring	16.67% 1	0.00% 0	16.67% 1	0.00% 0	50.00% 3	16.67% 1	6	2.83
Chest Tube Assessment	0.00% 0	16.67% 1	50.00% 3	33.33% 2	0.00% 0	0.00% 0	6	3.83
Respiratory Care of Patients on Ventilators	16.67% 1	33.33% 2	0.00% 0	33.33% 2	16.67% 1	0.00% 0	6	4.00
External Ventricular Drains	0.00% 0	16.67% 1	33.33% 2	16.67% 1	16.67% 1	16.67% 1	6	3.17
Radial Compression Devices	33.33% 2	16.67% 1	0.00% 0	16.67% 1	0.00% 0	33.33% 2	6	3.67
Patient Controlled Regional Anesthesia (PCRA) set-up and documentation	33.33% 2	16.67% 1	0.00% 0	0.00% 0	16.67% 1	33.33% 2	6	3.50

Q15 Rank the following based on your perceived need for education 1 is the highest and 4 is the least need:

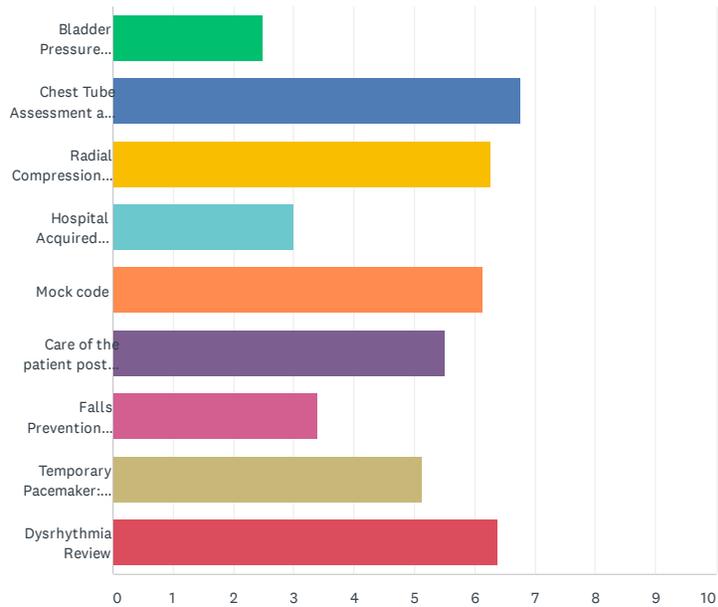
Answered: 4 Skipped: 193



	1	2	3	4	5	6	7	8	TOTAL	SCORE
Bladder Pressure Monitoring	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	100.00% 4	0.00% 0	0.00% 0	4	3.00
Chest Tube Assessment and Care	0.00% 0	25.00% 1	25.00% 1	0.00% 0	50.00% 2	0.00% 0	0.00% 0	0.00% 0	4	5.25
Respiratory Care of Patients on Ventilators	50.00% 2	0.00% 0	25.00% 1	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	4	6.75
Radial Compression Devices	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	50.00% 2	25.00% 1	4	2.75
Hospital Acquired Pressure Injury (HAPI)	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	50.00% 2	4	2.75
Temporary Pacemaker: Transvenous	0.00% 0	25.00% 1	0.00% 0	50.00% 2	25.00% 1	0.00% 0	0.00% 0	0.00% 0	4	5.25
Dysrhythmia Review	25.00% 1	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	25.00% 1	4	4.50
CRRT Care and Troubleshooting Strategies	25.00% 1	0.00% 0	25.00% 1	25.00% 1	25.00% 1	0.00% 0	0.00% 0	0.00% 0	4	5.75

Q16 Rank the following based on your perceived need for education 1 is the highest and 8 is the least need:

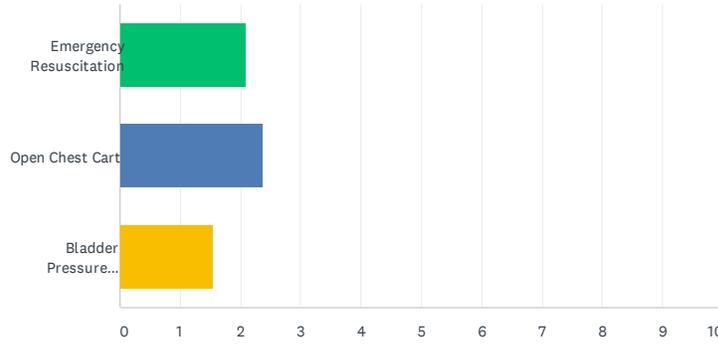
Answered: 8 Skipped: 189



	1	2	3	4	5	6	7	8	9	TOTAL	SCORE
Bladder Pressure Monitoring	0.00% 0	0.00% 0	0.00% 0	0.00% 0	12.50% 1	12.50% 1	25.00% 2	12.50% 1	37.50% 3	8	2.50
Chest Tube Assessment and Care	25.00% 2	0.00% 0	37.50% 3	12.50% 1	12.50% 1	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	6.75
Radial Compression Devices	0.00% 0	12.50% 1	25.00% 2	37.50% 3	25.00% 2	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	6.25
Hospital Acquired Pressure Injury (HAPI)	0.00% 0	0.00% 0	12.50% 1	0.00% 0	12.50% 1	0.00% 0	37.50% 3	0.00% 0	37.50% 3	8	3.00
Mock code	25.00% 2	12.50% 1	12.50% 1	12.50% 1	0.00% 0	25.00% 2	0.00% 0	12.50% 1	0.00% 0	8	6.13
Care of the patient post TAVR	12.50% 1	37.50% 3	0.00% 0	0.00% 0	0.00% 0	25.00% 2	0.00% 0	12.50% 1	12.50% 1	8	5.50
Falls Prevention Practices During Covid-19	0.00% 0	12.50% 1	0.00% 0	0.00% 0	12.50% 1	0.00% 0	37.50% 3	25.00% 2	12.50% 1	8	3.38
Temporary Pacemaker: Transvenous	12.50% 1	0.00% 0	0.00% 0	25.00% 2	25.00% 2	25.00% 2	0.00% 0	12.50% 1	0.00% 0	8	5.13
Dysrhythmia Review	25.00% 2	25.00% 2	12.50% 1	12.50% 1	0.00% 0	0.00% 0	0.00% 0	25.00% 2	0.00% 0	8	6.38

Q17 Rank the following based on your perceived need for education 1 is the highest and 3 is the least need:

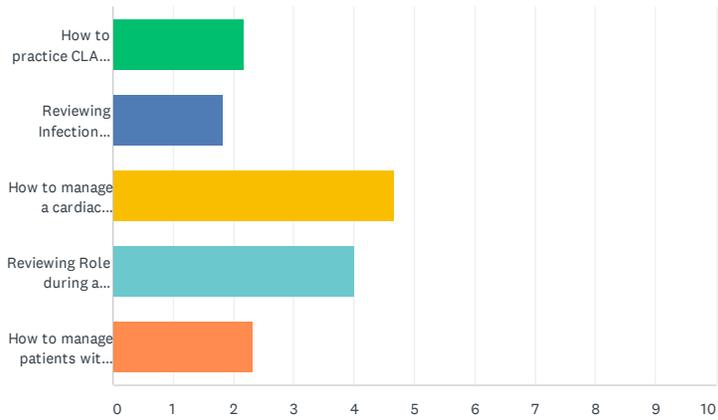
Answered: 11 Skipped: 186



	1	2	3	TOTAL	SCORE
Emergency Resuscitation	36.36% 4	36.36% 4	27.27% 3	11	2.09
Open Chest Cart	45.45% 5	45.45% 5	9.09% 1	11	2.36
Bladder Pressure Monitoring	18.18% 2	18.18% 2	63.64% 7	11	1.55

Q18 Rank the following based on your perceived need for education 1 is the highest and 5 is the least need:

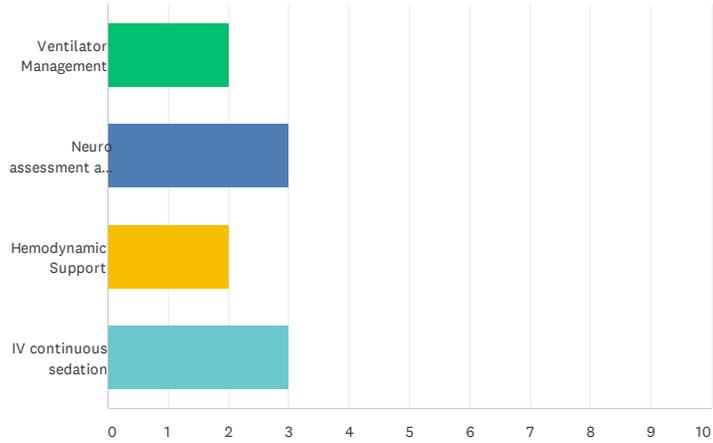
Answered: 6 Skipped: 191



	1	2	3	4	5	TOTAL	SCORE
How to practice CLABSI prevention	16.67% 1	0.00% 0	0.00% 0	50.00% 3	33.33% 2	6	2.17
Reviewing Infection Control practice and principles	0.00% 0	0.00% 0	16.67% 1	50.00% 3	33.33% 2	6	1.83
How to manage a cardiac arrest	83.33% 5	0.00% 0	16.67% 1	0.00% 0	0.00% 0	6	4.67
Reviewing Role during a medical emergency	0.00% 0	100.00% 6	0.00% 0	0.00% 0	0.00% 0	6	4.00
How to manage patients with Chest tube	0.00% 0	0.00% 0	66.67% 4	0.00% 0	33.33% 2	6	2.33

Q19 Rank the following based on your perceived need for education 1 is the highest and 4 is the least need:

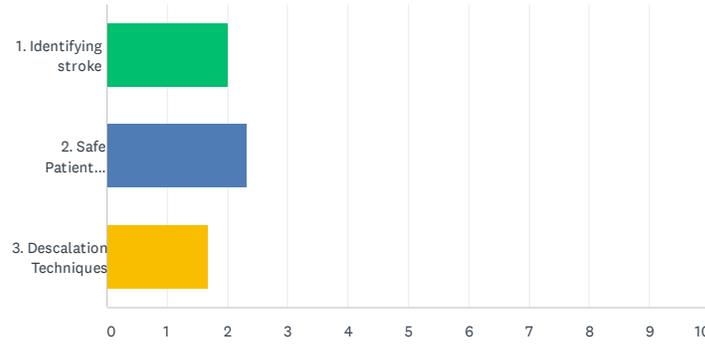
Answered: 2 Skipped: 195



	1	2	3	4	TOTAL	SCORE
Ventilator Management	0.00% 0	50.00% 1	0.00% 0	50.00% 1	2	2.00
Neuro assessment and care of the patient during tPA infusion	50.00% 1	0.00% 0	50.00% 1	0.00% 0	2	3.00
Hemodynamic Support	0.00% 0	50.00% 1	0.00% 0	50.00% 1	2	2.00
IV continuous sedation	50.00% 1	0.00% 0	50.00% 1	0.00% 0	2	3.00

Q20 Rank the following based on your perceived need for education 1 is the highest and 3 is the least need:

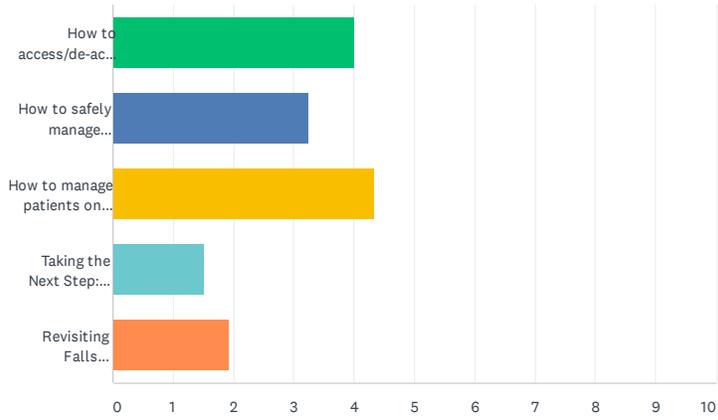
Answered: 3 Skipped: 194



	1	2	3	TOTAL	SCORE
1. Identifying stroke	33.33% 1	33.33% 1	33.33% 1	3	2.00
2. Safe Patient Handling: Transfer Devices	33.33% 1	66.67% 2	0.00% 0	3	2.33
3. Deescalation Techniques	33.33% 1	0.00% 0	66.67% 2	3	1.67

Q21 Rank the following based on your perceived need for education 1 is the highest and 5 is the least need:

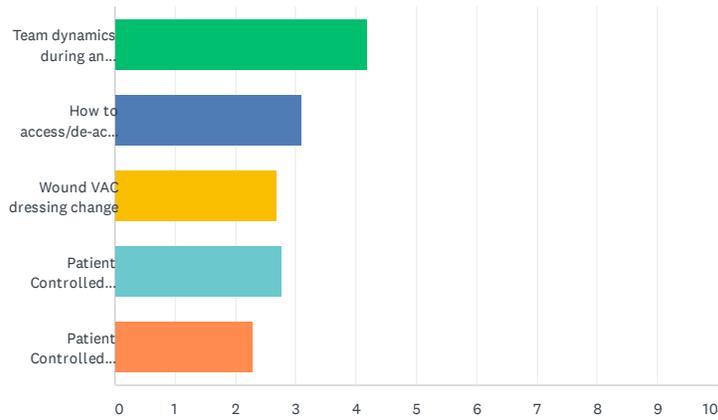
Answered: 12 Skipped: 185



	1	2	3	4	5	TOTAL	SCORE
How to access/de-access porta-cath	50.00% 6	16.67% 2	16.67% 2	16.67% 2	0.00% 0	12	4.00
How to safely manage patients on opioids	8.33% 1	25.00% 3	50.00% 6	16.67% 2	0.00% 0	12	3.25
How to manage patients on respiratory distress	41.67% 5	50.00% 6	8.33% 1	0.00% 0	0.00% 0	12	4.33
Taking the Next Step: Early Mobilization Review	0.00% 0	0.00% 0	16.67% 2	16.67% 2	66.67% 8	12	1.50
Revisiting Falls Prevention Practices During Covid 19	0.00% 0	8.33% 1	8.33% 1	50.00% 6	33.33% 4	12	1.92

Q22 Rank the following based on your perceived need for education 1 is the highest and 5 is the least need:

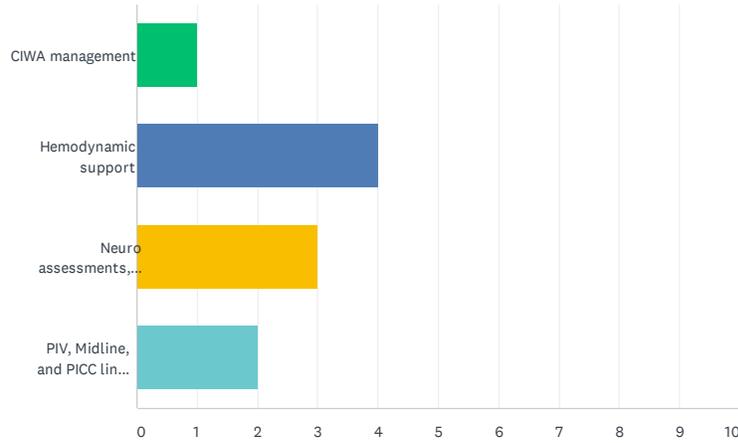
Answered: 21 Skipped: 176



	1	2	3	4	5	TOTAL	SCORE
Team dynamics during an Arrest	61.90% 13	19.05% 4	4.76% 1	4.76% 1	9.52% 2	21	4.19
How to access/de-access porta-Cath	9.52% 2	33.33% 7	28.57% 6	14.29% 3	14.29% 3	21	3.10
Wound VAC dressing change	14.29% 3	19.05% 4	14.29% 3	23.81% 5	28.57% 6	21	2.67
Patient Controlled Regional Anesthesia (PCRA) set-up and documentation	14.29% 3	14.29% 3	19.05% 4	38.10% 8	14.29% 3	21	2.76
Patient Controlled Analgesia (PCA)	0.00% 0	14.29% 3	33.33% 7	19.05% 4	33.33% 7	21	2.29

Q23 Rank the following based on your perceived need for education 1 is the highest and 4 is the least need:

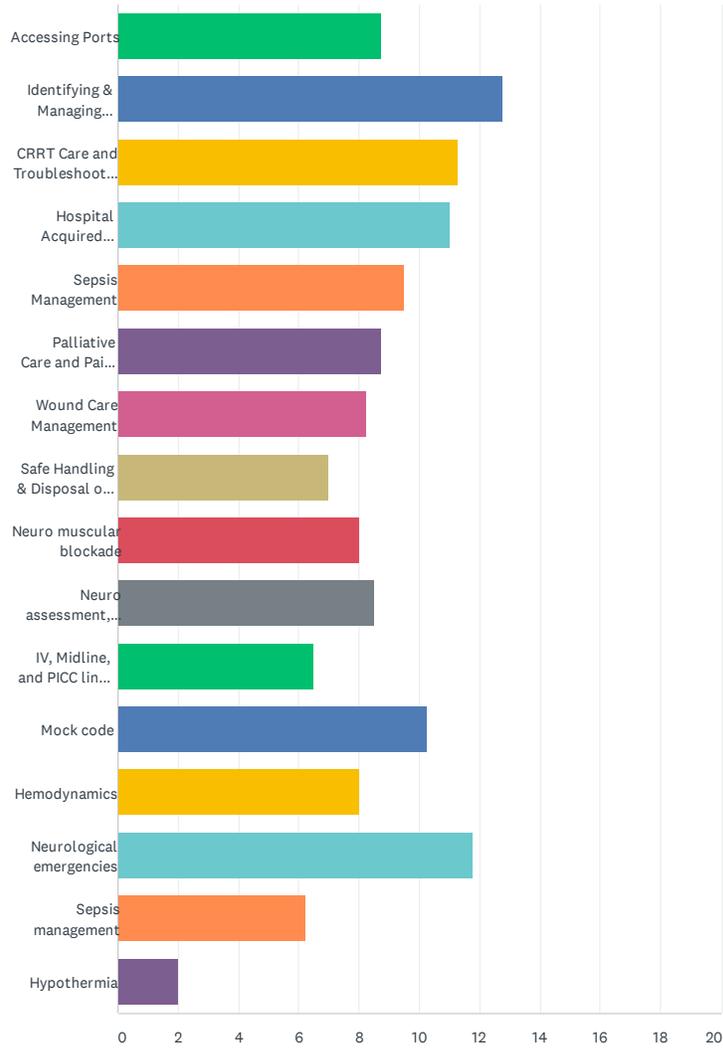
Answered: 1 Skipped: 196



	1	2	3	4	TOTAL	SCORE
CIWA management	0.00% 0	0.00% 0	0.00% 0	100.00% 1	1	1.00
Hemodynamic support	100.00% 1	0.00% 0	0.00% 0	0.00% 0	1	4.00
Neuro assessments, care of the patient post stroke and TPA infusion	0.00% 0	100.00% 1	0.00% 0	0.00% 0	1	3.00
PIV, Midline, and PICC line maintenance and assessments	0.00% 0	0.00% 0	100.00% 1	0.00% 0	1	2.00

Q24 Rank the following based on your perceived need for education 1 is the highest and 16 is the least need:

Answered: 4 Skipped: 193

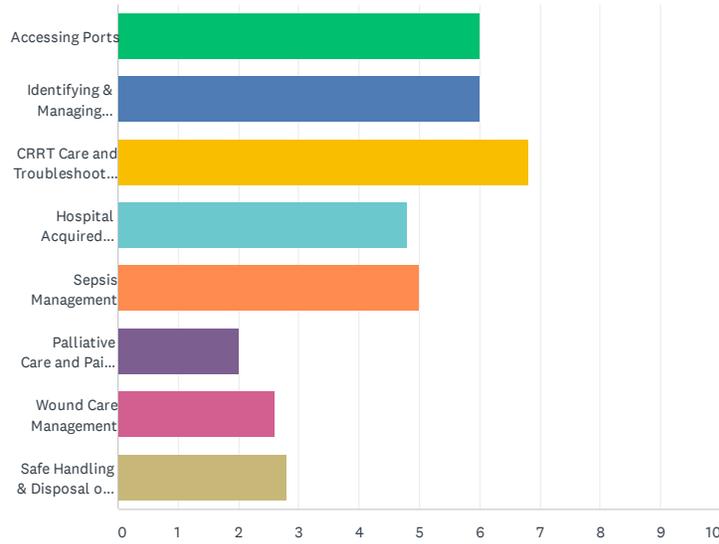


## 2021 Clinical Nurse Learning Needs Assessment\_Milstein

	1	2	3	4	5	6	7	8	9	10	11	12	13
Accessing Ports	25.00% 1	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0
Identifying & Managing Strokes	25.00% 1	25.00% 1	25.00% 1	0.00% 0	25.00% 1	0.00% 0	0						
CRRT Care and Troubleshooting Strategies	0.00% 0	0.00% 0	25.00% 1	25.00% 1	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0
Hospital Acquired Pressure Injury (HAPI)	0.00% 0	0.00% 0	0.00% 0	33.33% 1	0.00% 0	0.00% 0	66.67% 2	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0
Sepsis Management	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	50.00% 2	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0
Palliative Care and Pain Management	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	25
Wound Care Management	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	25.00% 1	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0
Safe Handling & Disposal of Antineoplastic/Chemotherapy	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0
Neuro muscular blockade	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	25.00% 1	25.00% 1	25.00% 1	0.00% 0	0
Neuro assessment, care of the patient post stroke	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	25.00% 1	0.00% 0	0.00% 0	25.00% 1	0.00% 0	25.00% 1	0
IV, Midline, and PICC line maintenance and assessments	0.00% 0	25.00% 1	0.00% 0	0.00% 0	50.00% 2	25.00% 1	0						
Mock code	50.00% 2	0.00% 0	25.00% 1	25									
Hemodynamics	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25
Neurological emergencies	0.00% 0	50.00% 2	25.00% 1	0.00% 0	0								
Sepsis management	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0
Hypothermia	0.00% 0	25											

Q25 Rank the following based on your perceived need for education 1 is the highest and 8 is the least need:

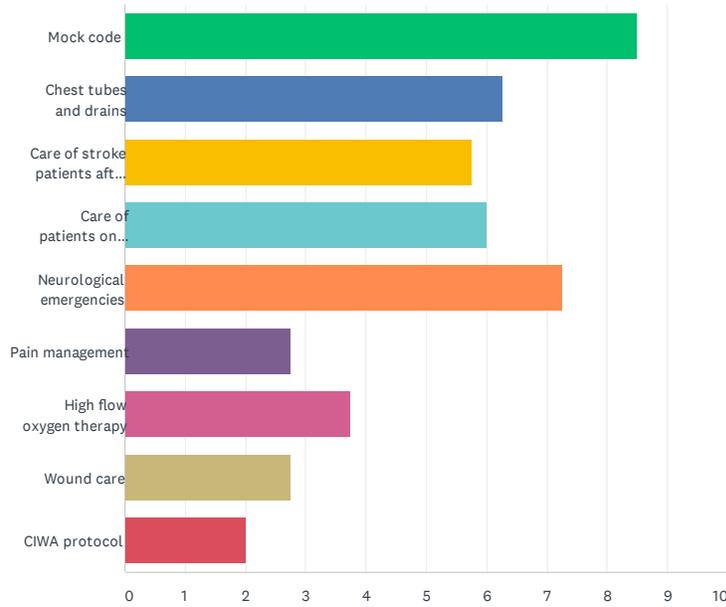
Answered: 5 Skipped: 192



	1	2	3	4	5	6	7	8	TOTAL	SCORE
Accessing Ports	40.00% 2	20.00% 1	0.00% 0	20.00% 1	0.00% 0	0.00% 0	20.00% 1	0.00% 0	5	6.00
Identifying & Managing Strokes	20.00% 1	20.00% 1	20.00% 1	20.00% 1	20.00% 1	0.00% 0	0.00% 0	0.00% 0	5	6.00
CRRT Care and Troubleshooting Strategies	40.00% 2	20.00% 1	20.00% 1	20.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	5	6.80
Hospital Acquired Pressure Injury (HAPI)	0.00% 0	20.00% 1	20.00% 1	20.00% 1	20.00% 1	0.00% 0	20.00% 1	0.00% 0	5	4.80
Sepsis Management	0.00% 0	0.00% 0	40.00% 2	20.00% 1	40.00% 2	0.00% 0	0.00% 0	0.00% 0	5	5.00
Palliative Care and Pain Management	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	40.00% 2	20.00% 1	40.00% 2	5	2.00
Wound Care Management	0.00% 0	0.00% 0	0.00% 0	0.00% 0	20.00% 1	40.00% 2	20.00% 1	20.00% 1	5	2.60
Safe Handling & Disposal of Antineoplastic/Chemotherapy	0.00% 0	20.00% 1	0.00% 0	0.00% 0	0.00% 0	20.00% 1	20.00% 1	40.00% 2	5	2.80

Q26 Rank the following based on your perceived need for education 1 is the highest and 9 is the least need:

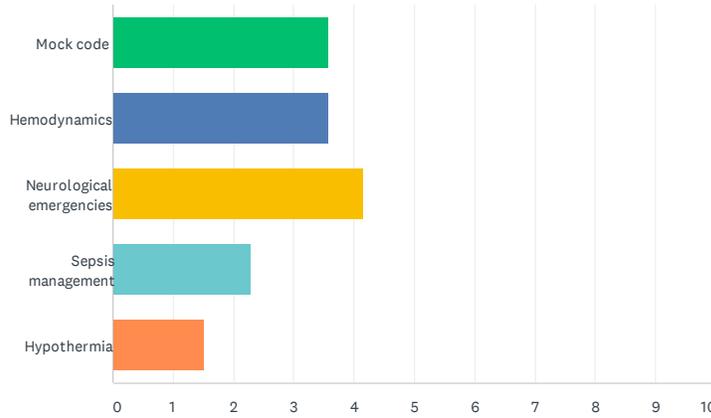
Answered: 4 Skipped: 193



	1	2	3	4	5	6	7	8	9	TOTAL	SCORE
Mock code	75.00% 3	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	4	8.50
Chest tubes and drains	0.00% 0	50.00% 2	0.00% 0	0.00% 0	25.00% 1	25.00% 1	0.00% 0	0.00% 0	0.00% 0	4	6.25
Care of stroke patients after IV TPA	0.00% 0	50.00% 2	0.00% 0	0.00% 0	0.00% 0	25.00% 1	25.00% 1	0.00% 0	0.00% 0	4	5.75
Care of patients on ventilator	0.00% 0	0.00% 0	25.00% 1	50.00% 2	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	4	6.00
Neurological emergencies	25.00% 1	0.00% 0	50.00% 2	25.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	4	7.25
Pain management	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	50.00% 2	0.00% 0	25.00% 1	4	2.75
High flow oxygen therapy	0.00% 0	0.00% 0	0.00% 0	0.00% 0	50.00% 2	0.00% 0	25.00% 1	25.00% 1	0.00% 0	4	3.75
Wound care	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	0.00% 0	50.00% 2	25.00% 1	4	2.75
CIWA protocol	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	25.00% 1	0.00% 0	25.00% 1	50.00% 2	4	2.00

Q27 Rank the following based on your perceived need for education 1 is the highest and 5 is the least need:

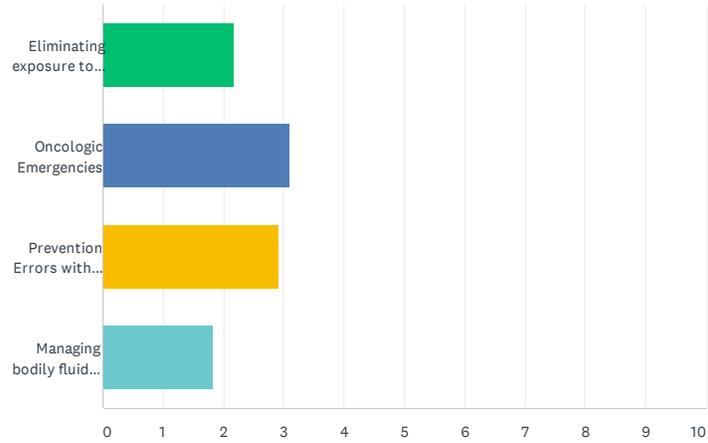
Answered: 7 Skipped: 190



	1	2	3	4	5	TOTAL	SCORE
Mock code	14.29% 1	57.14% 4	14.29% 1	0.00% 0	14.29% 1	7	3.57
Hemodynamics	42.86% 3	14.29% 1	14.29% 1	14.29% 1	14.29% 1	7	3.57
Neurological emergencies	42.86% 3	28.57% 2	28.57% 2	0.00% 0	0.00% 0	7	4.14
Sepsis management	0.00% 0	0.00% 0	28.57% 2	71.43% 5	0.00% 0	7	2.29
Hypothermia	0.00% 0	0.00% 0	16.67% 1	16.67% 1	66.67% 4	6	1.50

Q28 Rank the following based on your perceived need for education 1 is the highest and 5 is the least need:

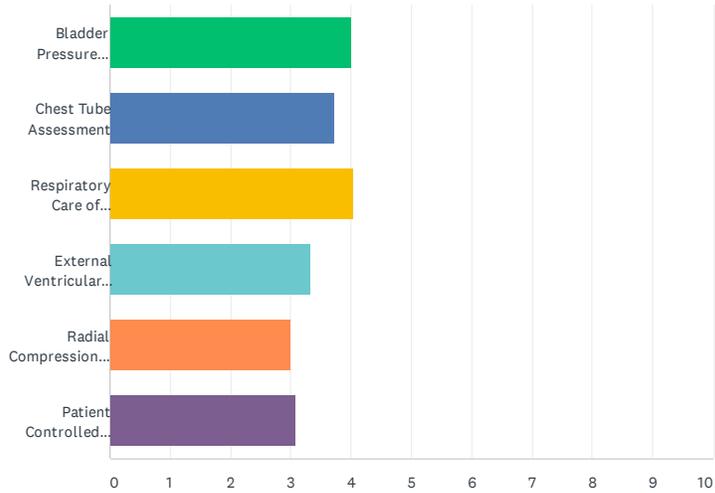
Answered: 11 Skipped: 186



	1	2	3	4	TOTAL	SCORE
Eliminating exposure to hazardous drugs	9.09% 1	27.27% 3	36.36% 4	27.27% 3	11	2.18
Oncologic Emergencies	63.64% 7	9.09% 1	0.00% 0	27.27% 3	11	3.09
Prevention Errors with Chemo Administration	18.18% 2	54.55% 6	27.27% 3	0.00% 0	11	2.91
Managing bodily fluids of patients receiving chemotherapy	9.09% 1	9.09% 1	36.36% 4	45.45% 5	11	1.82

Q29 Rank the following based on your perceived need for education 1 is the highest and 6 is the least need:

Answered: 27 Skipped: 170



	1	2	3	4	5	6	TOTAL	SCORE
Bladder Pressure Monitoring	26.92% 7	19.23% 5	15.38% 4	15.38% 4	11.54% 3	11.54% 3	26	4.00
Chest Tube Assessment	8.00% 2	28.00% 7	24.00% 6	16.00% 4	16.00% 4	8.00% 2	25	3.72
Respiratory Care of Patients on Ventilators	34.62% 9	15.38% 4	11.54% 3	11.54% 3	11.54% 3	15.38% 4	26	4.04
External Ventricular Drains	12.00% 3	16.00% 4	20.00% 5	12.00% 3	24.00% 6	16.00% 4	25	3.32
Radial Compression Devices	8.00% 2	0.00% 0	16.00% 4	40.00% 10	32.00% 8	4.00% 1	25	3.00
Patient Controlled Regional Anesthesia (PCRA) set-up and documentation	16.00% 4	20.00% 5	12.00% 3	4.00% 1	4.00% 1	44.00% 11	25	3.08

Q30 Rank the following based on your perceived need for education 1 is the highest and 3 is the least need:

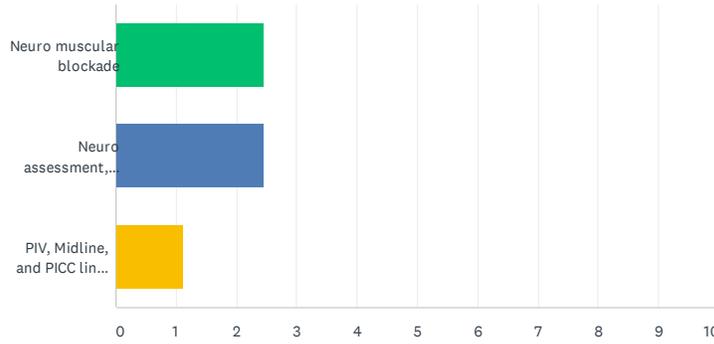
Answered: 0 Skipped: 197

▲ No matching responses.

	1	2	3	TOTAL	SCORE
Neuro muscular blockade	0.00% 0	0.00% 0	0.00% 0	0	0.00
Neuro assessment, care of the patient post stroke	0.00% 0	0.00% 0	0.00% 0	0	0.00
PIV, Midline, and PICC line maintenance and assessments	0.00% 0	0.00% 0	0.00% 0	0	0.00

Q31 Rank the following based on your perceived need for education 1 is the highest and 3 is the least need:

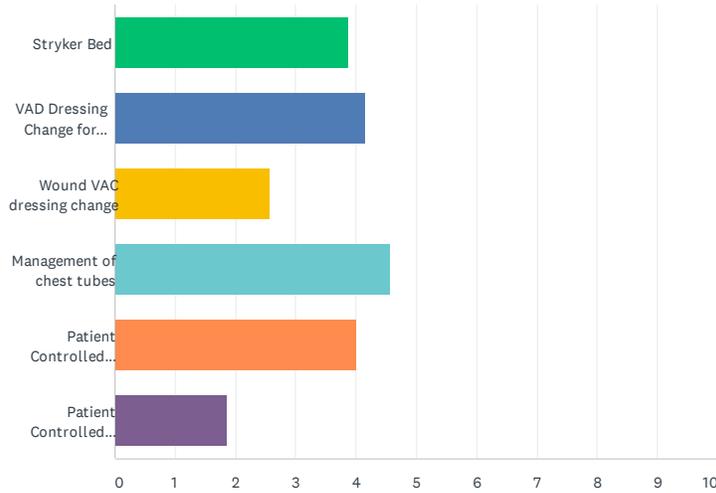
Answered: 9 Skipped: 188



	1	2	3	TOTAL	SCORE
Neuro muscular blockade	55.56% 5	33.33% 3	11.11% 1	9	2.44
Neuro assessment, care of the patient post stroke	44.44% 4	55.56% 5	0.00% 0	9	2.44
PIV, Midline, and PICC line maintenance and assessments	0.00% 0	11.11% 1	88.89% 8	9	1.11

Q32 Rank the following based on your perceived need for education 1 is the highest and 6 is the least need:

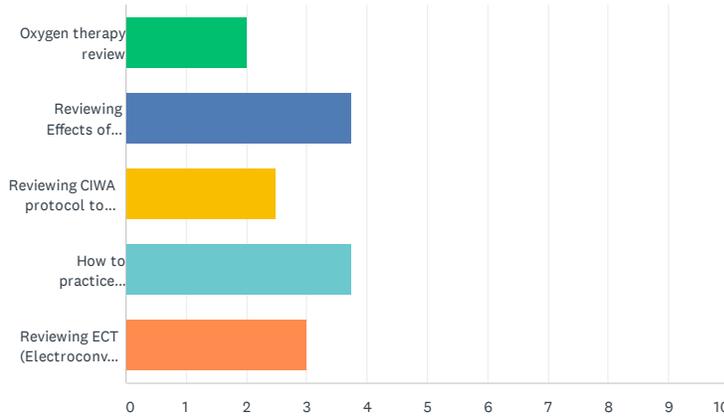
Answered: 7 Skipped: 190



	1	2	3	4	5	6	TOTAL	SCORE
Stryker Bed	0.00% 0	42.86% 3	28.57% 2	14.29% 1	0.00% 0	14.29% 1	7	3.86
VAD Dressing Change for Patients who have CHG/hydrofoil/Tegaderm Allergy	42.86% 3	0.00% 0	28.57% 2	0.00% 0	14.29% 1	14.29% 1	7	4.14
Wound VAC dressing change	0.00% 0	14.29% 1	0.00% 0	42.86% 3	14.29% 1	28.57% 2	7	2.57
Management of chest tubes	42.86% 3	0.00% 0	42.86% 3	0.00% 0	14.29% 1	0.00% 0	7	4.57
Patient Controlled Regional Anesthesia (PCRA) set-up and documentation	14.29% 1	42.86% 3	0.00% 0	14.29% 1	28.57% 2	0.00% 0	7	4.00
Patient Controlled Analgesia (PCA)	0.00% 0	0.00% 0	0.00% 0	28.57% 2	28.57% 2	42.86% 3	7	1.86

Q33 Rank the following based on your perceived need for education 1 is the highest and 5 is the least need:

Answered: 4 Skipped: 193



	1	2	3	4	5	TOTAL	SCORE
Oxygen therapy review	0.00% 0	25.00% 1	0.00% 0	25.00% 1	50.00% 2	4	2.00
Reviewing Effects of Psychotropic Medications on Patient Fall	25.00% 1	50.00% 2	0.00% 0	25.00% 1	0.00% 0	4	3.75
Reviewing CIWA protocol to patients with mental illness	0.00% 0	25.00% 1	25.00% 1	25.00% 1	25.00% 1	4	2.50
How to practice Suicide prevention	50.00% 2	0.00% 0	25.00% 1	25.00% 1	0.00% 0	4	3.75
Reviewing ECT (Electroconvulsive therapy) evidence based practice updates	25.00% 1	0.00% 0	50.00% 2	0.00% 0	25.00% 1	4	3.00

**OR RETAINED SURGICAL ITEMS (RSI) PREVENTION EDUCATION IMPLEMENTATION PLAN**

Title of Activity: Prevention of Retained Surgical Items (RSI)

Identified Gap(s): Perioperative staff

1. Have limited knowledge or is not remembering the process of preventing RSIs
2. Do not know how to effectively communicate during the surgical count process to prevent RSIs
3. Is not applying evidence-based surgical count strategies to prevent RSIs
4. Identified “Improved *communication among team members*” as a learning need during the 2021 Learning Needs Assessment

Format: Prevention of Retained Surgical Items (RSI) E-Learning Module

Description of Desired/Achievable State: Perioperative staff will be able to demonstrate appropriate steps in preventing RSI as per NYP Policy and Procedure Manual I260 Count Policy and Prevention of Retained Surgical Items

Gap to be Addressed by this Activity:  Knowledge  Skills  Practice  Other

Learning outcome: At the end of the educational session, learners will be able to apply evidence-based communication skills and surgical count strategies to prevent RSIs and mitigate safety risk to the surgical patient population.

Purpose: To enhance the nurses’ knowledge and skills on prevention of RSI.

OBJECTIVES	CONTENT (TOPICS)	TEACHING METHODS	IMPLEMENTATION DATE
<p><b>List learner’s objectives in behavioral terms. (Each objective needs at least one measurable action verb).</b></p>	<p><b>Provide an outline of the content for each objective. It must be more than a restatement of the objective.</b></p>	<p><b>Describe the teaching methods, strategies, materials &amp; resources for each objective</b></p>	
<ul style="list-style-type: none"> <li>• Define a retained surgical item (RSI)</li> <li>• State the regulatory requirements from Centers for Medicare and Medicaid Services and The Joint Commission on</li> </ul>	<ul style="list-style-type: none"> <li>• RSI by Definition</li> <li>• Regulatory Requirements</li> <li>• RSI Risk Factors and Complications</li> <li>• Significance</li> <li>• Best Practices Used to Prevent RSIs</li> <li>• When to Perform a Count</li> <li>• SurgiCount-Where Applicable</li> <li>• Surgical Count Process</li> </ul>	<p><b>Teaching Methods/Strategies:</b></p> <ul style="list-style-type: none"> <li>• E-Learning module, post-test (100% pass grade)</li> </ul> <p><b>References:</b> Association of Perioperative Registered Nurses (AORN). (2021). Guidelines for perioperative practice. CO: AORN Inc.</p>	<p>October 2021 through December 2021</p>

<p>the prevention of RSIs</p> <ul style="list-style-type: none"> <li>List the risk factors and complications associated with RSIs</li> <li>Describe the significance of preventing RSIs</li> <li>Describe the count process</li> <li>State the process for a count discrepancy</li> <li>Describe documentation guidelines for the prevention and reporting of RSIs</li> </ul>	<ul style="list-style-type: none"> <li>Sponge Counter Bags</li> <li>Counting Needles</li> <li>Counting Instruments</li> <li>Zone of Silence</li> <li>Surgical Pause</li> <li>Hand-Off Reporting of Patient Information</li> <li>Handling Count Discrepancy</li> <li>Wound Packing</li> <li>X-rays Required</li> <li>X-rays Not Required</li> <li>Handling of Broken Medical Devices or Instruments</li> <li>Handling of Missing Non-Radiopaque Items</li> </ul>	<p>Centers for Medicare &amp; Medicaid Services. (2016). Hospital value-based purchasing. Retrieved from: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs.html">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs.html</a></p> <p>Count Policy and Prevention of Surgical Items. Policy and Procedure Manual I260</p> <p>Hospital-Acquired Conditions <a href="https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Hospital-Acquired_Conditions">https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Hospital-Acquired_Conditions</a></p> <p>Joint Commission. (2017). Sentinel event data. Retrieved from: <a href="https://www.jointcommission.org/assets/1/18/Summary_4Q_2017.pdf">https://www.jointcommission.org/assets/1/18/Summary_4Q_2017.pdf</a></p> <p>Sentinel Event Alert 51: Preventing unintended retained foreign objects <a href="https://www.jointcommission.org/resources/patient-safety-topics/sentinel-event/sentinel-event-alert-newsletters/sentinel-event-alert-issue-51-preventing-unintended-retained-foreign-objects/">https://www.jointcommission.org/resources/patient-safety-topics/sentinel-event/sentinel-event-alert-newsletters/sentinel-event-alert-issue-51-preventing-unintended-retained-foreign-objects/</a></p>	
<p>Title of Activity: Review of Review of Root Cause Analysis</p>			
<p>Identified Gap(s): Perioperative staff</p> <ol style="list-style-type: none"> <li>Have limited knowledge or is not remembering the process of preventing RSIs</li> <li>Do not know how to effectively communicate during the surgical count process to prevent RSIs</li> </ol>			

<p>3. Is not applying evidence-based surgical count strategies to prevent RSIs</p> <p>4. Identified <i>“Improved communication among team members”</i> as a learning need during the 2021 Learning Needs Assessment</p>			
<p>Format: Discussion Series</p>			
<p>Description of Desired/Achievable State: Perioperative staff will be able to demonstrate appropriate steps in preventing RSI as per NYP Policy and Procedure Manual I260 Count Policy and Prevention of Retained Surgical Items</p>			
<p>Gap to be Addressed by this Activity: <input checked="" type="checkbox"/> Knowledge <input checked="" type="checkbox"/> Skills <input checked="" type="checkbox"/> Practice <input type="checkbox"/> Other</p>			
<p>Learning outcome: At the end of the educational session, learners will be able to apply evidence-based communication skills and surgical count strategies to prevent RSIs and mitigate safety risk to the surgical patient population.</p>			
<p>Purpose: To enhance the nurses’ knowledge and skills on prevention of RSI.</p>			
OBJECTIVES	CONTENT (TOPICS)	TEACHING METHODS	IMPLEMENTATION DATE AND PRESENTERS
<p>List learner’s objectives in behavioral terms. (Each objective needs at least one measurable action verb).</p>	<p>Provide an outline of the content for each objective. It must be more than a restatement of the objective.</p>	<p>Describe the teaching methods, strategies, materials &amp; resources for each objective</p>	<p>List the Educator for each objective</p>
<ul style="list-style-type: none"> <li>Describe steps in visualizing laparotomy pads during the closing counts</li> </ul>	<p><b>Root Cause#1: No Visualization of Lap Pad</b></p> <ul style="list-style-type: none"> <li>Pocket bags were used to batch the lap pads. They noted that during the closing count, there was a missing lap pad. The nurse verbally communicated there was a missing lap pad, and the surgeon responded that an additional lap pad was located on the sterile field. The nurse repeated the closing count and included the lap pad that</li> </ul>	<p><b>Teaching Methods/Strategies:</b></p> <ul style="list-style-type: none"> <li>Interactive discussion, question and answer</li> </ul> <p><b>Reference:</b> COUNT POLICY AND PREVENTION OF RETAINED SURGICAL ITEMS (I260) <i>“The staff must visualize lap pads during the counts.”</i></p>	<ul style="list-style-type: none"> <li>November 2021</li> <li>Kellianne Earley MSN, RN, PCCN and Louise Kertesz, DNP, MSN, ANP-BC, CNS, CNOR</li> </ul>

	<p>was verbally accounted for by the surgeon. Using the verbally confirmed lap pad, the nurse documented that the closing count was correct.</p> <ul style="list-style-type: none"> <li>In the absence of adhering to the policy of visualizing laparotomy pads during the closing counts, a verbal confirmation of the location of a missing laparotomy pad was accepted, and the closing count was considered correct when there was actually a missed lap pad in the patient's abdomen.</li> </ul>		
<ul style="list-style-type: none"> <li>Describe nursing responsibilities during wound sweep.</li> </ul>	<p><b>Root Cause #2: Documentation of Wound Sweep</b></p> <ul style="list-style-type: none"> <li>Surgeon did not communicate a wound sweep at the time of closing and it was not documented. Charted in Intraoperative debrief under "Wound sweep preformed?" - "N/A"</li> </ul>	<p><b>Teaching Methods/Strategies:</b></p> <ul style="list-style-type: none"> <li>Interactive discussion, question and answer</li> </ul> <p><b>Reference:</b> COUNT POLICY AND PREVENTION OF RETAINED SURGICAL ITEMS (I260) <i>"The surgeon must perform a methodical wound exploration (e.g. top to bottom, quadrant to quadrant) for all surgical items before closing the wound using both visualization and touch when feasible. The surgeon will announce that the wound is free of surgical items and wound exploration results will be documented in patient record."</i></p>	<ul style="list-style-type: none"> <li>November 2021</li> <li>Kellianne Earley MSN, RN, PCCN and Louise Kertesz, DNP, MSN, ANP-BC, CNS, CNOR</li> </ul>

<ul style="list-style-type: none"> <li>Demonstrate proper standardized method of counting lap pads</li> </ul>	<p><b>Root Cause #3: Discrepancy in Method of Counting Sponges</b></p> <ul style="list-style-type: none"> <li>During discovery portion, it was found that there was a discrepancy in standardized method of counting lap pads. Sponge Counter Bags were used correctly; there was a discrepancy on how lap pads were being counted during counts.</li> </ul>	<p><b>Teaching Methods/Strategies:</b></p> <ul style="list-style-type: none"> <li>Interactive discussion, question and answer</li> <li>Demonstration/return demonstration</li> </ul> <p><b>Reference:</b> COUNT POLICY AND PREVENTION OF RETAINED SURGICAL ITEMS (I260) <i>“Packaged sponges/laps/soft goods must be counted to the number that the item is manufactured in (e.g., 5s, 10s). Only non-transparent back (Opaque Back) Sponge Counter Bags™ will be used to count and display surgical sponges and lap pads as they are removed from the sterile field. The radiopaque marker &amp;/or ring of the sponge/lap, must be placed facing forward so that it is readily visible in the pocketed bag system. The pocketed bag system should be filled from the bottom to the top as the open pockets at the top provide a more readily visible indicator of a missing sponge/lap. For the final count, unused sponges/laps must be placed in the pocketed bag system to confirm that sponges/laps are accounted for in their entirety.”</i></p>	<ul style="list-style-type: none"> <li>November 2021</li> <li>Kellianne Earley MSN, RN, PCCN and Louise Kertesz, DNP, MSN, ANP-BC, CNS, CNOR</li> </ul>
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