

Bedre og Systematisk Traumebehandling - Virker det?

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Bedre traumebehandling BEST eller ATLS

- ATLS – amerikansk, individrettet og dyrt
- BEST – Norsk, Lokalt, billig
Tverrfaglig og Team-orientert

G Brattebø, T Wisborg, J Brattebø, Å Brinchmann- Hansen
TDNLF 2001:121:505-6



Sykehus -BEST



KommuneBEST

BEST

- Teoretiske kunnskaper
- Praktiske ferdigheter

+

Non Technical Skills

Kommunikasjon

Ledelse

Teamwork

- "...experience gained in other high risk domains "
- "-training in communication, leadership and decision-making is the focus for safety and improvement efforts"

Preparing teams for low-frequency emergencies in Norwegian hospitals

T. WISBORG T. H. RØNNING V. B. BECK and G. BRATTEBØ

Acta Anaesthesiol Scand 2003;47:1248

- Table 1. Training the previous year

Last 6-12 months

No training

24/50 (30%)

26/50 (52%)

A considerable room for improvement!

Wisborg, Rønning, Beck & Brattebø

Acta Anaesthesiol Scand 2003;47:1248

Table 2

Obstacles to arrangement of training for multiprofessional trauma teams in Norwegian acute care hospitals

Lack of personnel 28%

Production pressure/economy 22%

Lack of co-operation from participating departments 18%

Lack of interest amongst leaders 12%

Vacancies and locums, difficult to organise 12%

Lack of local initiative and enthusiasm 12%

Lack of training facilities 6%

Training trauma teams in the Nordic countries: An overview and present status

T. WISBORG, M. CASTREN, A. LIPPERT, F. VALSSON
and C. J.WALLIN, ON BEHALF OF THE WORKING
SCANDINAVIAN GROUP (WISE)

- Acta Anaesthesiol Scand 2006;49:1004

Challenges in trauma care in the Nordic countries.

- Many small hospitals
- Few multitrauma patients
- Locums and change of staff
- No formal continuing education in trauma care
- Trauma teams composed of personnel not used to interact as a team
- High production pressure
- Long and expensive journeys for out-of-hospital training

Acta Anaesthesiol Scand 2006;49:1004

Organisering av Traumemottak stor forbedring på fire år

Har Traumeteam

__ Univ. sykehus	100%
Sentralsykehus	92%
Lokalsykehus	85%

Ingen tvil om at det har hjulpet !

Isaksen, Wisborg & Brattebø

TDNLF 2006;126:145

Dokumenterte effektive tiltak

- Å ha et definert tverrfaglig team
- Øyeblikkelig tilgjengelige ressurser
- Kriterier for aktivering
- Kriterier for prioritering /overføring
- Traumemanual
- Tilpasset registrerings skjema
- Utdanning av personell

Budskap

- De fleste sykehus har etablert gode rutiner
- Forskjellen mellom sykehusene er mindre
- Stadig behov for forbedring gjennom trening og erfaringsbasert læring

Effects of Nationwide Training of Multiprofessional Trauma Teams in Norwegian Hospitals

Torben Wisborg, MD, DEAA, Guttorm Brattebø, MD, Åse Brinchmann-Hansen, Cand. Polit, Per Einar Uggen, MD, Kari Schrøder Hansen, MD, PhD, and the Norwegian BEST Foundation—BEST: Better and Systematic Trauma Care

J Trauma 2008;64:1613-1618

Didactic and Skill Elements in the Training Course

- Treatment priorities and ABCDE
- Communication pitfalls
- Efficient communication
- Well functioning cooperation
- Leadership

How to achieve change in complex organisations

A one day course helps

- Knowledge of treatment procedures
- Confidence in own role
- Percieved quality of care

VAS increased from from ca 5-7


Most marked for those with little experience

Multiprofessional, Local, Teams ,
Simulation

Error reduction and Performance Improvement in the Emergency department through formal teamwork training

Emergency team coordination course

One pretest – Two post-tests

- Quality of team behavior
 - Attitudes towards Teamwork
 - Marked reduction of clinical errors
- 

Morey Cj et al

Health Services Research 2002;37:1553

Tverrfaglig akuttmedisinsk teamtrening I kommunehelsetjenesten

- Lokalt Tverrfaglig
- Skadested, Initiale tiltak, Stabilisering
- Mottak

Lærerikt, Bedring av egen trygghet

Lar seg gjøre lokalt m lite ressurser

Utsi, Brandstorp, Johansen, Wisborg

TDNLF 2008;128:1057-

Leadership is the essential non-technical skill in the trauma team

- Which of the non technical skills are most important?
- Leadership is an essential component

experienced surgeon
clear communication
radiate confidence
"listen to the team" !

Hjortdal, Ringen, Næss og Wisborg.
SJTREM 2009; 17:48-

- ”the team should guide the team leader
by focusing on the patient – and not
through direct criticism”

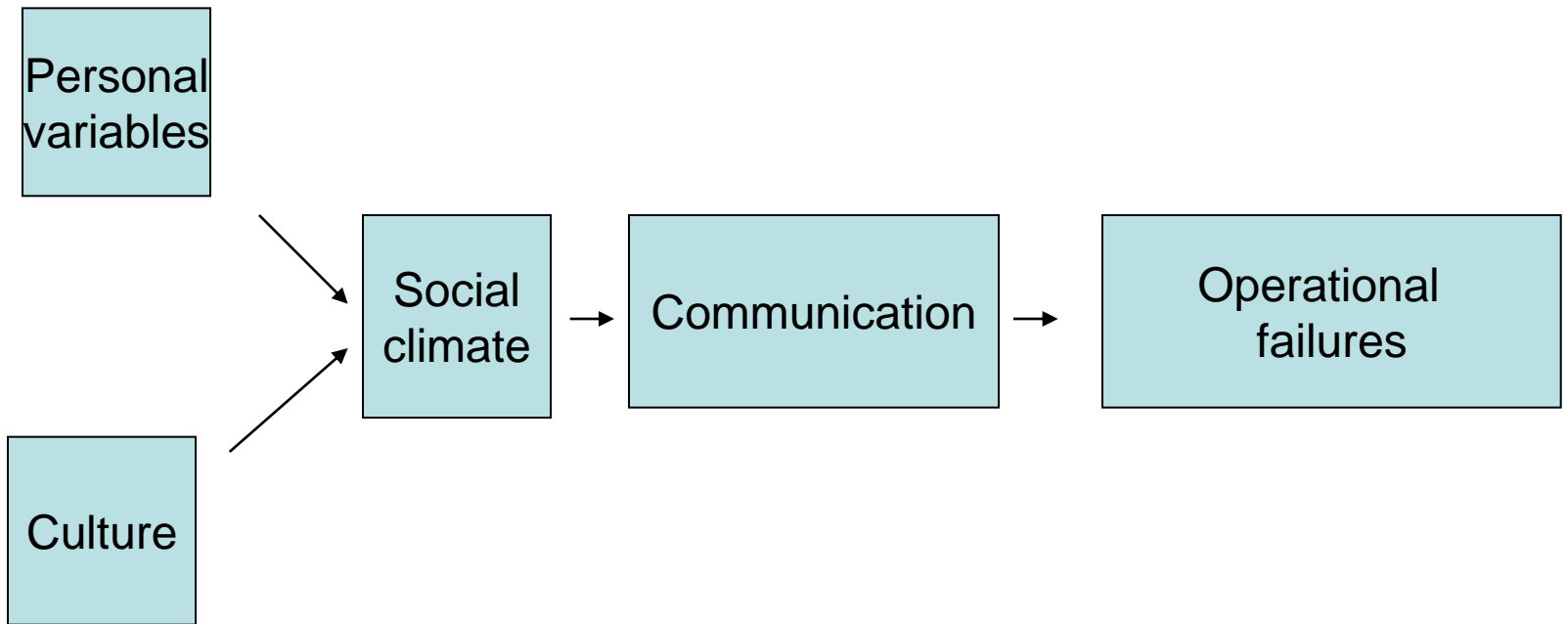
”in 31 of 37 plane accidents one crew member failed to detect and challenge another crew member’s error, usually the captain”

Basic Cultural Elements affecting the Team Function on the Flight Deck

- Authoritative captains create relationship problems?
- Anxiety vis-à-vis the captain?
 Afraid to speak up?
- A safety culture must be created

Kjell Mjøs,

The International Journal of Aviation Psychology 2004;14:151-69





Applied Psychology
Human Performance in high risk industries
and health care

Rhona Flin,
University of Aberdeen
"Safety at the Sharp end. A guide to Non Technical Skills"

The Influence of Shared Mental Models on Team Process and Performance

- Shared Team-based
- and task-based mental models

relate positively to subsequent team process and performance

Mathieu JE et al. J of Appl Psychology 2000;85.273

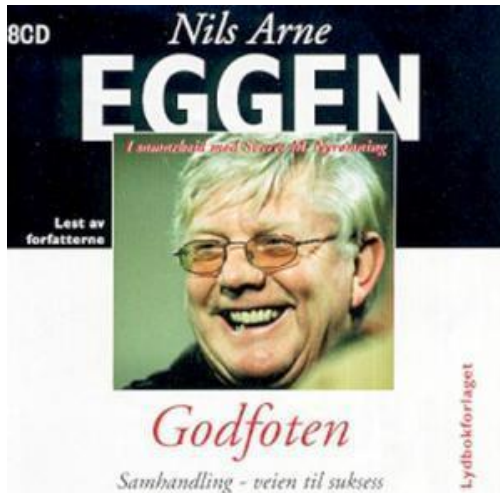
Key components of good communication

- Situational Awareness
- Problem identification
- Decision making
- Workload distribution
- Time management
- Conflict resolution

Davies JM. Team Communication in the OR
Acta Anaesthesiol Scand 2005;49:898

Team work and patient safety in dynamic domains of health care: A review of the literature

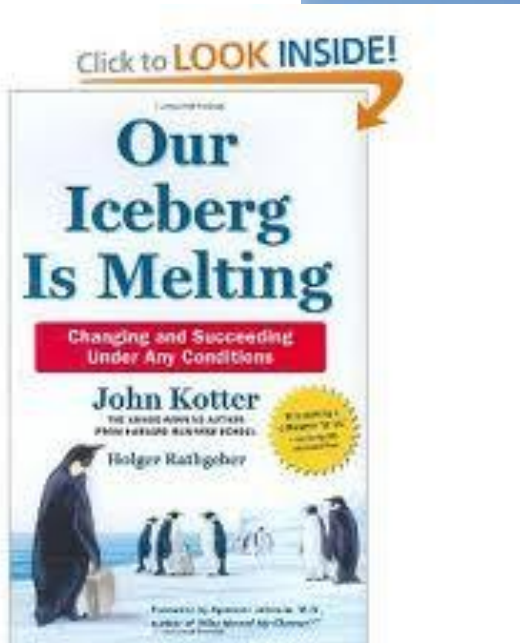
- Health care is inherently interdisciplinary
- Dynamic situations
 - Operating rooms
 - ICU
 - Emergency rooms
 - Resuscitation
- Team performance is crucial
- Manser T. Acta Anaesthesiol Scand 2009;53:143



Kjenne sine oppgaver
Samhandle /kommunisere
Øve på detaljer

”Hvis du itj får det te på onsd’a’n
Så får du itj te det på sönad’a’n heller !”

How to achieve change under difficult conditions



- Det er typisk norsk å være BEST



Gratulerer – og takk for det dere
har gjort !

