The Use of Cognitive Aids in Dutch Operating Theaters; Results from a National Survey

Gepubliceerd: 17-05-2021 Laatst bijgewerkt: 18-08-2022

We expect an increase in the number of hospitals that have implemented and use a cognitive aid in the OR compared to the number of hospitals in 2018

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON22378

Bron
Nationaal Trial Register

Verkorte titel
SCAN

Aandoening

None

Ondersteuning

Primaire sponsor: Amsterdam UMC, location AMC
Overige ondersteuning: geen

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Determining the number of hospitals in the Netherlands that use a cognitive aid in the OR

and comparing the current data with previous data obtained in 2018

Toelichting onderzoek

Achtergrond van het onderzoek

The last decades there is an increased focus on patient safety. Patient safety is defined by the World Health Organization (WHO) as “The absence of preventable harm to a patient during the process of health care and reduction of risk of unnecessary harm associated with health care to an acceptable minimum”. An acceptable minimum refers to the collective notions of given current knowledge, resources available and the context in which care was delivered weighed against the risk of non-treatment or other treatment. The European Board of Anesthesiology (EBA) and the European Society of Anaesthesiology (ESA) published a consensus on what needs to be done/achieved for improvement of perioperative patient safety. During the Euro Anaesthesia meeting in 2010, taking place in Helsinki, Finland, this vision was presented to anesthesiologists, patients, industry and others involved in health care as the ‘Helsinki Declaration on Patient Safety in Anesthesiology’.

One of the first actions of the “Helsinki Declaration Implementation Task Force” (installed by the ESA/EBA) was to produce and promote a series of Crisis Checklists, with the first manual of algorithms for managing clinical crises in anesthesiology issued in 2012. Building upon the WHO Surgical Safety Checklist for normal workflow, multiple groups globally have worked on emergency manuals, including development, simulation testing, clinical implementation studies and training resources.

The recommendations accordant with the Declaration of Helsinki in 2021 on the development and implementation of a crisis checklist, have resulted in an increased use of cognitive guidelines worldwide. Currently, to the best of our knowledge, a cognitive aid has not been implemented and used in all Dutch hospitals. Therefor we want to investigate how many hospitals have implemented and use a cognitive aid and compare these results with previous results from 2018.

Doel van het onderzoek

We expect an increase in the number of hospitals that have implemented and use a cognitive aid in the OR compared to the number of hospitals in 2018

Onderzoeksopzet

A one-off questionnaire will be send and won't be repeated. We might contact the participants again, but only if they agree to fill out a second questionnaire

Onderzoeksproduct en/of interventie

Filling out a questionnaire

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Participant have to be an anesthesiologist in a Dutch hospital
- Participant have to agree to terms described in informed consent
- Participant have to be able to understand and respond in the Dutch language

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Participants who are not willing to sign informed consent
- Participant who are not able to complete the questionnaire in Dutch

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blindering:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland

Status:	Werving nog niet gestart
(Verwachte) startdatum:	17-05-2021
Aantal proefpersonen:	80
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Ja

Ethische beoordeling

Positief advies

Datum:	17-05-2021
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL9479
Ander register	METC AMC : W21_229

Resultaten