



EORNA
EUROPEAN OPERATING ROOM
NURSES ASSOCIATION

9th EORNA Congress

16-19 May 2019

The Hague, The Netherlands

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“ON THE MOVE”

9th EORNA Congress

The Hague, The Netherlands

16 - 19 May 2019





ACORN AUSTRALIAN COLLEGE OF
PERIOPERATIVE NURSES | EDUCATION

'Australia's Greatest Invention - On The Move with ACORN Perioperative Practice Audit Tools'

Dr Paula Foran
Education Officer
ACORN

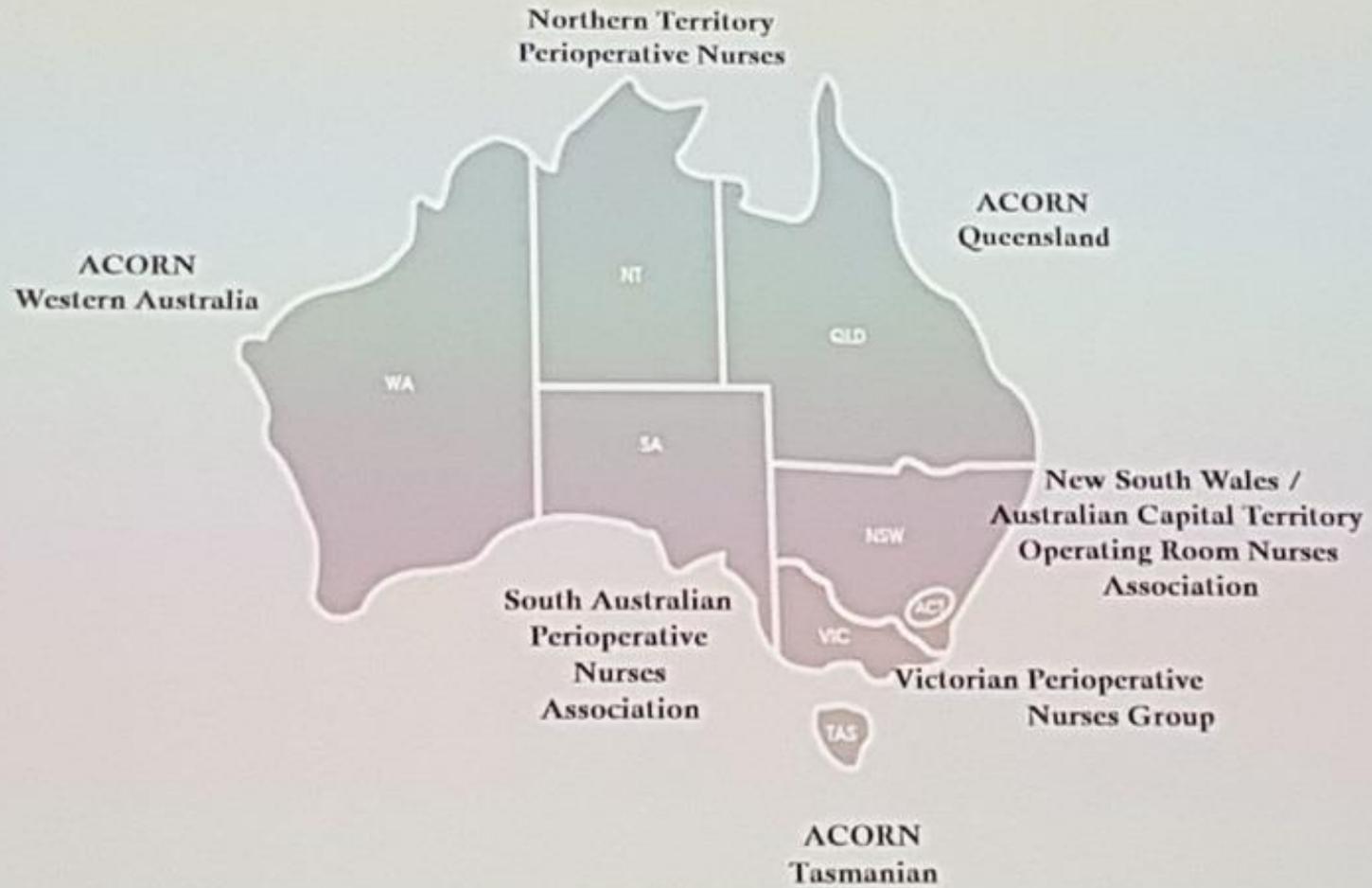


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Our vision

For Australian patients to receive the safest and highest quality perioperative care in the world.

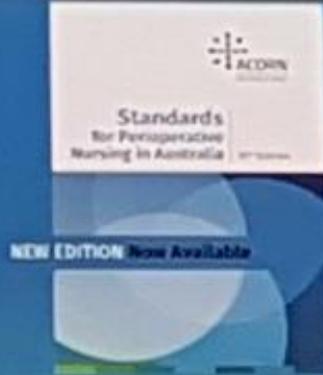




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ACORN National Standards

Arm your team with the knowledge of and access to the most current evidence-based practice.



Standards for Perioperative Nursing in Australia



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*How well are
these adhered to?*

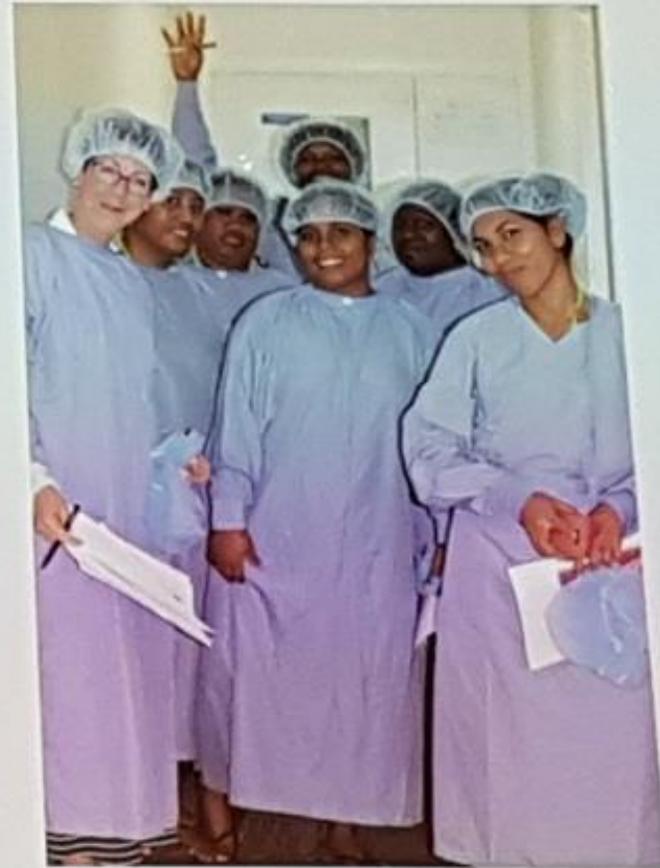
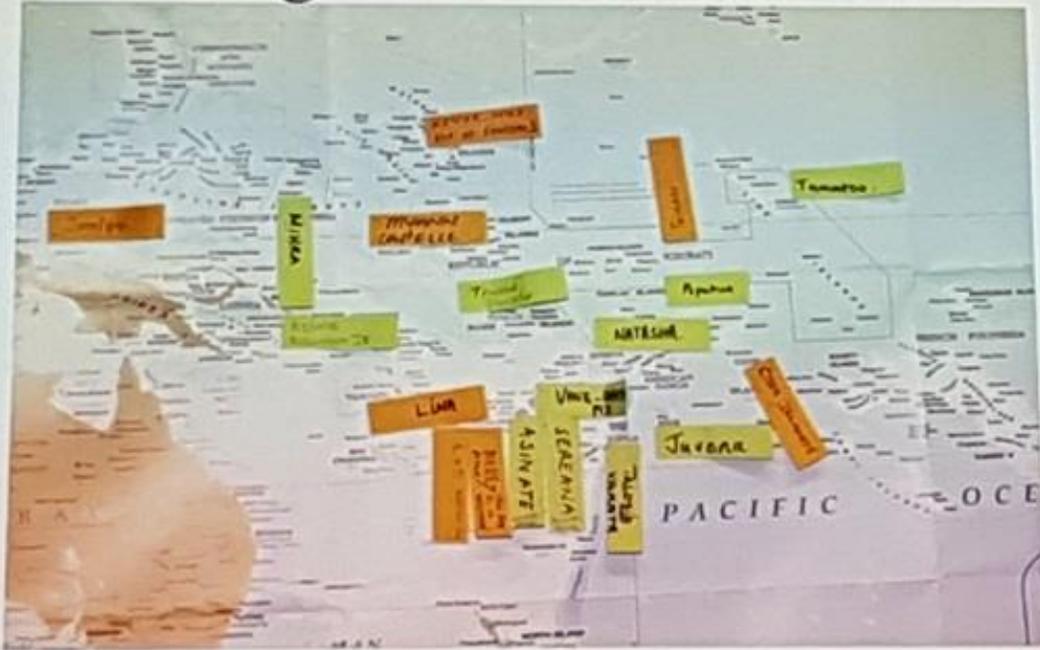


Practice Audit Tools





Origins in the Pacific...





The Pacific Perioperative Practice Bundle

Pacific Perioperative Practice Bundle - PPPB



PPPB 1

Hand hygiene



PPPB 2

Perioperative attire



PPPB 3

Aseptic technique



PPPB 4

Protective apparel



PPPB 5

Scrubbing, gowning & gloving



PPPB 6

Skin preparation & draping

Publications and further reading

Davies M, Sutherland-Fraser S, Taol MH, Williams C. Developing standards in Pacific Island Countries: The Pacific perioperative practice bundle (Part 1). ACORN J 2016;29(2):42-47.

Davies M, Sutherland-Fraser S, Mamea N, Raddie, N, Taol MH. Implementing standards in Pacific Island Countries: The Pacific perioperative practice bundle (Part 2). ACORN J 2017;30(1):41-48.

Collaboration for Quality Perioperative Nursing Care. Taol MH, Davies M, Sutherland-Fraser S. (unpublished conference paper) Presented at the 18th South Pacific Nurses' Forum, Honiara Solomon Islands November 2016.

Collaboration leads to successful change in Pacific Island Countries. Sutherland-Fraser S, Davies M, Taol MH, Mamea N, Raddie, N. (conference poster) Presented at the ACN National Nurses' Forum, Sydney August 2017.



Assessment verses Audit

Competency assessment

Gathering a combination of evidence to make a judgment on **an individual's** ability to perform against a predetermined standard

Practice audit

Gathering of evidence through observation only to assess compliance of a **group of individuals** against a predetermined standard

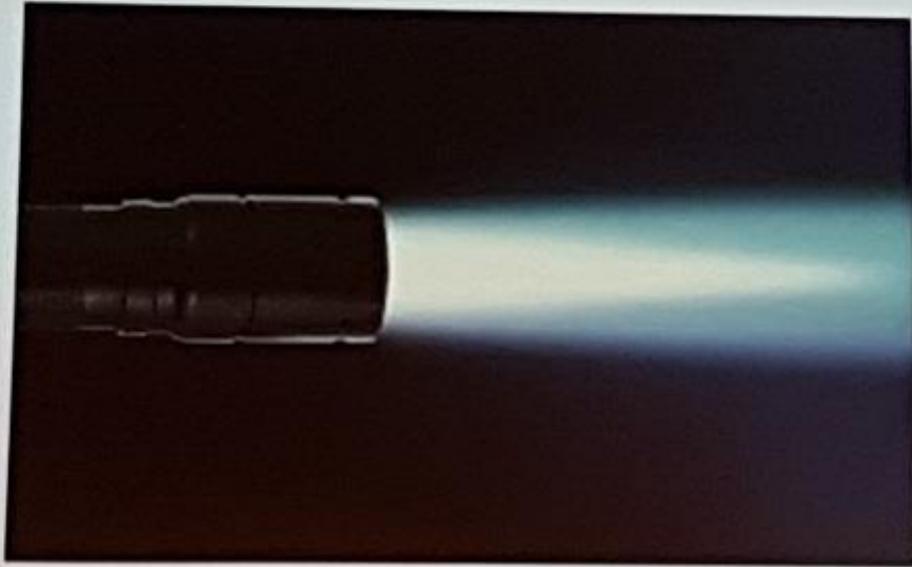


Differentiation

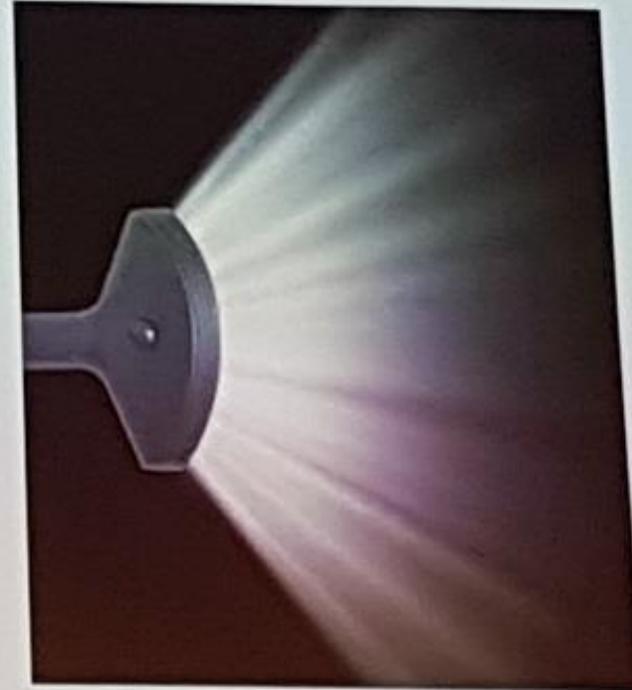
	Competency assessment	Practice audit
Purpose	Can you do it?	Did you do it?
Subject	Individual	Group, teams, workplace
Evidence	Combination (Direct, Indirect, Supplementary)	Direct (Observation of practice)
Applications	Evaluate training / measure outcomes of education programs Identify learning deficits	Compliance Practice improvement Change management



Assessment verses Audit



Focuses on 1 person



Notices many people



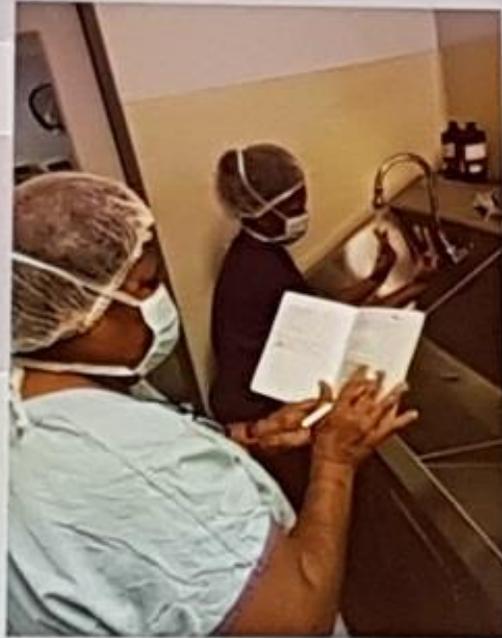
Competency assessment

Practice audit

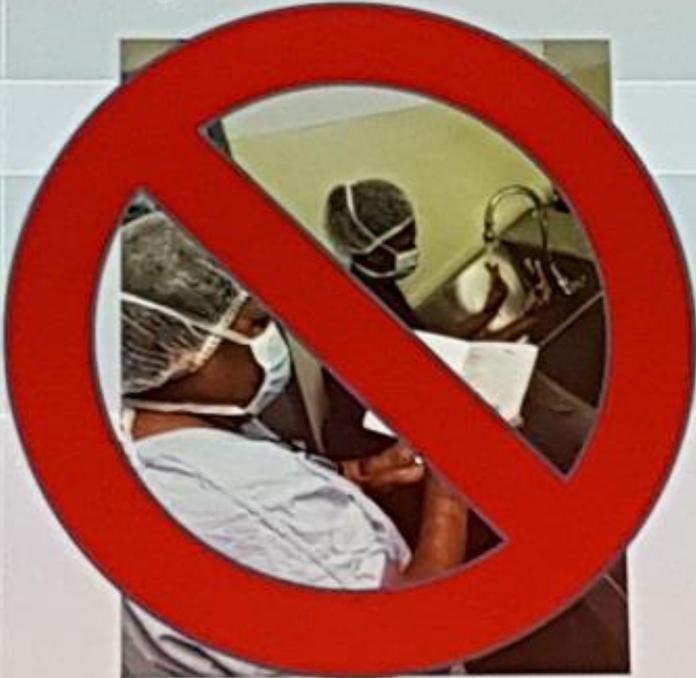
Purpose

Can you do it?

Did you do it?



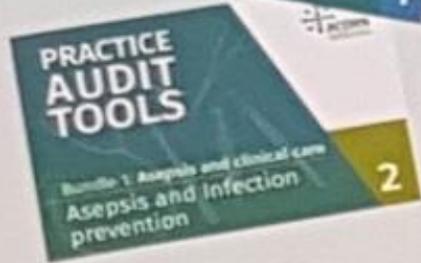


	Competency assessment	Practice audit
Purpose	Can you do it? 	Did you do it? 



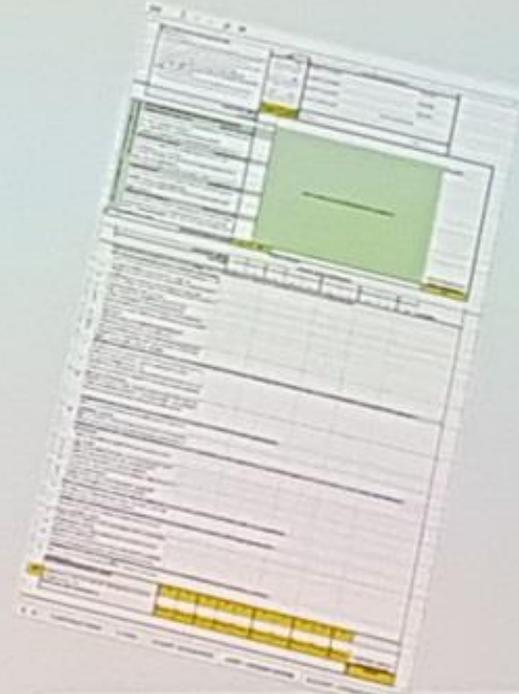
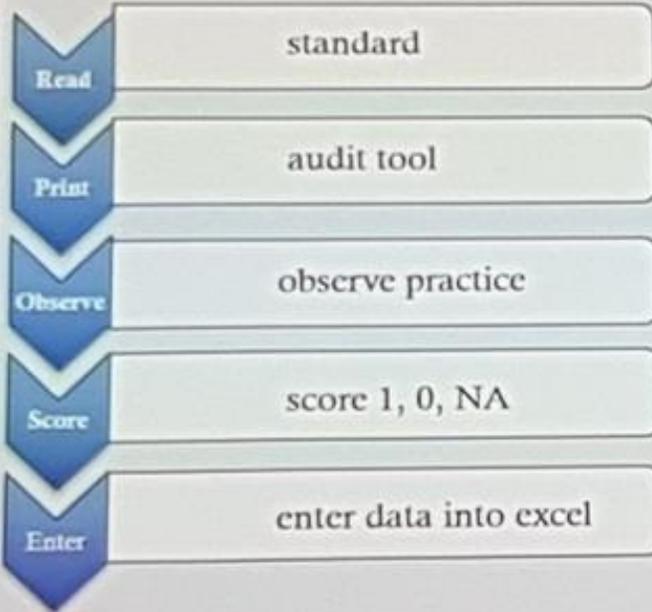
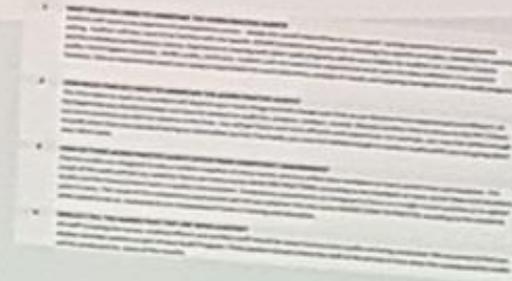
Practice Audit Tools 1: Asepsis and clinical care

1. Perioperative attire
2. Asepsis and Infection prevention
3. Surgical hand antisepsis, gowning and gloving
4. Preoperative patient skin antisepsis
5. Specimen identification, collection and handling



Practice Audit Tools 2: Staff and patient safety

6. Documentation (from Professional practice)
7. Surgical safety
8. Medication safety
9. Management of sharps in the perioperative environment
10. Safe patient positioning in the perioperative environment and Safe manual handling
11. Management of accountable items used during surgery and procedures
12. Surgical plume and Electrosurgical equipment (from Equipment and environment)



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Insert Auditor Initials		RF	RF	PF	PF	PF	RF	PF	RF	RF	RF	Comments
Insert Date		12-Feb	14-Feb	15-Feb	16-Feb	17-Feb	19-Feb	20-Feb	22-Feb	23-Feb	26-Feb	
		1	2	3	4	5	6	7	8	9	10	

Perioperative attire is donned in the dedicated change room immediately prior to entering the operating suite and is worn correctly at all times

Prior to entering the perioperative environment, did the nurse:

1	select clean perioperative attire without contaminating it? ie. did not touch the floor, was not stored in locker etc	1	1	1	1	1	1	1	1	0	1	SAMPLE ONLY
2	change into clean perioperative attire without contaminating it? ie. did not touch the floor, was not stored in locker etc?	0	1	0	0	1	0	0	1	0	0	
3	ensure undergarments were covered by the perioperative attire? ie. no long sleeves, high collars etc	1	1	0	0	1	1	0	1	1	0	
4	wear headwear that completely covered all hair?	0	1	0	0	1	1	0	1	0	0	
5	perform hand hygiene after changing footwear?	0	0	0	0	1	1	0	0	0	0	
6	place used perioperative attire into dirty linen receptacles?	1	1	1	1	0	1	0	1	0	0	
7	also wear non-woven head cover when wearing personal fabric head cover?	0	1	NA	NA	0	0	0	1	0	1	
8	cover facial hair with a balaclava type headwear?	NA	NA	NA	1	NA	NA	NA	NA	NA	NA	
9	keep warm up jackets fastened, when worn?	NA	1	NA	1	0	0	0	1	1	1	
10	store personal belongings in allocated storage space eg locker?	0	0	0	0	0	0	0	1	1	0	
11	if replacement perioperative attire was required - did the nurse replace it in accordance with the standard?	NA										

Appropriate perioperative attire for the restricted, semi-restricted and non-restricted areas of the perioperative environment should be clearly defined within each health service organisation.

1	Was the nurse wearing perioperative attire correctly when working in the non-restricted environment? ie. cover gowns / attire changed according to HSO policy	NA	0	NA	1	NA	NA	0	0	0	1	
2	Was the nurse wearing perioperative attire correctly when working in the semi-restricted environment? ie. no street clothes, head and facial hair fully enclosed	1	0	1	1	1	1	0	1	1	1	
3	Was the nurse wearing perioperative attire correctly when working in the restricted environment? ie. no street clothes, head and facial hair fully enclosed, masks worn when aseptic fields	1	0	1	1	0	0	0	1	1	1	
Designated footwear complies with relevant Standards and is of a design and material that permits regular cleaning												
1	Did the nurse wear footwear that was fully enclosed, clean and maintained, non slip?	1	1	1	1	1	1	1	1	1	1	
2	Did the nurse wear impervious boot style footwear only as part of PPE when there was a demonstrated risk of gross contamination?	NA	NA	NA	1	NA	1	0	NA	NA	NA	

SURGICAL HAND ANTISEPSIS, GOWNING & GLOVING PROCEDURE.

SEE ALSO FAQ No. 7 WHEN SHOULD I FOCUS ON ONE NURSE DURING AN AUDIT?

Health care professionals have a duty to adhere to established standards of practice prior to commencing surgical hand antisepsis, gowning and gloving.

Prior to the commencement of the scrub, did the nurse:

1	wear clean perioperative attire?	1	1	1	1	1	0	1	1	0	1
2	ensure that all hair, including facial hair was covered?	1	1	1	1	1	1	1	1	0	1
3	remove jewellery eg. wrist watch, wedding band?	NA	1								
4	don PPE relevant to the specific procedure?	1	1	1	1	1	1	1	1	1	1

All members of the surgical team have a duty to follow a standardised procedure for surgical hand antisepsis prior to donning sterile gown and gloves.

NOTE: THERE ARE 2 POSSIBLE TECHNIQUES FOR SHH - observe & score ONLY 1 TECHNIQUE PER AUDIT COLUMN - either SHS or ABHR. Mark the other technique ZERO (0)

SHS SURGICAL HAND SCRUB technique (SHS) using antimicrobial agent & water. Whenever you observe this SHS technique, you must score the other technique ZERO (0) (ie. ABHR is scored 0, not NA)

Did the nurse apply the following principles:

1	follow all steps of procedure and correct duration of contact time (1st scrub 5 mins if cleaning nails or subsequent scrub 3 mins).	1	0	1	1	1	0	1	0	0	NA
2	use same agent on each occasion observed? (NOTE: antimicrobial agents and ABHR should not be combined sequentially).	1		1	1	1	0	1	0		NA
3	ensure recommended skin contact time with antimicrobial agent eg. monitor clock, ensure coverage, avoid excessive rinsing etc?	1		1	1	1	0	1	0		NA
4	keep hands higher than elbows at all times?	1		1	1	1	0	1	0		NA
5	wash with circular motion from hands, wrists and forearms to above elbows without returning to hands?	1		1	1	1	0	1	0		NA
6	keep perioperative attire dry eg. adjust water flow, avoid splashing or drips, avoid contact with taps and sink etc?	1		1	1	1	0	1	0		NA
7	approach gown trolley and grasp sterile towel without contaminating any other item? (NOTE: hands are not sterile).	0		1	0	0	0	0	0		NA
8	dry each hand and arm sequentially, using sterile towel(s) without contaminating hands or arms, gown trolley or other items?	1		1	1	1	0	1	0		NA
9	keep hands above waist level away from unsterile attire at all times?	1		1	1	1	0	1	0		NA
10	dispose of towel(s) without contamination?	1		1	1	1	0	1	0		NA

ABHR

ALCOHOL BASED HAND RUB^A (waterless) technique (ABHR) using alcohol based solution. Whenever you observe this ABHR technique, you must score the other technique ZERO (ie. SHS is scored 0, not NA)

Did the nurse apply the following principles:

1	if required, wash with NON-antimicrobial soap and allow to dry?	0		0	0	0	1	0	NA	1	NA
2	apply ABHR to hands, wrists and forearms according manufacturer's specific recommendations eg. applies recommended volume and monitors clock for contact times etc?	0		0	0	0	1	0	1	1	1
3	use the same agent on each occasion observed? (NOTE: antimicrobial agents and ABHR should not be combined sequentially).	0		0	0	0	1	0	1	1	1
4	keep hands higher than elbows at all times?	0	1	0	0	0	1	0	1	1	1
5	allow hands and arms to dry naturally and thoroughly before approaching gown trolley?	0	1	0	0	0	1	0	1	1	1



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Competition between theatres



**In conclusion, we hope that the
introduction of our new
Practice Audit Tools
will provide insight and
improvement in perioperative
practice thus working toward our
vision of safe, high quality care
for all our patients**



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ACORN 2020
International Conference



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Sydney Australia
28-30 May
vision for the future
acorn.org.au/conference2020

save the date

**Thank-you
for your
attention**