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Identification of latent safety threats through simulation – Making hospital a safer place

Transitioning to a new hospital facility represents a significant challenge to clinicians and institutional leadership, and represents a risk to patient safety if the planned systems, models of care and physical environment are not tested prior to the transition. The challenge is complex - involving workers, the workplace (including technology, equipment, and physical environment), work processes, and the patients who benefit from the work. Healthcare simulation offers a range of methodologies to examine this complex system, identify latent safety threats, and engage clinicians in a shared problem-solving approach. Latent safety threats (LST)s, can be defined as "system-based threats to patient safety that can materialize at any time," and often go unrecognized by health care professionals, unit directors, or hospital administration. These errors in design, organization, training, or maintenance may have a significant impact on patient safety and, if not recognized and mitigated, could potentially delay management in an emergency situation and/or possibly result in patient harm. Immersive, full-environment (''in situ'') simulation exercises make it possible to prospectively determine whether newly built clinical facilities allow workflow patterns that foster safe and well-coordinated patient care.

Biography

Swapnil Pawar is well recognized expert in simulation and currently undertaking PhD to evaluate effects of emotion on working memory resource depletion. He has completed his advance training in simulation at CMS Boston and is currently clinical lead for simulation at St George Hospital and UNSW. He has recently received grant of 170,000 AUD for simulation based research project to evaluate latent safety threats prior to transitioning to new ICU facility.

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