



# ASPAN

American Society of PeriAnesthesia Nurses

## Message from the President

### Connecting with Core Issues

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**ASPAN President 2000-2001**

Nurses are the core of the health care system. We are the ones who provide the care and the human touch in patient care. Regardless of our position, whether staff nurse, manager, researcher, or teacher, our role is vital and challenging. As professional nurses our duty to our patients, their families, and our communities is to provide care based on established standards. As individuals, we want to provide competent, compassionate, and complete nursing care to our patients, and it is our goal to promote excellence in nursing by providing patient centered care with respect and integrity. We have a commitment to quality patient care and patient satisfaction. A study recently conducted by Sigma Theta Tau International and NurseWeek Publishing, Inc., surveyed more than 1,000 people regarding public attitudes about the nursing profession. An overwhelming 92 percent said they trust information about health care provided by registered nurses, ranking nurses equally with physicians.

What does all this mean? As we connect this information together it becomes evident that registered nurses are obligated to advocate for patients and speak up on their behalf; we are in key positions to do so. The recent report from the Institute of Medicine (IOM) titled, *To Err is Human: Building a Safer Health System*, cited medical errors as the seventh leading killer among Americans today. While representing ASPAN last June at the American Nurses Association's Biennial Convention, "Nurses Keeping the Care in Healthcare," in Indianapolis, I attended a wonderful presentation by Lucien Leape, MD, MPH, and David Keepnews, JD, MPH, RN. In their presentation, "Stopping the Blame Game," they both stated unequivocally that systems, not individuals, are to blame for medical errors and that instead of punishing for errors, health care facilities and regulators should be identifying what works to reduce and prevent errors. Dr. Leape, the nation's leading expert on hospital deaths and adverse drug occurrences caused by medical errors, discussed issues such as organizational culture, management decisions, process design, workload and team training, and how these cause the system defects that can eventually lead to medical error.

An example he cited was when a hospital decides that a nurse can care for twice as many patients in the same amount of time; the system defect that results is an overworked nurse. Dr. Leape stated that "Health care is the only industry in America that does not believe that fatigue degrades performance." He compared the issue to the airlines where pilots must have a certain amount of time off between flights. It is illegal for them to fly within certain time frames. Dr. Leape described principles that could help prevent human factor errors. These principles include avoidance of reliance on memory, simplification and standardization of processes, and utilization of protocols and checklists wisely. It is critical that we learn to separate errors from misconduct, and that "regulation is a major barrier to safety when it fixates on punishment and focuses on individuals." He noted that this philosophy often keeps people from reporting errors, thereby hindering efforts to address system problems. Dr. Leape stated we should stop punishing for errors, work with impaired people, and set standards for safer systems.

Mr. Keepnews agreed that errors are the "result of systems errors and should be addressed as such." He feels that institutions have an accountability to identify and repair system flaws. He spoke in opposition to mandatory overtime as a solution to short staffing and stated that nurses must be able to exercise their professional judgment when they determine they have reached their limits and that institutions must support this. Mr. Keepnews also discussed other system problems such as illegible orders, medications bearing similar names or packaging, keeping potentially dangerous drugs in floor stock, inadequate

double checks for certain surgical procedures, and long work hours. He reiterated Dr. Leape's comments to get away from focusing on blame and punishment and, instead, identifying and correcting the contributing systems problems that lead to medical errors.

Part of ASPAN's mission is to provide quality care to patients, families, and the community. ASPAN is working for you and for our patients in many different ways. Our position statements, collaborative connections, standards of practice, research endeavors, educational programs, and competencies are just a few of the projects we have in place to improve and ensure quality care for our patients. We have a representative to the American Society of Anesthesiologists (ASA) Anesthesia Patient Safety Foundation, and we endorsed a recent conference on Nurse: Patient Ratios. We are developing a position statement for safe transport of patients from the PACU and competencies for the use of unlicensed assistive personnel in our units. I believe that my perianesthesia nurse colleagues are able to accept the challenge and help identify and correct systems in need of change in order to ensure that our patients receive the high quality care they deserve.

ASPAN's foremost concern is to promote a safe environment in which the perianesthesia nurse can deliver safe, appropriate care for patients in preanesthesia, postanesthesia, and ambulatory surgery. All of the initiatives listed above focus on safety and quality for the patients that receive our care. We believe our recommended staffing ratios, our position on fast tracking, and our position regarding on call/work schedules promote safe, appropriate patient care.

ASPAN, as the voice of perianesthesia nursing practice, has the ongoing responsibility of defining the practice of perianesthesia nursing. We, as professional perianesthesia nurses, have a responsibility to ourselves and to the public to make the most of our information, knowledge, and resources. Each of these core connections is integral to the promotion of quality health care for the future.