Study on Risk Factors and Countermeasures in Operating Room Nursing Management from the Perspective of Nursing Management

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Abstract: The operating room is an important place for surgery, treatment, and rescue of patients. The operation of the operating room has the characteristics of fast pace, high requirements, high fluidity, high labor intensity and long duration. Due to the high intensity of work, long working hours, high incidence of accidents, etc., the operating room nursing errors and nursing complaints are difficult to avoid, and the nursing management is difficult. How to carry out scientific nursing management for nursing staff, continuously improve the quality of nursing, and ensure the normal operation of nursing work. It is an important issue for operating room care managers. This paper analyzed the risk factors existing in the nursing management of operating room and took risk management measures to manage them. Good service attitude directly affects the image of the hospital. Full trust of patients is also conducive to doctor-patient cooperation and provides a strong guarantee for patients' rehabilitation. Effective preventive measures should be taken from the management point of view in order to provide a safe operating environment and ensure the safety of surgical patients, in order to prevent medical and nursing errors or accidents.

1. Introduction

Operating room is an important place for patients to be operated, treated and rescued. Operating room work has the characteristics of fast rhythm, high requirement, high mobility, high labor intensity and long duration [1]. The rules and regulations of the operating room are not perfect or there is no effective supervision mechanism, which results in the nurses can not better abide by the medical and nursing operation norms and do not operate according to the routine of the operating room [2]. It restricts the working enthusiasm of nurses in operating room and affects the quality of nursing in hospital operating room. It is difficult to avoid nursing errors and complaints in operating room due to the characteristics of intensive work, long working hours and high incidence of accidents, and nursing management is difficult [3]. There are many risk factors in nursing management, and the development of effective risk management measures in a targeted manner will contribute to the improvement of operating room nursing [4]. By analyzing the potential safety hazards of the operating room, improve the corresponding management process and take relevant preventive measures. It can effectively reduce or eliminate related safety hazards, ensure the safety of surgical treatment and care, and effectively prevent the occurrence of medical care disputes [5]. How to carry out scientific nursing management for nursing staff, continuously improve the quality of nursing, and ensure the normal operation of nursing work. It is an important issue for operating room care managers.

The operating room is a highly stressful and rigorous work environment. Medical staff need to have a high degree of responsibility and excellent job skills to complete the work of heavy, meticulous, technical and professional medical services [6]. With the continuous deep research of nursing medicine, people are becoming more and more blurred in the nursing industry, and the process of nursing behavior is more and more complicated. Nowadays, the division of labor in the nursing industry can only be more and more refined, and the risk factors are carefully analyzed [7]. It can effectively prevent emergencies in the management of operating room care. There are still

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many risk factors in the nursing management of hospital operating rooms, which affects the improvement of the quality of nursing in the operating room, which is not conducive to the surgical treatment of patients [8]. Uneven preparation or aging of surgical instruments make the operation unable to proceed normally. The instruments used in the operation have potential safety hazards and cause unnecessary damage to patients [9]. With the increasingly sophisticated division of operation disciplines, various difficult, high-risk and minimally invasive operations have been carried out. With the use of various precision instruments, the professional quality of nurses in the operating room is increasingly demanded. There is also a higher requirement for nursing management in operating room [10]. This paper analyzed the risk factors existing in the nursing management of operating room and took risk management measures to manage them.

2. Materials and Methods

The excessive mobility of nurses in operating room makes the management difficult. In the case of many and urgent operations, due to business unfamiliar, it is easy to cause confusion and inadequate supervision, there are potential safety hazards. Operating rooms generally have no special requirements for the admission of nurses, so that some personnel lacking professional nursing knowledge or nursing experience enter the operating room. Clean and hygienic operation room must be put in an important position. We have a strict health system. Wet sweep, wipe and tidy up the operating room every day. The control group was given routine nursing management, including preoperative preparation, intraoperative cooperation and post-operative treatment. In practice, some nurses' operational skills and professional abilities need to be improved. And some nurses do not pay attention to the study and improvement of their professional knowledge, and have poor predictability of patients' disease changes and complications. Unable to cope with unexpected events that may occur at any time, resulting in undue operational errors. In addition, the nursing staff is not skilled in the operation of some new instruments and equipment, which is easy to delay the best timing of treatment and rescue of patients, thus causing nursing safety problems. Personnel management should be strengthened and a monitoring and evaluation mechanism should be established. Establish supervisors to patrol the operating room environment, equipment, medicines and personnel. Strictly implement the operating system rules and regulations.

The survey on the nursing practice status of patients after general anesthesia was carried out using a self-designed patient care practice questionnaire. The nurses used the patient care knowledge questionnaire to grasp the patient's nursing knowledge after general anesthesia. The patient has no history of underlying disease and systemic underlying disease. Postoperative general condition was sTable. The data is checked and checked and entered into the database. The application software processed the collected effective data, using frequency, composition ratio mean, standard deviation for descriptive statistics on general data, current status of patient care practice after general anesthesia, and nurses' knowledge of patients' nursing knowledge after general anesthesia.

With the change of medical model, the operating room nursing work is not only a simple technical operation based on surgery. It is a full-fledged patient-centered service in the operating content and procedures of the operating room. Enhance care and postoperative follow-up during preoperative visits. Some operating room nurses are not aware of the patient's service and do not have a correct understanding of the importance of patient-patient communication. The answers to questions raised by patients and their families are too simple, vague, and even indifferent. The patient cannot get a timely understanding of his condition and treatment, and the hospital cannot gain the trust of the patient. Affects good collaboration between healthcare professionals and patients. It is important to avoid the caregiver's lack of responsibility in the work, lack of legal knowledge, and strict implementation of operating room operating practices. Some nurses lack patience and simply take the form of daily nursing work, such as not doing a good job of preoperative visits and so on. Instrument nurses are not allowed to change in the middle of the operation. When a change is really necessary in special circumstances, the handover personnel should check the number of instruments, dressings and other items face to face and sign together for

confirmation. With the introduction and use of various large-scale instruments and equipment, medical technology and medical quality have entered a new stage. Such as all English operation interface of the electrocoagulation hemostat and other instruments. Nurses not only have a certain knowledge of foreign languages, but also have certain operational skills and troubleshooting abilities. Only in this way can we be more skilled in the operation.

3. Result Analysis and Discussion

Some patients are nervous before operation and can not answer the questions correctly after using tranquilizers. They are prone to mistake connection or misplaced operation room. When checking, attention should be paid to the way of inquiry, and family members should be asked to assist in checking if necessary. Operation cooperation management, strict implementation of aseptic principle, three checks and seven pairs of principles, instrument management and inventory. Posture nursing should be done according to the operation mode to avoid pressure ulcer. The specimens retained in the operation should be kept and sent for examination strictly in accordance with the regulations, so as to avoid contacting the samples and exposing them to the source of infection. The decompression pad should be used correctly when assisting the doctor to place the operation position. Avoid compression of blood vessels and nerves and keep limbs in functional position. Prevent excessive pulling and excessive outreach. Formulate rules and regulations related to operating room care management. Ensure that the operating room care management is well-founded. In addition, explain the use skills of advanced equipment to the nursing staff on time. This will not only further understand the new medical equipment, but also fundamentally avoid the risk of operating room care and improve work efficiency.

Safety is the core of care quality management, and safety care is a prerequisite for safe medical care. The operating room is a high-risk medical facility, and the quality of the operating room care is closely related to the patient's surgical safety. Any negligence can cause serious consequences. The operating room is a high-risk, high-intensity working environment. And the nursing work is characterized by monotony and repeatability. In this work environment, the psychology of the caregiver inevitably feels tired, nervous, irritated or stressed. This tends to make the psychology of the nursing staff in a sub-health state, causing mistakes in the nursing work. The market economy has brought the medical and health industry to the market mechanism and introduced operational competition and values. The main purpose of communication skills training is to improve the effectiveness of patients, family members and doctors. Avoid disputes caused by misunderstanding and establish good nurse-patient relationship and medical cooperation. Post skills are gradually improved on the basis of responsibility and experience accumulation. However, an effective training mechanism will contribute to the rapid growth of junior nurses and the improvement of the overall skills of operating room nurses. We should help patients adjust the relationship between family and work in time, and keep a happy attitude to participate in the nursing management of operating room.

The development of the nursing discipline has extended the responsibility of the operating room nurses from the simple completion of the surgery to the perioperative care of the surgical patients. Operating room care safety is at the heart of care management. Only for the security risks and sound operating room rules and regulations, clear job responsibilities, strengthen quality and safety education, improve legal awareness, and pay attention to the quality management of high-risk links. In order to ensure the safety of operating room care. The nursing staff is unclear about the preoperative preparation of the surgical patient, or the check system is not carefully implemented, and the patient's detailed information is not checked and the wrong patient or the surgical site is incorrectly confirmed. In the operating room, every case of operation is completed, through the preparation of articles, operation cooperation to the treatment of specimen after operation, and so on. Every link is closely linked and no mistakes can be made. Psychological problems are important factors related to the professional attitudes and behaviors of medical staff, which have attracted much attention at present. Repeated and heavy work, long overtime and other work characteristics lead to anxiety, depression and other negative emotions. Job burnout may also occur, which may affect the efficiency and accuracy of work and lead to nursing errors. In the risk management

measures, we must strengthen the all-round management of personnel, improve the personnel responsibility system, and establish supervision and assessment mechanism.

4. Conclusion

Good service attitude directly affects the image of the hospital. Full trust of patients is also conducive to doctor-patient cooperation and provides a strong guarantee for patients' rehabilitation. Intraoperative factors include the operation process and the operation after the operation. Any misoperation may lead to complaints about nursing errors and affect the cooperation with doctors. Strengthen the prevention and management of nursing risks in operating room, and carefully analyze the risk factors in nursing management. Establishing a reasonable risk management system can effectively avoid the occurrence of risks and reduce the incidence of nursing disputes. To ensure the safety of patients in the operating room. Operating room managers can select activities such as Star of Service. To improve the service awareness of nursing staff, while organizing nursing staff to learn the communication skills of doctors and patients, and improve the language communication ability of nurses. In addition to requiring the operating room medical staff to strictly implement the rules and regulations, cultivate a rigorous work attitude, have a high sense of responsibility, put the safety of patients in the first place. It is also necessary to take effective preventive measures from a management perspective to provide a safe operating environment and ensure the safety of surgical patients. This will prevent medical care errors or accidents from happening.

References

- [1] Lykjensen H T, Jepsen R M H G, Spanager L, et al. Assessing nurse anaesthetists' non-technical skills in the operating room[J]. Acta Anaesthesiologica Scandinavica, 2014, 58(7):794-801.
- [2] Sousa C S, Bispo D M, Cunha A L M D, et al. Educational intervention on malignant hyperthermia with nursing professionals of the operating room[J]. Revista da Escola de Enfermagem da USP, 2015, 49(2):0292-0297.
- [3] Kasatpibal N, Whitney J A D, Katechanok S, et al. Practices and impacts post-exposure to blood and body fluid in operating room nurses: A cross-sectional study[J]. International Journal of Nursing Studies, 2016, 57:39-47.
- [4] Hahtela N, Paavilainen E, Mccormack B, et al. Influence of workplace culture on nursing-sensitive nurse outcomes in municipal primary health care[J]. Journal of Nursing Management, 2015, 23(7):931-939.
- [5] Sundler A J, Evelina J, Linda J, et al. Incidents reported by nurse anaesthetists in the operating room [J]. Journal of Interprofessional Care, 2018:1-7.
- [6] Mirbagher Ajorpaz N, Zagheri Tafreshi M, Mohtashami J, et al. The effect of mentoring on clinical perioperative competence inoperating room nursing students [J]. Journal of Clinical Nursing, 2016, 25(9-10):1319-1325.
- [7] Foran, Paula. Undergraduate surgical nursing preparation and guided operating room experience: A quantitative analysis [J]. Nurse Education in Practice, 2016, 16(1):217-224.
- [8] Yavuz v G M, Ozsaker E, Dirimese E, et al. The Operating Room Experiences of Nursing Students: A Focus Group Study.[J]. Journal of Perianesthesia Nursing, 2016, 31(2):146-153.
- [9] Williams G, Crilly J, Souter J, et al. A state wide validation and utilisation study of the Queensland emergency nursing workforce tool [J]. Journal of Nursing Management, 2014, 22(8):1076-1088.
- [10] Nurse Knowledge of Intrahospital Transport [J]. Nursing Clinics of North America, 2015, 50(2):293-314.