

Project Title

Effective Communication to alert Code Green (Lower Segment Caesarean Section; LSCS) Team to proceed directly to an alternate remote Operating Theatre (OT) site

Project Lead and Members

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Organisation(s) Involved

KK Women's and Children's Hospital

Healthcare Family Group Involved in this Project

Ancillary Care

Specialty or Discipline (if applicable)

Operating Theatres

Aims

To ensure effective communication between OT, Delivery Suite and Neonatal teams whenever Code Green for LSCS is to be performed at an alternate remote site in the event that all existing OTs are fully occupied.

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Conclusion

See poster appended / below

Additional Information

Singapore Healthcare Management (SHM) Conference 2021 – Shortlisted Project
(Communications Category)

Project Category

Care & Process Redesign, Quality Improvement, Value Based Care, Safe Care

Keywords

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Effective Communication to alert Code Green LSCS Team to proceed directly to an alternate remote OT site



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INTRODUCTION

Code Green Lower Segment Caesarean section (LSCS) in KK Women's and Children's Hospital (KKH) is classified as a life-threatening obstetric emergency. Once the decision for Code Green LSCS is made, a public announcement system is used to activate multidisciplinary Code Green teams (obstetrician, anaesthetist, neonatologist, OT staff) to perform LSCS within 30 minutes with the aim to save both the mother and neonate.

KKH Major Operating Theatre (MOT) has 12 Operating Theatres (OTs). Due to MOT major renovation works, only 6 out of 12 OTs in MOT would be operational.

Therefore, this posed a shortage of OTs to cater for Crash LSCS to rush into MOT directly.

In the event that all 6 OTs are fully occupied, then there is a need to urgently alert the Code Green Team to proceed directly to the Fetal Surgery Suite which is the alternate remote site.

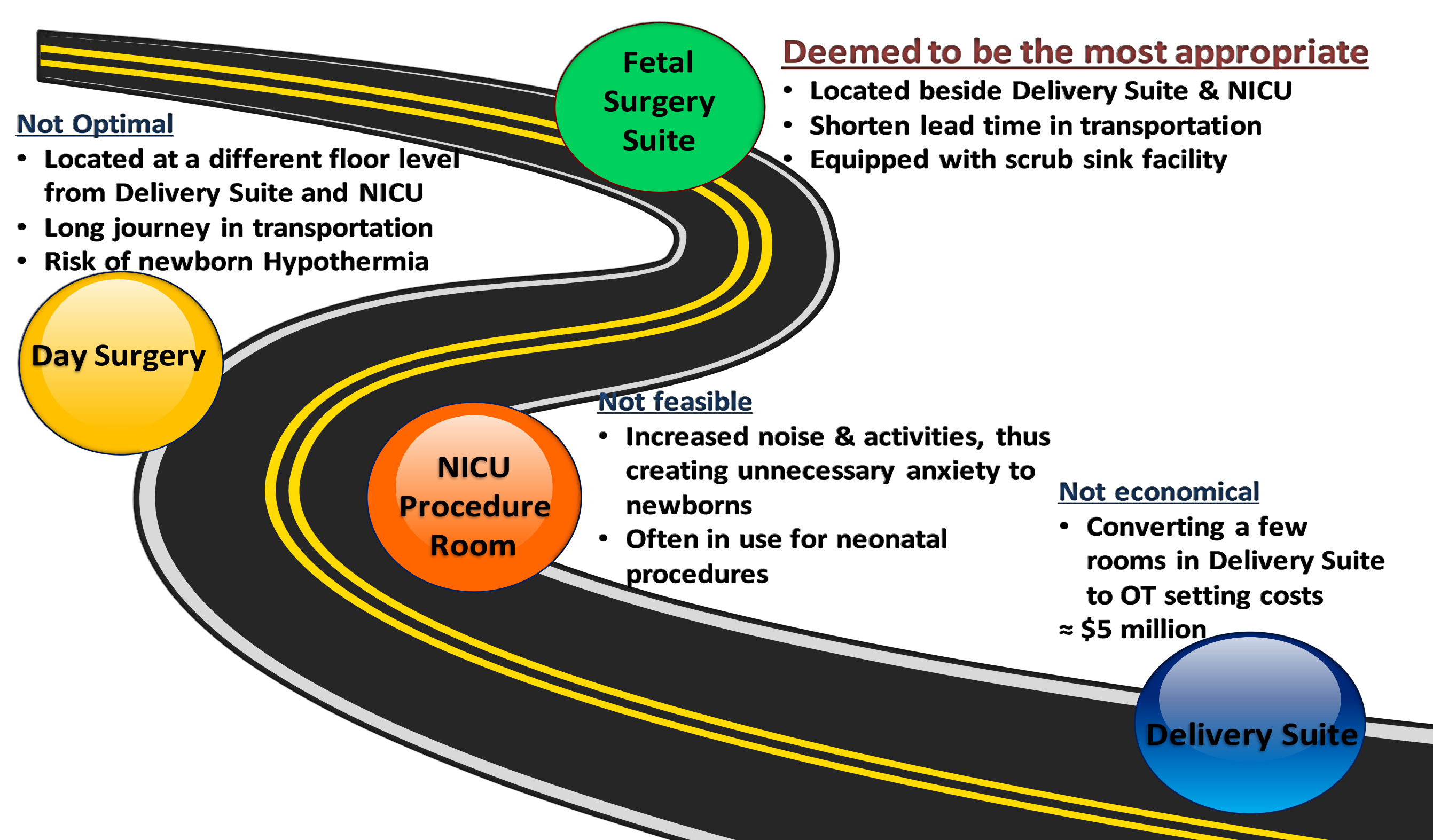
AIM

To ensure effective communication between OT, Delivery Suite and Neonatal teams whenever Code Green for LSCS is to be performed at an alternate remote site in the event that all existing OTs are fully occupied.

METHODOLOGY

OT management and multidisciplinary stakeholders explored alternate remote sites as in the roadmap shown below:

Exploring an Alternate Site by OT Nursing Leaders



The Fetal Surgery Suite (FSS) was eventually identified as the alternative site with the approval of senior management and multidisciplinary stakeholders.

The FSS was then prepared and equipped to standby for Crash LSCS and the management of neonates.



SET-UP of FSS

To facilitate effective and instant communication to the Code Green team, OT management came up with an idea of installing a green light indicator at various strategic locations to act as a visual signal for rapid response by medical and nursing personnel to proceed to the alternate site.



SNM in charge will activate the Green Light Indicator if all OTs are occupied.

Green light indicators will simultaneously be illuminated at Women's OT Reception, OT Emergency Door 2, Delivery Suite and NICU.



Women's OT Reception OT Emergency Door 2 (ED 2) Delivery Suite Corridor

RESULT

The Code Green team responded within 1 minute of activation to alternate remote site, FSS.

In 2020, we had performed 6 Code Green LSCS cases in FSS.

Code Green LSCS cases performed in FSS in Yr 2020	
Month	No. of Cases
May	3
August	1
September	1
November	1



CONCLUSION

The provision of Green Light Indicators to be switched on simultaneously at 3 different locations to alert the various teams to proceed to the alternate remote site without the use for any tele-communication has proven to be a very effective communication method to ensure patient safety.

