Purpose
Our goal is to train high performing teams to avoid and manage hazardous errors within the framework of complex and dynamic crisis situations. The Code team at OHSU is an interdisciplinary team that includes an MD Leader, Anesthesiologist, Respiratory Therapist, and three ICU RNs (documentation, defibrillation, and drugs).

Background/Significance
Effective crisis resource management (CRM) within the interdisciplinary Code Blue response team is integral to OHSU’s ongoing commitment to quality patient care. Errors in communication do occur and may adversely affect patient care.

In one Joint Commission study: 72% of errors were related to communication.

Methods
Integration of in-situ interdisciplinary mock code “SCITT” sessions
- Duration: 1 hour; mock code/debrief/evaluation
- Frequency: 1 time/weekly
- In situ, locations vary
- Mock Code Blue paged through operators
- Emphasis on CRM principals and ACLS protocols
- Everyone is included: If you carry a Code Blue pager, you must respond!
- Mandated by OHSU Hospital and Professional Board

Results: FY 2010 SCITT Baseline Data
ACLS
- Correct medication ordered 43% of the time
- Appropriate oxygen flow ensured 57% of the time
- Correct pad placement verified 43% of the time
- Correct cardiac rhythm identified 72% of the time
- Recognized need for prompt defibrillation 72% of the time

CRM & Teamwork
- Directed communication was average or poor 80% of the time
- Transparent thinking was average or poor 80% of the time
- Closed loop communication was average or poor 80% of the time
- Overall communication rating was poor 60% of the time

Conclusions
We completed 14 SCITT sessions for fiscal year (FY) 2010. Based on feedback and data showing room for Code team improvement, we have now started weekly SCITT sessions.

“The team and resource management components deal with the ability to translate the knowledge of what needs to be done into effective team activity in the complex and ill-structured real world” (Gaba, 2003)