

# HUMAN FACTORS

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The healthcare setting has become increasingly complex. Patient and societal demands for transparency in defining and justifying treatment decisions impact on all healthcare workers, who need to understand their professional responsibilities when working within complex social and work environments. Healthcare workers must understand that patients are increasingly better informed and wish to be included more fully within the decision-making processes regarding treatment options. Likewise, when performance and clinical outcomes are less than expected, patients and their supporters are entitled to timely and honest appraisal of 'what went wrong' and to be part of the discussion regarding ongoing care. Therefore, increasingly, surgeons will need to integrate knowledge, technical skills and mastery of complex equipment while participating in a multidisciplinary healthcare setting, in order to deliver safe and effective care. The communication skills required to work in these complex environments and engage effectively with audit, management and quality improvement systems are all dependent on human behaviour. These complex skill sets are set out in the study of human factors (HF), which examines the behavioural interrelationships between humans, the tools they work with and the environment in which they work. It is a complex area that incorporates knowledge derived from many disciplines. A better understanding of the effects of teamwork, tasks, equipment, workspace, culture and organisation on human behaviour will improve performance in clinical settings. A HF approach to patient safety differs from traditional safety training in that the focus is less with the technical knowledge and skills required to perform specific tasks, but rather with the cognitive and interpersonal skills needed to effectively manage team-based, high-risk activities. With time, HF training has evolved from models describing human interactions within complex environments to more nuanced programmes that modify workers' behaviour and improve patient safety. HF was originally conceived in the 1940s in the aviation industry to better understand the relationship between a team's behaviour, its technical surroundings and a changing environment. The 'cognitive skills' of the aircraft crew refers to the mental processes used for gaining and maintaining situational awareness, for solving problems and for making decisions, whereas 'interpersonal skills' are the communications and behavioural activities associated with teamwork. Crew resource management (CRM) training was developed to build effective communication skills and a cohesive environment among team members and to build an atmosphere in which all personnel feel empowered to speak up when the

Richard H. Thaler, b.1945, economist, University Chicago, IL, USA, winner of the Sveriges Riksbank Prize in Economic Sciences in Memory of Alfred Nobel 2017 for contributions to behavioural economics. Cass R Sunstein, b.1954, lawyer, Harvard Law School, Boston, MA, USA, co-authored in 2008. each other's actions, offer assistance when needed and address errors in a non-judgemental fashion. Debriefing and providing feedback are key components of CRM training. It also emphasises the roles of fatigue, perceptual errors (such as misreading monitors or mishearing instructions) and the impact of management styles and organisational cultures. More recent developments in HF have looked more closely at designing systems better suited to minimising error. Studies examining the hierarchy of intervention effectiveness and concepts

based on nudge theory allow for design of healthcare systems that increase safety and give a better understanding of - how people make decisions and behave. The nudge theory, introduced by Richard Thaler and Cass Sunstein, is based on shaping the environment to encourage choice selection along pathways deemed to be beneficial to the individual, an organisation or society. A key feature of nudge theory is to structure the selection of preferred options while allowing individuals to maintain freedom of choice within the decision-making process. One successful example is the adoption of generic medication brands on electronic medical records by the use of a simple opt-out checkbox if the prescriber wishes to use a non-generic medication. It is now widely recognised that HF need to be considered in every aspect of surgical care if the highest standards in patient safety are to be achieved. However, safety is just one aspect of a wider HF systems approach to equipment, task, environment and organisational design. Better understanding of HF can also significantly contribute to the quality, accessibility and cost of healthcare services and to the recruitment and retention of healthcare staff. Summary box 15.1

Approach to Acknowledging the gap between medical progress and delivery of quality patient care -

Health care is complex with many areas for improvement Understanding of the influence of HF among care givers can highlight areas of risk but also potential solutions The different factors that impact human behaviour can be identified and influenced in a way that improves health care Acknowledge the importance of 'value' for both healthcare provider and patient Training in human factors to enhance teamworking is a prerequisite of contemporary health care

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