

PERFORMANCE PRACTICE CASE STUDY:

# HOW THE SURGICAL TIMEOUT CAN BECOME A TOOL FOR TEAM PERFORMANCE.



Based on Arena Labs observations in over 300 surgical procedures in a wide range of surgical specialties and catheterization laboratories.





## PERFORMANCE PRACTICE CASE STUDY:

# “THE TIMEOUT”

## FROM AN “EXERCISE IN OBLIGATION” TO A PERFORMANCE TOOL

### THE EVOLUTION OF THE TIMEOUT

In having observed hundreds of surgical and cath lab procedures, our team sees a wide range of areas where operating room cultures can improve performance or impact team culture. Yet one of the constant areas we notice that offers small behavior change for high return is that of “the timeout”.

In the fast-paced environment of modern operations, time is at a premium. Additional pauses during the day can have a cascading effect on efficiency and delivery of patient care.

Yet that mindset has led to the Timeout becoming a rushed “exercise in obligation”. Because it is required, in almost all institutions where we have worked, the timeout is completed in under 30 seconds with very little consistency or collective focus. Often times, while a nurse conducts the timeout, staff are still preparing for a case or tending to the patient.

This video was made as part of an ongoing Performance Program at a Heart & Vascular Institute. It describes a focus on “Take 2 Minutes for the Team”, an effort to slow down the Timeout and use it as a ritual to focus on excellence and the team itself.



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### RITUALS IN HIGH PERFORMING TEAMS

Rituals are at the core of pre-game, pre-mission, or pre-performance preparation. From locker room speeches for elite sports teams to mission pre-briefs that remind a military unit of the sacred nature of their work, these rituals aim to remind a team not only of the technical details, but of the greater purposes embedded in their work.

As Arena Labs works in High Performance Medicine™ as part of our The Practice, we regularly seek to identify and build tools and rituals that can easily be integrated into existing workflow.

In this example, moving from a “30 Second” sprint to “Taking 2 Minutes for the Team” is a very simple alteration to existing processes. We argue that the additional 90 seconds required is a simple way to integrate a focus on team, performance, and excellence in every single operation. In order for these tools to have legitimacy and viability, they must have support from key frontline staff leaders and hospital executives.