Recap of Healthcare SIG Meeting Wednesday, 18 June 2025

Meeting notes:

* **Introduction and Background:** Melody introduced herself to the group, sharing her background in biomedical engineering and her work at Fisher and Paykel Healthcare and Te Whatu Ora. She mentioned her upcoming move to the UK and expressed her gratitude for being invited to present her work.
  + **Background:** Melody shared her background in biomedical engineering, mentioning her work at Fisher and Paykel Healthcare and Te Whatu Ora. She highlighted her experience in medical devices and innovation teams.
  + **Upcoming Move:** Melody mentioned her upcoming move to the UK, expressing bittersweet feelings about leaving New Zealand and her excitement for new opportunities.
  + **Gratitude:** Melody expressed her gratitude for being invited to present her work, feeling privileged and honored to be part of the meeting.
* **Project Overview:** Melody presented her project on understanding unrecognized esophageal intubation using the SEIPS framework. She explained the clinical problem and the approach taken to address it, including the design of a semantically meaningful tray to help nurses remember equipment during airway intubation.
  + **Project Presentation:** Melody presented her project on understanding unrecognized esophageal intubation using the SEIPS framework, explaining the clinical problem and the approach taken to address it.
  + **Tray Design:** Melody discussed the design of a semantically meaningful tray to help nurses remember equipment during airway intubation, emphasizing the importance of human factors in the design process.
  + **Conference Presentation:** Melody shared that she had presented this work at the Chartered Institute of Human Factors and Ergonomics UK Conference earlier in the year.
* **Clinical Problem:** Melody explained the clinical problem of unrecognized esophageal intubation, where a tracheal tube is accidentally placed in the esophagus instead of the trachea, leading to severe hypoxemia or death. She highlighted the systemic nature of the issue and the importance of a systems perspective.
  + **Problem Explanation:** Melody explained the clinical problem of unrecognized esophageal intubation, where a tracheal tube is accidentally placed in the esophagus instead of the trachea, leading to severe hypoxemia or death.
  + **Systemic Nature:** Melody highlighted the systemic nature of the issue, emphasizing that there is no single root cause and the importance of a systems perspective in addressing the problem.
  + **Adverse Events:** Melody mentioned that there were adverse events, including deaths, in New Zealand last year due to unrecognized esophageal intubation.
* **SEIPS Framework:** Melody described the use of the SEIPS framework to model the interactions between different work factors that contribute to unrecognized esophageal intubation. She identified key themes related to equipment and timely access to equipment.
  + **Framework Description:** Melody described the use of the SEIPS framework to model the interactions between different work factors that contribute to unrecognized esophageal intubation.
  + **Key Themes:** Melody identified key themes related to equipment and timely access to equipment, highlighting the importance of these factors in preventing unrecognized esophageal intubation.
  + **System Deficiencies:** Melody discussed the identification of system deficiencies through the SEIPS framework, which helped to highlight areas for improvement in the clinical context.
* **Equipment Preparation Tray:** Melody discussed the design and testing of the equipment preparation tray, which aimed to increase the accuracy of equipment preparation and reduce delays. She shared the positive results of the testing, including increased completeness of equipment preparation and decreased time to identify missing equipment.
  + **Tray Design:** Melody discussed the design of the equipment preparation tray, which aimed to increase the accuracy of equipment preparation and reduce delays.
  + **Testing Results:** Melody shared the positive results of the testing, including a 33% increase in completeness of equipment preparation and a 43% decrease in the time taken to identify missing equipment.
  + **Usability Testing:** Melody described the formative usability testing conducted with ten nurses, highlighting the benefits of the new tray for both experienced and less experienced nurses.
* **Local Context and Collaboration:** Melody emphasized the importance of fitting solutions to the local context and collaborating with staff to empower them in the design process. She shared examples of how the ICU team initiated changes in other parts of their workflow based on what they learned from the project.
  + **Local Context:** Melody emphasized the importance of fitting solutions to the local context, noting that generic solutions may not be suitable for specific needs.
  + **Staff Collaboration:** Melody highlighted the importance of collaborating with staff to empower them in the design process, sharing examples of how the ICU team initiated changes in other parts of their workflow based on what they learned from the project.
  + **Empowerment:** Melody discussed how bringing staff along in the design journey empowered them to learn more about human factors and design thinking, leading to positive changes in their workflow.
* **Panel Discussion Planning:** Fiona and the team discussed the planning of the healthcare symposium and the importance of showcasing the value of human factors in healthcare. They considered potential speakers and topics for the panel discussion, aiming to make a strong impact on senior managers.
  + **Symposium Planning:** Fiona and the team discussed the planning of the healthcare symposium, emphasizing the importance of showcasing the value of human factors in healthcare.
  + **Potential Speakers:** The team considered potential speakers for the panel discussion, aiming to make a strong impact on senior managers and highlight the benefits of human factors.
* **Next Steps:** The team agreed to follow up on potential speakers for the symposium and to work on improving the website and promotional materials. They also discussed the need for clear messaging and collaboration to ensure the success of the event.
  + **Follow-Up:** The team agreed to follow up on potential speakers for the symposium, ensuring that the event has impactful and relevant presentations.
  + **Website Improvement:** The team discussed the need to work on improving the website and promotional materials to effectively promote the symposium and attract attendees.
  + **Clear Messaging:** The team emphasized the importance of clear messaging and collaboration to ensure the success of the event, aiming to convey the value of human factors in healthcare.

Follow-up tasks:

* **Healthcare Symposium:** Contact Nick to discuss the possibility of presenting the peripheral line infection control project using the seeps framework at the healthcare symposium. (Jo)
* **Healthcare Symposium:** Reach out to Kylie and Mike to confirm their availability to present the esophageal intubation project at the healthcare symposium. (Melody)
* **Website Update:** Meet with the team to review and update the website to ensure it is clear and functional before sending out more flyers. (Fiona, Leona)
* **Panel Discussion:** Schedule a meeting with Jo to discuss and plan the structure and questions for the panel discussion at the healthcare symposium. (Fiona)
* **Promotional Material:** Send out updated flyers for the healthcare symposium once the website has been reviewed and updated. (Fiona)
* **Paul Bowie Event:** Set up a meeting with Paul Bowie to discuss the development of a clinical human factors framework during his visit to Wellington. (Jo)
* **Peripheral Line Project:** Check with ACC and Nick to confirm permission to present the peripheral line infection control project at the healthcare symposium. (Jo)