



A Staff-Led Center of Excellence for Preventing Retained Surgical Items (RSI)

Transforming a Rural OR into a Model of High Reliability and Surgical Safety

Author: JohnRich R. Levine, DNP, DPA, DBA(c), MSN, MHA, MPA, BSChE, ABLit, APRN, NEA-BC, NPDA-BC, CCRN, CNOR, CSSM

Introduction

In rural operating rooms, resources may be limited, but accountability can be limitless.

Purpose

- RSI as a patient safety concern
- Rural resource constraints
- Need for standardized, staff-led approaches

Methods

A staff-led, multidisciplinary approach was used to develop a Center of Excellence focused on preventing retained surgical items. The initiative emphasized frontline engagement, standardized practices, education, and continuous feedback, aligned with the AORN Safe Surgery Together framework. High-reliability principles guided implementation and sustainability.

Education & Standardization

- RSI prevention education
- Standardized counting practices

Staff Engagement

- Frontline-driven ideas
- Shared ownership of safety

Implementation & Monitoring

- Audits and feedback
- Reinforcement of best practices

Key Outcomes

- Improved compliance
- Standardization achieved
- Reduction in near-misses
- Increased staff confidence
- Cultural improvements

Discussion

- Importance of staff-led ownership
- Cultural accountability
- Applicability to other rural facilities
- Lessons learned

Conclusion

- Rural ORs can achieve high reliability
- Culture matters more than resources
- This model is scalable

Acknowledgements

We gratefully acknowledge the leadership of Reeves Regional Health and the dedication of our Perioperative Services, Sterile Processing, Surgical Services, and Quality & Patient Safety teams. We also recognize the AORN Safe Surgery Together initiative and thank all frontline staff whose commitment made this work possible.

