

Abstract 45 Figure 2 Compliance of nurses and respiratory therapists to wean patient from supplemental O₂ by targeting SpO₂ 94–98%

patients by targeting SpO₂ of 94 to 98%^{1 2} with no or minimal oxygen supplement (≤ 2 liters) from 18% to 60% from July to December 2023.

Methods An evidence-based algorithm for oxygen prescription^{1 3} was created, followed by staff training. Institute for Healthcare Improvement (IHI) methodology was followed. The processes were 1) physicians' compliance to initiate prescription for oxygen therapy in Cerner upon admission and 2) nurses' compliance to wean patients from supplemental oxygen to room air or nasal cannula ≤ 2 liters/minute within 3 hours while ensuring their SpO₂ remained between 94% and 98%.

Results Patients managed effectively in SICU with minimal or no oxygen improved from 18% to over 80% (figure 1). The processes that contributed were improvement in oxygen prescription placement by physicians from 0% to over 60%, and the confidence gained by nurses and respiratory therapists to accept lesser and safer saturation improved from 20% to over 86% (figure 2). Other contributing factors were early initiation of spirometry and chest physiotherapy (improved from 0% to over 70%). Our intervention significantly reduced the consumption of oxygen from 42,270 litres/week to 4,770 litres/week.

Conclusion Oxygen is a lifeline for many patients but misusing it by targeting higher saturation^{1 3} without prescription leads to detrimental effects. We aimed to strike a balance between providing adequate oxygen therapy and preventing potential risks associated with hyperoxia³. This intervention helped optimize patient outcomes, enhanced SICU quality of care and contributed to reducing the cost of oxygen utilization. This might have helped reduce SICU patients' length of stay.

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Ethical Approval/IRB Statement This is a Quality improvement project initiated with the approval of Hamad General Hospital Quality Department and included as one of the VIP projects in SICU.

Disclosures and Acknowledgments The team members have nothing to disclose.

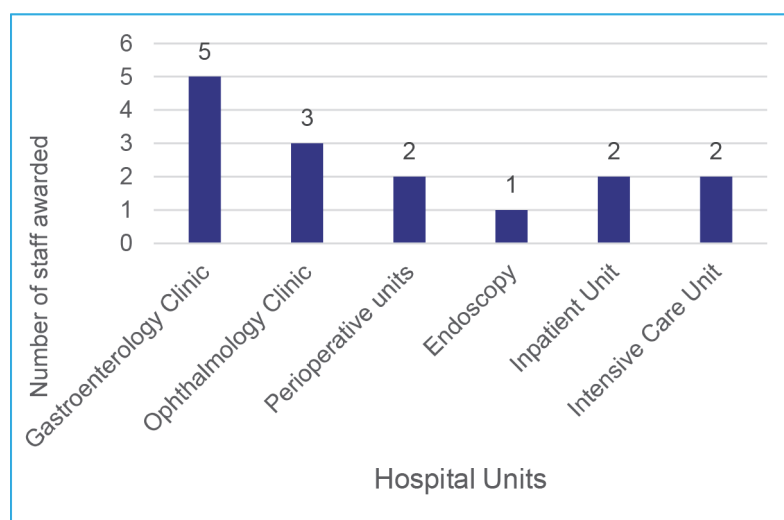
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CULTIVATING A SAFETY SYMPHONY THROUGH GOOD CATCH AND GREAT SAVE AWARDS IN AMBULATORY CARE CENTER

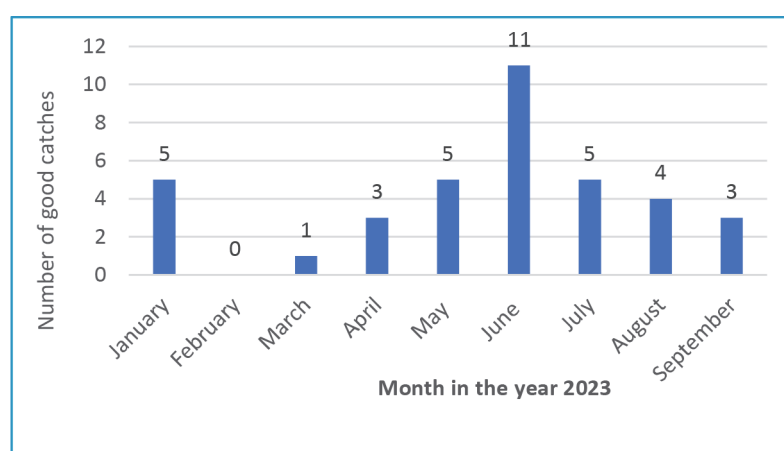
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Background Fear of blame leads to underreporting of incidents.¹ Celebrating good catches and great saves can create a more positive and supportive safety culture. Good Catch is defined as a near-miss event that did not reach the patient because of the thoughtful actions of an employee,² whereas Great Save is an event that reached a patient with minimal to no harm but required immediate action to contain the situation by the actions of an employee. The Ambulatory Care Center (ACC), which employs around 413 nurses, is also



Abstract 46 Figure 1 Unit staff recognized for great save awards in 2023 in the ambulatory care center, Doha, Qatar



Abstract 46 Figure 2 Monthly breakdown of successful incidents Good catch events reported in 2023 at the ambulatory care center, Doha, Qatar

facing underreporting challenges, echoing a prevalent issue in healthcare settings. Appreciation of managing potentially harmful events and reporting incidents can help reverse this mindset. By the end of 2023, we aimed to empower at least 10% of ACC nurses to report potential errors and success stories following the implementation of the Good Catch/Great Save awarding program.

Methods Starting in January 2023, we utilized PDSA (Plan-Do-Study-Act) cycles in identifying barriers and overcoming them by promoting a No Blame, No Shame culture.³ Educating staff on the importance of reporting incidents, emphasizing ACC's commitment to a blame-free culture empowered staff to report without fear. In June 2023 we celebrated Good Catches and Great Saves in ACC with gifts and certificates.

Results A 12.5% increase in reporting demonstrates that ACC is improving towards building a culture where staff feel empowered to report incidents without fear of blame. In 2023, 15 staff received Great Save awards (figure 1) and 37 Good Catch were reported (figure 2). Notably, 62% of reported 'Good Catches' were medication incidents whereas all reported 'Great Save' showcased nurse's quick response in saving patient's life.

Conclusion The rewarding strategy played a pivotal role in empowering staff nurses to report proactively, reinforcing a positive culture, and ensuring a safer and more productive work environment.

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Ethical Approval/IRB Statement This quality improvement project focused on internal process improvement without experimental interventions or external data collection therefore it was exempted from ethical approval or Institutional Review Board review and approved by the CEO of the Ambulatory Care Center, Doha, Qatar.

Disclosures and Acknowledgments Nothing to disclose and no conflict of interest.