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Media release

Patient safety

Better surgical outcomes thanks to new briefing

A research team at InselSpital, Bern University Hospital and the University of Neuchâtel, in collaboration with four hospital centers, studied the effects of structured briefings during the operation. The use of the “StOP? protocol” in the trial revealed relevant improvements in mortality rates, unplanned readmissions and length of hospital stays.

The benefits of effective communication in surgical teams are undisputed among experts. The aim of the present study by the Department of Visceral Surgery and Medicine at InselSpital, Bern University Hospital and the Institute of Work and Organizational Psychology at the University of Neuchâtel was to compare the quality of surgical outcomes with and without structured briefings during surgery.

Significantly better with structured briefings during surgery

While the results showed no differences in terms of surgical-site infection, procedures with structured intraoperative briefings performed significantly better in three areas: a reduction in mortality and unplanned rehospitalization rates as well as in the duration of hospital stays.

Extensive study at four centers

The study evaluated data from 8256 operations at four surgery centers between 2015 and 2018. The briefing – called the StOP? protocol – is conducted by the senior surgeon one or more times during surgery and requires active participation from the team members. The protocol enhances the exchange of information regarding the current status (St), objectives (O) and potential problems (P) while encouraging the team to ask questions if anything is unclear (?).

Key factors for better results

The present study resulted from a collaboration between specialists in healthcare and occupational psychology. Prof. em. Dr. **Franziska Tschan**, an expert in work and

organizational psychology at the University of Neuchâtel, explains: “*Structured information, between 30 and 90 seconds, communicated to the team at the right moment, together with the possibility to ask questions, can clearly and significantly improve collaboration in the operating room– to the patients’ benefit. Best of all: StOP? is free.*”

Further research needed to anchor it in team processes

The present study provides substantial evidence of consistently positive effects on surgical outcomes with the use of the StOP? protocol. Prof. Dr. med. **Guido Beldi**, head of the project and final author of the study, comments: “*Naturally, surgeons have given information to the team before, and this is not new in this case. What is new is that this is done systematically and every time. What is also new is the explicit participation by the entire team. We had postulated that the StOP? protocol would work but were then surprised at such clear results.*”

The next step is now to start a randomized study in 40 hospitals.

Experts:

- Prof. em. Dr. Franziska Tschan, Institute of Work and Organizational Psychology, University of Neuchâtel
- Prof. Dr. med. Guido Beldi, Department of Visceral Surgery and Medicine, Inselspital, Bern University Hospital.

Links:

- Original publication: Franziska Tschan, Sandra Keller, Norbert K Semmer, et al. Effects of structured intraoperative briefings on patient outcomes: multicentre before-and-after study, *British Journal of Surgery*, 2021; znab384, DOI: <https://doi.org/10.1093/bjs/znab384>
- Institutions, organizations:
 - [Work and organizational psychology \(unine.ch\)](http://www.unine.ch)
 - [Bauchzentrum Bern - Viszerale Chirurgie und Medizin - DAS Zentrum für den Bauch - Universitätsklinik für Viszerale Chirurgie und Medizin \(bauchzentrum-bern.ch\)](http://www.bauchzentrum-bern.ch)

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