ENSEÑANDO LA RCP
la importancia de los factores humanos

Alonso Mateos Rodríguez
PIRAMIDE DE MILLER

Hace (PRÁCTICA)

Demuestra como (LO HACE)

Sabe como (INTEGRA)

Sabe (RECUERDA)
Conocimientos

Saber

Hacer

Saber hacer

Habilidades

Actitudes
Aspectos prácticos

- Grupos de 6-8 alumnos
Debrifing

• Lo mas importante
• Varios tipos de debrifing
  – aPtitudinal
  – aCtitudinal → MEDICINA CENTRADA EN LA PERSONA
• *El propio alumno debe detectar sus necesidades*
LA TRIBUNA

Medicina centrada en la persona

VALLE CORONADO | ACTUALIZADO 12.05.2016 - 01:00

EN su artículo El paciente del siglo XXI ya nos adelanta Albert Jovell el cambio social en las relaciones sanitarias que, según él, incorporan a un enfermo que se sabe informado y
4th INTERNATIONAL CONGRESS OF PERSON CENTERED MEDICINE

PERSON CENTERED MEDICAL EDUCATION
AND THE GOALS OF HEALTH CARE

7-9 November, 2016 - MADRID, SPAIN
Campus of the Francisco de Vitoria University

SUMMA 112

Comunidad de Madrid
Explicada como...

“La Atención Centrada en la Persona, ve a las personas afectadas como iguales, como socios en la planeación, el desarrollo y la evaluación del cuidado de salud, para asegurar que se dan los servicios de la manera más adecuada para sus necesidades. Requiere que a la persona se le ponga en el centro de todas las decisiones relacionadas con su salud”

Health Foundation, UK
CÓMO

LO

HAGO
A Wearable Sensor for Unobtrusive, Long-Term Assessment of Electrodermal Activity

Ming-Zher Poh, Student Member, IEEE, Nicholas C. Swenson, and Rosalind W. Picard*, Fellow, IEEE
The ERC congress on education.

Reykjavik 24 – 25 September 2016

Brief leadership instructions improve cardiopulmonary resuscitation in a high-fidelity simulation: a randomized controlled trial.

Teamwork and Leadership in Cardiopulmonary Resuscitation

Sabina Hunziker, MD, MPH,*§ Anna C. Johansson, PhD,§ Franziska Tochan, PhD,†
Norbert K. Semmer, PhD,‡ Laura Rock, MD,§ Michael D. Howell, MD, MPH,§
Stephan Marsch, MD*

*Basel, Neuchâtel, and Bern, Switzerland, and Boston, Massachusetts

Table 1  Principles of Effective Leadership

A. Effective leadership principles for healthcare professionals.
   I. Consider existing leadership. Is it adequate and adapted to the situation?
   II. Make orienting remarks. Invite contributions.
   III. Ask questions that highlight perceived problems.
   IV. As a leader, avoid performing tasks and procedures yourself; instead assign tasks.
   V. Promote exchange of information.

B. Effective leadership instructions for teaching leadership (adapted from Hunziker et al. [10]).
   I. Assuming leadership is important: explaining the importance of leadership in a resuscitation situation.
   II. Announce to your colleagues what you do and tell your colleagues what they should do!
      Assign and distribute tasks according to the algorithm (e.g., “I am in charge of ventilation and you are in charge of chest compression.”)
   III. Decide what to do; be affirmative (e.g., “We defibrillate now.” instead of “Should we defibrillate?”).
   IV. Monitor adherence to instructions and to algorithm! Always ensure adherence to your instructions and to the algorithm. (Make sure that the person you advise really does what you told him or her to do, and check whether the team’s performance adheres to the algorithm; refer to the algorithm.)
   V. Make short and clear statements!
<table>
<thead>
<tr>
<th></th>
<th>Principles for Effective Teamwork to Avoid Medical Errors</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.</td>
<td>Voice specific findings; avoid diagnosing</td>
</tr>
<tr>
<td></td>
<td>The team member assuming the leadership role should encourage information sharing and ask questions as opposed to suggesting diagnoses, especially early on during the crisis.</td>
</tr>
<tr>
<td>II.</td>
<td>Think out loud—“talk to the room”</td>
</tr>
<tr>
<td></td>
<td>All members of the team are encouraged to verbalize ongoing observations as the crisis unfolds. Effective leadership can facilitate this process by querying the team for observations.</td>
</tr>
<tr>
<td>III.</td>
<td>Perform periodic reviews of quantitative information (drug dose, time, and response)</td>
</tr>
<tr>
<td></td>
<td>Noted changes should be verbalized to the team, highlighting the change in the status of the information. Effective leadership can facilitate this process by querying the team for observations.</td>
</tr>
<tr>
<td>IV.</td>
<td>Double-check crucial data</td>
</tr>
<tr>
<td></td>
<td>All members of the team are encouraged to double-check crucial data and tasks, and verbalize any doubts.</td>
</tr>
</tbody>
</table>
CRISIS RESOURCE MANAGEMENT

CRM KEY POINTS

- Call for Help Early
- Anticipate and Plan
- Know the Environment
- Use All Available Information
- Allocate Attention Wisely
- Mobilize Resources
- Use Cognitive Aids
- Communicate Effectively
- Distribute the Workload
- Establish Role Clarity
- Designate Leadership


http://creativecommons.org/licenses/by-nc-nd/3.0

SUMMA 112

SaludMadrid

Comunidad de Madrid

Universidad Francisco de Vitoria

UFV Madrid
CONCLUSIONES

• LA MEDICINA CENTRADA EN LA PERSONA EMPIEZA A HACERSE UN HUECO

• HAY UN CAMBIO FACIL DE LA MCP A LA MEDICINA CENTRADA EN EL ALUMNO

• MODELO CRM

• FACTORES HUMANOS