Facilitator Version

Open School

Video Activity: What Are the Dangers of Alert Fatigue?

(http://www.ihi.org/education/IHIOpenSchool/resources/Pages/Activities/Wachter-AlertFatigue.aspx)

Bob Wachter, MD, Professor and Interim Chairman of the Department of Medicine at the University of California, San Francisco (UCSF)

Facilitator Instructions

- Review the learning objectives and description with your group.
- Watch the video together (3 min 48 sec).
- As a group, discuss your reactions to the video, using the discussion questions as a guide.

Learning Objectives

At the end of this activity, you will be able to:

- Explain the concept of alert fatigue in health care.
- Discuss how alert fatigue can have a negative effect on patient safety.
- Recognize that an unnecessary alert can be dangerous in health care.

Description

In a given month, physicians at UCSF Medical Center get 30,000 alerts from different systems. And that’s nothing compared to pharmacists: They get 160,000. “And those are just the computerized pop-up boxes,” says Bob Wachter, Professor at UCSF and one of the world’s leading experts on patient safety.

In a new Open School video, Wachter shares memorable vignettes about alert fatigue, his take on the noisy systems we’ve created, and some potential solutions to the problem.

Key Topics

Health Information Technology (HIT); Redesign Processes and Systems; Person- and Family-Centered Care; Culture of Safety;
Related IHI Open School Online Courses

- PS 101: Fundamentals of Patient Safety
- PS 102: Human Factors and Safety

**Facilitator**, show the video on this page. For your group’s discussion after the video, feel free to adjust these questions and/or add your own.

**Discussion Questions**

1. Why can ignoring alerts have a negative effect on patient safety?

2. At the end of the video, Dr. Wachter says, “We touted alerts and alarms as being one of the main advantages of computerization. And I think right now, it’s a disaster.” Do you agree with him? Why or why not?

3. Have you or someone you’ve worked with ever ignored an alert? Why did you (or they) ignore the alert?

4. Dr. Wachter shares a potential solution to the problem — reviewing every alert to see if it’s valuable. Do you think that could ever happen at your institution? Why or why not?

5. Have you ever been a patient in a setting where alerts and alarms were going off all the time? How did they make you feel?