

How to audit the Safe Surgery Checklist - Requirements for Safe Surgery Checklist Compliance

The Safe Surgery Checklist (SSC) is a communication tool that supports verbal team-based interactions. Use of the tool is an AHS Level I Policy and an Accreditation Canada Required Organizational Practice (ROP). Regular compliance measurement is conducted at each site. The primary measurement of SSC compliance is the observational audit. A single, streamlined Observational Audit Form (10 questions) was introduced April 1, 2014 to replace the previous “standard” and “detailed” versions of the audit form. Please ensure you are using the most current audit form.

What does SSC compliance entail?

1. Completion of all three phases of the SSC:
 - **briefing** (before induction)
 - **time out** (before skin incision)
 - **debriefing** (before patient moves to recovery room)
2. Three members of the surgical team (**scrub nurse, surgeon, anesthetist**) must be present for each phase of the SSC.
 - Deviation from this is permitted only if an alternate version of the SSC has been approved for use in your site and/or surgical specialty.
 - During the briefing, the patient is considered part of the surgical team where appropriate. If the patient is unable to participate due to condition, or does not wish to participate the surgical team should still be denoted compliant.
3. Discussion of all relevant items within each phase.

Does everyone have to use the same version of the SSC?

No. There are 4 approved versions of the SSC. (Standard AHS version, C-Section, Ophthalmology, modified process with signed briefing note)

How do I audit a surgery when a patient is undergoing multiple procedures?

If **multiple surgical teams** are operating on a single patient undergoing multiple procedures, the respective surgeon, anesthesiologist and nurse must be present for briefing & time-out for each distinct procedure

When is the SSC considered complete?

The SSC is considered completed when the surgical team determines that all necessary steps at briefing, time-out, and debriefing, have been completed

Does a member of the surgical team have to be holding a physical copy of SSC to be considered compliant?

No

Should emergency cases be audited?

No

- As per AHS policy, **the most responsible health practitioner** will use discretion in determining which sections of the SSC will be completed, subject to whether risk in taking time to complete the checklist is greater than benefit to the patient.
- Documentation in the patient's **health record** regarding SSC completion is required for all cases

How many audits should be completed per quarter?

The number of audits is calculated by CQM based on surgical volumes at the site. These numbers are adjusted annually and shared with the site audit lead. Current numbers are included on the attached table.

What cases should be audited?

- Audited cases will be identified by your OR/Site manager or designate
- Surgeries should be selected across multiple specialties and on different days of the week

Who should complete the audits?

Identified auditors in each site are responsible for completing audits. Site leads should ensure forms are completed correctly. Incomplete or erroneous data will require revision prior to submission.

Where are audits submitted?

Audits are submitted to Clinical Quality Metrics

- E-mail: clinical.quality.metrics@albertahealthservices.ca
- Courier/Mail:
Clinical Quality Metrics, AHS
Suite 1200, Seventh Street Plaza, North Tower
10030 – 107 Street
Edmonton, AB T5J 3E4

When are audits due?

Audits must be received by CQM no later than 10 days after the end of the quarter. Sites are encouraged to submit audits throughout the audit period (i.e. monthly).

Where can I find more information on the audit process?

Clinical Quality Metrics can provide more information on auditing. Please contact Trina Roberts
780-342-1457
Trina.Roberts@albertahealthservices.ca

An e-learning module is also under development and will be made available through AHS Insite for ongoing auditor training.