



TITLE

**SAFE SURGERY CHECKLIST**

DOCUMENT #

PS-04

INITIAL APPROVAL DATE

November 1, 2011

APPROVAL LEVEL

Chief Executive Officer

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SPONSOR

Surgery Strategic Clinical Network

REVISION EFFECTIVE DATE

May 23, 2014

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Patient Safety

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May 23, 2017

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If you have any questions or comments regarding the information in this policy, please contact the Policy & Forms Department at [policy@albertahealthservices.ca](mailto:policy@albertahealthservices.ca). The Policy website is the official source of current approved policies, procedures and directives.

## PURPOSE

- To enhance safe surgical care by initiating and completing an approved Alberta Health Services safe surgery checklist for every **patient** undergoing a **surgical intervention** in an operating room in an Alberta Health Services facility or in a contracted non-hospital surgical facility.

## POLICY STATEMENT

- The *Safe Surgery Checklist* shall be used during all surgical interventions undertaken in Alberta Health Services operating rooms in Alberta Health Services facilities and contracted non-hospital surgical facilities.
- Compliance is measured by completion of all three stages of the surgical-briefing, surgical-time-out, and surgical-debriefing, and requires the participation of the entire **surgical team** during these phases, to ensure effective communication of the *Safe Surgery Checklist*.

## APPLICABILITY

Compliance with this policy is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary). This policy does not limit any legal rights to which you may otherwise be entitled.

Clinical Operations Executive Committee (COEC) endorsed full compliance with the Alberta Health Services *Safe Surgery Checklist* Policy.

## POLICY ELEMENTS

### 1. Completion of Safe Surgery Checklists

- 1.1 Surgical teams shall undertake a process to identify, establish, implement and complete an approved safe surgery checklist for all surgical interventions.
- 1.2 The attending surgeon or **alternative surgeon**, the attending anesthesiologist or **alternative anesthesiologist**, and circulating nurse or scrub nurse, shall be present for surgical-briefing, surgical-time-out and surgical-debriefing.
- 1.3 In circumstances where multiple surgical teams are present for a single patient undergoing multiple procedures, the attending surgeon or alternative surgeon, the attending anesthesiologist or alternative anesthesiologist, and circulating nurse or scrub nurse, shall be present for surgical-briefing and surgical-time-out for each distinct procedure.
- 1.4 Following the completion of multiple procedures for a single patient, the most responsible surgeon, the attending anesthesiologist and circulating nurse or scrub nurse shall all be present at surgical-debriefing. This means the identified surgical team responsible for each procedure.
- 1.5 Surgical-briefing, surgical-time-out and surgical-debriefing sections of the *Safe Surgery Checklist* shall be completed in the order they appear and prior to proceeding to the next step in the surgical procedure.
- 1.6 The *Safe Surgery Checklist* shall be considered complete for each patient when the surgical team determines that all of the necessary steps at surgical-briefing, surgical-time-out, and surgical-debriefing, have been completed.
- 1.7 In an emergency situation (i.e., a situation which requires health care that is necessary to preserve life, prevent serious physical or mental harm, or to alleviate severe pain), the **most responsible health practitioner** shall use discretion in determining which sections of the checklist shall be completed. This determination shall be subject to whether there is greater risk in taking the time required to complete the checklist than there is benefit to the patient. Documentation in the patient's **health record** regarding surgical-briefing, surgical-time-out and surgical-debriefing is required following an emergency situation.
- 1.8 Use of all three sections of the *Safe Surgery Checklist* (surgical-briefing, surgical-time-out and surgical-debriefing) shall be documented in the patient's health record (e.g., perioperative record).

### 2. Compliance Requirements

- 2.1 Zone executive leadership shall ensure that Zones have achieved full compliance. Regular compliance measurement of the *Safe Surgery Checklist* use shall be conducted at all surgical facilities across the province.

- 2.2 Quarterly compliance reporting shall be prepared by Clinical Quality Metrics and disseminated to the sites via the Zone Implementation Leads. Following review at the site level, reports shall be sent from the Zone Implementation Leads to Zone Executive. A provincial report shall also be sent to the Surgery Strategic Clinical Network.
- 2.3 Where sites or subspecialty groups feel the standard *Safe Surgery Checklist* is not appropriate, an application to modify the process shall be initiated (refer to Alberta Health Services *Safe Surgery Checklist: Developing Alternate Versions Procedure*, and Alberta Health Services *Safe Surgery Checklist Alternate Version Request for Approval*). Any draft modifications to the checklist shall be reviewed by the Surgery Strategic Clinical Network.
- 2.4 To support 100% compliance in all operating rooms across Alberta, the following steps should be undertaken by Zone executive leadership:
- a) Review and circulate daily compliance logs and quarterly audit reports from the Patient Safety Reporting and Learning System and the safe surgery checklist observational audits to ensure continued awareness of adverse events and good catches related to surgical procedures. (See Alberta Health Services *Reporting of Clinical Adverse Events, Close Calls & Hazards Policy* and Alberta Health Services *Immediate and Ongoing Management of Clinically Serious Adverse Events Guideline*.)
  - b) Review 'close call' data to demonstrate effectiveness of safe surgery checklist practices.
  - c) Support the use of the local surgical 'stop-the-line' policy, whereby any staff member can stop the process without penalty, to ensure that the appropriate steps are put in place to ensure a safe surgery process.
  - d) Ensure that Quality Assurance Review recommendations are appropriately socialized within the surgery services community and implemented where appropriate. Ensure knowledge and understanding of the Alberta Health Services 'just culture' principles.
- 2.5 When 100% compliance is not achieved, despite the actions stated in section 2.4, the following should be actioned by Zone executive leadership:
- a) Discussion with the individual(s) not maintaining compliance to establish a commitment to performing safely within an Alberta Health Services operating room, including the development of a plan and timelines to achieve full compliance.
- 2.6 Continued issues with compliance and related patient safety issues will be reviewed and managed through Alberta Health Services reporting structure for staff, and Alberta Health Services *Medical Staff Bylaws* and Alberta Health Services *Medical Staff Rules* for physicians as appropriate.

### 3. Accountabilities for Re-enforcing Compliance

- 3.1 The identified administrative lead for each site (e.g., Operating Room Manager) is responsible for ensuring accurate compliance reporting for the site. Failure to report compliance and audit results shall result in notification to the immediate supervisor.
- 3.2 Non-compliance shall be escalated to site leadership via the Zone Implementation Lead.

### 4. Monitoring the Use of the *Safe Surgery Checklist*

- 4.1 Alberta Health Services surgical teams undertaking surgical interventions shall monitor and report on the usage of the *Safe Surgery Checklist*.
- 4.2 All specialties undertaking surgical interventions shall be involved in safe surgery checklist quality monitoring activities, including compliance measurement and observational audits.
- 4.3 Persons responsible for observing during quality monitoring activities, shall review the patient's health record and confirm that the use of the *Safe Surgery Checklist* for surgical-briefing, surgical-time-out and surgical-debriefing, has been documented in the patient's health record (e.g., in the patient's perioperative record).
- 4.4 Settings undertaking surgical interventions shall collect and submit data on the usage of the *Safe Surgery Checklist* for every patient.
- 4.5 The facility-based **administrative lead for surgery** shall ensure that data collected on the usage of the *Safe Surgery Checklist* is submitted to the site administrative operational leadership (e.g., site lead) and Clinical Quality Metrics, on a quarterly basis.
- 4.6 Each site shall receive a quarterly compliance report demonstrating their use of the *Safe Surgery Checklist*.
- 4.7 The Surgery Strategic Clinical Network will review the quarterly provincial report; the quarterly provincial report will also be disseminated to Zone Executive Leadership and Clinical Operations Executive Committee (COEC).

### 5. Procedure for Developing Alternate Versions of the *Safe Surgery Checklist*

- 5.1 The Alberta Health Services *Safe Surgery Checklist: Developing Alternate Versions* Procedure shall be adhered to when developing alternate versions of the *Safe Surgery Checklist*. (See *SSC Alternate Version Development Process* Flowchart.)

### 6. Accreditation Canada – Tests for Compliance

- 6.1 A three-phase checklist shall be used in the Operating Room.

- 6.2 The surgical team shall use the checklist for every surgical procedure undertaken in operating rooms.
- 6.3 Ongoing monitoring for compliance with the *Safe Surgery Checklist* shall be completed.
- 6.4 The surgical team shall evaluate the use of the checklist and shall share results with staff and service providers.
- 6.5 The surgical team shall use results of the evaluation to support compliance with the use of the *Safe Surgery Checklist*.

## DEFINITIONS

**Administrative lead for surgery** means the most senior administrator (e.g., Executive Director, Director) of the operating room, or designate.

**Alternative anesthesiologist** means an anesthesiologist, Fellow or second anesthesiologist.

**Alternative surgeon** means a surgeon, Fellow or second surgeon.

**Health record** means the Alberta Health Services legal record of the patient's diagnostic, treatment and care information.

**Most responsible health practitioner** means the health practitioner who has responsibility and accountability for the specific treatment/procedure(s) provided to a patient and who is authorized by Alberta Health Services to perform the duties required to fulfill the delivery of such treatment/procedure(s) within the scope of his/her practice.

**Patient** means an adult or child who receives or has requested health care or services from Alberta Health Services and its health care providers or individuals authorized to act on behalf of Alberta Health Services. This term is inclusive of residents, clients and outpatients.

**Surgical intervention** means interventions that require at least one of the following:

- a major anesthetic, regardless of where they are provided (major anesthetics include general, spinal and epidural but not local); or
- an incision below the skin or eye into the underlying body structure or cavity; or
- a major anesthetic and fully equipped and staffed operating room, due to the condition or age of the patient.

**Surgical team(s)** means Alberta Health Services employees, and other persons working on behalf of or in conjunction with Alberta Health Services, including surgeons, anesthesiologists, nurses, technicians, and other support staff, involved in surgical interventions.

## REFERENCES

- Alberta Health Services *Code of Conduct*
- Alberta Health Services *Safe Surgery Checklist: Developing Alternate Versions Procedure*
- Alberta Health Services *Reporting of Clinical Adverse Events, Close Calls & Hazards Policy*

- Alberta Health Services *Immediate and Ongoing Management of Clinically Serious Adverse Events* Guideline
- Alberta Health Services *Medical Staff Bylaws*
- Alberta Health Services *Medical Staff Rules*
- Accreditation Canada Qmentum Program – *Perioperative Services & Invasive Procedures Standards*; January 6, 2014
- Alberta Health Services *Safe Surgery Checklist*
- Alberta Health Services *Safe Surgery Checklist Alternate Version Request for Approval*
- *SSC Alternate Version Development Process* Flowchart

## **REVISIONS**

May 23, 2014