

### **Monitoring implementation of the Safe Surgery Checklist**

The Safe Surgery Checklist (SSC) has been introduced by the Quality Improvement Secretariat (QIS) at the public hospitals recently. In addition to the checklist, QIS has provided copies of the user's guide that describes how to fill up the SSC. It is important to monitor the use of checklist at the hospitals to ensure patient safety, which is an important domain of quality of services. Following is the guideline for monitoring the use of safe surgery checklist.

- The Quality Improvement Committee (QIC) or OT team (each OT of the hospital) will assign a person (consultant, doctor or nurse) who will be responsible to fill up the monitoring form and report it to QIC and QIS (see below).
- The assigned person will randomly select 10% (at least 30 patients where number of surgeries are few) of the patients' clinical records who had surgery during last month. If there are less than 30 surgeries done at the hospitals in the month, select all the cases to fill up the monitoring form (F1 form – see below). Patients' clinical records can be selected from different surgical sections, such as general surgery, obstetrics and gynecology, eye, ENT, orthopedics etc.
- The patient's clinical record should have the Safe Surgery Checklist (SSC), if it was used. If the file does not have the SSC, it is assumed that SSC was not used during surgery. If the file has SSC, then fill up the relevant questions of the checklist.
- Finally, compile (using tally mark) the information and report to the QIC and QIS (using the reporting format, F2 form – see below). The QIC in their regular monthly meeting will discuss on this issue and try to improve the situation. QIC will also send monthly compiled report (only the compiled report, F2) to QIS.

**Ministry of Health and Family Welfare**  
Health Economics Unit  
Quality Improvement Secretariat

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**F1: Monitoring of Safe Surgery Checklist (SSC) form**

1. Name of hospital: \_\_\_\_\_

2. Case no.: \_\_\_\_\_

Date of surgery: \_\_\_\_\_

3. Type of surgery:

1. General

2. Obstetric

3. Orthopedic

4. ENT

5. Eye

6. Gynecology

7. Pediatric

8. Plastic

9. Others (specify): \_\_\_\_\_

4. Safe Surgery Checklist (SSC) used:

1. Yes

2. No (SSC not found with  
the clinical records)

**If used then,**

**Sing In:**

All relevant points were checked:

1. Yes

2. No

**Time out:**

All relevant points were checked:

1. Yes

2. No

**Sign out:**

All relevant points were checked:

1. Yes

2. No

Filled up **all** points of all sections (Sign  
In; Time Out and Sign Out)

1. Yes

2. No

Checklist was signed by all:

1. Yes

2. No

## Safe Surgery Checklist

### F2: Reporting form

Name of Hospital: \_\_\_\_\_

Month of reporting: \_\_\_\_\_

	No.	Percentage
No. of cases reviewed:		
Checklist used (checklist found with clinical records) during surgery:		
Filled up <b>all</b> components of “ <b>Sign In</b> ”:		
Filled up <b>all</b> components of “ <b>Time Out</b> ”:		
Filled up <b>all</b> components of “ <b>Sign Out</b> ”:		
Filled up <b>all</b> components of all sections (Sign In; Time Out and Sign Out)		

Name and signature: \_\_\_\_\_

Date: \_\_\_\_\_