Organisation name Site or unit		POLICY Surgical safety checklist and team pause	
Document ID	SRG-POL-001	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Policy · SRG-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 2.1

At a glance

- Every procedure has a surgical safety checklist, completed aloud by the team.
- The checklist has three pauses: sign-in, time-out before incision, and sign-out.
- Patient, procedure and body site are verified at the time-out.
- The checklist is completed before the procedure, not written up afterwards.
- Stop and get help straight away if: a procedure starts with no time-out, or the checklist is completed after the patient has left the theatre.

1. 1. Purpose

To make sure the team confirms the right patient, the right procedure and the right site together, at each pause (2.1).

2. 2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. 3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. 4. Background

The surgical safety checklist works only when the team says it out loud, together, at each pause. A checklist filed after the operation protects no one.

5. 5. Responsibilities

Role	Responsibility	Competence
Theatre manager	Owns the checklist and audits it	Management
Surgeon	Leads the time-out	Surgeon
Anaesthetist and nurse	Read and confirm each item aloud	Clinician

6. 6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. 7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. 8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. 9. Procedure

Step 1. Sign in.

- Before induction, the anaesthetist and nurse confirm identity, site marking, allergies and equipment aloud (SRG-FRM-001).

Key point: Before anaesthesia, not after.

Step 2. Time-out.

- Before incision, the whole team stops and says aloud: patient, procedure, site, antibiotics, critical events and imaging.
- Nobody starts until everyone has spoken.

Key point: The team pause is the check.

Step 3. Sign out.

- Before the patient leaves the theatre, the nurse reads out the instruments and swabs count, the specimens and any equipment problems.

Key point: Counts are read aloud.

10. 10. Decision points

- No decision points in this procedure.

11. 11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. 12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. 13. Monitoring

Measure	Target	Frequency	Owner	If not met
Procedures with checklist completed in all three pauses	100%	Monthly	Theatre manager	Escalate to chief executive
Procedures with time-out before incision	100%	Monthly	Theatre manager	Escalate to chief executive

14. 14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility's records policy years

15. 15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. 16. Related documents

ID	Title	Use
SRG-SOP-001	Surgical safety checklist procedure	Procedure
SRG-FRM-001	Surgical safety checklist record	Record
ID-FRM-001	Patient identification check log	Identity check

17. 17. Evidence

Reference	Note

E-009	ASF Expert Committee consensus. Based on the WHO Surgical Safety Checklist (2009).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. 18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

19. References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

Download this document as PDF