

Surgical safety checklist procedure

Standard operating procedure (SOP) | SRG-SOP-001

Document type	Standard operating procedure (SOP)
Title	Surgical safety checklist procedure
Document ID	{{facility.code}}-SRG-SOP-001
Version and status	1.0 Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
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Approver and signature	{{roles.clinical_director.name}}, Clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	None (new document)
Standards and criteria supported	Standard 2 (Operating Theatre and Surgical Safety), criterion 2.1
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Use the WHO checklist for every procedure, at all three pauses.
2. The checklist is read by a team member, not by memory.
3. A missing item stops the procedure until it is resolved.
4. Record each pause on the checklist record.

Stop and get help straight away if: a missing item (identity, site, antibiotic, counts or equipment) is not resolved before the procedure starts.

1. Purpose

To run the checklist the same way in every theatre, every time (2.1).

2. Scope

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

3. Definitions and abbreviations

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

4. Background and rationale

To run the checklist the same way in every theatre, every time (2.1).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Scrub nurse	Reads the checklist aloud and records the answers	Theatre nurse
Surgeon	Confirms the procedure and site	Surgeon

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

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

8. Before you start

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

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Prepare.	Check the consent form, the site marking and the imaging are available before the patient enters the theatre.	Ready before the pause.
2	Read aloud.	- Read each item aloud and wait for the answer. - Record the answer on SRG-FRM-001.	Aloud, every item.
3	Stop on a gap.	If an item is not met, do not start. Resolve it and read the item again.	A gap stops the operation.

Decision points

- No decision points in this procedure.

10. Special situations

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

11. Problems and escalation

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

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Checklists fully completed	100%	Monthly	Theatre manager	Escalate to chief executive

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_years}} years

14. Training and competence

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

15. Related documents

ID	Title	Relationship
SRG-FRM-001	Surgical safety checklist record	Record
HOS-REG-004	Rehearsal and drill record	Drill

16. Evidence

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

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval