Standard operating procedure (SOP) · SRG-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

**Supports:** 2.1

### At a glance

- Use the WHO checklist for every procedure, at all three pauses.
- The checklist is read by a team member, not by memory.
- A missing item stops the procedure until it is resolved.
- 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 the facility |
| When | Whenever the activity described is carried out |
| Does not apply to | Activities covered by another document listed in section 15 |

## 3. Definitions

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

## 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. Responsibilities

| Role | Responsibility | Competence |
|---|---|---|
| Scrub nurse | Reads the checklist aloud and records the answers | Theatre nurse |
| Surgeon | Confirms the procedure and site | Surgeon |

## 6. Materials and equipment

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

## 7. Safety

- 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

**Step 1. Prepare.**

- Check the consent form, the site marking and the imaging are available before the patient enters the theatre.

**Key point:** Ready before the pause.

**Step 2. Read aloud.**

- Read each item aloud and wait for the answer.

- Record the answer on SRG-FRM-001.

**Key point:** Aloud, every item.

**Step 3. Stop on a gap.**

- If an item is not met, do not start. Resolve it and read the item again.

**Key point:** A gap stops the operation.

## 10. Decision points

- No decision points in this procedure.

## 11. Special situations

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

## 12. Escalation

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

## 13. Monitoring

| Measure | Target | Frequency | Owner | If not met |
|---|---|---|---|---|
| Checklists fully completed | 100% | Monthly | Theatre manager | Escalate to chief executive |

## 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. Training

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

## 16. Related documents

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

## 17. Evidence

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

## 18. Change history

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

## E-learning for this document

- Ophthalmology & Day Surgery Safety (AMB-15)
- **Care & Treatment: Clinical Standards for Accreditation** (H-04)

## 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)

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