Measuring the impact of the Surgical Safety Checklist at the Jewish General Hospital

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A LITTLE ABOUT WHO WE ARE

- Teaching hospital (556 beds)
- 16 Operating Rooms
- Services
- Approx 14 000 surgeries per year
- SSC piloted June/July 2009 and implemented September 2009





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LA LISTE CHIRURGICALE DE SÉCURITÉ SURGICAL SAFETY CHECKLIST

Avant l'induction Before induction de l'anesthésie of anesthesia	Avant l'incision de la peau Before skin incision	Avant que le patient ne sorte de la salle d'opérationBefore patient leaves operating room	
À L'ARRIVÉE SIGN IN	PAUSE PRÉOPÉRATOIRE TIME OUT	À LA SORTIE SIGN OUT	
LE PATIENT A CONFIRMÉ : CONFIRMED: identité identity site de chirurgie site procédure procedure consentement consent	L'ÉQUIPE S'EST TEAM MEMBERS ARE IDENTIFIÉE. IDENTIFIED. LE CHIRURGIEN, THE SURGEON, L'ÉQUIPE D'ANESTHÉSIE ANAESTHESIA TEAM ET L'INFIRMIÈRE AND CIRCULATING EXTERNE CONFIRMENT UNRSE CONFIRM	L'INFIRMIÈRE CONFIRME AVEC L'ÉQUIPE : NURSE VERBALLY CONFIRMS WITH TEAM : Le nom de la procédure est enregistrée. The name of the procedure is recorded. L'identification et transport du spécimen. Identification and handling of specimen.	
<i>LE SITE EST MARQUÉ</i> 🗆 THE SITE IS MARKED	VERBALEMENT: VERBALLY: identité • identity	Le compte des instruments, Instrument, sponge, and des éponges et des aiguilles needle counts are correct	
EST CE QUE LE PATIENT A DOES THE PATIENT HAVE DES ALLERGIES ? ALLERGIES?	site de chirurgie • site procédure • procedure L'ÉQUIPE CHIRURGICALE SURGICAL TEAM Durée de la chirurgie □ Duration of surgery Pertes sanguines anticipées □ Anticipated blood loss Complications anticipées □ Anticipated complications	est correct (ou n/a). (or n/a). Problèmes d'équipement. Equipment problems?	
oui □ yes pas d'allergie connue □ no known allergy LA PROPHYLAXIE VTE VTE PROPHYLAXIS		Classification de plaie. UNOUND classification.	
oui 🗌 yes non – chirurgien averti 🗌 no – surgeon notified	L'ÉQUIPE D'ANESTHÉSIE ANESTHESIA TEAM Y a-t-il des inquiétudes Are there any specific patient	POST-OPÉRATOIRES. MANAGMENT CONCERNS ANTIBIOTIQUE POST-OP NEED FOR POST-OP	
INTUBATION DIFFICILE / RISQUE D'ASPIRATION ? non _ no oui – équipement / _ yes – equipment / assistance disponible assistance available	Are there any specific patient spécifiques pour le patient ? concerns? Échelle ASA ASA score La prophylaxie antibiotique donnée Est-ce qu'une 2° dose nécessaire ?	NÉCESSAIRE ? ANTIBIOTICS? OUI □ yes no □ no LA PROPHYLAXIE NEED FOR VTE	
RISQUE DE PERTE RISK OF >500 ml SANGUINE DE >500 ml ? BLOOD LOSS? Produits sanguins □ blood products disponible si nécessaire available if necessary	L'ÉQUIPE INFIRMIÈRE NURSING TEAM Badigeonage est sec et □ Prep is dry and field sterile. Ie champ est stérile. Tous équipements prêts □ All equipment ready for use. à être utilisés.	VTE NÉCESSAIRE ? PROPHYLAXIS? aui ves non no	
	NORMOTHERMIE - MESURES APPROPRIÉES PRISES NORMOTHERMIA MEASURES IN PLACE > 2 HEURES (GA SEULEMENT) oui □ yes no □ no		







How do we know that the surgical safety checklist is making a difference in *our* operating room?





STORIES FROM THE FIELD...

Cataract surgery.....

Removal of cyst

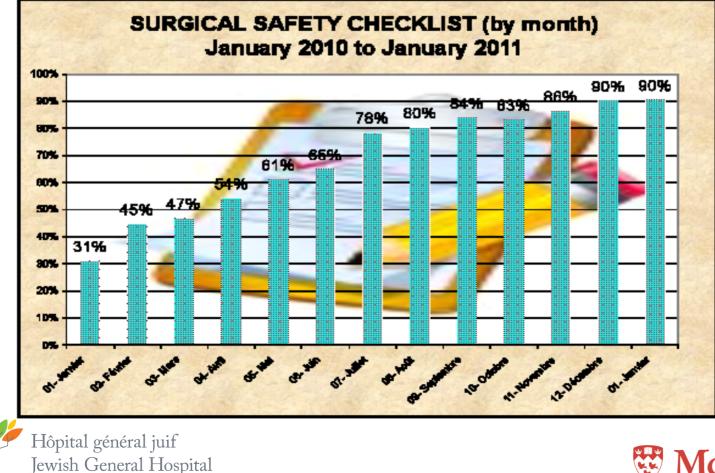




- Compliance
 - "Done", "Not Done"
 - Overall compliance 90%
 - What is this really measuring?
 - Is there a benefit?









Outcomes

- 160 chart review pre and post implementation
 - Antibiotic prophylaxis
 - VTE prophylaxsis





Pre = 169 Post = 143

Antibiotic prophylaxis

Jewish General Hospital

	Pre	Post	р
Overall	125/169 (74.0%)	72/143 (50.3%)	<.0001
Appropriately Given	56/83 (67.5%)	37/78 (47.4%) 0.00)3
Appropriately Withhe	ld 64/86 (74.4%)	36/65 (55.4%)	0.02
VTE prophylaxis	Pre	Post	р
Overall	145/169 (85.8%)	126/142 (88.7%)	0.4
Appropriately Given	2/22 (9.1%)	12/23 (52.2%)	0.003
Appropriately Withhe	ld 144/146 (98.6%)) 116/119 (97.5%)	1.0
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McGill

Process

- 25 procedure audit measuring each phase
- Additional questions:
 - Team participation
 - Patient history shared
 - Noise levels (1-5)
 - Good catches
 - Comments



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- Sign In: 22/25

 Pt ID, site, allergies, VTE completed 22/22
 Airway/bloods 7/22 not completed
- Time Out: 23/25
- Sign Out: 4/25





- Noise levels
 - 12 (low 1-2)
 - -5(3)
 - -3 (4-5)
- Team member participation (23/25)
- Patient History shared (2 not completed, 1 not shared)





- Good Catches
 - Allergy bracelet incomplete
 - Heparin s/c not given at sign in and requested at time out
 - Antibiotic prophylaxis given in one procedure due to patient history, not normally required – picked up in time out.





Comments

- No blood work avail for angioplasty
- One surgeon not used to time out
- Anaesthesia identified themselves, no other team members
- Decadron often ordered in time out
- Noise level so high nurse had to ask team to be quiet





• Comments

- Duties continue during time out e.g. prepping, gowning gloving, moving tables, putting on light handles etc
- Joke was made during time out by circulating nurse causing distraction to surgeon and interrupting time out





- Opportunities
 - VTE identified with '?'
 - Neck dissection with JP wound class 2 in sign out
 - Lack of familiarity with Sign Out





STORIES WORK - SHARE THEM WITH STAFF

- Surgery planned different to consent
- Checklist used, but equipment not ready
- Two specimens placed in same container





NEXT STEP

Observational Audits

 – e.g. Dr Lingard et al (2006) "Information exchange recording form"





Questions?



