

Dear Coordinator,

The implementation phase which is being monitored and assessed within Work Package 5 of the European Union Network for Patient Safety and Quality of Care (PaSQ) lasts one year (September 2013 – September 2014). The baseline questionnaire was administered in September 2013 and the endline questionnaire will be administered in September 2014.

This **self-assessment tool for the monitoring process** is provided to you, to use it on a voluntary basis between the baseline and the endline questionnaire.

Objective

The aim of the self-assessment tool is, to help you in the ongoing implementation process through supplying a material that will let you be aware of your achievements so far in surgical safety. The use of the tool is voluntary and for your internal use only.

Content

When you go through the questions, you probably will remember them. The reason behind is that the contents of the self-assessment tool are derived from the baseline questionnaire. For further background information on this Safe Clinical Practice, please refer to the Tool Box at the following link: <http://www.pasq.eu/Wiki/SCP/WorkPackage5ToolBoxes/SurgicalSafetyChecklist.aspx>.

Form

This tool is provided to you as a fillable PDF-form. The answers can be completed electronically. The filled forms can be saved on your computer and assigned with the dates. Responding to the questions takes approximately 10 – 15 minutes.

Please do not hesitate to get in touch with your PaSQ National Contact Point (see www.pasq.eu/Contact/NCP.aspx) in case you have any questions.

Level of implementation of the WHO Surgical Safety Checklist

a. Which implementation steps have been undertaken so far?

Note for completing:

For each statement, please select the most appropriate option. If the answers vary according to the area, you should tick more than one option; in this case please also tick the answer box in the far right column.

An example of “partly completed” for implementation step 1 could be that a team has been assembled but a meeting has not yet taken place.

	This has not (yet) been planned	This is planned but has not yet been completed	This has been partly completed	This has been fully completed	Please <u>additionally</u> tick this box, if this varies according to the area
1. An implementation team consisting of colleagues from the relevant disciplines ¹ has had first discussions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. A pilot test of the checklist has been conducted, e.g. in one operating room with one team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The pilot test has been evaluated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The use of the checklist has been expanded to at least one further area or patient group. ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹ The “relevant disciplines” are those disciplines involved in conducting the practice, e.g. surgeons from the participating departments, anaesthetists, ward and operating theatre nurses.

² In the case that a pilot test was not conducted but the checklist was implemented at once in the target areas, please tick “This has been fully completed”.

	This has not (yet) been planned	This is planned but has not yet been completed	This has been partly completed	This has been fully completed	Please additionally tick this box, if this varies according to the area
5. An evaluation plan has been developed to ensure that process and outcome measures are monitored and fed back to the staff on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. To which degree have the process steps of the practice been implemented?

Note for completing:

For each statement, please select the most appropriate option. If the answers vary according to the area, you have to tick more than one option; in this case please also tick the answer box in the far right column.

	Not at all implemented	Partly implemented	Fully implemented	Please additionally tick this box, if this varies according to the area
1. The process steps related to the phase “ <i>Before induction of anaesthesia</i> ” have been implemented (meaning that items from this phase are being verified and completed in the checklist).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The process steps related to the phase “ <i>Before skin incision</i> ” have been implemented (meaning that items from this phase are being verified and completed in the checklist).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The process steps related to the phase “ <i>Before patient leaves operating room</i> ” have been implemented (meaning that items from this phase are being verified and completed in the checklist).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. (A) designated checklist coordinator(s) lead(s) the checklist process to confirm the completion of each step.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Qualitative outcomes of implementation

c. For the following statements, please select the most appropriate option according to your current subjective assessment of the practice implementation.

Note for completing:

Please note that it is sufficient to provide your subjective assessment of these statements when answering this question. It is not essential that you evaluate these statements with instruments, e.g. staff questionnaires.

However, should you have data available which you have collected in a prior evaluation of the practice, you may of course use this to inform your selection of the answers.

	I do not agree	I agree somewhat	I agree	I agree strongly	Not applicable at this time
1. Senior leadership/ management (e.g. chiefs of surgery, anaesthesia and nursing departments, hospital management) continually demonstrate support for the checklist implementation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The physicians in the areas which have implemented the checklist are satisfied with the checklist.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The nurses in the areas which have implemented the checklist are satisfied with the checklist.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Surgical areas which are not currently using the checklist are intending to implement the checklist as well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	I do not agree	I agree somewhat	I agree	I agree strongly	Not applicable at this time
5. The level of patient involvement relating to the use of the checklist including the connected processes is optimal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Notes:

Date: