

Audit Ref No:	
Clinical Audit Report	
ICHT Assurance Assessments:	
Based on your assessment and commentary please provide a RAG rating risk assessment for the Trust position in this area. You may add comments if helpful. Amber or Red assessments will require a formal action plan owned by the relevant Division Q & S committee	
Low Risk / Substantial Assurance >90%	Based upon the auditors findings there is a robust series of internal controls in place, which at the time of review were being consistently applied.
Acceptable Risk / Reasonable Assurance 80-89%	Based upon the auditors findings there is a series of controls in place, however they are not achieved in a continuous and effective manner. Improvements are required to enhance the adequacy and effectiveness of the controls to mitigate risks.
Significant Risk / Limited Assurance 70-79%	Based upon the auditors findings the controls in place are not sufficient to ensure that risks are managed effectively. Significant improvements are required to improve the adequacy and effectiveness of the controls.
High risk / Significant deficiencies identified <70%	Based upon the auditors findings there is a fundamental breakdown or absence of core internal controls so the organization cannot rely upon them to manage risks effectively. Immediate action is required to improve the adequacy and effectiveness of controls.
AUDIT TITLE:	WHO 5 Steps to Safer Surgery – In theatres Trust Wide Audit Report Q3 2019/20
Report Author/ Audit Lead:	Louisa Pierce
Audit Sponsor:	William Gage
Audit Collection Period:	05.07.2019 – 13.09.2019
Which committee will the findings be presented to:	Invasive Procedures Committee and sub-group of Executive Quality Committee
Audit Presentation Date:	Sub-group of Executive Quality Committee – Invasive Procedures Committee –
EXECUTIVE SUMMARY	
Overall ICHT Assurance Assessment: <i>Insert colour code from above.</i>	Substantial Assurance (90%)

Audit Background:

In June 2008 the World Health Organization (WHO) launched a Global Patient Safety Challenge, “Safe Surgery Saves Lives”, to reduce the number of surgical deaths across the world.

The WHO Surgical Safety Checklist has been shown to improve outcomes in surgery by standardising care, reinforcing safety processes, e.g. identifying the patient and procedure, and fostering open communication. Like all tools, its effectiveness depends on skillful use.

The former National Patient Safety Agency (NPSA) led on the national implementation of the WHO Surgical Safety checklist for every patient undergoing a surgical procedure; which is a central part of the 5 Steps to Surgical Safety. The 5 Steps are:

- **Step One:** Team Brief: prior to commencement of operating/procedure list
- **Step Two:** Sign In/Time Out: for each patient on the list and before anesthesia/skin incision (can be carried out in conjunction with Time Out if anesthetist is not required for the procedure)
- **Step Three:** Change of Staff: a change of key personnel requires a new Time Out to occur
- **Step Four:** Sign out: for each patient on the list and before the patient leaves the procedure room
- **Step Five:** Team Debrief: at completion of operating/procedure list

In Q3, 2018/19 the ICHT corporate clinical audit team carried out an observational audit of staff compliance in the use of the WHO Safer Surgery checklist in conjunction with the WHO 5-Steps to Safer Surgery Policy. This re-audit forms part of the Trust priority clinical audit plan for 2019/20.

A new audit tool has been developed based on the WHO 5-Steps to Safer Surgery Policy and incorporating previous recommendations from last year’s report.

This report will highlight gaps and areas of risk in current practice however, divisions in partnership with specialties will be required to formulate local action plans based on the audit results so that performance in-theatre areas within the Trust can be improved.

Audit Ref No:

Detailed Findings of the Audit – OVERALL TRUST

AUDIT TITLE:

WHO 5 Steps to Safer Surgery – In theatres Trust Wide Audit Report Q3 2019/20

1. Introduction

This is a re-audit following on from the audit carried out in Q3, 2018/19 and forms part of the Trust priority Clinical audit plan for 2019/20. This re-audit was conducted as a large scale observational audit outside of the routine planned local WHO audit process.

This report pertains to audit data obtained in Q3, 2019/20, and is dedicated specifically to main theatre areas that use the WHO Checklist. This report offers comparison to results previously reported in Q3, 2018/19. The areas included are included in the table included here.

Specialty	Cases Audited
Renal	10
Neurosurgery - (Neurology and Neurosurgery)	14
Cardiothoracics - (Cardiac Surgery and Thoracic Surgery)	18
General Surgery - (General Surgery and Upper GI)	17
Hepatobiliary Surgery	7
Vascular Surgery	17
Ophthalmology	20
Urology	26
Gender	4
ENT - (ENT Head and Neck Surgery, ENT and ENT Oncology)	17
Breast Surgery	13
Orthopaedic Surgery	16
Plastics	10
Gynaecology	14
Obstetrics	18
Paediatric Surgery	14
Bariatric Surgery	10
Podiatry Surgery	9
Total	254

The use of the WHO check list in out-of-theatre environments was also audited, and has been reported as a two separate report.

This report detailing the findings of the audit will be reported to the Invasive Procedures Committee and sub-group of Executive Quality Committee.

Divisions are required to review results by specialty and implement divisional action plans in response to elements where there is currently a) high risk/significant deficiencies identified and b) significant risk/little assurance (these have been highlighted in red and orange in the report). Completed action plans will be received by the sub-group of Executive Quality Committee in December 2019. Any additional actions added to this report will be agreed at this meeting.

It is acknowledged that behaviours change when staff are aware they are being 'watched' as per the Hawthorne Effect and so this report refers to those witnessed behaviours.

The matters raised in this report are only those that came to the attention of the auditor/s during the course of the audit review and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report has been prepared for management's use.

2. Aims and Objectives

- The audit aims to assess compliance of staff in the use of the WHO Safer Surgery Checklist as detailed in the Trusts WHO 5 Steps to Safer Surgery Policy. The objective of which is to ensure that the in-theatre staff are using the checklist correctly and to ensure that standards are being maintained.
- The audit also aims to assess those areas where concern was raised in the previous audit cycle and whether improvements had been realised.

3. Methodology

- An observational audit was carried out by members of the corporate clinical audit team, as well as nominated theatre staff (theatre nurses, ODPs and HCAs) over a 10-week period. Care was taken to ensure staff did not audit areas they routinely work, to remove the potential for bias.
- An evaluation of the use of the checklist where it is used in-theatre areas was carried out against the 5 Steps to Safer Surgery policy. In addition to this where a change of key personnel occurred, and where a new Time Out should occur, this step was also measured within this audit.
- A revised audit tool was adopted for the audit with an additional question added in the Team Brief section 'Was this patient discussed in the Team Brief'. The 2 elements of 'was essential imaging displayed' and 'was all required equipment available' was separated out as compared to the 2018/19 report to more easily identify those potential problem areas. An additional question of 'if there was a change of staff, was the surgeon informed that a changeover count was being undertaken' was included. This audit tool was agreed and signed off at the Invasive Procedures group in June 2019.
- The in-theatre areas audited were: Renal Surgery, Neurosurgery – comprising of Neurology and Neurosurgery for the purposes of this report, Cardiothoracic Surgery – comprising of Cardiac Surgery and Thoracic Surgery for the purposes of this report, General Surgery – comprising of General Surgery and Upper GI, Hepatobiliary Surgery, Vascular Surgery, Ophthalmology, Urology, Gender, ENT – comprising of ENT Head and Neck surgery, ENT and ENT Oncology, Breast Surgery, Orthopaedics, Plastics, Gynaecology, Obstetrics, Paediatric Surgery
- It is noted that the flow of the theatre environment is such that there may have been instances where a Sign In of one patient is happening at the same time as the Time Out of another patient. Therefore, in certain instances not all aspects of the checklist could be observed. In these instances this data was not included in the results and therefore does not impact negatively on the overall assurance level for each speciality. Similarly, for lengthy cases where the Debrief may not have happened late into the evening.
- A total of 254 in-theatre cases were audited, using an agreed tool (see **section 10**).

Each element of each step has been scored using a bespoke dashboard to calculate an overall percentage compliance, or areas of risk that exist. The 6 areas are Safety Briefing, Sign In, Time Out, Change of Staff, Sign Out and Debrief

The results of the audit were used to calculate the overall compliance per question to allow for a better understanding of the areas of risk. The overall Trust compliance per question audited can be seen in the table above with the associated RAG rating.

The respective compliance brackets used to produce the RAG rating were:

>90%	Substantial Assurance
80-90%	Reasonable Assurance
70-79%	Limited Assurance
<70%	No Assurance

4. Key Findings & Results – OVERALL TRUST

Results for:	OVERALL TRUST RESULTS	FY 18/19 Q1 Audit (n=287)		Improvement	FY 19/20 Q2 Audit (n= 254)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	95%	▬	100%	97%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	89%		▴	93%	
	Was this patient discussed in the Team Brief?	N/A		-	99%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	99%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	99%		▾	94%	
	Was the patient's identity confirmed?	100%		▾	100%	
	Was the surgical site marked where applicable?	100%		▾	100%	
	Was the procedure confirmed?	100%		▾	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	96%	▬	100%	97%
	Did all team members stop what they were doing during the Time Out?	87%		▴	95%	
	Were all team members involved in the procedure present at Time Out?	90%		▴	96%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▾	98%	
	Was essential imaging displayed?	99%		▾	87%	
	Was all required equipment available?	99%		▴	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	97%		▴	100%	
	Were all countable items listed on the whiteboard?	96%		▴	100%	
Change of Staff	Was there a change of staff during the procedure?	12	60%	-	5	40%
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	50%		▾	20%	
	Was the primary operator present at the 2nd Time Out?	75%		▾	20%	
	Did the team conduct another instrument/swab count before continuing with the procedure?	55%		▾	60%	
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	60%	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	73%	90%	▴	85%	95%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▴	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	96%		▴	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	98%		▴	98%	
	Was the count led by the same designated lead at 'Time out'?	95%		▴	100%	
	Did the most Senior Operating Surgeon sign the checklist?	77%		▴	88%	
Debrief	Was there a Debrief at the end of the list?	87%	87%	▴	94%	94%
	Were the primary operator and anaesthetist (if applicable) both present?	86%		▴	93%	

OVERALL COMPLIANCE	91%
OVERALL COMPLIANCE	90%
OVERALL COMPLIANCE (comparable to 18/19)	90%

Site Specific Reports

	2018/19 Q1 Audit	Improvement	2019/20 Q3 Audit*
SMH&WEH	Reasonable Assurance	⇒	Reasonable Assurance
HH & QCCH	Substantial Assurance	⇒	Substantial Assurance
CXH	Substantial Assurance	⇒	Substantial Assurance

*excluding the 2 additional new questions “Was this patient discussed in the Team Brief” and “If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken” to ensure equivalence for comparison.

Results for:	OVERALL SMH & WEH	FY 18/19 Q1 Audit (n=116)		Improvement	FY 19/20 Q2 Audit (n=110)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	—	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	95%	—	100%	96%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	90%		88%		
	Was this patient discussed in the Team Brief?	N/A		100%		
Sign In	Did the Sign-in occur?	100%	100%	—	100%	99%
	Was the Sign in led by an Anaesthetist and an anaesthetic assistant?	99%		98%		
	Was the patient's identity confirmed?	100%		99%		
	Was the surgical site marked where applicable?	100%		100%		
	Was the procedure confirmed?	100%		99%		
	Was the consent confirmed?	100%		100%		
Time Out	Did a 'Time Out' occur?	100%	95%	—	100%	98%
	Did all team members stop what they were doing during the Time Out?	81%		97%		
	Were all team members involved in the procedure present at Time Out?	84%		98%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		100%		
	Was essential imaging displayed?	98%		91%		
	Was all required equipment available?	100%		100%		
	Was there a designated lead to count the instruments that were used?	100%		100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		100%		
	Were all countable items listed on the whiteboard?	97%		99%		
	Change of Staff	Was there a change of staff during the procedure?		10	57%	
If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?		50%	0%			
Was the primary operator present at the 2nd Time Out?		70%	0%			
Did the team conduct another instrument/swab count before continuing with the procedure?		50%	0%			
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?		N/A	0%			
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	66%	86%	▲	84%	95%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	99%		100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	95%		100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	98%		100%		
	Was the count led by the same designated lead at 'Time out'?	91%		100%		
	Did the most Senior Operating Surgeon sign the checklist?	71%		87%		
Debrief	Was there a Debrief at the end of the list?	84%	83%	▲	95%	93%
	Were the primary operator and anaesthetist (if applicable) both present?	82%		91%		

OVERALL COMPLIANCE **89%**

OVERALL COMPLIANCE **85%**

OVERALL COMPLIANCE (comparable to 18/19) **87%**

Results for:	OVERALL HH & QCCH	FY 18/19 Q1 Audit (n=61)		Improvement	FY 19/20 Q2 Audit (n=50)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	91%	▬	100%	98%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	82%		▲	96%	
	Was this patient discussed in the Team Brief?	N/A		-	98%	
Sign In	Did the Sign-in occur?	98%	99%	▲	100%	99%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	98%		▼	94%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▼	98%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	98%	▬	100%	97%
	Did all team members stop what they were doing during the Time Out?	98%		▼	90%	
	Were all team members involved in the procedure present at Time Out?	90%		▲	92%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	98%		▼	94%	
	Was essential imaging displayed?	100%		▼	96%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
Were all countable items listed on the whiteboard?	98%	▲	100%			
Change of Staff	Was there a change of staff during the procedure?	1	67%	-	1	50%
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	100%		▼	0%	
	Was the primary operator present at the 2nd Time Out?	100%		▼	0%	
	Did the team conduct another instrument/swab count before continuing with the procedure?	0%		▲	100%	
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	100%	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	44%	83%	▲	80%	92%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	98%		▲	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▼	96%	
	Was the count led by the same designated lead at 'Time out'?	97%		▲	98%	
	Did the most Senior Operating Surgeon sign the checklist?	56%		▲	78%	
Debrief	Was there a Debrief at the end of the list?	84%	84%	▲	92%	91%
	Were the primary operator and anaesthetist (if applicable) both present?	84%		▲	90%	

OVERALL COMPLIANCE **91%**

OVERALL COMPLIANCE **90%**

OVERALL COMPLIANCE (comparable to 18/19) **90%**

Results for:	OVERALL CXH	FY 18/19 Q1 Audit (n=110)		Improvement	FY 19/20 Q2 Audit (n=94)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	99%	99%	▲	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	96%	▬	100%	98%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	93%		▲	96%		
	Was this patient discussed in the Team Brief?	N/A		-	99%		
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	98%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▼	89%		
	Was the patient's identity confirmed?	100%		▬	100%		
	Was the surgical site marked where applicable?	99%		▲	100%		
	Was the procedure confirmed?	99%		▲	100%		
Time Out	Was the consent confirmed?	100%	96%	▬	100%	96%	
	Did a 'Time Out' occur?	100%		▬	100%		
	Did all team members stop what they were doing during the Time Out?	88%		▲	96%		
	Were all team members involved in the procedure present at Time Out?	95%		▲	96%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▼	98%		
	Was essential imaging displayed?	99%		▼	79%		
	Was all required equipment available?	99%		▲	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	93%		▲	99%		
Were all countable items listed on the whiteboard?	94%	▲	100%				
Change of Staff	Was there a change of staff during the procedure?	1	67%	-	3	50%	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	0%		▲	33%		
	Was the primary operator present at the 2nd Time Out?	100%		▼	33%		
	Did the team conduct another instrument/swab count before continuing with the procedure?	100%		▼	67%		
	If there was a change of staff, was the Surgeon informed that a change over count was being undertaken?	N/A		-	67%		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	96%	97%	▼	89%	97%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	95%		▲	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	95%		▲	98%		
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%		
Debrief	Did the most Senior Operating Surgeon sign the checklist?	96%	93%	▼	94%	96%	
	Was there a Debrief at the end of the list?	94%		▲	96%		
		OVERALL COMPLIANCE	94%			OVERALL COMPLIANCE	91%
						OVERALL COMPLIANCE (comparable to 18/19)	92%

Divisional Specific Reports

	2018/19 Q1 Audit	Improvement	2019/20 Q3 Audit*
MIC	Substantial Assurance	↓	Reasonable Assurance
SC&CS	Substantial Assurance	→	Substantial Assurance
WC&CS	Reasonable Assurance	↑	Substantial Assurance

*excluding the 2 additional new questions “Was this patient discussed in the Team Brief” and “If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken” to ensure equivalence for comparison.

Audit Ref No:								
<u>Action Plan – MIC</u>								
AUDIT TITLE:		WHO 5 Steps to Safer Surgery – In theatres Trust Wide Audit Report Q3 2019/20						
Report Author/ Audit Lead:		Louisa Pierce						
Audit Sponsor:		William Gage						
Which committee was the actions plan signed off:		Sub-group of Executive Quality Committee						
Sign-off Date:		TBC						
SMART/Management Action Plan/ Recommendations								
Action plan priority grading's:								
1	Urgent	Fundamental control issue on which action should be taken immediately	2	Important	Control issue on which action should be taken at the earliest opportunity	3	Routine	Control issue on which action should be taken.
Ref.	Gap identified/Risk area	Recommendation	Action	Priority	Action Lead/ Owner	Implementation/C ompletion Date	Management Comments (How will you know that actions are completed?)	
1.	To be completed by Division	To be completed by Division	To be completed by Division	Choose an item.	To be completed by Division	To be completed by Division	To be completed by Division	
(add further rows until action plan addresses all areas of high risk/significant deficiencies and significant risk/little assurance)								

5. Key Findings & Results – MIC

Results for:	OVERALL MIC	FY 18/19 Q1 Audit (n=27)		Improvement	FY 19/20 Q2 Audit (n=24)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	96%	▬	100%	99%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	92%		▴	100%		
	Was this patient discussed in the Team Brief?	N/A		▾	96%		
Sign In	Did the Sign-in occur?	96%	98%	▴	100%	98%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▾	88%		
	Was the patient's identity confirmed?	100%		▬	100%		
	Was the surgical site marked where applicable?	96%		▴	100%		
	Was the procedure confirmed?	96%		▴	100%		
	Was the consent confirmed?	100%		▬	100%		
Time Out	Did a 'Time Out' occur?	100%	97%	▬	100%	98%	
	Did all team members stop what they were doing during the Time Out?	89%		▴	100%		
	Were all team members involved in the procedure presesnt at Time Out?	96%		▴	100%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▾	92%		
	Was essential imaging displayed?	100%		▾	92%		
	Was all required equipment available?	100%		▬	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	84%		▴	100%		
	Were all countable items listed on the whiteboard?	100%		▬	100%		
Change of Staff	Was there a change of staff during the procedure?	0	N/A	-	2	25%	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		▾	0%		
	Was the primary operator present at the 2nd Time Out?	N/A		▾	0%		
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		▾	50%		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	50%		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	74%	91%	▴	88%	93%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▴	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▾	92%		
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%		
	Did the most Senior Operating Surgeon sign the checklist?	74%		▴	79%		
Debrief	Was there a Debrief at the end of the list?	84%	82%	▾	83%	81%	
	Were the primary operator and anaesthetist (if applicable) both present?	80%		▾	79%		
		OVERALL COMPLIANCE	95%			OVERALL COMPLIANCE	87%
						OVERALL COMPLIANCE (comparable to 18/19)	88%

Results for:	RENAL	FY 18/19 Q1 Audit (n=12)		Improvement	FY 19/20 Q2 Audit (n=10)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	92%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) A anaesthetist, ODP, Theatre nurses?	83%		▲	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	92%	99%	▲	100%	98%
	Was the Sign in led by an A anaesthetist and anaesthetic assistant?	100%		▼	90%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	100%	▬	100%	100%
	Did all team members stop what they were doing during the Time Out?	100%		▬	100%	
	Were all team members involved in the procedure present at Time Out?	100%		▬	100%	
	Did the Surgeon, A anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	100%		▬	100%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity? Were all countable items listed on the whiteboard?	100%		▬	100%	
Change of Staff	Was there a change of staff during the procedure?	0	N/A	-	0	N/A
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	N/A		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		N/A	N/A	
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	58%	86%	▲	80%	88%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▼	90%	
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%	
	Did the most Senior Operating Surgeon sign the checklist?	58%		▲	60%	
Debrief	Was there a Debrief at the end of the list?	75%	75%	▲	90%	85%
	Were the primary operator and anaesthetist (if applicable) both present?	75%		▲	80%	

OVERALL COMPLIANCE	94%
OVERALL COMPLIANCE	96%
OVERALL COMPLIANCE (comparable to 18/19)	96%

Results for:	NEUROSURGERY	FY 18/19 Q1 Audit (n=15)		Improvement	FY 19/20 Q2 Audit (n=14)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	100%	▬	100%	98%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	100%		▬	100%		
	Was this patient discussed in the Team Brief?	N/A		-	93%		
Sign In	Did the Sign-in occur?	100%	98%	▬	100%	98%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▾	86%		
	Was the patient's identity confirmed?	100%		▬	100%		
	Was the surgical site marked where applicable?	93%		▴	100%		
	Was the procedure confirmed?	93%		▴	100%		
	Was the consent confirmed?	100%		▬	100%		
Time Out	Did a 'Time Out' occur?	100%	94%	▬	100%	97%	
	Did all team members stop what they were doing during the Time Out?	80%		▴	100%		
	Were all team members involved in the procedure present at Time Out?	93%		▴	100%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▾	86%		
	Was essential imaging displayed?	100%		▾	86%		
	Was all required equipment available?	100%		▬	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	69%		▴	100%		
	Were all countable items listed on the whiteboard?	100%		▬	100%		
Change of Staff	Was there a change of staff during the procedure?	0	N/A	▴	2	25%	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		▾	0%		
	Was the primary operator present at the 2nd Time Out?	N/A		▾	0%		
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		▾	50%		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	50%		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	87%	96%	▴	93%	96%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▾	93%		
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%		
	Did the most Senior Operating Surgeon sign the checklist?	87%		▴	93%		
Debrief	Was there a Debrief at the end of the list?	92%	89%	▾	79%	79%	
	Were the primary operator and anaesthetist (if applicable) both present?	85%		▾	79%		
		OVERALL COMPLIANCE	95%			OVERALL COMPLIANCE	87%
						OVERALL COMPLIANCE (comparable to 18/19)	88%

Audit Ref No:								
<u>Action Plan – SCCS</u>								
AUDIT TITLE:		WHO 5 Steps to Safer Surgery – In theatres Trust Wide Audit Report Q3 2019/20						
Report Author/ Audit Lead:		Louisa Pierce						
Audit Sponsor:		William Gage						
Which committee was the actions plan signed off:		Sub-group of Executive Quality Committee						
Sign-off Date:		TBC						
SMART/Management Action Plan/ Recommendations								
Action plan priority grading's:								
1	Urgent	Fundamental control issue on which action should be taken immediately	2	Important	Control issue on which action should be taken at the earliest opportunity	3	Routine	Control issue on which action should be taken.
Ref.	Gap identified/Risk area	Recommendation	Action	Priority	Action Lead/ Owner	Implementation/C completion Date	Management Comments (How will you know that actions are completed?)	
1.	To be completed by Division	To be completed by Division	To be completed by Division	Choose an item.	To be completed by Division	To be completed by Division	To be completed by Division	
(add further rows until action plan addresses all areas of high risk/significant deficiencies and significant risk/little assurance)								

6. Key Findings & Results – SCCS

Results for:	OVERALL SCCS	FY 18/19 Q1 Audit (n=207)		Improvement	FY 19/20 Q2 Audit (n=184)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	95%	▬	100%	97%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	89%		92%			
Sign In	Was this patient discussed in the Team Brief?	N/A	100%	-	100%	99%	
	Did the Sign-in occur?	100%		▬	100%		
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▾	95%		
	Was the patient's identity confirmed?	100%		▬	100%		
	Was the surgical site marked where applicable?	100%		▾	99%		
	Was the procedure confirmed?	100%		▬	100%		
Time Out	Was the consent confirmed?	100%	96%	▬	100%	97%	
	Did a 'Time Out' occur?	100%		▬	100%		
	Did all team members stop what they were doing during the Time Out?	87%		▴	95%		
	Were all team members involved in the procedure present at Time Out?	88%		▴	97%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▾	99%		
	Was essential imaging displayed?	98%		▾	85%		
	Was all required equipment available?	98%		▴	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	99%		▴	99%		
	Were all countable items listed on the whiteboard?	96%		▴	99%		
Change of Staff	Was there a change of staff during the procedure?	9	67%	-	3	50%	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	56%		▾	33%		
	Was the primary operator present at the 2nd Time Out?	89%		▾	33%		
	Did the team conduct another instrument/swab count before continuing with the procedure?	56%		▴	67%		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	67%		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	75%	90%	▴	83%	95%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	94%		▴	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	97%		▴	99%		
	Was the count led by the same designated lead at 'Time out'?	96%		▴	100%		
	Did the most Senior Operating Surgeon sign the checklist?	78%		▴	88%		
Debrief	Was there a Debrief at the end of the list?	88%	87%	▴	96%	95%	
	Were the primary operator and anaesthetist (if applicable) both present?	87%		▴	94%		
		OVERALL COMPLIANCE	92%			OVERALL COMPLIANCE	91%
						OVERALL COMPLIANCE (comparable to 18/19)	92%

Results for:	CARDIOTHORACIC	FY 18/19 Q1 Audit (n=22)		Improvement	FY 19/20 Q2 Audit (n=)	
		Individual Measure Compliance Rate	Overall Compliance Rate		18	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	89%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	77%		▬	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	98%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▾	90%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	96%	▬	100%	98%
	Did all team members stop what they were doing during the Time Out?	100%		▾	94%	
	Were all team members involved in the procedure present at Time Out?	77%		▴	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	95%		▾	94%	
	Was essential imaging displayed?	100%		▾	89%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
	Were all countable items listed on the whiteboard?	95%		▴	100%	
	Change of Staff	Was there a change of staff during the procedure?		0	N/A	
If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?		N/A	▾	0%		
Was the primary operator present at the 2nd Time Out?		N/A	▾	0%		
Did the team conduct another instrument/swab count before continuing with the procedure?		N/A	▾	100%		
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?		N/A	-	100%		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	50%	84%	▴	89%	95%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	95%		▴	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▾	94%	
	Was the count led by the same designated lead at 'Time out'?	95%		▴	100%	
	Did the most Senior Operating Surgeon sign the checklist?	64%		▴	89%	
	Was there a Debrief at the end of the list?	82%		▴	100%	
Debrief	Were the primary operator and anaesthetist (if applicable) both present?	82%	82%	▴	100%	100%

OVERALL COMPLIANCE	93%	OVERALL COMPLIANCE	92%
		OVERALL COMPLIANCE (comparable to 18/19)	91%

Results for:	GENERAL	FY 18/19 Q1 Audit (n=24)		Improvement	FY 19/20 Q2 Audit (n=17)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	100%	▬	100%	94%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	100%		▾	82%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	99%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▾	94%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	93%	▬	100%	97%
	Did all team members stop what they were doing during the Time Out?	67%		▴	88%	
	Were all team members involved in the procedure present at Time Out?	79%		▴	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	95%		▾	88%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
	Were all countable items listed on the whiteboard?	100%		▬	100%	
Change of Staff	Was there a change of staff during the procedure?	2	100%	-	0	N/A
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	100%		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	100%		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	100%		N/A	N/A	
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	75%	90%	▴	100%	100%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	96%		▴	100%	
	Was the count led by the same designated lead at 'Time out'?	83%		▴	100%	
	Did the most Senior Operating Surgeon sign the checklist?	88%		▴	100%	
Debrief	Was there a Debrief at the end of the list?	79%	77%	▴	82%	82%
	Were the primary operator and anaesthetist (if applicable) both present?	75%		▴	82%	

OVERALL COMPLIANCE	94%
OVERALL COMPLIANCE	97%
OVERALL COMPLIANCE (comparable to 18/19)	97%

Results for:	HEPATOBIILIARY	FY 18/19 Q1 Audit (n=6)		Improvement	FY 19/20 Q2 Audit (n=7)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%		100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	83%		100%	100%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	67%			100%		
	Was this patient discussed in the Team Brief?	N/A		-	100%		
Sign In	Did the Sign-in occur?	100%	100%		100%	100%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%			100%		
	Was the patient's identity confirmed?	100%			100%		
	Was the surgical site marked where applicable?	100%			100%		
	Was the procedure confirmed?	100%			100%		
	Was the consent confirmed?	100%			100%		
Time Out	Did a 'Time Out' occur?	100%	98%		100%	97%	
	Did all team members stop what they were doing during the Time Out?	100%			86%		
	Were all team members involved in the procedure present at Time Out?	83%			100%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%			86%		
	Was essential imaging displayed?	100%			100%		
	Was all required equipment available?	100%			100%		
	Was there a designated lead to count the instruments that were used?	100%			100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%			100%		
	Were all countable items listed on the whiteboard?	100%			100%		
Change of Staff	Was there a change of staff during the procedure?	0	N/A	-	0	N/A	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		N/A	N/A		
	Was the primary operator present at the 2nd Time Out?	N/A		N/A	N/A		
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		N/A	N/A		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	0%	67%		71%	93%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%			100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%			100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%			100%		
	Was the count led by the same designated lead at 'Time out'?	100%			100%		
	Did the most Senior Operating Surgeon sign the checklist?	0%			86%		
Debrief	Was there a Debrief at the end of the list?	100%	100%		100%	100%	
	Were the primary operator and anaesthetist (if applicable) both present?	100%			100%		
		OVERALL COMPLIANCE	90%			OVERALL COMPLIANCE	97%
						OVERALL COMPLIANCE (comparable to 18/19)	97%

Results for:	VASCULAR	FY 18/19 Q1 Audit (n=18)		Improvement	FY 19/20 Q2 Audit (n=17)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	97%	▬	100%	92%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	94%		▼	76%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	99%	▬	100%	100%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	94%		▲	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	99%	▬	100%	93%
	Did all team members stop what they were doing during the Time Out?	100%		▼	94%	
	Were all team members involved in the procedure present at Time Out?	94%		▲	94%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	100%		▼	59%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity? Were all countable items listed on the whiteboard?	94%		▲	94%	
Change of Staff	Was there a change of staff during the procedure?	3	22%	-	1	0%
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	0%		▬	0%	
	Was the primary operator present at the 2nd Time Out?	67%		▼	0%	
	Did the team conduct another instrument/swab count before continuing with the procedure?	0%		▬	0%	
	If there was a change of staff, was the Surgeon informed that a change over count was being undertaken?	N/A		-	0%	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	33%	77%	▲	100%	100%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	94%		▲	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%	
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%	
	Did the most Senior Operating Surgeon sign the checklist?	33%		▲	100%	
Debrief	Was there a Debrief at the end of the list?	72%	69%	▲	100%	100%
	Were the primary operator and anaesthetist (if applicable) both present?	67%		▲	100%	

OVERALL COMPLIANCE **84%**

OVERALL COMPLIANCE **84%**

OVERALL COMPLIANCE (comparable to 18/19) **87%**

Results for:	OPHTHALMOLOGY	FY 18/19 Q1 Audit (n=19)			FY 19/20 Q2 Audit (n=20)	
		Individual Measure Compliance Rate	Overall Compliance Rate	Improvement	Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	95%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	89%		▲	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	100%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	100%	▬	100%	100%
	Did all team members stop what they were doing during the Time Out?	100%		▬	100%	
	Were all team members involved in the procedure present at Time Out?	100%		▬	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	100%		▬	100%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
Change of Staff	Were all countable items listed on the whiteboard?	100%	N/A	▬	100%	N/A
	Was there a change of staff during the procedure?	0		-	0	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	N/A		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		N/A	N/A	
Sign Out	If there was a change of staff, was the Surgeon informed that a change over count was being undertaken?	N/A	100%	-	N/A	74%
	Was the 'Sign Out' led by the most Senior Operating Practitioner?	100%		▼	10%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%	
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%	
Debrief	Did the most Senior Operating Surgeon sign the checklist?	100%	100%	▼	35%	90%
	Was there a Debrief at the end of the list?	100%		▬	100%	
	Were the primary operator and anaesthetist (if applicable) both present?	100%		▼	80%	

OVERALL COMPLIANCE **100%**

OVERALL COMPLIANCE **94%**

OVERALL COMPLIANCE (comparable to 18/19) **93%**

Results for:	UROLOGY	FY 18/19 Q1 Audit (n=26)		Improve ment	FY 19/20 Q2 Audit (n=)	
		Individual Measure Compliance Rate	Overall Compliance Rate		26	Individual Measure Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	96%	96%	▲	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	98%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	96%		▲	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	100%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	96%	▬	100%	99%
	Did all team members stop what they were doing during the Time Out?	81%		▲	100%	
	Were all team members involved in the procedure present at Time Out?	96%		▲	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	95%		▼	92%	
	Was all required equipment available?	95%		▲	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	96%		▲	96%	
	Were all countable items listed on the whiteboard?	100%		▬	100%	
	Change of Staff	Was there a change of staff during the procedure?		0	N/A	
If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?		N/A	N/A	N/A		
Was the primary operator present at the 2nd Time Out?		N/A	N/A	N/A		
Did the team conduct another instrument/swab count before continuing with the procedure?		N/A	N/A	N/A		
Sign Out	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A	95%	-	N/A	99%
	Was the 'Sign Out' led by the most Senior Operating Practitioner?	88%		▲	96%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	96%		▲	100%	
	Did a Registered practitioner verbally confirm with the team that instrument, sharps and swabs counts have been completed?	100%		▬	100%	
	Was the count led by the same designated lead at 'Time out'?	96%		▲	100%	
Debrief	Did the most Senior Operating Surgeon sign the checklist?	88%	92%	▲	96%	100%
	Was there a Debrief at the end of the list?	92%		▲	100%	
		OVERALL COMPLIANCE 96%		OVERALL COMPLIANCE 99%		
				OVERALL COMPLIANCE (comparable to 18/19) 99%		

Results for:	GENDER	FY 18/19 Q1 Audit (n=4)		Improvement	FY 19/20 Q2 Audit (n=)		4
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	—	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	100%	—	100%	100%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	100%		—	100%		
	Was this patient discussed in the Team Brief?	N/A		-	100%		
Sign In	Did the Sign-in occur?	100%	100%	—	100%	100%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		—	100%		
	Was the patient's identity confirmed?	100%		—	100%		
	Was the surgical site marked where applicable?	100%		—	100%		
	Was the procedure confirmed?	100%		—	100%		
	Was the consent confirmed?	100%		—	100%		
Time Out	Did a 'Time Out' occur?	100%	100%	—	100%	94%	
	Did all team members stop what they were doing during the Time Out?	100%		—	100%		
	Were all team members involved in the procedure present at Time Out?	100%		—	100%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		—	100%		
	Was essential imaging displayed?	100%		▼	50%		
	Was all required equipment available?	100%		—	100%		
	Was there a designated lead to count the instruments that were used?	100%		—	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		—	100%		
	Were all countable items listed on the whiteboard?	100%		—	100%		
	Change of Staff	Was there a change of staff during the procedure?		0	N/A		
If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?		N/A	N/A	N/A			
Was the primary operator present at the 2nd Time Out?		N/A	N/A	N/A			
Did the team conduct another instrument/swab count before continuing with the procedure?		N/A	N/A	N/A			
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?		N/A	-	N/A			
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	100%	100%	▼	75%	92%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		—	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		—	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		—	100%		
	Was the count led by the same designated lead at 'Time out'?	100%		—	100%		
	Did the most Senior Operating Surgeon sign the checklist?	100%		▼	75%		
Debrief	Was there a Debrief at the end of the list?	100%	100%	▼	75%	75%	
	Were the primary operator and anaesthetist (if applicable) both present?	100%		▼	75%		
		OVERALL COMPLIANCE	100%			OVERALL COMPLIANCE	94%
						OVERALL COMPLIANCE (comparable to 18/19)	94%

Results for:	BREAST	FY 18/19 Q1 Audit (n=15)		Improvement	FY 19/20 Q2 Audit (n=13)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	100%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	100%		▬	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	100%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	99%	▬	100%	94%
	Did all team members stop what they were doing during the Time Out?	100%		▼	77%	
	Were all team members involved in the procedure present at Time Out?	100%		▼	77%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	93%		▼	92%	
	Was all required equipment available?	93%		▲	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
Change of Staff	Were all countable items listed on the whiteboard?	100%	N/A	▬	100%	N/A
	Was there a change of staff during the procedure?	0		-	0	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	N/A		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		N/A	N/A	
Sign Out	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A	100%	-	N/A	95%
	Was the 'Sign Out' led by the most Senior Operating Practitioner?	100%		▼	85%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%	
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%	
Debrief	Did the most Senior Operating Surgeon sign the checklist?	100%	100%	▼	85%	100%
	Was there a Debrief at the end of the list?	100%		▬	100%	
	Were the primary operator and anaesthetist (if applicable) both present?	100%		▬	100%	

OVERALL COMPLIANCE **99%**

OVERALL COMPLIANCE **97%**

OVERALL COMPLIANCE (comparable to 18/19) **97%**

Results for:	ORTHOPAEDICS	FY 18/19 Q1 Audit (n=18)		Improvement	FY 19/20 Q2 Audit (n=16)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	92%	▬	100%	94%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	83%		▾	81%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	97%
	Was the Sign in led by an Anaesthetist and an aesthetic assistant?	100%		▾	81%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
Time Out	Was the consent confirmed?	100%	96%	▬	100%	99%
	Did a 'Time Out' occur?	100%		▬	100%	
	Did all team members stop what they were doing during the Time Out?	83%		▲	100%	
	Were all team members involved in the procedure present at Time Out?	89%		▲	94%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	100%		▬	100%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
Change of Staff	Did the team count any and all items that have the potential to be retained within a body cavity?	94%	100%	▲	100%	N/A
	Were all countable items listed on the whiteboard?	100%		▬	100%	
	Was there a change of staff during the procedure?	1		-	0	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	100%		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	100%		N/A	N/A	
Sign Out	Did the team conduct another instrument/swab count before continuing with the procedure?	100%	94%	N/A	N/A	95%
	If there was a change of staff, was the Surgeon informed that a change over count was being undertaken?	N/A		-	N/A	
	Was the 'Sign Out' led by the most Senior Operating Practitioner?	83%		▾	75%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▾	94%	
Debrief	Was the count led by the same designated lead at 'Time out'?	94%	100%	▲	100%	100%
	Did the most Senior Operating Surgeon sign the checklist?	89%		▲	100%	
	Was there a Debrief at the end of the list?	100%		▬	100%	
	Were the primary operator and anaesthetist (if applicable) both present?	100%	100%	▬	100%	100%

OVERALL COMPLIANCE **97%**

OVERALL COMPLIANCE **97%**

OVERALL COMPLIANCE (comparable to 18/19) **97%**

Results for:	PLASTICS	FY 18/19 Q1 Audit (n=12)		Improvement	FY 19/20 Q2 Audit (n=10)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	88%	▬	100%	87%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	75%		60%			
Sign In	Was this patient discussed in the Team Brief?	N/A		-	100%		
	Did the Sign-in occur?	100%	100%	▬	100%	97%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	80%		
	Was the patient's identity confirmed?	100%		▬	100%		
	Was the surgical site marked where applicable?	100%		▬	100%		
	Was the procedure confirmed?	100%		▬	100%		
Was the consent confirmed?	100%	▬		100%			
Time Out	Did a 'Time Out' occur?	100%	98%	▬	100%	93%	
	Did all team members stop what they were doing during the Time Out?	92%		▬	90%		
	Were all team members involved in the procedure present at Time Out?	92%		▬	100%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%		
	Was essential imaging displayed?	100%		▬	50%		
	Was all required equipment available?	100%		▬	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%		
Change of Staff	Were all countable items listed on the whiteboard?	100%		▬	100%		
	Was there a change of staff during the procedure?	2	83%	-	1	100%	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	100%		▬	100%		
	Was the primary operator present at the 2nd Time Out?	100%		▬	100%		
	Did the team conduct another instrument/swab count before continuing with the procedure?	50%		▬	100%		
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A	-		100%			
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	83%	92%	▬	100%	100%	
	Did the team count ANY and ALL Instruments, sharps and swabs used during the operation?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	92%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%		
	Was the count led by the same designated lead at 'Time out'?	92%		▬	100%		
	Did the most Senior Operating Surgeon sign the checklist?	83%		▬	100%		
Debrief	Was there a Debrief at the end of the list?	100%	100%	▬	100%	100%	
	Were the primary operator and anaesthetist (if applicable) both present?	100%		▬	100%		
		OVERALL COMPLIANCE	95%			OVERALL COMPLIANCE	96%
						OVERALL COMPLIANCE (comparable to 18/19)	96%

Results for:	ENT	FY 18/19 Q1 Audit (n=19)		Improvement	FY 19/20 Q2 Audit (n=17)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	89%	▬	100%	100%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	79%		▲	100%		
	Was this patient discussed in the Team Brief?	N/A		-	100%		
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	100%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%		
	Was the patient's identity confirmed?	100%		▬	100%		
	Was the surgical site marked where applicable?	100%		▬	100%		
	Was the procedure confirmed?	100%		▬	100%		
	Was the consent confirmed?	100%		▬	100%		
Time Out	Did a 'Time Out' occur?	100%	89%	▬	100%	96%	
	Did all team members stop what they were doing during the Time Out?	68%		▲	100%		
	Were all team members involved in the procedure present at Time Out?	84%		▲	94%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%		
	Was essential imaging displayed?	100%		▼	71%		
	Was all required equipment available?	100%		▬	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	94%		▬	100%		
	Were all countable items listed on the whiteboard?	63%		▲	100%		
Change of Staff	Was there a change of staff during the procedure?	1	67%	-	0	N/A	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	0%		N/A	N/A		
	Was the primary operator present at the 2nd Time Out?	100%		N/A	N/A		
	Did the team conduct another instrument/swab count before continuing with the procedure?	100%		N/A	N/A		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	89%	88%	▲	94%	98%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	74%		▲	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	74%		▲	100%		
	Was the count led by the same designated lead at 'Time out'?	100%		▬	100%		
	Did the most Senior Operating Surgeon sign the checklist?	89%		▲	94%		
Debrief	Was there a Debrief at the end of the list?	68%	68%	▲	100%	100%	
	Were the primary operator and anaesthetist (if applicable) both present?	68%		▲	100%		
		OVERALL COMPLIANCE	88%			OVERALL COMPLIANCE	98%
						OVERALL COMPLIANCE (comparable to 18/19)	98%

Results for:	BARIATRIC	FY 18/19 Q1 Audit (n=13)		Improvement	FY 19/20 Q2 Audit (n=10)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	96%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	92%		▲	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	100%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
	Was the consent confirmed?	100%		▬	100%	
Time Out	Did a 'Time Out' occur?	100%	91%	▬	100%	100%
	Did all team members stop what they were doing during the Time Out?	69%		▲	100%	
	Were all team members involved in the procedure present at Time Out?	62%		▲	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	100%		▬	100%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
	Were all countable items listed on the whiteboard?	100%		▬	100%	
Change of Staff	Was there a change of staff during the procedure?	0	N/A	-	0	N/A
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	N/A		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		N/A	N/A	
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	46%	74%	▲	100%	98%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	69%		▲	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	92%		▲	100%	
	Was the count led by the same designated lead at 'Time out'?	92%		▲	100%	
	Did the most Senior Operating Surgeon sign the checklist?	46%		▲	90%	
Debrief	Was there a Debrief at the end of the list?	77%	77%	▼	70%	70%
	Were the primary operator and anaesthetist (if applicable) both present?	77%		▼	70%	

OVERALL COMPLIANCE **89%**

OVERALL COMPLIANCE **97%**

OVERALL COMPLIANCE (comparable to 18/19) **97%**

Results for:	PODIATRY	FY 18/19 Q1 Audit (n=11)		Improvement	FY 19/20 Q2 Audit (n=9)	
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	—	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	100%	—	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	100%		—	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	—	100%	94%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▼	67%	
	Was the patient's identity confirmed?	100%		—	100%	
	Was the surgical site marked where applicable?	100%		—	100%	
	Was the procedure confirmed?	100%		—	100%	
	Was the consent confirmed?	100%		—	100%	
Time Out	Did a 'Time Out' occur?	100%	100%	—	100%	98%
	Did all team members stop what they were doing during the Time Out?	100%		—	100%	
	Were all team members involved in the procedure present at Time Out?	100%		—	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		—	100%	
	Was essential imaging displayed?	100%		▼	78%	
	Was all required equipment available?	100%		—	100%	
	Was there a designated lead to count the instruments that were used?	100%		—	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		—	100%	
Were all countable items listed on the whiteboard?	100%	—	100%			
Change of Staff	Was there a change of staff during the procedure?	0	N/A	-	0	N/A
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	N/A		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	N/A		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	N/A		N/A	N/A	
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	100%	100%	—	100%	100%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		—	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		—	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		—	100%	
	Was the count led by the same designated lead at 'Time out'?	100%		—	100%	
	Did the most Senior Operating Surgeon sign the checklist?	100%		—	100%	
Debrief	Was there a Debrief at the end of the list?	100%	100%	—	100%	100%
	Were the primary operator and anaesthetist (if applicable) both present?	100%		—	100%	

OVERALL COMPLIANCE **100%**

OVERALL COMPLIANCE **98%**

Audit Ref No:								
<u>Action Plan – WCCS</u>								
AUDIT TITLE:		WHO 5 Steps to Safer Surgery – In theatres Trust Wide Audit Report Q3 2019/20						
Report Author/ Audit Lead:		Louisa Pierce						
Audit Sponsor:		William Gage						
Which committee was the actions plan signed off:		Sub-group of Executive Quality Committee						
Sign-off Date:		TBC						
SMART/Management Action Plan/ Recommendations								
Action plan priority grading's:								
1	Urgent	Fundamental control issue on which action should be taken immediately	2	Important	Control issue on which action should be taken at the earliest opportunity	3	Routine	Control issue on which action should be taken.
Ref.	Gap identified/Risk area	Recommendation	Action	Priority	Action Lead/ Owner	Implementation/C ompletion Date	Management Comments (How will you know that actions are completed?)	
1.	To be completed by Division		To be completed by Division	Choose an item.	To be completed by Division	To be completed by Division	To be completed by Division	
(add further rows until action plan addresses all areas of high risk/significant deficiencies and significant risk/little assurance)								

7. Key Findings & Results – WCCS

Results for:	OVERALL WCCS	FY 18/19 Q1 Audit (n=53)		Improvement	FY 19/20 Q2 Audit (n=46)		
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
	Did a Team Brief occur before the list commenced?	100%		▬	100%		
Team Brief	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	87%	94%	▲	89%	96%	
	Was this patient discussed in the Team Brief?	N/A		-	98%		
Sign In	Did the Sign-in occur?	100%		▬	100%		
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	98%		▾	93%		
	Was the patient's identity confirmed?	100%	100%	▾	98%	98%	
	Was the surgical site marked where applicable?	100%		▬	100%		
	Was the procedure confirmed?	100%		▾	98%		
	Was the consent confirmed?	100%		▬	100%		
Time Out	Did a 'Time Out' occur?	100%		▬	100%		
	Did all team members stop what they were doing during the Time Out?	89%		▲	93%		
	Were all team members involved in the procedure present at Time Out?	91%		▲	91%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▾	98%		
	Was essential imaging displayed?	100%	97%	▾	96%	98%	
	Was all required equipment available?	100%		▬	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%		
	Were all countable items listed on the whiteboard?	96%		▲	100%		
Change of Staff	Was there a change of staff during the procedure?	3		-	0		
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	33%	39%	N/A	N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	33%		N/A	N/A		
	Did the team conduct another instrument/swab count before continuing with the procedure?	50%		N/A	N/A		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	64%		▲	91%		
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%	89%	▬	100%	97%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%		
	Was the count led by the same designated lead at 'Time out'?	92%		▲	98%		
	Did the most Senior Operating Surgeon sign the checklist?	75%		▲	91%		
Debrief	Was there a Debrief at the end of the list?	87%	87%	▲	93%	93%	
	Were the primary operator and anaesthetist (if applicable) both present?	87%		▲	93%		
		OVERALL COMPLIANCE	89%			OVERALL COMPLIANCE	97%
						OVERALL COMPLIANCE (comparable to 18/19)	97%

Results for:	GYNAECOLOGY	FY 18/19 Q1 Audit (n=19)			Improvement	FY 19/20 Q2 Audit (n=14)	
		Individual Measure Compliance Rate	Overall Compliance Rate	Individual Measure Compliance Rate		Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	100%	▬	100%	95%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	100%		▾	93%		
	Was this patient discussed in the Team Brief?	N/A		-	93%		
Sign In	Did the Sign-in occur?	100%	99%	▬	100%	96%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	95%		▾	93%		
	Was the patient's identity confirmed?	100%		▾	93%		
	Was the surgical site marked where applicable?	100%		▬	100%		
	Was the procedure confirmed?	100%		▬	93%		
	Was the consent confirmed?	100%		▬	100%		
Time Out	Did a 'Time Out' occur?	100%	99%	▬	100%	94%	
	Did all team members stop what they were doing during the Time Out?	100%		▾	79%		
	Were all team members involved in the procedure present at Time Out?	95%		▾	71%		
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▾	93%		
	Was essential imaging displayed?	100%		▬	100%		
	Was all required equipment available?	100%		▬	100%		
	Was there a designated lead to count the instruments that were used?	100%		▬	100%		
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%		
	Were all countable items listed on the whiteboard?	100%		▬	100%		
Change of Staff	Was there a change of staff during the procedure?	1	67%	-	0	N/A	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	100%		N/A	N/A		
	Was the primary operator present at the 2nd Time Out?	100%		N/A	N/A		
	Did the team conduct another instrument/swab count before continuing with the procedure?	0%		N/A	N/A		
	If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?	N/A		-	N/A		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	58%	89%	▲	71%	90%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%		
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%		
	Was the count led by the same designated lead at 'Time out'?	95%		▲	100%		
	Did the most Senior Operating Surgeon sign the checklist?	79%		▾	71%		
Debrief	Was there a Debrief at the end of the list?	95%	95%	▾	86%	86%	
	Were the primary operator and anaesthetist (if applicable) both present?	95%		▾	86%		
		OVERALL COMPLIANCE	94%			OVERALL COMPLIANCE	93%
						OVERALL COMPLIANCE (comparable to 18/19)	93%

Results for:	OBSTETRICS	FY 18/19 Q1 Audit (n=18)		Improvement	FY 19/20 Q2 Audit (n=)		18
		Individual Measure Compliance Rate	Overall Compliance Rate		Individual Measure Compliance Rate	Overall Compliance Rate	
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%	
Team Brief	Did a Team Brief occur before the list commenced?	100%	92%	▬	100%	93%	
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	83%		78%			
	Was this patient discussed in the Team Brief?	N/A		100%			
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	98%	
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		89%			
	Was the patient's identity confirmed?	100%		100%			
	Was the surgical site marked where applicable?	100%		100%			
	Was the procedure confirmed?	100%		100%			
	Was the consent confirmed?	100%		100%			
Time Out	Did a 'Time Out' occur?	100%	97%	▬	100%	99%	
	Did all team members stop what they were doing during the Time Out?	94%		100%			
	Were all team members involved in the procedure present at Time Out?	94%		100%			
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		100%			
	Was essential imaging displayed?	100%		94%			
	Was all required equipment available?	100%		100%			
	Was there a designated lead to count the instruments that were used?	100%		100%			
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		100%			
	Were all countable items listed on the whiteboard?	89%		100%			
Change of Staff	Was there a change of staff during the procedure?	1	33%	-	0	N/A	
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	0%		N/A	N/A		
	Was the primary operator present at the 2nd Time Out?	0%		N/A	N/A		
	Did the team conduct another instrument/swab count before continuing with the procedure?	100%		N/A	N/A		
	If there was a change of staff, was the Surgeon informed that a change over count was being undertaken?	N/A		-	N/A		
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	61%	88%	▲	100%	99%	
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		100%			
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		100%			
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		100%			
	Was the count led by the same designated lead at 'Time out'?	100%		94%			
	Did the most Senior Operating Surgeon sign the checklist?	67%		100%			
Debrief	Was there a Debrief at the end of the list?	89%	89%	▲	94%	94%	
	Were the primary operator and anaesthetist (if applicable) both present?	89%		94%			

OVERALL COMPLIANCE	88%	OVERALL COMPLIANCE	98%
OVERALL COMPLIANCE (comparable to 18/19)			98%

Results for:	PAEDIATRIC SURGERY	FY 18/19 Q1 Audit (n=16)		Improvement	FY 19/20 Q2 Audit (n=)	
		Individual Measure Compliance Rate	Overall Compliance Rate		14	Individual Measure Compliance Rate
Checklist	Was the correct checklist in use specific to that clinical area?	100%	100%	▬	100%	100%
Team Brief	Did a Team Brief occur before the list commenced?	100%	88%	▬	100%	100%
	Were all staff present in the briefing: Senior Operating Surgeon (this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses?	75%		▲	100%	
	Was this patient discussed in the Team Brief?	N/A		-	100%	
Sign In	Did the Sign-in occur?	100%	100%	▬	100%	100%
	Was the Sign in led by an Anaesthetist and anaesthetic assistant?	100%		▬	100%	
	Was the patient's identity confirmed?	100%		▬	100%	
	Was the surgical site marked where applicable?	100%		▬	100%	
	Was the procedure confirmed?	100%		▬	100%	
Time Out	Was the consent confirmed?	100%	94%	▬	100%	99%
	Did a 'Time Out' occur?	100%		▬	100%	
	Did all team members stop what they were doing during the Time Out?	69%		▲	100%	
	Were all team members involved in the procedure present at Time Out?	81%		▲	100%	
	Did the Surgeon, Anaesthetist and registered practitioner give verbal confirmation of the patient's name, procedure, incision site and that the patient was positioned correctly?	100%		▬	100%	
	Was essential imaging displayed?	100%		▼	93%	
	Was all required equipment available?	100%		▬	100%	
	Was there a designated lead to count the instruments that were used?	100%		▬	100%	
	Did the team count any and all items that have the potential to be retained within a body cavity?	100%		▬	100%	
Were all countable items listed on the whiteboard?	100%	▬	100%			
Change of Staff	Was there a change of staff during the procedure?	1	0%	-	0	N/A
	If there was a change in staff, did all team members stop what they were doing for a 2nd Time Out?	0%		N/A	N/A	
	Was the primary operator present at the 2nd Time Out?	0%		N/A	N/A	
	Did the team conduct another instrument/swab count before continuing with the procedure?	0%		N/A	N/A	
	If there was a change of staff, was the Surgeon informed that a change over count was being undertaken?	N/A		-	N/A	
Sign Out	Was the 'Sign Out' led by the most Senior Operating Practitioner?	75%	90%	▲	100%	100%
	Did the team count ANY and ALL instruments, sharps and swabs used during the operation?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that the name of the procedure has been recorded?	100%		▬	100%	
	Did a Registered practitioner verbally confirm with the team that instruments, sharps and swabs counts have been completed?	100%		▬	100%	
	Was the count led by the same designated lead at 'Time out'?	81%		▲	100%	
	Did the most Senior Operating Surgeon sign the checklist?	81%		▲	100%	
Debrief	Was there a Debrief at the end of the list?	75%	75%	▲	100%	100%
	Were the primary operator and anaesthetist (if applicable) both present?	75%		▲	100%	

OVERALL COMPLIANCE **83%**

OVERALL COMPLIANCE **100%**

OVERALL COMPLIANCE (comparable to 18/19) **100%**

8. Conclusions

Reflection on local practice:

Trust wide Results (in-theatres):

- Overall results demonstrate that there is substantial assurance (90% compliance) Trust wide. This is the same as last year's results.

Key strengths identified:

Trust wide Results (in-theatres):

- Trust wide, there was substantial assurance in 24 out of 31 individual elements.
- There was <90% compliance against the following 7 elements. However, in 3 of these elements there was an improvement.

Element (where there is <90% compliance; with level of assurance*)	2018/19	2019/20	↑↓⇒
Was essential imaging displayed?	99%	87%	↓
If there was a change of staff, did all team members stop what they were doing for a 2 nd Time Out?	50%	20%	↓
Was the primary operator present at the 2 nd Time Out	75%	20%	↓
Did the team conduct another instrument/swab count before continuing with the procedure	55%	60%	↑
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken	N/A (not measured)	60%	-
Was the Sign Out, led by the most Senior Operating Practitioner	73%	85%	↑
Did the most Senior Operating Surgeon sign the checklist	77%	88%	↑

Site specific results:

Site	2018/19 Q3 Audit	2019/20 Q3 Audit	Improvement
SMH&WEH	Reasonable Assurance	Reasonable Assurance	⇒
CXH	Substantial Assurance	Substantial Assurance	⇒
HH & QCCH	Substantial Assurance	Substantial Assurance	⇒

Divisional overview:

Site	2018/19 Q3 Audit	2019/20 Q3 Audit	Improvement
MIC	Substantial Assurance	Reasonable Assurance	↓
SC&CS	Substantial Assurance	Substantial Assurance	⇒
WC&CS	Reasonable Assurance	Substantial Assurance	↑

Key areas for improvement:						
Divisional and specialty results: MIC (in-theatres)						
Element (where there is <90% compliance; with level of assurance*)						2019/20
Was the Sign In led by an Anaesthetist and anesthetic assistant?						88%
If there was a change of staff, did all team members stop what they were doing for a 2 nd Time Out?						0%
Was the primary operator present at the 2 nd Time Out?						0%
Did the team conduct another instrument/swab count before continuing with the procedure?						50%
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?						50%
Was the 'Sign Out' led by the most Senior Operating Practitioner?						88%
Did the most Senior Operating Surgeon sign the checklist?						79%
Was there a Debrief at the end of the list?						83%
Were the primary operator and anaesthetist (if applicable) both present?						79%
Correct checklist?	Team Brief	Sign In	Time Out	Change of Staff	Sign Out	Debrief
Renal						
100%	100%	98%	100%	N/A	89%	85%
Neurosurgery						
100%	98%	98%	97%	25%	96%	79%
Divisional and specialty results: SC&CS (in-theatres)						
Element (where there is <90% compliance; with level of assurance*)						2019/20
Was essential imaging displayed?						85%
If there was a change of staff, did all team members stop what they were doing for a 2 nd Time Out?						33%
Was the primary operator present at the 2 nd Time Out?						33%
Did the team conduct another instrument/swab count before continuing with the procedure?						67%
If there was a change of staff, was the Surgeon informed that a changeover count was being undertaken?						67%
Was the 'Sign Out' led by the most Senior Operating Practitioner?						83%
Did the most Senior Operating Surgeon sign the checklist?						88%
Correct checklist?	Team Brief	Sign In	Time Out	Change of Staff	Sign Out	Debrief
Cardiothoracic						
100%	100%	98%	98%	50%	95%	100%
General						
100%	94%	99%	97%	N/A	100%	82%

Hepatobiliary surgery						
100%	100%	100%	97%	N/A	93%	100%
Vascular						
100%	92%	100%	93%	0%	100%	100%
Ophthalmology						
100%	100%	100%	100%	N/A	74%	90%
Urology						
100%	100%	100%	99%	N/A	99%	100%
Gender						
100%	100%	100%	94%	N/A	92%	75%
Breast						
100%	100%	100%	94%	N/A	95%	100%
Orthopaedics						
100%	94%	97%	99%	N/A	95%	100%
Plastics						
100%	87%	97%	93%	100%	100%	100%
ENT						
100%	100%	100%	96%	N/A	98%	100%
Bariatrics						
100%	100%	100%	100%	N/A	98%	70%
Podiatry						
100%	100%	94%	98%	N/A	100%	100%

Divisional and specialty results: **WC&CS** (in-theatres)

Element where there is <90% compliance; with level of assurance*)	2019/20
Were all staff present in the briefing: Senior Operating Surgeon 9(this can be a Senior Registrar if starting the list) Anaesthetist, ODP, Theatre nurses	89%

Correct checklist?	Team Brief	Sign In	Time Out	Change of Staff	Sign Out	Debrief
Gynaecology						
100%	95%	96%	94%	N/A	90%	86%
Obstetrics						
100%	93%	98%	99%	N/A	99%	94%
Paediatric surgery						
100%	100%	100%	96%	N/A	100%	100%

9. Recommendations

Key areas for action:

In general, areas where attention is required include:

- (1) Ensuring Trust policy is adhered to when there is a change of staff during a procedure – this includes team conduct another instrument/swab count before continuing with the procedure, and Surgeon informed that a changeover count was being undertaken.
- (2) Ensuring that Sign Out is conducted in accordance with Trust policy – this includes ensuring that the Sign Out is led by the most Senior Operating Practitioner, and the person who signs the checklist.

(N.B Steps were there is substantial assurance may comprise individual audit elements where there is poor compliance)

- (3) **High risk specialties with significant deficiencies** identified in one or more of the steps to safer surgery that require immediate attention from divisional management teams are:

Division	Specialty
MIC	Neurosurgery
SC&CS	Cardiothoracic Vascular
WC&CS	Nil

- (4) Other specialties where there is **significant risk with little assurance*** in one or more of the steps to safer surgery where action is required from divisional management teams are:

Division	Specialty
MIC	Neurosurgery
SC&CS	Ophthalmology Gender Bariatrics
WC&CS	Nil

*There may individual audit elements making up each step that remain high risk as there are significant deficiencies.

- (5) Division management teams are requested to work with specialties to complete divisional action plans (template contained within this report) to address all areas where there is a) high risk/ significant deficiencies and b) significant risk with little assurance in all relevant specialties, for review in sub-group of Executive Quality Committee in December 2019.

10. References & Appendices

**Appendices, such collection tool, questionnaires etc, must be included in this report.*



In theatres - WHO Checklist audit tool
WHO Safer Suregry Checklist audit - 201

11. Feedback of Findings

Who will receive the report for noting?	Clinical Audit and Effectiveness Group (CAEG), Invasive Procedures Committee and sub-group of Executive Quality Committee
How and when will they receive the report/findings?	Sub-group of Executive Quality Committee – Invasive Procedures Committee –

12. Planned Re-audit

Will you be re-auditing?	Yes
Proposed re-audit date?	Q3 2020
Who will be supporting the re-audit?	Corporate clinical audit team and divisional colleagues