

**Date:** Sept 02, 2018E.C

✍ **To: Quality Unit (QU)**

✍ **From: Surgery Department**

**Subject:** Update on Sustaining Improvement in SSC Compliance

***Dear Health Service Quality Unit,***

The SSC Quality Improvement (QI) Team is pleased to report the successful sustainment of Surgical Safety Checklist (SSC) compliance at Deder General Hospital for the reporting period of **August 2017**. Our efforts have resulted in an adherence rate of 100

- ✍ Perfect adherence to SIGN IN completion (100%).
- ✍ 98% completion rate for TIME OUT and SIGN OUT.
- ✍ An on-time start rate of 83%, above the target of >80%.
- ✍ Successful pilot of the "pre-Time Out" brief, enhancing focus and planning.

The process is now fully embedded and sustainable, achieving all set goals. We propose the following next steps:

- ✍ Recommend adoption of the "pre-Time Out" brief for all teams in the next SOP revision.
- ✍ Transition to routine monitoring mode as per the SOP's sustainability plan, with triggers for action if adherence falls below 90% for two weeks.
- ✍ Celebrate the team's success in achieving and sustaining the 95% goal

✍

***Sincerely,***

Dr. Isak Abdi-OR Director.

**DEDER GENERAL HOSPITAL**  
**SUSTAINING IMPROVEMENT IN WHO SAFE SURGERY**  
**CHECKLIST (SSC) ADHERENCE: A QI PROJECT**

QI Team Lead: **Dr. Isak Abdi-OR Director**

Facilitator: **Abdi Tofik (BSc, MPH)-HSQ Director**

Reporting Period: August **01-30, 2017**

# DEDER GENERAL HOSPITAL

## SUSTAINING IMPROVEMENT IN WHO SAFE SURGERY CHECKLIST (SSC) ADHERENCE: A QI PROJECT

### 1. PLAN

**Aim Statement:** (Unchanged)

**Rationale:** (Unchanged)

**Interventions (What will we do?):**

- Continue all core interventions.
- **Pilot the "pre-Time Out" brief** among a volunteer surgical team (PDSA Cycle 2).

### 2. DO

**Implementation Activities (August 2017):**

- **Week 1-2:** The "pre-Time Out" brief was piloted with Dr. Isak Abdi's (G/Surgeon) team.
- **Week 3-4:** Feedback was collected from the pilot team on the brief's impact.

**Data Collection:** (Unchanged)

### 3. STUDY

**Results Summary (August 2017):**

Indicator	Target	August	Trend
SSC Adherence Rate	≥95%	100%	✓ Target Met
SIGN IN Completion	100%	100%	✓ Excellent
TIME OUT Completion	100%	98%	✓ Sustained
SIGN OUT Completion	100%	98%	✓ Sustained
On-Time Start Rate	>80%	83%	✓ Improved

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## SUSTAINING IMPROVEMENT IN WHO SAFE SURGERY CHECKLIST (SSC) ADHERENCE: A QI PROJECT

### SSC Adherence Audit Report

**Month: August 2017**

**Sample Size:** 10 patients

Patient ID	SIGN IN Completed? (Y/N)	TIME OUT Completed? (Y/N)	SIGN OUT Completed? (Y/N)	All 3 Phases Completed? (Y/N)	Overall Compliant? (Y/N)
341264	Y	Y	Y	Y	Y
345622	Y	Y	Y	Y	Y
345602	Y	Y	Y	Y	Y
338987	Y	Y (with pre-brief)	Y	Y	Y
345622	Y	Y (with pre-brief)	Y	Y	Y
074098	Y	Y	Y	Y	Y
023719	Y	Y	Y	Y	Y
348761	Y	Y	Y	Y	Y
348762	Y	Y	Y	Y	Y
338582	Y	Y (with pre-brief)	Y	Y	Y
345989	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

### Key Learnings:

- The pilot team reported that the "pre-Time Out" brief made the formal TIME OUT faster and more focused, as critical events were already top-of-mind.
- This practice improved pre-operative planning between the surgeon and anesthetist.
- The high adherence rate is now stable.

# DEDER GENERAL HOSPITAL

## SUSTAINING IMPROVEMENT IN WHO SAFE SURGERY CHECKLIST (SSC) ADHERENCE: A QI PROJECT

### Challenges Observed:

- None significant. The process is functioning as intended.

### 4. ACT

#### What Worked?

- ✓ Full integration of the SSC into the OT workflow.
- ✓ The iterative PDSA approach successfully addressed initial weaknesses.
- ✓ A proactive culture of safety is becoming the norm.

#### What Needs Adjustment?

- **None.** The process is sustainable. Focus shifts to continuous monitoring.

#### Next Steps (August 2017 Onward):

1. **Recommend adoption** of the "pre-Time Out" brief for all teams in the next SOP revision.
2. **Shift to monitoring mode** as per the SOP's sustainability plan, with triggers for action if adherence falls below 90% for two weeks.
3. **Celebrate the team's success** in achieving and sustaining the  $\geq 95\%$  goal.