Surgical safety checklist compliance rates
Resource for Indicator Standards (RIS)
Health Analytics Branch, Ministry of Health and Long-Term Care

Indicator description

RIS indicator name
Surgical safety checklist compliance rates

Other names for this indicator
• Surgical safety checklist

Indicator description
The percentage of surgeries in which a surgical safety checklist was performed.

The surgical checklist is considered performed when the designated checklist coordinator confirms that surgical team members have implemented and/or addressed all of the tasks and items in the checklist for each of the three phases: ‘briefing’, ‘time out’, and ‘debriefing’.

Accountability agreement(s) or ministry initiative(s) the indicator supports
• Patient Safety Public Reporting

Numerator

Data source
For hospitals in the Surgical Efficiencies Target program (SETp): The Operating Room Benchmarking Collaborative (ORBC), Cancer Care Ontario

For hospitals not participating in SETp: Self Reporting Initiative (SRI) (July 2011 to present), and Web Enabled Reporting System (WERS) (April 2010 to June 2011) Ministry of Health and Long-Term Care (MOHLTC)

Inclusion/exclusion criteria
Includes:

1. All publicly funded hospitals;
2. All surgical procedures, across operating rooms and surgical teams.
Calculation

Steps:

1. Sum the total number of surgical procedures in which all three phases of the SSCL was performed.
2. Multiply by 100.

Denominator

Data source

For hospitals in the Surgical Efficiencies Target program (SETp): The Operating Room Benchmarking Collaborative (ORBC), Cancer Care Ontario

For hospitals not participating in SETp: Self Reporting Initiative (SRI) (July 2011 to present), and Web Enabled Reporting System (WERS) (April 2010 to June 2011) Ministry of Health and Long-Term Care (MOHLTC)

Inclusion/exclusion criteria

Includes:

1. All publicly funded hospitals;
2. All surgical procedures, across operating rooms and surgical teams.

Excludes:

N/A

Calculation

Steps:

1. Sum the total number of surgeries performed during the reporting period.

Timing and geography

Timing/frequency of release

How often and when data are being released (e.g., be as specific as possible...data are released annually in mid-May)

Data are released bi-annually.
Initial reporting on July 31, 2010 included data from April 1-June 30, 2010.
Trending

Years available for trending

Data are available as of April 1, 2010.

Levels of comparability

Levels of geography for comparison

Data are available at provincial, LHIN and hospital levels.

Additional information

Limitations

Specific limitations

Data are self-reported by hospital.
Data are reported for the fiscal year. No month or quarterly breakdowns.

Comments

Additional information regarding the calculation, interpretation, data source, etc.

Effective December 2012, patient safety indicator results, as well as other patient safety information, are available on Health Quality Ontario’s (HQO) website.

Examples of surgical safety checklists can be obtained from the MOHLTC Patient Safety Team or from Cancer Care Ontario.

References

Provide URLs of any key references (e.g., Diabetes in Canada, http:// …)

1. Health Quality Ontario’s Patient Safety Website

Contact information

For more information about this indicator, please contact RIS@ontario.ca.

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