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## SCIENTIFIC ARTICLE

# Construction of a tool to measure perceptions about the use of the World Health Organization Safe Surgery Checklist Program



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## KEYWORDS

Tool;  
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## Abstract

**Background:** The World Health Organization (WHO) has recommended greater attention to patient safety, particularly regarding preventable adverse events. The Safe Surgery Saves Lives (CSSV) program was released recommending the application of a surgical checklist for items on the safety of procedures. The checklist implementation reduced the hospital mortality rate in the first 30 days. In Brazil, we found no studies of anesthesiologists' adherence to the practice of the checklist.

**Objective:** The main objective was to develop a tool to measure the attitude of anesthesiologists and residents regarding the use of checklist in the perioperative period.

**Method:** This was a cross-sectional study performed during the 59th CBA in BH/MG, whose participants were enrolled physicians who responded to the questionnaire with quantitative epidemiological approach.

**Results:** From the sample of 459 participants who answered the questionnaire, 55% were male, 44.2% under 10 years of practice, and 15.5% with over 30 years of medical school completion.

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**PALAVRAS-CHAVE**

Ferramenta;  
*Checklist*;  
 Cirurgia segura;  
 Eventos adversos;  
 Organização Mundial  
 da Saúde

Seven items with 78% reliability coefficient were selected. There was a statistically significant difference between the groups of anesthesiologists who reported using the instrument in less or more than 70% of patients, indicating that the attitude questionnaire discriminates between these two groups of professionals.

*Conclusions:* The seven items questionnaire showed adequate internal consistency and a well-defined factor structure, and can be used as a tool to measure the anesthesiologists' perceptions about the checklist usefulness and applicability.

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### Construção de uma ferramenta para medida de percepções sobre o uso do *checklist* do Programa de Cirurgia Segura da Organização Mundial da Saúde

**Resumo**

*Introdução:* A Organização Mundial da Saúde (OMS) tem recomendado uma maior atenção com a segurança do paciente, mais especificamente em relação aos eventos adversos evitáveis. Foi lançado o programa "Cirurgia Segura Salva Vidas (CSSV)", que recomenda a aplicação da lista de verificação cirúrgica (*checklist*) para a conferência de itens relacionados à segurança do procedimento. A implantação do *checklist* reduziu a mortalidade hospitalar nos primeiros 30 dias. No Brasil, não foram identificados estudos sobre adesão dos anesthesiologistas à prática do *checklist*.

*Objetivo:* Desenvolvimento de uma ferramenta para mensuração da atitude dos anesthesiologistas e residentes em relação ao uso do *checklist* no período perioperatório.

*Método:* Estudo transversal feito durante o 59º Congresso Brasileiro de Anestesiologia (CBA), em Belo Horizonte (MG), cujos participantes foram médicos inscritos e que responderam ao questionário com abordagem epidemiológica quantitativa.

*Resultados:* A amostra constou de 459 participantes que responderam ao questionário, 55% do sexo masculino, 44,2% com menos de 10 anos e 15,5% acima de 30 anos de conclusão do curso médico. Foram selecionados sete itens com coeficiente de confiabilidade de 78%. Houve diferença estatisticamente significativa entre os grupos de anesthesiologistas que referiram usar o instrumento em menos ou mais de 70% dos pacientes assistidos. Isso indica que o questionário de atitudes discrimina entre esses dois grupos de profissionais.

*Conclusões:* O questionário de sete itens mostrou adequada consistência interna e uma estrutura fatorial bem delimitada. Pode ser usado como ferramenta para medida das percepções de anesthesiologistas quanto à utilidade e a aplicabilidade do *checklist*.

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**Introduction**

The 55th World Health Assembly, World Health Organization (WHO), through the Resolution 55.18 has recommended to its member states increased attention to patient safety, particularly regarding preventable adverse events. So, in October 2005 it was introduced the first Global Patient Safety Challenge with the theme: Clean Care is Safer Care, while the second Global Challenge addressed the fundamentals and practices of surgical safety focusing on prevention of surgical site infections, safe anesthesia, surgical teams, and use of indicators for surgical care.

In 2009, the WHO launched the Safe Surgery Saves Lives (SSSL) program,<sup>1</sup> which recommends the application of the surgical safety checklist, which determines three breaks in the perioperative period for checking the items regarding procedure security. The checklist and its implementation manual were translated into Portuguese and published by the Ministry of Health/ANVISA/PAHO (Fig. 1).

The method chosen<sup>2</sup> for the project "Safe Surgery" was based on the tool created at the Johns Hopkins Medical Institution for improved communication among professionals participating in the operating room team. The main objective was for all the operation planning to be shared and, thus, facilitate the integration in the procedure implementation.

This structured communication tool, inspired by aviation, fragments complex tasks in more watertight steps, in order to reduce the chances of forgetting a key item for the quality and safety of the whole care. Checking the items listed in a previously made checklist speeds the process and, at the same time, creates barriers to any process failures.<sup>3</sup> One of the decisive factors for success is the understanding of its usefulness by all those who make up the teams involved and, perhaps, this is the greatest obstacle to the program implementation. The perception of all should be that it is not a control method, but a useful tool for reducing flaws in the process, as shown in a multicenter study coordinated by

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