

Making Processes Really Simple and Effective Using Lessons Learned from Surgical Checklists

The Process Group
www.processgroup.com
neil@processgroup.com

Neil Potter

SM CMMI is a service mark of Carnegie Mellon University.

*How big do
think the first
process should
be?*



Agenda

1. Background
2. Matching Process Complexity with Need
3. Guidelines for Creating Checklists
4. Example Requirements Management (REQM) Process
5. A Checklist for Checklists
6. Summary



References

- <http://www.processgroup.com/monthlytidbits.html#tidbit8>
- <http://www.processgroup.com/monthlytidbits.html#tidbit11>

Background

- World Health Organization Goal: **Improve surgical procedures worldwide***.
- A **medical checklist** was created based on aviation checklists.
- **Premise**: a simple checklist can ensure that **critical steps** have not been overlooked, either due to **haste**, **forgetfulness** or **inexperience**.
- Measurements were collected from surgeries performed around the world, before and after the checklist. **Results**:
 - Major **complications** down by 36%
 - **Infections** down by ~50%
 - Patients **returned** to surgery because of **problems** down by 25%
 - **Harm** suffered from surgery (over 4,000 patients) down by 150
 - 27 fewer **deaths** (47% drop) caused from surgical complications



*Atul Gawande, associate professor of surgery at Harvard Medical School
Checklist Manifesto: How to Get Things Right

Surgical Safety Checklist



Before induction of anaesthesia

(with at least nurse and anaesthetist)

Has the patient confirmed his/her identity, site, procedure, and consent?

Yes

Is the site marked?

Yes

Not applicable

Is the anaesthesia machine and medication check complete?

Yes

Is the pulse oximeter on the patient and functioning?

Yes

Does the patient have a:

Known allergy?

No

Yes

Difficult airway or aspiration risk?

No

Yes, and equipment/assistance available

Risk of >500ml blood loss (7ml/kg in children)?

No

Yes, and two IVs/central access and fluids planned

Before skin incision

(with nurse, anaesthetist and surgeon)

Confirm all team members have introduced themselves by name and role.

Confirm the patient's name, procedure, and where the incision will be made.

Has antibiotic prophylaxis been given within the last 60 minutes?

Yes

Not applicable

Anticipated Critical Events

To Surgeon:

What are the critical or non-routine steps?

How long will the case take?

What is the anticipated blood loss?

To Anaesthetist:

Are there any patient-specific concerns?

To Nursing Team:

Has sterility (including indicator results) been confirmed?

Are there equipment issues or any concerns?

Is essential imaging displayed?

Yes

Not applicable

Before patient leaves operating room

(with nurse, anaesthetist and surgeon)

Nurse Verbally Confirms:

The name of the procedure

Completion of instrument, sponge and needle counts

Specimen labelling (read specimen labels aloud, including patient name)

Whether there are any equipment problems to be addressed

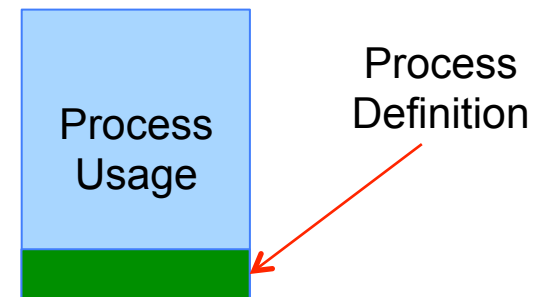
To Surgeon, Anaesthetist and Nurse:

What are the key concerns for recovery and management of this patient?

© WHO, 2009

Matching Process Complexity with Need

- The **time** needed to **write** a process is usually a lot less than the time spent **using** it. E.g.,
 - A **project planning** process of 1-2 pages may take a 2 days to develop and then be used numerous times.
 - A spreadsheet for **risk management** may take ½ day to develop and manage numerous risks over many years.
 - The **benefit** of using it **outweighs** the **cost** of developing it.
- **Places where a small process might be adequate:**
 - **SVC**: REQM, WP, WMC, CM, MA, OPF, OPD, OT.
 - **DEV**: OPF, OPD, PI (small DEV projects), OT.
 - process includes all Generic Practices



Guidelines for Creating Checklists -1

- Two main styles of checklists:
 - “**Do-Confirm**” – verify critical steps
 - “**Read-Do**” - perform given specific situations
- Select **pause points** in work flow where the completion of critical steps can be verified.
- Condense the checklist onto **one page** and use single **bullet point** sentences.
- Checklist items are **critical (high-risk)** and are not covered elsewhere.
- Run the **checklist verbally with the team** to ensure that anyone that has an issue can speak up.
- **Revise the checklist** numerous times until it is able to quickly **detect serious problems**.

Read-Do

CM Process

1. List Configuration Items

x, y, z

2. Establish File Naming Convention

File-x<n>.docx

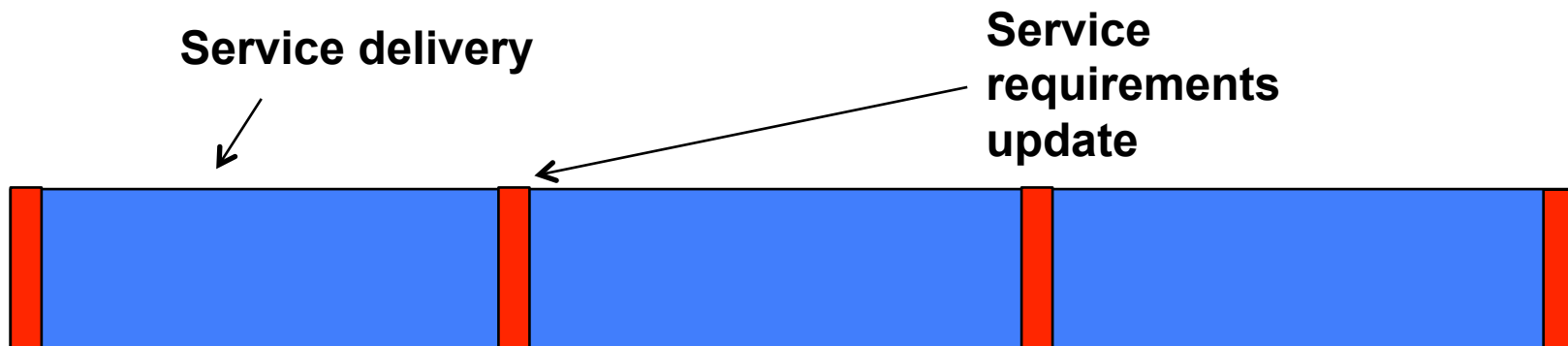
3. Establish Baseline File Structure

~~~~~

4. ~~~~

Guidelines for Creating Checklists -2

- Move implementation details as **help text or training**.
- Treat the process as “**day-to-day usage**,” not beginner.
 - This is where the majority of time will be spent.
- **Example scenario:**
 - **Service requirements** don't change much (or at all) over time.
 - REQM is **used 1 day per year** to manage the change.



Example Requirements Management (REQM) Process - 1

Purpose: A checklist used to understand, confirm and manage changes to requirements.

Policy: All changes are managed using this checklist [gp2.1]

Do

Plan the requirements definition/review **event** [gp2.2]:

- Date: _____
- Time / resources needed: (gp2.3) _____
- Responsibility: [gp2.4] _____
- Stakeholders [sp1.2, gp2.7]:
 - ❖ Role = Agree to services: <Name>. Commitment _____
 - ❖ Role = Provide expertise: <Name>. Commitment _____
 - ❖ Role = Team member 1: <Name>. Commitment _____
 - ❖ Role = Senior manager approval: [gp2.10] <Name>. Commitment _____

Example Requirements Management Process - 2

- Discuss new and changed requirements with stakeholders to clarify understanding: [sp1.1, 1.3, 1.5]
 - Review current requirements
 - Review proposed changes to requirements
 - Human resources needed to implement change: _____
 - New materials/consumables/computers needed to implement change: _____
 - Current commitments and deadlines impacted: _____
 - Added risks and mitigation actions: _____
 - Record stakeholder commitments next to name [sp1.2]
- Record major issues/actions
- Update traceability mapping [sp1.4]
 - Label requirement 1 thru N
 - List impacted deliverables and documents for each requirement
 - State test method (e.g., peer review, test case, pilot) for each requirement
- Save this document as service-roles-vN.doc on X drive with change history comments [gp2.6]

Example Requirements Management Process - 3

Check

- Training** has been provided to perform the steps above? [gp2.5]
 - If not, training date / time / who _____
- All process steps** above have been performed? [gp2.8]
 - Corrective actions needed/taken? _____
- Objective/independent check** done [gp2.9]:
 - Auditor name: _____
 - Audit date: _____
 - Pass / fail?: _____
 - If fail, corrective actions needed: _____
- Senior management aware** of this requirements event, results, issues? [gp2.10]
 - Comments: _____

A CHECKLIST FOR CHECKLISTS

Development



Drafting



Validation

- Do you have clear, concise objectives for your checklist?

Is each item:

- A critical safety step and in great danger of being missed?
- Not adequately checked by other mechanisms?
- Actionable, with a specific response required for each item?
- Designed to be read aloud as a verbal check?
- One that can be affected by the use of a checklist?

Have you considered:

- Adding items that will improve communication among team members?
- Involving all members of the team in the checklist creation process?

Does the Checklist:

- Utilize natural breaks in workflow (pause points)?
- Use simple sentence structure and basic language?
- Have a title that reflects its objectives?
- Have a simple, uncluttered, and logical format?
- Fit on one page?
- Minimize the use of color?

Is the font:

- Sans serif?
- Upper and lower case text?
- Large enough to be read easily?
- Dark on a light background?

- Are there fewer than 10 items per pause point?

- Is the date of creation (or revision) clearly marked?

Have you:

- Tried the checklist with front line users (either in a real or simulated situation)?
- Modified the checklist in response to repeated trials?

Does the checklist:

- Fit the flow of work?
- Detect errors at a time when they can still be corrected?
- Can the checklist be completed in a reasonably brief period of time?
- Have you made plans for future review and revision of the checklist?

Source: www.projectcheck.org

Summary

- Processes don't have to be **voluminous** to be “complete.”
- A **checklist is adequate** for some Process Areas (and processes).
- Consider splitting processes into **2 parts**:
 - a) A **checklist** for essential steps – day-to-day usage.
 - b) **Separate training**/details/explanation.
- Use “**Do-Confirm,**” or “**Read-Do**” style.
- Refine checklist until:
 - It achieves the desired **result**.
 - It is able to quickly **detect serious problems**.

1. **Tidbit #8: *Using Checklists to Define Best Practices and Improve Performance*, Potter, N.**
<http://www.processgroup.com/monthlytidbits.html#tidbit8>
2. **Tidbit #11: *Using Medical Checklists to Simplify CMMI Process Development - Keeping it Very Simple*, Potter, N.**
<http://www.processgroup.com/monthlytidbits.html#tidbit11>
3. ***Checklist Manifesto: How to Get Things Right*, Metropolitan Books, Atul Gawande, 2008.**
4. **Practical Project and Process Documentation, Newsletter Vol. 9, No. 2, October 2002.**
www.processgroup.com/pgpostoct02.pdf
5. **Getting New Practices Used and Keeping Them Visible, Potter, N., Sakry, M.**
www.processgroup.com/pgpostfeb10.pdf
6. ***Making Process Improvement Work - A Concise Action Guide for Software Managers and Practitioners*, Potter, N., Sakry, M., Addison-Wesley, 2002.**
www.processgroup.com/tpgbook.html

Acronyms

- **PP/WP:** Project / Work Planning
- **PMC/WMC:** Project / Work Monitoring & Control
- **CM:** Configuration Management
- **REQM:** Requirements Management
- **MA:** Measurement Analysis
- **OPF:** Organizational Process Focus
- **OPD:** Organizational Process Development
- **OT:** Organizational Training
- **PI:** Product Integration

REQM Practice definition from CMMI

- SP 1.1 Develop an understanding with the requirements providers on the meaning of the requirements.
- SP 1.2 Obtain commitment to requirements from project participants.
- SP 1.3 Manage changes to requirements as they evolve during the project.
- SP 1.4 Maintain bidirectional traceability among requirements and work products.
- SP 1.5 Ensure that project plans and work products remain aligned with the requirements.
- GP 2.1 Establish and maintain an organizational policy for planning and performing the process.
- GP 2.2 Establish and maintain the plan for performing the process.
- GP 2.3 Provide adequate resources for performing the process, developing the work products, and providing the services of the process.
- GP 2.4 Assign responsibility and authority for performing the process, developing the work products, and providing the services of the process.
- GP 2.5 Train the people performing or supporting the process as needed.
- GP 2.6 Place selected work products of the process under appropriate levels of control.
- GP 2.7 Identify and involve the relevant stakeholders of the process as planned.
- GP 2.8 Monitor and control the process against the plan for performing the process and take appropriate corrective action.
- GP 2.9 Objectively evaluate adherence of the process and selected work products against the process description, standards, and procedures, and address noncompliance.
- GP 2.10 Review the activities, status, and results of the process with higher level management and resolve issues.