MEDIA RELEASE

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Digital checklists needed to improve patient safety

Australian start-up SafetyCulture has launched a digital surgical checklist for medical professionals in its inspection app, iAuditor.

The list was developed under the guidelines of the World Health Organization (WHO) as part of its global initiative, ‘Safe Surgery Saves Lives’ that aims to reduce the number of surgical deaths worldwide.

iAuditor is the world’s most used inspection app and is currently used by hospitals and health services around the world.

SafetyCulture founder and CEO, Luke Anear started the global tech company in his garage to improve safety for front-line workers across all industries.

“Surgical checklists represent a simple and promising strategy for addressing surgical patient safety worldwide,” said Anear.

“We are using our platform and global reach to put this checklist in the hands of as many surgeons as possible, for free.”
“To operate efficiently, hospitals need visibility. You don’t get that visibility using a paper-based system as you can’t see where your risks and faults are.”

“WHO estimates that the global implementation of these checklists could prevent half a million deaths per year,” said Anear.

Anaesthesiologists first contacted SafetyCulture to say they were using iAuditor for an intubation algorithm and that WHO were pushing the use of checklists.

“Checklists have been universally accepted as a tool for maintaining safety and quality since the aviation industry introduced them in the 1930’s.”

“If we can get this in the hands of more surgeons, particularly in low resource hospitals, then more people will go home safe to their families after surgery,” said Anear.

Professor Ajay Rane, Director of Urogynaecology at The Townsville Hospital in Australia says there has been some controversy on where surgical checklists really work.

“As far as WHO based checklists go they are quite a vital resource for low resource setting hospitals,” said Professor Rane.

“They are cheap, reproducible and empower all levels of staff, which is rare.”

“Large institutional settings have an impersonal aspect to them with transient staff and more barriers - a checklist culture bridges quite a lot of these barriers helping the team care for the patient,” said Professor Rane.

Anear believes that the accessibility and availability of the digital checklist will not only assist in surgical settings, but improve knowledge of surgical safety within teams.

“Hospitals struggle to implement paper-based checklists, which is why iAuditor’s simplicity is a benefit,” said Anear.

“Whether it be a medical manufacturing process or maintaining hygiene in hospital toilets, the best tool for maintaining high standards is the checklist.”

“iAuditor makes the checklist intelligent so information can be aggregated and trends identified for not only what can be improved, but for what is working well,” said Anear.

ENDS...
The WHO Surgical Safety Checklist within iAuditor:

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