Board Checklist

**Who should use this tool:** Senior leaders

| Checklist Items | Leader Responsible | Date Initiated |
| --- | --- | --- |
| 1. Set an organization aim of annually assessing the safety and teamwork climate. |  |  |
| 1. Improve the safety and teamwork climate using valid measures. |  |  |
| 1. Set expectation for unit-level culture assessment. |  |  |
| 1. Require at least a 60 percent participation rate by doctors and nurses. (Hospital-level culture scores do not allow targeted improvement.) |  |  |
| 1. Review culture assessment data regularly (required by The Joint Commission). |  |  |
| 1. Explore the relationship between culture and clinical outcomes. |  |  |
| 1. Hold the executive team accountable for an explicit action plan to improve safety and teamwork. |  |  |
| 1. Review the progress of safety and teamwork improvement monthly. |  |  |
| 1. Establish a policy that all current and new employees and board members must receive Science of Safety training. |  |  |
| 1. Set the expectation that a senior leader is an active member of each Comprehensive Unit-based Safety Program (CUSP) team. |  |  |
| 1. Ensure senior leaders meet with the CUSP team at least monthly. |  |  |
| 1. Hear at least one story of a patient being harmed at each board meeting. Discuss major patient safety events/errors that have occurred in the most recent timeframe to show that this is an important and ongoing concern. |  |  |
| 1. Work with the chief executive officer and chief medical officer to establish interdisciplinary patient rounds as an organizational standard practice. |  |  |
| 1. Review a summary report of staff patient safety assessments\* no less than annually. (\*“How is the next patient likely to be harmed on my unit? What might we do to prevent that harm?”) |  |  |