

ACTION PLAN AND TRAFFIC LIGHT REPORT

[illegible]

What	Who	When	Follow-up	Measure
Action Item	Name/Title	Date started/ implemented	When/how we will check	How will we measure effectiveness?
Standardize equipment and process for sponge counts	George Jetson, Surgery Director	January 1, 2019	February 1, 2019 July 1, 2019 January 1, 2020	<ul style="list-style-type: none"> • STRUCTURE: % of procedure rooms with standardized equipment • STRUCTURE: % of staff trained with practice and passed competency • PROCESS: % staff compliance with new process on audit • OUTCOME: # of retained sponges

Traffic Light Report

- Green: project complete
- Yellow: in progress
- Red: on hold or can't be done – list reasons why

Action Item	Progress
Sponge accounting systems in place	Blue backed sponge holders in every procedure room 12/15/18
Action Item	Progress
Staff training on standardized sponge accounting process	Training with practice and competency completed for 5 of 10 teams 12/15/18
Action Item	Impediment
OR Rules Sign in every procedure room	No room on wall for signs – re-evaluating plan on 1/1/2019