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## Mortality audit highlights inter-hospital transfer concerns

**October 8, 2018**

The 2018 annual report of the Western Australian Audit of Surgical Mortality (WAASM) was released today by the Royal Australasian College of Surgeons (RACS). Overall, besides a relative decrease in the rate of deaths, the WAASM has observed a rising trend in inter-hospital transfers.

The WAASM data indicates that the proportion of patients transferred preoperatively to another hospital sits at 28.8 per cent.

The WAASM Clinical Director, Mr James Aitken, said the increase in inter-hospital transfers is a cause of concern.

“While transfers are usually unavoidable, they inevitably cause delay in treatment, often in a patient who has a time critical emergency. Delays related to transfer have been a long standing concern to the WAASM, and this was highlighted in our symposium over two years ago.

For many high risk patients, delay has a direct effect on the treatment outcome. Inter-hospital transfers are now so frequent that they need to be robust and dependable.

The majority of inter-hospital transfers were from a metropolitan hospital to a tertiary hospital that was often acting as a ‘rescue’ hospital. These patients would have been better served if their initial admission had been directly to the tertiary hospital, so sparing them the delay inherent to the transfer.

The percentage of cases with delays in transfer to the major tertiary hospitals in Western Australia has increased and is now similar to that for like national tertiary hospitals. Clearly Western Australia has an emerging problem and plans need to be put in place to address it”, stated Mr Aitken.

The 2018 annual report presents the outcome of clinical reviews conducted into 2,884 deaths over five years. Mr Aitken emphasised that despite the transfer figures, many of the other findings from the audit were promising, including a record low number in the rate of deaths per 100,000 population.

“Over the past five years, the WAASM has observed an overall relative decrease of 3.1 per cent in the rate of deaths per 100,000 population (22.6 per 100,000 in 2013 to 21.9 per 100,000 in 2017), which is significantly lower than where we were at the inception of the audit in the early 2000s.

This suggests that the WAASM is achieving its aim of reducing the proportion of Western Australian deaths under the care of a surgeon that are associated with clinical management issues.”

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## **MEDIA RELEASE**

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Managed by the RACS and funded by the Western Australian Department of Health, the WAASM involves the clinical review of all cases where patients have died while under the care of a surgeon, and is aimed at the ongoing improvement of surgical care. External clinical reviews are conducted by surgeons who practice in the same specialty but are from a different hospital.

**The 2018 WAASM Report is available on the RACS website:**

[https://www.surgeons.org/media/25724666/2018-09-27-rpt-waasm\\_annual-report\\_2018.pdf](https://www.surgeons.org/media/25724666/2018-09-27-rpt-waasm_annual-report_2018.pdf)

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