
ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

MEDIA RELEASE



Improvements in surgical risk management

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Clinical trends in surgical risk management from 2007 to 2015 show an overall improvement in patient care, according to the Victorian Audit of Surgical Mortality (VASM) report released today.

Surgical services continue to be safe in Victorian hospitals with overall surgical mortality rates at the lowest rate (0.3%) since the VASM began in 2007, according to the latest report.

The Audit reviews all surgical related mortality cases, in order to learn and disseminate improvements to surgical services in Victoria and contributes at a national level to the Australian and New Zealand Audit of Surgical Mortality (ANZASM).

“VASM is a collaboration between the Victorian Government's Department of Health and Human Services (DHHS), the Victorian Surgical Consultative Council (VSCC) the Royal Australasian College of Surgeons (RACS), the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) and the Australian Orthopaedic Association (AOA).

“The Audit revealed that between 1 July 2014 and 30 June 2015, 672,957 patients underwent surgical procedures and a comparatively low number of 1,966 patients died under the care of a surgeon. These were primarily among elderly patients with pre-existing health conditions.

The report contains the outcomes on 6,179 deaths that were associated with surgical care, which have undergone the full peer-review process through the VASM program over the past eight years.

Full audit participation has been achieved at sites with surgical services across the public and private sectors in Victoria.

RACS participation rates in the VASM program are high, as participation is an integral component of a surgeon's ongoing Continuing Professional Development.

Mr Barry Beiles, the VASM Clinical Director said that the audit was an important activity for all specialists.

“It is evidence of the value of these audits and their ability to show improvements and highlight areas that still need work in order to have the best patient outcomes possible.”

“Preventable clinical management issues are driving the VASM to refocus on the educational role to disseminate lessons learned and make recommendations to clinicians using the Hospital Clinical Governance Reports to drive further improvements,” Mr Beiles said.

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