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Audit highlights reduced mortality rate, but improvements still to be made

ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

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The 2016 Report of the Victorian Audit of Surgical Mortality (VASM) was released today, highlighting that overall improvements in clinical practice have led to fewer surgical deaths since the audit's inception in 2007. The audit also detailed ongoing areas for improvement in surgical practice.

Managed by the Royal Australasian College of Surgeons (RACS) and funded by the Victorian Department of Health, VASM is a retrospective peer review of the clinical management of patients who died while under the care of a surgeon.

All assessors (first- and second-line) must decide if the death was a direct result of the disease process alone, or if aspects of the management of the patient may have contributed to the outcome.

VASM Clinical Director, Mr Barry Beiles, noted that overall the audit was achieving its primary goal of learning and continual improvements in patient care through the ongoing investigation into the deaths of patients.

"The VASM audit presents the outcome of clinical reviews conducted into 3,948 deaths since RACS mandated the participation of surgical Fellows in 2012. Over that time there has been a decrease in surgical mortality from 0.4 percent to 0.3 percent," Dr Beiles said.

"Whilst this might not sound like much of a reduction; it is worth bearing in mind that during that period more than two and a half million patients in Victoria underwent surgery, so in those terms any reduction in the mortality rate is significant."

VASM noted promising and improved clinical trends in key areas when compared with the Australian and New Zealand Audit of Surgical Mortality (ANZASM) national indicators of patient surgical care, such as:

- appropriate management of deep vein thrombosis,
- appropriate use of critical care facilities,
- fluid balance management issues,
- appropriate patient transfer both in rural and metropolitan areas,
- reduction of operative complications,
- reduction of post-operative infections, and
- reduction in the rate of clinical management issues.

Mr. Barry Beiles noted that VASM identified some clinical management issues as ongoing areas for improvement, such as:

- delay in diagnosis and treatment, including better detection and management of the deteriorating patient,
- communication between health professionals, especially for coordination of patient care, and

Media inquiries: Gabrielle Forman, Manager Communications and Advocacy 0498 218 008

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• decision to operate rather than palliate.

"While VASM is achieving its aim of reducing the proportion of preventable deaths in Victoria, we now need to refocus to develop strategies to address recurring preventable errors and clinical management issues. VASM has a key educational role in disseminating lessons learned to clinicians and using its publications to drive further improvements," Dr Beiles said.

Implementation of the Target Zero review recommendations will also produce improvements in identified areas of deficiency in Victoria and it is anticipated that the VASM will play an imperative role in the revised Safer Care Victorian structure.

The 2016 VASM Report is available on the RACS website via the below link

www.surgeons.org/vasm

About RACS

RACS is the leading advocate for surgical standards, professionalism and surgical education in Australia and New Zealand. The College is a not-for-profit organisation that represents more than 7,000 surgeons and 1,300 surgical trainees and International Medical Graduates. RACS also supports healthcare and surgical education in the Asia-Pacific region and is a substantial funder of surgical research. There are nine surgical specialties in Australasia being: Cardiothoracic surgery, General surgery, Neurosurgery, Orthopaedic surgery, Otolaryngology Head-and-Neck surgery, Paediatric surgery, Plastic and Reconstructive surgery, Urology and Vascular surgery.