

## IMPROVING SURGICAL OUTCOMES

Surgeons who review the surgical mortality cases are asked to highlight any lessons that can be learnt to educate and improve surgical care. This information is communicated to other surgeons, non-surgical clinicians and hospitals, and used in educational publications and seminars.

The number of surgical deaths each year in Victoria since 2001 has dropped to half of the original numbers. Similarly, there has been a reduction in the extent of surgical deaths with identified preventable issues.

Though there are likely to be a variety of factors that have contributed to this reduction, the VASM may have contributed.

## HOW CAN PATIENTS REDUCE THE RISK OF SURGICAL COMPLICATIONS?

Factors most commonly associated with poor surgical outcomes include cardiovascular and respiratory diseases and obesity. The best outcomes can be achieved through maintaining a healthy lifestyle including:



## ADVANCE CARE DIRECTIVES YOUR RIGHT TO DECIDE

Among healthcare professionals there is an increasing emphasis on the patient's wishes as the primary consideration in approaches to end of life care. This relies on good communication, including:



Clear and accurate information about the implications of treatment or non-treatment being communicated by

healthcare professionals. Ensuring that the patient's wishes are made clear and understood.



It is also important to plan ahead in the event that a person's decision making capacity becomes impaired in the future.

An Advance Care Directive is a legal document that allows people over the age of 18 to:



Write down their wishes, preferences and instructions for future health care, end of life, living arrangements and personal matters, and/or



Appoint one or more Substitute Decision-Makers to make these decisions on their behalf when they are unable to do so themselves.

It is important to note that an Advance Care Directive only comes into effect in the event of impaired decision-making capacity.

# THE VICTORIAN AUDIT OF SURGICAL MORTALITY VASM



## THE VICTORIAN AUDIT OF SURGICAL MORTALITY



Australian citizens are privileged to have access to good, safe and high quality surgical care.

The VASM audit operates to ensure that the high standard of surgical care is maintained and overall in hospital patient experience improved.

### WHAT IS THE VASM?

The audit was set up to independently review all surgically-related deaths in Victoria, with a focus on what can be learnt from these cases and to further improve the quality and safety of surgical care in Victoria through information and education. All public and private hospitals are participating and strongly support the audit process.

The audit is a collaboration between the Victorian Government's Safer Care branch, Victorian Consultative Council on Anaesthetic Mortality and Morbidity, Royal Australasian College of Surgeons, Royal Australian and New Zealand College of Obstetricians and Gynaecologists, Australian Orthopaedic Association and the Victorian Surgical Consultative Council.

Safer Care Victoria replaced the Office for Safety and Quality Improvement and is Victoria's leading agency for healthcare safety, quality and innovation. Safer Care Victoria works with patients and health services to take a patient-centred approach to quality and safety improvement.



## HOW SAFE IS SURGERY AND WHAT ARE THE RISKS?

In recent years in Victoria, there were approximately 633,000 hospital admissions involving a surgical procedure resulting in approximately 0.3 percent (2,000) surgical mortalities.

The majority of surgical deaths have occurred in elderly patients (>75 years old) with underlying health problems who were admitted as emergency patients with acute life-threatening conditions.

The actual cause of death was often linked to their pre-existing health status, in that the cause of death frequently mirrored the pre-existing illness. The majority of 'surgical deaths' do not occur on the operating table. Such deaths are very rare events.



The deaths assessed by the VASM include all patients who die under the care of a surgeon, not only those where a surgical procedure has been

performed. Most of the cases involve high risk operations in patients who are critically ill. In some cases, the patient was in the terminal phase of their disease and a procedure was performed for palliative reasons.

Each of the cases is reviewed by an experienced surgeon from the relevant specialty. Patients should be aware that each surgical procedure has its own level of risk, based on the procedure itself and patient characteristics.

This should be clearly explained by the surgeon; it is important to speak up and ask questions if the risk is not understood. Whether to go ahead with surgery is ultimately the patient's decision.

## MORE INFORMATION

To learn more about the audit program you may wish to contact the VASM office during business hours:

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### For more information on end of life care visit:

[https://www.surgeons.org/media/24971463/2017-07-28\\_pos\\_fes-pst-057\\_end\\_of\\_life\\_care.pdf](https://www.surgeons.org/media/24971463/2017-07-28_pos_fes-pst-057_end_of_life_care.pdf)

