### EMBARGOED UNTIL 12:01am October 10, 2017

# ROYAL AUSTRALASIAN COLLEGE OF SURGEONS MEDIA RELEASE



### **Reduced Surgical Mortality in Australia**

#### October 10, 2017

The 8<sup>th</sup> National Report of the Australian and New Zealand Audits of Surgical Mortality (ANZASM) was released today by the Royal Australasian College of Surgeons (RACS), which highlighted the continual reduction in adverse events since the first national report.

The ANZASM 2016 Report, involving the clinical review of all cases where patients have died while under the care of a surgeon, showed that the proportion of cases reporting adverse events has remained significantly lower than when the first National Report was produced in 2009.

ANZASM Chairman, Professor Guy Maddern, said that the reduction over time was pleasing and highlighted the value of the audit since its inception.

"In 2016 the proportion of cases with adverse events was 2.9% compared to 4.4% in 2013. A proportion of more recent cases are still undergoing assessment, so the figures for 2016 may change slightly."

"But even so what we have seen across the last five years is the proportion of adverse events remaining maintaining the initial drops that we saw from our earlier reports. In 2009 the proportion of adverse events was approximately 6% so the drop has clearly been significant."

"It is impossible to say for sure whether we can attribute this reduction to the audit. However, what we do know for sure is that the audit allows us to identify trends, and to monitor and address these issues as required."

"Since we first began conducting the audit across Australia and New Zealand in 2009, the number of surgeons participating in the process has increased from 60.4% to 98.3%. We have access to much more comprehensive data further adding to the ongoing knowledge of the participants and potentially leading to better outcomes for all surgical patients."

"As an example, seminars have been facilitated based on in-depth investigations of the issues identified in the audit. In recent times state and territory audit programs have held successful and engaging symposiums on issues such as end of life care, and RACS also recently released Guidelines for conducting effective Morbidity and Mortality meetings for Improved Patient Care."

Professor Maddern said other key highlights from the 2016 report included:

The number of cases involving obesity as a comorbidity continues to increase.
Obesity has overtaken hepatic issues in terms of frequency since the last report.
One of the recommendations from the audit is the delivery of themed national

Media inquiries: Gabrielle Forman

Manager, Communications & Advocacy Royal Australasian College of Surgeons (03) 9249 1263

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case note review booklets on current topical issues, including the impact of obesity on surgery.

- The most common issues experienced were delays related to the transfer (11.3%), inappropriateness of transfer (4.1%) and insufficient clinical documentation (4.7%).
- In the majority of instances those patients expected to benefit from critical care support did receive it. The review process suggested that only 5.3% of patients who did not receive treatment in a critical care unit would most likely have benefited from it.
- Fluid balance in the surgical patient is an ongoing challenge, however the report highlights improvements are being made in this area.
- The audit revealed that patients admitted as surgical emergencies have a greater risk of falling while in hospital. All health professionals should increase their awareness of this risk to improve the quality and safety of patient care.
- Participation in the audit has increased significantly over time, and from March 2017, the Australian Orthopaedic Association made it compulsory for its members to partake.

Along with other Australian states and territories, the ANZASM has identified the following areas for improved patient care:

- Reducing delays in diagnosis and treatment
- Better detection and management of the deteriorating patient
- Improved communication between coordinating health professionals
- Improved decision-making around performing surgery for patients who may be more appropriate for palliative care.

Managed by RACS and funded by the state and territory departments of Health, the ANZASM presents the outcome of clinical reviews conducted into 33,450 deaths that completed the full audit process from 1 January 2009 to 31 December 2016.

#### The 2016 ANZASM Report is available on the RACS website:

https://www.surgeons.org/media/25514879/2017-10-05\_rpt\_racs\_anzasm\_national\_report\_2016.pdf

#### About the Royal Australasian College of Surgeons (RACS)

RACS is the leading advocate for surgical standards, professionalism and surgical education in New Zealand and Australia. The RACS 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. The RACS represents nine surgical specialties in Australasia being: Cardiothoracic surgery, General surgery, Neurosurgery, Orthopaedic surgery, Otolaryngology Head-and-Neck surgery, Paediatric surgery, Plastic

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