The journey to Target Zero – tools to address critical areas that require improvement
Avoidable causes of morbidity and mortality related to surgery

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Establishing the cause of death

- Most frequent cause of death: cardiac, organ failure & respiratory (2015-2016)

Graph showing the frequency of different causes of death during the audit period.
Post mortem

• Rates declining
• Coroner 17%
• Hospital 1%
• Refused 3%
• Nil 57%
• Unknown 22%

“Mortui vivenda docent”
Seniority of surgeon “leadership”

• In decision making
• In operating
Communication

• Important to coordinate patient care
• Formal handover
Patient transfer

• Between hospital transfer required in 20.6% of cases
  • Issues:
    ➢ delay 9.4%
    ➢ inappropriate staff 6.6%
    ➢ insufficient clinical information 9.2%
Use of critical care

- 69% of patients received critical care support
- The treating surgeon regarded lack of critical care support as an issue in 2.3% of cases
- The assessors reported that 9% of patients who did not receive critical care were likely to have benefited from it
Management of the frail patient

• Medical ward
  • Orthopaedic model
Futile operations

• Considered with end of life management
Post op complications

• Early senior involvement important

• 34% of patients experienced post operative complications, especially in emergency cases

• Eg: bleeding, anastomotic leaks, graft occlusion, etc.
Unplanned return to theatre

- Approximately 16% (unchanged over recent years)
DVT prophylaxis

- Most common modalities:
  - Heparin
  - Compression devices
- 17.5% of patients who had an operative procedure did not receive DVT prophylaxis, mainly due to a conscious decision by the treating team
- Omission/error rate 4.2%
Fluid balance problems

- Thought to be an issue in 8% of cases
Infection control

- 58% developed infection during admission
  - (69% of these post op)
- Hand washing
- Use of antibiotics – prophylactic/therapeutic
- “Australian guidelines for prevention and control of infection in healthcare” should be utilised.

The Victorian Surgical Consultative Council
Thank you