



Safer Care Victoria Action Plan

Victorian Consultative Council on Anaesthetic Mortality and Morbidity Triennial Report 2012-2014

Background

The Victorian Consultative Council on Anaesthetic Mortality and Morbidity (VCCAMM) Triennial Report 2012-2014 presents key outcomes and recommendations arising from the review of cases reported to the Council. The report highlights four key priority areas impacting on the Victorian community. These are:

- Reporting timeliness – the need for improved timeliness in reporting relevant events to the Council by health care services.
- Vulnerability – multidisciplinary management of vulnerable patients incorporating the new advance care directives, enhanced clinical surveillance, comprehensive pre-operative assessment, and deployment of clinical risk management tools.
- Prevention – prohibiting or restricting inclusion of pholcodine in cough medicines.
- Collaboration – continuing and improving collaboration with relevant bodies such as the Australian and New Zealand College of Anaesthetists, Safer Care Victoria, the Consultative Council on Obstetric and Paediatric Mortality and Morbidity (CCOPMM), and the Victorian Audit of Surgical Mortality (VASM).

What will we do now?

Recommendation 1 – Notifying VCCAMM

All Victorian hospitals should be required to notify the VCCAMM within 28 days of any perioperative or periprocedural event that meets the definition for an anaesthesia-related death or major morbidity. This will enable a more accurate picture of anaesthetic mortality and morbidity in Victoria.

Safer Care Victoria (SCV) will work with the VCCAMM, Department of Human Health and Services (DHHS) and acute health services to support and facilitate more timely and complete reporting of cases to the Council.

Recommendation 2 – Liaison ANZCA

The VCCAMM should continue to provide anaesthesia mortality data to the Mortality Subcommittee of the Australian and New Zealand College of Anaesthetists (ANZCA) to inform the triennial report: Safety of anaesthesia: a review of anaesthesia-related mortality reporting in Australia and New Zealand.

Safer Care Victoria will continue to support VCCAMM's liaison with the Mortality Subcommittee of the Australian and New Zealand College of Anaesthetists (ANZCA) and provide them with accurate and timely anaesthesia mortality data to allow analysis and reporting of national trends and ultimately to improve anaesthetic safety.



Recommendation 3 – Collaboration with agencies

The VCCAMM should collaborate with other agencies including Safer Care Victoria, the Consultative Council on Obstetric and Paediatric Mortality and Morbidity, the Victorian Surgical Consultative Council, the Victorian Audit of Surgical Mortality of the Royal Australasian College of Surgeons and the Department of Health and Human Services clinical networks to pursue improved perioperative patient outcomes.

Safer Care Victoria will continue to collaborate closely with VCCAMM and assist VCCAMM in further strengthening their relationship with the Department, other Consultative Councils and other relevant agencies. In 2016, Safer Care Victoria and the VCCAMM established a new collaboration with the Victorian Audit of Surgical Mortality that has already improved ascertainment of cases.

Recommendation 4 – Multidisciplinary management

The VCCAMM recommends that all Victorian hospitals develop a strategic approach to the collaborative, multidisciplinary management of elderly frail patients presenting for an emergency procedure, specifically regarding clinical risk assessment and patient wishes (including advance care directives) to reduce the risk of inappropriate or futile intervention.

The Medical Treatment Planning and Decisions Bill, which passed through Parliament late last year, recognises advance care directives in legislation for the first time in Victoria. Safer Care Victoria will work with the department and health services to ensure that person-centred care practices and shared decision making is at the core of clinical practice. In particular, SCV will liaise with the Victorian Care of Older People Network.

Recommendation 5 – Appropriate facilities and resources

The VCCAMM recommends that all Victorian hospitals provide appropriate facilities and resources for the safe perioperative care of patients with morbid obesity, including enhanced surveillance for postoperative respiratory depression and appropriate escalation of care for deteriorating and at-risk patients.

Safer Care Victoria will work with the Department and health services to ensure that all health services are aware of the perioperative risks associated with obese patients. Safer Care Victoria will support and facilitate rural and regional health services to ensure the individual patient is cared for in the most appropriate setting. One example is Bendigo Health's 27 custom-designed "bariatric" rooms, which include H-track hoist systems for bariatric patient movement, as part of their \$630 million new facility.

Safer Care Victoria has recently provided health services with information to help them make informed decisions regarding maternity care for obese patients. In response to the report's recommendation, additional tools will be distributed to health services to support best practice perioperative and postoperative care of morbidly obese patients.

Health Services are also expected to adhere to Standard 9: Recognising and Responding to Clinical Deterioration in Acute Health Care, from the National Safety and Quality Health Service Standards of the Australian Commission on Safety and Quality in Health Care.



Recommendation 6 – Prohibition or restriction of phocodine

The VCCAMM should liaise with the Australian and New Zealand Anaesthesia Allergy Group, the Anaesthesia Allergy Subcommittee of ANZCA, the Mortality Subcommittee of ANZCA and the Safety and Quality Committee of ANZCA to lobby the Therapeutic Goods Administration and Medsafe (NZ) to prohibit or restrict inclusion of pholcodine in cough medicines as a specific measure to reduce mortality and serious morbidity due to anaphylaxis caused by neuromuscular blocking agents used during anaesthesia.

Safer Care Victoria will explore options with the Therapeutic Goods Administration to reduce harm potentially stemming from pholcodine. Safer Care Victoria will support the VCCAMM in communicating their recommendation with the anaesthetic and wider community both in Victoria and nationally.

More information

If you require further information, please contact the Manager of the Consultative Council Unit on 9096 2697.