

# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Information Bulletin
June 2017

The National Patient Blood Management Collaborative (NPBMC) Showcase was held on Friday 2 June 2017 at the Stamford Plaza Sydney Airport Hotel. It was an excellent opportunity to recognise the hard work and achievements of the 12 health services that participated in the Collaborative, with particular acknowledgement of the contributions made by the project coordinators and lead clinicians at each site.

Ms Sophie Scott, Medical Health Reporter from the Australian Broadcasting Corporation, facilitated the day. She engaged the audience during question times, and encouraged conceptual forward thinking for future Patient Blood Management (PBM) approaches in the preoperative stage of surgery.

#### **About the NPBMC**

From April 2015 to April 2017, NPBMC teams developed Australia's first PBM dataset, comprised of 12,648 patient records for elective gastrointestinal, orthopaedics and gynaecology procedures. Project coordinators collected patient episode data from either all, or a combination of, gastrointestinal, orthopaedics and gynaecology procedures, depending on their hospital's surgical services. They entered this data into a purpose-built web portal called 'qiConnect' for data collection, management and reporting. Of the total procedures captured in the Australian data set, 18.4% were for gastrointestinal procedures, 56.3% for orthopaedics and 25.3% for gynaecology.



# National Patient Blood Management Collaborative

- Two years
- Seven states/territories
- 12 health services
- Three specialities
  - Gastrointestinal
  - Gynaecology
  - Orthopaedics
- 12,648 patient episodes recorded



Assessment rates for iron deficiency more than doubled for each surgical specialty:

Gastrointestinal - 25% to 57% Orthopaedic - 35% to 71% Gynaecology - 18% to 42%

Over the life of the Collaborative, project coordinators developed, trialled and evaluated a total of 384 'Plan, Do, Study, Act' cycles, using the 'Model for Improvement' to reduce the number of patients proceeding to surgery with an unknown levels of haemoglobin or iron stores. Trialling these strategies often required the development of local resources to support process change, and allow for continued education of both clinical and administrative staff. Project coordinators spoke about the difficulties of regular clinical rotations and the movement of staff, creating the need for continued education of new staff for the ongoing implementation of process improvements.

## **National Patient Blood Management Collaborative Showcase**



Pictured from left: Karen Olsen from Lyell McEwin Hospital, Maria Burgess from the Canberra Hospital, Ruth Webster from Joondalup Health Campus, Betty Dumayas from The Northern Hospital, Keiko Bowles from Cairns and Hinterland Health Service, Christine Akers from the Alfred Hospital, Beverly Hiles from Lismore Base Hospital, Angie Monk from Joondalup Health Campus, Gregory Thomson from Central Coast Local Health District, Garth Brown from St Vincent's Hospital Lismore, Paul Morgan from the Mater Sydney, Jodie Grech from Women and Children's Health Network Adelaide, Edel Murray from St Vincent's Private Hospital and Julie Domanski from Royal Darwin Hospital.

At the NPBMC Showcase, each participating health service gave a presentation on their involvement in the Collaborative, particularly achievements gained, how they overcame local barriers, and their site specific experience on how the Collaborative has made a difference to their hospital's preoperative care of patients.

Health services also shared their learnings on the implementation of the 'Model for Improvement', use of the 'Plan, Do, Study Act' cycle, and what other health services should consider when commencing a change management process.

Health initiatives such as the electronic Health Record were discussed in the context of their ability to bridge the communication gap and encourage information flow between acute and primary sector care. This was reported by Collaborative participating health services as a difficulty experienced in more than one location throughout Australia.

The Showcase included opportunities for interactive discussion with prominent Australian PBM experts during 'On the Couch' sessions.

The first 'On the Couch' session involved Associate Professor Mark Dean from Central Coast Local Health District, Associate Professor Bernd Froessler from Lyell McEwin Hospital in Adelaide and Professor James Isbister from University of Sydney's medical school (pictured at right). They discussed the importance of identifying and treating iron deficiency and anaemia before surgery.



Above:Paul Morgan from the Mater Sydney



## **National Patient Blood Management Collaborative Showcase**

"the PBM showcase was excellent and all participants achieved something quite unique. As mentioned several times, a model for other potential changes in the health system was presented".

Prof James Isbister

The second 'On the Couch' session included Professor Lilon Bandler, Chair of the PBM Project Reference Group (PRG), Edel Murray, Quality Manager from St Vincent's Private Hospital in Sydney and Dr Pradeep Jayasuriya, a GP from Western Australia and member of the PRM PRG (pictured at right). They examined the Collaborative's impact on PBM from a primary health and hospital perspective. Discussions included whether the involvement of the patient would help to bridge the communication gap and encourage information flow between a patient's GP and hospital clinicians.



Edel Murray spoke about the value of using a real life patient story to engage clinicians and encourage their participation in preoperative screening and management of anaemia and iron deficiency. Ms Murray also acknowledged the time pressures experienced by clinicians in the clinical setting to follow up on patient test results, and supported the notion of increased patient involvement.

Project coordinators were presented with a Certificate of Recognition by the Chair of the Australian Commission on Safety and Quality in Health Care Board, Professor Villis Marshall. Project coordinators managed the requirements of the Collaborative in addition to existing responsibilities.

In addition to acknowledgements made at the Showcase, the NPBMC project team also wish to recognise the excellent clinical leadership, facilitation and expert contribution of Dr Kelly Shaw and Mr Paul Woodhouse from KP Health.









Pictured from left: Christine Akers from the Alfred Hospital, Angie Monk from Joondalup Health Campus, Betty Dumayas from The Northern Hospital and Keiko Bowles from Cairns and Hinterland Health Service, and Jodie Grech from Women and Children's Health Network, Adelaide with Commission Board Chair Professor Villis Marshall

The NPBMC health services shared valuable resources they had developed either prior to, or during the Collaborative, with the Commission and other teams. Many were used by other sites to enhance their own PBM processes and procedures. A number of resources have been published on the Commission's website with a larger suite of resources to be added later this year.

www.safetyandquality.gov.au/national-priorities/pbm-collaborative