

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Information Bulletin October 2015

The Australian Commission on Safety and Quality in Health Care (the Commission) has established the *National Patient Blood Management Collaborative* (the Collaborative) to focus on improving the management of anaemia for patients having elective surgery in the surgical areas of: gastrointestinal, gynaecological and orthopaedics. The Collaborative started in April 2015 with 12 participating health services from across Australia and will run to April 2017. It will encompass the scope of the patent journey, from the time that the need for surgery is identified, through inpatient care, and then subsequent care back in the community.

Project Coordinator Workshop and Learning Workshop 2

The Project Coordinator Workshop held on Thursday 17 September 2015 where topics of discussion included:

- **Sharing progress to date:** The project coordinator challenges and successes, issues which need clarification, problem solving and sharing successes
- Data collection: When to enter data? Before or after procedures? The pros and cons?
- When is a PDSA not a PDSA?: More info on the PDSA process and how to get it right to be able to recognise improvements
- Successful teams Do you have one? Or need to build one?: How is yours working? Do you have or need executive or clinical buy in? How can this be done? How was this achieved?

Learning Workshop 2 was held on Friday 18 September 2015 attended by project coordinators and clinical leads/clinicians from all Collaborative teams, members of the Commission's PBM PRG, clinical experts and the Commissions' Collaborative project team. The focus was the role of primary care in the management of anaemia and iron deficiency, providing hints and tips on engaging GPs and the primary care sector.

There was robust discussion during an expert panel session which comprised :

- Prof Bernd Froessler, Anaethetist, Lyell McEwin Hospital, SA
- Prof Mark Dean, Haematologist, Gosford and Wyong Hospitals, NSW
- Prof James Isbister, Collaborative Clinical Leader
- Dr Lilon Bandler, Member of the Commission's PBM Project Reference Group
- Kylie Hobson, CNC PBM Pre-operative Anaemia, QLD
- Dr Pradeep Jayasuriya, GP from WA.

Workshops provide teams with evidence-based information and the opportunity to share knowledge and experiences with peers. Participants hear others' ideas and generate new ideas that may translate into improvements in their health service.



Above: Ellen Barlow from The Royal Hospital for Women, NSW with Liz McGill and Dr Susan MacCallum from Prince of Wales Hospital, NSW



Above: Prof James Isbister with Ruth Webster and Angie Monk from Joondalup Health Campus, WA

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Learning Workshop 2 (continued)

A common theme of a Collaborative is:

Steal Shamlessly ... Share Generously

so that all benefit from the learnings of those participating in a Collaborative process. Health services will share learnings on the changes trialled; the processes used to make these changes; and the impact and outcomes of these changes in practice.

Four teams showcased resources including:

- Central Coast Local Health District from NSW presented its letter sent to GPs when a patient has been placed on the waiting list for major surgery providing an algorithm for assessment and management.
- ACT Health shared its letter to patients to encourage them to get as fit as possible for surgery, and letter to GPs regarding the ACT pre-operative anaemia and iron deficiency management program.
- Sydney Mater Hospital presented its iron studies flow chart on when to administer pre-operative iron infusion following an iron study.
- Joondalup Health Campus, WA shared its iron carboxymaltrose infusion chart created for use in an outpatient setting designed to include the patients blood result, the diagnosis, the consent and consumer information and prescription; and pre op iron studies file note to document the PBM assessment journey.

The Commission's Collaborative project team will be developing a strategy to ensure that the resources developed by the Collaborative teams are shared more broadly in the future as part of the Collaborative process.

Teams also benefitted from protected 'team time' where they were able to formulate plans for action for the next activity period.



Above from left: Dr Bart Fielden and Prof Mark Dean from Central Coast LHD NSW; Prof James Isbister, Collaborative Clinical Leader; Julie Domanski from Royal Darwin Hospital, NT , and Prof Bernd Froessler from Lyell McEwin, SA



Above: Guest Speaker Dr Pradeep Jayasuriya, GP and Dr Chris Lowry and Beverley Hiles, Lismore Hospital, NSW



Above: Dr Amanda Davis and Christine Akers from the Alfred Hospital, VIC and Betty Dumayas from Northern Hospital VIC

The Collaborative teams are from:

- The Canberra Hospital, ACT
- Central Coast Local Health District, NSW
- Lismore Rural Referral Hospital, NSW
- Prince of Wales Hospital and the Royal Hospital for Women, NSW
- Royal Darwin Hospital, NT
- Cairns Hospital, QLD

- Northern Adelaide Local Health Network and the Women and Children's Health Network, SA
- The Alfred Hospital, VIC
- Northern Health, VIC

- ♦ Joondalup Health Campus, WA
- ♦ The Mater Hospital Sydney, NSW
- St Vincent's Private Hospital Sydney, NSW





At the Collaborative's Learning Workshop, the National Blood Authority showcased a suite of resources developed

to assist clinicians and GPs in helping their patients get fit for surgery. These resources include an elective surgery decision aid and fact sheets available at:

www.blood.gov.au/fit-surgerymanaging-iron-deficiency-anaemia

FIT FOR SURGERY

NPS MedicineWise and the National Blood Authority have collaborated to develop a suite of resources to help General Practitioners manage patients who are on the surgical waitlist and who may require treatment for iron deficiency and anaemia

FIT FOR LIFE











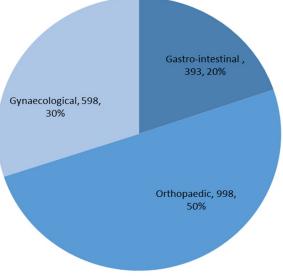
Overview of Collaborative Team Activity (May to August 2015)

Each of the Collaborative teams provide data on a monthly basis via the qiConnect web portal which was developed for the Collaborative. The Collaborative measures include:

- Which procedure was the operation, with selection from an agreed range of diagnostic-related groups (DRG)
- Did the patient receive a pre-operative assessment for anaemia or iron deficiency?
- Where and when did the patient receive the assessment?
- Where the assessment was undertaken, ie. in hospital, specialist rooms, primary care setting?
- Was the anaemia or iron deficiency confirmed?
- Where was it managed?
- Is there evidence of improvement?
- How many units of red blood cells did the patient receive pre-, intra- and post-operatively?

At the Workshops the data will always be presented identifying each of the Collaborative sites to allow for free discussion within the group, but outside of the Collaborative data will always be de-identified should the data be distributed more widely. Feedback graphs are accessible on qiConnect for users and can be used to

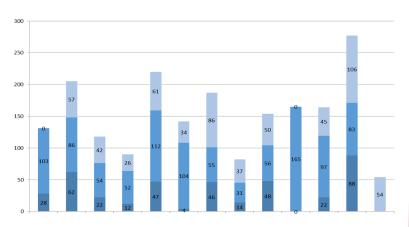
Procedures by Surgical Stream, May to Aug 2015 n=1989



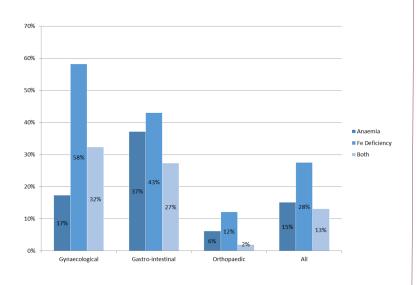
easily identify areas where improvements have been, or can be made, and allow Collaborative teams to see progress in the measures as well as to benchmark against the average of the whole Collaborative at a national level. This can be a great motivator to implementing future improvements.

Overview of Activity

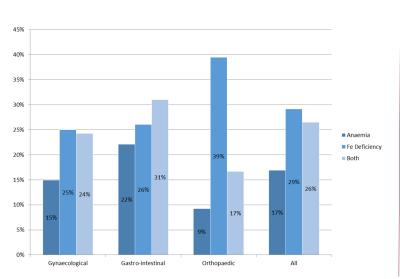
Procedures by stream by health service, May to August 2015



% of patients diagnosed anaemia or iron deficiency of those who screened

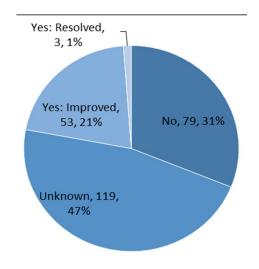


% of patients with anaemia or iron deficiency who were treated

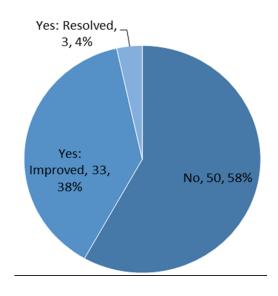


% of patients who improved (all surgical streams)

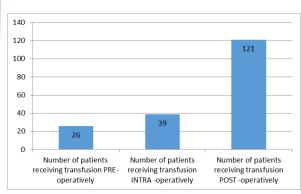
Anaemia n=254



Iron Deficiency n = 86



Number of patients receiving transfusions

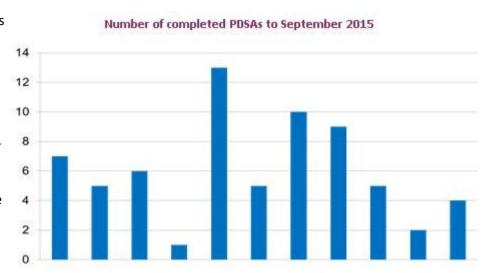


Model for Improvement

Change can often seem threatening and overwhelming. The model for improvement breaks change down into small, less threatening steps, which are tested to ensure that things are improving and that no effort is being wasted. By making small, incremental changes, there is an opportunity to test the change on a small scale and learn about the risks and benefits before implementing the change more widely.

The plan do study act (PDSA) cycle is shorthand for testing a change - by planning it, trying it, observing the results, and acting on what is learned. The four stages of the PDSA cycle are:

- Plan the change to be tested or implemented
- **Do** carry out the test or change
- Study data before and after the change and reflect on what was learned
- Act plan the next change cycle or full implementation



The Collaborative teams are progressing well with 73 PDSAs completed by September 2015.

How can you be involved in the Collaborative?

If you are a Primary Health Network, or GP, in close proximity to one of the Collaborative sites you may be able to assist. Partnerships will improve the integration of the acute setting and primary health. The Collaborative will encompass the scope of the patent journey, from the time that the need for surgery is identified, through inpatient care, and then subsequent care back in the community. As the Collaborative collects data on anaemia management and iron deficiency, if it was managed, how it was treated, and whether there were improved outcomes, an engaged interface with general practice is vital.

Please email us at pbmcollaborative@safetyandquality.gov.au to see how you can be involved.

Improving Healthcare International Convention

The Commission is a bronze sponsor of the *Improving Healthcare International Convention* to be held in Melbourne on 16-18 November 2015. The convention will enable the Commission to demonstrate the impact of the Collaborative to key stakeholders and showcase the work of the Collaborative via a poster presentation. The Commission's Collaborative project team will be available to discuss the project with delegates.



For further information on the Collaborative:

Email: pbmcollaborative@safetyandquality.gov.au

Twitter: @ACSQHC

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

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Previous Collaborative information Bulletins for January and June 2015 can be downloaded from the Commission website.

