AUSTRALIANCOMMISSIONON SAFETYANDQUALITYINHEALTHCARE

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Adverse event rates

- Q. How often do adverse events occur in Australian health care settings?
- **A.** We simply do not have a figure that accurately represents the number of adverse events that occur in Australian health care settings. However, according to the *Quality in Australian Health Care Study (QAHCS)* published in 1995, 16.6 percent of people admitted to hospitals in the study sample experienced an adverse event associated with their care.
- Q. How many adverse events lead to death or permanent disability?
- **A.** Data from the QAHCS suggested that 13.7 percent of the adverse events reported resulted in permanent disability, and 4.9 percent resulted in death.
- Q. What percentage of these adverse events is preventable?
- A. Various studies have found different numbers of adverse events to be preventable. Fifty-one percent of the adverse events reported in the QAHCS were considered preventable.
- Q. How does Australia compare with other countries?
- A. Subsequent re-analysis of the QAHCS data to allow for international benchmarking indicated that the Australian adverse event rate may be closer to 10 percent making it comparable to findings in the UK, USA, New Zealand, and Denmark.

This highlights how difficult it is to measure the numbers of adverse events in hospitals, including those resulting in the death of patients. While there may be a number of ways to measure adverse events, there will be different results depending on the method of analysis being used.

- Q. In what areas of health care do the highest incidences of harm occur?
- **A.** Studies show that the areas of health care where the highest incidences of harm occurs include:
 - Medication: Misuse, under-use, overuse, and reactions to therapeutic drugs result in 140,000 hospital admissions every year.
 - Health care associated infections: It has been estimated that as many as 150,000 health care associated infections occur in Australia each year.
 - *Blood:* There are substantial differences in the clinical use of blood products across Australia and much of this use can be classed as inappropriate.
 - Patient falls: Falls are a leading cause of injury and death among people aged 65 years and over. One in three people over 65 years fall each year.
 - Pressure ulcers: The prevalence of patients who develop pressure ulcers in the health system is estimated to be between 5 and 15 percent – almost all are preventable.

Q. What is the Council doing to prevent adverse events?

A. The Council is undertaking a number of different initiatives to prevent adverse events. These include the development of the *Ensuring Correct Patient, Correct Site, Correct Procedure Protocol* to prevent surgery and other procedures on the wrong patient or part of the body, promoting incident reporting across Australia, promoting training in Root Cause Analysis to determine the factors contributing to an adverse event, and the use of a common medication chart.

The Council is also working to gather comprehensive national data to better analyse trends in adverse events so that these areas can be targeted for improvement in the future.

Q. How can I find out more information?

A. More information on the Council's work to reduce adverse events can be obtained by visiting the Council's website at www.safetyandquality.org, or by contacting the:

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Wilson, RM; Runciman, WB; Gibberd, RW; Harrison, BT; Newby, L; Hamilton, JD. The Quality in Australian Health Care Study. Medical Journal of Australia. 163(9):458-71, 1995.