



Auditing the audit: Can we do better?



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Introduction

Surgical audit and peer review are important strategies in maintaining standards of care in surgery and are a requirement for continuing professional development for all Fellows of The Royal Australasian College of Surgeons.

We aim to determine if the current process of determining and reporting complications within our unit was accurate.

Method

A systematic review of the medical records for all admissions from 1/1/13 to 31/3/2013 was performed. Results were then compared with those which had been presented at monthly audit meetings.

Complications were graded according to the Royal Australasian College of Surgeons' guidelines [1].

Results

During the three month period there was a total of 973 admissions, comprising 399 operations performed, 367 endoscopic procedures, and 207 non-operative admissions.

Results are summarised in the table below. Reported complications were those presented at unit meetings. Actual complications were those identified in the current study.

Of the 5 mortalities 3 had died of traumatic injuries soon after presentation without operative intervention. Also identified were two complications of surgery performed at another facility then transferred for step down care.

Complication grade	Actual	Reported
Grade 1	21	2
Grade 2	24	3
Grade 3	20	7
Grade 4	5	5

Conclusion

In our audit of the audit we found that only 24% of complications were reported using our current process.

Within our unit a review of current practices has been performed to address under-reporting. Further review will be required to assess the effectiveness of interventions.

This study highlights how auditing processes need ongoing review and hope it can act as a prompt for other units to ensure accuracy in their auditing process.

References

1. Surgical Audit and Peer Review: A guide by the Royal Australasian College of Surgeons. Third edition 2008. http://www.surgeons.org/media/304217/surgical_audit_peer_review.pdf Accessed 2030 AEST 30/3/2014