

OPEN4RESULTS

JUNE 2017





Introduction

The Health Quality & Safety Commission

was established in December 2010. Our role is to work with the health and disability sector to ensure New Zealanders receive the safest, highest quality care possible.

Open4Results is a six-monthly report on the harm prevented, and money saved, in areas the Commission focuses on or raises awareness about.

These successes are a result of the work and commitment of the whole sector to improve patient safety and save lives.

Avoiding harm



Falls are the most common cause of serious injury, and occasionally death, in our public hospitals.

The Commission's **reducing harm from falls** programme has introduced a number of simple interventions to help address falls-related harm. This programme works alongside and supports existing programmes in the sector.



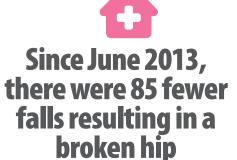


Every week in 2010–12, on average, **2 patients fell** and broke their hips in New Zealand hospitals. This rate has now almost halved.





Having a fall can add a month to someone's hospital stay, and is very costly.









On average, an avoided broken hip gives an extra 1.6 years of healthy life*





Value \$23 million

Reduction in DVT/PE

Deep vein thrombosis (DVT) describes a range of blood clots. These usually start in the leg, but can travel to the lungs to become a pulmonary embolism (PE) and cause serious damage to the lungs and other organs.

From 2013, the Commission has worked with district health boards to implement the Safe Surgery NZ Programme and





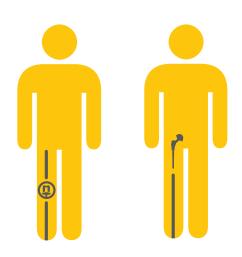


*SEE PAGE 7 FOR AN EXPLANATION OF THIS

Surgical site infections

The Commission's Surgical Site Infection Improvement Programme, concentrating on hip and knee replacements (and more recently cardiac surgery), has run since 2012.

Good practice in **avoiding infections** through timely use of the right antibiotics and good skin preparation has increased significantly since then.





Since August 2015, reduction in infection rate from 1.3% of operations to 0.9% of operations



equates to !

This equates to 51 fewer infections between August 2015 and June 2016, saving up to \$1.9 million







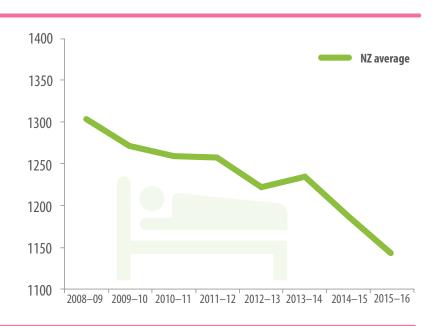
Doing the right thing

Fewer older people admitted repeatedly to hospital

The Commission's **health quality and safety indicators** have highlighted the number of older people who are admitted to hospital as an emergency more than once. When older people are repeatedly admitted to hospital it can indicate they are not receiving the right range of care that is tailored to them.

The **reduction in admissions** reflects interventions put in place by many district health boards.

Occupied bed-days associated with 75s and over admitted twice or more as an emergency per 1000 people









*Measuring value and costs saved

There are two ways to measure value and costs saved. The first is spending health care dollars more effectively. For example, avoiding the costs of harm – such as doing things right the first time so it doesn't cost more to put them right; and not giving people unnecessary interventions or treatments. This allows more patients to be treated and more services to be offered.

The second way to provide value is for people to live longer, healthier lives. Where this happens, there is value for the individual and for society. Based on what New Zealanders say they are prepared to spend to save a life, we can calculate the value of a life at \$4 million. This can be adjusted to give a value for a year of life in good health, which is estimated at \$180,000.

For a more detailed look at the analysis behind the data and in-depth discussion about what these results mean for New Zealand's health care system, check out *A Window on the Quality of New Zealand's Healthcare*, which can be found on www.hgsc.govt.nz.

OPEN4RESULTS

Published in June 2017 by the Health Quality & Safety Commission, PO Box 25496, Wellington 6146.

ISSN 2573-8066

This document is available on the Health Quality & Safety Commission website at:

www.hqsc.govt.nz