

# Perioperative Toolkit

## Self Assessment Tool

	Name(s)	Email(s)	Status
Names(s) of respondent(s)	werwer	<a href="mailto:ytsdf@test.com">ytsdf@test.com</a>	✓
Date of assessment:	01/12/2016		✓

Elements	Recommended Standards		Clear	
Element 1: Perioperative process supports the surgical / procedural journey			Responses	Comments
	1.1	Does the hospital have and use agreed and documented processes to support the perioperative journey for patients, families and carers?	Sometimes 31-59 ✓	
	1.2	A standardised format (electronic or paper based) is used for documenting the patient's preoperative status?	Never/a little 0.-30% ✓	
	1.3	The patient's preoperative summary can be accessed by all members of the perioperative health care team?	Sometimes 31-59 ✓	
	1.4	The hospital uses a documented process for identifying and supporting patients who require additional services e.g. professional interpreters, Aboriginal hospital liaison service?	Never/a little 0.-30% ✓	

			Responses	
	2.1	The hospital uses an agreed and documented triage process, developed locally in consultation with anaesthetists, for reviewing all patients scheduled for a surgery / procedure?		✗
	2.2	The Patient Health Questionnaire (or equivalent) is screened within two working days of receipt?		✗

Element 2: Pre admission review and triage	2.3	The triage process for each patient, including review of the completed Patient Health Questionnaire and Transfer of Care Planning Questionnaire (or equivalent), is completed two - four weeks prior to surgery?	<input type="text"/> ▼	✘	
	2.4	The Perioperative Service uses a Patient Health Questionnaire (or equivalent) as a preliminary screening/triage tool for each patient?	<input type="text"/> ▼	✘	
	2.5	The hospital has an agreed process for following up incomplete PHQs/screening tools?	<input type="text"/> ▼	✘	
	2.6	The hospital's triage process includes planning for the patient's transfer of care from hospital?	<input type="text"/> ▼	✘	
	2.7	Patients are provided with clear instructions and education (written and verbal) appropriate to their needs and health literacy?	<input type="text"/> ▼	✘	
	2.8	Patients receive a telephone call on the day prior to surgery outlining instructions e.g. for fasting, admission times, medication management?	<input type="text"/> ▼	✘	

			Responses		Comments
Element 3: Pre procedure preparation	3.1	The hospital has documented risk assessment / stratification pathways for all patients to determine who may require follow up / further preoperative testing?	<input type="text"/> ▼	✘	
	3.2	The hospital has an agreed and documented process and/or tool for liaising with other health care providers, e.g. the patient's GP, to identify additional information necessary for determining the patient's level of perioperative risk?	<input type="text"/> ▼	✘	
	3.3	The hospital has documented triage criteria, endorsed by local anaesthetists, used to determine which patients require review at the pre admission clinic?	<input type="text"/> ▼	✘	
	3.4	The hospital has a documented process for planning the level of postoperative care required, e.g. Intensive Care, Close Observation (also know as High Dependency)?	<input type="text"/> ▼	✘	
	3.5	The hospital has an anaesthetist/s within the PPP/PAC responsible for the medical leadership of the pre procedure preparation process?	<input type="text"/> ▼	✘	
	3.6	The hospital has a nurse within the PAC responsible for nursing leadership of the pre procedure preparation process?	<input type="text"/> ▼	✘	
	3.7	Details of the patient's pre procedure preparation are documented in a central location and communicated to other members of the health care team, especially the procedural anaesthetist and surgeon/proceduralist?	<input type="text"/> ▼	✘	

				Responses	Comments
Element 4: Multidisciplinary team	4.1	The members of the multidisciplinary perioperative health care team are communicated to those involved in the patient's planned perioperative journey?		<input type="text"/> ▼ ✘	
	4.2	The hospital has a clear process for ensuring all members of the multidisciplinary team who are involved in the patient's perioperative journey, are informed of relevant information for the patient's upcoming surgery / procedure?		<input type="text"/> ▼ ✘	
	4.3	There is a clear communication process for involving and updating members of the multidisciplinary team about changes to the triage and pre procedure preparation processes managed by the Perioperative Service?		<input type="text"/> ▼ ✘	
	4.4	There is a documented process for identifying other services which may be required by the patient, their family or carers e.g. professional interpreters, Aboriginal hospital liaison services?		<input type="text"/> ▼ ✘	
	4.5	There is a local protocol for accessing these services (or providing access to these services) for patients, their families and carers?		<input type="text"/> ▼ ✘	
	4.6	There is a point of contact within the Perioperative Service for members of the health care team, including the GP, to contact if they need to clarify aspects of the patient's planned perioperative journey?		<input type="text"/> ▼ ✘	

		To be answered if the SPP (or equivalent) tool is in use. Will not contribute to assessment rating.		Responses	Comments
Element 5: Standardised Perioperative Pathway / Enhance Recovery or Clinical Pathways	5.1	A Standardised Perioperative Pathway (SPP) tool (or equivalent) is completed for each patient's perioperative journey?		<input type="text"/> ▼ ✘	
	5.2	Formal clinical pathways or enhanced recovery tools are completed each patient's planned perioperative journey?		<input type="text"/> ▼ ✘	
	5.3	The Perioperative Service is informed when a patient's planned perioperative is varied e.g. unplanned return to theatre, unplanned admission to ICU, cancellation on the day of surgery?		<input type="text"/> ▼ ✘	

		Responses	Comments
6.1	There is a documented process for continuous quality improvement within the Perioperative Service?	<input type="text"/> ▼ ✘	

Element 6: Measuring for quality improvement	6.2	The Perioperative Service team meets regularly to review, analyse and discuss local data?	<input type="text"/> ▼	✘	
	6.3a	Local continuous quality improvement review and analysis includes: Performance indicators?	<input type="text"/> ▼	✘	
	6.3b	Process measures?	<input type="text"/> ▼	✘	
	6.3c	Health Outcomes?	<input type="text"/> ▼	✘	
	6.3d	Patient reported measures?	<input type="text"/> ▼	✘	
	6.4	Review and analysis is regularly shared with the perioperative multidisciplinary team for action?	<input type="text"/> ▼	✘	

			Responses		Comments
Element 7: Integration with primary care	7.1	There is an agreed and documented process for communicating with the patient's primary health care practitioner and other specialists as needed to optimise the patient's perioperative journey?	<input type="text"/> ▼	✘	
	7.2	There is a point of contact within the perioperative service for the patient's other health care providers to contact to support the patient's planned perioperative journey?	<input type="text"/> ▼	✘	
	7.3	The primary health care practitioner is provided with a written transfer of care within 48 hours of the transfer?	<input type="text"/> ▼	✘	
	7.4	Significant variance in the patient's planned perioperative journey, e.g. unplanned admission to ICU, is communicated to the primary health care practitioner?	<input type="text"/> ▼	✘	

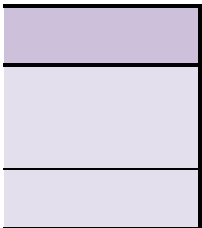
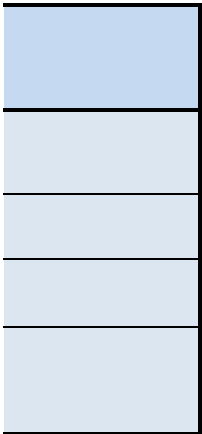
			Responses		Comments
Element 8: Partnering with patients	8.1	The Perioperative Service actively supports shared decision making with the patient, carer and family for the patient's planned perioperative journey?	<input type="text"/> ▼	✘	
	8.2	The Perioperative Service actively engages with patients, families and carers to identify agreed outcomes for the patient's planned perioperative journey?	<input type="text"/> ▼	✘	
	8.3	The patient, family and carer are provided with key perioperative information and education to support the patient's planned perioperative journey?	<input type="text"/> ▼	✘	

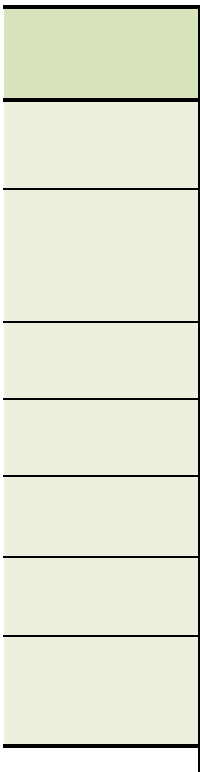
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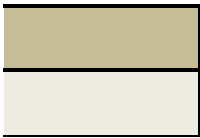
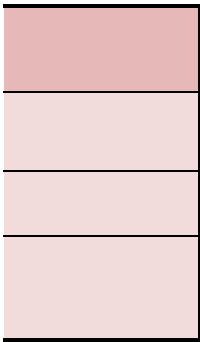
Element 9: Clinical and corporate governance	9.1a	The Perioperative Service is underpinned by structured clinical AND corporate governance at the: LHD/Network Level?	<input type="text"/> ▼ ✘	
	9.1b	Hospital Level?	<input type="text"/> ▼ ✘	
	9.1c	Perioperative Service Level?	<input type="text"/> ▼ ✘	

No of answers provided 6

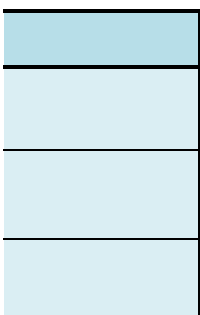
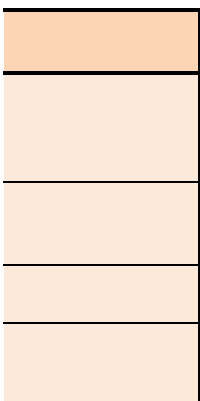
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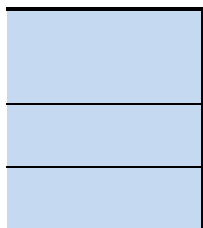




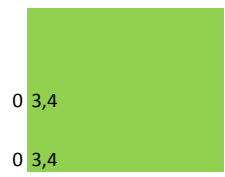
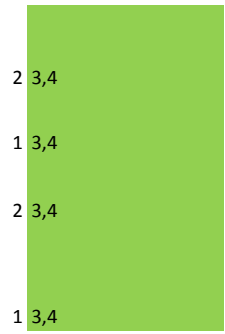


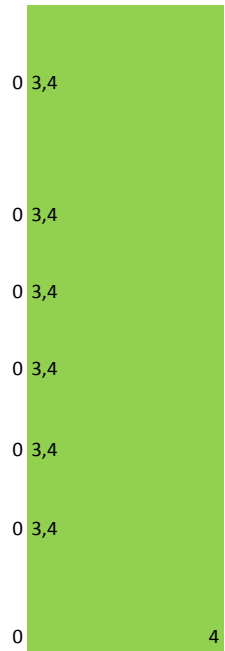
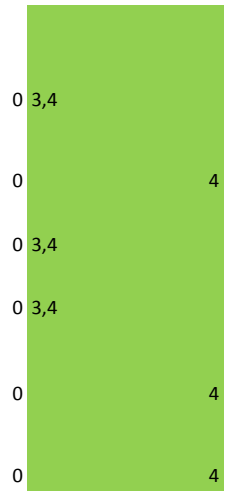


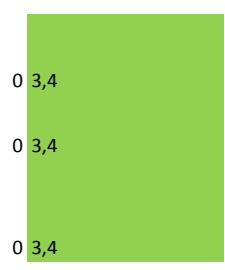
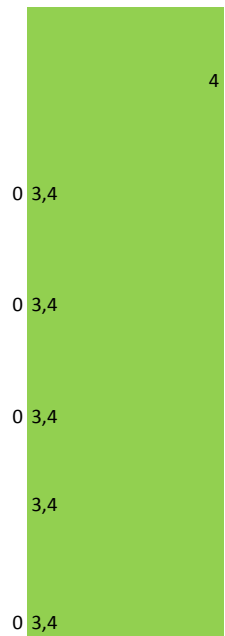


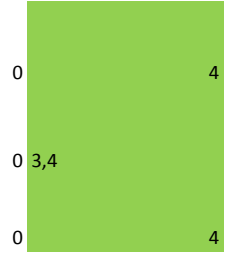
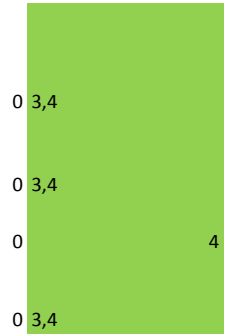
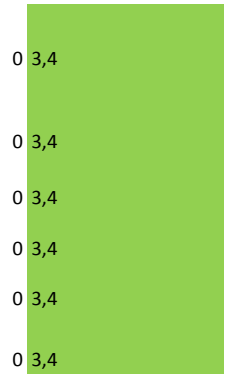


Scores considered as "Meeting the Standards"









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