

Preoperative Assessment Dataset

A Do Once and Share project
for Connecting for Health

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DOAS - Background

- Do Once and Share (DOAS)
 - Sir Muir Gray – Knowledge, Process and Information (Director of until 2006)
 - 44 original projects weblink www.doas.gov.uk
 - Connecting for Health
 - Systems design
 - Commissioning focus
 - 6 months
 - National event

Running the DOAS POA Project

- Project leads
 - Project – Suzie Normanton
 - Clinical – Dr Steven Laitner
- Action Team
 - Membership
 - Jane Jackson, Chair, Preoperative Association
- EAT – Extended Action Team
- Wider forum
- Project website
 - www.poaunscheduledcare.org

Aims and Deliverables from the DOAS project

- Aims of this project
 - Form a local action team
 - Establish and invite challenge at each stage of the dataset formation
 - Deliver a high level dataset within 6 months
 - All deliverables on www.poaunscheduledcare.org
- Outputs
 - High level POA dataset
 - Paed specific subset – Ruth Ketteringham and her team at Wythenshawe, Chrissy Mccaugherty, ROH & NAPA and Dr Jane Peutrall, Paediatric Anaesthetist, APAGBI for continuing this work

The DOAS POA National Consensus event

- National Consensus Event
 - delegates
 - aims
 - outputs
- Future
 - 18 weeks wait 34 elective care high volume pathways
www.18weeks.nhs.uk
 - Royal College and Preoperative Association endorsement
 - the start of the journey

Using the POA Dataset

- Localising the dataset is key
 - Different orders
 - Using some parts or all parts of the dataset
 - Who does what locally
- POA different methods
 - Phone e.g. NHS Direct Bolton
 - IT systems e.g. Prompte,
 - Face to Face
- Patient specific
 - Condition specific
 - Speciality specific

The Whole dataset

- Whole dataset
 - some things are beyond compression
- Please do visit
 - the poster stand
 - and pick up a delegate dataset handout
 - or the website

www.poaunscheduledcare.org

All Sections of the dataset

POA - Initial Assessment

Datafield

- | | |
|----|--|
| A. | Initial check of understanding of POA process and expected operation |
| B. | Operation and condition details |
| C. | Key Demographics (1)- (from spine and GP system) |
| D. | Key Medical, Surgical and Anaesthetic History |

POA Further Assessment

- | | |
|---|--|
| E. | Additional Medical History |
| (Questions relating to babies, children and young people) | |
| F. | Examination |
| G. | Investigations [follow NICE guidance using ASA grade (102)] - need to see date of last test and if test indicated is repeat test necessary |

POA Completion

- | | |
|----|--|
| H. | Infectious Disease Status |
| I. | Preoperative Assessment Outcome |
| J. | Informed decision making (IDM) (incl aids - leaflets, DVDs) - may be performed over a number of contacts over a period of time |
| K. | Consent |
| L. | Preparation for operation and immediate post operative period |
| M. | Operation confirmation and discharge planning |
| N. | Demographics (2) - (from spine and GP system) and process |

DATA SET ENDS

Dataset sections considered today

A, D, J, L

POA - Initial Assessment

Datafield

- A. Initial check of understanding of POA process and expected operation
- D. Key Medical, Surgical and Anaesthetic History

POA Further Assessment

POA Completion

- J. Informed decision making (IDM) (incl aids - leaflets, DVDs) - may be performed over a number of contacts over a period of time
- L. Preparation for operation and immediate post operative period

Section A

POA - Initial Assessment

Datafield

A. Initial check of understanding of POA process and expected operation

1 Patient knows role of POA, process and expected operation

2 FREE TEXT

Section D

PREOPERATIVE ASSESSMENT DATASET - Draft 5.0

POA - Initial Assessment

Datafield

D.	Key Medical, Surgical and Anaesthetic History
18	Active medical problems (including surgical, mental health - incl phobias)
19	Inactive medical problems
20	Family history of medical problems
21	Previous operations
22	Previous operation complications
23	Previous anaesthetics
24	Previous anaesthetic problems
25	Family history of anaesthetic problems
26	Formal airway assessment (History)
27	Current prescribed medication
28	Current non-medication treatments received
29	FREE TEXT

Section J

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POA Completion

	Datafield	Additional information on datafield
J.	Informed decision making (IDM) (incl aids - leaflets, DVDs) - may be performed over a number of contacts over a period of time	
107	Expected type of surgical procedure (open/ laparoscopic)	
108	Expected type of anaesthesia	
109	Expected day case/ admitted	
110	Generic and condition specific "Quality of Life" measurement (PROMs)	
111	Patient specific prediction of postoperative QoL outcome	
112	Assessment of IDM needs and preferences	How a patient wishes to be involved in decision making
113	Confirmation of patient's understanding/ expectations of operation	
114	Confirmation of patient's understanding/ expectations of anaesthesia and pain relief	
115	Patient's understanding/ expectations and preferences regarding blood transfusion and alternatives	
116	Patient's understanding of treatment alternatives	
117	Patient's understanding of rehabilitation needs	LOS, time off work, time for resumption of daily activities
118	Patient's view's on need for operation taking account of symptom impact on quality of life	
119	FREE TEXT	

Section L

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POA Completion

	Datafield	Additional information on datafield
L.	Preparation for operation and immediate post operative period	
127	Anatomical position	
128	Medication to be stopped (including herbal)	Link to 27/28/30/ 31 : Drop down e.g. aspirin, clopidogrel, warfarin, contraceptive pill/HRT
129	Preoperative eating and drinking advice to patient	
130	DVT prophylaxis (NICE guidance)	Outcome from VTE Risk Assessment
131	Antibiotic prophylaxis	
132	Condition specific preparation	Bowel preparation
133	Planned Pain Relief	
134	Planned PONV Prevention	
135	Treatment escalation plans	e.g. Advanced directives, DNR
136	FREE TEXT	

Conclusion and where next

- Conclusion where to next ...
- Website
- Take it away & locally useful