Introduction to LAOS

What is LAOS?

Limited Adverse Occurrence Screening (LAOS) supports effective clinical risk management (CRM) in local regional health services and small rural health services.

LAOS was developed at the Wimmera Base Hospital in Horsham Victoria. In summary patient histories are extracted based on the presence of one or more defined screening criteria, and reviewed by clinicians for the presence of an adverse event.

An adverse event is defined as “an untoward patient event, which under optimal conditions is not a consequence of the patient’s disease or treatment”. The adverse event is then classified according to its severity and preventability.

Adverse events are analysed and recommendations aimed at preventing these events from recurring, are made and implemented.

LAOS is an effective way of identifying local system problems in clinical care, and has been shown to be a valuable mechanism to engage physicians in CRM.

As its name suggests, it does not aim to identify all adverse events. Despite the limitations in being able to produce quantitative data on adverse events, there is evidence of a decline in adverse events found when using these criteria.

Medical record screening requirements

It is expected that health services screen medical records for all inpatient admissions for the presence of the following:

- patient death
- unplanned return to theatre within seven days
- unplanned re-admission within 28 days
- transfer to another health service
- patient length of stay greater than 35 days
- any medical record which has been recommended by a clinician for review.

Health services may use additional screening criteria that are suitable for the range of services they provide.

Specialist hospitals should develop alternative screening criteria, if necessary, that are appropriate to their own circumstances. In addition to medical records screened positive for nominated criteria, clinical staff can refer other medical records for review, where appropriate.
**Reporting requirements**

Health services are expected to provide the following information as part of their Annual Quality of Care Report:

- details of screening criteria
- the number of inpatient medical records screened and reviewed
- health service process and system modifications made in response to adverse events detected
- evidence of measurable improvements in the processes and outcomes of patient care following actions taken in response to adverse events.

**Reporting requirements for rural health services**

LAOS commenced in 2001 with the assistance of rural Divisions of General Practice.

With the assistance of [General Practice Victoria](#), six lead divisions coordinate the LAOS program across Victoria:

- General Practice Alliance, South Gippsland
- Goulburn Valley Division of General Practice
- Murray Plains Division of General Practice
- North East Victorian Division of General Practice
- Otway Division of General Practice
- West Vic Division of General Practice.

The program includes the following requirements:

- Divisions will engage Visiting Medical Officers to participate in the program
- health services will be reimbursed for associated administrative costs
- aggregate data is to be made available for Annual Quality of Care Reports and the clinical components of hospital accreditation.

**Review of the LAOS program**

The LAOS program was reviewed in 2005. The report including key findings and recommendations is available for downloading from the Department of Health website.

A further review of the LAOS program will be undertaken in 2011.

**For further information**

For further information contact the:

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