



## On the Radar

Issue 589

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*On the Radar* is a summary of some of the recent publications in the areas of safety and quality in health care. Inclusion in this document is not an endorsement or recommendation of any publication or provider. Access to particular documents may depend on whether they are Open Access or not, and/or your individual or institutional access to subscription sites/services. Material that may require subscription is included as it is considered relevant.

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### On the Radar

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### Reports

*Strategies to reduce waiting times for elective care*

Blythe N, Ross S

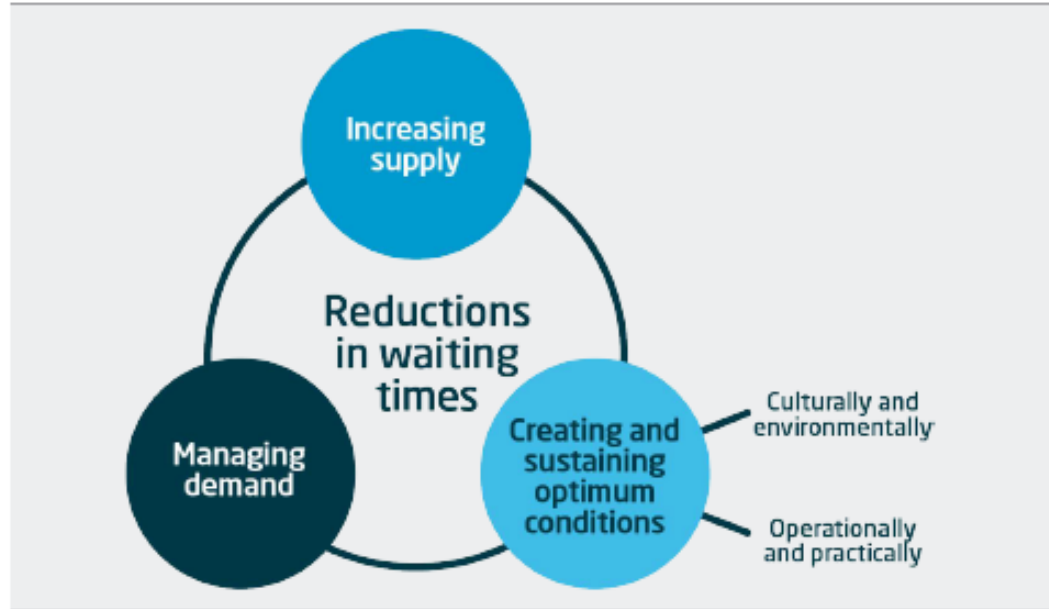
London: The King's Fund; 2022. p. 85.

URL	<a href="https://www.kingsfund.org.uk/publications/strategies-reduce-waiting-times-elective-care">https://www.kingsfund.org.uk/publications/strategies-reduce-waiting-times-elective-care</a>
Notes	The King's Fund in the UK have published this report on research to understand the strategies that have been used to reduce waiting times in England and elsewhere in the past 20 years. It is observed that 'successful strategies are typically associated with a concert of activities that simultaneously ensure sufficient supply of health care, manage demand and optimise the conditions within the health care system itself.' Recognising the political, social and economic context can significantly shape what is possible, the report's webpage notes 'the research highlighted not only hope but opportunities to reduce waiting times in the present day: by addressing shortages of health care staff and physical resources urgently; by working with integrated care

systems in the spirit of prevention, collaboration, inclusion and community-based models of care; and by aligning a vision for the health services with a plan that brings staff, patients and the public along on the journey to get there.’

**Figure 1 The components of an effective strategy to reduce and sustain waiting times**

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*The assessment of venous thromboembolism risks associated with pregnancy and the postnatal period*  
 Independent report by the Healthcare Safety Investigation Branch NI-006522  
 Healthcare Safety Investigation Branch  
 Farnborough: HSIB; 2023. p. 58.

*Detection of jaundice in newborn babies*  
 Independent report by the Healthcare Safety Investigation Branch NI-003739  
 Healthcare Safety Investigation Branch  
 Farnborough: HSIB; 2023. p. 53.

URL	<a href="https://www.hsib.org.uk/investigations-and-reports/the-assessment-of-venous-thromboembolism-risks-associated-with-pregnancy-and-postnatal/">https://www.hsib.org.uk/investigations-and-reports/the-assessment-of-venous-thromboembolism-risks-associated-with-pregnancy-and-postnatal/</a> <a href="https://www.hsib.org.uk/investigations-and-reports/detection-of-jaundice-in-newborn-babies/">https://www.hsib.org.uk/investigations-and-reports/detection-of-jaundice-in-newborn-babies/</a>
Notes	<p>The Healthcare Safety Investigation Branch (HSIB) in the UK has released these two reports.</p> <p>The first explores the issues associated with the assessment of risk factors for venous thrombosis in pregnancy and the first 6 weeks after birth. Among the findings, the HSIB reports:</p> <ul style="list-style-type: none"> <li>• Assessment of VTE risk factors should take place routinely due to body changes in pregnancy and increased risk of venous thromboembolism (VTE).</li> <li>• Although assessing VTE risk is important, it is a relatively rare condition and there are a number of other competing risks that may take priority.</li> </ul> <p>The second report explored the detection and diagnosis of jaundice in newborn babies, in particular babies born prematurely (before 37 weeks of pregnancy). Specifically, it explored delayed diagnosis due to there being no obvious visual signs of jaundice apparent to clinical staff.</p>

## Journal articles

*Is evidence of effectiveness a driver for clinical decision support selection? A qualitative descriptive study of senior hospital staff*

Baysari MT, Van Dort BA, Stanceski K, Hargreaves A, Zheng WY, Moran M, et al

International Journal for Quality in Health Care. 2023:mzad004.

DOI	<a href="https://doi.org/10.1093/intqhc/mzad004">https://doi.org/10.1093/intqhc/mzad004</a>
Notes	Paper reporting on an Australian study that sought ‘to explore the views of senior hospital staff on the role evidence plays in the selection and implementation of HIT, with a particular focus on clinical decision support (CDS) alerts in electronic medication management systems.’ This qualitative study was based on interviews with 26 senior hospital staff from six Australian hospitals. While ‘Participants acknowledged the importance of an evidence-base’ the study concluded that <b>‘Decisions to implement CDS, and technology more broadly, are rarely evidence-based’</b> . The authors suggest that ‘In the absence of evidence, evaluation or monitoring of technologies post-implementation is critical, particularly to identify new errors or risks associated with HIT implementation and use.’

For information on the Commission’s work on e-health safety, see

<https://www.safetyandquality.gov.au/our-work/e-health-safety>

*Nudge interventions to reduce unnecessary antibiotic prescribing in primary care: a systematic review*

Raban MZ, Gonzalez G, Nguyen AD, Newell BR, Li L, Seaman KL, et al

BMJ Open. 2023;13(1):e062688.

DOI	<a href="https://doi.org/10.1136/bmjopen-2022-062688">https://doi.org/10.1136/bmjopen-2022-062688</a>
Notes	In recent decades ‘nudge’ interventions have been used in the hope of influencing various behaviours. This systematic review examined the literature on nudge interventions that sought to ‘reduce unnecessary antibiotic prescribing in primary care’. Based on 19 studies that tested 23 nudge interventions, the review found that ‘Nudge interventions are effective for improving antibiotic prescribing in primary care. Expanding the use of nudge interventions beyond social norm nudges could reap further improvements in antibiotic prescribing practices’.

For information on the Commission’s work on antimicrobial stewardship in primary care, see

<https://www.safetyandquality.gov.au/antimicrobial-stewardship-primary-care>

*Australian Healthcare Review*

Volume 47, Number 1, February 2023

URL	<a href="https://www.publish.csiro.au/ah/issue/11454">https://www.publish.csiro.au/ah/issue/11454</a>
Notes	A new issue of the <i>Australian Healthcare Review</i> has been published. Articles in this issue of the <i>Australian Healthcare Review</i> include: <ul style="list-style-type: none"> <li>• If not now, when? Implementation failure of a <b>rights- and value-based policy agenda for Aboriginal and Torres Strait Islander health</b> (Roxanne Bainbridge)</li> <li>• What next for <b>voluntary assisted dying</b> in Australia? (Ben P White and Lindy Willmott)</li> <li>• A racial bias test with tertiary cancer centre employees: why anti-racist measures are required for <b>First Nations Australians cancer care equity</b> (I D’Costa, I Hunt, L Russell and K Adams)</li> </ul>

	<ul style="list-style-type: none"> <li>• Enhancing <b>person-centred care and access to primary care for Aboriginal and Torres Strait Islander peoples</b> (Bryce Brickley, Jaydene Burzacott and Thileepan Naren)</li> <li>• Attendance at, and experiences of, urban hospital outpatient appointments: informing a new <b>model of care for urban-dwelling Aboriginal and Torres Strait Islander patients</b> (Karen Wynter, Leanne Mullan, Tanya Druce, Gilbert Freeman, Graeme Maguire, Lauren Davidson, Harin Karunajeewa, Shane Crowe and Bodil Rasmussen)</li> <li>• <b>Child rearing and parenting programs among First Nations' populations</b> in high-income countries: a bibliometric review (Amy Waller, Ama Ampofo, Jamie Bryant and Robert W Sanson-Fisher)</li> <li>• <b>A culturally safe referral service for at-risk mothers and infants</b> in marginalised, Aboriginal, and Culturally and Linguistically Diverse families (Anna T Booth, Jennifer E McIntosh, Lakshmi Sri, Sarah Decrea, Jamie Lee and Claire Ralfs)</li> <li>• The Commonwealth Criminal Code restricts the use of carriage services to access <b>voluntary assisted dying</b> in Victoria: a perspective (Kate Furness, Jim Howe, Mitchell Chipman, Nirasha Parsotam and Margaret O'Connor)</li> <li>• <b>Pandemic planning: data, information and evidence</b> (Peter Lewis-Hughes and Peter Brooks)</li> <li>• Adapting the <b>'First 2000 Days maternal and child healthcare framework' in the aftermath of the COVID-19 pandemic: ensuring equity in the new world</b> (Antonio Mendoza Diaz, Ron Brooker, Sara Cibralic, Elisabeth Murphy, Sue Woolfenden and Valsamma Eapen)</li> <li>• Changes in <b>paediatric Ambulatory Care Sensitive Conditions</b> in Victoria, 2018–20: the COVID-19 effect? (Mary White, Simon Craig, Wanyu Chu and Harriet Hiscock)</li> <li>• Creating <b>COVID-19 surge capacity at an elective surgical centre: a model for perioperative care</b> (Erica Remedios, Joel Adams and Leena Nagappan)</li> <li>• <b>Clinician perspectives on rapid transition to telehealth during COVID-19</b> in Australia – a qualitative study (Lillian Smyth, Suzannah Roushdy, Jerusha Jeyasingham, Joshua Whitbread, Peta O'Brien, Charles Lloyd, Christian J Lueck, Carolyn A Hawkins, Graham Reynolds and Diana Perriman)</li> <li>• Impact of the COVID-19 pandemic on <b>access and use of health services by middle-aged and older Australians</b> (Lorraine Ivancic, Diana M Bond and Natasha Nassar)</li> <li>• <b>COVID-19 vaccine hesitancy, acceptance and informational needs in an Australian cancer population: a cross-sectional survey</b> (Brighid Scanlon, David Wyld, Paul Firman, Midori Nakagaki, Jo Durham, Glen Kennedy, Paul Moran, Michael Smith and Nicole Gavin)</li> <li>• Did the <b>coronavirus vaccination program in a rural and regional area</b> work? Health outcomes of the vaccination program in Wide Bay (S Kitchener)</li> <li>• Worsening general <b>health and psychosocial wellbeing of Australian hospital allied health practitioners during the COVID-19</b> pandemic (Danielle Hitch, Sarah Booth, Karen Wynter, Catherine M Said, Kimberley Haines, Bodil Rasmussen and Sara Holton)</li> <li>• Survey of <b>intensive care unit staff views on a newly introduced reusable isolation gown</b> (Nikolaos Angelopoulos, Samantha Angiolella, Paula Lyons, Bryan Ross and Forbes McGain)</li> </ul>
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URL	<a href="https://www.longwoods.com/publications/nursing-leadership/27002/1/vol.-35-no.-3-2022">https://www.longwoods.com/publications/nursing-leadership/27002/1/vol.-35-no.-3-2022</a>
Notes	<p>A new issue of <i>Nursing Leadership</i> has been published. Articles in this issue of <i>Nursing Leadership</i> include:</p> <ul style="list-style-type: none"> <li>• Editorial: Leadership for a <b>Reimagined, Thriving and Sustainable Nursing Workforce</b> (Ruth Martin-Misener)</li> <li>• An Innovative and Comprehensive Approach to <b>Nursing Workforce Sustainability</b> in Nova Scotia (Gail Tomblin Murphy, Tara Sampalli, Caroline Chamberland Rowe, Janet Rigby, Cindy MacQuarrie, Adrian MacKenzie and Nancy MacConnell-Maxner)</li> <li>• <b>Nurses: Architects of the Future of Healthcare</b> (Karima Velji)</li> <li>• <b>Hindsight Is 2020: A Graduate Student Perspective</b> (Deanne Curnew, Ahmad Deeb, Savannah Isaacs, Rebecca Puddester and Crystal Vaughan)</li> <li>• Case Study: The <b>Impact of Nursing Professional Practice during the COVID-19 Pandemic</b> at a Large Community Hospital in Canada (Jennifer Yoon, Derek Hutchinson, Cecile Marville-Williams, Mariekris Albano, Susana Neves-Silva, Nancy Purdy and Aleksandra Zuk)</li> </ul>

*BMJ Quality & Safety* online first articles

URL	<a href="https://qualitysafety.bmj.com/content/early/recent">https://qualitysafety.bmj.com/content/early/recent</a>
Notes	<p><i>BMJ Quality &amp; Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> <li>• Editorial: <b>Emotional safety is patient safety</b> (Audrey Lyndon, Dána-Ain Davis, Anjana E Sharma, Karen A Scott)</li> <li>• Editorial: Understanding the consequences of <b>GP referral thresholds</b>: taking the instrumental approach (Jen Lewis, Christopher Burton)</li> </ul>

*International Journal for Quality in Health Care* online first articles

URL	<a href="https://academic.oup.com/intqhc/advance-articles">https://academic.oup.com/intqhc/advance-articles</a>
Notes	<p>International Journal for Quality in Health Care has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> <li>• Is evidence of effectiveness a driver for <b>clinical decision support selection?</b> A qualitative descriptive study of senior hospital staff (Melissa T Baysari, Bethany A Van Dort, Kristian Stanceski, Andrew Hargreaves, Wu Yi Zheng, Maria Moran, Richard Day, Ling Li, Johanna Westbrook, Sarah Hilmer)</li> <li>• The accuracy of the <b>Global Trigger Tool</b> is higher for the identification of adverse events of greater harm: a diagnostic test study (Sara Monteiro Moraes, Teresa Cristina Abreu Ferrari, Alline Beleigoli)</li> <li>• Implementing a Screening Algorithm for <b>Early Recognition of Sepsis in Hospitalised Children</b>. A Quality Improvement Project (Yael Feinstein, Slava Kogan, Jacob Dreier, Ayelet Noham, Shimrat Harosh, Jenia Lecht, Tzipi Srur, Nurit Cohen, Eileen Bar-Yosef, Eli Hershkowitz, Isaac Lazar, Yochai Schonmann, David Greenberg, Dana Danino)</li> </ul>

## Online resources

### *[USA] AHRQ Perspectives on Safety*

<https://psnet.ahrq.gov/psnet-collection/perspectives>

The US Agency for Healthcare Research and Quality (AHRQ) publishes occasional Perspectives on Safety essays. Recent essays include:

- ***Patient Safety Concerns and the LGBTQ+ Population***  
<https://psnet.ahrq.gov/perspective/patient-safety-concerns-and-lgbtq-population>

### *[UK] NIHR Evidence alerts*

<https://evidence.nihr.ac.uk/>

The UK's National Institute for Health Research (NIHR) has posted new evidence alerts on its site. Evidence alerts are short, accessible summaries of health and care research which is funded or supported by NIHR. This is research which could influence practice and each Alert has a message for people commissioning, providing or receiving care. The latest alerts include:

- **People with severe mental illness** need personalised support to manage long-term physical conditions
- Guidelines for **virtual home assessment tools**
- People with **inflammatory conditions** could pause treatment to improve their response to the **COVID-19 booster**
- Smart stethoscope uses artificial intelligence to **screen for heart failure**
- Safety-netting in general practice: how to manage an **uncertain diagnosis**
- **Joint replacements:** many people can safely wait 10 years for follow-up.



## COVID-19 resources

<https://www.safetyandquality.gov.au/covid-19>

The Australian Commission on Safety and Quality in Health Care has developed a number of resources to assist healthcare organisations, facilities and clinicians. These and other material on COVID-19 are available at <https://www.safetyandquality.gov.au/covid-19>

These resources include:

- ***OVID-19 infection prevention and control risk management*** This primer provides an overview of three widely used tools for investigating and responding to patient safety events and near misses. Tools covered in this primer include incident reporting systems, Root Cause Analysis (RCA), and Failure Modes and Effects Analysis (FMEA).  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance>
- ***Poster – Combined contact and droplet precautions***  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/infection-prevention-and-control-poster-combined-contact-and-droplet-precautions>

**STOP VISITOR RESTRICTIONS MAY BE IN PLACE**

**For all staff**  
**Combined contact & droplet precautions\***  
In addition to standard precautions

**Before entering room/care zone**

- 1 Perform hand hygiene
- 2 Put on gown
- 3 Put on surgical mask
- 4 Put on protective eyewear
- 5 Perform hand hygiene
- 6 Put on gloves

**At doorway prior to leaving room/care zone**

- 1 Remove and dispose of gloves
- 2 Perform hand hygiene
- 3 Remove and dispose of gown
- 4 Perform hand hygiene
- 5 Remove protective eyewear
- 6 Perform hand hygiene
- 7 Remove and dispose of mask
- 8 Leave the room/care zone
- 9 Perform hand hygiene

**What else can you do to stop the spread of Infections?**

- Consider patient placement
- Minimise patient movement
- Appropriate bed allocation.

\*e.g. Acute respiratory tract infection with unknown aetiology, seasonal influenza and Respiratory syncytial virus (RSV)  
For more detail, refer to the Australian Guidelines for the Prevention and Control of Infection in Healthcare and your state and territory guidance.

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- *Poster – Combined airborne and contact precautions*  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/poster-combined-airborne-and-contact-precautions>

**VISITOR RESTRICTIONS IN PLACE**

For all staff

## Combined airborne & contact precautions

in addition to standard precautions

**Before entering room/care zone**

- 1

**Perform hand hygiene**
- 2

**Put on gown**
- 3

**Put on a particulate respirator (e.g. P2/N95) and perform fit check**
- 4

**Put on protective eyewear**
- 5

**Perform hand hygiene**
- 6

**Put on gloves**

**At doorway prior to leaving room/care zone**

- 1

**Remove and dispose of gloves**
- 2

**Perform hand hygiene**
- 3

**Remove and dispose of gown**
- 4

**Leave the room/care zone**
- 5

**Perform hand hygiene (in an anteroom/outside the room/care zone)**
- 6

**Remove protective eyewear (in an anteroom/outside the room/care zone)**
- 7

**Perform hand hygiene (in an anteroom/outside the room/care zone)**
- 8

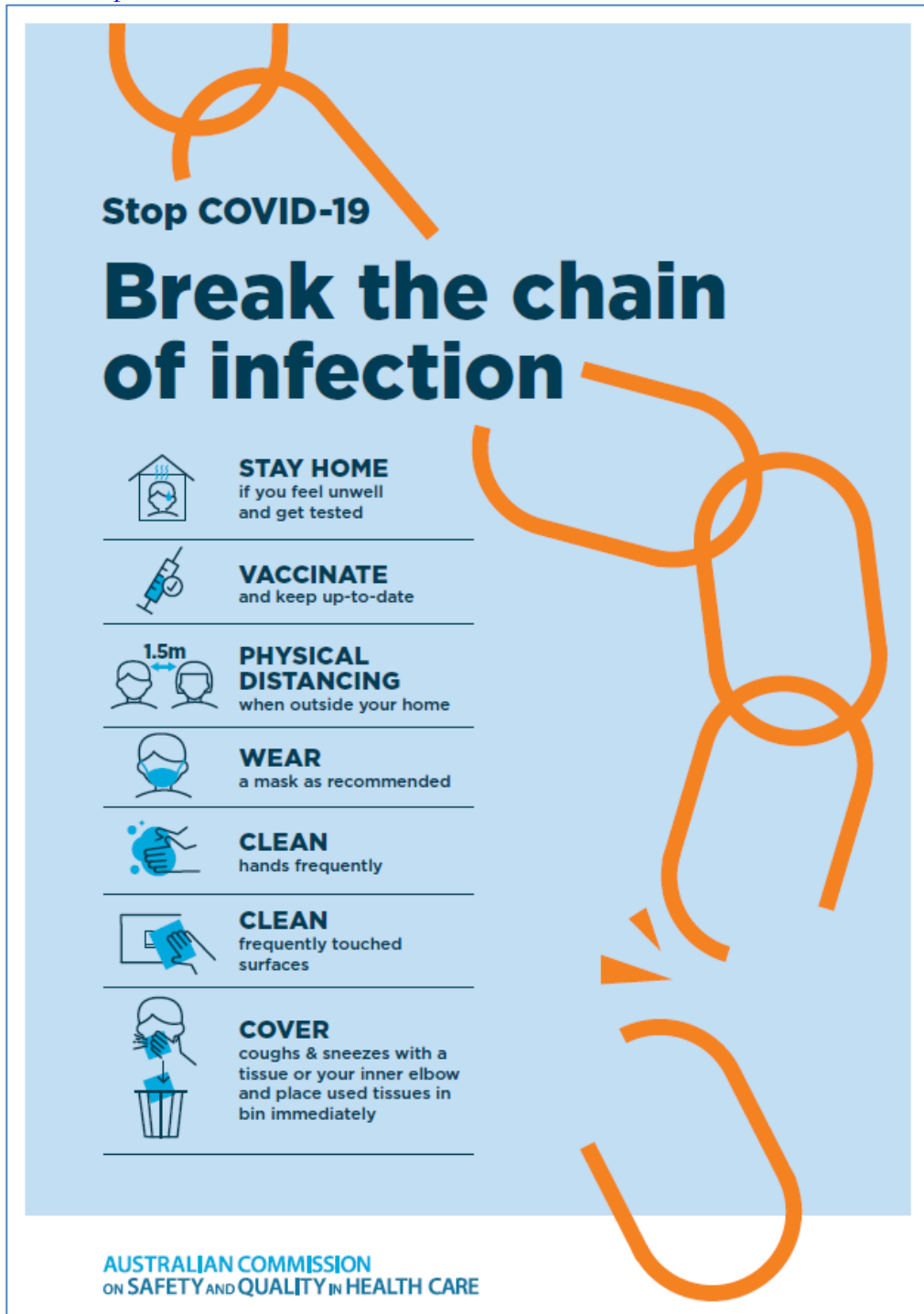
**Remove and dispose of particulate respirator (in an anteroom/outside the room/care zone)**
- 9

**Perform hand hygiene**

KEEP DOOR CLOSED AT ALL TIMES



- *Environmental Cleaning and Infection Prevention and Control*  
[www.safetyandquality.gov.au/environmental-cleaning](http://www.safetyandquality.gov.au/environmental-cleaning)
- *COVID-19 infection prevention and control risk management – Guidance*  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance>
- *Safe care for people with cognitive impairment during COVID-19*  
<https://www.safetyandquality.gov.au/our-work/cognitive-impairment/cognitive-impairment-and-covid-19>
- *Stop COVID-19: Break the chain of infection* poster  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/break-chain-infection-poster-a3>



- *COVID-19 and face masks – Information for consumers*  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-and-face-masks-information-consumers>

**AUSTRALIAN COMMISSION  
ON SAFETY AND QUALITY IN HEALTH CARE**

**INFORMATION**  
for consumers

## COVID-19 and face masks

### Should I use a face mask?

Wearing face masks may protect you from droplets (small drops) when a person with COVID-19 coughs, speaks or sneezes, and you are less than 1.5 metres away from them. Wearing a mask will also help protect others if you are infected with the virus, but do not have symptoms of infection.

Wearing a face mask in Australia is recommended by health experts in areas where community transmission of COVID-19 is high, whenever physical distancing is not possible. Deciding whether to wear a face mask is your personal choice. Some people may feel more comfortable wearing a face mask in the community.


When thinking about whether wearing a face mask is right for you, consider the following:

- Face masks may protect you when it is not possible to maintain the 1.5 metre physical distance from other people e.g. on a crowded bus or train
- Are you older or do you have other medical conditions like heart disease, diabetes or respiratory illness? People in these groups may get more severe illness if they are infected with COVID-19
- Wearing a face mask will reduce the spread of droplets from your coughs and sneezes to others (however, if you have any cold or flu-like symptoms you should stay home)
- A face mask will not provide you with complete protection from COVID-19. You should also do all of the other things listed below to prevent the spread of COVID-19.

### What can you do to prevent the spread of COVID-19?

Stopping the spread of COVID-19 is everyone's responsibility. The most important things that you can do to protect yourself and others are to:

- Stay at home when you are unwell, with even mild respiratory symptoms
- Regularly wash your hands with soap and water or use an alcohol-based hand rub
- Do not touch your face
- Do not touch surfaces that may be contaminated with the virus
- Stay at least 1.5 metres away from other people (physical distancing)
- Cover your mouth when you cough by coughing into your elbow, or into a tissue. Throw the tissue away immediately.



### *National COVID-19 Clinical Evidence Taskforce*

<https://covid19evidence.net.au/>

The National COVID-19 Clinical Evidence Taskforce is a collaboration of peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19. The taskforce is undertaking continuous evidence surveillance to identify and rapidly synthesise emerging research in order to provide national, **evidence-based guidelines and clinical flowcharts for the clinical care of people with COVID-19**. The guidelines address questions that are specific to managing COVID-19 and cover the full disease course across mild, moderate, severe and critical illness. These are ‘living’ guidelines, updated with new research in near real-time in order to give reliable, up-to-the minute advice to clinicians providing frontline care in this unprecedented global health crisis.

### *COVID-19 Critical Intelligence Unit*

<https://www.aci.health.nsw.gov.au/covid-19/critical-intelligence-unit>

The Agency for Clinical Innovation (ACI) in New South Wales has developed this page summarising rapid, evidence-based advice during the COVID-19 pandemic. Its operations focus on systems intelligence, clinical intelligence and evidence integration. The content includes a daily evidence digest, a COVID status monitor, a risk monitoring dashboard and evidence checks on a discrete topic or question relating to the current COVID-19 pandemic. There is also a ‘Living evidence’ section summarising key studies and emerging evidence on **COVID-19 vaccines** and **SARS-CoV-2 variants**. The most recent updates include:

- ***Current and emerging patient safety issues during COVID-19*** – What is the evidence on the current and emerging patient safety issues arising from the COVID-19 pandemic?
- ***Bivalent COVID-19 vaccines*** – What is the available regulatory and research evidence for bivalent COVID-19 vaccines?
- ***Surgery post COVID-19*** – What is the evidence for the timing of surgery, and outcomes following surgery, for people who have recovered from COVID-19?
- ***Paxlovid*** – What is the evidence for Paxlovid for treatment of COVID-19?
- ***Molnupiravir*** – What is the evidence for and regulatory context of molnupiravir for treatment of COVID-19?
- ***Eating disorders and COVID-19*** – What is the impact of the COVID-19 pandemic on the prevalence of eating disorders?
- ***Long COVID*** – What is the evidence on the prevalence, presentation and management of long-COVID?
- ***Oseltamivir (Tamiflu) use in healthcare settings*** – What is the evidence that use of oseltamivir in healthcare workers with a symptomatic influenza diagnosis result in an earlier return to work and reduced absenteeism? What is the evidence that use of oseltamivir in adults and children with symptomatic influenza reduces influenza transmission in health care settings?
- ***Alternative models of care for acute medical conditions*** – What is the evidence on alternative models of care for managing patients with acute medical conditions outside of emergency or inpatient hospital settings?
- ***Exercise and long COVID*** – Is exercise helpful in individuals with long COVID? Is post-exertional symptom exacerbation a risk in long COVID?
- ***Influenza and seasonal prophylaxis with oseltamivir*** – What is the place or evidence for seasonal influenza prophylaxis (such as taking oseltamivir for 10 to 12 weeks continuously) in healthcare and aged care settings?
- ***Rapid access models of care for respiratory illnesses*** – What is the evidence for rapid access models of care for respiratory illnesses, especially during winter seasons, in emergency departments?
- ***Post-acute sequelae of COVID-19*** – What is the evidence on the post-acute sequelae of COVID-19?

- ***Emerging variants*** – What is the available evidence for emerging variants?
- ***Chest pain or dyspnoea following COVID-19 vaccination*** – What is evidence for chest pain or dyspnoea following COVID-19 vaccination?
- ***Cardiac investigations and elective surgery post-COVID-19*** – What is evidence for cardiac investigations and elective surgery post-COVID-19?
- ***Breathlessness post COVID-19*** – How to determine those patients who present with ongoing breathlessness in need of urgent review or intervention due to suspected pulmonary embolus?
- ***COVID-19 pandemic and influenza*** – What is the evidence for COVID-19 pandemic and influenza?
- ***Budesonide and aspirin for pregnant women with COVID-19*** – What is the evidence for the use of Budesonide for pregnant women with COVID-19? What is the evidence for aspirin prophylaxis for pre-eclampsia in pregnant women with a COVID-19 infection?
- ***COVID-19 vaccines in Australia*** – What is the evidence on COVID-19 vaccines in Australia?
- ***COVID-19 pandemic and wellbeing of critical care and other healthcare workers*** – Evidence in brief on the impact of the COVID-19 pandemic on the wellbeing of critical care and other healthcare workers.
- ***Disease modifying treatments for COVID-19 in children*** – What is the evidence for disease modifying treatments for COVID-19 in children?
- ***Mask type for COVID-19 positive wearer*** – What is the evidence for different mask types for COVID-19 positive wearers?
- ***Post acute and subacute COVID-19 care*** – What published advice and models of care are available regarding post-acute and subacute care for COVID-19 patients?
- ***Hospital visitor policies*** – What is the evidence for hospital visitor policies during and outside of the COVID-19 pandemic?
- ***Surgical masks, eye protection and PPE guidance*** – What is the evidence for surgical masks in the endemic phase in hospitals and for eyewear to protect against COVID-19?

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