



On the Radar

Issue 633

18 December 2023

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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National Safety and Quality Cosmetic Surgery Standards

Australian Commission on Safety and Quality in Health Care
Sydney: ACSQHC; 2023. p. 70.

<https://www.safetyandquality.gov.au/standards/national-safety-and-quality-cosmetic-surgery-standards>

The Commission has developed the *National Safety and Quality Cosmetic Surgery Standards* to ensure patients receive safe, high-quality care in facilities where cosmetic surgery is performed.

The Standards were officially launched on 14 December 2023, following broad consultation with consumers, clinicians, services, professional and peak bodies, regulators and other representatives of the sector.

National Consensus Statement: Essential elements for safe and high-quality end-of-life care

Australian Commission on Safety and Quality in Health Care

Sydney: ACSQHC; 2023. p. 36.

<https://www.safetyandquality.gov.au/our-work/end-life-care/national-consensus-statement-essential-elements-safe-and-high-quality-end-life-care>

The second edition of the *National Consensus Statement: Essential Elements for safe and high-quality end-of-life care* (Consensus Statement) has been released. The Consensus Statement describes nine guiding principles that provide a best practice approach to caring for people approaching the end of their life. Following a widespread consultation process, this edition has been broadened to ensure its relevance to all healthcare services and applies in settings where health care is provided to people approaching the end of their life, including hospitals, hospices, residential aged care facilities and home settings. The Consensus Statement aligns with the National Safety and Quality in Health Service Standards, National Safety and Quality Primary and Community Healthcare Standards and sits within the Comprehensive Care Standard. The Consensus Statement has been developed for healthcare workers who provide care to people approaching the end of their life, clinical education and training providers, health professional registration agencies and planners and policy makers responsible for programs delivering end-of-life care.

AUSTRALIAN COMMISSION
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Books

Health Economics

Elements of Improving Quality and Safety in Healthcare

Street A, Gutacker N

Cambridge: Cambridge University Press; 2023. Available from:

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| DOI | https://doi.org/10.1017/9781009325974 |
| Notes | This is the latest release in the Elements of Improving Quality and Safety in Healthcare series from The Healthcare Improvement Studies Institute (the THIS Institute) in Cambridge. This volume examines the economic perspectives on improving quality and safety in healthcare. The authors provide an introduction to the economic approach to improving healthcare along with examples of methods used to foster greater competition or put pressure on healthcare organisations to make improvements. The examples come from the care home, primary care and hospital sectors. |

Reports

Global State of Patient Safety 2023

Illingworth J, Shaw A, Fernandez Crespo R, Leis M, Fontana G, Howitt P, et al.

Global State of Patient Safety 2023.

London: Imperial College London; 2023

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| DOI / URL | https://www.imperial.ac.uk/Stories/global-state-of-patient-safety/ |
| Notes | The Institute of Global Health Innovation at Imperial College London was commissioned by the charity Patient Safety Watch to develop Global State of Patient Safety 2023 analysis. This project uses a novel patient safety country ranking to compare the performance of OECD countries across four well-established patient safety indicators. It is recognised in the report that there are limitations. However, it is also noted that 'his ranking highlights that, even across comparable countries, there is notable variation and scope for improvement..' Further, 'It is hoped that this report can act as a catalyst for future measurement and improvement activity, and provide a direction of travel on where future efforts should be focused' and that they 'argue that patient safety must be measured and monitored in a way that conceptualises health care from the patient's perspective, and improvement interventions that utilise the perspective of patients, families and carers must be more widely adopted.' The dashboard provides access to a broad range of indicators, spanning multiple countries, to give a view of the global state of patient safety. The dashboard enables users to organise and view the data in different ways – such as heatmaps showing changes within countries over time, or line graphs displaying multiple metrics for a single country. In each tab, we have included an information icon, providing details about how to navigate each section. |

Journal articles

Equitable and accessible informed healthcare consent process for people with intellectual disability: a systematic literature review

Dunn M, Strnadová I, Scully JL, Hansen J, Loblinzk J, Sarfaraz S, et al
 BMJ Quality & Safety 2023 [epub].

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| DOI | https://dx.doi.org/10.1136/bmjqs-2023-016113 |
| Notes | <p>For people with intellectual disability, adjusting how health care is delivered can facilitate the person’s involvement, understanding and a positive clinician and consumer partnership. Adjustments include taking more time for appointments or using communication aids. Given the right support, people with intellectual disability have the capacity to provide consent to their health care.</p> <p>This article looks at the barriers and enablers for informed healthcare consent for people with intellectual disability. The systematic literature review included 23 studies between 1999 and 2020 and identified barriers of health professionals’ attitudes and lack of education, inadequate accessible health information, and systemic constraints. The enablers were involvement of support people, person-centred informed consent and effective communication between health professionals and patients.</p> |

For information on the Commission’s work on intellectual disability and inclusive health care, see <https://www.safetyandquality.gov.au/our-work/intellectual-disability-and-inclusive-health-care> or <https://www.safetyandquality.gov.au/newsroom/latest-news/better-health-care-people-intellectual-disability>

For information on the Commission’s work on informed consent, see <https://www.safetyandquality.gov.au/our-work/partnering-consumers/informed-consent>

BMJ Quality & Safety

Volume 33, Issue 1, January 2024

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| URL | https://qualitysafety.bmj.com/content/33/1 |
| Notes | <p>A new issue of <i>BMJ Quality & Safety</i> has been published. Many of the papers in this issue have been referred to in previous editions of <i>On the Radar</i> (when they were released online). Articles in this issue of <i>BMJ Quality & Safety</i> include:</p> <ul style="list-style-type: none"> • Editorial: Contextualising opioid-related risk factors before an initial opioid prescription (Scott G Weiner, Jason A Hoppe) • Editorial: Work addiction and quality of care in healthcare: Working long hours should not be confused with addiction to work (Mark D Griffiths) • Editorial: Medical safety huddles to engage frontline physicians in patient safety: calling physicians back to the table (Camilla B Pimentel, Marc Philip T Pimentel, Christine W Hartmann) • Editorial: Education and educational interventions: moving beyond information provision (Karen Mattick, Christy Noble) • Initial opioid prescription characteristics and risk of opioid misuse, poisoning and dependence: retrospective cohort study (Aníbal García-Sempere, Isabel Hurtado, Celia Robles, Fran Llopis-Cardona, Francisco Sánchez-Saez, Clara Rodríguez-Bernal, Salvador Peiró-Moreno, Gabriel Sanfélix-Gimeno) |

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| | <ul style="list-style-type: none"> • Effects of ethical climate in association with tenure on work addiction, quality of care and staff retention: a cross-sectional study (Francis Maisonneuve, Patrick Groulx, Denis Chênevert, Colleen Grady, Angela Coderre-Ball) • Physician engagement in organisational patient safety through the implementation of a Medical Safety Huddle initiative: a qualitative study (Leahora Rotteau, Dalia Othman, Richard Dunbar-Yaffe, Chris Fortin, Katharyn Go, Amanda Mayo, Jordan Pelc, Jesse Wolfstadt, Meiqi Guo, Christine Soong) • A realist synthesis of educational outreach visiting and integrated academic detailing to influence prescribing in ambulatory care: why relationships and dialogue matter (Karen Luetsch, Geoff Wong, Debra Rowett) • Effect of implementing a heart failure admission care bundle on hospital readmission and mortality rates: interrupted time series study (Thomas Woodcock, Dionne Matthew, Raffaele Palladino, Mable Nakubulwa, Trish Winn, Hugh Bethell, Stephen Hiles, Susan Moggan, Jackie Dowell, Paul Sullivan, Derek Bell, Martin R Cowie) |
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Australian Journal of Primary Health

Volume 29, Number 6, December 2023

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| URL | https://www.publish.csiro.au/py/issue/11384 |
| Notes | <p>A new issue of the <i>Australian Journal of Primary Health</i> has been published. Articles in this issue of the <i>Australian Journal of Primary Health</i> include:</p> <ul style="list-style-type: none"> • The paramedic-general practitioner relationship: a scoping review (Sarah Petschack, Robert Lasslett and Linda Ross) • Exploring general practitioners' perception of the value of natural history information and their awareness and use of guidelines' resources to support antibiotic prescribing for self-limiting infections: a qualitative study in Australian general practice (Kwame Peprah Boaitey, Tammy Hoffmann, Emma Baillie and Mina Bakhit) • A collaborative primary health care model for children and young people in rural Australia: explorations of cross-sectoral leader action (Sue Randall, Danielle White and Sarah Dennis) • Measuring success: program fidelity of Queensland's child health home visiting services. A document analysis (Nicole Latham, Jeanine Young, Josephine Wilson and Michelle Gray) • Young Australians' receptiveness to discussing sexual health with a general practitioner (Helen Bittleston, Jane S Hocking, Jacqueline Coombe, Meredith Temple-Smith and Jane L Goller) • What are health professionals' perceptions of conducting routine growth assessments and lifestyle interventions? A qualitative study involving allied health professionals, nurses and doctors in rural and regional New South Wales (Emma Schwartzkoff, Tracy Burrows, Andrew Bailey, Eloise Sneddon and Kerith Duncanson) • Student-led pop-up health check clinics: innovative health prevention strategy for a low socioeconomic community (Nicole M Coombs, Lauren Sewell, Megan R Jackson, Kaye Borgelt, Jessica Lee and Joanne E Porter) • General practitioner assessment of lifestyle risk factors for chronic disease: a cross-sectional study in urban, rural and remote South Australia (Antoinette Liddell, Lucy Brown, Susan Williams and David Gonzalez-Chica) |

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| | <ul style="list-style-type: none"> • Attitudes and behaviours of family physicians towards clinical practice around intimate partner violence: a view from the Çankaya district of Ankara, Turkey (Hüsna Sarica Çevik, Selda Tekiner, Ayse Gülsen Ceyhun Peker and Mehmet Ungan) • Exploring patients' advance care planning needs during the annual 75+ health assessment: survey of Australian GPs' views and current practice (Joel Rhee, Mariko Carey, Alison Zucca and David Lambkin) • Best-practice recommendations to inform general practice nurses in the provision of dementia care: a Delphi study (Caroline Gibson, Dianne Goeman, Mark Yates and Dimity Pond) • Home care worker-supported exercise program to address falls: a feasibility study (Willeke Walsh, Claudia Meyer and Elizabeth V Cyarto) • General practitioners' perceptions of the provision of direct-acting antivirals for hepatitis C within Australian private general practice: an exploratory qualitative study (Jane Scarborough, Paul Aylward and Emma Ruth Miller) • Patient initiated radiology requests: proof of wellness through images (Lizzie De Silva, Melissa Baysari, Melanie Keep, Peter Kench and Jillian Clarke) • Medication reconciliation and discharge communication from hospital to general practice: a quantitative analysis (Melinda Gusmeroli, Stephen Perks and Nicole Bates) |
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Journal of Patient Safety and Risk Management
Volume 28, Number 6, December 2023

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| URL | https://journals.sagepub.com/toc/cric/28/6 |
| Notes | <p>A new issue of the <i>Journal of Patient Safety and Risk Management</i> has been published. Articles in this issue of the <i>Journal of Patient Safety and Risk Management</i> include:</p> <ul style="list-style-type: none"> • Editorial: Gaps in patient safety: Areas that need our attention (Albert W Wu, Charles Vincent, John Øvretveit, Alpana Mair, Peter Buckle, Ezequiel Garcia Elorrio, Tommaso Bellandi, Mondher Letaief, Shin Ushiro, Shunzo Koizumi) • Factors influencing second victim experiences and support needs of OB/GYN and pediatric healthcare professionals after adverse patient events (Enid Y Rivera-Chiauzzi, Kirsten A Riggan, Lily Huang, Robyn E Finney, Megan A Allyse) • Impact of pharmacist-led admission medication reconciliation on patient outcomes in a large health system (Joan Kramer, L Hayley Burgess, Carley Warren, Michael Schlosser, Sarah Fraker, Megan Hamilton) • Assessment of drug-related problems associated with narrow therapeutic index drugs: A prospective cohort study (Charmi Manoj Chhatrala, Bhanu Kumar M, Ramesh Madhan, Sri Harsha Chalasani, Jehath Syed, Nikita Pal) • The lived experiences of metal hypersensitivity (Dzifa Dordunoo, Gweneth Doane, Jett Carey, Jell Adrienne Lagura, Anastasia Mallidou, Jans van der Merwe, Scott Schroeder) • Medication error during nonoperating room anesthesia—a case report (Ivan Kostadinov, Adela Stecher, Vesna Novak-Jankovic, Peter Poredos) |

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| URL | https://australianprescribertg.org.au/ |
| Notes | <p>A new issue of <i>Australian Prescriber</i> has been published. Content in this issue of <i>Australian Prescriber</i> includes:</p> <ul style="list-style-type: none"> • Editorial: National Medicines Policy 2.0—what’s changed and what’s next? (Andrew J McLachlan, Parisa Aslani) • Physical health monitoring for people with schizophrenia (David Castle, Amy Li) • Gabapentinoids: a therapeutic review (Akshay Athavale, Bridin Murnion) • Ongoing challenges of off-label prescribing (Richard O Day) • Top 10 drugs 2021–22 • Top 10 drugs 2022–23 • Herpes zoster (shingles) vaccination update • New drugs: Pneumococcal 15-valent and 20-valent conjugate vaccines for prevention of pneumococcal disease Tirzepatide for type 2 diabetes Vericiguat for chronic heart failure |

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| URL | https://www.longwoods.com/publications/healthcare-policy/27231/1/vol-19-no-2-2023 |
| Notes | <p>A new issue of <i>Healthcare Policy</i> has been published. Articles in this issue of <i>Healthcare Policy</i> include:</p> <ul style="list-style-type: none"> • Editorial: Federal and Provincial Governments Need to Be Transparent about Trade-offs When They Buy Healthcare (F Clement and J M Sutherland) • Fairness for Whom? Learning Health Systems’ Approach to Equity in Healthcare (Nakia K Lee-Foon, Robert J Reid and Adalsteinn Brown) • Commentary: Achieving Health Equity – The Role of Learning Health Systems (Arlene S Bierman and Kamila B Mistry) • A Global Survey of Emergency Care Clinical Networks: Discussion and Implications for Canadian Learning Health Systems (Ross Duncan, Monika Roerig, Sara Allin, Greg Marchildon, Jim Christenson and Riyad B Abu-Laban) • Distribution and Migration of Recent Healthcare Graduates in Canada (Ruolz Ariste) • Training in Team-Based Practices: A Descriptive Analysis of Family Medicine Postgraduate Site Distribution across Canada (Asiana Elma, Laurie Yang, Irene Chang and Lawrence Grierson) • Practice- and System-Based Interventions to Reduce COVID-19 Transmission in Primary Care Settings: A Qualitative Study (Maria Mathews, Tiffany Liu, Dana Ryan, Lindsay Hedden, Julia Lukewich, Emily Gard Marshall, Richard Buote, Leslie Meredith, Lauren R. Moritz, Sarah Spencer, Shabnam Asghari, Judith B. Brown, Thomas R. Freeman, Paul S. Gill and Shannon Sibbald) |

BMJ *Quality & Safety* online first articles

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| URL | https://qualitysafety.bmj.com/content/early/recent |
| Notes | <p>BMJ <i>Quality & Safety</i> has published a number of 'online first' articles, including:</p> <ul style="list-style-type: none">• Editorial :Using patient and carer perspectives to improve medication safety at transitions of care (Sara Garfield, Mike Etkind, Bryony Dean Franklin)• Equitable and accessible informed healthcare consent process for people with intellectual disability: a systematic literature review (Manjekah Dunn, Iva Strnadová, Jackie Leach Scully, Jennifer Hansen, Julie Loblinzk, Skie Sarfaraz, Chloe Molnar, Elizabeth Emma Palmer)• Editorial: Our mission and how we hope to move the field forward: statement from the BMJ Quality & Safety senior editorial team 2023 (John Browne, Bryony Dean Franklin, Eric J Thomas, Perla J Marang-van de Mheen) |

Online resources

[UK] NICE Guidelines and Quality Standards

<https://www.nice.org.uk/guidance>

The UK's National Institute for Health and Care Excellence (NICE) has published new (or updated) guidelines and quality standards. The latest reviews or updates include:

- NICE Guideline NG238 **Cardiovascular disease: risk assessment and reduction, including lipid modification**
<https://www.nice.org.uk/guidance/ng238>
- Quality Standard QS140 *Transition from children's to adults' services*
<https://www.nice.org.uk/guidance/qs140>

[USA] Effective Health Care Program reports

<https://effectivehealthcare.ahrq.gov/>

The US Agency for Healthcare Research and Quality (AHRQ) has an Effective Health Care (EHC) Program. The EHC has released the following final reports and updates:

- **Impact of Healthcare Algorithms on Racial and Ethnic Disparities in Health and Healthcare**
<https://effectivehealthcare.ahrq.gov/products/racial-disparities-health-healthcare/research>

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:

- **COVID-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>



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




Wear gloves, in accordance with standard precautions

What else can you do to stop the spread of infections?


- Always change gloves and perform hand hygiene between different care activities and when gloves become soiled to prevent cross contamination of body sites
- Consider patient placement
- Minimise patient movement

At doorway prior to leaving room/care zone


- 1




Remove and dispose of gloves if worn
- 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

*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.

- *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

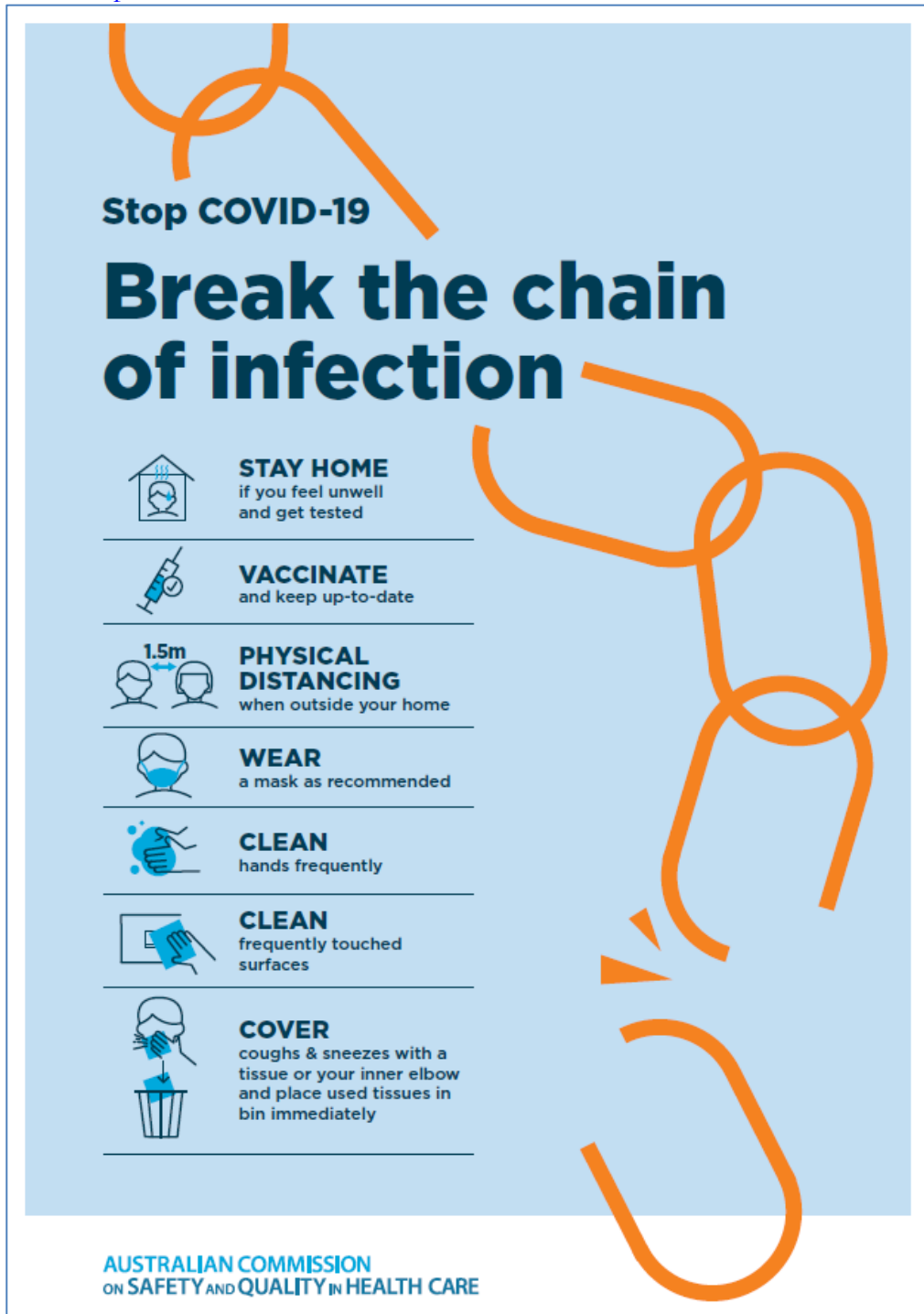
Perform hand hygiene (in an anteroom/outside the room/care zone)
- 8

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
- *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 Clinical Evidence Taskforce

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

The National Clinical Evidence Taskforce is a multi-disciplinary collaboration of 35 member organisations – Australia’s medical colleges and peak health organisations – who share a commitment to provide national evidence-based treatment guidelines for urgent and emerging diseases.

This alliance established the world’s first ‘living guidelines’ for the care of people with COVID-19 and MPX.

Funding has now been discontinued for the National Clinical Evidence Taskforce and the COVID-19 guidelines as of 30 June 2023.

These guidelines are no longer continually updated but will remain online until the guidance becomes inaccurate and/or no longer reflects the evidence or recommended practice.

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