On the Radar

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On the Radar
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Identifying severe acute maternal morbidity – indicator specifications released
https://www.safetyandquality.gov.au/our-work/indicators-measurement-and-reporting/maternal-morbidity-indicators#severe-acute-maternal-morbidity-indicators

The Australian Commission on Safety and Quality in Health Care has released the *Severe Acute Maternal Morbidity (SAMM)* indicator specifications. The specifications support the safety and quality improvement efforts of health services, enabling them to identify, review and develop strategies to mitigate high priority severe maternal incidents.

This update includes
- Clinical definitions for each of the 18 SAMM conditions
- Specifications based on ICD-10-AM/ACHI codes by SAMM condition.

For more information contact indicators@safetyandquality.gov.au

Reports

Healthcare through patients' eyes: The next generation of healthcare performance indicators
Preliminary results from the Patient-Reported Indicator Surveys (PaRIS).
OECD
Paris: OECD; 2024. p. 12.

DOI	https://www.oecd.org/health/healthcare-through-patients-eyes-the-next-generation-of-healthcare-performance-indicators.pdf
Notes	This brief report prepared for the OECD's recent Health Ministerial Meeting provides preliminary results from the Patient-Reported Indicator Surveys (PaRIS) (https://www.oecd.org/health/paris/). Despite a wealth of global healthcare data, indicators of health system performance have historically focused on inputs and process, rather than on the impact of healthcare on people's lives and well-being. PaRIS is a first-of-its-kind international survey that fills this gap. It provides a unique set of indicators that unveil how people 45 years and older who live with chronic conditions experience healthcare and how this impacts their lives. Australia is one of 20 countries participating in PaRIS and is represented in the aggregate data showcased in this preliminary report.

For information on the Commission's work on PaRIS, Patient-Reported Indicator Survey (PaRIS) | Australian Commission on Safety and Quality in Health Care

Making Healthcare Safer IV: Opioid Stewardship. Rapid Review
Waldfogel JM, Rosen M, Sharma R, Zhang A, Bass EB, Dy SM.
Rockville, MD: Agency for Healthcare Research and Quality; 2023. p. 244.

URL	https://effectivehealthcare.ahrq.gov/products/mhs4-opioid-stewardship/rapid-research
Notes	As part of the Making Healthcare Safer IV initiative, the US Agency for Healthcare Research and Quality (AHRQ_ commissioned this rapid review examining the effectiveness of opioid stewardship interventions on opioid prescribing and clinical outcomes including unintended consequences, and ways these interventions can be effectively implemented. Focusing on 34 studies, the authors report 'Selected opioid stewardship interventions may be effective for reducing opioid prescribing and dosing without adversely affecting clinical outcomes overall, although strength of evidence was low.'

For information on the Commission's work on medication safety, see
https://www.safetyandquality.gov.au/our-work/medication-safety

For information on the *Opioid Analgesic Stewardship in Acute Pain Clinical Care Standard*, see
https://www.safetyandquality.gov.au/standards/clinical-care-standards/opioid-analgesic-stewardship-acute-pain-clinical-care-standard

Investigation report: Advanced airway management in patients with a known complex disease
Health Services Safety Investigation Body
Poole: HSSIB; 2024.

URL	https://www.hssib.org.uk/patient-safety-investigations/advanced-airway-management-in-patients-with-a-known-complex-disease/investigation-report/
Notes	The Health Services Safety Investigation Body (BSSIB) in the UK has released their latest investigation report. This investigation explored safety issues in the airway management of people who have complex health problems which may affect the anatomy of the airway. The report is intended for healthcare organisations, policymakers, and the public to help improve patient safety in relation to the airway management of people who have complex health problems which may affect the anatomy of the airway. The report provides information about the management of difficult airways and associated risks.

Where Are My Things? Best Practices for Safeguarding Patient Belongings in Hospitals
Nashville: The Beryl Institute; 2024.

URL	https://theberylinstitute.org/product/where-are-my-things-best-practices-for-safeguarding-patient-belongings-in-hospitals/
Notes	The latest paper from The Beryl Institute looks at the issue of patient belongings. The Institutes web page describes the paper thus: 'Managing patient belongings is a challenge for almost all hospitals. Losing a patient's belongings has a financial impact on the institution and an emotional impact on patients and families. "Where are my things?" shares a collection of best practices for managing personal belongings in hospitals and transforming the human experience in healthcare.'

For information on the Commission's work on person-centred care, see
https://www.safetyandquality.gov.au/our-work/partnering-consumers/person-centred-care

WHO guideline for non-surgical management of chronic primary low back pain in adults in primary and community care settings
World Health Organization.
Geneva: WHO; 2023. p. 242.

URL	https://www.who.int/publications/i/item/9789240081789
Notes	The World Health Organization (WHO) has released this guideline to provide evidence-based recommendations on nonsurgical interventions for chronic primary low back pain. It is intended for health workers of all disciplines working in the primary and community care settings. A quick reference guide and a PowerPoint slide deck are also available.

For information on the *Low Back Pain Clinical Care Standard*, including the clinical care standard and resources, including quick guides and an implementation guide, see
https://www.safetyandquality.gov.au/standards/clinical-care-standards/low-back-pain-clinical-care-standard

Journal articles

The clinical course of acute, subacute and persistent low back pain: a systematic review and meta-analysis
Wallwork SB, Braithwaite FA, O'Keeffe M, Travers MJ, Summers SJ, Lange B, et al
Canadian Medical Association Journal 2024;196(2):E29.

DOI	https://doi.org/10.1503/cmaj.230542
Notes	Back pain is one of the most common ailments, with the authors of this piece observing that 'Low back pain is a leading cause of disability worldwide, affecting about 570 million people globally. About 39% of the adult population will have low back pain in any given year.' This systematic review and meta-analysis sought to update an earlier review so as to offer 'a better understanding of the clinical course of acute, subacute and persistent low back pain.' Based on 95 studies, the authors review the literature for the different cohorts. The piece concludes: 'Most people with acute and subacute low back pain begin to improve within the first 6 weeks, but many have ongoing pain and disability. Importantly, and in contrast to our previous review, people with persistent low back pain (≥ 12 wk) have ongoing moderate-to-high levels of pain and disability. Identifying and escalating care among people with subacute low back pain who are recovering slowly seems a critical focus of intervention.'

Let's reconnect healthcare with its mission and purpose by bringing humanity to the point of care
Louiset M, Allwood D, Bailey S, Klaber R, Bisognano M.
BMJ Leader 2023;7(4):291-293.

DOI	https://doi.org/10.1136/leader-2023-000747
Notes	Commentary piece in *BMJ Leader* that contends that 'There is a global workforce crisis in healthcare' characterise by workforce shortages with burnout and retention issues compounded by the COVID-19 pandemic. The authors prescribe 'significant change, not least in the culture of 'industrialised healthcare' which frequently prioritises technical and scientific aspects of delivery over humanity and whole person centred care.' They focus on a number of key themes, '"what matters to you" (WMTY), kindness in healthcare and compassionate leadership'.

Window Treatment—Bringing Art and Joy to Hospital Rooms
Wu DS, Harding CD, Lombard FM
JAMA 2024.

DOI	https://doi.org/10.1001/jama.2023.28102
Notes	This paper in the *Journal of the American Medical Association* (JAMA), describes 'a simple intervention that could be implemented in any hospital room with a window—one that brings joy, relieves pain, and creates meaningful connections between patients and staff.' This was 'a simple, inexpensive, and easily scalable intervention that puts creative power in the hands of patients, their families, and health care staff' The piece describes the experience of a long-term patient and her clinicians and how this simple, cheap intervention enhanced the experiences and communications for all of them.

The Joint Commission Journal on Quality and Patient Safety
Volume 50, Issue 2, February 2024

URL	https://www.sciencedirect.com/journal/the-joint-commission-journal-on-quality-and-patient-safety/vol/50/issue/2
Notes	A new issue of *The Joint Commission Journal on Quality and Patient Safety* has been published. Articles in this issue of *The Joint Commission Journal on Quality and Patient Safety* include: - Editorial: Realizing the Promise of **Advance Care Planning** Will Require Health System Accountability to Quality Standards (Susan E Hickman, Erik K Fromme) - The TeamSTEPPS for **Improving Diagnosis Team Assessment Tool**: Scale Development and Psychometric Evaluation (Kisha J Ali, Christine A Goeschel, M M Eckroade, K N Carlin, M Haugstetter, M Shofer, M A Rosen) - A Multifaceted Intervention to Improve **Teamwork on an Inpatient Pediatric Neurosurgery Service** (Emily Levoy, Amelia Sperber, Diana Poon, May Casazza, Jennifer Vargas, Sandra Yang, G Grant, S Singer, N Srinivas) - Hospital Testing of the Effectiveness of Co-Designed Educational Materials to Improve Patient and Visitor Knowledge and Confidence in **Reporting Patient Deterioration** (Lindy King, Ingrid Belan, Robyn A Clark, Tom Young, Hugh Grantham, Karleen Thornton, Michael R Kidd) - Implementing and Evaluating a **Discharge Before Noon Initiative** in a Large Tertiary Care Urban Hospital (Khadeja Kausar, Edward Coffield, Regina Tarkovsky, M Alexander Alvarez, Katherine A Hochman, Robert A Press) - Perspectives on **Perioperative Team-Based Morbidity and Mortality Conferences**: A Mixed Methods Study (Aubrey Samost-Williams, Roni Rosen, Emily Cummins, Yves Sonnay, Garett Nash, A Hannenberg, M Brindle) - A Quality Improvement Initiative to Increase **Documentation of Preferences for Life-Sustaining Treatment** in Hospitalized Adults (David Harmon, Bryanna De Lima, Kellie Littlefield, Mary Brooks, Kathleen Drago) - Clinician Review of **Advanced Care Planning** for Older Surgical Patients Requiring Intensive Care (Joseph A Lin, Alexis Colley, Logan Pierce, Emily Finlayson, Rebecca L Sudore, Elizabeth C Wick) - Sentinel Event Alert 68: Updated **Surgical Fire Prevention** for the 21st Century

Australian Health Review
Volume 48, Issue 1, February 2024

URL	https://www.publish.csiro.au/ah/issue/11605
Notes	A new issue of *Australian Health Review* has been published. Articles in this issue of *Australian Health Review* include: **Scope of practice regulation** in medicine: balancing patient safety, access to care and professional autonomy (Christian A Gericke) - Mitigating the consequences of **electronic health record data breaches** for patients and healthcare workers (Jeffrey C L Looi, Stephen Allison, Tarun Bastiampillai, Paul A Maguire, Steve Kisely and Richard C H Looi) - The burdensome logistics of **data linkage** in Australia – the example of a national registry for congenital heart disease (Larissa K Lloyd, Calum Nicholson, Geoff Strange and David S Celermajer) - Investigating allied health professionals' attitudes, perceptions and acceptance of an **electronic medical record** using the Unified Theory of Acceptance and

| | Use of Technology (Alison Qvist, Leanne Mullan, Lemai Nguyen, Karen Wynter, Bodil Rasmussen, Min Goh and Kath Feely)
- What would it take to improve the uptake and utilisation of **mHealth applications among older Australians**? A qualitative study (Tanja Schroeder, Karla Seaman, Amy Nguyen, Joyce Siette, Heiko Gewald and Andrew Georgiou)
- Medicare Benefits Schedule (MBS) Review Advisory Committee post-implementation review of **MBS telehealth items**: abolition of initial telehealth consultations for non-general practitioner specialists (Jeffrey C L Looi, Stephen Allison, Tarun Bastiampillai, Steve Kisely and William Pring)
- An economic evaluation of **point-of-care ultrasound** for children presenting to the emergency department with suspected septic arthritis of the hip (Cate Bailey, Heather Deane, Adam O'Brien and Kim Dalziel)
- Review of Australia's funding commitments for **suicide prevention** from 2021–22 to 2026–27 (Di Hu, Charlotte Comben, Sandra Diminic and Claudia Pagliaro)
- Healthcare costs attributable to **e-cigarette use** and subsequent uptake of cigarette smoking by Australians who have never smoked (Louisa G Gordon and Paige Preston)
- **National Disability Insurance Scheme** timeframes and functional outcomes for inpatient rehabilitation patients: a 5-year retrospective audit (David Kellett, Alexandra G Adams and Michael Pollack)
- Reforming **allied health service provision in residential aged care** to improve the rehabilitation reach: a feasibility study (Natasha Brusco, Christina Ekegren, Helen Rawson, Nicholas F Taylor, Julia Morphet, Keith Hill, Jennifer Anderson, Kelly Stephen, Amelia Crabtree, Pazit Levinger, Sara L Whittaker, Sze-Ee Soh, Fiona Dulfer and Katherine Lawler)
- Exploring strengths and weaknesses in **health services research culture and capacity** (Nicole Stormon, Peter Lawrenson, Ann Rahmann, Sally Eames and Nicole Gavin)
- **Clinical innovation and scope of practice regulation**: a case study of the Charlie Teo decision (Jill Walsh, Sharon Downie, Eric Windholz, Andrea Kirk-Brown and Terry P Haines)
- The role of law in **end-of-life decision**-making in emergency departments and intensive care units: a retrospective review of current practice in a Queensland health service (Jayne Hewitt, Nemat Alsaba, Katya May, Colleen Cartwright, Lindy Willmott, Ben P White and Andrea P Marshall)
- **Futile treatment** – when is enough, enough? (R G Beran and J A Devereux) |

BMJ Quality & Safety online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	*BMJ Quality & Safety* has published a number of 'online first' articles, including:
- Editorial :It is up to healthcare professionals to talk to us in a way that we can understand: **informed consent processes in people with an intellectual disability** (Jonathon Ding, Richard Keagan-Bull, Irene Tuffrey-Wijne)

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 NG188 *COVID-19 rapid guideline: managing the* **long-term effects of COVID-19** https://www.nice.org.uk/guidance/ng188
- NICE Guideline NG191 *COVID-19 rapid guideline:* **managing COVID-19** https://www.nice.org.uk/guidance/ng191
- NICE Guideline NG192 **Caesarean birth** https://www.nice.org.uk/guidance/ng192
- NICE Guideline NG51 **Suspected sepsis**: *recognition, diagnosis and early management* https://www.nice.org.uk/guidance/ng51
- DG51 Diagnostics Guideline *Devices for remote monitoring of* **Parkinson's disease** https://www.nice.org.uk/guidance/dg51

[UK] NIHR Evidence
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:
- **Severe ankle osteoarthritis**: which surgery should I have?
- How to improve **investigations of medical harm**
- Closed-loop insulin systems are effective for pregnant women with **type 1 diabetes**
- **Shoulder replacements** are less likely to be revised when surgeons perform more than 10 a year
- Does vaginal birth after a previous caesarean section increase the risk of **pelvic floor surgery**?
- Tool could reduce blood test monitoring for most people on **methotrexate**
- Can social prescribing improve the health of people with **diabetes**?

[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:
- **Healthcare Worker Implicit Bias** *Training and Education* https://effectivehealthcare.ahrq.gov/products/mhs4-hcw-training/rapid-research
- *Making Healthcare Safer IV:* **Opioid Stewardship**. *Rapid Review* https://effectivehealthcare.ahrq.gov/products/mhs4-opioid-stewardship/rapid-research

[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 in Office-Based Care Settings** https://psnet.ahrq.gov/perspective/patient-safety-office-based-care-settings

[USA] Patient Safety Primers
https://psnet.ahrq.gov/primers-0
The Patient Safety Primers from the (US) Agency for Healthcare Research and Quality (AHRQ) discuss key concepts in patient safety. Each primer defines a topic, offers background information on its epidemiology and context, and provides links to relevant materials.

- **Maternal Safety** https://psnet.ahrq.gov/primer/maternal-safety

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

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

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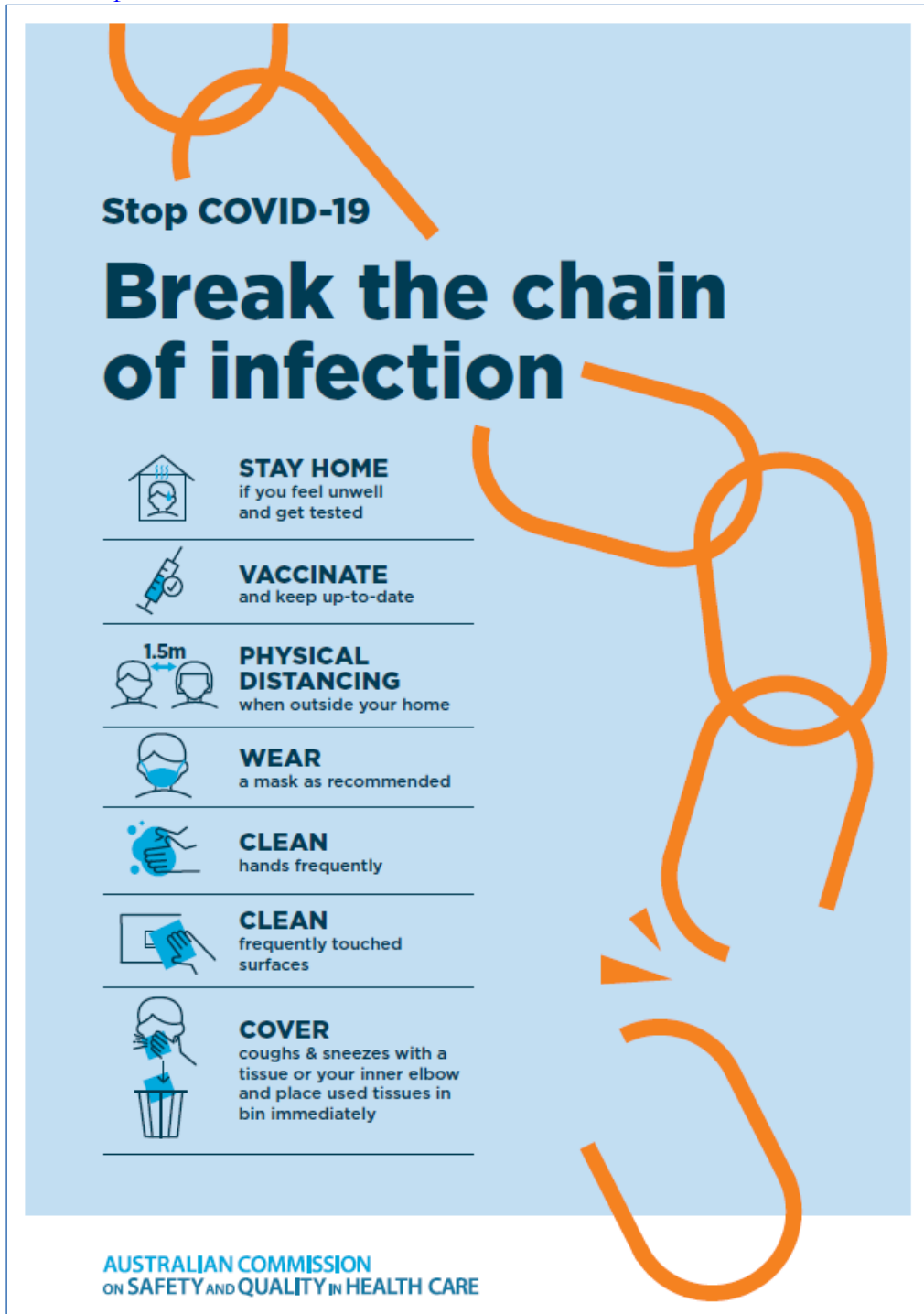
- *COVID-19 and face masks – Information for consumers*
  https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-and-face-masks-information-consumers

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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