



On the Radar

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On the Radar

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Reports

Making prevention everyone's business: a transformational approach to personalised prevention in England
Deanfield, J
London: Department of Health and Social Care, 2024.

URL	https://www.gov.uk/government/publications/making-prevention-everyones-business
Notes	This is an independent report to the UK's Department of Health and Social Care providing recommendations on how the UK could deliver personalised preventive health care at scale. Much of this vision is predicated on the use of digital health technologies to 'empower people to take control of their own health. We must give people the ability to do more for themselves, normalising self-care'.

Integrating oral health into primary healthcare for improved access to oral health care for rural and remote populations
 Deeble Institute for Health Policy Research Issues Brief no: 56
 Veginadu P, Haddock R
 Canberra: Australian Healthcare and Hospitals Association; 2024. p. 40.

URL	https://ahha.asn.au/resource/integrating-oral-health-into-primary-healthcare-for-improved-access-to-oral-health-care-for-rural-and-remote-populations/
Notes	<p>This issues brief from the Australian Healthcare and Hospitals Association’s Deeble Institute examines issues around oral health care for rural and remote populations in Australia. In these settings access to care is a significant issue and it’s suggested that ‘primary healthcare professionals are the main providers of health services in most rural and remote communities and are well positioned to provide basic oral health care.’ The issues brief includes a number of recommendations, including:</p> <ul style="list-style-type: none"> • Enhance oral health training for rural and remote primary healthcare professionals • Standardised and nationally recognise scope of practice for primary healthcare professionals which includes oral health care • Identify oral health as “core” primary healthcare service, especially in rural and remote areas • Support innovative integrated oral health models of care • Increased interoperability and data sharing between dental and general healthcare systems • Improved access to oral health care under Medicare for rural and remote populations.

Journal articles

Risk Factors Associated with Medication Administration Errors in Children: A Prospective Direct Observational Study of Paediatric Inpatients

Westbrook JI, Li L, Woods A, Badgery-Parker T, Mumford V, Merchant A, et al
 Drug Safety. 2024;47(6):545-556.

DOI	https://doi.org/10.1007/s40264-024-01408-6
Notes	<p>Paper reporting on an Australian study that sought to ‘identify nurse, medication, and work-environment factors associated with MAEs [medication administration errors] among paediatric inpatients.’ The study was a prospective, direct observational study of 298 nurses in a paediatric referral hospital in Sydney, Australia in which observers recorded details of 5137 doses prepared and administered to 1530 children. Among the results reported:</p> <ul style="list-style-type: none"> • Errors occurred in 37.0% of administrations, 25.8% which were rated as potentially serious. • Intravenous infusions and injections had high error rates (64.7% and 77.4% respectively). For intravenous injections, 59.7% had potentially serious errors. • No nurse characteristics were associated with MAEs. • Intravenous route, early morning and weekend administrations, patient age \geq 11 years, oral medications requiring solvents/diluents and eMM [electronic medication management system] use were all significant risk factors • MAEs causing actual harm were 45% lower using an eMM compared with paper charts.

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

Measuring the impact of pharmaceutical care bundle delivery on patient outcomes: an observational study

Canning ML, McDougall R, Yerkovich S, Barras M, Coombes I, Sullivan C, et al

International Journal of Clinical Pharmacy. 2024

DOI	https://doi.org/10.1007/s11096-024-01750-w
Notes	Paper reporting on the use of pharmaceutical care bundle (PCB) and the relationship between the PCB and patient outcomes. The PCB consisted of medication history, medication review, discharge medication list and medicines information on the discharge summary. This observational study was ‘was performed at ten participating sites for adult patients who had a non-same day hospital stay’. In the 283,813 patient hospital stays that were evaluated, ‘delivery of the PCB occurred in 26.9% of patients at the ten participating hospital sites, ranging from 0.6 to 61.2% across sites.’ The authors report that ‘Patients with a longer LOS were more likely to receive delivery of the complete PCB (P < 0.001). There was no correlation between PCB and hospital standardised mortality ratio (r = 0.03, p = 0.93). Higher rates of delivery of the PCB were associated with lower rates of unplanned readmission within 30 days (r = - 0.993, p < 0.001).’

Actions for mitigating the negative effects of patient participation in patient safety: a qualitative study

Van der Voorden M, Franx A, Ahaus K

BMC Health Services Research. 2024;24(1):700.

DOI	https://doi.org/10.1186/s12913-024-11154-1
Notes	Paper reporting a study that sought to examine actions that may ‘mitigate the negative effects of patient participation in patient safety’. The study was conducted within an obstetrics department of a hospital in the Netherlands. This explorative qualitative interview study involving 8 patients and 8 health professionals found that the identified actions could be “categorized into five themes: ‘structure’, ‘culture’, ‘education’, ‘emotional’, and ‘physical and technology’.” Among the actions explored were transparency, shared decision-making, and patient-centred culture.

For information on the Commission’s work on partnering with consumers see

<https://www.safetyandquality.gov.au/our-work/partnering-consumers>

Australian Prescriber

Volume 47, Issue 3, June 2024

URL	https://australianprescriber.tg.org.au/
Notes	A new issue of <i>Australian Prescriber</i> has been published. Content in this issue of <i>Australian Prescriber</i> includes: <ul style="list-style-type: none"> • Editorial: Quality use of medicines: who owns it now? (Jonathan Dartnell, Darlene Cox, Paresch Dawda, Catherine Hill) • New and emerging drug therapies for Alzheimer disease (Louise M Waite) • Controversies in the management of community acquired pneumonia in adults (Emily Tucker, Maeve O’Sullivan, Lisa Waddell) • Deprescribing antihypertensive drugs in frail older adults (Emily Reeve, Danijela Gnjidic, Aili V Langford, Sarah N Hilmer) • Thiopurines and risk of lymphoproliferative disorders (Varan Peranathan, Miles P Sparrow, Anna Foley) • Lipid-lowering therapy in patients with a ‘normal’ LDL-C (John Hackett)

	<ul style="list-style-type: none"> • Medicines Repurposing Program – supporting new uses for existing medicines • New drugs: Inclisiran for hypercholesterolaemia Recombinant respiratory syncytial virus (RSV) vaccine for older adults, and pregnant women to prevent disease in their infant Nirsevimab for prevention of respiratory syncytial virus (RSV) lower respiratory tract disease in neonates and infants
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BMJ Quality & Safety

Volume 33, Issue 7, July 2024

URL	https://qualitysafety.bmj.com/content/33/7
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: Can virtual reality simulations improve macrocognition? (Michelle Aebersold, Laura Gonzalez) • Editorial: Variation in quality of care between hospitals: how to identify learning opportunities (Alex Bottle, Pia Kjær Kristensen) • Editorial: Understanding linguistic inequities in healthcare: moving from the technical to the social (Christina Reppas-Rindlisbacher, Shail Rawal) • Connecting pathogen transmission and healthcare worker cognition: a cognitive task analysis of infection prevention and control practices during simulated patient care (Joel M Mumma, Bradley W Weaver, Jill S Morgan, Golpar Ghassemian, Paige R Gannon, Kylie B Burke, Brandon A Berryhill, Rebecca E MacKay, Lindsay Lee, Colleen S Kraft) • “It’s probably an STI because you’re gay”: a qualitative study of diagnostic error experiences in sexual and gender minority individuals (Aaron A Wiegand, Taharat Sheikh, Fateha Zannath, Noah M Trudeau, Vadim Dukhanin, Kathryn M McDonald) • Between-hospital variation in indicators of quality of care: a systematic review (Margrietha van der Linde, Nèwel Salet, Nikki van Leeuwen, Hester F Lingsma, Frank Eijkenaar) • Association between language discordance and unplanned hospital readmissions or emergency department revisits: a systematic review and meta-analysis (Janet N Chu, Jeanette Wong, Naomi S Bardach, Isabel Elaine Allen, Jill Barr-Walker, Maribel Sierra, Urmimala Sarkar, Elaine C Khoong) • Grand rounds in methodology: designing for integration in mixed methods research (Timothy C Guetterman, Milisa Manojlovich)

Pediatric Quality & Safety

Volume 9, Number 3, May/June 2024

URL	https://journals.lww.com/pqs/toc/2024/05000
Notes	<p>A new issue of <i>Pediatric Quality & Safety</i> has been published. Articles in this issue of <i>Pediatric Quality & Safety</i> include:</p> <ul style="list-style-type: none"> • Beyond Ultrasound Readiness: A Needs Assessment for Improving Care in Children with Ovarian Torsion (Shawn J Rangel) • Improving Turnaround Time of Transabdominal Pelvic Ultrasounds with Ovarian Doppler in a Pediatric Emergency Department (Amanda S Dupont,

	<p>Patrick C Drayna, Mark Nimmer, Shannon H Baumer-Mouradian, Kendra Wirkus, Danny G Thomas, Kevin Boyd, Sri S Chinta)</p> <ul style="list-style-type: none"> • Telemedicine Quality Improvement during the Corona Virus 2019 Pandemic Increases Pediatric Weight Management Access (Monique K Vallabhan, K Foos, P Roldan, S Negrete, J M Page-Reeves, E Y Jimenez, A S Kong) • Synergizing Safety: A Customized Approach to Curtailing Unplanned Extubations through Shared Decision-making in the NICU (Parvathy Krishnan, Nilima Jawale, Adam Sodikoff, Susan R Malfa, Kathleen McCarthy, Lisa M Strickrodt, Diana D'Agrosa, Alexandra Pickard, L A Parton, M Singh) • Emergency Department Initiative to Decrease High-flow Nasal Cannula Use for Admitted Patients with Bronchiolitis (Courtney E Nelson, Jonathan M Miller, Chalanda Jones, Emily Reese Fingado, Ann-Marie Baker, Julie Fausnaugh, Michael Treut, Leah Graham, Katlyn L Burr, Arezoo Zomorodi) • Quality Improvement Identifies Healthcare Transition Disparities in Adolescents with Congenital Heart Disease and Disabilities (Catherine C Allen, Briana L Swanson, Xiao Zhang, Ryan J Coller, Krisjon R Olson) • A Quality Initiative to Prioritize Enteral Feeding in Bronchiolitis (N Beam, A Long, A Nicholson, L Jary, R Veele, N Kalinowski, M Phad, A Hadley) • Screening for Nephropathy in Pediatric Type 2 Diabetes: Quality Improvement to Increase Nephropathy Screening (Elizabeth A Mann, Kelsi Alexander, Whitney Beaton, Elizabeth B Roe, Amy Grant, K A Shadman) • Measuring the Interprofessional Health of the Pediatric Cardiovascular Operating Room Work Environment (Jason M Thornton, Jean A Connor, P A Dwyer, C L Porter, L P Hartwell, Z DiPasquale, A Chiloyan, P A Hickey) • Quality Improvement Initiative Enhances Outpatient Pediatric Pulmonology Follow-up for Premature Infants with Bronchopulmonary Dysplasia (Eliaz Brumer, Sanjiv Godse, Leela Chandrasekar, Tuba K Kizilirmak, E Blythe, Y Gozzo, S Peterec, S Kandil, M Grossman, L Chen, P Weiss, B Sheares) • Reducing Time from Pediatric Emergency Department Arrival to Dexamethasone Administration in Wheezing Patients (Andrew W Kramer, Jessica Erlich, Karen Yaphockun, D Roderick, K Farkas, A W Bryl, K H Pade) • Developing a Sustainable Quality Improvement Program in an Academic Center: The Experience of an Adolescent Unit (Erin R McKnight, Ashley Ebersole, James Gallup, Fareeda W Haamid) • A Quality Initiative to Improve Appropriate Medication Dosing in Pediatric Patients with Obesity (Colleen P Cloyd, Danielle Macedone, Jenna Merandi, Shawn Pierson, Maria Sellas Wcislo, Jeffrey Lutmer, Jennifer MacDonald, Onsy Ayad, Lindsay Kalata, R Zachary Thompson) • Quality Improvement in Neonatal Care: Successful Adoption of the Eat, Sleep, Console Protocol in a Rural Hospital Setting (Riley Phyu, Charrell Bird, Ashish Gupta) • Enhanced Safety and Efficiency of Ambulatory Cardiology Admissions: A Quality Improvement Initiative (Mary C McLellan, Mariam Irshad, Katherine C Penny, Michelle Rufo, Sarah Atwood, Heather Dacey, Christina M Ireland, Sarah de Ferranti, Theresa Saia, Anna C Fisk, Susan F Saleeb) • Improving Pneumococcal Vaccination Rates in Immunosuppressed Pediatric Patients with Rheumatic Disease (Julia G Harris, Jordan T Jones, L Favier, E Fox, M J Holland, A Ivy, C M Hoffart, M Ibarra, A M Cooper)
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	<ul style="list-style-type: none"> • Transforming into a Learning Health System: A Quality Improvement Initiative (Jennifer L Chiem, Elizabeth E Hansen, Nicolas Fernandez, Paul A Merguerian, Sanjay R Parikh, Kayla Reece, Daniel K Low, Lynn D Martin) • Postcardiac Arrest Care Delivery in Pediatric Intensive Care Units: A Plan and Call to Action (Jessica A Barreto, Jesse Wenger, Maya Dewan, Alexis Topjian, Joan Roberts)
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Public Health Research & Practice
Volume 34, Issue 2, June 2024

URL	https://www.phrp.com.au/issues/june-2024-volume-34-issue-2/
	<p>A new issue of <i>Public Health Research & Practice</i> has been published with a focus on opportunities for action to improve health and wellbeing – from global health action to men's health, skin cancer and vaping. Articles in this issue of <i>Public Health Research & Practice</i> include:</p> <ul style="list-style-type: none"> • Editorial: Global health action delayed: people's health and wellbeing denied (Jonathan Abrahams, Fiona Armstrong, Chiedza Malunga, Phillipp du Cros) • Global health and climate action: achievements and imperatives from COP28 (Zerina Lokmic-Tomkins, Angie Bone) • What role can 'health decision-makers' play in supporting knowledge translation of health and medical research? (Laura Collie, Andrew J Milat, Anurag Sharma, Siaw-Teng Liaw, Marianne Gale) • Improving rates of immunisation in refugee populations in Australia (Abela Mahimbo) • A prescription model for vapes: the way we 'do' medicines policy in Australia (Michelle Scollo, Claire Grace, Tanya Buchanan, Anita Dessaix) • A survey of eyecare affordability among patients seen in collaborative care in Australia and factors contributing to cost barriers (Rene Cheung, Angelica Ly) • Engaging Australian men in disease prevention – priorities and opportunities from a national survey (Ben J Smith, Timothy J Moss, Bernie Marshall, Nicole Halim, Robert Palmer, Simon von Saldern) • Healthcare costs following falls and cataract surgery in older adults using Australian linked health data from 2012-2019 (Jessie Huang-Lung, Kam Chun Ho, Thomas Lung, Anna Palagyi, Peter McCluskey, Andrew J R White, Soufiane Boufous, Lisa Keay) • Individuals with musculoskeletal conditions awaiting orthopaedic surgery consultation: an untapped opportunity for patient health management? (Simon R E Davidson, Emma Robson, Kate M O'Brien, Steven J Kamper, Robin Haskins, Pragya Ajitsaria, David Dewar, Christopher M Williams, for the Population Health Working Group) • A review of skin cancer primary prevention activities in primary care settings (Nehal Singh, Kate L A Dunlop, Nikki Woolley, Tracey Wills Vashishtha, Diona L Damian, Kylie Vuong, Anne E Cust, Amelia K Smit) • Changes in systemic cancer therapy in Australia during the Delta and Omicron waves of the COVID-19 pandemic (2021–2022): a controlled interrupted time series analysis (Forrest C Koch, Monica Tang, Ramesh Walpola, Maria Aslam, Sallie-Anne Pearson, Benjamin Daniels) • Improving access to catch-up immunisations for humanitarian arrivals: a qualitative study (Shamila Ginige, Holly Seale, Kate Alexander)

BMJ Quality & Safety online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p><i>BMJ Quality & Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Understanding the enablers and barriers to implementing a patient-led escalation system: a qualitative study (Elizabeth Sutton, Mudathir Ibrahim, William Plath, Lesley Booth, Mark Sujun, Peter McCulloch, Nicola Mackintosh) • Editorial :Improving medication safety in both adults and children: what will it take? (David W Bates, Mio Sakuma) • Factors associated with proximal femoral fractures in older adults during hospital stay: a cross-sectional study (Mutsuko Moriwaki, Asuka Takae, Mikayo Toba, Miki Sasaki, Yasuko Ogata, Satoshi Obayashi, Masayuki Kakehashi, Kiyohide Fushimi) • Raising the barcode: improving medication safety behaviours through a behavioural science-informed feedback intervention. A quality improvement project and difference-in-difference analysis (Kate Grailey, Alix Brazier, Bryony Dean Franklin, Clare McCrudden, Roberto Fernandez Crespo, Helen Brown, James Bird, Amish Acharya, Alice Gregory, Ara Darzi, Sarah Huf)

International Journal for Quality in Health Care online first articles

URL	https://academic.oup.com/intqhc/advance-articles
Notes	<p><i>International Journal for Quality in Health Care</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Prescribing antibiotics for children with dengue infection in Taiwan: Who are at risk and who are high prescribers? (Yi-Jung Shen et al)

Online resources

Australian Living Evidence Collaboration

<https://livingevidence.org.au/>

Health Innovation Series - e-Medication Safety

<https://www.mq.edu.au/research/research-centres-groups-and-facilities/healthy-people/centres/australian-institute-of-health-innovation/our-projects/Health-Innovation-Series/health-innovation-series-e-medication-safety>

The Health Innovation Series from the Australian Institute of Health Innovation at Macquarie University has had a number of recent issues, including:

- The curious case of the 100-fold overdose
- The dangers of copying a previous order. Don’t be a copycat
- Does your drop-down menu present safe options?
- What time is the next dose due? Avoid errors by updating the schedule!
- Is your administration documentation accurate? Check fields that auto-populate!

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>

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 Wear gloves, in accordance with standard precautions

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

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

*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/infection-prevention-and-control-poster-combined-airborne-and-contact-precautions>

VISITOR RESTRICTIONS MAY BE 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

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

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

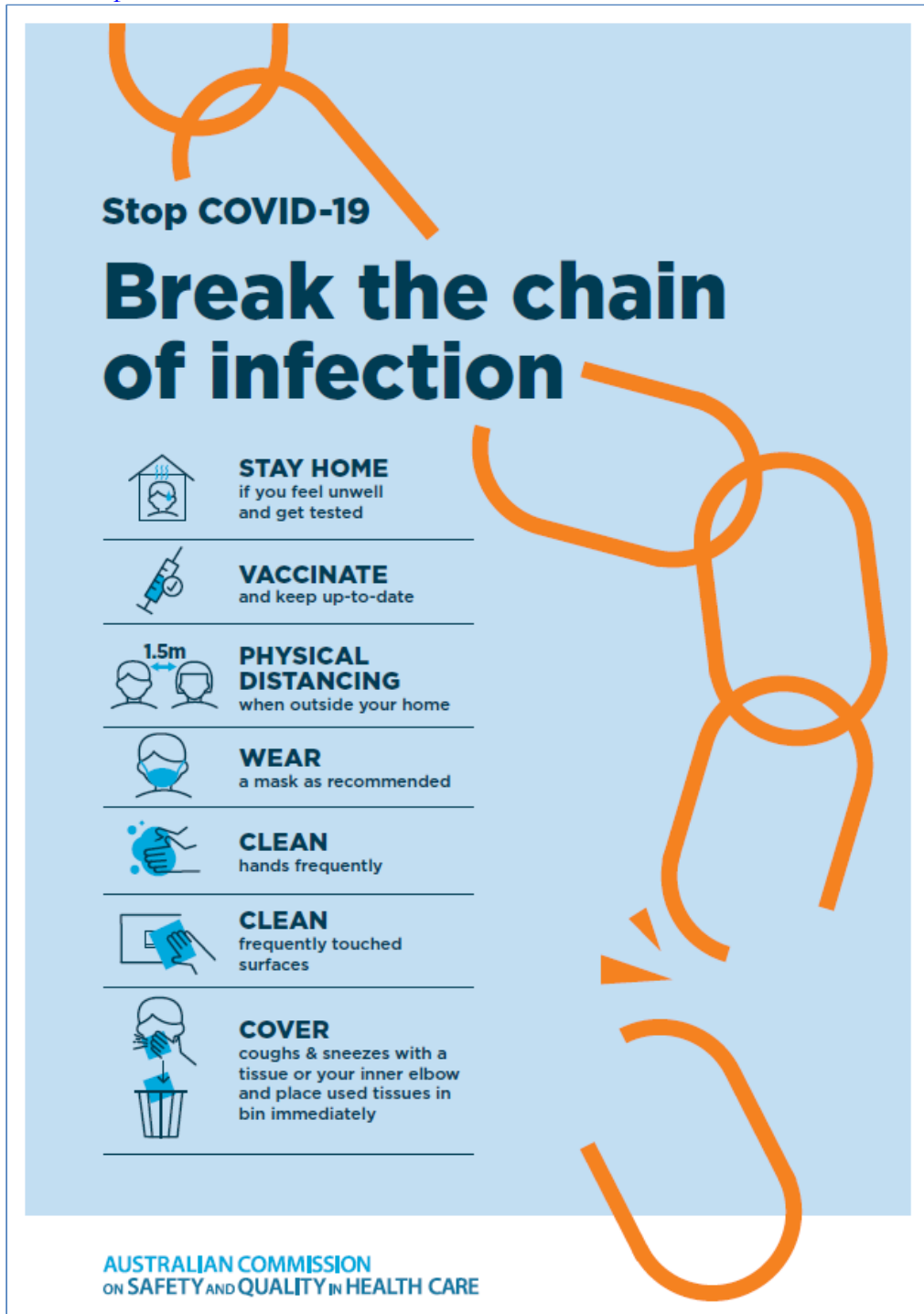
Perform hand hygiene

KEEP DOOR CLOSED AT ALL TIMES

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

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- *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.



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