



On the Radar

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On the Radar

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Books

The Dartmouth Atlas of Medicare Prescription Drug Use

The Dartmouth Institute for Health Policy & Clinical Practice, 2013.

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| Notes | The latest atlas from the Dartmouth Atlas Project shows that the use of both effective and risky drug therapies by (US) Medicare patients varies widely across US regions, offering further evidence that location is a key determinant in the quality and cost of the medical care that patients receive. The atlas also reports that the health status of a region's Medicare population accounts for less than a third of the variation in total prescription drug use, and that higher spending is not related to higher use of proven drug therapies. The study raises questions about whether regional practice culture explains differences in the quality and quantity of prescription drug use. |
| URL | http://www.dartmouthatlas.org/downloads/reports/Prescription_Drug_Atlas_101513.pdf |
| TRIM | 89137 |

Reports

Vital Signs 2013: The State of Safety and Quality in Australian Health Care
 Australian Commission on Safety and Quality in Health Care (ACSQHC)
 Sydney: ACSQHC, 2013.

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| Notes | The Commission has released <i>Vital Signs 2013: The State of Safety and Quality in Australian Health Care</i> . This report provides an overview of a series of key topics in relation to the safety and quality of Australia's health care system. Professor Debora Picone, Chief Executive of the Commission noted that "Vital Signs 2013 focuses on three important questions that members of the public may ask about their health care. Will my care be safe? Will I get the right care? Will I be a partner in my care?" Each question is considered in its own section using examples of key health issues in Australia, such as medication safety and stroke care. These sections are followed by three case studies, which focus on the quality of care in some important clinical areas. These case studies present a detailed description and analysis of key quality issues that affect outcomes for patients. |
| URL | http://www.safetyandquality.gov.au/publications/vital-signs-2013/ |

Organizational Change to Improve Health Literacy: Workshop Summary
 Melissa French and Lyla M. Hernandez – Rapporteurs, Roundtable on Health Literacy; Board on Population Health and Public Health Practice; Institute of Medicine.
 The National Academies Press, 2013.

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| Notes | This report is the summary of a workshop convened by the Institute of Medicine. Participants met to examine what is known about implementation of the attributes of a health literate health care organization and to create a network of health literacy implementers who can share information about health literacy innovations and problem solving. This report discusses implementation approaches and shares tools that could be used in implementing specific health literacy strategies . |
| URL | http://www.nap.edu/catalog.php?record_id=18378 |
| TRIM | 89125 |

Annual Report 2012/13
 Australian Commission on Safety and Quality in Health Care (ACSQHC)
 Sydney: ACSQHC, 2013.

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| Notes | The Commission's <i>Annual Report 2012/13</i> has been released. Highlights from the year included: <ul style="list-style-type: none"> • Accreditation to the National Safety and Quality in Health Service (NSQHS) Standards began from 1 January 2013, • Ongoing support for health services organisations implementing the NSQHS Standards was provided via a suite of resources distributed nationally, network meetings, workshops, site visits and through the Accreditation Advice Centre, • The Clinical Care Standards program was established with work commenced on the first Clinical Care Standards for acute coronary syndrome, stroke and antimicrobial stewardship, • A project was commenced with the National Mental Health Commission to look at the way national standards are used in mental health services, |
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| | <ul style="list-style-type: none"> • Development of the Australian Open Disclosure Framework finalised, and • An initial report on medical practice variation in Australia was released to the Organisation of Economic Development. |
| URL | http://www.safetyandquality.gov.au/publications/annual-report-201213/ |

Journal articles

Safely and effectively reducing inpatient length of stay: a controlled study of the General Internal Medicine Care Transformation Initiative

McAlister FA, Bakal JA, Majumdar SR, Dean S, Padwal RS, Kassam N, et al.

BMJ Quality & Safety 2013 [epub].

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| Notes | <p>Paper reporting on a Canadian study that sought to evaluate an efficiency program, the General Internal Medicine Care Transformation Initiative implemented at one of the seven teaching hospitals in the Canadian province of Alberta. The study examined the impact of the program compared with what was happening in the other six hospitals. The primary effectiveness outcome was risk-adjusted length of stay (LOS) and the primary safety outcome was ‘mortality during index hospitalisation or all-cause readmission or death within 30-days of discharge’. The authors report that the initiative “was associated with substantial reductions in LOS without increasing post-discharge events commonly quoted as proxies for quality.”</p> |
| DOI | http://dx.doi.org/10.1136/bmjqs-2013-002289 |

The Strategy That Will Fix Health Care

Porter ME, Lee TH

Harvard Business Review, October 2013.

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| Notes | <p>In this article, Harvard Business School Professor Michael Porter and Press Ganey’s CMO Thomas H. Lee set out their argument for a new strategy or paradigm as:</p> <p>“Around the world, every health care system is struggling with rising costs and uneven quality despite the hard work of well-intentioned, well-trained clinicians. Health care leaders and policy makers have tried countless incremental fixes—attacking fraud, reducing errors, enforcing practice guidelines, making patients better “consumers,” implementing electronic medical records—but none have had much impact.</p> <p>It’s time for a fundamentally new strategy.</p> <p>At its core is maximizing value for patients: that is, achieving the best outcomes at the lowest cost. We must move away from a supply-driven health care system organized around what physicians do and toward a patient-centered system organized around what patients need. We must shift the focus from the volume and profitability of services provided—physician visits, hospitalizations, procedures, and tests—to the patient outcomes achieved.”</p> <p>The proposed strategy “for moving to a high-value health care delivery system comprises six interdependent components: organizing around patients’ medical conditions rather than physicians’ medical specialties, measuring costs and outcomes for each patient, developing bundled prices for the full care cycle, integrating care across separate facilities, expanding geographic reach, and building an enabling IT platform”.</p> |
| URL | http://hbr.org/2013/10/the-strategy-that-will-fix-health-care/ar/1 |

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| Notes | <p>A new issue of <i>BMJ Quality and 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 and Safety</i> include:</p> <ul style="list-style-type: none"> • Editorial: Conventional evaluations of improvement interventions: more trials or just more tribulations? (Kaveh G Shojania) • Editorial: Antimicrobial stewardship programmes: the need for wider engagement (Esmita Charani, Alison H Holmes) • Editorial: Redefining the clinical gaze (Peter Lachman) • A case report of evaluating a large-scale health systems improvement project in an uncontrolled setting: a quality improvement initiative in KwaZulu-Natal, South Africa (Kedar S Mate, Wilbroda Hlolisile Ngidi, Jennifer Reddy, Wendy Mphatswe, Nigel Rollins, Pierre Barker) • Huddling for high reliability and situation awareness (Linda M Goldenhar, Patrick W Brady, Kathleen M Sutcliffe, Stephen E Muething) • A managed multidisciplinary programme on multi-resistant <i>Klebsiella pneumoniae</i> in a Danish university hospital (Stig Ejdrup Andersen, Jenny Dahl Knudsen, for the Bispebjerg Intervention Group) • Effective prevention of thromboembolic complications in emergency surgery patients using a quality improvement approach (Simon Kreckler, Robert D Morgan, K Catchpole, S New, A Handa, G Collins, P McCulloch) • Implementing an interprofessional patient safety learning initiative: insights from participants, project leads and steering committee members (Lianne Jeffs, Ilona Alex Abramovich, Chris Hayes, Orla Smith, Deborah Tregunno, Wai-Hin Chan, Scott Reeves) • Incorporating evidence review into quality improvement: meeting the needs of innovators (Margie Sherwood Danz, Susanne Hempel, Yee-Wei Lim, Roberta Shanman, A Motala, S Stockdale, P Shekelle, L Rubenstein) • A prospective, observational study of the effects of implementation strategy on compliance with a surgical safety checklist (J A Hannam, L Glass, J Kwon, J Windsor, F Stapelberg, K Callaghan, A F Merry, S J Mitchell) • Individual performance review in hospital practice: the development of a framework and evaluation of doctors' attitudes to its value and implementation (T M Trebble, L Cruickshank, P M Hockey, N Heyworth, T Powell, N Clarke) • Developing future clinical leaders for quality improvement: experience from a London children's hospital (Jane Runnacles, B Moulton, P Lachman) |
| URL | <p>http://qualitysafety.bmj.com/content/22/11</p> |

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| Notes | <p>A new supplement issue of <i>Journal of Health Services Research & Policy</i> has been published. Articles in this supplement include:</p> <ul style="list-style-type: none"> • Evaluating the Labour Government's English NHS health system reforms: the 2008 Darzi reforms (Nicholas Mays) • 'New' and distributed leadership in quality and safety in health care, or 'old' and hierarchical? An interview study with strategic stakeholders (Lorna McKee, K Charles, M Dixon-Woods, J Willars, and G Martin) |
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| | <ul style="list-style-type: none"> • Multimorbidity and delivery of care for long-term conditions in the English National Health Service: baseline data from a cohort study (Peter Bower, Mark Hann, Jo Rick, Kelly Rowe, Jenni Burt, Martin Roland, Joanne Protheroe, Gerry Richardson, and David Reeves) • Should pay-for-performance schemes be locally designed? evidence from the commissioning for quality and innovation (CQUIN) framework (Søren Rud Kristensen, Ruth McDonald, and Matt Sutton) • Choosing health: qualitative evidence from the experiences of personal health budget holders (Jacqueline Davidson, Kate Baxter, Caroline Glendinning, and Annie Irvine) • Personalization in the health care system: do personal health budgets have an impact on outcomes and cost? (Karen Jones, Julien Forder, James Caiels, Elizabeth Welch, Caroline Glendinning, and Karen Windle) |
| URL | http://hsr.sagepub.com/content/vol18/2_suppl/?etoc |

BMJ Quality and Safety online first articles

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| Notes | <p><i>BMJ Quality and Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Staffing and resource adequacy strongly related to RNs’ assessment of patient safety: a national study of RNs working in acute-care hospitals in Sweden (Lisa Smeds Alenius, Carol Tishelman, Sara Runesdotter, Rikard Lindqvist) |
| URL | http://qualitysafety.bmj.com/onlinefirst.dtl |

Online resources

ARCHI News Spring 2013

<http://www.archi.net.au/our-services/nn/2013/spring2013>

ARCHI News is the regular bulletin from the Australian Resource Centre for Healthcare Innovations. In this issue:

- **Advanced Care Planning** in the Ballina Renal Service – raising awareness among patients of Advance Care Directives and to improve compliance with the NSW Health Advance Care Directive policy.
- Up and at ‘em – **early mobilisation in elective orthopaedics** in the rural context shows downward trend in average length of stay and pressure ulcer incidence, as well as increased quality of life.
- **Neurosciences Length of Stay** Project – project that improved access to beds due to patient flow, enhanced coordination of care more than 20% reduction in length of stay.
- **RED - Real Education Delivered** – adaptable education programme that delivers professional support, information and learning opportunities to members of the multidisciplinary health care team within their working environment.

Viva La Evidence

<http://youtube.com/watch?v=QUW0Q8tXVUc>

Music video parodying Coldplay’s *Viva La Vida* to extol the virtues of evidence-based healthcare and introduce key principles.

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