# Australian COmmission on Safety and Quality in Health Care logo with Radar imageOn the Radar

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**On the Radar**

Editor: Dr Niall Johnson [niall.johnson@safetyandquality.gov.au](mailto:niall.johnson@safetyandquality.gov.au)

Contributors: Niall Johnson

**Journal articles**

*Sleep deprivation and starvation in hospitalised patients: how medical care can harm patients*

Xu T, Wick EC, Makary MA

BMJ Quality & Safety. 2015 [epub].

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| DOI | <http://dx.doi.org/10.1136/bmjqs-2015-004395> |
| Notes | Patients can suffer from the treatments and tests they receive. But they can also be harmed by other (neglected) aspects of care, such as the harms described in this Viewpoint piece, sleep deprivation and starvation. Clearly a system that allows patients to endure these privations is not a patient centred one and the authors finish by suggesting that “As we seek to improve quality through patient-centredness, basic human needs are important in the context of complex medical care. We should view hospitals as healing environments rather than isolated clinical spaces and design patient care accordingly.” |

For information on the Commission’s work on patient and consumer centred care, see <http://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/>

*The influence of context on the effectiveness of hospital quality improvement strategies: a review of systematic reviews*

Kringos DS, Sunol R, Wagner C, Mannion R, Michel P, Klazinga NS, et al.

BMC Health Services Research. 2015;15:277.

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| DOI | <http://dx.doi.org/10.1186/s12913-015-0906-0> |
| Notes | This review of reviews a reflection of how context is being appreciated as an important factor in the success (or otherwise) of quality improvement strategies and interventions. This study sought to “(i) describe the reporting of contextual factors in the literature on the effectiveness of quality improvement strategies, (ii) assess the relationship between effectiveness and contextual factors, and (iii) analyse the importance of contextual factors.”  Based on their review of 56 systematic reviews, the authors found the context factors were not well reported. When they were reported they covered: the quality improvement team (n = 12), quality improvement support and capacity (n = 11), organization (n = 9), micro-system (n = 8), and external environment (n = 4).  As they conclude, “Contextual factors may influence the effectiveness of quality improvement interventions, in particular at the level of the clinical micro-system.” |

*Predictors and outcomes of unplanned readmission to a different hospital*

Kim H, Hung WW, Paik MC, Ross JS, Zhao Z, Kim G-S, et al.

International Journal for Quality in Health Care. 2015 [epub].

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| DOI | <http://dx.doi.org/10.1093/intqhc/mzv082> |
| Notes | This study used data covering 509 775 patients aged 50 or older who were discharged alive from acute care hospitals in California (index hospitalisations) and 59 566 who had a rehospitalisation within 30 days following their index discharge in an effort to examine patient, hospital and market factors and outcomes around readmission to a different hospital. One of the more important findings was that **mortality and cost outcomes were worse** among patients **with different-hospital readmissions**. |

*HealthcarePapers*

Vol. 14 No. 4 2015

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| URL | <http://www.longwoods.com/publications/healthcarepapers/24219> |
| Notes | The current issue of the Canadian journal, *HealthcarePapers*, has a focus on patient experience, with the theme ‘The Patient Experience in Ontario 2020: What Is Possible?’ Articles in this issue of *HealthcarePapers* include:   * **Patient-Centred Care**: The Proving Ground for Continuity and Equity in Our Health System (Adalsteinn D. Brown and Joshua Tepper) * The **Patient Experience** in Ontario 2020: **What Is Possible**? (Cathy Fooks, Genevieve Obarski, Lori Hale and Stephanie Hylmar) * **Language** that Works for Everyone (Jocelyn Cornwell) * **Winning Conditions**? (Esther Green and Lesley Moody) * Finding Common Ground in **Patient-Centred Care**: Consensus, Communication and Conversations for Change (Cathy Simpson) * **Patient Engagement**: Time to Shake the Foundations (Leslee Thompson) * **A Challenge** to Aim Higher and Bolder (Barbara Balik) * **Patient-Centred Measurement** in British Columbia: Statistics without the Tears Wiped Off (Lena Cuthbertson) * **Partnerships with Patients and Family Caregivers** (Sholom Glouberman) * **Patient Engagement**: We Need to Get on with It (Cathy Fooks, Genevieve Obarski, Lori Hale and Stephanie Hylmar) |

For information on the Commission’s work on patient experience measures, see <http://www.safetyandquality.gov.au/our-work/information-strategy/indicators/hospital-patient-experience/>

For information on the Commission’s work on patient and consumer centred care, see <http://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/>

*BMJ Quality and Safety*

November 2015, Vol. 24, Issue 11

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| URL | <http://qualitysafety.bmj.com/content/24/11> |
| Notes | A new issue of *BMJ Quality and Safety* has been published. Many of the papers in this issue have been referred to in previous editions of *On the Radar* (when they were released online). Articles in this issue of *BMJ Quality and Safety* include:   * Editorial: **‘Speaking up’ climate**: a new domain of culture to measure and explore (Liane Ginsburg) * Editorial: Do not assume that no news is good news: **test result management and communication in primary care** (Janice L Kwan, Peter Cram) * Editorial: **Laboratory testing in general practice**: a patient safety blind spot (Nancy C Elder) * **‘Speaking up’** about patient safety concerns and unprofessional behaviour among residents: validation of two scales (William Martinez, Jason M Etchegaray, Eric J Thomas, Gerald B Hickson, Lisa Soleymani Lehmann, Anneliese M Schleyer, Jennifer A Best, J T Shelburne, N B May, S K Bell) * Routine failures in the process for blood testing and the communication of **results to patients in primary care** in the UK: a qualitative exploration of patient and provider perspectives (Ian Litchfield, Louise Bentham, Ann Hill, Richard J McManus, Richard Lilford, Sheila Greenfield) * **Test result communication in primary care**: a survey of current practice (Ian Litchfield, Louise Bentham, Richard Lilford, Richard J McManus, Ann Hill, Sheila Greenfield) * How to build up the **actionable knowledge** base: the role of ‘best fit’ framework synthesis for studies of improvement in healthcare (Andrew Booth, Christopher Carroll) * Reducing the incidence of oxyhaemoglobin desaturation during **rapid sequence intubation** in a paediatric emergency department (Benjamin T Kerrey, Matthew R Mittiga, Andrea S Rinderknecht, Kartik R Varadarajan, Jenna R Dyas, G L Geis, J W Luria, M E Frey, T E Jablonski, S B Iyer) |

*BMJ Quality and Safety* online first articles

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| URL | <http://qualitysafety.bmj.com/content/early/recent> |
| Notes | *BMJ Quality and Safety* has published a number of ‘online first’ articles, including:   * Establishing the validity of **English GP Patient Survey** items evaluating out-of-hours care (Luke T A Mounce, Heather E Barry, Raffaele Calitri, William E Henley, John Campbell, Martin Roland, Suzanne Richards) * The use of **patient experience survey data** by out-of-hours primary care services: a qualitative interview study (Heather E Barry, John L Campbell, Anthea Asprey, Suzanne H Richards) * Online **emergency department ratings**, patient satisfaction and the age-old issue of communication (Megan L Ranney, Clayton A Peimer) |

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

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| URL | <http://intqhc.oxfordjournals.org/content/early/recent?papetoc> |
| Notes | *International Journal for Quality in Health Care* has published a number of ‘online first’ articles, including:   * **Pathology test-ordering behaviour** of Australian general practice trainees: a cross-sectional analysis (Simon Morgan, Kim M Henderson, Amanda Tapley, John Scott, Mieke L Van Driel, Neil A Spike, Lawrie A McArthur, Andrew R Davey, Chris Oldmeadow, Jean Ball, and Parker J Magin) * Predictors and outcomes of **unplanned readmission** to a different hospital (Hongsoo Kim, William W. Hung, Myunghee Cho Paik, Joseph S. Ross, Zhonglin Zhao, Gi-Soo Kim, and Kenneth Boockvar) |

**Online resources**

*[UK] NICE Guidelines and Quality Standards*

<http://www.nice.org.uk>

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

* NICE Quality Standard QS101 **Learning disabilities**: challenging behaviour <https://www.nice.org.uk/guidance/qs101>
* NICE Quality Standard QS102 **Bipolar disorder, psychosis and schizophrenia** in children and young people <https://www.nice.org.uk/guidance/qs102>

*[USA] Effective Health Care Program reports*

<http://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:

* *Transitional Care Interventions To Prevent Readmissions for People With Heart Failure* <http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2134>
* *Psychosocial and Pharmacologic Interventions for Disruptive Behavior in Children and Adolescents* <http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2133>

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