



On the Radar

Issue 393

29 October 2018

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.

On the Radar is available online, via email or as a PDF or Word document from <https://www.safetyandquality.gov.au/publications-resources/on-the-radar/10.1136/bmjqs-2018-008219>

If you would like to receive *On the Radar* via email, you can subscribe on our website <https://www.safetyandquality.gov.au/> or by emailing us at mail@safetyandquality.gov.au. You can also send feedback and comments to mail@safetyandquality.gov.au.

For information about the Commission and its programs and publications, please visit <https://www.safetyandquality.gov.au>

You can also follow us on Twitter @ACSQHC.

On the Radar

Editor: Dr Niall Johnson niall.johnson@safetyandquality.gov.au

Contributors: Niall Johnson

Reports

Aligning Outcomes and Spending: Canadian Experiences with Value-Based Healthcare

Zelmer J

Ottawa: Canadian Foundation for Healthcare Improvement; 2018. p. 62.

URL	https://www.cfhi-fcass.ca/WhatWeDo/health-system-transformation
Notes	The search for value (variously defined) occupies the mind of many working in health systems currently. This report prepared on behalf of the Canadian Foundation for Healthcare Improvement looks at the Canadian experience and perspective on the value debate. The report looks at the conceptual background, the (Canadian) enablers of value-based healthcare (contexts, policy, measurements, care pathways and integration, payment models, etc.), experiences of value-based healthcare elsewhere, Canadian approaches and possible directions. The report sees the value-based approach as having great potential. The author observes that 'Value-based healthcare is a holistic strategy, not an isolated initiative or quick fix. It has significant cultural, policy, and practical implications for the health sector. A broad-based focus on value has the potential to trigger fundamental change in how we design, organize, deliver, and evaluate health services. ...we have the potential to advance a more person-centred, integrated system that uses available resources to optimize the outcomes that matter most to those it serves.'

The future of healthcare: our vision for digital, data and technology in health and care
 Department of Health and Social Care (UK)
 London: Department of Health and Social Care; 2018.

URL	https://www.gov.uk/government/publications/the-future-of-healthcare-our-vision-for-digital-data-and-technology-in-health-and-care
Notes	The UK's Department of Health and Social Care has produced this document outlining technology architecture and guiding principles that will together be the foundation for a new generation of digital services designed to meet the needs of the various users, the workforce, patients and people who use care services. The vision describes how digital services and IT systems will need to meet a clear set of open standards to ensure they can work and communicate together and also be replaced when better technologies become available. The authors have placed a focus on putting user needs first and setting standards at the centre will enable local organisations to manage their use of technology and spread and support innovation.

Journal articles

Effects of the Australian National Hand Hygiene Initiative after 8 years on infection control practices, health-care worker education, and clinical outcomes: a longitudinal study

Grayson ML, Stewardson AJ, Russo PL, Ryan KE, Olsen KL, Havers SM, et al.
 The Lancet Infectious Diseases. 2018;18(11):1269-77.

The Australian National Hand Hygiene Initiative: framework for future research

Gould D, Moralejo D, Chudleigh J, Drey N
 The Lancet Infectious Diseases. 2018;18(11):1171-2.

DOI	Grayson et al https://doi.org/10.1016/S1473-3099(18)30491-2 Gould et al https://doi.org/10.1016/S1473-3099(18)30598-X
Notes	Article and commentary in <i>The Lancet Infectious Diseases</i> reviewing the impacts of the National Hand Hygiene Initiative (NHHI) in Australia (Disclosure: The NHHI has been funded by the Australian Commission on Safety and Quality in Health Care). The NHHI is described as ‘a standardised culture-change programme based on the WHO My 5 Moments for Hand Hygiene approach to improve hand hygiene compliance among Australian health-care workers’ with the aim of reducing the risk of health-care-associated infections. Grayson et al assessed outcomes of the NHHI for the 8 years after implementation, including hospital participation, hand hygiene compliance, educational engagement, cost, and association with the incidence of health-care-associated <i>Staphylococcus aureus</i> bacteraemia (HA-SAB). They report that participation increased (105 hospitals in 2009 to 937 hospitals in 2017), overall hand hygiene compliance increased (36 213 [63·6%] of 56 978 Moments in 2009 to 494 673 [84·3%] of 586 559 Moments in 2017), increased compliance for each Moment type and for each health-care worker occupational group, including for medical staff and nearly 2 million online learning credential programmes completed. In Australia's major public hospitals (n=132), improved hand hygiene compliance was associated with declines in the incidence of HA-SAB : for every 10% increase in hand hygiene compliance, the incidence of HA-SAB decreased by 15%. These figures lead the authors to assert that ‘The NHHI has been associated with significant sustained improvement in hand hygiene compliance and a decline in the incidence of HA-SAB . Key features include sustained central coordination of a standardised approach and incorporation into hospital accreditation standards. The NHHI could be emulated in other national culture-change programmes.’

For information about the Commission’s work on the National Hand Hygiene Initiative, see <https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/hand-hygiene/>

For information about the Commission’s work on healthcare associated infection, see <https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/>

Adverse drug events and medication problems in "Hospital at Home" patients

Mann E, Zepeda O, Soones T, Federman A, Leff B, Siu A, et al.

Home Health Care Services Quarterly. 2018;37(3):177-86.

DOI	http://doi.org/10.1080/01621424.2018.1454372
Notes	Hospital in the home programs have appeal for a number of reasons, including allowing patients to stay in familiar surroundings and potential cost savings. This paper describes a ‘Hospital at Home’ (HaH) programs in New York. In such programs patients receive inpatient medical treatment such as intravenous medications, daily laboratory monitoring, and basic imaging in their home under close clinician supervision. In the paper the authors report that in the first 50 patients admitted into a new HaH programme, a chart review found 45 potential adverse drug events (ADE) and 14 ADE from admission to 30 days after HaH discharge. While none of the ADE were severe is suggest that monitoring for adverse drug events is important for such programs.

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

Patient-mediated interventions to improve professional practice

Fønhus MS, Dalsbø TK, Johansen M, Fretheim A, Skirbekk H, Flottorp SA

Cochrane Database of Systematic Reviews. 2018.

DOI	http://doi.org/10.1002/14651858.CD012472.pub2
Notes	<p>Cochrane review and meta-analysis that sought to assess which patient engagement strategies improve clinician adherence to recommended clinical practice. The review of 25 studies found two strategies ‘probably improve professional practice by increasing healthcare professionals’ adherence to recommended clinical practice’:</p> <ul style="list-style-type: none"> • patient-reported health information interventions • patient education interventions. <p>The reviewers also found that in the literature reviewed, patient decision aids did not affect clinician performance. They also notes that ‘The impact of these interventions on patient health and satisfaction, adverse events and resource use, is more uncertain mostly due to very low certainty evidence or lack of evidence.’ As ever, reviews and meta-analysis are hamstrung by the quality of the evidence.</p>

Will Disruptive Innovation in Health Care Improve the Health of Populations?

Galea S

The Milbank Quarterly. 2018 [epub].

DOI	https://www.milbank.org/quarterly/articles/will-disruptive-innovation-in-health-care-improve-the-health-of-populations/
Notes	<p>In this opinion piece, Galea looks at four ‘forces’ and their potential impact on both the nature of health care and population health. The forces he discusses are:</p> <ul style="list-style-type: none"> • precision medicine • digital revolution in health care • regulatory change • efforts to reshape health care delivery.

	<p>A number of these have attracted attention for their positive potentials. Galea problematizes those rosy views in raising concerns of equity and access. Equity and access are not universally regarded as being aspects of quality, but are considered as such by many.</p> <p>Galea poses two ‘core questions’: ‘Will the changes that are emerging truly improve the health of individuals? And will they improve the health of the entire population or only that of those who directly benefit from a particular shift, by way of group membership or purchasing power that buys them elite access?’</p>
--	--

Ten principles for more conservative, care-full diagnosis

Schiff GD, Martin SA, Eidelman DH, Volk LA, Ruan E, Cassel C, et al
 Annals of Internal Medicine, 2018 [epub].

DOI	https://doi.org/10.7326/m18-1468
Notes	<p>The abstract does (in this occasion) summarise the issue and the paper pithily [emphasis added]:</p> <p>‘Balancing tradeoffs between under-diagnosis (missing/delaying important diagnoses), and wasteful harmful over-diagnosis (labeling patients with “diseases” that may never cause suffering or death) represents an important current clinical and health policy issue. While often portrayed as the need to keep the pendulum from swinging too far in either direction, there is a need to view these two poles as two sides of the same coin, unified by the need for a more thoughtful, caring and conservative approaches to diagnosis.</p> <p>We assembled an international panel of experts on diagnosis, primary care, patient safety, medical communication and quality improvement to create a framework for more conservative diagnostic practices to guide clinicians, policy makers, in promoting more appropriate and cost effective diagnostic approaches.</p> <p>Ten overarching principles emerged:</p> <ul style="list-style-type: none"> • the need to promote enhanced clinician modes of caring and listening • developing a new science of clinical uncertainty • rethinking ways symptoms are approached and diagnosed • maximizing continuity and trust to optimize knowledge of the patient and avoid financial conflicts • taming[/taking] time to provide more time for clinical assessments and operationalize watchful waiting • more closely linking diagnosis to treatment options and decision-making • multifaceted efforts to educate and promote more appropriate test ordering based on awareness of testing harms and test limitations • incorporating lessons from the diagnostic errors safety movement to prioritize practices and provide patient safety nets • better addressing patients’ cancer fears and diagnosis challenges • enhanced diagnostic stewardship roles for specialists and emergency department physicians.’

Australian Journal of Primary Health

Volume 24(5) 2018

URL	http://www.publish.csiro.au/py/issue/9199
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"> • Aboriginal and Torres Strait Islander health (Geoffrey Spurling, Catrina Felton-Busch and Sarah Larkins)

	<ul style="list-style-type: none"> • Evaluation of the primary healthcare program in Iran: a systematic review (Mohammad Hossein Mehroolhassani, Reza Dehnavieh, Ali Akbar Haghdoost and Sajad Khosravi) • Supporting general practice to make timely decisions for better health care: a population health approach (Deborah Davies) • Metabolic syndrome and weight management programs in primary care: a comparison of three international healthcare systems (Elizabeth Sturgiss, Claire Deborah Madigan, Doug Klein, Nicholas Elmitt and Kirsty Douglas) • How accurately do general practitioners detect concurrent tobacco use and risky alcohol consumption? A cross-sectional study in Australian general practice (Jamie Bryant, Breanne Hobden, Kristy Forshaw, Christopher Oldmeadow, Justin Walsh and Rob Sanson-Fisher) • Exploring the costs and effectiveness of the Drug and Alcohol Withdrawal Network: a home-based alcohol and other drug withdrawal service (Cameron M. Wright, Richard Norman, Richard Varhol, Jacqueline Davis, Elizabeth Wilson-Taylor, Justin Dorigo and Suzanne Robinson) • Preferred language regarding overweight and obesity in general practice: a survey of predominantly rural Australian adults (Kristen Glenister, Cynthia A Opie and Julian Wright) • Effects of home telemonitoring on the control of high blood pressure: a randomised control trial in the Fangzhuang Community Health Center, Beijing (Fengying Pan, Hao Wu, Chaojie Liu, Xiaolei Zhang, Wei Peng, Xuejuan Wei and Wenjuan Gao) • Improving healthcare through digital connection? Findings from a qualitative study about patient portals in New Zealand (Phoebe Elers and Frances Nelson) • Breastfeeding questions to medicines call centres from the Australian public and health professionals (Amelia Stephens, Wendy Brodribb, Treasure McGuire and Laura Deckx) • Building oral health capacity in a women's health service (Angela Durey, Susan Kaye Lee, Bola Adebayo and Linda Slack-Smith) • Intimate-partner violence and reproductive decision-making by women attending Victorian Maternal- and Child-Health services: a cross-sectional study (Esther M Bauleni, Leesa Hooker, Hassan P Vally and Angela Taft) • Australians' understanding of the decline in fertility with increasing age and attitudes towards ovarian reserve screening (Alisha Evans, Sheryl de Lacey and Kelton Tremellen) • Partner violence and postnatal mental health: cross-sectional analysis of factors associated with depression and anxiety in new mothers (Shubha Kamana Mandal, Leesa Hooker, Hassan Vally and Angela Taft)
--	---

Orthopedic Clinics of North America
Volume 49, Issue 4 (October 2018)

URL	https://www.sciencedirect.com/journal/orthopedic-clinics-of-north-america/vol/49/issue/4
Notes	<p>A new issue of <i>Orthopedic Clinics of North America</i> has been published, with a focus on 'Quality, Value, and Patient Safety in Orthopedic Surgery'. Articles in this issue of <i>Orthopedic Clinics of North America</i> include:</p> <ul style="list-style-type: none"> • Editorial: Quality, Value, and Patient Safety in Orthopedic Surgery (Frederick M Azar)

	<ul style="list-style-type: none"> • The Role of Patient Education in Arthritis Management: The Utility of Technology (Thomas A Einhorn, Feroz A Osmani, Yousuf Sayeed, Raj Karia, Philip Band, Richard Iorio) • Improving Total Joint Replacement with Continuous Quality Improvement Methods and Tools (Eric W Guo, Zain Sayeed, Muhammad T Padela, Mohsin Qazi, Mark Zekaj, Patrick Schaefer, Hussein F Darwiche) • Professional Formation of Physicians Focused on Improving Care: How Do We Get There? (Siddhartha Simha, Zain Sayeed, Muhammad T Padela, Alberto Criado, Karun Amar, Walid Yassir) • Walk a Mile in the Leadership’s Shoes: Why Focus on Quality Improvement? (Anthony J Mells, Muhammad T Padela, Bilal Sleiman, Brett Chamernik, Bradley J Zarling, Zain Sayeed) • Osteolysis as it Pertains to Total Hip Arthroplasty (Brian Kurcz, Joseph Lyons, Zain Sayeed, Afshin A Anoushiravani, Richard Iorio) • The Role of Value-Based Implants in Orthopedic Trauma (Kyle E Lybrand, Peter L Althausen) • The Role of Business Education in the Orthopedic Curriculum (Peter L Althausen, Kyle E Lybrand) • MRI Safety with Orthopedic Implants (Zachary A Mosher, Jeffrey R Sawyer, Derek M Kelly) • Perioperative Safety: Keeping Our Children Safe in the Operating Room (Kerwyn C Jones, Todd Ritzman) • Standardization of Care of Common Pediatric Fractures (Jaime Rice Denning, Kevin J Little) • Quality, Safety, and Value in Pediatric Spine Surgery (Bayard C Carlson, Todd A Milbrandt, A Noelle Larson) • Cost, Value, and Patient Satisfaction in Carpal Tunnel Surgery (Joseph Ingram, Benjamin M Mauck, Norfleet B Thompson, James H Calandruccio) • Practicing Cost-Conscious Shoulder Surgery (Eric K Bonness, Laurence D Higgins) • The Volume-Value Relationship in Shoulder Arthroplasty (Prem N Ramkumar, Heather S Haeberle, Joseph P Iannotti, Eric T Ricchetti) • Patient Safety: Driving After Foot and Ankle Surgery (John J Carroll, William D McClain, Thomas C Dowd) • Optimizing Outpatient Total Ankle Replacement from Clinic to Pain Management (Michel A Taylor, Selene G Parekh)
--	---

BMJ Quality and Safety online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p><i>BMJ Quality and Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Editorial: Medication reconciliation: ineffective or hard to implement? (Edward Etchells, Olavo Fernandes)

International Journal for Quality in Health Care online first articles

URL	https://academic.oup.com/intqhc/advance-access
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"> • The nature of patient complaints: a resource for healthcare improvements (Anna Råberus; Inger K Holmström; Kathleen Galvin; Annelie J Sundler)

	<ul style="list-style-type: none"> Reliability and validity of the Thai Drug Hypersensitivity Quality of Life Questionnaire: a multi-center study (Yuda Chongpison; Pawinee Rerknimitr; Cameron Hurst; Pungjai Mongkolpathumrat; Sirinoot Palapinyo; Leena Chularojanamontri; Yuttana Srinoulprasert; Ticha Rerkpattanapipat; Kumutnart Chanprapaph; Wareeporn Disphanurat; Panlop Chakkavittumrong; Napatra Tovanabutra; Chutika Srisuttiyakorn; Chonlaphat Sukasem; Papapit Tuchinda; Ilaria Baiardini; Jettanong Klaewsongkram)
--	--

Online resources

[UK] NICE Guidelines and Quality Standards

<https://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 reviews or updates are:

- NICE Guideline NG35 **Myeloma: diagnosis and management**
<https://www.nice.org.uk/guidance/ng35>

Disclaimer

On the Radar is an information resource of the Australian Commission on Safety and Quality in Health Care. The Commission is not responsible for the content of, nor does it endorse, any articles or sites listed. The Commission accepts no liability for the information or advice provided by these external links. Links are provided on the basis that users make their own decisions about the accuracy, currency and reliability of the information contained therein. Any opinions expressed are not necessarily those of the Australian Commission on Safety and Quality in Health Care.