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

Issue 401

14 January 2019

*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.

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**On the Radar**

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Contributors: Niall Johnson

**Most popular items from 2018**

The items included in 2018’s issues of *On the Radar* that are apparently the most popular (most clicked upon) included:

* *Australian Group on Antimicrobial Resistance. Sepsis Outcome Programs 2016 Report*Coombs G, Bell JM, Daley D, Collignon P, Cooley L, Gottlieb T, Iredell J, Kotsanas D, Nimmo G and Robson J on behalf of the Australian Group on Antimicrobial Resistance, Turnidge JD.  
  Sydney: ACSQHC; 2018.p.99.  
  <https://www.safetyandquality.gov.au/publications/agar-sepsis-outcome-program-2016-report/>
* *Antimicrobial Stewardship: From Principles to Practice*Nathwani D, editor  
  London: British Society for Antimicrobial Chemotherapy; 2018.  
  <http://bsac.org.uk/antimicrobial-stewardship-from-principles-to-practice-e-book/>
* Communicating for Safety resource portal [https://www.c4sportal.safetyandquality.gov.au](https://www.c4sportal.safetyandquality.gov.au1)
* HACS information kit <https://www.safetyandquality.gov.au/our-work/indicators/hospital-acquired-complications/hacs-information-kit/>
* *Review of key attributes of high-performing person-centred healthcare organisations*Australian Commission on Safety and Quality in Health Care  
  ACSQHC; 2018. p. 118.  
  <https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/person-centred-organisations/>
* *Antimicrobial Stewardship in Australian Health Care 2018*  
  Australian Commission on Safety and Quality in Health Care  
  Sydney: ACSQHC; 2018. p. 319.  
  <https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/antimicrobial-stewardship/book/>
* *The curious case of Patient K*  
  Ron Elisha  
  Medical Journal of Australia. 2018;209(11):501-2.  
  <https://doi.org/10.5694/mja18.00962>
* National Safety and Quality Health Service (NSQHS) Standards  
  <http://nationalstandards.safetyandquality.gov.au/>
* *Hospital culture and clinical performance: where next?*  
  Mannion R, Smith J  
  BMJ Quality & Safety. 2018;27(3):179-81.  
  <http://dx.doi.org/10.1136/bmjqs-2017-007668>
* *Creating Safer, Better Health Care – The impact of the National Safety and Quality Health Service Standards*Australian Commission on Safety and Quality in Health Care  
  Sydney: ACSQHC; 2018. p.80  
  <https://www.safetyandquality.gov.au/our-work/assessment-to-the-nsqhs-standards/the-impact-of-the-nsqhs-standards/>

**Books**

*The Point of Care: How one leader took an organisation from ordinary to extraordinary*

Balding C

Ashburton: Cathy Balding Qualityworks; 2018.

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| URL | <https://www.cathybalding.com/the-point-of-care> |
| Notes | Written by one of Australia’s best-known advocates of quality in health care this book is something of a change in approach. Balding has written extensively on health care quality but this is her first ‘business fiction’ in which she uses a fictional story to illustrate some of the challenges that face health care and ways of addressing them. The book is both a fictional tale and a real world best practice case study. It’s intended to make quality and clinical governance systems in health, aged and human services easier to understand and work with. |

**Reports**

*The Women’s Mental Health Taskforce: final report*

Department of Health & Social Care and Agenda

London: Department of Health & Social Care; 2018. p. 73.

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| URL | <https://www.gov.uk/government/publications/the-womens-mental-health-taskforce-report> |
| Notes | The UK’s Women’s Mental Health Taskforce was formed in response to a reported rise in mental ill health among women. This final report of the taskforce describes how women’s experience of mental ill health can differ to men’s. Topics addressed include:   * core themes in women’s mental health * the involvement of women with lived experience * principles for service design * future strategic priorities. |

*What is the status of women's health and care in the U.S. compared to ten other countries?*

Gunja MS, Tikkanen R, Seervai S, Collins SR.

New York: The Commonwealth Fund; 2018. p. 23.

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| URL | <https://www.commonwealthfund.org/publications/issue-briefs/2018/dec/womens-health-us-compared-ten-other-countries> |
| Notes | The (US) Commonwealth Fund routinely conducts surveys of different aspects of health care in which they compare the US experience with that of a number of other countries, usually including Australia. This report focuses on women’s health and health care. Once more, the US may spend considerably more but has a mixed set of outcomes with many of the other countries spending markedly less but achieving equal or better outcomes.  Women in the USA:   * report the least positive experiences among the 11 countries studied. They have the greatest burden of **chronic illness**, highest rates of **skipping needed health care** because of cost, and **difficulty affording** their health care. * have the highest rate of **maternal mortality** because of complications from pregnancy or childbirth, as well as among the highest rates of **caesarean sections (Australia’s rate is even higher)**. * report the highest rates of breast cancer screening among countries surveyed (along with Sweden) and the lowest rates of breast cancer–related deaths (along with women in Norway, Sweden and Australia). * are less likely to rate their quality of care as excellent or very good compared to women in all other countries studied.   Australia’s results in this survey are a mixed bag with some positives and some less impressive ratings; this is the usual pattern in these Commonwealth Fund surveys. |

*Health of refugee and migrant children. Technical guidance*

World Health Organization

Copenhagen: World Health Organization Regional Office for Europe; 2018. p. 44.

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| URL | <http://www.euro.who.int/en/health-topics/health-determinants/migration-and-health/news/news/2018/12/who-launches-technical-guidance-series-on-the-health-of-refugees-and-migrants>  <http://www.euro.who.int/en/health-topics/health-determinants/migration-and-health/publications/2018/health-of-refugee-and-migrant-children-2018> |
| Notes | The World Health Organization (WHO) has launched a technical guidance series on the health of refugees and migrants. Five publications are currently available, each with a special focus on one of the following:   * children’s health * health promotion * healthy ageing * maternal and newborn health, and * mental health   The *Health of refugee and migrant children. Technical guidance* emphasises how national and local governments have an important role in fostering or hindering living conditions for refugee and migrant children in the areas of housing, health care services and education. When considering health and health care interventions for migrant children, some areas need specific attention, such as their diverse backgrounds, whether they are unaccompanied and separated from family, whether they have been trafficked and also if they are children who have been left behind. |

*Blueprint for Complex Care: Advancing the Field of Care for Individuals with Complex Health and Social Needs*

Humowiecki M, Kuruna T, Sax R, Hawthorne M, Hamblin A, Turner S, et al.

National Center for Complex Health and Social Needs, Center for Health Care Strategies, and Institute for Healthcare Improvement; 2018. p. 64.

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| URL | <http://www.ihi.org/resources/Pages/Publications/Blueprint-for-Complex-Care.aspx> |
| Notes | Many health care organizations have been developing models of care for individuals with complex medical, behavioural, and social needs. A group of US health ‘think tanks’ have collaborated to develop this report drawing together information and learnings. This report offers a strategic approach with recommendations to advance the complex care. It assesses the current state of complex care and presents recommendations. The recommendations include:   * Develop **core competencies** and **practical tools** to support their use. * Further develop **quality measures** for complex care programs. * Enhance and promote **integrated, cross-sector data infrastructures**. * Identify **research and evaluation priorities**. * Engage allied organizations and healthcare champions through strategic **communication and partnership**. * Value the **leadership** of people with lived experience. * Strengthen local cross-sector **partnerships**. * Promote expanded public **investment** in innovation, research, and service delivery. * Leverage alternative **payment models** to promote flexible and sustainable funding. * Create a field coordination structure that facilitates **collective action and systems-level change**. * Foster **peer-to-peer connections** and **learning dissemination**. |

*Opening the door to change: NHS safety culture and the need for transformation*

Care Quality Commission

Newcastle upon Tyne: Care Quality Commission; 2018. p. 58.

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| URL | <https://www.cqc.org.uk/publications/themed-work/opening-door-change> |
| Notes | The Care Quality Commission in the UK has released this report examining the issues that contribute to the occurrence of ‘never events’ and wider patient safety incidents in England. The review sought to help understand the barriers to delivering safe care and to identify learning that can be applied to improve patient safety. The report found that too many people are being injured or suffering unnecessary harm because staff are not supported with **sufficient training**, and because the complexity of the current system makes it difficult for staff to ensure that **safety is an integral part of everything they do**. |

*The health impacts of screen time: a guide for clinicians and parents*

The Royal College of Paediatrics and Child Health

London: The Royal College of Paediatrics and Child Health; 2019. p. 11.

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| URL | <https://www.rcpch.ac.uk/sites/default/files/2018-12/rcpch_screen_time_guide_-_final.pdf> |
| Notes | The (UK) Royal College of Paediatrics and Child Health has produced this guidance that suggests parents approach **screen time** based on the **child’s developmental age**, the individual need and value the family place on positive activities such as socialising, exercise and sleep - when screen time displaces these activities, the evidence suggests there is a risk to child wellbeing.  The guidance includes a series of questions which aim to help families make decisions about their screen time use, including:   * Is your family’s screen time under control? * Does screen use interfere with what your family want to do? * Does screen use interfere with sleep? * Are you able to control snacking during screen time use? |

**Journal articles**

*Coping with more people with more illness. Part 1: the nature of the challenge and the implications for safety and quality*

Amalberti R, Vincent C, Nicklin W, Braithwaite J

International Journal for Quality in Health Care. 2018 [epub].

*Coping with more people with more illness. Part 2: new generation of standards for enabling healthcare system transformation and sustainability*

Braithwaite J, Vincent C, Nicklin W, Amalberti R

International Journal for Quality in Health Care. 2018 [epub].

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| DOI | Amalberti et al <https://doi.org/10.1093/intqhc/mzy235>  Braithwaite et al <https://doi.org/10.1093/intqhc/mzy236> |
| Notes | A pair of papers that stem from a working group of the International Society for Quality in Health Care (ISQua) that seek to understand the changing health care environment and how healthcare systems may respond to the challenges ahead. Whether one agrees with either or both the challenges ahead and the possible transformations, the papers may stimulate consideration of how care is delivered and enhanced.  The authors consider that health systems will need to ‘learn how to cope better with **more people with more chronic and acute illnesses** needing care’ and that the strategies they will need to develop will include ‘**preventative approaches**…, paying attention to the **determinants of health**, **keeping people at home** longer,…new **governance and financial models**, creating novel **incentives**, **upskilling** workforces…, **redesigning care teams** and transitioning from a system delivering episodic care to one that looks after people across the life cycle’.  In the second paper they describe a key role for (flexible) **standards** and (external) **assessment** or **accreditation**. The standards will, according to the authors, need to better reflect better coordination of care, cover the entire patient journey and support new models of care. Some may consider that is either an over-privileging or optimistic view on the utility and impact of both standards and accreditation. |

*The challenge of determining appropriate care in the era of patient-centered care and rising health care costs*

Coulter I, Herman P, Ryan G, Hilton L, Hays RD

Journal of Health Services Research & Policy. 2018 [epub].

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| DOI | <https://doi.org/10.1177/1355819618815521> |
| Notes | In this paper the authors revisit the RAND/UCLA Appropriateness method in order to suggest how this approach to assessing the appropriateness of health care can be rendered more patient-centred by incorporating patient outcomes, preferences, and costs. However, as the authors acknowledge, there are ‘considerable implementation challenges’. |

*The future of health systems to 2030: a roadmap for global progress and sustainability*

Braithwaite J, Mannion R, Matsuyama Y, Shekelle PG, Whittaker S, Al-Adawi S, et al

International Journal for Quality in Health Care. 2018 [epub].

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| DOI | <https://doi.org/10.1093/intqhc/mzy242> |
| Notes | Allied to the two papers above (with a number of the same authors) is this paper summarising and presaging the release of a new book (*Healthcare Systems: Future Predictions for Global Care*) that identified trends that the (many) authors collectively believe will shape health care along with the themes that they identified as arising from the book’s chapters.  The five trends include:   * sustainable health systems * the genomics revolution * emerging technologies * global demographics dynamics, and * new models of care.   The themes that recur are:   * integration of healthcare services * financing, economics and insurance * patient-based care and empowering the patient * universal healthcare * technology and information technology * aging populations * preventative care * accreditation, standards, and policy, and * human development, education and training. |

*Medical overuse as a physician cognitive error: Looking under the hood*

Korenstein D

JAMA Internal Medicine. 2019;179(1):26-7.

*Analysis of physician variation in provision of low-value services*

Schwartz AL, Jena AB, Zaslavsky AM, McWilliams JM

JAMA Internal Medicine. 2019;179(1):16-25.

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| DOI | Korenstein <https://doi.org/10.1001/jamainternmed.2018.5136>  Schwartz et al <https://doi.org/10.1001/jamainternmed.2018.5086> |
| Notes | **Appropriateness** of care is widely seen as a desirable characteristic in care and has fed into discussions of **value** of cure and **variation** in care. Variation has, in turn, been deemed warranted and unwarranted Korenstein uses Schwartz et al as her departure point as they revealed that rates of low value service were not predictable based on observable physician characteristics. Korenstein argues that variation, including “**medical overuse**” ‘can …be framed as a **clinical cognitive error**, explained by cognitive processes and biases involving suboptimal analytic thinking and erroneous intuitive decision making” with “Individual-level variations in overuse …aris[ing] from differences in cognitive errors.’ She suggests a number of strategies that could address these, including **norm setting** (such as ‘providing data to high users of low-value services about clinical behavior, benchmarked to colleagues, …can help override physician loss aversion and confirmation bias.’), and **paths of least resistance** (for example, setting EMR defaults to reduce overuse). |

*Understanding organisational culture for healthcare quality improvement*

Mannion R, Davies H

BMJ. 2018;363:k4907.

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| DOI | <https://doi.org/10.1136/bmj.k4907> |
| Notes | Culture is a recurring topic in discussions of health safety and quality, perhaps particularly when there are lapses or failures. This paper provides a succinct summary of the role and importance of culture in the health context and its bearing on safety and quality. The authors describe **organisational culture** as ‘covers how things are arranged and accomplished, as well as how they are talked about and justified—that is, the stories and narratives about what is done and why, and the presuppositions that underpin these’ with three levels, including the **visible manifestations**, **shared ways of thinking** and the deeper **shared assumptions**. Further, health facilities, particularly hospitals, are complex as they are ‘**a dynamic cultural mosaic** made up of multiple, complex, and overlapping subgroups with variably shared assumptions, values, beliefs, and behaviours [cultures].’ |

*BMJ Quality and Safety*

January 2019 - Volume 28 – 1

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| URL | [https://qualitysafety.bmj.com/content/28/1](https://qualitysafety.bmj.com/content/28/12) |
| 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: **EHR-related alert fatigue**: minimal progress to date, but much more can be done (Thomas H Payne) * Editorial: Scaffolding our systems? Patients and families ‘reaching in’ as a source of **healthcare resilience** (Jane K O’Hara, Karina Aase, Justin Waring) * Editorial: **Virtual postoperative clinic**: can we push virtual postoperative care further upstream? (Daniel Cornejo-Palma, David R Urbach) * Impact of a national QI programme on **reducing electronic health record notifications to clinicians** (Tina Shah, Shilpa Patel-Teague, Laura Kroupa, Ashley N D Meyer, Hardeep Singh) * **Patient participation in inpatient ward rounds** on acute inpatient medical wards: a descriptive study (Bernice Redley, Lauren McTier, Mari Botti, Alison Hutchinson, Harvey Newnham, Donald Campbell, Tracey Bucknall) * **Virtual outpatient clinic** as an alternative to an actual clinic visit after surgical discharge: a randomised controlled trial (Paul Healy, Liam McCrone, R Tully, E Flannery, A Flynn, C Cahir, M Arumugasamy, T Walsh) * Standardisation of perioperative urinary catheter use to reduce **postsurgical urinary tract infection**: an interrupted time series study (Mahsa Sadeghi, Jerome A Leis, Claude Laflamme, Darrel Sparkes, Wendy Ditrani, Aaron Watamaniuk, Ru Taggar, F Jinnah, M Avaness, M Vearncombe, A B Nathens) * **Speaking up about patient safety concerns**: the influence of safety management approaches and climate on nurses’ willingness to speak up (C W Alingh, J D H van Wijngaarden, K van de Voorde, J Paauwe, R Huijsman) * **Rate of avoidable deaths** in a Norwegian hospital trust as judged by retrospective chart review (Tormod Rogne, Trond Nordseth, G Marhaug, E M Berg, A Tromsdal, O Sæther, S Gisvold, P Hatlen, H Hogan, E Solligård) * **Michigan Appropriate Perioperative** (MAP) criteria for **urinary catheter use** in common general and orthopaedic surgeries: results obtained using the RAND/UCLA Appropriateness Method (Jennifer Meddings, Ted A Skolarus, Karen E Fowler, Steven J Bernstein, Justin B Dimick, Jason D Mann, S Saint) * Addressing the challenges of **knowledge co-production in quality improvement**: learning from the implementation of the researcher-in-residence model (Cecilia Vindrola-Padros, Laura Eyre, H Baxter, H Cramer, B George, L Wye, N J Fulop, M Utley, N Phillips, P Brindle, M Marshall) * Characteristics of **healthcare organisations struggling to improve quality:** results from a systematic review of qualitative studies (Valerie M Vaughn, Sanjay Saint, Sarah L Krein, Jane H Forman, Jennifer Meddings, Jessica Ameling, Suzanne Winter, Whitney Townsend, Vineet Chopra) |

*International Journal for Quality in Health Care*

Volume 30 Issue 9, November 2018

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| URL | <https://academic.oup.com/intqhc/issue> |
| Notes | A new issue of the *International Journal for Quality in Health Care* 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 *International Journal for Quality in Health Care* include:   * Editorial: Targeted identification of **pressure injuries** and the effect of an educational campaign to improve **handwashing** (Richard Lu) * The patient safety culture: a systematic review by characteristics of **Hospital Survey on Patient Safety Culture** dimensions (Cláudia Tartaglia Reis; Sofia Guerra Paiva; Paulo Sousa) * Systematic review of **diagnostic pathways** for patients presenting with **acute abdominal pain** (Kirsten J de Burlet; Andrew J Ing; Peter D Larsen; Elizabeth R Dennett) * Longitudinal variation in **pressure injury incidence** among long-term aged care facilities (Mikaela Jorgensen; Joyce Siette; A Georgiou; J I Westbrook) * Improvement capability and performance: a qualitative study of **maternity services providers** in the UK (Sarah Darley; Kieran Walshe; Ruth Boaden; Nathan Proudlove; Mhorag Goff) * **Speaking up behaviors and safety climate** in an Austrian university hospital (David Schwappach; Gerald Sendlhofer; Lynn Häsler; Veronika Gombotz; Karina Leitgeb; Magdalena Hoffmann; Lydia Jantscher; Gernot Brunner) * **Bed management** team with Kanban web-based application (Hermano Alexandre Lima Rocha; Ana Kelly Lima da Cruz Santos; Antônia Celia de Castro Alcântara; Carmen Sulinete Suliano da Costa Lima; Sabrina Gabriele Maia Oliveira Rocha; Roberto Melo Cardoso; Jair Rodrigues Cremonin) * Assessing **improvement capability in healthcare organisations**: a qualitative study of healthcare regulatory agencies in the UK (Joy Furnival; Ruth Boaden; Kieran Walshe) * **Implementation science in low-resource settings**: using the interactive systems framework to improve hand hygiene in a tertiary hospital in Ghana (Brianne Kallam; Christie Pettitt-Schieber; Medge Owen; Rebecca Agyare Asante; Elizabeth Darko; Rohit Ramaswamy) * **Medical practice variation**: public reporting a first necessary step to spark change (Gert P Westert; Stef Groenewoud; John E Wennberg; Catherine Gerard; Phil DaSilva; Femke Atsma; David C Goodman) * Limit, lean or listen? A **typology of low-value care** that gives direction in de-implementation (Eva W Verkerk; Marit A C Tanke; Rudolf B Kool; Simone A van Dulmen; Gert P Westert) |

*Pediatric Quality & Safety*

Vol. 3, No. 6, November/December 2018

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| URL | <https://journals.lww.com/pqs/toc/2018/11000> |
| Notes | A new issue of *Pediatric Quality & Safety* has been published. Articles in this issue of *Pediatric Quality & Safety* include:   * Applying Lessons from an Inaugural Clinical Pathway to Establish a **Clinical Effectiveness Program** (Algaze, Claudia A.; Shin, Andrew Y.; Nather, Chealsea; Elgin, Krisa H.; Ramamoorthy, Chandra; Kamra, Komal; Kipps, Alaina K.; Yarlagadda, Vamsi V.; Mafla, Monica M.; Vashist, Tanushree; Krawczeski, Catherine D.; Sharek, Paul J.) * Utilization of a Dual Surveillance Program to Reduce **Surgical-site Infections** (Song, Xiaoyan; Oetgen, Matthew E.; Magge, Suresh N.; Berger, John T.; Shah, Rahul K.) * Improving Reliability to a **Care Goal Rounding Template** in the Pediatric Intensive Care Unit (Efune, Proshad N.; Morse, Rustin B.; Sheehan, Maeve; Malone, Loren M.; Robertson, Tammy S.; Darnell, Cindy) * A Longitudinal and Sustainability Assessment of **Pediatric Interfacility Transport Handover Standardization** (Sochet, Anthony A.; Ryan, Kelsey S.; Miller, Walter; Bartlett, Jennifer L.; Nakagawa, Thomas A.; Bingham, L) * CONNECT Workshops to Enhance **Physician and Patient Experience: Interviews** Reveal the Physician Perspective (Scott, Jennifer E.; Jacob-Files, Elizabeth; Baden, Harris P.) * **Reducing Time to Pain Medication Administration** for Pediatric Patients with Long Bone Fractures in the Emergency Department (Schuman, Sarah S.; Regen, Rebecca B.; Stuart, Lindsay H.; Harrell, Camden; Jones, Tamekia L.; Stewart, Barbara M.; Berg, Allyson M.; Longjohn, Mindy; Kink, Rudy J.) * **Improving Low-acuity Patient Flow** in a Pediatric Emergency Department: A System Redesign (Berkowitz, Deena A.; Brown, Kathleen; Morrison, Sephora; Payne, Asha; Pettinichi, Jeannie; Schultz, Theresa Ryan; Thomas, Anthony; Chamberlain, James M.) * **Standardization of Radiologic Procedures** for Pediatric Videofluoroscopic Swallow Studies: A Service-based Quality Improvement Initiative (Thompson, Benjamin; Lundine, Jennifer P.; Madhoun, Lauren; Hu, Houchun; Holliman-Wade, Dominic; Bates, D. Gregory) * A Quality Improvement Intervention to Decrease **Hypothermia in the Delivery Room** Using a Checklist (Vinci, Alexandra; Islam, Shahidul; Quintos-Alegheband, Lyn; Hanna, Nazeeh; Nayak, Amrita) * **Reducing Unplanned Extubations** Across a Children’s Hospital Using Quality Improvement Methods (Kandil, Sarah B.; Emerson, Beth L.; Hooper, Michael; Ciaburri, Rebecca; Bruno, Christie J.; Cummins, Nancy; DeFilippo, Virginia; Blazevich, Beth; Loth, Adrienne; Grossman, Matthew) * A Learning Collaborative Approach to **Improve Mental Health Service Delivery in Pediatric Primary Care** (Baum, Rebecca A.; Manda, Divya; Brown, Courtney M.; Anzeljc, Samantha A.; King, Melissa A.; Duby, John) * Pediatric Surgeon Perceptions of **Participation in External Patient Safety Programs**: impact on Patient Safety (Berman, Loren; Rangel, Shawn; Tsao, KuoJen; for the APSA Quality and Safety Committee) |

*Australian Journal of Primary Health*

Volume 24(6) 2018

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| URL | <http://www.publish.csiro.au/py/issue/9201> |
| Notes | A new issue of the *Australian Journal of Primary Health* has been published. Articles in this issue of the *Australian Journal of Primary Health* include:   * **Community pharmacists** and their role in **pharmacogenomics testing**: an Australian perspective drawing on international evidence (Vijayaprakash Suppiah, Chiao Xin Lim and Elizabeth Hotham) * **Pharmacists in general practice**: recommendations resulting from **team-based collaborative care** (Helen Benson, Cherie Lucas, Shalom I Benrimoj, Walter Kmet and Kylie A Williams) * **Clozapine and shared care**: the consumer experience (Kate Murphy, Ian Coombes, Sara McMillan and Amanda J Wheeler) * **Deprescribing for older adults** in Australia: factors influencing GPs (Robyn Gillespie, Judy Mullan and Lindsey Harrison) * **Hepatitis B contact tracing**: what works? (Thalia Ash, Lester Mascarenhas, John Furler and Meredith Temple-Smith) * Catching up with catch-up: a policy analysis of **immunisation for refugees and asylum seekers** in Victoria (Georgia A Paxton, Pete C G Spink, Margaret H Danchin, Lauren Tyrrell, Chelsea L Taylor, Susan Casey and H R Graham) * Delivering the **hepatitis C** cure to **Aboriginal people**: documenting the perspectives of one Aboriginal Health Service (Jack Wallace, Bev Hanley, Mary Belfrage, Sandra Gregson, Niall Quiery and Jayne Lucke) * Feltman: evaluating the utilisation of an **Aboriginal diabetes education tool** by health professionals (Hannah Xu, Christina Geros, Emma Turner, Mikaela Egan, Kristie Cocotis, Colin Mitchell, Natalie Arambasic and Jennifer Browne) * Australian general practitioners' perspective on the role of the **workplace Return-to-Work Coordinator** (Joanna Bohatko-Naismith, Maya Guest, Carole James, Dimity Pond and Darren A Rivett) * What information is important for accredited **exercise physiologists** to facilitate change in clients living with **type 2 diabetes mellitus**? (Alisa K Zimmermann and Fiona Barnett) * Participant perspectives on the Australian WHO ASSIST Phase III brief intervention for **illicit drug use in a primary healthcare setting** (David Newcombe, Rachel Humeniuk, Victoria Dennington and Robert Ali) * Identifying **palliative care needs in residential care** (Thilini Liyanage, Geoffrey Mitchell and Hugh Senior) * **Patient out-of-pocket medical expenses** over 2 years among Queenslanders with and without a major cancer (Louisa G Gordon, Thomas M Elliott, Catherine M Olsen, N Pandeya, D C Whiteman and for the QSkin study) |

*Nursing Leadership*

Volume 31, Number 3, 2018

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| URL | <https://www.longwoods.com/publications/nursing-leadership/25675/1/vol.-31-no.-3-2018> |
| Notes | A new issue of *Nursing Leadership* has been published with a focus on nursing regulation. Articles in this issue of *Nursing Leadership* include:   * Editorial: **Who Will Be Culpable?** (Lynn M Nagle) * Mandatory Reporting of **Health Professional Incompetence and Incapacity**: Is it Time to Adopt the Australian Regime? (Kathleen Leslie and Sioban Nelson) * Commentary: Will Mandatory Reporting of **Health Professional Misconduct, Incompetence or Incapacity** Make Patients Safer? (R Tarjan) * British Columbia’s One **Nursing Regulator:** A Critical Commentary on the Amalgamation Process (Susan M. Duncan and Nora B Whyte) * Commentary: **Regulation and the Nursing Profession**: A Personal Reflection (Barbara Mildon) * How a **Culture of Kindness** Can Improve **Employee Engagement and Patient Experience** – and Five Ways to Get There (Shannon Landry, Kathy Bisson, Colleen Cook and Linda Morrison) * Potential **Dangers of Nursing Overtime** in Critical Care (Vanessa M D'Sa, Jenny Ploeg, Anita Fisher, Noori Akhtar-Danesh and Gladys Peachey) * Refocusing **Nursing’s Lens on Followership** (Sarah Lopez and M Freeman) |

*Journal of Health Services Research & Policy*

Volume: 24, Number: 1 (January 2019)

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| URL | <https://journals.sagepub.com/toc/hsrb/24/1> |
| Notes | A new issue of the *Journal of Health Services Research & Policy* has been published. Articles in this issue of the *Journal of Health Services Research & Policy* include:   * Editorial: Calls for **routine collection of patient-reported outcome measures** are getting louder (Nils Gutacker and Andrew Street) * Effects of **results-based financing of maternal and child health services** on patient satisfaction in Afghanistan (Essa Tawfiq, Jaikishan Desai, and Dean Hyslop) * More care out of hospital? A qualitative exploration of the factors influencing the development of the **district nursing workforce** in England (Vari M Drennan) * **Primary care utilization and clinical quality performance**: a comparison between health centres in Medicaid expansion states and non-expansion states (De-Chih Lee, Leiyu Shi, and Hailun Liang) * Relationship between **preoperative patient-reported outcomes and hospital length of stay**: a prospective cohort study of general surgery patients in Vancouver, Canada (Jason Sutherland, Guiping Liu, Trafford Crump, Matthew Bair, and Ahmer Karimuddin) * Understanding the determinants of **public trust in the health care system** in China: an analysis of a cross-sectional survey (Dahai Zhao, Hongyu Zhao, and Paul D Cleary) * Assessing the impact of **retraction** on the citation of **randomized controlled trial reports**: an interrupted time-series analysis (Andrew Mott, Caroline Fairhurst, and David Torgerson) * How wide is **the Goldilocks Zone in your health system**? (Sue Ziebland, Birgit Rasmussen, John MacArtney, Senada Hajdarevic, and Rikke S Andersen) * Learning to lead: a review and synthesis of literature examining **health care managers' use of knowledge** (Kaitlyn Tate, Sarah Hewko, Patrick McLane, Pamela Baxter, Karyn Perry, Susan Armijo-Olivo, Carole Estabrooks, Deb Gordon, and Greta Cummings) |

*Health Affairs*

Volume: 38, Number: 1 (January 2019)

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| URL | <https://www.healthaffairs.org/toc/hlthaff/38/1> |
| Notes | A new issue of *Health Affairs* has been published with the themes of ‘Substance Use, Payment & More’. Articles in this issue of *Health Affairs* include:   * **Primary Care** Where Everybody Knows Your Name (Bara L. Vaida) * Medication Treatment For **Opioid Use Disorders In Substance Use Treatment Facilities** (Ramin Mojtabai, Christine Mauro, Melanie M Wall, Colleen L Barry, and Mark Olfson) * Trends In **Buprenorphine Prescribing** By Physician Specialty (Hefei Wen, Tyrone F Borders, and Janet R Cummings) * Divergence In Recent Trends In **Deaths From Intentional And Unintentional Poisoning** (Katherine Hempstead and Julie Phillips) * **Decreases In Readmissions** Credited To Medicare’s Program To Reduce Hospital Readmissions Have Been **Overstated** (Christopher Ody, Lucy Msall, Leemore S Dafny, David C Grabowski, and David M. Cutler) * An Alternative Payment Model To Support Widespread Use Of **Collaborative Dementia Care Models** (M Boustani, C A Alder, C A Solid, and D Reuben) * Targeted Incentive Programs For **Lung Cancer Screening** Can Improve Population Health And Economic Efficiency (David D Kim, Joshua T Cohen, John B Wong, Babak Mohit, A Mark Fendrick, D M Kent, and P J Neumann) * What’s Been The Bang For The Buck? **Cost-Effectiveness Of Health Care Spending Across Selected Conditions** In The US (David Wamble, Michael Ciarametaro, Katherine Houghton, Mayank Ajmera, and Robert W Dubois) * The Contribution Of New Product Entry Versus Existing Product Inflation In The **Rising Costs Of Drugs** (Inmaculada Hernandez, Chester B Good, David M Cutler, Walid F Gellad, Natasha Parekh, and William H Shrank) * Seven Former FDA Commissioners: The **FDA Should Be An Independent Federal Agency** (Robert M Califf, Margaret Hamburg, Jane E Henney, David A Kessler, Mark McClellan, Andrew C von Eschenbach, and Frank Young) * It’s Still The Prices, Stupid: **Why The US Spends So Much On Health Care**, And A Tribute To Uwe Reinhardt (Gerard F Anderson, Peter Hussey, and Varduhi Petrosyan) * Characteristics And Spending Patterns Of **Persistently High-Cost Medicare Patients** (José F Figueroa, Xiner Zhou, and Ashish K Jha) * Top-Funded **Digital Health Companies** And Their Impact On **High-Burden, High-Cost Conditions** (Kyan Safavi, Simon C Mathews, David W Bates, E Ray Dorsey, and Adam B Cohen) * Homelessness Contributes To **Pregnancy Complications** (Robin E Clark, Linda Weinreb, Julie M Flahive, and Robert W Seifert) * Past **Frequent Emergency Department Use Predicts Mortality** (Matthew J Niedzwiecki, Hemal K Kanzaria, Juan Carlos Montoy, Renee Y Hsia, and Maria C Raven) * **‘Pain Behavior’**: What My Pain Treatment Got Wrong (Jonathan D Mayer) |

*BMJ Quality and Safety* online first articles

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| URL | <https://qualitysafety.bmj.com/content/early/recent> |
| Notes | *BMJ Quality and Safety* has published a number of ‘online first’ articles, including:   * Editorial: **Frailty and mortality**: ‘Same-same but Different’ (Sei J Lee) * Sentinel lymph node biopsy for **in situ melanoma** is unlikely in Australia (Rachael L Morton, John F Thompson) * Editorial: Remembering **individual perspectives and needs** in differentiated **HIV care** strategies (Sheree R Schwartz, Stefan Baral) * **Quality & safety in the literature**: January 2019 (Ashwin Gupta, Nathan Houchens, Jennifer Meddings) |

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

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| URL | <https://academic.oup.com/intqhc/advance-access> |
| Notes | *International Journal for Quality in Health Care* has published a number of ‘online first’ articles, including:   * Increasing **influenza immunization** rates among healthcare providers in an ambulatory-based, University Healthcare Setting (Pasquale G Frisina; Sara T Ingraffia; Tanesha R Brown; Esther N Munene; Jonathan R Pletcher; John Kolligian) * Translating **‘See-and-Treat’ to primary care**: opening the gates does not cause a flood (Carl Savage; Staffan Bjessmo; Oleg Borisenko; Henrik Larsson; Jacob Karlsson; Pamela Mazzocato) * A novel method to assess **data quality** in large **medical registries** and **databases** (Andreas Perren; Bernard Cerutti; Mark Kaufmann; Hans Ulrich Rothen; Swiss Society of Intensive Care Medicine) * Opportunities and challenges in Taiwan for implementing the **learning health system** (Chih Yuan Wu; Chih-Wei Huang; Hsuan-Chia Yang; Yu-Chuan (Jack) Li) * **Patient experience** on **self-management** support among primary care patients with **diabetes and hypertension** (Ming Tsuey Lim; Yvonne Mei Fong Lim; Xin Rou Teh; Yi Lin Lee; Siti Aminah Ismail; Sheamini Sivasampu) * Low effective coverage of **family planning and antenatal care** services in Ethiopia (Bereket Yakob; Anna Gage; Tsinuel Girma Nigatu; Sarah Hurlburt; Seifu Hagos; Girmaye Dinsa; Diana Bowser; P Berman; M E Kruk; E Tekle) * Reduction and follow-up of **hospital discharge letter delay** using Little’s law (Rodolfo Burruni; Beatrice Cuany; Massimo Valerio; P Jichlinski; G Kulik) * **High quality of care did not imply increased hospital spending**— nationwide cohort study among hip fracture patients (Pia Kjær Kristensen; Rikke Søgaard; Theis Muncholm Thillemann; Kjeld Søballe; Søren P Johnsen) * Evaluating the implementation and use of the **regional cancer plan** in Western Sweden through concept mapping (Frida Smith; Katrín Ásta Gunnarsdóttir; Anna Genell; Daniel McLinden; Lisa Vaughn; Hege Garelius; Herman Nilsson-Ehle; Ulf Lönqvist; Thomas Björk-Eriksson) * The equity paradox: older patients' participation in **patient portal development** (Gaby Anne Wildenbos; Monique Jaspers; Linda Peute) * Cost utility of fractional flow reserve-guided percutaneous coronary intervention in **multivessel coronary artery disease** in Brazil (Steffan Frosi Stella; Carísi Anne Polanczyk; Marjan Arvandi; Uwe Siebert) |

*Pennsylvania Patient Safety Advisory*

December 2018, Vol. 15, No. 4

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| URL | <http://patientsafety.pa.gov/ADVISORIES/Pages/201812_home.aspx> |
| Notes | The Pennsylvania Patient Safety Authority has published their latest *Pennsylvania Patient Safety Advisory*. Topics in this issue include:   * **MRI Screening**: What’s in Your Pocket? – Strict attention to magnetic resonance imaging (MRI) screening to prevent ferromagnetic objects and devices from reaching the MR scanner’s magnetic field is important for safe MRI. * **Perioperative Medication Errors**: Uncovering Risk from Behind the Drapes – Medication use in the perioperative setting presents unique patient safety challenges compared with other hospital settings. * Are You Ready to Respond? Reports of **High Harm Complications after Surgery and Invasive Procedures** – Surgery and other invasive procedures carry risk of complication and mortality, but recognizing and responding rapidly to such complications can improve patient outcomes. * From the Database: **Deaths after Ambulatory Surgery** – In the 10 years analyzed, the number of ASF cases increased annually, while the rate of reports involving death remained stable. * How Wet Is Your Patient’s Bed? Blood, Urine, and Microbiological **Contamination of Mattresses and Mattress Covers** – Body fluid and microbiological contamination can remain on, or within, mattresses and mattress covers after cleaning. To reduce this risk, joint initiatives to address inadequate mattress cover reprocessing and deficient inspection of mattresses and mattress covers may be needed. * **Safety Stories**: It Takes a Village – This recurring feature highlights, in these examples, how diverse people, with different roles, each contribute to making patient care safer. * **Why are Safety Stories Important?** – As providers, staff and leaders seek lifelong learning and ongoing improvement, and they can find valuable lessons in understanding “what went well.” |

**Online resources**

*Clinical Communiqué*

Volume 5 Issue 4, December 2018

<http://vifmcommuniques.org/clinical-communique-volume-5-issue-4-december-2018/>

This double issue of *Clinical Communiqué* reviews for of the issues (and lessons) covered through the year, and examines three paediatric cases on the theme of **doctor-patient communication**.

*[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 NG117 ***Bronchiectasis*** *(non-cystic fibrosis), acute exacerbation: antimicrobial prescribing* <https://www.nice.org.uk/guidance/ng117>
* NICE Guideline NG118 ***Renal and ureteric stones****: assessment and management* <https://www.nice.org.uk/guidance/ng118>

*[UK] Health matters: reducing health inequalities in mental illness*

<https://www.gov.uk/government/publications/health-matters-reducing-health-inequalities-in-mental-illness/health-matters-reducing-health-inequalities-in-mental-illness>

It has been recognised that people with severe and enduring mental illness are at greater risk of poor physical health and reduced life expectancy compared to the general population. This guidance examines actions that local authorities can take to reduce these health inequalities, so that people with mental illness can benefit from similar same health outcomes and life expectancy as the rest of the population. Actions that can be taken at the local level include:

* Understanding the local needs
* Addressing the social determinants of (poor) health
* Building stronger communities and social connections
* Ensuring early detection and intervention (recognition and response) for physical health risks
* Using every contact point to provide support
* Building a confident, competent and committed public mental health workforce.

*[UK] National Institute for Health Research*

https://discover.dc.nihr.ac.uk/portal/search/signals

The UK’s National Institute for Health Research (NIHR) Dissemination Centre has released the latest ‘Signals’ research summaries. This latest release includes:

* **Aspirin** did not prevent deaths or disability in **healthy older adults**
* The best dose of **aspirin** for **cardiovascular protection** may depend on body weight
* **Benzodiazepines** may increase length of stay and chance of **delirium in intensive care**
* Diet and exercise can reduce the risk of developing **diabetes during pregnancy**
* Complications following **hip or knee surgery** are more likely for people with long-term illness, but benefits are still worthwhile
* A total diet replacement programme helped **obese people** lose weight and keep weight off
* Robot-assisted arm training after **stroke** helps people regain some strength and independence
* Ways of **integrating care** that better coordinate services may benefit patients
* Paracetamol and alcohol are the most common **substances taken by young people** and rates of poisoning are increasing
* People with **COPD exacerbations** prefer early discharge then treatment at home.

**Disclaimer**

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