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

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**On the Radar**

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**Journal articles**

*Divided We Fall*

Rosenbaum L

New England Journal of Medicine. 2019;380(7):684-8.

*Cursed by Knowledge — Building a Culture of Psychological Safety*

Rosenbaum L

New England Journal of Medicine. 2019;380(8):786-90.

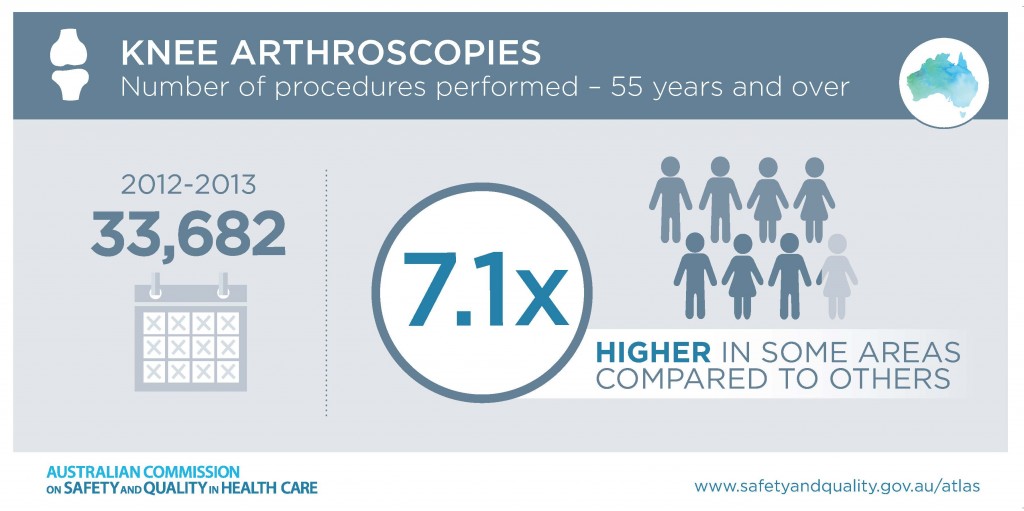
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| DOI | <https://doi.org/10.1056/NEJMms1813427>  <https://doi.org/10.1056/NEJMms1813429> |
| Notes | A pair of articles in the *New England Journal of Medicine* reflecting on the place and importance of teamwork in health care. Effective teamwork is not simply a matter of assembling teams but requires effort to allow teams to work together. The author picks out a number of salient issues, including the ‘tacit **permission to ask questions, acknowledge uncertainties**, and simply say, “I don’t know.”’ and the **shared sense of responsibility** that can enhance team care. |

*Selecting and optimising patients for total knee arthroplasty*

Adie S, Harris I, Chuan A, Lewis P, Naylor JM

Medical Journal of Australia. 2019;210(3):135-42.

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| DOI | <https://doi.org/10.5694/mja2.12109> |
| Notes | Australia has one of the higher rates of total knee arthroplasty (TKA) in the OECD. As the authors of this piece note, ‘It is not clear whether the Australian rate is inappropriately high or whether it reflects differences in populations, system capacity or methods of data capture.’ This narrative review considered ‘the clinical dilemmas of who should undergo TKA, and how best to optimise a patient for surgery so that the risks of surgery are minimised and recovery is facilitated’. The review suggests:   * The **minimum requirements** for TKA are **significant, prolonged symptoms** with supporting clinical and radiological signs. There is limited evidence for a specific symptom threshold that justifies surgery. * **Non‐operative treatments** including medications, exercise and weight loss are unlikely to reverse radiographic changes, but they **may improve symptoms** and **delay the need for surgery**. * Many **patient factors** such as mental health and obesity **affect** both the level of **symptomatic improvement** after surgery and **risks of surgery**, but none have been identified as contraindications for the procedure. * Although age and sex are associated with patient‐reported outcomes and risk of revision, these factors cannot be used to restrict access to TKA, and **age cut‐offs are not recommended**. * Evidence regarding **pre‐operative optimisation** of patients to improve post‐operative TKA outcomes is limited by the few interventional trials available. There is good evidence from randomised controlled trials that pre‐operative rehabilitation primarily focusing on exercises for the joint or limb has minimal effect on post‐operative TKA outcomes, and there is some evidence from randomised controlled trials that an intensive smoking cessation program before surgery may improve post‐operative outcomes. * Detailed international guidelines exist on the optimisation of the cardiorespiratory status of surgical patients, and these should be followed for TKA surgery. |

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

For information on the Commission’s work on variation, including the *Australian Atlas of Healthcare Variation* series, see <https://www.safetyandquality.gov.au/atlas/>

For information on the Commission’s work on clinical care standards, including the *Osteoarthritis of the Knee Clinical Care Standard*, see <https://www.safetyandquality.gov.au/our-work/clinical-care-standards/>

*Contribution of adverse events to death of hospitalised patients*

Haukland EC, Mevik K, von Plessen C, Nieder C, Vonen B

BMJ Open Quality. 2019;8(1):e000377.

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| DOI | <https://doi.org/10.1136/bmjoq-2018-000377> |
| Notes | The extent of adverse events or errors in hospital and their significance in terms of the mortality caused has been disputed. In recent years there have been claims that such mortality is a leading cause of death. This Norwegian study was a retrospective records review using the Global Trigger Tool to review a sample of 1680 patient records from a hospital trust with three hospitals. The authors report finding in their dataset that   * In **0.3% of hospital admissions**, **adverse events contribute to inpatient death** * **Patients who die in hospital have twice the rate of adverse events** per 1000 patient days compared with general patients, 76.7 vs 36.5 * Patients dying in hospital experience **seven times the rate of severe adverse events**, 38.4% vs 5.2% * For 86 out of 377 inpatient deaths studied, the adverse event is so severe that it contributes to death * **27.9% of severe adverse events** contributing to death **originate in primary care** * **Lower respiratory infections**, **medication harm** and **pressure ulcers** are significantly more frequent for inpatient deaths than in the general sample of hospital patients. |

*BMJ Quality and Safety*

March 2019 - Volume 28 - 3

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| URL | <https://qualitysafety.bmj.com/content/28/3> |
| 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: **From incident reporting to the analysis of the patient journey** (Patricia Trbovich, Charles Vincent) * Editorial: **Every patient should be enabled** to stop the line (Sigall K Bell, William Martinez) * Editorial: Engaging with theory: **from theoretically informed to theoretically informative improvement research** (Roman Kislov) * Connecting perspectives on quality and safety: **patient-level linkage of incident, adverse event and complaint data** (Marit S de Vos, Jaap F Hamming, Jolanda J C Chua-Hendriks, Perla J Marang-van de Mheen) * We want to know: patient comfort **speaking up about breakdowns in care and patient experience** (Kimberly A Fisher, Kelly M Smith, Thomas H Gallagher, Jim C Huang, James C Borton, Kathleen M Mazor) * Explaining organisational responses to a **board-level quality improvement intervention**: findings from an evaluation in six providers in the English National Health Service (Lorelei Jones, Linda Pomeroy, Glenn Robert, Susan Burnett, Janet E Anderson, Stephen Morris, E Capelas Barbosa, N J Fulop) * **Low-value care in Australian public hospitals**: prevalence and trends over time (Tim Badgery-Parker, Sallie-Anne Pearson, Kelsey Chalmers, Jonathan Brett, Ian A Scott, Susan Dunn, Neville Onley, Adam G Elshaug) * Facilitators of **interdepartmental quality improvement**: a mixed-methods analysis of a collaborative to improve **pediatric community-acquired pneumonia** management (JoAnna K Leyenaar, Christine B Andrews, Emily R Tyksinski, Eric Biondi, Kavita Parikh, Shawn Ralston) * Sicker patients account for the **weekend mortality effect** among adult **emergency admissions** to a large hospital trust (Jianxia Sun, Alan J Girling, Cassie Aldridge, Felicity Evison, Chris Beet, Amunpreet Boyal, Gavin Rudge, Richard J Lilford, Julian Bion) * **Artificial intelligence, bias and clinical safety** (Robert Challen, Joshua Denny, Martin Pitt, Luke Gompels, Tom Edwards, K Tsaneva-Atanasova) * Framing the challenges of **artificial intelligence in medicine** (Kun-Hsing Yu, Isaac S Kohane) * Redesigning care: adapting new improvement methods to achieve **person-centred care** (Onil Bhattacharyya, David Blumenthal, Roger Stoddard, Lynne Mansell, Kathryn Mossman, Eric C Schneider) * **Quality & safety in the literature**: March 2019 (Ashwin Gupta, Mark S Hausman, Jr., Nathan Houchens) |

*International Journal for Quality in Health Care*

Volume 31, Issue 1, February 2019

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| URL | <https://academic.oup.com/intqhc/issue/31/1> |
| 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 the *International Journal for Quality in Health Care* include:   * Editorial: **Healthcare quality-improvement and measurement strategies** and its challenges ahead (Usman Iqbal; Ayesha Humayun; Yu-Chuan (Jack) Li) * **Quality measurement in physician-staffed emergency medical services**: a systematic literature review (Helge Haugland; Oddvar Uleberg; Pål Klepstad; Andreas Krüger; Marius Rehn) * Dimensions of **service quality in healthcare**: a systematic review of literature (Iram Fatima; Ayesha Humayun; Usman Iqbal; Muhammad Shafiq) * The impact of **work-related stress on medication errors** in Eastern Region Saudi Arabia (Abdul Salam; David M Segal; Munir Ahmad Abu-Helalah; Mary Lou Gutierrez; Imran Joosub; Wasim Ahmed; R Bibi; E Clarke; A A Al Qarni) * The use of privacy-protected computer vision to measure the quality of **healthcare worker hand hygiene** (Sari Awwad; Sanjay Tarvade; Massimo Piccardi; David J Gattas) * Quality of care in six sub-Saharan Africa countries: a provider-based study on adherence to **WHO’s antenatal care guideline** (Patrick Opiyo Owili; Miriam Adoyo Muga; Bomar Rojas Mendez; Bradley Chen) * Development of a Provincial initiative to improve **glucose control in critically ill patients** (Peter Dodek; Shari McKeown; Eric Young; V Dhingra) * Improving the identification and treatment of **depression in low-income primary care clinics**: a qualitative study of providers in the VitalSign6 program (Farra Kahalnik; Katherine Sanchez; Afrida Faria; Bruce Grannemann; Manish Jha; Corey Tovian; E Will Clark; Sara Levinson; Ronny Pipes; Meaghan Pederson; Madhukar H Trivedi) * A positive legacy of trauma? A study on the impact of **natural disasters on medical utilization** (Usman Iqbal; Yu-Chuan Jack Li; Kung-pei Tang; Hui-Chen Chien; Ya-Ting Yang; Yi-Hsin Elsa Hsu) |

*Australian Journal of Primary Health*

Volume 25 Number 1 2019

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| URL | <http://www.publish.csiro.au/py/issue/9437> |
| 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:   * Emerging evidence of the value of **health assessments for Aboriginal and Torres Strait Islander people** in the primary healthcare setting (Jodie Bailie, Alison Laycock, Veronica Matthews, David Peiris and Ross Bailie) * The **Asylum Seeker Integrated Healthcare Pathway**: a collaborative approach to improving access to primary health care in South Eastern Melbourne, Victoria, Australia (I-Hao Cheng, Jacquie McBride, Miriam Decker, Therese Watson, Hannah Jakubenko and Alana Russo) * **Primary care experience of older Australians with chronic illness** (Carla Saunders, David Carter and James J Brown) * Prevalence of **chronic disease risk factors in 35- to 44-year-old humanitarian arrivals** to New South Wales (NSW), Australia (Meena Chandra, Anthea Duri and Mitchell Smith) * A mixed-methods retrospective study: 10 years of **diabetic retinopathy screening in urban Aboriginal and Torres Strait Islander primary care** (Clare Villalba, Deborah Askew, Anjali Jaiprakash, Jared Donovan, Jonathan Roberts, Anthony Russell, Ross Crawford and Noel Hayman) * Barriers and facilitators to implementing playlists as a **novel personalised music intervention in public healthcare settings** in New South Wales, Australia (Tara Dimopoulos-Bick, Kim E Clowes, Katie Conciatore, Maggie Haertsch, Raj Verma and Jean-Frederic Levesque) * Clients' perceptions of the therapeutic relationship in the treatment of **anorexia nervosa**: qualitative findings from an online questionnaire (Lucie M Ramjan and Sarah Fogarty) * Survey of **Maternal, Child and Family Health Nurses**' attitudes and practice relating to preconception health promotion (Karin Hammarberg and Leanne Taylor) * Preferences for rural specialist health care in the treatment of **Parkinson's disease**: exploring the role of **community-based nursing** specialists (Veronica Coady, Narelle Warren, Nancy Bilkhu and Darshini Ayton) * Distribution of **Australian private dental practices**: contributing underlining sociodemographics in the maldistribution of the dental workforce (Bree Graham, Marc Tennant, Yulia Shiikha and Estie Kruger) * Diagnosis and management of **chronic hip and knee pain** in a Tasmanian orthopaedic clinic: a study assessing the diagnostic and treatment planning decisions of an advanced scope physiotherapist (Dave Jovic, Jonathan Mulford, Kathryn Ogden and Nadia Zalucki) * Clinician perceptions of **My Health Record in mental health care**: medication management and sharing mental health information (Timothy C Kariotis and Keith M Harris) * Evaluating a **research capacity** strengthening program for **Aboriginal community-controlled health organisations** (Janet Stajic, Stephen Harfield, Alex Brown, Anna Dawson, C Davy, E Aromataris and A Braunack-Mayer) * **Engagement of primary care practice** in Australia: learnings from a diabetes care project (Rajna Ogrin, Tracy Aylen, T Rice, R Audehm and A Appannah) * Validating the **Short Form-12** and the development of disease-specific norms in a cohort of Australian private health insurance members (Michael R Le Grande, Graeme Tucker, Stephen Bunker and Alun C Jackson) |

*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:   * Use of a **maternal newborn audit and feedback system** in Ontario: a collective case study (Jessica Reszel, Sandra I Dunn, Ann E Sprague, Ian D Graham, Jeremy M Grimshaw, Wendy E Peterson, Holly Ockenden, Jodi Wilding, Ashley Quosdorf, Elizabeth K Darling, Deshayne B Fell, JoAnn Harrold, Andrea Lanes, Graeme N Smith, M Taljaard, D Weiss, M C Walker) |

**Online resources**

*[UK] Developing People – Improving Care*

<https://improvement.nhs.uk/resources/developing-people-improving-care/>

The UK’s NHS Improvement published the *Developing People – Improving Care framework* in 2016 to help NHS and social care staff to develop four critical capabilities: **systems leadership**; established **quality improvement methods**; inclusive and compassionate **leadership**; and **talent management**. They have now published further guidance on these capabilities. The site includes the framework, videos, webinars and the following guides:

* *Developing People – Improving Care: Leaders equipped to develop high quality local health and care systems in partnership*
* *Developing People – Improving Care: Compassionate, inclusive and effective leaders at all levels*
* *Developing People – Improving Care: Knowledge of improvement methods and how to use them at all levels*
* *Developing People – Improving Care: Support systems for learning at local, regional and national levels*
* *Developing People – Improving Care: Enabling, supportive and aligned regulation and oversight*

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