# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



## On the Radar

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#### This week's content

#### Books

Citizen Engagement in Health Casebook Canadian Institutes for Health Research

Ottawa: Canadian Institutes for Health Research, 2012. ISBN 978-1-100-20556-4.

	The Canadian Institutes of Health Research have published this collection of
	examples of various consumer/citizen engagement tools and methods that have
Notes	been used in hospitals, voluntary health organisations, and governments across
Notes	Canada.
	There are other resources, including a Citizen Engagement Handbook and a
	Framework for Engaging Citizens.
URL	http://www.cihr-irsc.gc.ca/e/43752.html

#### **Reports**

Using Electronic Health Records to Improve Quality and Efficiency: The Experiences of Leading Hospitals

Silow-Carroll S, Edwards JN, Rodin D

New York, NY. Commonwealth Fund, 2012.

Notes	A Commonwealth Fund issue brief reporting on a study of nine hospitals that implemented a comprehensive electronic health record (EHR) system. The brief
	'finds that clinical and administrative leaders built EHR adoption into their

	strategic plans to integrate inpatient and outpatient care and provide a continuum of coordinated services'.
	The authors report that 'successful implementation depended on: strong
	leadership, full involvement of clinical staff in design and implementation,
	mandatory staff training, and strict adherence to timeline and budget.
	The EHR systems facilitate <b>patient safety and quality improvement</b> through: use
	of checklists, alerts, and predictive tools; embedded clinical guidelines that
	promote standardized, evidence-based practices; electronic prescribing and
	test-ordering that reduces errors and redundancy; and discrete data fields that
	foster use of performance dashboards and compliance reports.
	Faster, more accurate communication and streamlined processes have led to
	improved patient flow, fewer duplicative tests, faster responses to patient inquiries,
	redeployment of transcription and claims staff, more complete capture of charges,
	and federal incentive payments.'
URL	http://www.commonwealthfund.org/Publications/Issue-Briefs/2012/Jul/Using-
UKL	EHRs-to-Improve-Quality-and-Efficiency.aspx

#### **Journal articles**

New standards in Ireland aim to improve safety and quality of health services Houston M BMJ 2012;344:e4506

http://dx.doi.org/10.1136/bmj.e4506

	News item in the BMJ on the launch by Ireland's Health Information and Quality
	Authority (HIQA) of <b>45 new national standards</b> to ensure service providers
	protect patients from risk and harm and inform them of adverse events. The new
	Standards take immediate effect and all services, including hospitals, general
	practices, and ambulance services, are expected to use them. They are a " <b>first step</b>
Notes	towards a licensing system for the Irish healthcare system", both public and
	private, and follow on from a number of high profile failures in the health system,
	most notably the investigation into system failures at Tallaght Hospital in Dublin.
	For more information, see: Health Information and Quality Authority, National
	standards for safer better healthcare. June 2012.
	www higa je/standards/health/safer-better-healthcare

For information on the Commission's work on the National Safety and Quality Health Service Standards (NSQHS Standards) and accreditation, see <a href="http://www.safetyandquality.gov.au/our-work/accreditation/">http://www.safetyandquality.gov.au/our-work/accreditation/</a>

MyHospitals infection data misleading Bryan A

MJA InSight 2 July 2012

DOI

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Notes	A discussion of two letters published this week in the MJA on the presentation of data about health care associated <i>Staphylococcus aureus</i> bacteraemia (HCA-SAB)	
	on the MyHospitals website.	
LIDI	http://www.mjainsight.com.au/view?post=MyHospitals+infection+data+misleading	
URL	&post_id=9817&cat=news-and-research	
1	copost_id=7017cccat-iicws-and-research	

Evaluation of the national Cleanyourhands campaign to reduce Staphylococcus aureus bacteraemia and Clostridium difficile infection in hospitals in England and Wales by improved hand hygiene: four year, prospective, ecological, interrupted time series study Stone SP, Fuller C, Savage J, Cookson B, Hayward A, Cooper B, et al. BMJ 2012;344:e3005

Notes	The Cleanyourhands campaign was rolled out to healthcare workers in all acute National Health Service (NHS) Trusts in England and Wales from December 2004. The campaign involved provision of alcohol hand rub at the bedside, distribution of posters reminding healthcare workers to clean their hands, regular audit and feedback of compliance, and provision of materials empowering patients to remind healthcare workers to clean their hands. Trusts were directed to order soap and alcohol hand rub through the central NHS supply agencies, where products standards could be maintained and procurement rates monitored. This study of data from 187 Trusts just published in the BMJ examines the effect of the campaign on rates of hospital procurement of alcohol hand rub and soap, trends in selected healthcare associated infections, and investigates the association between infections and procurement. It uses procurement as a proxy measure of hand hygiene compliance in the absence of that data.  Results showed a significant independent association between increasing soap procurement and falling <i>C difficile</i> infection rates throughout the study, and a strong association between increasing procurement of alcohol hand rub and falling rates of MRSA bacteraemia in the last year of the study
DOI	rates of MRSA bacteraemia in the last year of the study.
DOI	http://dx.doi.org/10.1136/bmj.e3005

Trends in Staphylococcus aureus bacteraemia and impacts of infection control practices including universal MRSA admission screening in a hospital in Scotland, 2006-2010: retrospective cohort study and time-series intervention analysis

Lawes T, Edwards B, López-Lozano J-M, Gould I BMJ Open 2012;2:e000797

		This articles reports the results of a retrospective cohort study conducted in a
		teaching hospital in north east Scotland to describe trends in Staphylococcus aureus
		bacteraemia (SAB) and assess the impacts of infection control practices, including
		universal methicillin-resistant Staphylococcus aureus (MRSA) admission
N	Notes	screening, on associated clinical burdens.
		The introduction of universal admission screening and antibiotic stewardship
		were associated with decreases in MRSA bacteraemia and associated early
		mortality, however, rates of methicillin-sensitive <i>Staphylococcus aureus</i> (MSSA)
		bacteraemia were not significantly affected by screening or antibiotic use.
Ι	OOI	http://dx.doi.org/10.1136/bmjopen-2011-000797
Ι	OOI	

For information on the Commission's work on healthcare associated infection, see <a href="http://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/">http://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/</a>

Pharmacist-Led Medication Review to Identify Medication-Related Problems in Older People Referred to an Aged Care Assessment Team: A Randomized Comparative Study Elliott RA, Martinac G, Campbell S, Thorn J, Woodward. MC Drugs & Aging 2012;29(7):593-605.

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Notes	Report on a Victorian study comparing three methods for facilitating a pharmacist-
	led comprehensive medication review for people referred to an Aged Care
	Assessment Team, and compare medication-related problems (MRP) identified via
	ACAT usual care with those identified via pharmacist-led medication reviews.
	The study was a prospective, randomized, comparative study involving 80
	community-dwelling patients (median age 84 years) referred to an ACAT in
	Melbourne.
	Twenty-one MRPs were identified via ACAT usual care.
	Pharmacist review of ACAT files identified a further 164 potential MRPs.
	The authors conclude that: ACAT assessments without pharmacist involvement
	detected fewer MRPs than any of the evaluated pharmacist-led medication review
	methods.
	ACAT-initiated pharmacist home medicines review was more effective than
	pharmacist review of routinely collected ACAT data, and more reliable and timely
	than referral to the patients' GP for a GP home medicines review.
DOI	http://dx.doi.org10.2165/11631730-0000000000000000000000000000000000

For information on the Commission's work on medication safety, see <a href="http://www.safetyandquality.gov.au/our-work/medication-safety/">http://www.safetyandquality.gov.au/our-work/medication-safety/</a>

### BMJ Quality and Safety online first articles

	BMJ Quality and Safety has published this 'online first' article:
Notes	Variation in safety culture dimensions within and between US and Swiss
Notes	Hospital Units: an exploratory study (René Schwendimann, Natalie
	Zimmermann, Kaspar Küng, Dietmar Ausserhofer, Bryan Sexton)
URL	http://qualitysafety.bmj.com/onlinefirst.dtl

International Journal for Quality in Health Care online first articles

	International Journal for Quality in Health Care has published this 'online first' articles:
Notes	Using a logic model to design and evaluate quality and patient safety
	improvement programs(C A Goeschel, W M Weiss, and P J Pronovost)
	http://intqhc.oxfordjournals.org/cgi/content/abstract/mzs029v1?papetoc

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