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AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

NATIONAL SAFETY AND QUALITY FRAMEWORK

The Australian Commission on Safety and Quality in Health Care has been tasked by Health Ministers to develop a National Safety and Quality Framework.

Following consultation with a wide range of stakeholders, including consumer organisations, general practice, allied health, public hospitals, private hospitals, private specialists' rooms, governments and other health organisations, a proposed National Safety and Quality Framework has been developed.

The proposed Framework is designed to guide action to improve the safety and quality of the care provided in all healthcare settings over the next decade. The core themes are that safe, high-quality care is always: patient focused, driven by information and organised for safety.

For more details please visit www.qualityhealthcareconversation.org.au.



ACCREDITATION

Significant progress has been achieved to date on phase one implementation of the new model of national safety and quality accreditation for health service organisations.

Draft National Safety and Quality Healthcare (NSQH) Standards have been developed by the Commission, focusing on areas that are essential to improving the safety and quality of care for patients.

The objective of the Standards is to provide an explicit statement of the expected level of safety and quality of care to be provided to patients by health service organisations and to provide a means of assessing performance.

The draft NSQH Standards have been developed in collaboration with experts, the Commission's Accreditation Implementation Reference Group and standing committees, jurisdictions and key stakeholders.

The draft NSQH Standards address:

- Governance for Safety and Quality in Health Service Organisations
- Healthcare Associated Infection
- Medication Safety
- Patient Id and Procedure Matching

A process of public consultation on the draft Standards will commence in October 2009. Piloting of the draft Standards across the range of healthcare settings, where they will be applied, will be undertaken prior to any implementation.

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Please feel free to forward this newsletter to others who may be interested in Commission activities. If this newsletter was forwarded to you by someone else and you would like to receive future issues directly, please contact Amy Winter at the Australian Commission on Safety and Quality in Health Care: (02) 9263 3605 or amy.winter@safetyandquality.gov.au. If you do not wish to receive future issues, please let us know.

AUSTRALIAN CLINICAL QUALITY REGISTRIES

The Commission has collaborated with the NHMRC Centre for Research Excellence in Patient Safety at Monash University (CREPS) and the National E-Health Transition Authority (NEHTA) to develop draft Operating Principles and Technical Standards for Australian Clinical Quality Registries. Projects to test and validate the draft Principles were selected by open tender and are scheduled to operate until November 2009.

The testing projects are:

- Australasian Rehabilitation Outcomes Centre
- Australian Cardiac Procedures Registry
- Australian Stroke Registry
- Bi-national Burns Registry
- National Breast Cancer Audit
- Neck of Femur Fracture Registry of Australia.

The Commission convened a workshop on Australian Clinical Quality Registries during the AAQHC conference. Presented by a panel including Dr. Niall Johnson, Professor Stephen Graves, Professor Peter Cameron and Dr. Sue Evans, the workshop provided an opportunity to discuss issues around clinical quality registries with some of the leading practitioners.

FALLS PREVENTION GUIDELINES

The Commission is developing new national falls prevention guidelines to reduce the risk of older people falling during care and to minimise the harm they experience from falls. *Preventing Falls and Harm from Falls in Older People: Best Practice Guidelines for Australian Hospitals, Residential Aged Care Facilities and Community Care 2009*, is expected to be available in October 2009.

Three guidelines will separately address the main care settings; hospital, residential aged facilities and community with information and recommendations tailored for each setting. In addition, three guidebooks, smaller versions of the guidelines, will be made available for front line health professionals providing care to older people at risk of falling and wanting the key information from the larger guidelines. The guidelines will be available from the Commission web site.

RECOGNISING AND RESPONDING TO CLINICAL DETERIORATION

1. National Consensus Statement

The Commission is currently seeking written submissions on the development of a Consensus Statement setting out the essential elements required for effectively recognising and responding to clinical deterioration. The consultation paper containing the draft statement, along with details on how to provide a submission, is available from the Commission web site on the Recognising and Responding to Clinical Deterioration program page. Responses are welcome until 25 September 2009.

Feedback from the consultation process will inform the final draft of the statement that will be submitted to Health Ministers in early 2010.

2. National Workshop on the Deteriorating Patient

The Commission will be convening a national workshop with the NSW Clinical Excellence Commission on 10 November 2009 on the identification and management of deteriorating patients.

The workshop will showcase current approaches and practical solutions to the challenge of implementing systems and tools that identify patients who deteriorate in hospital in order to effectively manage their care.

The workshop will be held at the Sydney Masonic Centre and registration is now open. For further information please visit the Recognising and Responding to Clinical Deterioration program page on the Commission web site.

3. Evidence-based Adult General Observation Chart

The Commission is working in partnership with Queensland Health and the University of Queensland to undertake a research project to provide new knowledge about the design and use of observation charts that will assist staff to better identify clinical deterioration.

Over 45 charts from across Australia have been collected and analysed by the research team. Health professionals will soon be invited to participate in an online survey to gauge opinions on aspects of chart design and to evaluate a selection of existing observation charts.

Further information on any of these projects can be found on the Commission's web site.

OPEN DISCLOSURE

The objective of the Commission's Open Disclosure program is to support jurisdictions, facilities and clinicians to implement the National Open Disclosure Standard, by undertaking the activities which are essential to the implementation of the standard and which can most effectively be undertaken at the national level.

The major strands of current work on Open Disclosure being conducted by the Commission were endorsed by Australian Health Ministers on 18 April 2008. They include:

- Obtaining expert legal advice on achieving a consistent national approach which best enables, by qualified privilege or other legislative protection, to fully investigate an adverse event; share information with patients, families and carers about care that caused harm; and express regret or apologise.
- Exploring one hundred patients' experiences of Open Disclosure, and using the information obtained to develop survey instruments to measure the effectiveness of Open Disclosure, as perceived by patients and healthcare staff, as well as valid indicators of effective Open Disclosure.

THE AUSTRALIAN CHARTER OF HEALTHCARE RIGHTS

Australian Health Ministers adopted the Australian Charter of Healthcare Rights for use in Australia in July 2008.

The Charter specifies the key rights of patients and consumers when seeking or receiving healthcare services and was developed by the Commission following an extensive national consultation process.

To assist small and large health service organisations embed the Charter in their organisation, the Commission has developed a tool kit flexible enough to be used across the range of healthcare delivery settings.

The tool kit content is available for download on the Commission's website and includes:

- the Charter and all supporting documents in editable formats, including design files for re-branding with organisation logos and colour schemes
- selected Charter documents translated into community languages and audio
- an implementation guide outlining ways in which health service organisations can provide information about health rights and incorporate the Charter in their systems
- a PowerPoint presentation template to support the education of healthcare staff on the Charter.

Public hospitals and health services will need to ensure that any actions they take to change their existing charter are consistent with decisions that have been made by their State or Territory Health Department regarding use of the Australian Charter of Healthcare Rights.

MEDICATION SAFETY

Working with other organisations and professions involved in national medication safety and quality, the Commission completed a National Medication Safety and Quality Scoping Study in 2009 which identified a range of activities to improve patient safety and the quality of health outcomes. The Scoping Study's 45 recommendations will guide the Commission's work in medications.

The Commission is responsible for national version control of the National Inpatient Medication Chart (NIMC), and a range of related initiatives including specialist versions of the NIMC (for example, long-stay and paediatric versions), support materials (user guidelines and guidelines for local management) and ancillary documents (such as the *National Terminology, Abbreviations and Symbols for use in Prescribing and Administering Medicine in Australian Hospitals*). All of these are freely available on the Commission web site.

The Commission works with other organisations to improve patient safety in areas of known risk or where practice can be improved. For example, the Commission is developing national labelling recommendations for parenteral medicines with the assistance of the NSW Therapeutic Advisory Group (with completion in April 2010). This will reduce the risk of harm from poorly labelled parenteral medicines.

The Commission is extending the National Health and Medical Research Council's Venous Thromboembolism (VTE) Prevention Program from public hospitals into private hospitals. This will improve the rate of appropriate VTE prophylaxis prescribing for at risk patients and provide advice to other private hospitals on integrating best practice into standard practice.

NATIONAL CLINICAL HANDOVER INITIATIVE

The Commission's National Clinical Handover Initiative aims to improve handover communication across all healthcare settings. The Initiative funded 14 pilot projects to develop practical and transferable tools and solutions for improving clinical handover. Finalised tools, solutions and reports from the pilot projects will be made freely available, including:

- protocols for improving medical and nursing shift-to-shift handover
- materials on using the briefing techniques (SBAR, ISBAR, ISOBAR, SHARED) at handover
- tools to help clinicians redesign their own handover practices
- online education modules
- tools for handover from an aged care facility to hospital and for inter-hospital transfers
- materials on team communication.

In March 2009, the Consultation Edition of the OSSIE Guide to Clinical Handover Improvement was released. The OSSIE Guide aims to assist clinician-leaders and managers to design, implement, evaluate and maintain clinical handover improvement. A finalised edition which incorporates feedback from a consultation period will be released late 2009.

To download the OSSIE Guide, tools and resources developed by the pilot projects, or to learn about upcoming events, please visit the Commission web site.

SAFE E-PRESCRIBING AND ELECTRONIC MEDICATION MANAGEMENT

There is a need for a comprehensive, best-practice standard set of safe procurement and implementation guidelines for facilities and areas or states moving toward ePrescribing and electronic medication management (EMM). It is assumed and supported that electronic prescribing in hospitals can improve safety and quality. At the same time, however, there is potential to increase harm through poorly designed or implemented systems in hospitals.

It is important that tools are developed to ensure that EMM systems are implemented safely, and that their use optimises both safety and quality of care in the hospital environment. This work is a collaboration between National E-Health Transition Authority (NEHTA) and the Commission.

The Commission will be developing the following guidelines:

- user requirements and procurement guide for hospital ePrescribing and electronic medication management (EMM) systems
- an implementation toolkit for ePrescribing and EMM in hospitals, including safe ePrescribing and EMM practice.

Consideration is also being given to the development of a standard optimal user interface which builds on the National Inpatient Medication Chart, as well as the national standard terms, abbreviations and units.

AN UPDATE ON THE NATIONAL HAND HYGIENE INITIATIVE

The National Hand Hygiene initiative has commenced in almost all states and territories and the private sector. The following resources have been provided:

- a manual has been adapted for Australia from the WHO Guidelines on clean hands
- workshops on the 5 moments of hand hygiene have been attended by over 530 healthcare workers
- over 1000 DVDs for training auditors of hand hygiene compliance have been distributed
- a website with access to the educational resources has received over 30,000 hits from Australia
- an online learning package on hand hygiene has been undertaken by over 13,000 healthcare workers. In some hospitals and regions (including the private hospital sector), all healthcare workers are expected to complete the package prior to commencement of employment.