



## On the Radar

Issue 437

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### On the Radar

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Contributors: Niall Johnson, Kate Reynolds

### **National Safety and Quality Health Service Standards: User guide for the review of clinical variation in health care – Consultation Draft**

<https://www.safetyandquality.gov.au/standards/nsqhs-standards/implementation-nsqhs-standards/nsqhs-standards-updates-and-consultations>

Australian Commission on Safety and Quality in Health Care  
Sydney: ACSQHC; 2019.

The Commission examines variation in the *Australian Atlas of Healthcare Variation* series [www.safetyandquality.gov.au/publications-and-resources/australian-atlas-healthcare-variation-series](http://www.safetyandquality.gov.au/publications-and-resources/australian-atlas-healthcare-variation-series)

The Commission has produced a consultation draft of the *User Guide for the Review of Clinical Variation in Health Care* to support health service organisations implement a new action in the NSQHS standards, second edition. The new Action (1.28) is part of the Governance Standard, and includes monitoring and investigating data on clinical variation to improve clinical practice. The Guide includes practical advice and case studies to show some of the different ways that health service organisations may implement Action 1.28.

Feedback on the consultation draft of the Guide will be accepted until **31 October 2019**.

## Books

*Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health*  
 National Academies of Sciences, Engineering, and Medicine  
 Washington, DC: The National Academies Press; 2019.

DOI	<a href="https://doi.org/10.17226/25467">https://doi.org/10.17226/25467</a>
Notes	<p>This report examines the potential for integrating services addressing social needs and the social determinants of health into the delivery of health care to achieve better health outcomes. The report assesses approaches to social care integration currently being taken by health care providers and systems, and new or emerging approaches and opportunities; current roles in such integration by different disciplines and organizations, and new or emerging roles and types of providers; and current and emerging efforts to design health care systems to improve health and reduce health inequities.</p> <p>The report identifies five goals to better integrate social care into health care, which may in turn result in improved health and reduced health disparities. The goals are to:</p> <ol style="list-style-type: none"> <li>1. Design health care delivery to integrate social care into health care, guided by the five health care system activities—awareness, adjustment, assistance, alignment, and advocacy.</li> <li>2. Build a workforce to integrate social care into health care delivery.</li> <li>3. Develop a digital infrastructure that is interoperable between health care and social care organizations.</li> <li>4. Finance the integration of health care and social care.</li> <li>5. Fund, conduct, and translate research and evaluation on the effectiveness and implementation of social care practices in health care settings.</li> </ol>

## Reports

*Guide to health privacy*  
 Office of the Australian Information Commissioner  
 Sydney: Office of the Australian Information Commissioner; 2019. p. 65.

URL	<a href="https://www.oaic.gov.au/privacy/guidance-and-advice/guide-to-health-privacy">https://www.oaic.gov.au/privacy/guidance-and-advice/guide-to-health-privacy</a>
Notes	<p>The Office of the Australian Information Commissioner (OAIC) has released this guide to assist health services providers — from doctors and private sector hospitals, through to allied health professionals, pharmacists, childcare centres and gyms — understand their obligations under the <i>Privacy Act 1988</i>, and embed good privacy in their practice.</p> <p>The guide outlines the key practical steps that health service providers should take to embed good privacy in their practice. In addition, the guide outlines how key privacy obligations apply to and operate in the healthcare context. The OAIC suggests that by taking these key practical steps and understanding privacy obligations will enable health providers to identify and implement practices that reduce privacy risk and generate public trust in the handling of individuals' health information.</p>

*Towards value based healthcare: Lessons learnt from implementing outcomes measures*

Deeble Institute Perspectives Brief No. 5

Saunders C, Millar L, Ives A, Slavova-Azmanova N, Bellgard M, Codde J

Canberra: Australian Healthcare and Hospitals Association; 2019. p. 11.

URL	<a href="https://ahha.asn.au/deeble-institute-perspective-briefs">https://ahha.asn.au/deeble-institute-perspective-briefs</a>
Notes	This brief from the Australian Healthcare and Hospitals Association's Deeble Institute looks at value based healthcare through the experience of the first 18 months of the Continuous Improvement in Care – Cancer (CIC Cancer) Project in Western Australia. This project seeks to bring value-based healthcare principles to cancer management in private and public healthcare settings in Western Australia. The project is combining clinical information with Patient Reported Outcome Measures (PROMs) to feedback in clinical management, determine needs and enable services to assess and improve practice. The authors give their understandings and 'key learnings' in planning and governance, engagement and expectation management, data issues and information technology systems.

For information on the Commission's work on patient reported outcome measures (PROMS), see

<https://www.safetyandquality.gov.au/our-work/indicators-measurement-and-reporting/patient-reported-outcome-measures>

*Providers deliver: better care for patients and service users*

NHS Providers

London: NHS Providers

URL	<a href="http://nhsproviders.org/providers-deliver">http://nhsproviders.org/providers-deliver</a>
Notes	This online report from NHS Providers in the UK considers the leadership approaches and frontline initiatives that underpin improvements in quality. Using a series of 11 case study 'conversations', it considers some of the frontline work that has contributed to trusts' improvements in their care rating by the UK's Care Quality Commission. Issues that the case studies highlight include effective staff engagement, learning organisational cultures, visible and approachable leadership and the value of monitoring and acting on data. The report also explores the role of trust leaders in providing an enabling, supportive environment in which this work has been possible.

*Developing allied health professional leaders: an interactive guide for clinicians and trust boards*

NHS Improvement

London: NHS England; 2019.

URL	<a href="https://improvement.nhs.uk/resources/developing-allied-health-professional-leaders-guide">https://improvement.nhs.uk/resources/developing-allied-health-professional-leaders-guide</a>
Notes	Interactive guidance (PDF file) from the UK's NHS Improvement that describes professional development opportunities and possibilities to help allied health professionals (AHPs) lead at various levels. It describes the common features of the AHP leadership journey, by combining insights and evidence from trust executives and chief AHPs. Its primary audience is aspiring AHP leaders and those with responsibility for developing the AHP workforce.

*The Heavy Burden of Obesity: The Economics of Prevention*  
 OECD Health Policy Studies  
 OECD  
 Paris: OECD Publishing; 2019.

*Time to Solve Childhood Obesity*  
 An Independent Report by the Chief Medical Officer, 2019  
 Davies SC  
 London: Department of Health & Social Care; 2019.

URL	<a href="https://doi.org/10.1787/67450d67-en">https://doi.org/10.1787/67450d67-en</a> <a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/837907/cmo-special-report-childhood-obesity-october-2019.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/837907/cmo-special-report-childhood-obesity-october-2019.pdf</a>
Notes	A pair of reports marking World Obesity Day, one from the OECD and the other from the UK's Chief Medical Officer. The OCED's 240-page report (a summary is also available) analyses the burden of obesity and overweight in 52 countries (including OECD, European Union and G20 countries), showing how overweight reduces life expectancy, increases healthcare costs, decreases workers' productivity and lowers GDP. The report makes the urgent economic case to scale up investments in policies to promote healthy lifestyles and tackle this growing global public health problem. The book evaluates a number of policies that could significantly improve health outcomes while being an excellent investment for countries. The UK CMO's 96-page report calls for action across industry and the public sector to help the government reach its target of halving childhood obesity by 2030. It sets out a range of recommendations for the government, supported by 10 principles.

## Journal articles

*Drivers of preventable high health care utilization: a qualitative study of patient, physician and health system leader perspectives*  
 Das LT, Kaushal R, Garrison K, Carrillo V, Grinspan Z, Theis R, et al  
 Journal of Health Services Research & Policy. 2019 [epub].

DOI	<a href="https://doi.org/10.1177/1355819619873685">https://doi.org/10.1177/1355819619873685</a>
Notes	It is reasonably well known that a small proportion of patients need a high level of care. According to the authors of this piece, '5% of the population has high health care utilization accounting for nearly 50% of health care costs' in the USA with some proportion of this considered preventable and a potential cost saving. This piece reports of a qualitative study based on interviews of health system leaders and focus groups of high-need, high-cost (HNHC) patients, caregivers and physicians. The authors identified three key drivers of preventable high health care utilization: <ol style="list-style-type: none"> <li>1. <b>unmet behavioural health needs</b></li> <li>2. <b>socio-economic determinants</b> of health and</li> <li>3. challenges associated with <b>accessing health care</b> delivery systems.</li> </ol> They suggest that reducing preventable health care utilisation in this population requires increased access to mental-health resources, support for patients with low socio-economic resources and systemic changes that reduce wait times for primary care visits and allow providers more time during patient visits.

*How to improve healthcare improvement—an essay by Mary Dixon-Woods*  
 Dixon-Woods M  
 BMJ. 2019;367:l5514.

DOI	<a href="https://doi.org/10.1136/bmj.l5514">https://doi.org/10.1136/bmj.l5514</a>
Notes	<p>Improving care is a vital and continuing activity but it needs, as Mary Dixon-Woods sets out in this piece, an evidence base and sound evaluation. Improvement (and implementation) need to be studied to improve the evidence and to explore ‘questions beyond effectiveness alone, and in particular showing the need to establish improvement as a collective endeavour that can benefit from professional leadership.’</p> <p>Observations in this piece include:</p> <ul style="list-style-type: none"> <li>• problems in the quality and safety of healthcare are merely described, even “admired,” rather than fixed; the effort invested in collecting information (which is essential) is not matched by effort in making improvement</li> <li>• There is no dispute about the preconditions for high quality, safe care: funding, staff, training, buildings, equipment, and other infrastructure. But quality health services depend not just on structures but on processes. Optimising the use of available resources requires continuous improvement of healthcare processes and systems.</li> <li>• Wanting to improve is not the same as knowing how to do it.</li> <li>• QI has been advocated in healthcare for over 30 years... Yet the question, “Does quality improvement actually improve quality?” remains surprisingly difficult to answer. The evidence for the benefits of QI is mixed and generally of poor quality. It is important to resolve this unsatisfactory situation. That will require doing more to bring together the practice and the study of improvement, using research to improve improvement, and thinking beyond effectiveness when considering the study and practice of improvement.</li> <li>• we must interrogate how problems of quality and safety are identified, defined, and selected for attention by whom, through which power structures, and with what consequences</li> </ul>

*Pay for performance for hospitals*

Mathes T, Pieper D, Morche J, Polus S, Jaschinski T, Eikermann M  
 Cochrane Database of Systematic Reviews. 2019;(7):Art. No.: CD011156.

DOI	<a href="https://doi.org/10.1002/14651858.CD011156.pub2">https://doi.org/10.1002/14651858.CD011156.pub2</a>
Notes	<p>This Cochrane Review sought to examine the evidence of assess the impact of pay for performance (P4P) for in-hospital delivered health care on the quality of care, resource use and equity. Examining 27 studies on six different P4P programs the authors found that most studies showed no difference or a very small effect in favour of the P4P program. The authors report that ‘It is <b>uncertain whether P4P</b>, compared to capitation-based payments without P4P for hospitals, <b>has an impact on patient outcomes, quality of care, equity or resource use</b> as the certainty of the evidence was very low (or we found no studies on the outcome) for all P4P programs. The effects on patient outcomes of P4P in hospitals were at most small, regardless of design factors and context/setting. It seems that with additional payments only small short-term but non-sustainable effects can be achieved. Non-payments seem to be slightly more effective than bonuses and payments for quality attainment seem to be slightly more effective than payments for quality improvement.’</p>

*Waste in the US Health Care System: Estimated Costs and Potential for Savings*  
 Shrank WH, Rogstad TL, Parekh N  
 JAMA. 2019;322(15):1501-1509.

*Waste in the US Health Care System*  
 Bauchner H, Fontanarosa PB  
 JAMA. 2019;322(15):1463-1464.

*Elusive Waste: The Fermi Paradox in US Health Care*  
 Berwick DM  
 JAMA. 2019;322(15):1458-1459.

*Toward Evidence-Based Policy Making to Reduce Wasteful Health Care Spending*  
 Joynt Maddox KE, McClellan MB  
 JAMA. 2019;322(15):1460-1462.

*Eliminating Wasteful Health Care Spending—Is the United States Simply Spinning Its Wheels?*  
 Figueroa JF, Wadhwa RK, Jha AK  
 JAMA Cardiology. 2019.

*Waste in the US Health Care System—Insights For Vision Health*  
 Lum F, Lee P  
 JAMA Ophthalmology. 2019.

DOI	Shrank et al <a href="https://doi.org/10.1001/jama.2019.13978">https://doi.org/10.1001/jama.2019.13978</a> Bauchner and Fontanarosa <a href="https://doi.org/10.1001/jama.2019.15353">https://doi.org/10.1001/jama.2019.15353</a> Berwick <a href="https://doi.org/10.1001/jama.2019.14610">https://doi.org/10.1001/jama.2019.14610</a> Joynt Maddox and McClellan <a href="https://doi.org/10.1001/jama.2019.13977">https://doi.org/10.1001/jama.2019.13977</a> Figueroa et al <a href="https://doi.org/10.1001/jamacardio.2019.4339">https://doi.org/10.1001/jamacardio.2019.4339</a> Lum and Lee <a href="https://doi.org/10.1001/jamaophthalmol.2019.4647">https://doi.org/10.1001/jamaophthalmol.2019.4647</a>
Notes	<p>A series of pieces across JAMA journals on the topic of waste in health care. A few years ago, a figure of 30% (or greater) waste in US health care was widely reported. Shrank et al report in their ‘Special Communication’ on a review of 54 sources that gave 71 estimates of waste in 6 “waste domains” (failure of care delivery, failure of care coordination, overtreatment or low-value care, pricing failure, fraud and abuse, and administrative complexity.) They gave an <b>‘estimated cost of waste in the US health care system ranged from \$760 billion to \$935 billion</b>, accounting for approximately <b>25% of total health care spending</b>, and the <b>projected potential savings</b> from interventions that reduce waste, excluding savings from administrative complexity, ranged from <b>\$191 billion to \$282 billion</b>, representing a potential 25% reduction in the total cost of waste.’</p> <p>The additional items (and related audio and video content at the JAMA sites) offer a number of editorials/opinion/reflections on this figure and the implications. The main editorial from Bauchner and Fontanarosa summarise the paper (as do Figueroa et al in <i>JAMA Cardiology</i>) and introduce some of the other pieces. Berwick considers some of the possible explanations as to why there seems to be a lack of action on reducing this waste and how change may be difficult. Joynt Maddox and McClellan focus on the clinical waste domains (failure of care delivery, failure of care coordination, overtreatment or low-value care) and examine some of the evidence-based approaches to addressing these issues, including how they have not necessarily led to the changes (yet?) that had been envisaged. Lum and Lee reflect on how some of the issues play out in vision health, perhaps particularly so in ophthalmology.</p>

URL	<a href="https://www.publish.csiro.au/ah/issue/9369">https://www.publish.csiro.au/ah/issue/9369</a>
Notes	<p>A new issue of <i>Australian Health Review</i> has been published. Articles in this issue of <i>Australian Health Review</i> include:</p> <ul style="list-style-type: none"> <li>• <b>Value-based healthcare</b> – meeting the evolving needs of our population (Sally Lewis)</li> <li>• ‘We can work together, talk together’: an <b>Aboriginal Health Care Home</b> (Greg Smith, Renae Kirkham, C Gunabarra, V Bokmakarray and C P Burgess)</li> <li>• <b>Shared decision making implementation</b>: a case study analysis to increase uptake in New South Wales (Tara Dimopoulos-Bick, Regina Osten, Chris Shipway, Lyndal Trevena and Tammy Hoffmann)</li> <li>• Making sense of <b>paying for performance in health care</b>: short-term targets versus patient-relevant outcomes (Stephen Jan)</li> <li>• <b>Performance-based pharmacy payment models</b>: the case for change (John Jackson and Ben Urick)</li> <li>• Are the <b>benefits of new health services</b> greater than their opportunity costs? (Laura Edney, Hossein Haji Ali Afzali and Jonathan Karnon)</li> <li>• Cost of <b>vascular access devices</b> in public hospitals in Queensland (Haitham W. Tuffaha, Nicole Marsh, Joshua Byrnes, Nicole Gavin, Joan Webster, Marie Cooke and Claire M Rickard)</li> <li>• Costs and consequences of an intervention-based program to reduce <b>hospital-acquired pressure injuries</b> in one health district in Australia (Michelle Barakat-Johnson, Michelle Lai, Timothy Wand, Kathryn White and Richard De Abreu Lourenco)</li> <li>• <b>Robotic colorectal surgery</b> in Australia: a cohort study examining clinical outcomes and cost (Bruce Wilkie, Zara Summers, Richard Hiscock, Nilmini Wickramasinghe, Satish Warriar and Philip Smart)</li> <li>• Simulation of <b>health care and related costs in people with dementia</b> in Australia (Lachlan Standfield, Tracy Comans and Paul A Scuffham)</li> <li>• <b>Shoulder pain</b> cost-of-illness in patients referred for public orthopaedic care in Australia (Darryn Marks, Tracy Comans, Leanne Bisset, Michael Thomas and Paul A Scuffham)</li> <li>• National cost savings from an ambulatory program for <b>low-risk febrile neutropenia patients</b> in Australia (Michelle Tew, Daniel Forster, Benjamin W Teh and Kim Dalziel)</li> <li>• <b>Cost of maternity care</b> to public hospitals: a first 1000-days perspective from Queensland (Emily J Callander, Jennifer Fenwick, Roslyn Donnellan-Fernandez, Jocelyn Toohill, D K Creedy, J Gamble, H Fox and D Ellwood)</li> <li>• Model for <b>integrated care for chronic disease</b> in the Australian context: Western Sydney Integrated Care Program (N Wah Cheung, Michael Crampton, Victoria Nesire, Tien-Ming Hng, Clara K. Chow and on behalf of the Western Sydney Integrated Care Program Investigators)</li> <li>• Emerging role of the Australian private health insurance sector in providing <b>chronic disease management programs</b>: current activities, challenges and constraints (Joanna Khoo, Helen Hasan and Kathy Eagar)</li> <li>• <b>End-of-life care in hospital</b>: an audit of care against Australian national guidelines (Melissa J Bloomer, Alison M Hutchinson and Mari Botti)</li> <li>• <b>Therapeutic equivalence program</b>: continued economic benefits in the context of rising costs and increased demand (I Chynoweth and I Larmour)</li> </ul>

	<ul style="list-style-type: none"> <li>• Multicriteria decision analysis (MCDA) for <b>health technology assessment</b>: the Queensland Health experience (Sarah Howard, Ian A Scott, Hong Ju, Liam McQueen and Paul A Scuffham)</li> </ul>
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URL	<a href="https://www.publish.csiro.au/py/issue/9443">https://www.publish.csiro.au/py/issue/9443</a>
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"> <li>• Understanding the knowledge, attitudes and practices of providing and receiving <b>nutrition care for prediabetes</b>: an integrative review (Mari Somerville, Lauren Ball, Eva Sierra-Silvestre and Lauren T Williams)</li> <li>• Thinking outside the system: the <b>integrated care experience</b> in Queensland, Australia (Linda Mundy and Kaye Hewson)</li> <li>• <b>Improving child immunisation rates</b> in a disadvantaged community in New South Wales, Australia: a process evaluation for research translation (Susan Thomas, Helen Higgins, Julie Leask, Lisa Menning, Katrine Habersaat, Peter Massey, Kathryn Taylor, Patrick Cashman and David N. Durrheim)</li> <li>• Addressing <b>disparities in oral disease</b> in Aboriginal people in Victoria: where to focus preventive programs (Jacqueline M. Martin-Kerry, Martin Whelan, John Rogers, Anil Raichur, Deborah Cole and Andrea M de Silva)</li> <li>• Western Bulldogs Sons of the West Program ripple effects: <b>building community capacity</b> (Lucio Naccarella, David Pickering-Gummer, Dimity Gannon, Catherine Dell'Aquila, Alyssa Huxtable and Kieran Keane)</li> <li>• Management or missed opportunity? <b>Mental health care planning in Australian general practice</b> (Michelle Banfield, Louise M Farrer and Christopher Harrison)</li> <li>• Exploring <b>nurse navigators'</b> contribution to <b>integrated care</b>: a qualitative study (Clare Hannan-Jones, Charlotte Young, Geoffrey Mitchell and A Mutch)</li> <li>• An evaluation of general practice nurses' knowledge of <b>chronic kidney disease risk factors and screening practices</b> following completion of a case study-based asynchronous e-learning module (Peter M Sinclair, Ashley Kable, Tracy Levett-Jones, Carl Holder and Christopher J Oldmeadow)</li> <li>• <b>Men's preconception health care</b> in Australian general practice: GPs' knowledge, attitudes and behaviours (Kirsten Hogg, Taletha Rizio, Ramesh Manocha, Robert I McLachlan and Karin Hammarberg)</li> <li>• <b>Chronic disease management and dementia</b>: a qualitative study of knowledge and needs of staff (Chelsea Baird, Marta H Woolford, Carmel Young, Margaret Winbolt and Joseph Ibrahim)</li> <li>• Experiences of <b>registered nurses in a general practice-based new graduate program</b>: a qualitative study (Susan McInnes, Elizabeth Halcomb, Karen Huckel and Christine Ashley)</li> <li>• 'I'm never going to change unless someone tells me I need to': fostering <b>feedback dialogue between general practice supervisors and registrars</b> (Bianca Denny, James Brown, Catherine Kirby, Belinda Garth, Janice Chesters and Debra Nestel)</li> <li>• 'We are not invincible!': a qualitative study of <b>self-care practices by Australian general practice registrars</b> (Nadia Khan and Tim Usherwood)</li> </ul>



URL	<a href="https://bmjleader.bmj.com/content/3/3">https://bmjleader.bmj.com/content/3/3</a>
Notes	<p>A new issue of <i>BMJ Leader</i> has been published. Articles in this issue of <i>BMJ Leader</i> include:</p> <ul style="list-style-type: none"> <li>• <b>Leadership</b> in the spotlight (Christine Blanshard)</li> <li>• <b>Professionalism and leadership in medical education:</b> how do they differ and how are they related? (Louise Jessica Hardy, Hilary Neve)</li> <li>• Do surgeon non-technical skills correlate with teamwork-related outcomes during <b>robot-assisted surgery</b>? (Youseff Ahmed, Zaeem Lone, Ahmed A Hussein, Yingdong Feng, Hijab Khan, Sierra Broad, Renuka Kannappan, Alicia Skowronski, Adam Cole, Derek Wang, Kevin Stone, Adam Hasasneh, Kevin Sexton, Amanda Gotsch, Taimor Ali, Jacob Braun, Saira Khan, Ayesha Durrani, Mohammad Durrani, Khurshid A Guru)</li> <li>• Enablers and barriers to <b>clinical leadership</b> in the labour ward of district hospitals in KwaZulu-Natal, South Africa (Solange Mianda, Anna Silvia Voce)</li> <li>• Lessons for leadership and culture when doctors become <b>second victims:</b> a systematic literature review (Donna Willis, Joanna Yarker, Rachel Lewis)</li> <li>• <b>Power and physician leadership</b> (Anurag Saxena, Diane Meschino, Lara Hazelton, Ming-Ka Chan, David A Benrimoh, A Matlow, D Dath, J Busari)</li> </ul>

URL	<a href="https://www.longwoods.com/publications/nursing-leadership/25957">https://www.longwoods.com/publications/nursing-leadership/25957</a>
Notes	<p>A new issue of <i>Nursing Leadership</i> has been published with a “Special Focus On <b>Nursing And Digital Health</b>”. Articles in this issue of <i>Nursing Leadership</i> include:</p> <ul style="list-style-type: none"> <li>• Editorial: <b>Let's Get Digital</b> (Lynn M. Nagle)</li> <li>• Emerging Professionals’ Observations of Opportunities and Challenges in <b>Nursing Informatics</b> (Laura-Maria Peltonen, Raji Nibber, Adrienne Lewis, Lorraine Block, Lisiane Pruinelli, M Topaz, E L Perezmitre and C Ronquillo)</li> <li>• <b>Big Data:</b> Why Should Canadian <b>Nurse Leaders</b> Care? (Sally Remus and Lorie Donelle)</li> <li>• Advocating for Safe, Quality and Just Care: What Nursing Leaders Need to Know about <b>Artificial Intelligence in Healthcare Delivery</b> (Tracie L. Risling and Cydney Low)</li> <li>• <b>Technology in Healthcare:</b> Differing Points of View (Heidi Deagle)</li> <li>• Predicting Registered Nurses’ Behavioural Intention to Use <b>Electronic Documentation System in Home Care:</b> Application of an Adapted Unified Theory of Acceptance and Use of Technology Model (Sarah Ibrahim, Lorie Donelle, Sandra Regan and Souraya Sidani)</li> <li>• The <b>Nurse LEADership for Implementing Technologies</b> – Mobile Health Model (Nurse LEAD-IT – mHealth) (Charlene Ronquillo, V Susan Dahinten, Vicky Bungay and Leanne M Currie)</li> <li>• Role and Strategies that Managers can Apply to Support <b>Point-of-Care Nurses’ Use and Adoption of Health Information Technology:</b> A Scoping Review (Zohra Surani, Matthew John, Ana Laura Solano López, Victor Gbenro, Gbenro Slodan and Gillian Strudwick)</li> <li>• Case Study: Using <b>Electronic Medication Administration Record</b> to Enhance Medication Safety and Improve Efficiency in Long-Term Care Facilities (Liping Fei, Jenny Robinson and Andrea Macneil)</li> </ul>

URL	<a href="https://www.longwoods.com/publications/healthcarepapers/25919">https://www.longwoods.com/publications/healthcarepapers/25919</a>
Notes	<p>A new issue of <i>HealthcarePapers</i> has been published with the theme “<b>Mental health and equity</b>”. Articles in this issue of <i>HealthcarePapers</i> include:</p> <ul style="list-style-type: none"> <li>• Improving <b>Mental Health Services for Immigrant, Racialized, Ethno-Cultural and Refugee Groups</b> (Kwame McKenzie)</li> <li>• <b>Culturally Responsive Services</b> as a Path to Equity in Mental Healthcare (Laurence J Kirmayer and G Eric Jarvis)</li> <li>• Promising Practices in Equity and Mental Health: The <b>Immigrant and Refugee Mental Health Project</b> (Aamna Ashraf)</li> <li>• The Promise of <b>Psychosocial Therapies for Use with Immigrant, Refugee, Ethno-Cultural and Racialized Populations</b> (Andrew Tuck)</li> <li>• Community-Based <b>Mental Healthcare for Marginalized or Excluded Populations</b> (Kevin Pottie and Olivia Magwood)</li> <li>• Promising Practices in Equity in Mental Healthcare: <b>Health Equity Impact Assessment</b> (Branka Agic)</li> </ul>

URL	<a href="https://www.healthaffairs.org/toc/hlthaff/38/10">https://www.healthaffairs.org/toc/hlthaff/38/10</a>
Notes	<p>A new issue of <i>Health Affairs</i> has been published with the theme “<b>Violence and health</b>”. Articles in this issue of <i>Health Affairs</i> include:</p> <ul style="list-style-type: none"> <li>• <b>After Prison, Healthy Lives Built On Access To Care</b> And Community (Rob Waters)</li> <li>• The <b>Effects Of Violence On Health</b> (Frederick Rivara, Avanti Adhia, Vivian Lyons, Anne Massey, B Mills, E Morgan, M Simckes, and A Rowhani-Rahbar)</li> <li>• <b>Violence In Older Adults: Scope, Impact, Challenges, And Strategies For Prevention</b> (Tony Rosen, Lena K. Makaroun, Yeates Conwell, and M Betz)</li> <li>• <b>Violence And The US Health Care Sector: Burden And Response</b> (David C Grossman , and Bechara Choucair)</li> <li>• Keeping Your Guard Up: <b>Hypervigilance Among Urban Residents</b> Affected By Community And Police Violence (Nichole A Smith, Dexter R Voisin, Joyce P Yang, and Elizabeth L Tung)</li> <li>• <b>Social Isolation, Loneliness, And Violence Exposure</b> In Urban Adults (Elizabeth L Tung, Louise C Hawkey, Kathleen A Cagney, and M E Peek)</li> <li>• Mitigating Negative Consequences Of <b>Community Violence Exposure: Perspectives From African American Youth</b> (Briana Woods-Jaeger, Jannette Berkley-Patton, Kaitlin N Piper, P O’Connor, T L Renfro, and K Christensen)</li> <li>• Creating <b>Safe And Healthy Neighborhoods</b> With Place-Based Violence Interventions (Bernadette C Hohl, Michelle C Kondo, Sandhya Kajeepeta, John M MacDonald, Katherine P Theall, M A Zimmerman, and C C Branas)</li> <li>• Linking Public Safety And Public Health Data For <b>Firearm Suicide Prevention</b> In Utah (Catherine Barber, John P Berrigan, Morissa Sobelson Henn, Kim Myers, Michael Staley, D Azrael, M Miller, and D Hemenway)</li> <li>• <b>Behavioral Health Care And Firearm Suicide: Do States With Greater Treatment Capacity Have Lower Suicide Rates?</b> (Evan V Goldstein, Laura C Prater, and Thomas M Wickizer)</li> </ul>

	<ul style="list-style-type: none"> <li>• Trends In <b>Public Opinion On US Gun Laws</b>: Majorities Of Gun Owners And Non-Gun Owners Support A Range Of Measures (Colleen L Barry, Elizabeth M Stone, C K Crifasi, J S Vernick, D W Webster, and E E McGinty)</li> <li>• Evolving Public Views On The <b>Likelihood Of Violence From People With Mental Illness</b>: Stigma And Its Consequences (Bernice A Pescosolido, Bianca Manago, and John Monahan)</li> <li>• Ending Gaze Aversion Toward <b>Child Abuse And Neglect</b> (R D Krugman)</li> </ul>
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BMJ *Quality and Safety* online first articles

URL	<a href="https://qualitysafety.bmj.com/content/early/recent">https://qualitysafety.bmj.com/content/early/recent</a>
Notes	<p>BMJ <i>Quality and Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> <li>• Interventions for improving <b>teamwork in intrapartem care</b>: a systematic review of randomised controlled trials (Michael Wu, Jennifer Tang, Nicole Etherington, Mark Walker, Sylvain Boet)</li> <li>• Editorial: Methods for scaling <b>simulation-based teamwork training</b> (Megan Delisle, Jason C Pradarelli, Nikhil Panda, Alex B Haynes, A A Hannenberg)</li> <li>• Editorial: The harms of promoting ‘<b>Zero Harm</b>’ (Eric J Thomas)</li> <li>• Editorial: Is there a ‘<b>best measure</b>’ of patient safety? (Ann M Borzecki, Amy K Rosen)</li> <li>• Impact of a system-wide quality improvement initiative on <b>blood pressure control</b>: a cohort analysis (E R Pfoh, K Martinez, N Vakharia, M Rothberg)</li> <li>• Contribution of primary care organisation and specialist care provider to <b>variation in GP referrals for suspected cancer</b>: ecological analysis of national data (Christopher Burton, Luke O'Neill, Phillip Oliver, P Murchie)</li> <li>• Reducing peripherally inserted central catheters and midline catheters by training nurses in <b>ultrasound-guided peripheral intravenous catheter placement</b> (Benjamin Galen, Sarah Baron, Sandra Young, Alleyne Hall, Linda Berger-Spivack, William Southern)</li> <li>• Preventing <i>Clostridioides difficile</i> infection in hospitals: what is the endgame? (Susy S Hota, Michelle Doll, Gonzalo Bearman)</li> </ul>

## Online resources

*Independent investigation needed into hospital failures*

<https://insightplus.mja.com.au/2019/40/independent-investigation-needed-into-hospital-failures/>

Piece published on the MJA InSight website advocating for an independent national body responsible for investigating and reporting on serious incidents in the Australian healthcare system. The UK and Norway have recently established such independent bodies, the Healthcare Safety Investigation Branch in the UK and the State Investigation Commission for Health and Care Services in Norway

*Clinical Communiqué*

<https://www.thecommuniques.com/post/clinical-communiqu%C3%A9-volume-6-issue-3-september-2019>

Volume 6 Issue 3, September 2019

This issue of *Clinical Communiqué* looks at two coronial cases where shortcomings in the interface between humans and technological systems slowed or distorted the transmission of information (diagnostic test results), contributing to their deaths. The issue also includes an expert commentary, jointly written by two leading researchers in the field of medical informatics and digital health, explores these shortcomings further, and offer advice on how to improve communication systems.

[UK] NICE Guidelines and Quality Standards

<https://www.nice.org.uk/guidance>

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 NG1 **Gastro-oesophageal reflux disease** in children and young people: diagnosis and management <https://www.nice.org.uk/guidance/ng1>
- NICE Guideline NG19 **Diabetic foot problems: prevention and management** <https://www.nice.org.uk/guidance/ng19>
- NICE Guideline NG141 **Cellulitis and erysipelas: antimicrobial prescribing** <https://www.nice.org.uk/guidance/ng141>
- NICE Guideline NG142 **End of life care** for adults: service delivery <https://www.nice.org.uk/guidance/ng142>
- Clinical Guideline CG71 **Familial hypercholesterolaemia: identification and management** <https://www.nice.org.uk/guidance/cg71>
- Clinical Guideline CG137 **Epilepsies: diagnosis and management** <https://www.nice.org.uk/guidance/cg137>

[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:

- Diagnosis of **delirium** in hospitals can be improved by the 4 A's test
- Enhanced communication and staff training could improve the experience of **maternity services** for asylum-seeking women
- C-reactive protein testing in general practice safely reduces antibiotic use for **COPD** flare-ups
- Diet and physical activity interventions targeting children and youth have different, yet small, effects on preventing **obesity**
- Transcatheter aortic valve implantation may be an option for patients with **aortic stenosis** at lower surgical risk
- **Text message reminders increase attendance** at NHS health checks
- A **temporary clot-catching filter** inserted after major trauma does not prevent lung clots
- A lower **drink-drive limit** in Scotland is not linked to reduced road traffic accidents as expected
- Length of steroid course for **childhood nephrotic syndrome** makes little difference to later recurrences
- Exercise training improves physical capacity after **lung cancer surgery**.

[USA] Effective Health Care Program reports

<https://effectivehealthcare.ahrq.gov/>

The US Agency for Healthcare Research and Quality (AHRQ) has an Effective Health Care (EHC) Program. The EHC has released the following final reports and updates:

- *Pharmacologic and Nonpharmacologic Therapies in Adult Patients With Exacerbation of COPD* <https://effectivehealthcare.ahrq.gov/products/copd/research>

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## Disclaimer

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