



On the Radar

Issue 439

4 November 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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National Consultation on the draft Severe (Third and Fourth Degree) Perineal Tears Clinical Care Standard

<https://www.safetyandquality.gov.au/standards/clinical-care-standards/national-consultation-draft-severe-third-and-fourth-degree-perineal-tears-clinical-care-standard>

The Australian Commission on Safety and Quality in Health Care is seeking comments on the draft *Severe (Third and Fourth Degree) Perineal Tears Clinical Care Standard* and support materials. Comments are sought from healthcare professionals, healthcare and consumer organisations, consumers and any other interested parties.

A clinical care standard contains a small number of quality statements that describe the clinical care that a patient should be offered for a specific clinical condition and supports:

- People to know what care should be offered by their healthcare system, and to make informed treatment decisions in partnership with their clinicians
- Clinicians to make decisions about appropriate care
- Health service organisations to examine the performance of their organisation and make improvements in the care they provide.

The draft *Severe (Third and Fourth Degree) Perineal Tears Clinical Care Standard* and instructions for submitting comments are available on the Commission’s website at:
<https://www.safetyandquality.gov.au/our-work/clinical-care-standards/current-consultations/>

The consultation period will be open until 11:59 pm on **8 December 2019**.

For further information about the Clinical Care Standards or the consultation process, please contact Alice Bhasale, Program Director, ccs@safetyandquality.gov.au

Journal articles

Costs and consequences of an intervention-based program to reduce hospital-acquired pressure injuries in one health district in Australia

Barakat-Johnson M, Lai M, Wand T, White K, De Abreu Lourenco R
 Australian Health Review. 2019;43(5):516-525.

DOI	https://doi.org/10.1071/AH18131
Notes	Paper describing the development and implementation (including costs) of an intervention aimed at reducing pressure injuries in a health district. Pressure injuries (or pressure ulcers) are a common, but often preventable, feature in many care settings. This piece presents a retrospective cost-consequence analysis of the intervention that saw a 51.4% reduction in the incidence of hospital-acquired pressures injuries (HAPI) (from 1.46 per occupied bed day in 2014 to 0.71 per occupied bed day in 2017) and a 71.6% reduction in the prevalence of HAPI (from 6.7% in 2014 to 1.9% in 2017). However, this intervention was not only clinically beneficial but was also economically, ‘with a 23.1% cost saving compared with the previous approach to preventing HAPIs.’

For information on the Commission’s work on hospital-acquired complications (HACs), see <https://www.safetyandquality.gov.au/our-work/indicators/hospital-acquired-complications>

A qualitative literature review exploring the drivers influencing antibiotic over-prescribing by GPs in primary care and recommendations to reduce unnecessary prescribing

Rose J, Crosbie M, Stewart A
 Perspectives in Public Health. 2019 [epub].

DOI	https://doi.org/10.1177/1757913919879183
Notes	There have been concerns about the apparent overuse/overprescribing of antibiotics for some time. One area of focus has been the prescribing in primary practice. This piece reports on a literature review that sought to examine the ‘drivers influencing over-prescribing by general practitioners (GPs) in primary care, exploring their views and opinions’ while also considering how antibiotic prescribing may be improved and unnecessary prescribing reduced. Based on 17 qualitative studies looking at GPs’ views of antibiotic prescribing in primary care, the authors report the main drivers <ul style="list-style-type: none"> • GP attitudes and feelings and anxiety/fear concerning prescribing • External factors were important, including pressures from time and financial issues • Patient pressure, demand and expectation, including lack of patient education.

Assessing the adherence to guidelines in the management of croup in Australian children: a population-based sample survey

Prentice B, Moloney S, Hort J, Hibbert P, Wiles LK, Molloy CJ, et al
International Journal for Quality in Health Care. 2019.

DOI	https://doi.org/10.1093/intqhc/mzz088
Notes	This latest study from the CareTrack Kids project once again reveals that care does not always follow published guidelines. In this instance, the CareTrack Kids Investigative Team looked at the extent to which care received by Australian children presenting with croup is in agreement with Clinical Practice Guidelines (CPGs). This retrospective population-based sample survey looked at medical records from three healthcare settings in three Australian states for selected visits in 2012 and 2013. The study found that documented guideline adherence was lower for general practitioners than emergency departments and inpatient admissions. Overall adherence was very low for a bundle of 10 indicators related to assessment but higher for a bundle of four indicators relating to the avoidance of inappropriate therapy.

Missed Serious Neurologic Conditions in Emergency Department Patients Discharged With Nonspecific Diagnoses of Headache or Back Pain

Dubosh NM, Edlow JA, Goto T, Camargo CA, Jr., Hasegawa K
Annals of Emergency Medicine. 2019;74(4):549-561.

DOI	https://doi.org/10.1016/j.annemergmed.2019.01.020
Notes	One of the fears that makes misdiagnosis or diagnostic error a concern is why something serious is dismissed as trivial. Thus study sought to determine the likelihood of readmission or inpatient mortality among patients who were initially discharged with non-specific diagnoses of headache or back pain. The study was a retrospective analysis using the population-based data of 6 US states from the State Emergency Department Databases and State Inpatient Databases from 2006 through 2012. This data covered 2,101,081 emergency department (ED) discharges with a non-specific diagnosis of headache and 1,381,614 discharges with a non-specific diagnosis of back pain. Overall, 0.5% of the headache patients and 0.2% of back pain patients had a primary outcome of return ED visit and hospitalization for primary diagnosis of a serious neurologic condition or in-hospital death within 30 days of ED discharge.. The most common missed condition for headache was ischemic stroke (18.1%). The most common missed condition for back pain was intraspinal abscess (41%).

Sepsis hysteria: excess hype and unrealistic expectations

Singer M, Inada-Kim M, Shankar-Hari M
The Lancet. 2019;394(10208):1513-1514.

DOI	https://doi.org/10.1016/S0140-6736(19)32483-3
Notes	Sepsis is a common and potentially serious condition. There have been a number of campaigns to raise awareness of sepsis and to promote action to prevent, recognise and treat sepsis. For example, World Sepsis Day in September saw the Global Sepsis Alliance producing campaign materials that stated 27–30 million develop sepsis each year globally with 7–9 million dying. This item in <i>The Lancet</i> counters some of these efforts by questioning the apparent extent of the issue and how preventable it may be. One of the authors' concerns is that fears of sepsis may drive an increase in the (inappropriate) use of antibiotics that in turn may fuel antimicrobial resistance.

Does Simulation Training for Acute Care Nurses Improve Patient Safety Outcomes: A Systematic Review to Inform Evidence-Based Practice

Lewis KA, Ricks TN, Rowin A, Ndlovu C, Goldstein L, McElvogue C

Worldviews on Evidence-Based Nursing. 2019;16(5):389-396.

DOI	https://doi.org/10.1111/wvn.12396
Notes	This systematic review sought to examine the literature for the impact of simulation training on patient safety. Based on a review of 12 articles that examined the effect of RN simulation training on patient safety outcomes in the adult acute care setting, the authors report finding that ‘All studies in this review achieved improved patient safety outcomes. ’

Healthcare Policy

Volume 15, Number 1, 2019

URL	https://www.longwoods.com/publications/healthcare-policy/25934/1/vol-15-no.-1-2019
Notes	<p>A new issue of <i>Healthcare Policy</i> has been published. Articles in this issue of <i>Healthcare Policy</i> include:</p> <ul style="list-style-type: none"> • Editorial: When Small Changes Add Up to System Transformation (Jennifer Zelmer) • Creating Clinical Cohorts: Challenges Encountered in Two Canadian Provinces (Esther S Shoemaker, Clare E Liddy, Leigh M McClarty, Shabnam Asghari, Jillian Hurd, Sean B Rourke, Souradet Y Shaw, Christine Bibeau, Ron Rosenes, Philip Lundrigan, L Crowe, L Ireland, C Loepky and C E Kendall) • Review of Coroner Inquest Recommendations into Opioid Prescribing Practices in Ontario: Ongoing Health Policy Gaps (Nicholas Papadomanolakis-Pakis, Kieran Moore, Julia Lew and Maximilien Boulet) • Children’s Oral Health and Barriers to Seeking Care: Perspectives of Caregivers Seeking Paediatric Hospital Dental Treatment (Shauna Hachey, Joanne Clovis and Kimberley Lamarche) • Impact of Deferring Critically Ill Children Away from Their Designated Paediatric Critical Care Unit: A Population-Based Retrospective Cohort Study (Janice A Tijssen, Britney N Allen, Krista M Bray Jenkyn and S Z Shariff) • Key Lessons Learned in the Strategic Implementation of the Primary Care Collaborative Memory Clinic Model: A Tale of Two Regions (Linda Lee, Loretta M Hillier, Kelly Lumley-Leger, Frank J Molnar, Denyse Netwon, Linda Stirling and Kelly Milne) • Orphan Drug Pricing and Costs: A Case Study of Kalydeco and Orkambi (Aidan Hollis) • Decision-Making on New Non-Drug Health Technologies (NDT’s) by Hospitals and Health Authorities in Canada (Tania Stafinski, Raisa Deber, Marc Rhains, Janet Martin, Tom Noseworthy, Stirling Bryan and D Menon) • The Introduction of New Non-Drug Health Technologies (NDT’s) into Canadian Healthcare Institutions: Opportunities and Challenges (Tania Stafinski, Raisa Deber, Marc Rhains, Janet Martin, Tom Noseworthy, Stirling Bryan and Devidas Menon)

URL	https://www.longwoods.com/publications/healthcarepapers/25920/1/vol.-18-no.-3-2019-value-from-healthcare-and-why-it-is-needed-in-canada
Notes	<p>A new issue of <i>HealthcarePapers</i> has been published with the theme “Value from Healthcare and why it is needed in Canada”. Articles in this issue of <i>HealthcarePapers</i> include:</p> <ul style="list-style-type: none"> • Value from Healthcare and Why It Is Needed in Canada (J M Sutherland) • Principles to Improve Value in Healthcare (Walter P Wodchis) • Value-Based Healthcare: Fad or Fabulous? (Stephen Duckett) • Value in Health: How It Is Defined and Used in Priority Setting and Pricing in Norway (Hans Olav Melberg) • What “Value” Should We Pay for? A Path Towards Value-Based Payment in Canadian Healthcare Systems (Erik Hellsten and Irfan Dhalla) • Rewarding Success: Changing the Paradigm of How Research Is Rewarded (Jessica Nadigel and Robyn Tamblyn)

URL	https://www.publish.csiro.au/py/issue/9445
Notes	<p>A new issue of the <i>Australian Journal of Primary Health</i> has been published with the theme “Taking Primary Health to the Next Level in Indigenous Health: Innovation, Change and Vision”. Articles in this issue of the <i>Australian Journal of Primary Health</i> include:</p> <ul style="list-style-type: none"> • Editorial: Shifting the balance (Lilon Bandler, Sue Crengle, Martina Kamaka and David Paul) • The central concept of empowerment in Indigenous health and wellbeing (Samantha Bobba) • Beyond the pipeline: a critique of the discourse surrounding the development of an Indigenous primary healthcare workforce in Australia (Chelsea Bond, Mark Brough, Jon Willis, Janet Stajic, Bryan Mukandi, Condy Canuto, Shannon Springer, Deborah Askew, Lynnell Angus and Tara Lewis) • Ngu-ng-gi-la-nha (to exchange) knowledge. How is Aboriginal and Torres Strait Islander people's empowerment being upheld and reported in smoking cessation interventions during pregnancy: a systematic review (Michelle Bovill, Catherine Chamberlain, Yael Bar-Zeev, M Gruppetta and G S Gould) • Ethics of medical research in Aboriginal and Torres Strait Islander populations (Samantha Bobba) • Innovation to prevent sudden infant death: the wahakura as an Indigenous vision for a safe sleep environment (David Tipene-Leach and Sally Abel) • The Dean's Certificate of Distinction in Native Hawaiian Health (Dee-Ann Carpenter, Martina Kamaka, Vanessa Wong and Kelli-Ann Voloch) • Reflections on a community health elective in Native Hawaiian Health: a community-centred vision for health and the medical profession in Indigenous contexts (Kalei R J Hosaka) • Engaging with Aboriginal Shire Councils in remote Cape York communities to address smoke-free environments (Kiarah ECuthbert, Clare Brown, Melinda Hammond, Tiffany A Williams, D Tayley, E Deemal-Hall and D P Thomas)

	<ul style="list-style-type: none"> • Building a regional health ecosystem: a case study of the Institute for Urban Indigenous Health and its <i>System of Care</i> (Lyle Turner, Tim Albers, Adrian Carson, Carmel Nelson, Renee Brown and Marianna Serghi) • '<i>...but I just prefer to treat everyone the same...</i>': general practice receptionists talking about health inequities (Rowan Manhire-Heath, Donna Cormack and Emma Wyeth) • <i>He aba te mea nui o te ao? He tāngata!</i> (What is the most important thing in the world? It is people!) (Bridgette Masters-Awatere, Moana Rarere, Rewa Gilbert, Carey Manuel and Nina Scott) • 'I still remember your post about buying smokes!': a case study of a remote Aboriginal community-controlled health service using Facebook for tobacco control (Vicki Kerrigan, Rarrtjiwuy M Herdman, D P Thomas and M Hefler) • Knowing our patients: a cross-sectional study of adult patients attending an urban Aboriginal and Torres Strait Islander primary healthcare service (Deborah A Askew, Warren J Jennings, Noel E Hayman, Philip J Schluter and Geoffrey K Spurling) • Victorian local government priority for Aboriginal health and wellbeing: a mixed-methods study (Yudit Aron, Kim Rounsefell, Jennifer Browne, Ruth Walker, Catherine Helson, Petah Atkinson, C MacDonald and C Palermo) • Does attending <i>Work It Out</i> – a chronic disease self-management program – affect the use of other health services by urban Aboriginal and Torres Strait Islander people with or at risk of chronic disease? A comparison between program participants and non-participants (Jie Hu, Tabinda Basit, Alison Nelson, Emma Crawford and Lyle Turner) • Whānau Māori explain how the Harti Hauora Tool assists with better access to health services (Bridgette Masters-Awatere and Rebekah Graham) • Critical reflection for researcher–community partnership effectiveness: the He Pikinga Waiora process evaluation tool guiding the implementation of chronic condition interventions in Indigenous communities (Moana Rarere, John Oetzel, B Masters-Awatere, N Scott, R Wihapi, C Manuel and R Gilbert) • Understanding lived experiences of Aboriginal people with type 2 diabetes living in remote Kimberley communities: diabetes, it don't come and go, it stays! (Sarah Straw, Erica Spry, Louie Yanawana, Vaughan Matsumoto, Denetta Cox, Erica Cox, Sally Singleton, N Houston, L Scott and J V Marley) • Piloting a culturally appropriate, localised diabetes prevention program for young Aboriginal people in a remote town (Kimberley H Seear, David N Atkinson, Matthew P Lelievre, Lynette M Henderson-Yates and J V Marley) • Complex diabetes screening guidelines for high-risk adolescent Aboriginal Australians: a barrier to implementation in primary health care (A Manifold, D Atkinson, J V Marley, L Scott, G Cleland, P Edgill and S Singleton) • He Korowai Manaaki: mapping assets to inform a strengths-based, Indigenous-led wrap-around maternity pathway (Anna Adcock, Francesca Storey, Beverley Lawton, Matthew Bennett, Charles Lambert, Liza Edmonds, Kendall Stevenson, Stacie Geller and Fiona Cram)
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BMJ *Quality and Safety* online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p>BMJ <i>Quality and Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Editorial: The harms of promoting ‘Zero Harm’ (Eric J Thomas) • Editorial: Challenge of ensuring access to high-quality emergency surgical care for all (John W Scott, Justin B Dimick) • Factors associated with inappropriate use of emergency departments: findings from a cross-sectional national study in France (Diane Naouri, Guillaume Ranchon, Albert Vuagnat, Jeannot Schmidt, Carlos El Khoury, Youri Yordanov On behalf of French Society of Emergency Medicine)

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

URL	https://academic.oup.com/intqhc/advance-articles
Notes	<p>International Journal for <i>Quality in Health Care</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Trends in hospital standardized mortality ratios for stroke in Japan between 2012 and 2016: a retrospective observational study (Rebeka Amin, Takefumi Kitazawa, Yosuke Hatakeyama, Kunichika Matsumoto, Shigeru Fujita, Kanako Seto, Tomonori Hasegawa) • Assessing the adherence to guidelines in the management of croup in Australian children: a population-based sample survey (Bernadette Prentice, CareTrack Kids Investigative Team, Susan Moloney, Jason Hort, Peter Hibbert, Louise K Wiles, Charlotte J Molloy, Gaston Arnolda, Hsuen P Ting, Jeffrey Braithwaite, Adam Jaffe, CareTrack Kids Investigative Team) • Isolating red flags to enhance diagnosis (I-RED): An experimental vignette study (Corey Chartan, Hardeep Singh, Parthasarathy Krishnamurthy, Moushumi Sur, Ashley Meyer, Riad Lutfi, Julie Stark, Satid Thammasitboon) • Optimizing nursing time in a day care unit: Quality improvement using Lean Six Sigma methodology (Carmel Davies, Caroline Lyons, Regina Whyte) • Zap it track it: the application of Lean Six Sigma methods to improve the screening system of low-grade mucinous neoplasms of the appendix in an acute hospital setting (kathleen McGrath, Mairéad Casserly, Freda O’mara, Jurgen Mulsow, Conor Shields, Oonagh Staunton, Seán Paul Teeling, M Ward) • Conclusion: the road ahead: where should we go now to improve healthcare quality in acute settings? (Jeffrey Braithwaite, Natalie Taylor, Robyn Clay-Williams, Hsuen P Ting, Gaston Arnolda)

Online resources

Future Leaders Communiqué

<https://www.thecomminiques.com/post/copy-of-future-leaders-communiqu%C3%A9-volume-4-issue-4-october-2019>

Victorian Institute of Forensic Medicine

Volume 4 Issue 4 October 2019

This issue of the *Future Leaders Communiqué* looks at the issue of **diagnostic errors**. This can be, as discussed here, where a diagnosis is missed, inappropriately delayed, or incorrect, particularly in an obstetric patient. This issue also includes two expert commentaries on ruptured splenic artery aneurysm, which was the cause of death in the case examined here, and on problem-solving in medicine.

Telehealth in practice

https://www.aci.health.nsw.gov.au/data/assets/pdf_file/0008/509480/ACI_0261_Telehealth_guidelines.pdf

The Agency for Clinical Innovation in NSW has released this guide aimed at assisting clinical teams with integrating telehealth into their everyday practice.

[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:

- 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>
- NICE Guideline NG1 **Gastro-oesophageal reflux disease in children and young people: diagnosis and management** <https://www.nice.org.uk/guidance/ng1>

[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:

- Clinicians prescribe **antibiotics for childhood respiratory tract infection** based on assessment, rather than parental expectation
- High-flow nasal oxygen reduces **reintubation after major surgery** compared with conventional oxygen therapy
- Short-term dual antiplatelet treatment may be best for most patients after receiving a **drug-eluting stent**
- Early suppression of male hormones is better than delayed therapy for **advanced prostate cancer** on balance
- Better strategies are needed to reduce **preventable patient harm** in healthcare
- 'Last resort' antipsychotic remains the gold standard for **treatment-resistant schizophrenia**
- Partial knee replacement 'could be first choice' for suitable patients with **osteoarthritis**.

[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:

- *Treatment for **Acute Pain**: An Evidence Map* <https://effectivehealthcare.ahrq.gov/products/acute-pain-treatment/technical-brief>

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