



## On the Radar

Issue 446

13 January 2020

*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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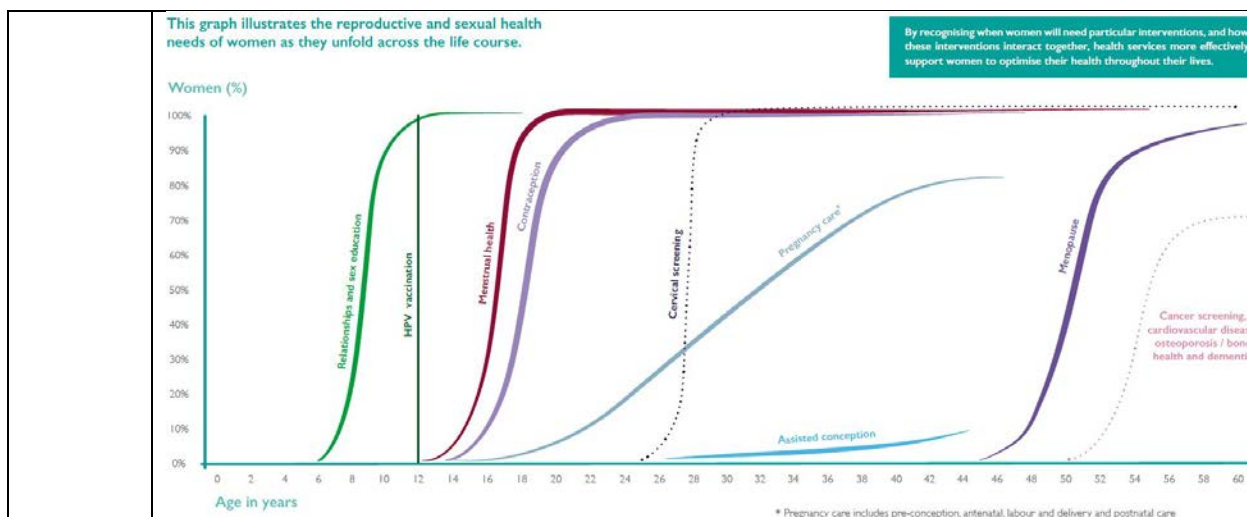
### Reports

*Better for women: Improving the health and wellbeing of girls and women*

Royal College of Obstetricians and Gynaecologists

London: Royal College of Obstetricians and Gynaecologists; 2019. p. 164.

URL	<a href="https://www.rcog.org.uk/en/news/campaigns-and-opinions/better-for-women/">https://www.rcog.org.uk/en/news/campaigns-and-opinions/better-for-women/</a>
Notes	The Royal College of Obstetricians and Gynaecologists in the UK has produced this report looking into how the British health system could be improved to better ensure that women are provided the information and care they need. The focus of the report and the recommendations is along the entire life course so as to prevent predictable ill health and to address the determinants of health specific to women. Access to information and to appropriate, timely care are seen as key.



*Human Rights and Technology. Discussion Paper*  
 Australian Human Rights Commission  
 Sydney: AHRC; 2019. p. 232.

URL	<a href="https://tech.humanrights.gov.au/">https://tech.humanrights.gov.au/</a>
Notes	<p>The Australian Human Rights Commission has released this discussion paper seeking comment and submissions on how Australia’s human rights protections could be amended to respond in an era of artificial intelligence (AI) and other technologies. Health, as might be expected, is something of a theme. However, the Expert Reference Group does not appear to have specific membership from the health sector, either academic, clinician or patient/consumer.</p> <p>The Australian Human Rights Commission invites written submissions in response to the Discussion Paper. The deadline for receiving submissions is Tuesday 10 March 2020. They will also</p> <ul style="list-style-type: none"> <li>• hold roundtable meetings with industry, civil society, academia and government stakeholders</li> <li>• seek the views and experience of people who are particularly affected by new technologies, especially those from at-risk and marginalised groups</li> <li>• speak with experts and key decision makers</li> <li>• continue engaging with related national and international review processes.</li> </ul>

*Quality improvement in general practice: What do GPs and practice managers think?*

Gosling J, Mays N, Erens B, Reid D, Taylor W, Jones B  
 London: The Health Foundation; 2019. p. 46.

URL	<a href="https://www.health.org.uk/publications/reports/quality-improvement-in-general-practice-gps-practice-managers-think">https://www.health.org.uk/publications/reports/quality-improvement-in-general-practice-gps-practice-managers-think</a>
Notes	<p>The Health Foundation in the UK has published this report examining the level of quality improvement awareness, appetite and activity in general practice across the UK. The Health Foundation commissioned the London School of Hygiene and Tropical Medicine to survey over 2,300 GPs and 1,400 practice managers across the UK, alongside qualitative interviews. The research shows that most GPs and practice managers see quality improvement as a core aspect of their work, with 99% reporting undertaking QI activities, and many working collaboratively with neighbouring practices to improve services. The research also revealed that there are many issues making it difficult to deliver improvement, including high patient demand and staff shortages; demands of other NHS agencies; lack of protected time; and level of improvement capability.</p>

## Journal articles

*Association Between Physician Depressive Symptoms and Medical Errors: A Systematic Review and Meta-analysis*  
 Pereira-Lima K, Mata DA, Loureiro SR, Crippa JA, Bolsoni LM, Sen S  
 JAMA Network Open. 2019;2(11):e1916097-e1916097.

DOI	<a href="https://doi.org/10.1001/jamanetworkopen.2019.16097">https://doi.org/10.1001/jamanetworkopen.2019.16097</a>
Notes	The idea that we perform less well when depressed is hardly surprising. This review examined 11 studies covering more than 20,000 clinicians to examine the magnitude and direction of associations between physician depressive symptoms and medical errors. The authors report ‘that <b>physician depressive symptoms were associated with medical errors</b> , highlighting the relevance of physician well-being to health care quality and underscoring the need for systematic efforts to prevent or reduce depressive symptoms among physicians.’ Of course, the challenge comes in how to support “impaired” clinicians so as to benefit them, their patients, their colleagues and the services they work within.

*The role of organizational and professional cultures in medication safety: A scoping review of the literature*  
 Machen S, Jani Y, Turner S, Marshall M, Fulop NJ  
 International Journal for Quality in Health Care. 2019 [epub].

DOI	<a href="https://doi.org/10.1093/intqhc/mzz111">https://doi.org/10.1093/intqhc/mzz111</a>
Notes	Any healthcare setting has a number of cultures in operation. There can be the culture with the facility or unit along with the prevailing organisational and professional cultures. This paper reports on a scoping review that sought to examine the literature on role of organisational and professional cultures in medication safety. Based on 42 studies, the authors identified four key themes influencing medication safety: professional identity, fear of litigation and punishment, hierarchy and pressure to conform to established culture. The authors concluded that ‘Organizational and professional cultures influence aspects of medication safety. Understanding the role these cultures play can help shape both local governance arrangements and the development of interventions which take into account the impact of these aspects of culture.’

*Using a Machine Learning System to Identify and Prevent Medication Prescribing Errors: A Clinical and Cost Analysis Evaluation*  
 Rozenblum R, Rodriguez-Monguio R, Volk LA, Forsythe KJ, Myers S, McGurrin M, et al  
 The Joint Commission Journal on Quality and Patient Safety. 2020;46(1):3-10.

DOI	<a href="https://doi.org/10.1016/j.jcjq.2019.09.008">https://doi.org/10.1016/j.jcjq.2019.09.008</a>
Notes	This paper suggests that an alert system driven by machine learning could identify medication errors that traditional clinical decision support (CDS) systems might otherwise miss. The researchers developed a CDS system driven by machine learning to help improve medication error identification. Five (5) years retrospective de-identified patient clinical and encounter data from two US hospitals was used to refine the machine learning algorithm. The study found that of the 10,668 alerts generated by the machine learning system, 68.2 percent would not have been generated by traditional CDS systems.

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

*The impact of leadership churn on quality management in Australian hospitals*

Leggat S, Balding C

Journal of Health Organization and Management. 2019;33(7/8):809-820.

DOI	<a href="https://doi.org/10.1108/JHOM-08-2018-0216">https://doi.org/10.1108/JHOM-08-2018-0216</a>
Notes	<p>There is often on a focus on the importance of clinicians and clinical leadership in discussions of safety and quality. This study looks at the question of managerial leadership/quality management and the importance of continuity and consistency. The study looked at the relationship between frequent turnover (churn) of the chief executive officer (CEO), quality manager and members of the governing board with the management of quality in eight Australian hospitals over a 3-year period. The authors report finding that “There were <b>unexpected high levels of both governance and management churn</b> over the three years. <b>Churn among CEOs and quality managers was negatively associated with compliance in aspects of the quality system used to plan, monitor and improve quality of care.</b> There was no relationship with the quality of care indicators. Staff identified <b>lack of vision</b> and <b>changing priorities</b> with high levels of churn, which they described as confusing and demotivating. There was no relationship with quality processes or quality indicators detected for churn among governing board members.’</p>

*Economic evaluation of clinical quality registries: a systematic review*

Lee P, Chin K, Liew D, Stub D, Brennan AL, Lefkovits J, et al

BMJ Open. 2019;9(12):e030984.

DOI	<a href="https://doi.org/10.1136/bmjopen-2019-030984">https://doi.org/10.1136/bmjopen-2019-030984</a>
Notes	<p>Clinical quality registries can be valuable collections of information about real world patients and the treatments they are offered. This paper reports on a review of literature and reports (including one commissioned by the Commission) into the economics of clinical quality registries. While based on a small number of studies, the authors report that ‘Available data indicate that CQRs [clinical quality registries] can be cost-effective and can lead to significant returns on investment.’</p>

For information on the Commission’s work on clinical quality registries, see

<https://www.safetyandquality.gov.au/our-work/national-arrangements-clinical-quality-registries>

*Prioritizing patient safety efforts in office practice settings*

Kravet S, Bhatnagar M, Dwyer M, Kjaer K, Evanko J, Singh H

Journal of Patient Safety. 2019;15(4):e98-e101.

DOI	<a href="https://doi.org/10.1097/pts.0000000000000652">https://doi.org/10.1097/pts.0000000000000652</a>
Notes	Much of the focus on patient safety efforts in the past few decades has been on the hospital setting. This paper reports on a study centred on five large health care delivery systems. A malpractice consortium of these five systems found that <b>'ambulatory care cases</b> (including office practices, outpatient hospital settings, and emergency departments) accounted for <b>30% to 35% of annual medical malpractice costs</b> , and <b>missed or delayed diagnoses</b> account for approximately <b>50% of office practice liability risk</b> '. A series of site visits and interviews were conducted to better understand 'the risks and opportunities in office-based practices'. Analysis revealed eight common patient safety risk domains with the single most important being <b>communication and follow-up of diagnostic test results</b> .

*International Journal for Quality in Health Care*

Volume 31, Supplement 1

URI	<a href="https://academic.oup.com/intqhc/issue/31/Supplement_1">https://academic.oup.com/intqhc/issue/31/Supplement_1</a>
Notes	<p>A supplementary issue of the <i>International Journal for Quality in Health Care</i> has been published. Articles in this supplementary issue of <i>International Journal for Quality in Health Care</i> include:</p> <ul style="list-style-type: none"> <li>• Editorial: <b>Lean: breaking down barriers for the sake of improvement</b> (Mark Graban)</li> <li>• Developing a university-accredited <b>Lean Six Sigma curriculum to overcome system blindness</b> (Martin McNamara, Seán Paul Teeling)</li> <li>• Reducing risk of development or exacerbation of <b>nutritional deficits</b> by optimizing patient access to mealtime assistance (Seán Paul Teeling, Heather Coetzee, Maeve Phillips, Mary McKiernan, Éidín Ní ShÉ, Aileen Igoe)</li> <li>• Using Lean Six Sigma to improve <b>rates of day of surgery admission</b> in a national thoracic surgery department (Rachel Brown, Petra Grehan, Marie Brennan, Donna Carter, Aoife Brady, Eoin Moore, Seán Paul Teeling, Marie Ward, Donna Eaton)</li> <li>• <b>Optimizing nursing time in a day care unit: Quality improvement using Lean Six Sigma methodology</b> (Carmel Davies, Caroline Lyons, Regina Whyte)</li> <li>• Enhancing <b>efficiency in a cardiac investigations department</b> by increasing remote patient monitoring (Paul Ryan, Caitriona McGrath, Iain Lawrie, Caoimhe Fitzsimons, Jack O'Shea, Jack De BrÚn)</li> <li>• Zap it track it: the application of Lean Six Sigma methods to improve the <b>screening system of low-grade mucinous neoplasms of the appendix</b> in an acute hospital setting (kathleen McGrath, Mairéad Casserly, Freda O'mara, Jurgen Mulsow, Conor Shields, Oonagh Staunton, Seán Paul Teeling, Marie Ward)</li> <li>• Streamlining an existing <b>hip fracture patient pathway</b> in an acute tertiary adult Irish hospital to improve patient experience and outcomes (Caitriona Murphy, Eithne Mullen, Karrie Hogan, ronan O'toole, Seán Paul Teeling)</li> </ul>

URL	<a href="https://www.longwoods.com/publications/healthcare-quarterly/26011/1/vol.-22-no.-3-2019">https://www.longwoods.com/publications/healthcare-quarterly/26011/1/vol.-22-no.-3-2019</a>
Notes	<p>A new issue of <i>Healthcare Quarterly</i> has been published with a ‘Special Focus on <b>Innovation Procurement</b> in Health Services’, along with a number of items on ‘<b>Building Effective Family Health Teams</b>’. Articles in this issue of <i>Healthcare Quarterly</i> include:</p> <ul style="list-style-type: none"> <li>• Understanding the Implications of a <b>Shifting Opioid Landscape</b> in Ontario (Tara Gomes and David N Juurlink)</li> <li>• <b>Patient Experiences in Canadian Hospitals</b> (Mélanie Josée Davidson, Jeanie Lacroix, Seanna McMartin, Reena Kudhail, K Hart and N Diestelkamp)</li> <li>• <b>Innovation Procurement in Health Systems: Exploring Practice and Lessons Learned</b> (Anee W Snowdon, Renata Axler, Ryan DeForge, Melissa St. Pierre and Carol Kolga)</li> <li>• Case Study: <b>Innovation Procurement for a Cardiac Program</b> (Anne W Snowdon, Renata Axler, Melissa St. Pierre and Ryan DeForge)</li> <li>• Case Study: <b>Innovation Procurement for a Digital Services Platform</b> (Anne W Snowdon, Ryan DeForge, Renata Axler, M St. Pierre and C Kolga)</li> <li>• Case Study: <b>Innovation Procurement for a “Smart” Privacy Solution</b> (Anne W Snowdon, Melissa St. Pierre and Renata Axler)</li> <li>• Case Study: <b>Innovation Procurement for a Patient and Caregiver Support Solution</b> in the Home (Anne W Snowdon, Renata Axler, Melissa St. Pierre, Carol Kolga and Ryan DeForge)</li> <li>• Implementation of a <b>Physician–Patient Attachment Initiative</b> in Alberta (Lisa L Cook, Tobias Gelber and Charles M Cook)</li> <li>• Offering Patients a <b>Medical Home</b> – Not a Hallway – and a Stronger Health System (Leanne Clarke and Kavita Mehta)</li> <li>• How <b>Collaborative Mentoring Networks</b> Are Building Capacity in Primary Care (Arun Radhakrishnan, Leanne Clarke and Leslie Greenberg)</li> <li>• Case Study: West End Quality <b>Improvement Collaboration</b> (Julie Callaghan, Tammy Décarie, Kasia Filaber, Maureen Gans, Faten Hassaan and C Ledwos)</li> <li>• The Role of <b>Coaches within Academic Medical Departments: Is There Value to Integrating This into Academic Mentorship Programs?</b> (Peter S. Craighead, Shaun K. Loewen and Sunil Verma)</li> <li>• Going “Big Bang” into an <b>Electronic Health Record: Four Recommendations from Leading a Dynamic Academic Health Sciences Hospital Through Transformational Change on Time, in Scope and Within Budget</b> (Tara Coxon, Andriana Lukich, Agnes Bongers, Winifred Doyle, Thomas Stewart, Danielle Sanagan and Chris Hayes)</li> </ul>

URL	<a href="https://www.longwoods.com/publications/healthcarepapers/26027">https://www.longwoods.com/publications/healthcarepapers/26027</a>
Notes	<p>A new issue of <i>Healthcare Papers</i> has been published with the theme of ‘using data to move from volume to value’. Articles in this issue of <i>Healthcare Papers</i> include:</p> <ul style="list-style-type: none"> <li>• Using Data to Move <b>from Volume to Value</b> (Jason M Sutherland)</li> <li>• A Made-in-Canada Approach to <b>Value-Based Healthcare</b> (Fred Horne and Rachael Manion)</li> <li>• Developing a <b>Value-Based Approach to Outcome Reporting</b> in Pediatric Surgery (Lucshman Raveendran, Martin Koyle and Mary Brindle)</li> <li>• <b>Value in Healthcare and the Role of the Patient Voice</b> (Kendall Jamieson Gilmore, Francesca Pennucci, Sabina De Rosis and Claudio Passino)</li> <li>• Toward a Person-Centred Learning Health System: <b>Understanding Value from the Perspectives of Patients</b> and Caregivers (Kerry Kuluski and Sara J T Guilcher)</li> <li>• The Quest for Value in Canadian Healthcare: The <b>Applied Value in Healthcare Framework</b> (Deirdre McCaughey, Gwen McGhan, Sumedh Bele, Nishan Sharma and Natalie C Ludlow)</li> <li>• <b>Value in Primary Healthcare</b> – Measuring What Matters? (Sabrina T Wong, Sharon Johnston, Fred Burge and Kim McGrail)</li> </ul>

URL	<a href="https://www.healthaffairs.org/toc/hlthaff/39/1">https://www.healthaffairs.org/toc/hlthaff/39/1</a>
Notes	<p>A new issue of <i>Health Affairs</i> has been published with the themes ‘Patient Costs, Bundled Payment &amp; More’. Articles in this issue of <i>Health Affairs</i> include:</p> <ul style="list-style-type: none"> <li>• <b>National Health Care Spending In 2018: Growth Driven By Accelerations In Medicare And Private Insurance Spending</b> (Micah Hartman, A B Martin, J Benson, A Catlin, and The National Health Expenditure Accounts Team)</li> <li>• <b>Out-Of-Pocket Spending For Maternity Care</b> Among Women With Employer-Based Insurance, 2008–15 (Michelle H Moniz, A Mark Fendrick, Giselle E Kolenic, Anca Tilea, Lindsay K Admon, and Vanessa K Dalton)</li> <li>• <b>Out-Of-Network Billing</b> And Negotiated Payments For Hospital-Based Physicians (Zack Cooper, Hao Nguyen, Nathan Shekita, and Fiona S Morton)</li> <li>• The Effect Of Veterans Health Administration Coverage On <b>Cost-Related Medication Nonadherence</b> (Adam Gaffney, David H Bor, David U Himmelstein, Steffie Woolhandler, and Danny McCormick)</li> <li>• Terminating <b>Cost-Sharing Reduction Subsidy Payments: The Impact Of Marketplace Zero-Dollar Premium Plans On Enrollment</b> (Coleman Drake, and David M Anderson)</li> <li>• The <b>Impact Of Bundled Payment</b> On Health Care Spending, Utilization, And Quality: A Systematic Review (Rajender Agarwal, Joshua M Liao, Ashutosh Gupta, and Amol S Navathe)</li> <li>• Spending And Quality After Three Years Of Medicare’s Voluntary <b>Bundled Payment For Joint Replacement Surgery</b> (Amol S Navathe, Ezekiel J Emanuel, Atheendar S Venkataramani, Qian Huang, Atul Gupta, C T Dinh, E Z Shan, D Small, N B Coe, E Wang, X Ma, J Zhu, D S Cousins, and J M Liao)</li> <li>• <b>Medicaid Expansion</b> Slowed Rates Of Health Decline For Low-Income Adults In Southern States (John A Graves, Laura A Hatfield, William Blot, Nancy L Keating, and J Michael McWilliams)</li> </ul>

	<ul style="list-style-type: none"> <li>• Effects Of <b>Medicaid Expansion</b> On Postpartum Coverage And Outpatient Utilization (Sarah H Gordon, B D Sommers, I B Wilson, and A N Trivedi)</li> <li>• Among Low-Income Adults Enrolled In <b>Medicaid, Churning</b> Decreased After The Affordable Care Act (Anna L Goldman, and Benjamin D Sommers)</li> <li>• Differences Between <b>Public And Private Hospital Payment Rates</b> Narrowed, 2012–16 (Thomas M Selden)</li> <li>• The Impact Of <b>Decision Aids</b> On Adults Considering <b>Hip Or Knee Surgery</b> (Vanessa B Hurley, Hector P Rodriguez, Stephen Kearing, Yue Wang, Ming D Leung, and Stephen M Shortell)</li> <li>• <b>Medical Professionalism</b> In An Organizational Age: Challenges And Opportunities (David J Rothman, David Blumenthal, and George E Thibault)</li> <li>• <b>Primary Care Physicians’ Role</b> In Coordinating Medical And Health-Related Social Needs In Eleven Countries (Michelle M Doty, Roosa Tikkanen, Arnav Shah, and Eric C Schneider)</li> <li>• The Effect Of <b>Home-Based Hypertension Screening</b> On Blood Pressure Change Over Time In South Africa (Nikkil Sudharsanan, Simiao Chen, Michael Garber, Till Bärnighausen and Pascal Geldsetzer)</li> <li>• <b>Medicare For All: An Analysis Of Key Policy Issues</b> (Micah Johnson, Sanjay Kishore, and Donald M Berwick)</li> <li>• Challenges To <b>Medicare For All</b> Remain Daunting (Austin B Frakt , and Jonathan Oberlander)</li> <li>• Trends In <b>Opioid Prescribing And Self-Reported Pain</b> Among US Adults (Mark Olfson, Shuai Wang, Melanie M Wall, and Carlos Blanco)</li> <li>• <b>Philanthropic Strategy</b> In The Face Of An <b>Opioid Epidemic</b> (Jennifer Chubinski, and Michelle Lydenberg)</li> <li>• <b>To Treat My Patient, I Had To Understand Her Trauma</b> (E Rittenberg)</li> </ul>
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*BMJ Leader*

December 2019 - Volume 3 - 4

URL	<a href="https://bmjleader.bmj.com/content/3/4-0">https://bmjleader.bmj.com/content/3/4-0</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 and management: what’s the difference?</b> (Tim Swanwick)</li> <li>• <b>#UsToo: implicit bias, meritocracy and the plight of black minority leaders</b> in healthcare (Jamiu O Busari)</li> <li>• Brief note about management research on <b>job mobility</b> (Gina Dokko, Mara Gorli)</li> <li>• <b>Hospital performance and clinical leadership: new evidence from Iran</b> (Edris Kakemam, Amanda H Goodall)</li> <li>• <b>Leadership in physiotherapy: experiences of leaders of physiotherapy professional organisations</b> (Emer McGowan, Emma Stokes)</li> <li>• <b>Leadership development in New Zealand and Australian medical schools: needs analysis</b> (Oscar Lyons, Karina McHardy, W Bagg, T Wilkinson)</li> <li>• <b>Leadership in the NHS</b> (Roger Kline)</li> </ul>



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>• Cautionary study on the <b>effects of pay for performance on quality of care</b>: a pilot randomised controlled trial using standardised patients (Ellen Green, Katherine S Peterson, Kathy Markiewicz, Janet O'Brien, Noel M Airing)</li> <li>• Editorial: <b>Best evidence, but does it really change practice?</b> (Richard N de Steiger)</li> <li>• Patient and caregiver priorities in the <b>transition from hospital to home</b>: results from province-wide group concept mapping (Tara Kiran, D Wells, K Okrainec, C Kennedy, K Devotta, G Mabaya, L Phillips, A Lang, P O'Campo)</li> <li>• Editorial: Applying rigour to the interpretation of <b>surgical site infection rates</b> (Victoria Williams, Jerome Leis)</li> <li>• <b>Deprescribing psychotropic medications in children</b>: results of a national qualitative study (Erin R Barnett, Alissa Z Trepman, Hannah A Fuson, Stephanie C Acquilano, Jennifer L McLaren, Steven Woloshin, J K Leyenaar)</li> <li>• <b>Nursing home quality</b>: what matters to patients (Jennifer Gaudet Hefele)</li> <li>• <b>Discharge against medical advice</b>: ‘deviant’ behaviour or a health system quality gap? (Anshula Ambasta, Maria Santana, William A Ghali, Karen Tang)</li> <li>• Why <b>colorectal screening</b> fails to achieve the uptake rates of breast and cervical cancer screening: a comparative qualitative study (Marie Kotzur, Colin McCowan, Sara Macdonald, Sally Wyke, Lauren Gattling, Christine Campbell, David Weller, Emilia Crighton, Robert J C Steele, Kathryn A Robb)</li> <li>• Editorial: <b>Weekend effect</b>: complex metric for a complex pathway (J Bion)</li> <li>• Accuracy of quality measurement for the <b>Hospital Acquired Conditions Reduction Program</b> (Kyle H Sheetz, Andrew Ryan)</li> <li>• Editorial: <b>Medication non-adherence</b>: an overlooked target for quality improvement interventions (Bryony Dean Franklin, Gary Abel, K G Shojania)</li> </ul>

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

URL	<a href="https://academic.oup.com/intqhc/advance-articles">https://academic.oup.com/intqhc/advance-articles</a>
Notes	<p><i>International Journal for Quality in Health Care</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> <li>• Reliability, usability and applicability of the <b>ICD-11</b> beta draft focusing on hand injuries and diseases: results from German field testing (Angelika Eisele, Caroline Dereskewitz, Cornelia Oberhauser, Sandra Kus, Michaela Coenen)</li> <li>• The <b>Ethiopia healthcare quality initiative</b>: design and initial lessons learned (Hema Magge, Abiyou Kiflie, Kojo Nimako, Kathryn Brooks, Sodzi Sodzi-Tetty, Nneka Mobisson-Etuk, Zewdie Mulissa, Befikadu Bitewulign, Mehiret Abate, Abera Biadgo, H Alemu, Y Seman, M Kassa, P Barker, Daniel G Burrsa)</li> <li>• <b>Benchmarking</b> as a quality of care improvement tool for patients with <b>ST-elevation myocardial infarction</b>: an NCDR ACTION Registry experience in Latin America (Adriano Caixeta, Marcelo Franken, Marcelo Katz, Pedro A Lemos, Ivanise Gomes, Paula Ko Yokota, Patrícia V Alliegro, Eduardo E Pesaro, Miguel Cendoroglo Neto, C M Valentine, R G Brindis, M Makdisse)</li> <li>• The role of organizational and professional cultures in <b>medication safety</b>: a scoping review of the literature (Samantha Machen, Yogini Jani, Simon Turner, Martin Marshall, Naomi J Fulop)</li> <li>• Trends and socio-economic inequality in <b>public perceptions of healthcare delivery</b> in South Africa (Frederik Booysen, Tanja Gordon)</li> </ul>

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|  | <ul style="list-style-type: none"> <li>Assessing the <b>performance of indicators during their life cycle</b>: the mixed QUID method (Philippe Michel, Laurie Fraticelli, Pierre Parneix, Valentin Daucourt, Olivier Farges, Isabelle Gasquet, Pauline Occelli, Isabelle Ray-Coquard, Antoine Duclos, For the QUID Workgroup)</li> </ul> |
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## Online resources

### *Clinical Communiqué*

<https://www.thecommuniqués.com/post/copy-of-clinical-communiqu%C3%A9-volume-6-issue-4-december-2019>

Volume 6 Issue 4, December 2019

This issue of *Clinical Communiqué* looks at **acute epiglottitis** with two cases examined that each highlight the very short time in which seemingly benign throat symptoms can progress to fulminant airway catastrophe in adult epiglottitis. Adult epiglottitis is rare, but there are important lessons for everyday practice arising from these cases. This issue includes two expert commentaries that offer guidance on the management of adult epiglottitis, from understanding the disease trends, to recognising the potential complications, and safely managing a difficult airway.

### [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:

- Quality Standard QS17 **Lung cancer in adults** <https://www.nice.org.uk/guidance/qs17>
- NICE Guideline NG148 **Acute kidney injury: prevention, detection and management** <https://www.nice.org.uk/guidance/ng148>

### [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:

- Voucher rewards do not reduce frequency of **cannabis use or relapse** in people with early psychosis
- Twenty mph speed zones reduce the **danger to pedestrians and cyclists**
- Holistic services in **advanced lung disease** can help people cope better with breathlessness
- Longer duration of **urinary catheter placement** associated with an increase in urinary infection
- 'As-needed' combination **asthma inhalers** can be more effective than regular inhaled steroids
- Two commonly used pressure redistributing mattresses are similar for preventing **pressure ulcers** but differ on price
- Very small babies** appear not to be affected by the rate of increasing milk feeds
- Continuing an anticoagulant at home after abdominal surgery cuts **thrombosis risk**
- Taking **blood pressure medications** at night seems best
- Stopping smoking is unlikely to worsen symptoms of **ulcerative colitis**.

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