AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



On the Radar

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On the Radar

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Reports

Avoiding hospital readmissions: the models and the role of primary care Deeble Institute for Health Policy Research Evidence Brief No. 24 Chua D, Johnson T

Canberra: Australian Healthcare & Hospitals Association; 2022. p. 23.

URL	https://ahha.asn.au/publication/health-policy-evidence-briefs/evidence-brief-no-24-	
	avoiding-hospital-readmissions-models	
Notes	This Evidence Brief from the Australian Healthcare and Hospitals Association's	
	Deeble Institute examines approaches to and the role of primary care in reducing or	
	avoiding hospital readmissions. The authors of this brief observe 'Unplanned hospital	
	readmissions indicate suboptimal patient outcomes, care coordination, and quality of	
	care and contribute to significant avoidable healthcare costs'. The authors outline	
	some of the models of care which have been used to prevent unplanned hospital	
	readmissions, including those models that improve transitional care, as well as virtual	
	wards and telehealth. They also examine the role of primary care, specifically general	
	practice, in helping to reduce hospital readmissions.	

For information on the Commission's work on avoidable hospital readmissions, including the 2019 Avoidable Hospital Readmissions: Report on Australian and International indicators, their use and the efficacy of interventions to reduce readmissions, see https://www.safetyandquality.gov.au/our-work/indicators/avoidable-hospital-readmissions

Journal articles

It is time to reinvest in quality improvement collaboratives to support Australian general practice Knight AW, Fraser J, Pond CD

Medical Journal of Australia. 2022;216(9):438-440.

DOI	https://doi.org/10.5694/mja2.51502
Notes	This Perspectives piece in the Medical Journal of Australia observes that while 'Australian
	general practice is among the highest quality in the world' there are 'significant
	stresses, and 'professional isolation and fragmentation of care persist'. The authors
	argue that quality improvement collaboratives, including regional and national-level
	collaboratives, could play a role in supporting and improving general practice in
	Australia.

Management of type 2 diabetes in young adults aged 18–30 years: ADS/ADEA/APEG consensus statement Wong J, Ross GP, Zoungas S, Craig ME, Davis EA, Donaghue KC, et al Medical Journal of Australia. 2022;216(8):422-429.

DOI	https://doi.org/10.5694/mja2.51482
Notes	Announcement via the Medical Journal of Australia of the first Australian consensus statement on the management of type 2 diabetes in young adults. This consensus statement 'considers areas where existing type 2 diabetes guidance, directed mainly towards older adults, may not be appropriate or relevant for the young adult population.' The full statement is available at from the Australian Diabetes Society https://www.diabetessociety.com.au , the Australian Diabetes Educators Association https://www.adea.com.au and the Australian Paediatric Endocrine Group https://www.apeg.org.au

Last days of life: Paediatric and Neonatal Toolkit Coombs S

Australian Nursing & Midwifery Journal. 2022 17 May 2022.

URL	https://anmj.org.au/last-days-of-life-paediatric-and-neonatal-toolkit/
	Piece describing the development and production of the Last Days of Life: Paediatric &
	Neonatal (LDOL: P&N) Toolkit. The toolkit 'was developed to support clinicians when
Notes	caring for a paediatric or neonatal patient in an acute care setting during the last days
	of life.' The toolkit can be viewed on the New South Wales Paediatric Palliative Care
	Programme website https://www.nswppcprogramme.com.au/

BMJ Quality & Safety online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
	BMJ Quality & Safety has published a number of 'online first' articles, including:
	Mortality before and after reconfiguration of the Danish hospital-based
Notes	emergency healthcare system: a nationwide interrupted time series analysis
	(Marianne Flojstrup, Søren Bie Bie Bogh, Mickael Bech, Daniel Pilsgaard
	Henriksen, Søren Paaske Johnsen, Mikkel Brabrand)

International Journal for Quality in Health Care online first articles

URL	https://academic.oup.com/intqhc/advance-articles
Notes	International Journal for Quality in Health Care has published a number of 'online first'
	articles, including:
	• Epidemiology of Falls in 25 Australian Residential Aged Care Facilities:
Notes	A Retrospective Longitudinal Cohort Study Using Routinely Collected Data
	(Nasir Wabe, Karla L Seaman, Amy Nguyen, Joyce Siette, Magdalena Z Raban,
	Peter Hibbert, Jacqueline Close, Stephen R Lord, Johanna I Westbrook)

Online resources

/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 NG218 *Vaccine uptake* in the general population https://www.nice.org.uk/guidance/ng218
- Quality Standard QS145 Vaccine uptake in under 19s https://www.nice.org.uk/guidance/qs145
- NICE Guideline NG191 COVID-19 rapid guideline: managing COVID-19 https://www.nice.org.uk/guidance/ng191

[USA] AHRQ Perspectives on Safety

https://psnet.ahrq.gov/psnet-collection/perspectives

The US Agency for Healthcare Research and Quality (AHRQ) publishes Perspectives on Safety essays. Recent essays include:

• Identifying Safety Events in the Prehospital Setting —focuses on the measuring and monitoring of patient safety in the prehospital setting, which brings a unique set of challenges and opportunities. Emergency medical services (EMS) personnel provide care outside of a healthcare facility in complex environments. The unpredictability of the scene, environmental issues like lighting (or lack thereof), and the need to make decisions for time-sensitive conditions with often incomplete information are just a few of the factors that contribute to the challenge of providing care in the prehospital setting.

https://psnet.ahrq.gov/perspective/identifying-safety-events-prehospital-setting

COVID-19 resources

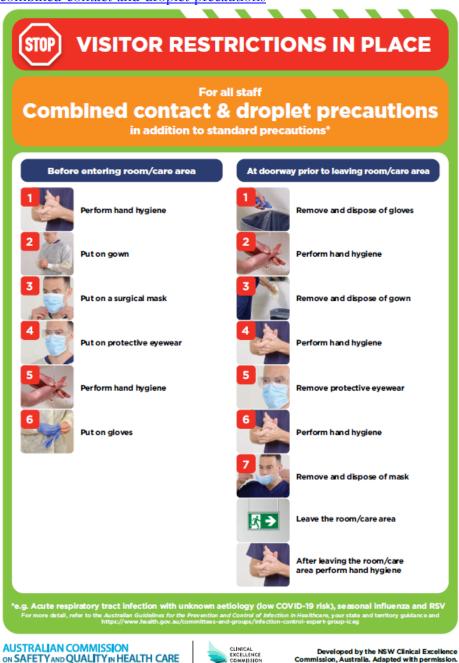
https://www.safetyandquality.gov.au/covid-19

The Australian Commission on Safety and Quality in Health Care has developed a number of resources to assist healthcare organisations, facilities and clinicians. These and other material on COVID-19 are available at https://www.safetyandquality.gov.au/covid-19

These resources include:

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- OVID-19 infection prevention and control risk management This primer provides an overview of three widely used tools for investigating and responding to patient safety events and near misses. Tools covered in this primer include incident reporting systems, Root Cause Analysis (RCA), and Failure Modes and Effects Analysis (FMEA).
 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance
- Poster Combined contact and droplet precautions
 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/poster-combined-contact-and-droplet-precautions



Poster – Combined airborne and contact precautions
https://www.safetyandquality.gov.au/publications-and-resources/resource-library/poster-combined-airborne-and-contact-precautions



VISITOR RESTRICTIONS IN PLACE

For all staff

Combined airborne & contact precautions

in addition to standard precautions

Before entering room/care zone



Perform hand hygiene



Put on gown



Put on a particulate respirator (e.g. P2/N95) and perform fit check



Put on protective eyewear



Perform hand hygiene



Put on gloves

At doorway prior to leaving room/care zone



Remove and dispose of gloves



Perform hand hygiene



Remove and dispose of gown



Leave the room/care zone



Perform hand hygiene (in an anteroom/outside the room/care zone)



Remove protective eyewear (in an anteroom/outside the room/care zone)



Perform hand hygiene (in an anteroom/outside the room/care zone)



Remove and dispose of particulate respirator (in an anteroom/outside the room/care zone)



Perform hand hygiene

KEEP DOOR CLOSED AT ALL TIMES

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The content of this poster was informed by resources developed by the NSW Clinical Escalience Commission and the Australian Government Infection Control Expert Group. Photos reproduced with permission of the NSW Clinical Escalence Commission.

- Environmental Cleaning and Infection Prevention and Control www.safetyandquality.gov.au/environmental-cleaning
- COVID-19 infection prevention and control risk management Guidance
 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance
- Safe care for people with cognitive impairment during COVID-19
 https://www.safetyandquality.gov.au/our-work/cognitive-impairment/cognitive-impairment-and-covid-19
- Stop COVID-19: Break the chain of infection poster https://www.safetyandquality.gov.au/publications-and-resources/resource-library/break-chain-infection-poster-a3



- FAQs for clinicians on elective surgery https://www.safetyandquality.gov.au/node/5724
- FAQs for consumers on elective surgery https://www.safetyandquality.gov.au/node/5725
- COVID-19 and face masks Information for consumers
 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-and-face-masks-information-consumers

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COVID-19 and face masks

Should I use a face mask?

Wearing face masks may protect you from droplets (small drops) when a person with COVID-19 coughs, speaks or sneezes, and you are less than 1.5 metres away from them. Wearing a mask will also help protect others if you are infected with the virus, but do not have symptoms of infection.

Wearing a face mask in Australia is recommended by health experts in areas where community transmission of COVID-19 is high, whenever physical distancing is not possible. Deciding whether to wear a face mask is your personal choice. Some people may feel more comfortable wearing a face mask in the community.

When thinking about whether wearing a face mask is right for you, consider the following:

- Face masks may protect you when it is not possible to maintain the 1.5 metre physical distance from other people e.g. on a crowded bus or train
- Are you older or do you have other medical conditions like heart disease, diabetes or respiratory illness? People in these groups may get more severe illness if they are infected with COVID-19
- Wearing a face mask will reduce the spread of droplets from your coughs and sneezes to others (however, if you have any cold or flu-like symptoms you should stay home)
- A face mask will not provide you with complete protection from COVID-19. You should also do all of the other things listed below to prevent the spread of COVID-19

What can you do to prevent the spread of COVID-19?

Stopping the spread of COVID-19 is everyone's responsibility. The most important things that you can do to protect yourself and others are to:

- Stay at home when you are unwell, with even mild respiratory symptoms
- Regularly wash your hands with soap and water or use an alcohol-based hand rub
- Do not touch your face
- Do not touch surfaces that may be contaminated with the virus
- Stay at least 1.5 metres away from other people (physical distancing)
- Cover your mouth when you cough by coughing into your elbow, or into a tissue. Throw the tissue away immediately.



National COVID-19 Clinical Evidence Taskforce

https://covid19evidence.net.au/

The National COVID-19 Clinical Evidence Taskforce is a collaboration of peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19. The taskforce is undertaking continuous evidence surveillance to identify and rapidly synthesise emerging research in order to provide national, evidence-based guidelines and clinical flowcharts for the clinical care of people with COVID-19. The guidelines address questions that are specific to managing COVID-19 and cover the full disease course across mild, moderate, severe and critical illness. These are 'living' guidelines, updated with new research in near real-time in order to give reliable, up-to-the minute advice to clinicians providing frontline care in this unprecedented global health crisis.

COVID-19 Critical Intelligence Unit

https://www.aci.health.nsw.gov.au/covid-19/critical-intelligence-unit

The Agency for Clinical Innovation (ACI) in New South Wales has developed this page summarising rapid, evidence-based advice during the COVID-19 pandemic. Its operations focus on systems intelligence, clinical intelligence and evidence integration. The content includes a daily evidence digest, a COVID status monitor, a risk monitoring dashboard and evidence checks on a discrete topic or question relating to the current COVID-19 pandemic. There is also a 'Living evidence' section summarising key studies and emerging evidence on **COVID-19 vaccines** and **SARS-CoV-2 variants**. The most recent updates include:

- *Emerging variants* What is the available evidence for emerging variants?
- Chest pain or dyspnoea following COVID-19 vaccination What is evidence for chest pain or dyspnoea following COVID-19 vaccination?
- Cardiac investigations and elective surgery post-COVID-19 What is evidence for cardiac investigations and elective surgery post-COVID-19?
- *Breathlessness post COVID-19* How to determine those patients who present with ongoing breathlessness in need of urgent review or intervention due to suspected pulmonary embolus?
- *COVID-19 pandemic and influenza* What is the evidence for COVID-19 pandemic and influenza?
- *Post-acute sequelae of COVID-19* What is the evidence on the post-acute sequelae of COVID-19?
- Budesonide and aspirin for pregnant women with COVID-19 What is the evidence for the use of Budesonide for pregnant women with COVID-19? What is the evidence for aspirin prophylaxis for pre-eclampsia in pregnant women with a COVID-19 infection?
- COVID-19 vaccines in Australia What is the evidence on COVID-19 vaccines in Australia?
- COVID-19 pandemic and wellbeing of critical care and other healthcare workers Evidence in brief on the impact of the COVID-19 pandemic on the wellbeing of critical care and other healthcare workers.
- **Surgery post COVID-19** What is the evidence for the timing of surgery, and outcomes following surgery, for people who have recovered from COVID-19?
- *Disease modifying treatments for COVID-19 in children* What is the evidence for disease modifying treatments for COVID-19 in children?
- *Mask type for COVID-19 positive wearer* What is the evidence for different mask types for COVID-19 positive wearers?
- *Post acute and subacute COVID-19 care* What published advice and models of care are available regarding post-acute and subacute care for COVID-19 patients?
- *Hospital visitor policies* What is the evidence for hospital visitor policies during and outside of the COVID-19 pandemic?

• Surgical masks, eye protection and PPE guidance – What is the evidence for surgical masks in the endemic phase in hospitals and for eyewear to protect against COVID-19?

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