On the Radar

Issue 582
7 November 2022

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On the Radar
Editor: Dr Niall Johnson niall.johnson@safetyandquality.gov.au
Contributors: Niall Johnson

Reports

Health and Care LGBTQ+ Inclusion Framework
Health and Care LGBTQ+ Leaders Network, NHS Confederation
London: NHS Confederation; 2022. p. 44.

| URL | The NHS Confederation in the UK has published this framework aimed at enabling health and care leaders to create inclusive environments for LGBTQ+ staff and service users. The framework comprises six key pillars of inclusivity that organisations should aim to build to create and maintain inclusive cultures: 1. We have visible leadership and confident staff 2. We have a strong knowledge base 3. We are non-heteronormative and non-cisnormative in everything we do 4. We take responsibility for collecting and reporting data 5. We listen to our service users 6. We proactively seek out partners to co-deliver services. |
| Notes |  |
Developing learning health systems in the UK: Priorities for action

Hardie T, Horton T, Thornton-Lee N, Home J, Pereira P
London: The Health Foundation; 2022. p. 79.

The Health Foundation in the UK has produced this research report looking at how ‘learning health systems’ may be encouraged. A learning health system is described as ‘a team, provider or group of providers that, working with a community of stakeholders, has developed the ability to learn from the routine care it delivers and improve as a result – and, crucially, to do so as part of business as usual. Done right, LHSs are not a separate agenda, but about embedding improvement into the process of delivering health care.’ The authors say that the report ‘aims to demystify the concept of LHSs and explores four important areas especially relevant to LHSs where action can lead to tangible progress: learning from data, harnessing technology, nurturing learning communities and implementing improvements to services.’


Figure 1: Common stages of the learning and improvement cycle

Notes
Journal articles

The debrief imperative: building teaming competencies and team effectiveness
Tannenbaum SI, Greilich PE
BMJ Quality & Safety. 2022 [epub].
DOI https://dx.doi.org/10.1136/bmjqs-2022-015259

Editorial in BMJ Quality & Safety reflecting on a prospective observational, microanalytic interaction analysis study that observed clinicians participating in healthcare team debriefings following high-risk anaesthetic scenarios in simulation-based team training (https://dx.doi.org/10.1136/bmjqs-2021-014393).
The authors of this editorial offer ‘A few universal team debriefing guidelines’ [emphasis in the original]:

- Minimise the time between performance and feedback: given human memory constraints, it is advantageous to conduct a team debrief closer in time to the experience being discussed.
- Cover both teamwork and taskwork factors: teams in all professions gravitate towards discussing taskwork (eg, clinical) factors, so the debrief process should explicitly guide them to consider teamwork factors.
- Provide adequate structure: structured debriefs are more effective than free form debriefs, although the appropriate structure is contingent on the context of the debrief.
- Create psychological safety: ensure participants feel it is safe to ask questions, admit concerns, voice alternative perspectives and share constructive feedback.
- Reflect backward and look forward: explore and synthesise what happened (backward reflection) and then identify lessons learnt, agreements and/or action plans (look forward).
- Balance inquiry and advocacy: the debrief leader should solicit input from the group (inquiry) and where appropriate offer their own insights (advocacy), although the relative emphasis may need to vary for different debriefing purposes.
- Explore how the team worked (process feedback) and not simply the results of their work (outcome feedback): focusing on outcomes either too early or too frequently in a debrief can reduce team learning.’

Notes

A new issue of The Journal for Healthcare Quality (JHQ) has been published. Articles in this issue of The Journal for Healthcare Quality (JHQ) include:

- Standardizing Screening for Preeclampsia Risk Factors to Improve Prescribing of Low-Dose Aspirin (Adriane Burgess, Kara Dalke, Julia Wheeling, Kelley Clark)
- Internal Operational Metrics and Center for Medicare and Medicaid Services Hospital Compare Quality Ratings (Michele Thornton, Sarah Bonzo, Raihan Khan, Leah Souza)
- Reasons for Surgical Delay in Patients With Hip Fracture (Yaniv Yonai, Merav Ben Natan, Nurit Shadmi, Yaron Berkovich, Yaniv Steinfeld)
Patient Experience Journal
Volume 9, Issue 3, 2022

URL: https://pxjournal.org/journal/vol9/iss3/

A new issue of the Patient Experience Journal (PXJ) has been published. Articles in this issue of the Patient Experience Journal (PXJ) include:

- Editorial: Navigating the “Perfect Storm”: Leading with a commitment to human experience (Jason A Wolf)
- How an intake conversation in mental healthcare nearly led to suicide (Lies Sercu)
- Living with brain cancer: From researcher to patient (Stephen P Chelko and Daniel L Fay)
- Living with Multiple Sclerosis as a former marathon runner: Impact of attitude and past behaviour on self-care maintenance and perseverance (Michael Stephanou)
- The importance of patient engagement in the management of giant cell arteritis (Nikhil Patil, Max Gelkopf, Santano Rodrigues, and Arun Sundaram)
- Rare and undiagnosed: Daunting challenges for patients, doctors, and researchers alike (Dwane UnRuh)
- Which patient experiences are you capturing? Investigating differences in patient experience drivers by race/ethnicity and survey mode (Meike Eilert, Toni Land, and Jonathan Shafer)
- The intersection of diversity, equity, and inclusion with pediatric Patient and Family Advisory Councils (Ndidi I Unaka, Mindy Hoang, Jesse Hsu, Pam Dardess, Carlos T Casillas, Meghan Fanta, Deborah L Dokken, and A F Beck)
- Children’s experiences of hospitalization over time: An evaluation of using poetry and creative writing by children to assess their experiences of hospitalization (David Wood)
- The impact of follow-up calls after a pediatric emergency department visit (Joseph R Mijares III and Sephora Morrison)
- Patient experience of the Electronic Health Record (EHR) in a maternity unit in Ireland (Joye McKerman, Paul Corcoran, and Richard A Greene)
- Improving the accuracy of Interactive Voice Response (IVR) Technology for pediatric experience scores (Elizabeth Spaargaren; Abigail Kozak; Cara Herbener; and Barbara Lawlor Burke)
- Technology about me without me: An examination of the relationship between patient-facing technology and patient experience (Geoffrey A Silvera and Courtney N Haun)
- Outpatient visit modality and parallel patient satisfaction: A multi-site cohort analysis of telemedicine and in-person visits during the COVID-19 pandemic (Nicole J Ploog, Jordan Coffey, I Wilshusen, and b demaerschalk)
Determinants of ambulatory patients’ satisfaction with encounter at core service stations in a tertiary hospital of a developing country (Ndubuisi Emuka Opurum, Ogaji Daprim, and Felix Emeka Anyiam)

Going From an Academic Medical Center to a Community Hospital: Patient Experiences with Transfers Going from an academic medical center to a community hospital: Patient experiences with transfers (Alexander Kazberouk, Nicole Boyd, Sandra Oreper, Michael Chang, James D Harrison, Priya A Prasad, and Ari Hoffman)

MyStay – Development of nurse-facilitated condition-specific multimedia resources to facilitate patient participation in postoperative care (Jo McDonall, Anastasia F Hutchinson, Natalie Heynesbergh, Bernice Redley, Richard de Steiger, Damien Khaw, and Mari Botti)

Patients’ perceptions and knowledge of source isolation for multi-resistant organisms in an Australian metropolitan hospital: A bedside interview with questionnaire study (Alison Smith and Gillian Ray-Barruel)

Developing a patient satisfaction measure for imaging-based patient information during clinical consultations (Hindrik J J Pinkster, Anne M L Meesters, Frank F A Jpma, Erik Taal, Joep Kraeima, and P M Ten Klooster)


Public satisfaction with COVID-19 vaccination program in Saudi Arabia (Muhammad Waseem Shahzad, Adel Al-Shabaan, Ammar Mattar, Bilal Salameh, E M Alturaiki, W A AlQarni, K A AlHarbi, and T M Alhumaidany)

Non-COVID-19 hospitalizations: patients’ experiences during the COVID-19 pandemic (Julia Patrick)

A patient perspective on information provision during the care path of Lentigo Maligna (Louis P Ter Meer, M de Mul, J Hazelzet, and C van Eijk)

Enhancing patient-centered care for limited English proficiency patients through Tell Me More®: A student-driven initiative to explore the patient as a person and develop students’ communication skills (Angela Liu, Alicia W Leong, Alice Fornari, and Taranjeet Kalra Ahuja)

Cancer Experience of Care Improvement Collaboratives in the National Health Service in England (Claire Marshall, Helen Bulbeck, Ruth Hudson, Bruce Johnston, S Juwle, D McNally, B Talwar, L Young, and E Woodward)

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**Healthcare Quarterly**

Volume 25, Number 3, 2022

**URL**

https://www.longwoods.com/publications/healthcare-quarterly/26938

A new issue of Healthcare Quarterly has been published. Articles in this issue of Healthcare Quarterly include:

- Dangerous “Toys”: The Burden of Non-Powdered Firearm Injuries in Canadian Children and Youth (Natasha Ruth Saunders, Misty Pratt and Charlotte Moore Hepburn)

- Impact of the COVID-19 Pandemic on Virtual Care: A Major Shift for Physicians and Patients (Liudmila Husak, Vanessa Sovran, Alison Ytsma and Marc Comeau)

- Toward an Integrated Strategy for Care in the Home for Frail Elders (Neil Seeman)
• Identifying Opportunities for Greenhouse Gas Reductions and Cost Savings in Hospitals: A Knowledge Translation Tree (Myles Sergeant, Richard Webster, Linda Varangu, Anita Rao, Sujaneandasamy, Madeline Rampton, Neha Mathur and Ana Hategan)

• Using Trusted Relationships and Community-Led Approaches to Promote COVID-19 Vaccine Confidence and Uptake across Ontario (Sara Bhatti, Josephine Pham and Jennifer Rayner)

• Evaluating Toronto Hospitals’ COVID-19 Visitor Policy Using Accountability for Reasonableness (Vivian Tam, R Greenberg and P Allatt)

• Factors that Delay Transfers from Acute Care to a Local Palliative Care Unit (Jennifer Bottoms, Amy Nolen, Jennifer Moore, Sarah Torabi, Sandra De Costa, Heather Mays and Kalli (Kalliopi) Stilos)

• Hôpital Montfort’s Postnatal Care-at-Home Program: An Innovative Model for Early Postnatal Care (Ann Salvador, Wendy Peterson, Julie Nault, Anne Gravelle, David McCoubrey, Laurence Tsonba, Dean Led uc, Teresa Bandrowska, Carolyn Crowley, Josette Messier and Daniel Moreau)

• Understanding the Use of Patient Rooms to Inform Family Zone Implementation: A Qualitative Study (Madeline E. Shivgulam, Mai Landau, Kari Steiner, Lee Verweel and Martha Harvey)

• Create and Sustain a Culture of Curiosity: A Case Study of a Home Healthcare Organization in Toronto (Sandra McKay, E King and K Nichol)

• Creation of a Clinical Demonstration Unit: Embedding Academic Research into Point of Care in a Geriatric Unit (Sheri Horsburgh, Sanaz Riahi, Tim Pauley, Sayani Paul, Andra Duff-Woskosky, Chaitali Desai, Wally J Bartfay, Brenda Gamble and Jennifer Freeman)

Health Expectations
Volume 25, Issue 5, October 2022

A new issue of Health Expectations has been published. Articles in this issue of Health Expectations include:

• Disrupting patterns of exclusion in participatory spaces: Involving people from vulnerable populations (Anne MacFarlane, Joseph LeMaster)

• A qualitative evaluation of coproduction of research: ‘If you do it properly, you will get turbulence’ (Joanne Deborah Worsley, Mick McKeown, Timothy Wilson, Rhiannon Corcoran)

• Enhancing community weight loss groups in a low socioeconomic status area: Application of the COM-B model and Behaviour Change Wheel (Nia Coupe, Sarah Cotterill, Sarah Peters)

• Examining community mental health providers’ delivery of structured weight loss intervention to youth with serious emotional disturbance: An application of the theory of planned behaviour (Thomas L Wykes, Andrea S Worth, Kathryn A Richardson, Tonja Woods, M Longstrehth, C L McKibbin)

• Improving primary health care quality for refugees and asylum seekers: A systematic review of interventional approaches (Maha P Iqbal, Ramesh Walpola, Ben Harris-Roxas, Jiadai Li, Stephen Mears, John Hall, R Harrison)

• Beyond the control of the care home: A meta-ethnography of qualitative studies of Infection Prevention and Control in residential and nursing homes for older people (G Daker-White, M Panagioti, S Giles, T Blakeman, V Moore, A Hall, P P Jones, O Wright, B Shears, N Tyler, S Campbell)
<table>
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<tr>
<th>Title</th>
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<td>Addressing social inequity through improving relational care: A social-ecological model based on the experiences of migrant women and midwives in South Wales</td>
<td>Laura Goodwin, Aled Jones, Billie Hunter</td>
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<td>Development and validation in Ecuador of the EPD Questionnaire, a diabetes-specific patient-reported experience and outcome measure</td>
<td>Jimmy Martin-Delgado, Aurora Mula, Mercedes Guilbert, Carlos Solís, L Gómez, G R Amat, J Joaquin, EPD Research Group</td>
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<td>Reconciling validity and challenges of patient comfort and understanding: Guidelines to patient-oriented questionnaires</td>
<td>Catherine Hudon, Alya Danish, Mireille Lambert, Dana Howse, Monique Cassidy, Olivier Dumont-Samson, Judy Porter, Donna Rubenstein, Véronique Sabourin, Shelley Doucet, Vivian R Ramsden, Mathieu Bisson, Charlotte Schwarz, M-C Chouinard</td>
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<td>Perspectives of substitute decision-makers and staff about person-centred physical activity in long-term care</td>
<td>Charlene H Chu, Amanda M L Quan, Freya Gandhi, Katherine S McGilton</td>
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<td>Experiences, perceptions and expectations of health services amongst marginalized populations in urban Australia</td>
<td>Kirsten Baker, Jon Adams, Amie Steel</td>
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<td>Codesigning person-centred quality indicators with diverse communities: A qualitative patient engagement study</td>
<td>Kimberly Manalili, Fartoo M Siad, Marichu Antonio, Bonnie Lashewicz, Maria J Santana</td>
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<td>Capturing learning from public involvement with people experiencing homelessness to help shape new physiotherapy research: Utilizing a reflective model with an under-served, vulnerable population</td>
<td>Jo Dawes, Duncan S Barron, Laurence E Lee</td>
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<td>How might diabetes organisations address diabetes-related stigma? Findings from a deliberative democratic case study</td>
<td>Heath Pillen, Paul R Ward</td>
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<td>Living with a genetic, undiagnosed or rare disease: A longitudinal journalling study through the COVID-19 pandemic</td>
<td>Malia Byun, Hollie Feller, Monica Ferrie, Stephanie Best</td>
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<td>A self-portrait: Design opportunities for a tool that supports children's involvement in brain-related health care</td>
<td>Paul Meulendijks, Neelijte E M van Haren, Mathieu A Gielen, Marie-Lise C van Veelen-Vincent</td>
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<td>Ask us! Adjusting experience-based codesign to be responsive to people with intellectual disabilities, serious mental illness or older persons receiving support with independent living</td>
<td>Marjolijn Heerings, Hester van de Bovenkamp, Mieke Cardol, Roland Bal</td>
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<td>Perceptions and behaviour of pregnant women in socioeconomic deprivation in rural areas. A qualitative study in France</td>
<td>Aurélie Caballot, Marine Lavarenne, Julie Vaure Chiffre, Frédéric Tessieres, Mathilde Vicard Olagne, Catherine Laporte, Philippe Vorilhon</td>
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<td>A codevelopment process to advance methods for the use of patient-reported outcome measures and patient-reported experience measures with people who are homeless and experience chronic illness</td>
<td>Erin E Donald, Kara Whitlock, Tracy Dansereau, D J Sands, D Small, K I Stajduhar</td>
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<td>Network-building by community actors to develop capacities for coproduction of health services following reforms: A case study</td>
<td>Susan Usher, Jean-Louis Denis</td>
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• Introducing and integrating **perinatal mental health screening**: Development of an equity-informed evidence-based approach (Rebecca Blackmore, J A Boyle, K M Gray, S Willey, N Highet, M Gibson-Helm)

• **Embedding lived experience into mental health academic research organizations**: Critical reflections (Lisa D Hawke, Natasha Y Sheikhan, Nev Jones, Mike Slade, Sophie Soklaridis, Samantha Wells, David Castle)

• Combining ethnography and conversation analysis to explore interaction in dementia care settings (John Chatwin, Katherine Ludwin, Isabelle Latham)

• The Ecology of Engagement: **Fostering cooperative efforts in health with patients and communities** (Antoine Boivin, Vincent Dumez, Geneviève Castonguay, Alexandre Berkesse)

• The ultimate question? Evaluating the use of **Net Promoter Score in healthcare**: A systematic review (Corey Adams, Ramesh Walpola, Anthony M Schembri, Reema Harrison)

• Patient preferences and choices as a reflection of trust—A cluster analysis comparing postsurgical perceptions in a private and a public hospital (Royi Barnea, Aviad Tur-Sinai, Osnat Levitzion-Korach, Yossi Weiss, O Tal)

• Participants' experiences of the management of screen-detected complex polyps within a structured bowel cancer screening programme (Lenira Semedo, Ardiana Gjini, Sunil Dolwani, Kate J Lifford)


• The development of a **culturally sensitive educational video**: How to facilitate informed decisions on cervical cancer screening among Turkish- and Moroccan-Dutch women (Nora Hamdiui, Martine P A Bouman, Mart L Stein, Rik Crutzen, Damla Keskin, Amina Afrian, Jim E van Steenbergen, Maria E T C van den Muijsenbergh, Aura Timen)

• Patients' experiences of, and engagement with, **remote home monitoring** services for COVID-19 patients: A rapid mixed-methods study (Holly Walton, Cecilia Vindrola-Padros, Nadia E Crellin, Manbinder S Sidhu, Lauren Herlitz, Ian Litchfield, Jo Ellins, Pei Li Ng, Efthalia Massou, S M Tomini, N J Fulop)

• Contributors are representative, as long as they agree: How confirmation logic overrides effort to achieve synthesis in applied health research (Sarah E Knowles, Pat Walkington, Jackie Flynn, Sarah Darley, R Boaden, R Kislov)

• Developing a **community facilitator-led participatory learning and action women's group intervention to improve infant feeding**, care and dental hygiene practices in South Asian infants: NEON programme (Logan Manikam, Shereen Allamah, Isabel-Catherine Demel, Ummi Aisha Bello, Maryan Naman, Michelle Heys, Neha Batura, Clare Llewellyn, Andrew Hayward, Rajalakshmi Lakshman, Jenny Gilmour, Kelley Webb Martin, Carol Irish, Chanel Edwards, Mfon Archibong, Corinne Clarkson, Mary Marsh, Daley Delceta, Amanda Nutkins, Lily Islam, Seema Bajwa, Sabiha Malek, Jasvir Bhachu, Geromini Pushpakanthan, Monica Lakanpalpaul)

• **Infection prevention and control across the continuum of COVID-19 care**: A qualitative study of patients', caregivers' and providers' experiences
Design details for overdose education and take-home naloxone kits: Codesign with family medicine, emergency department, addictions medicine and community (Kate Sellen, Nick Goso, Laura Halleran, Alison Mulvale-Fletcher, Felipe Sarmiento, Filiphe Ligabue, Curtis Handford, Michelle Klaiman, Geoffrey Milos, Amy Wright, Mercy Charles, Ruby Sniderman, Richard Hunt, Janet A Parsons, Pamela Leece, Shaun Hopkins, Rita Shahin, Peter Jūni, Laurie Morrison, Douglas M Campbell, C Strike, A Orkin, SOONER Investigators)

Blood tests in primary care: A qualitative study of communication and decision-making between doctors and patients (Jessica Watson, Penny F Whiting, Chris Salisbury, William T Hamilton, Jonathan Banks)

Exploring the long-term psychosocial impact of paediatric haematopoietic stem cell transplantation for nonmalignant diseases (Joëll E Bense, Lieke ter Welle, Hilda Mekelenkamp, Marieke Schimmel, Marloes Louwerens, Arjan C Lankester, Arwen H Pieterse, Anne P J de Pagter)

Implementing public involvement throughout the research process—Experience and learning from the GPs in EDs study (Bridie Angela Evans, Andrew Carson-Stevens, Alison Cooper, Freya Davies, Michelle Edwards, Barbara Harrington, Julie Hepburn, Tom Hughes, Delyth Price, Niroshan A Siriwardena, Helen Snooks, Adrian Edwards)

Men's experiences of receiving a prostate cancer diagnosis after opportunistic screening—A qualitative descriptive secondary analysis (Linda Gellerstedt, Ann Langius-Eklöf, N Kelmendi, K Sundberg, Á G. Craftman)

Development and psychometric testing of the patient participation in bedside handover survey (Georgia Tobiano, Andrea P Marshall, Therese Gardiner, Kim Jenkinson, Margaret Shapiro, Michael Ireland)

Experiences of patients with heart failure with medicines at transition intervention: Findings from the process evaluation of the Improving the Safety and Continuity of Medicines management at Transitions of care (ISCOMAT) programme (Catherine Powell, Hanif Ismail, Maureen Davis, Andrew Taylor, Liz Breen, Beth Fylan, Sarah L Alderson, Chris P Gale, Ian Kellar, Jonathan Silcock, David P Alldred)

Nursing staff facilitate patient participation by championing the patient’s perspective: An action research study in spinal cord injury rehabilitation (Randi Steensgaard, Raymond Kolbaek, Sanne Angel)

Generational perspective on asthma self-management in the Bangladeshi and Pakistani community in the United Kingdom: A qualitative study (Salina Ahmed, Hilary Pinnock, Anna Dowrick, Liz Steed)


Telehealth in a paediatric developmental metropolitan assessment clinic: Perspectives and experiences of families and clinicians (Chan Esther, Ong Natalie, Barnett Diana, Hodge Marie Antoinette, Drevensek Suzi, Williamsz Marcia, Silove Natalie)

Mixed methods evaluation to explore participant experiences of a pilot randomized trial to facilitate self-management of people living with stroke: Inspiring virtual enabled resources following vascular events (iVERVE) (Tara)
### BMJ Quality & Safety online first articles

**URL**: https://qualitysafety.bmj.com/content/early/recent

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<th>BMJ Quality &amp; Safety has published a number of ‘online first’ articles, including:</th>
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<td>• Editorial: Monitoring <strong>patients’ sexual orientation and gender identity</strong>: Can we ask? Should we ask? How do we ask? (Kathryn Almack)</td>
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<td>• Editorial: <strong>Reconfiguring emergency and acute services</strong>: time to pause and reflect (Louella Vaughan, John Browne)</td>
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<td>• Editorial: <strong>Surgeons and systems working together to drive safety and quality</strong> (Robert B Hawkins, Brahmajee K Nallamothu)</td>
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<td>• Editorial: <strong>The debrief imperative: building teaming competencies and team effectiveness</strong> (Scott I Tannenbaum, Philip E Greilich)</td>
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<td>• Effectiveness of a multifaceted quality improvement intervention to improve <strong>patient outcomes after total hip and knee arthroplasty</strong>: a registry nested cluster randomised controlled trial (Peter van Schie, Leti van Bodegom-Vos, Tristan M Zijdeman, Rob G H H Nelissen, Perla J Marang-van de Mheen IQ Joint study group)</td>
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### International Journal for Quality in Health Care online first articles

**URL**: https://academic.oup.com/intqhc/advance-articles

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<td>• A qualitative study exploring challenges and solutions to negotiating <strong>goals of care at the end of life in hospital settings</strong> (Kim Devery, Megan Winsall, Deb Rawlings)</td>
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### Online resources

[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:

• **Infection Prevention and Control for the Emergency Medical Services and 911 Workforce**
COVID-19 resources
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:

- **COVID-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).

- **Poster – Combined contact and droplet precautions**
VISITOR RESTRICTIONS IN PLACE

For all staff
Combined airborne & contact precautions
in addition to standard precautions

Before entering room/care zone

1. Perform hand hygiene
2. Put on gown
3. Put on a particulate respirator (e.g. P2/N95) and perform fit check
4. Put on protective eyewear
5. Perform hand hygiene
6. Put on gloves

At doorway prior to leaving room/care zone

1. Remove and dispose of gloves
2. Perform hand hygiene
3. Remove and dispose of gown
4. Leave the room/care zone
5. Perform hand hygiene (in an anteroom/outside the room/care zone)
6. Remove protective eyewear (in an anteroom/outside the room/care zone)
7. Perform hand hygiene (in an anteroom/outside the room/care zone)
8. Remove and dispose of particulate respirator (in an anteroom/outside the room/care zone)
9. Perform hand hygiene

KEEP DOOR CLOSED AT ALL TIMES

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Poster – Combined airborne and contact precautions

On the Radar Issue 582
- Environmental Cleaning and Infection Prevention and Control
- COVID-19 infection prevention and control risk management – Guidance
  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
  infection-poster-a3

Stop COVID-19
Break the chain of infection

STAY HOME
if you feel unwell and get tested

VACCINATE
and keep up-to-date

1.5m
PHYSICAL DISTANCING
when outside your home

WEAR
a mask as recommended

CLEAN
hands frequently

CLEAN
frequently touched surfaces

COVER
coughs & sneezes with a tissue or your inner elbow and place used tissues in bin immediately

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE
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.

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
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

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:

- **Paxlovid** – What is the evidence for Paxlovid for treatment of COVID-19?
- **Molnupiravir** – What is the evidence for and regulatory context of molnupiravir for treatment of COVID-19?
- **Eating disorders and COVID-19** – What is the impact of the COVID-19 pandemic on the prevalence of eating disorders?
- **Long COVID** – What is the evidence on the prevalence, presentation and management of long-COVID?
- **Oseltamivir (Tamiflu) use in healthcare settings** – What is the evidence that use of oseltamivir in healthcare workers with a symptomatic influenza diagnosis result in an earlier return to work and reduced absenteeism? What is the evidence that use of oseltamivir in adults and children with symptomatic influenza reduces influenza transmission in health care settings?
- **Alternative models of care for acute medical conditions** – What is the evidence on alternative models of care for managing patients with acute medical conditions outside of emergency or inpatient hospital settings?
- **Exercise and long COVID** – Is exercise helpful in individuals with long COVID? Is post-exertional symptom exacerbation a risk in long COVID?
- **Influenza and seasonal prophylaxis with oseltamivir** – What is the place or evidence for seasonal influenza prophylaxis (such as taking oseltamivir for 10 to 12 weeks continuously) in healthcare and aged care settings?
- **Rapid access models of care for respiratory illnesses** – What is the evidence for rapid access models of care for respiratory illnesses, especially during winter seasons, in emergency departments?
- **Current and emerging patient safety issues during COVID-19** – What is the evidence on the current and emerging patient safety issues arising from the COVID-19 pandemic?
- **Post-acute sequelae of COVID-19** – What is the evidence on the post-acute sequelae of COVID-19?
- **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?

• **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?


• **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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