AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



On the Radar

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On the Radar

Editor: Dr Niall Johnson

Contributors: Niall Johnson, Maushmi Powar

Newly released PREM - AHPEQS Parent

https://www.safetyandquality.gov.au/our-work/indicators-measurement-and-reporting/patient-experience

A free patient-reported experience measure (PREM) tool is now available for hospitals to ask the parents and carers of children admitted to hospital about their experience of care. The Australian Hospital Patient Experience Question Set for parents and carers (AHPEQS-Parent) was developed and validated by the Perth Children's Hospital in partnership with Australian Commission on Safety and Quality in Health Care.

For more information on AHPEQS-Parent, PREMs and how to implement them, visit the Commission's newly updated <u>Patient Experience webpage</u> and watch the Person-centred Care in Practice webinar episode, <u>Giving consumers a voice in paediatric care</u>.

The development of AHPEQS-Parent has been described in a published journal article (Nelson et al): Nelson HJ, Pienaar C, McKenzie K, Williams AM, Swaminathan G, Mörelius E Development of the Australian hospital patient experience question set for parents. Collegian.

2023;30(2):213-221.

https://doi.org/10.1016/j.colegn.2022.09.003

The article outlines the process that was undertaken to adapt and validate AHPEQS (Australian Hospital Patient Experience Question Set) for parents and carers of children admitted into hospitals. The two main qualitative categories of care identified were 'parent experience' and 'children being heard'. Emotional support was also identified as an integral aspect of parent experience. AHPEQS-Parent provides a validated tool which reflects the unique experience of parents and carers to facilitate consistent monitoring and improvement in hospitals.

Reports

Patient safety healthcare inequalities reduction framework

NHS England

London: NHS England; 2025.

	Enigrand, 2023.
URL	https://www.england.nhs.uk/publication/patient-safety-healthcare-inequalities-reduction-framework/
Notes	NHS England has published this framework that sets out five key principles to reduce patient safety healthcare inequalities across the NHS. The framework includes national actions and suggested local implementation steps for each principle. The 5 principles are: 1. All staff, patients, service users, families and carers have access to information, translation and interpretation services when needed. 2. All healthcare staff receive undergraduate patient safety training, ongoing training, and accessible resources that improve their awareness and understanding of healthcare inequalities related to patient safety risks. 3. Accurate and complete diversity data are collected for protected characteristics and inclusion health groups on digital platforms. This work includes making disaggregated data available so evaluation can drive improvements in patient safety and healthcare inequalities. 4. Representatives of diverse communities are involved in the design and delivery of improvements aimed at reducing patient safety healthcare inequalities. This co-production involves drawing on the knowledge and experience of patients, service users, carers, families, communities and staff. 5. Improve the understanding of patient safety healthcare inequalities and drive improvement through identifying priority areas for research.

Improving clinical co-ordination of care for people with multiple long-term conditions. The art of the possible Fenney D, Gowar C, Baird B, Scott S

London: The King's Fund; 2025.

URL	https://www.kingsfund.org.uk/insight-and-analysis/long-reads/improving-clinical-
	coordination-multiple-long-term-conditions
Notes	The prevalence of chronic conditions has been growing, as has the number of patients with multiple long-term or chronic conditions. These have led to calls for better guidance on multi-morbidity whereas much guidance, such as pathways or guidelines, has tended to focus on single conditions. This policy brief from The King's Fund in the UK 'focuses on the clinical co-ordination of care for people with multiple long-term conditions as part of a wider holistic approach. It outlines a set of principles on clinical co-ordination for commissioners and clinicians (by which we mean any health care professional) that we believe should underline a new approach to care for people
	with multiple long-term conditions.'

Journal articles

The Joint Commission Journal on Quality and Patient Safety Volume 51, Issue 6, June 2025

71411116 5 1, 10	source, June 2023
URL	https://www.sciencedirect.com/journal/the-joint-commission-journal-on-quality-and-
	patient-safety/vol/51/issue/6
Notes	A new issue of The Joint Commission Journal on Quality and Patient Safety has been
	published. Articles in this issue of <i>The Joint Commission Journal on Quality and Patient</i>
	Safety include:
	Nutrition Optimization in Early Dialysis (Aditya A Khanijo, Lorenzo
	Olivero, Mireille H Hamdan, Karen D Stoner, Angela C Majerus, D B Patel, S
	Allen, C L Trautman, L M Heath, L L Meeusen, C J Hemeyer, S R Jenkins, P
	Dautaj, M M Rose, E M Flores, M D McGhee, P Moreno Franco, J B Cowart)
	Modeling Incremental Benefit of Medication Reconciliation on ICU
	Outcomes (Helen A Harris, David M Chan, Laura Ellwein Fix, Melissa
	Chouinard, Teresa M Salgado, Le Kang, Gonzalo Bearman)
	Enhanced Antibiotic Stewardship Program's Effect on Antibiotic
	Stewardship in Four Thai Hospitals (Kittiya Jantarathaneewat, Anucha
	Thatrimontrichai, Nattapol Pruetpongpun, Siriththin Chansirikarnjana,
	Sasinuch Rutjanawech, David J Weber, Anucha Apisarnthanarak)
	Overcoming Professional Silos and Threats to Psychological Safety: A
	Conceptual Framework for Successful Team-Based Morbidity and Mortality
	Conferences (Brian A Campos, Mary E Brindle, Emily Cummins, Alexander
	Hannenberg, Danielle Salley, Yves Sonnay, Aubrey Samost-Williams)
	In-Hospital Adverse Events in Heart Failure Patients: Incidence and
	Association with 90-Day Mortality (Mohammed Yousufuddin, Mohamad H
	Yamani, Daniel DeSimone, Ebrahim Barkoudah, Muhammad Waqas Tahir,
	Zeliang Ma, Fatmaelzahraa Badr, Ibrahim A Gomaa, Sara Aboelmaaty, Sumit
	Bhagra, Gregg C Fonarow, Mohammad H Murad)
	Patient Safety Event Risk and Language Barriers: A Scoping Review
	(Lucy B Schulson, Jorge A Rodriguez, Ricardo Cruz, David Flynn, Alicia
	Fernandez)
	Patient Engagement in Safety: Are We There Yet? (Tejal Gandhi, Urmimala)
	Sarkar)
	Outhur

BMJ Quality & Safety online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	BMJ Quality & Safety has published a number of 'online first' articles, including:
	• What do people do in the aftermath of healthcare-related harm? A
	qualitative study on experiences and factors influencing decision-making
	(Lavanya Thana, Helen Crocker, Shivali Modha, Linda Mulcahy, Catherine
	Pope, Charles Vincent, Helen Hogan, Michele Peters)
	Implementing quality and safety regulations in residential disability
	services: a qualitative interview study (Paul Dunbar, Laura Keyes, John
	Browne)
	 Metrics used in quality improvement publications addressing environmental
	sustainability in healthcare: a scoping review (Colin Sue-Chue-Lam, Sezgi
	Yanikomeroglu, Darius Baginskis, Doulia M Hamad, Brian M Wong, Nicole
	Simms, Karen B Born)

Online resources

Australian Living Evidence Collaboration

https://livingevidence.org.au/

Residential Aged Care Communiqué

https://www.thecommuniques.com/post/residential-aged-care-communiqu%C3%A9-volume-20-issue-2-may-2025

Volume 20, Issue 1, May 2025

This issue of Residential Aged Care Communiqué 'focusses on the complex and difficult issues around medical treatment decision-making at the end of life care in people with cognitive impairment.'

Guidance

A number of guidelines or guidance have recently been published or updated. These include:

• Stroke Foundation. Australian and New Zealand Living Clinical Guidelines for Stroke Management https://informme.org.au/guidelines/living-clinical-guidelines-for-stroke-management

[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 include:

• NICE Guideline NG140 *Abortion care* https://www.nice.org.uk/guidance/ng140

[USA] Effective Health Care Program reports

https://effectivehealthcare.ahrq.gov/

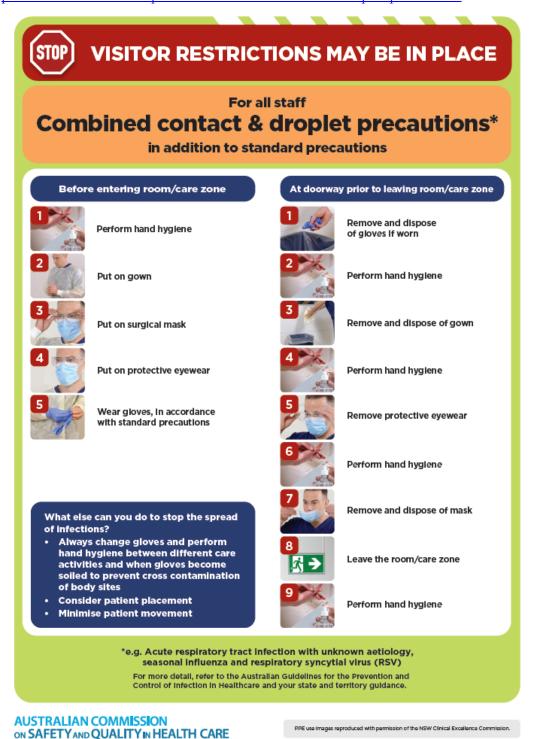
The US Agency for Healthcare Research and Quality (AHRQ) has an Effective Health Care (EHC) Program The EHC has released the following final reports and updates:

- Making Healthcare Safer IV: Summary of Findings on Patient Safety Practices and Ratings by a
 Technical Expert Panel, 2024-2025
 https://effectivehealthcare.ahrq.gov/products/patient-safety-practices/white-paper
- Research Protocol: Pharmacologic and Nonpharmacologic Treatments for Posttraumatic Stress Disorder:
 An Update of the PTSD Repository Evidence Base
 https://effectivehealthcare.ahrq.gov/products/ptsd-pharm-non-pharm-treatment-6-update/protocol

Infection prevention and control and 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 resources include:

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



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

https://www.safetyandquality.gov.au/publications-and-resources/resource-library/infection-prevention-and-control-poster-combined-airborne-and-contact-precautions



VISITOR RESTRICTIONS MAY BE IN PLACE

For all staff

Combined airborne & contact precautions

In addition to standard precautions

Before entering room/care zone



Perform hand hyglene



Put on gown



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



Put on protective eyewear



of infections?

Wear gloves in accordance with standard precautions

What else can you do to stop the spread

- Always change gloves and perform hand hygiene between different care activities and when gloves become soiled to prevent cross contamination of body sites
- Consider patient placement
- Minimise patient movement

At doorway prior to leaving room/care zone



Remove and dispose of gloves if worn



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 hyglene (In an anteroom/outside the room/care zone)



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



Perform hand hyglene

KEEP DOOR CLOSED AT ALL TIMES

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ON SAFETY AND QUALITY IN HEALTH CARE

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- Environmental Cleaning and Infection Prevention and Control www.safetyandquality.gov.au/environmental-cleaning
- Break the chain of infection poster https://www.safetyandquality.gov.au/publications-and-resources/resource-library/break-chain-infection-poster



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