



## On the Radar

Issue 704  
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### On the Radar

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AUSTRALIAN COMMISSION  
ON SAFETY AND QUALITY IN HEALTH CARE



## Development of the NSQHS Standards (third edition)

Consultation Open

## Consultation open – Developing the third edition of the National Safety and Quality Health Service Standards

<https://www.safetyandquality.gov.au/newsroom/consultations/nsqhs-standards-third-edition-public-consultation-1>

The Commission develops national standards in collaboration with the healthcare system and community representatives. Its flagship, the National Safety and Quality Health Service Standards (NSQHS Standards), provides a structured framework for delivering high-quality care with consistent systems across the continuum of care.

It has been ten years since the NSQHS Standards (second edition) were released and preparation for the third edition is underway. Public consultation opened in July to inform their development. The NSQHS Standards (third edition) will incorporate new evidence-based practices, emerging evidence and contemporary clinical governance approaches.

By consulting broadly, the Commission will design standards to respond to the health system's needs. The initial consultation aims to identify:

- Focus areas for the NSQHS Standards (3rd ed.)
- Emerging and existing safety and quality issues
- Key learnings from the NSQHS Standards (second edition)
- Opportunities to improve the NSQHS Standards structure, support improved engagement and implementation.

If you wish to provide feedback, the Commission is accepting written submissions, undertaking face-to-face forums and online focus groups, or there is a sector survey to complete.

Find out more at <https://www.safetyandquality.gov.au/standards/nsqhs-standards/nsqhs-standards-third-edition-engagement-hub>

## Reports

*Renewing the Definitions of 'nursing' and 'a nurse'*

Final project report, June 2025

White J, Gunn M, Chiarella M, Catton H, Stewart D

Geneva: International Council of Nurses; 2025. p. 92.

URL	<a href="https://admin.icn.ch/resources/publications-and-reports/renewing-definitions-nursing-and-nurse">https://admin.icn.ch/resources/publications-and-reports/renewing-definitions-nursing-and-nurse</a>
Notes	The peak global nursing body, the International Council of Nurses (ICN), has released their updated definitions of 'nurse' and 'nursing' for the first time in over two decades. The ICN's renewed definitions reflect the profession's evolving role in contemporary healthcare, moving beyond task-based descriptions to encompass a broader scope of practice. The updated definition of a nurse emphasises the integral role nurses play in leadership, education, research, advocacy and innovation. Importantly, the updated definition of nursing includes the collective commitment to everyone's right to access high quality care, demonstrating a shift away from individual patient outcomes. Nurses are the largest health workforce, and the release of these <u>updated</u> definitions can aid in strengthening the professions' identity and influence.

*Workforce and patient safety: electronic communications on patient discharge from acute hospitals*  
Investigation report  
Health Services Safety Investigation Body  
Poole: HSSIB; 2025.









URL	<a href="https://www.hssib.org.uk/patient-safety-investigations/workforce-and-patient-safety/fifth-investigation-report/">https://www.hssib.org.uk/patient-safety-investigations/workforce-and-patient-safety/fifth-investigation-report/</a>
Notes	This report from the Health Services Safety Investigation Body (HSSIB) in the UK examines some of the issues around electronic discharge summary documents in the UK. The investigation ‘explored the patient safety risks associated with the communication of critical clinical information when patients are discharged from acute hospital inpatient settings, and the follow-up of ongoing actions for patients by primary and community care.’ The report includes a number of findings, recommendations and observations, along with a number of local-level learning prompts.

For information on the Commission's work on electronic discharge summary systems, see <https://www.safetyandquality.gov.au/our-work/e-health-safety/electronic-discharge-summary-eds-systems>

*Universal access to essential oral healthcare through a priority-setting approach*  
Deeble Institute for Health Policy Research Issues Brief no: 59  
Nguyen T, Haddock R  
Canberra: Australian Healthcare and Hospitals Association; 2025. p. 36.

URL	<a href="https://ahha.asn.au/resource/universal-access-to-essential-oral-healthcare-through-a-priority-setting-approach/">https://ahha.asn.au/resource/universal-access-to-essential-oral-healthcare-through-a-priority-setting-approach/</a>
Notes	<p>This issues brief from the Australian Healthcare and Hospitals Association’s Deeble Institute for Health Policy looks at the issue of oral care in Australia. The exclusion of oral care from Medicare has been much debated. The authors of this issues brief observe that ‘Cost continues to be the most frequently reported barrier to accessing oral healthcare’ and suggest ‘require reforms to payment models and pricing structures to improve affordability and equity in access’ are required with the aim of ‘a more integrated, population-based approach to oral healthcare.’ They suggest ‘Adopting the WHO’s concept of essential oral healthcare would provide a clear, evidence-based framework for defining service coverage.’ They also offer recommendations, including:</p> <ul style="list-style-type: none"> <li>• Define essential oral healthcare in Australia</li> <li>• Implement a formal priority-setting approach</li> <li>• Integrate oral healthcare into Health Technology Assessment (HTA) processes.</li> </ul>

*Co-design versus faux-design of Aboriginal and Torres Strait Islander health policy: a critical review*  
 Butler T, Anderson K, Black O, Gall A, Ngampromwongse K, Murray R, et al.  
 Melbourne: Lowitja Institute; 2025. p. 35.

URL	<a href="https://www.lowitja.org.au/resource/co-design-versus-faux-design-of-aboriginal-and-torres-strait-islander-health-policy-a-critical-review/">https://www.lowitja.org.au/resource/co-design-versus-faux-design-of-aboriginal-and-torres-strait-islander-health-policy-a-critical-review/</a>
Notes	<p>The authors of this paper published by the Lowitja Institute assert that “co-design approach that centres Aboriginal and Torres Strait Islander peoples, knowledges, values, and practices offers a policy development solution that more effectively addresses prevailing systemic discrimination and inequities. However, while co-design terminology is increasing in Australian health policymaking, many cases apply only tokenistic or superficial co-design practices; an approach that we term ‘faux-design’.” In the paper they critically review ‘current approaches to co-designing and faux-designing health policy for Aboriginal and Torres Strait Islander peoples.’</p> <div><div><div><div><div>Distinguishing between Faux-design and Co-design</div></div></div><div></div></div><div><div>Deciding factors</div><div><div><ul style="list-style-type: none"><li>• Who controls systems?</li><li>• Who determines success?</li></ul></div><div><ul style="list-style-type: none"><li>• On whose terms?</li><li>• Who holds power?</li></ul></div><div><ul style="list-style-type: none"><li>• Who holds funding?</li><li>• Who is paid?</li></ul></div><div><ul style="list-style-type: none"><li>• Whose cultures are centred?</li><li>• Whose knowledges /ways privileged?</li><li>• Whose methods?</li></ul></div><div><ul style="list-style-type: none"><li>• Whose benefit?</li><li>• Who loses if abandoned or fails?</li></ul></div></div><div><div><div><div>Faux-design</div><div><ul style="list-style-type: none"><li>• Led by non-Indigenous organisations and governments</li><li>• Hierarchical power dynamics located with non-Indigenous organisations</li><li>• Colonial knowledge systems</li><li>• Predetermined outcomes</li><li>• No ID-SOV</li><li>• Opaque and rigid processes</li></ul></div></div><div><div>vs</div><div><div>Leadership</div><div>Power</div><div>Knowledge</div><div>Outcomes</div><div>ID-SOV</div><div>Processes</div></div><div><div>Co-design</div><div><ul style="list-style-type: none"><li>• Led by Aboriginal and Torres Strait Islander peoples and organisations</li><li>• Power located with Aboriginal and Torres Strait Islander peoples</li><li>• Centres Aboriginal and Torres Strait Islander ways of knowing, being and doing</li><li>• Community-determined priorities and outcomes</li><li>• Upholds ID-SOV</li><li>• Transparent and flexible processes</li></ul></div></div></div></div></div></div></div>

*Transforming mental health through lived experience: roadmap for integrating lived and living experience practitioners into policy, services and community*

World Health Organization Regional Office for Europe

Copenhagen: WHO Regional Office for Europe; 2025. p. 35.

URL	<a href="https://www.who.int/europe/publications/i/item/WHO-EURO-2025-12307-52079-79927">https://www.who.int/europe/publications/i/item/WHO-EURO-2025-12307-52079-79927</a>
Notes	From the resource's webpage 'Integrating lived/living experience practitioners into health-care and social systems is crucial to realizing recovery-oriented mental health care. Practitioners model recovery and bridge gaps between traditional health-care structures and service users, humanizing and promoting inclusivity of services. This roadmap, co-created under the WHO Regional Office for Europe's collaboration with the European Commission under the "Addressing mental health challenges in the European Union, Iceland and Norway" project, provides a structured framework to integrate lived/living experience expertise into mental health systems and workforce through six essential actions.'

## Journal articles

*Proposing core competencies for physicians in using artificial intelligence tools in clinical practice*

Scott IA, Shaw T, Slade C, Wan TT, Barmanray R, Coorey C, et al

Internal Medicine Journal. 2025 2025/06/27.

DOI	<a href="https://doi.org/10.1111/imj.70112">https://doi.org/10.1111/imj.70112</a>
Notes	Artificial intelligence (AI) encompass both a current and emerging set of technologies and their applications in health care. The authors, all working in Australia, of this piece propose 'a practical and manageable set of core competencies for physicians in using AI tools effectively and ethically and suggests methods for acquiring these competencies.' The various competencies have been grouped in these domains: <ul style="list-style-type: none"> <li>• Foundational knowledge of AI tools</li> <li>• Critical appraisal of AI tools</li> <li>• Use of AI tools</li> <li>• Patient interaction with AI tools</li> <li>• Professionalism and AI tools.</li> </ul>

*Healthcare Policy*

Volume 20, Number 3, 2025

URL	<a href="https://www.longwoods.com/publications/healthcare-policy/27518/1/vol.-20-no.-3-2025">https://www.longwoods.com/publications/healthcare-policy/27518/1/vol.-20-no.-3-2025</a>
Notes	A new issue of <i>Healthcare Policy</i> has been published. Articles in this issue of <i>Healthcare Policy</i> include: <ul style="list-style-type: none"> <li>• Editorial: Provincial Leadership and Green Shoots: <b>Where to Look for Innovation</b> (Jason M Sutherland)</li> <li>• Adolescent Access to <b>Abortion Care</b> in Canada: Age, Capacity and Parental Consent (Alana Cattapan, Kathleen Hammond and Eleanor McGrath)</li> <li>• Commentary: Adolescents, Marginalization(s) and <b>Abortion Care</b> in Canada (Tobin LeBlanc Haley and Ghazal Motamedi)</li> <li>• Advice or Advocacy – Varying Perceptions of <b>Health Services and Policy Researcher Activities</b> (P Alison Paprica, W P Wodchis and K M McGrail)</li> </ul>

	<ul style="list-style-type: none"> <li>• Commentary: Risk and Causality: The <b>Contribution of Policy Researchers</b> to Public Decisions (Pierre-Gerlier Forest)</li> <li>• What Explains Interprovincial Differences in the Uptake of <b>Autonomous NP Primary Care Practice?</b> (Damien Contandriopoulos and Katherine Bertoni)</li> <li>• <b>Conceiving Policy Design:</b> Perspectives From Women Pursuing IVF in British Columbia (Jenna Quelch)</li> <li>• Impacts of <b>Home Care Investments</b> in Alberta: Ecological and Economic Trend Analysis (Max Jajszczok, Cathy A Eastwood, Mingshan Lu, Ceara Cunningham and Hude Quan)</li> </ul>
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## Health Affairs

Volume 44, Number 7, July 2025

URL	<a href="https://www.healthaffairs.org/toc/hlthaff/44/7">https://www.healthaffairs.org/toc/hlthaff/44/7</a>
Notes	<p>A new issue of <i>Health Affairs</i> has been published with a themes of ‘Health Spending, Rural Hospitals, Maternal Care &amp; More’. Articles in this issue of <i>Health Affairs</i> include:</p> <ul style="list-style-type: none"> <li>• <b>National Health Expenditure</b> Projections, 2024–33: Despite Insurance Coverage Declines, Health To Grow As Share Of GDP (Sean P Keehan, Andrew J Madison, John A Poisal, Gigi A Cuckler, Sheila D Smith, Andrea M Sisko, Jacqueline A Fiore, and Kathryn E Rennie)</li> <li>• Mixed Evidence That Rural Hospitals’ Finances Improved With Participation In The <b>Pennsylvania Rural Health Model</b> (Paula Chatterjee, Michael Wang, X Chen, S Kim, N B Coe, K E Joynt Maddox, K Murphy, and R M Werner)</li> <li>• Factors Influencing <b>Rural Hospitals’ Decisions To Join An Alternative Payment Model:</b> A Mixed-Methods Study (Kimberly J Rak, Donald S Bourne, Jacqueline Barnes, Nicole Ober, Zhaojun Sun, Judy C Chang, Eric T Roberts, Manisha Bhattacharya, Bruce L Jacobs, J M Kahn, and L M Sabik)</li> <li>• <b>Obstetric Care Access</b> Declined In Rural And Urban Hospitals Across US States, 2010–22 (Katy Backes Kozhimannil, Julia D Interrante, Caitlin Carroll, Emily C Sheffield, Alyssa H Fritz, Alecia J McGregor, and Sara C Handley)</li> <li>• <b>Maternal Contact With Child Protective Services</b> Associated With Less Postpartum Care In Wisconsin, 2010–19 (Nicole Kovski, Lawrence Berger, and Maria Cancian)</li> <li>• Connecticut’s Novel <b>Prenatal Substance Exposure Policy</b> Is Associated With Declining CPS Reports And Foster Placements (Margaret Lloyd Sieger, Lucas Godoy, Timothy E Moore, Cindy Nichols, Elizabeth J Goldsborough, Shiyi Chen, Mishka Terplan, Beth Ann Griffin, and Stephen W Patrick)</li> <li>• <b>New Cancer Drug Approvals:</b> Less Than Half Of Important Clinical Trial Uncertainties Reported By The FDA To Clinicians, 2019–22 (Avi Cherla, S Woloshin, A K Wagner, O J Wouters, C Davis, E Mossialos, and H Naci)</li> <li>• <b>Drug Coverage Policies And Clinical Guidelines Alignment:</b> Most Coverage Decisions Include Additional Restrictions (Julia A Rucker, Molly T Beinfeld, Katherine A Clifford, J D Campbell, J Motyka, and J D Chambers)</li> <li>• Administrative Claims Data Show <b>Increased Morbidity Risk For US Adults In Same-Sex Versus Different-Sex Relationships</b> (Landon Hughes, Gilbert Gonzales, Sarah McKetta, Alex McDowell, and Brittany M Charlton)</li> <li>• <b>Medigap Regulations</b> Provide Protections For Beneficiaries, Especially After Health Shocks, But May Raise Premiums (Jingwei Sun, Michael E Chernenew, J Michael McWilliams, Boris Vabson, and Timothy J Layton)</li> <li>• <b>Medicaid Managed Care:</b> Substantial Shifts In Market Landscape And Acquisitions, 2006–20 (Bohan Li and Timothy J Layton)</li> </ul>



	<ul style="list-style-type: none"> <li>• Preferred Sources For <b>Suicide Prevention And Crisis Services</b> Among Segments Of The US Adult Population (Jonathan Purtle, Alex Dahlen, Amanda Mauri, Blake R Erickson, and Michael P Lindsey)</li> <li>• <b>Qualified Medicare Beneficiary Program:</b> Enrollment Trends And Characteristics Of Low-Income Beneficiaries (J Wyatt Koma, Zhiyou Yang, Mary Price, David Cheng, Felipe Marcondes, Kobi Khong, John Hsu, Margarita Alegría, Joseph P Newhouse, and Vicki Fung)</li> <li>• <b>A Transfer That Shouldn't Wait</b> (Travis Wassermann)</li> </ul>
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*BMJ Quality & Safety* online first articles

URL	<a href="https://qualitysafety.bmj.com/content/early/recent">https://qualitysafety.bmj.com/content/early/recent</a>
Notes	<p><i>BMJ Quality &amp; Safety</i> has published a number of 'online first' articles, including:</p> <ul style="list-style-type: none"> <li>• Impact of <b>online patient access to clinical notes</b> on quality of care: a systematic review (Yoko Yoshimura, Geva Greenfield, Elena Lammila-Escalera, Brian Mcmillan, Benedict Hayhoe, Azeem Majeed, Ana Luisa Neves)</li> <li>• Editorial: More alerts, less harm? <b>Rethinking medication safety with AI</b> (Clare Tolley, Andrew Kenneth Husband)</li> <li>• Editorial: From parallel tracks to integrated practice: advancing the integration of <b>quality improvement and implementation science</b> (Stephanie Bogdewic, Susan Cronin, Rohit Ramaswamy)</li> <li>• RECi-PE (<b>REducing CT in Pulmonary Embolism Diagnosis</b>): an emergency department quality intervention (Jared S Anderson, Andrew Beck, Janette Baird, Timmy R Lin, Anthony M Napoli)</li> <li>• Evaluation of the accuracy and safety of <b>machine translation of patient-specific discharge instructions</b>: a comparative analysis (Marianna Kong, Alicia Fernandez, Jaskaran Bains, Ana Milisavljevic, Katherine C Brooks, Akash Shanmugam, Leslie Avilez, Junhong Li, Vladyslav Honcharov, Andersen Yang, Elaine C Khoong)</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>• Did the introduction of an <b>electronic booking form for elective caesarean section</b> improve compliance with guidelines for gestational age at delivery? (Julian Vitali et al)</li> </ul>

**Online resources**

***Australian Living Evidence Collaboration***

<https://livingevidence.org.au/>

***How to Communicate Health Messages to Young People on Social Media***

<https://www.sydneyhealthliteracylab.org.au/social-media-comms-for-young-people-framework>

Resource from the Sydney health literacy lab and Sydney Infectious Diseases Institute on a framework to support more effective health communication with young people on social media, especially during health emergencies. The framework was co—designed with young people and youth researchers.

## Guidance

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

- NHMRC has published version 2.0 of the *Procedures and Requirements for Meeting the NHMRC Standards for Clinical Practice Guidelines* (Procedures and Requirements).  
<https://www.nhmrc.gov.au/about-us/publications/procedures-and-requirements-meeting-nhmrc-standards-clinical-practice-guidelines>

## [USA] Effective Health Care Program reports

<https://effectivehealthcare.ahrq.gov/>

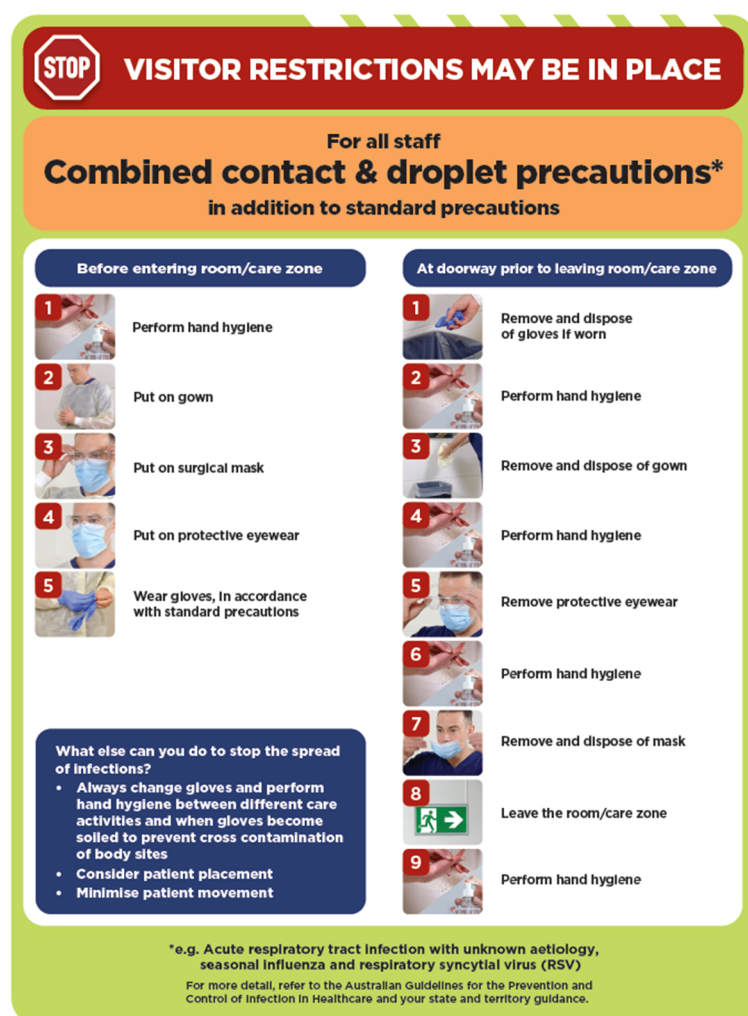
The US Agency for Healthcare Research and Quality (AHRQ) has an Effective Health Care (EHC) Program. The EHC has released the following final reports and updates:

- Fiber Intake and Laxation in People With Normal Bowel Function*  
<https://effectivehealthcare.ahrq.gov/products/fiber-intake/research>

## 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>



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PPE use images reproduced with permission of the NSW Clinical Excellence Commission.



- *Poster – Combined airborne and contact precautions*  
<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

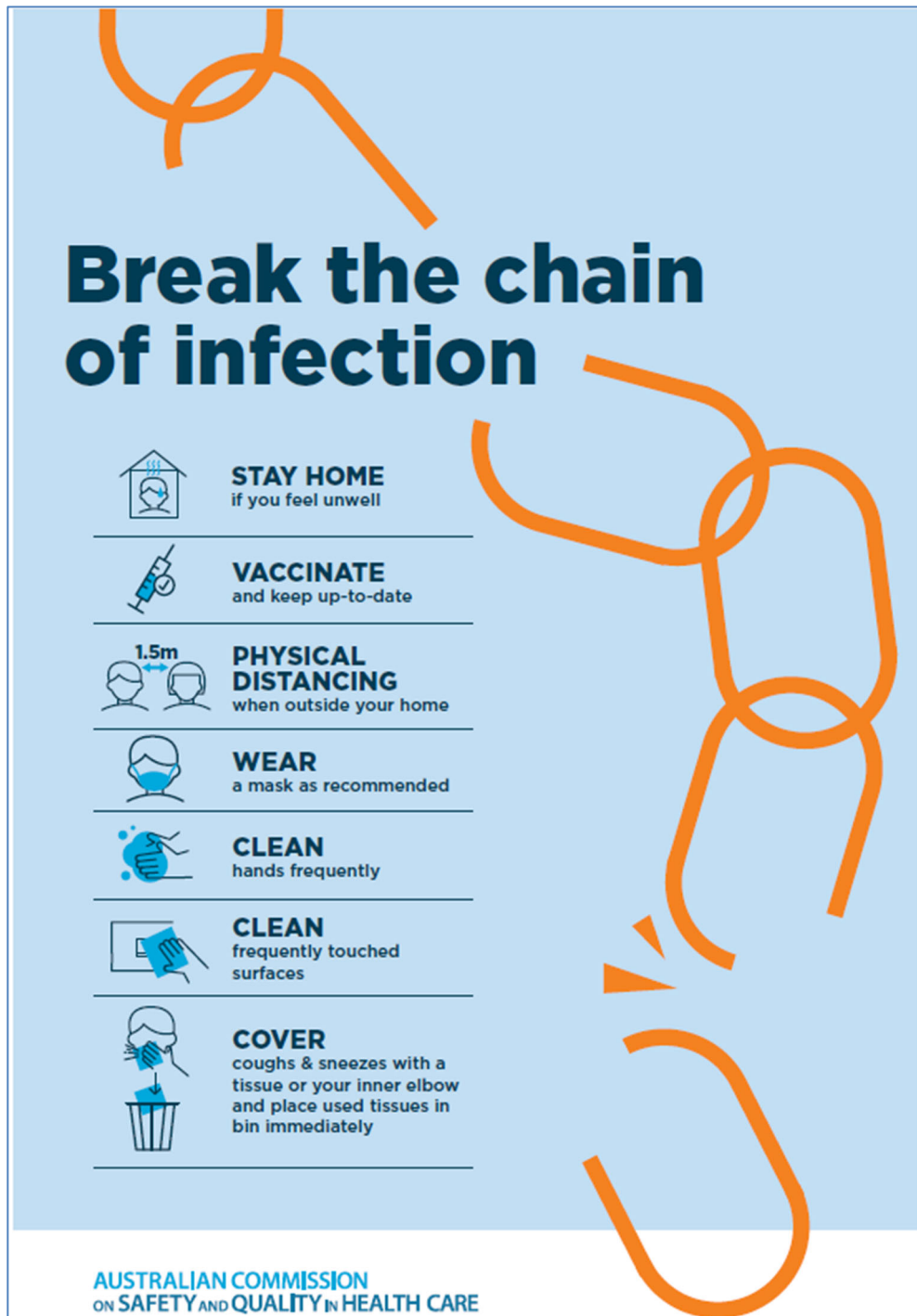
Before entering room/care zone	At doorway prior to leaving room/care zone
<div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">1</div>  <div>Perform hand hygiene</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">2</div>  <div>Put on gown</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">3</div>  <div>Put on a particulate respirator (e.g. P2/N95) and perform fit check</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">4</div>  <div>Put on protective eyewear</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">5</div>  <div>Wear gloves in accordance with standard precautions</div> </div>	<div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">1</div>  <div>Remove and dispose of gloves if worn</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">2</div>  <div>Perform hand hygiene</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">3</div>  <div>Remove and dispose of gown</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">4</div>  <div>Leave the room/care zone</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">5</div>  <div>Perform hand hygiene (in an anteroom/outside the room/care zone)</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">6</div>  <div>Remove protective eyewear (in an anteroom/outside the room/care zone)</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">7</div>  <div>Perform hand hygiene (in an anteroom/outside the room/care zone)</div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">8</div>  <div>Remove and dispose of particulate respirator (in an anteroom/outside the room/care zone)</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">9</div>  <div>Perform hand hygiene</div> </div>

**What else can you do to stop the spread of infections?**

- 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

**KEEP DOOR CLOSED AT ALL TIMES**

- *Environmental Cleaning and Infection Prevention and Control*  
[www.safetyandquality.gov.au/environmental-cleaning](http://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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