



On the Radar

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On the Radar

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Reports

Enhancing Community Clinician Confidence in Child and Adolescent Mental Health: Insights from the COMPASS Collaborative Model

Deeble Institute for Health Policy Research Perspectives Brief no: 36

Hiscock H, Prakash C, Iqbal S, Khano S, D'Abaco E, Dhaliwal J

Canberra: Australian Healthcare and Hospitals Association; 2025. p. 6.

URL	https://ahha.asn.au/resource/enhancing-community-clinician-confidence-in-child-and-adolescent-mental-health-insights-from-the-compass-collaborative-model/
Notes	<p>This perspectives brief from the Australian Healthcare and Hospitals Association's Deeble Institute for Health Policy examines the COMPASS (CONnecting Mental-health PAediatric Specialists and community Services) model that was developed in Melbourne as the COVID-19 pandemic 'intensified the mental health crisis among children and adolescents, straining access to specialist care. Community clinicians, often the first point of contact, faced increased responsibility without adequate training or support.' The model 'was developed in partnership with the regional primary care network, local clinicians, and the local child and adolescent mental health service. COMPASS provides:</p> <ul style="list-style-type: none"> • A multidisciplinary online Community of Practice (CoP) • Access to primary and secondary consultations with a child psychiatrist for community clinicians who needed extra advice and support.'

Country preparedness for the introduction and appropriate use of antibiotics: Operational guidance

World Health Organization

Geneva: WHO; 2025. p. 204.

URL	https://www.who.int/publications/b/74301
Notes	<p>The World Health Organization (WHO) has published this operational guidance for the introduction and appropriate use of antibiotics. It focuses on 'Watch and Reserve antibiotics' used to treat multidrug-resistant organisms while recognising that these can 'face specific access challenges, especially in low- and middle-income countries (LMICs). This guidance outlines an approach to planning the introduction and implementation of these products, considering their unique characteristics and associated needs, with the goal of enhancing treatment access for patients and promoting appropriate overall antibiotic use.'</p>

Safety Spotlight: Neonatal Exchange Blood Transfusion

Maternity and Newborn Safety Investigations

London: MNSI; 2025.

URL	https://www.mnsi.org.uk/news/safety-spotlight-neonatal-exchange-blood-transfusion/
Notes	<p>The MNSI (Maternity and Newborn Safety Investigations) in the UK has released a 'safety spotlight'. This spotlight examines an exchange blood transfusion that saw the baby's condition deteriorate leading to cardiac arrest. The spotlight examines exchange blood transfusions and notes issues and poses questions to prompt reflection on how to ensure appropriate and safe care.</p>

Journal articles

Information standards for innovative surgery: what patients need to know

Hoffmann C, Elliott D, Rooshenas L, Ochieng C, Main B, Wheatstone P, et al

BJS. 2025;112(7):znaf140.

DOI	https://doi.org/10.1093/bjs/znaf140
Notes	<p>The authors of this piece observe that ‘There are repeated and ongoing failures in shared decision-making and informed consent for innovative surgical procedures. Governments and regulatory bodies internationally recommend establishing information standards to support safe and transparent surgical innovation.’ The aim of this study was to develop a core information set (CIS) for surgical innovation. Based on consultations and interviews and analysis of policy documents and published studies, the final CIS comprised seven themes that included:</p> <ul style="list-style-type: none"> • what is ‘new’ about the procedure; • potential conflicts of interest; • reasons for the innovation (including why the innovation is believed to be appropriate for the patient); • treatment alternatives; • unknowns (including uncertain safety/efficacy and that the procedure may be abandoned/modified); • expertise with the innovation; and • governance, oversight, and accountability (including how safety will be monitored and recompense if anything goes wrong).

Prevalence and severity of pain, anxiety, stress, and sleep disturbances among surgical patients: a nationwide single-day multicentre flash mob study

Stoop JM, Geensen R, Adam SC, van Dam KAM, van Dessel E, Dolmans-Zwartjes A, et al

BJS. 2025;112(7):znaf124.

DOI	https://doi.org/10.1093/bjs/znaf124
Notes	<p>Paper reporting on a ‘nationwide single-day multicentre cross-sectional flash mob study was conducted in 29 Dutch hospitals’ that included data from 733 adult surgical patients. The authors observe that ‘Pain, anxiety, stress, and sleep disturbances are highly frequent complications among surgical patients’. Among the results noted:</p> <ul style="list-style-type: none"> • Moderate to severe pain was prevalent in 509 patients (69.7%) and occurred most frequently post-surgery • Anxiety occurred in 278 patients (38.1%) and was more prevalent preoperatively. • Moderate to severe stress was reported by 272 patients (37.8%) with similar findings pre- and post-surgery. • Sleep disturbances were prevalent in 440 patients (64.1%). • Pain and anxiety were more severe in females. • Sleep disturbances were more severe in patients with lower socioeconomic status

Maternal and Neonatal Outcomes and Health System Costs in Standard Public Maternity Care Compared to Private Obstetric-Led Care: A Population-Level Matched Cohort Study

Callander EJ, Enticott J, Mol BW, Thangaratnam S, Gamble J, Robson S, et al

BJOG: An International Journal of Obstetrics & Gynaecology. 2025 2025/07/14.

DOI	https://doi.org/10.1111/1471-0528.18286
Notes	Paper reporting on an observational study that sought to ‘compare health outcomes and costs in standard public maternity care compared to private obstetric-led maternity care.’ Using data on 867,334 births in three Australian states between 2106 and 2019, the authors of this piece claim to have demonstrated ‘lower adverse health outcomes and costs in private obstetric-led care compared to standard public maternity care.’ This claim has been contested with various observations (for example on a recent edition of the Health Report on Radio National and an item at The Conversation website), including a lack of consideration of different models of care, different patient populations, etc. It has been suggested that public hospitals are more likely to have to provide care for patients who are less well-off, have more chronic and/or co-morbid conditions and have more complex pregnancies and complications. A number of these limitations are noted in the paper. The authors ‘propose that a National Maternity Learning Health System and Clinical Quality Registry are vital to embed implementation and comparative effectiveness research in routine practice, identify underlying drivers and enable rapid improvement in models of care and outcomes for all women.’

Advancing health system accountability: A scoping review of cultural security and Indigenous health.

Poirier B, Cachagee M, Jamieson L

First Nations Health and Wellbeing. The Lowitja Journal. 2025;3:100073.

DOI	https://doi.org/10.1016/j.fnhli.2025.100073
Notes	Paper reporting on a scoping review of cultural security and indigenous health. It is noted that ‘Cultural security goes beyond cultural safety awareness competency; by its demand for action at a systems level, the establishment of accountability frameworks is necessary to ensure sustainability of these changes.’ Focused on 28 items, ‘Evidence related to the understanding and implementation of cultural security was synthesised into 12 shared principles of cultural security.’ The authors observe that ‘Commitment to culturally secure provision of care at both an institutional and individual level is both an ethical and moral necessity for all healthcare providers.’

The Joint Commission Journal on Quality and Patient Safety

Volume 51, Issue 7, July–August 2025

URL	https://www.sciencedirect.com/journal/the-joint-commission-journal-on-quality-and-patient-safety/vol/51/issue/7
Notes	A new issue of <i>The Joint Commission Journal on Quality and Patient Safety</i> has been published. Articles in this issue of <i>The Joint Commission Journal on Quality and Patient Safety</i> include: <ul style="list-style-type: none"> • Emergency Department Crowding: A Patient Safety Crisis Hidden in Plain Sight (Timothy M Loftus, Emily G Wessling Tofovic) • Achieving Safe Telehealth (Jorge A Rodriguez, David W Bates) • Using In Situ Simulation to Identify Latent Safety Threats Prior to the Opening of Novel Patient Care Spaces in the Emergency Department (Briana D Miller, Andrew D Bloom, Helena Kons, Marjorie Lee White) • Mortality and Return Visit Frequency Among Emergency Department Patients Who Leave Without Being Seen at a Regional Health Care System

	<p>(Joshua W Joseph, Alice K Bukhman, Da'Marcus E Baymon, Melisa W Lai-Becker, Dana D Im, Lauren M Nentwich, Paul C Chen, León D Sánchez)</p> <ul style="list-style-type: none"> Utilizing Quality Improvement Methodology to Decrease Surgical Delays (Marina E Robson Chase, Madeline J Anderson, Wesley A Stephens, Brittany E Levy, Sherry Lantz, Jennifer Goforth, Melissa R Newcomb, A M Harris) Adverse Events Involving Telehealth in the Veterans Health Administration (Peter D Mills, Anne Tomolo, Edward E Yackel) The Frequency of Multiple Central Line–Associated Bloodstream Infections (CLABSIs) Occurring in the Same Child: A Five-Year Experience (Tara P Sotak, Heidi B Troxler, Amber M Kirkley, Benny L Joyner, Michael J Steiner, Lane F Donnelly) A Systems-Based Framework for Integrating Health Equity and Patient Safety (Jeannette Tsuei, Julia I Bandini, Angela D Thomas, Kortney Floyd James, Jason Michel Etchegaray, Lucy Schulson) Navigating the Pathway to Quality Leadership: Perspectives from Contemporary Quality Executives (Christopher S Kim, Kimiyoshi J Kobayashi, D M Safley, B Patel, J Wiler, M Ikezuagu, J L Eisenberg, A C Lu)
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The Lancet Primary Care

Volume 1, Number 1, July 2025

URL	https://www.thelancet.com/journals/lanprc/issue/vol1no1/PIIS3050-5143(25)X0002-9
Notes	<p><i>The Lancet Primary Care</i> is a new open access journal. Articles in this first issue of <i>The Lancet Primary Care</i> include:</p> <ul style="list-style-type: none"> Editorial: A better future through primary health care Effectiveness, safety, and cost-effectiveness of the ALABAMA trial (Kimberly G Blumenthal, Jason A Trubiano) Urgent need for mental health care for Ukrainian children affected by war (Elisa Pfeiffer, Dmytro Martsenkovskyi) Strengthening primary health care leadership: responding to a global need (Faraz Khalid, Andrew McLellan, Katherine Rouleau, Erica Barbazza, Nataliya Bukhanova, Marcus Pedersen, Vibhuti Khara, Shamsuzzoha Babar Syed, Asiya Odugleh-Kolev, Denis Porginon, Bart Janssens, Suraya Dalil) Advancing person-centred care for people living with chronic conditions through patient-reported quality information in primary care (Mieke Rijken, Oliver Groene, Rosa Suñol, Jose M Valderas) Primary care: a crucial catalyst to build a healthier USA (Kameron Matthews, Lauren Hughes, Candace Sprott, Katherine Gergen Barnett) CRISP Checklist advances primary care through responsive research reporting (William R Phillips, Elizabeth Ann Sturgiss) Penicillin allergy assessment pathway versus usual clinical care for primary care patients with a penicillin allergy record in the UK (ALABAMA): an open-label, multicentre, randomised controlled trial (Jonathan A T Sandoe, Shadia Ahmed, Kelsey Armitage, Chris Bates, Rebecca Bestwick, Jenny Boards, Christopher C Butler, Johanna Cook, Joanne Fielding, Ushma Galal, Philip Howard, Daniel Howdon, Sam Mort, Ruben Mujica-Mota, Alina Negut, Catherine E Porter, Neil Powell, Marta Santillo, Ravishankar Sargur, Sinisa

	<p>Savic, Sarah Tonkin-Crine, Marta Wanat, Robert M West, Miaoqing Yang, Ly-Mee Yu, Susan H Pavitt on behalf of the ALABAMA Trial Research Group)</p> <ul style="list-style-type: none"> • Effects of a brief digital problem-solving intervention on depression and anxiety symptoms in Ukrainian children and adolescents displaced by war: a crossover, randomised controlled trial (John R Weisz, Joshua S Steinberg, Jingxuan Sun, Patrick Mair, Olivia M Fitzpatrick, Nataliia Karapata, Maryna Yusyn, Gauri Sood, Andrea Danese, Kate M Adams, Dennis Ougrin) • Pilot implementation of intermittent preventive treatment with dihydroartemisinin–piperaquine to prevent adverse birth outcomes in Papua, Indonesia: a mixed-method evaluation (Firdaus Hafidz, Freis Candrawati, Jenna Hoyt, Enny Kenangalem, James Dodd, Maia Lesosky, Ida Safitri Laksanawati, Reynold Ubra, Minerva Simatupang, Feiko O ter Kuile, Eve Worrall, Jeanne Rini Poespoprodjo, Jenny Hill) • Estimating inequality in alcohol-related liver disease burden in the UK, 2009 to 2020: a population-based study using routinely collected data (Zhaonan Wang, Krishnarajah Nirantharakumar, Arlene Copland, Darren Quelch, Rasiah Thayakaran, Joht Singh Chandan, James Ferguson, Matthew Brookes, Matthew Lewis, Neil Rajoriya, Nigel Trudgill, Ramesh Arasaradnam, Sally Bradberry, Shamil Haroon, Neeraj Bhala, Nicola J Adderley) • How major international development organisations operationalise primary health care: a thematic content analysis of strategy documents (Luke N Allen, Erica Barbazza, Tova Tampe, Suraya Dalil, Shamsuzzoha Syed ,Faraz Khalid) • Preventing, identifying, and managing sepsis in the community: research and clinical priorities (Kristina E Rudd, Adrienne G Randolph, Derek C Angus, Michael Bauer, Christopher F Chesley, Michael R Filbin, Grace Jenq, Jordan A Kempker, Adam C Levine, Phillip Levy, Flavia R Machado, Nicholas M Mohr, Robert Quinn, Kathryn Rowan, Manu Shankar-Hari, Fatima Sheikh, Patrycja Sleboda, Jeb S Teichman, Thierry Calandra, Hallie C Prescott on behalf of the International Sepsis Forum)
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HealthcarePapers

Volume 23, Number 1, 2025

URL	https://www.longwoods.com/publications/healthcarepapers/27641/1/
Notes	<p>A new issue of HealthcarePapers has been published. Articles in this issue of HealthcarePapers include:</p> <ul style="list-style-type: none"> • We Should Not Settle for Mediocre Medicare (Audrey LaPorte and Sara Allin) • Is There a Third Way for Healthcare in Canada? (Katherine Fierlbeck and Peter Berman) • Is a Third Way Enough to Tame Hidden Forces? (Benoit Morin) • Canada Can Find a Third Way, but Private Insurance Is Not a Silver Bullet (Zeynep Or) • We Need to Do the Hard Work to Strengthen Public Healthcare (Joss Reimer) • Piercing the Public-Private Debate: An Asset-Based Approach to Transforming Canadian Healthcare (Danyaal Raza) • New Law and More Money Cannot Fix Canadian Healthcare (Steven Lewis) • Beyond the Binary: Acknowledging Complexity, Enabling Innovation, Preserving the Positive (Katherine Fierlbeck and Peter Berman)

URL	https://academic.oup.com/healthaffairsscholar/issue/3/7
Notes	<p>A new issue of <i>Health Affairs Scholar</i> has been published. Articles in this issue of <i>Health Affairs Scholar</i> include:</p> <ul style="list-style-type: none"> • Local population characteristics and access equity of 340B contract pharmacies (Maura Coughlin and Dibya Deepta Mishra) • Income, health, and racial gaps between 340B hospitals, child sites, and nearby neighborhoods (Neal Masia et al) • The potential for patient-reported data and narratives to improve quality during emergency department boarding (Kelly T Gleason et al) • Medicaid managed care organization service coverage and diagnosis and treatment of opioid use disorder: evidence from quasi-random auto-assignment in Kentucky (Shelby R Steuart et al) • The changing landscape of primary care: an analysis of payer-primary care integration (Loren Adler et al) • Geographic variation in Medicare Advantage nonemergency medical transportation benefits 2020-2024 (Chuan Angel Lu et al) • The American fentanyl epidemic: geographic variation in mortality and policy implications (Thomas M Wickizer et al) • Assessing the value of health information exchange organizations to hospital interoperability (Chelsea Richwine et al) • Geographical variation in physician supply and its relationship to utilization of care across older adults in the United States (M Barnard et al) • The effect of providing Medicare Advantage enrollees diagnosed with cancer additional time to reassess enrollment (Emma M Achola-Kothari et al) • A 10-year comparative analysis of medical and surgical specialty lobbying by physician professional organizations (Max Bouvette et al) • What drug characteristics explain the wide range of manufacturer rebates? (Molly T Beinfeld et al) • Research and development investments for biologics independently developed by US biotechnology startups, 2017–2023 (Irina C Odouard et al) • Interventions that strengthen the care workforce: a realist synthesis review (Christine Kelly et al) • Off-label policy through the lens of trazodone usage and spending in the United States (Srikanth Kadiyala et al) • The disability mismatch: the case for a comprehensive disability status measure (Scott D Landes et al) • Strategic pathways to International Classification of Diseases, 11th Revision, adoption in France and the United States (Bastien Boussat et al) • The fragile core of care: reframing the well-being of health professionals as critical infrastructure (Md Doulotuzzaman Xames) • Prescription for made in America? Tariffs and U.S. drug manufacturing (Mariana P Socal and others) • The cost of misaligned incentives in the pharmaceutical supply chain (Geoffrey Joyce) • Prevalence of interstate telehealth comparing internet protocol and home address (Kaustav P Shah et al)

BMJ *Quality & Safety* online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p>BMJ <i>Quality & Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none">• Editorial: Can handoffs bridge the interprofessional divide to build a team? (Aubrey Samost-Williams, Eric J Thomas)• Patient safety measures for virtual consultations in primary care: a systematic review (Tetiana Lunova, Katherine-Helen Hurndall, Ulrik Bak Kirk, Bryony Dean Franklin, Ara Darzi, Ana Luisa Neves)• Editorial: How to scale and spread catheter avoidance nationwide (Jerome A Leis)

Online resources

Stop racism. It starts with me campaign resources

<https://metronorth.health.qld.gov.au/better-together-van/stop-racism>

Metro North Health in Queensland has developed a suite of resources for its *Stop Racism. It Starts with Me* campaign. The campaign is part of their Health Equity Strategy and has been developed through co-design with Aboriginal and Torres Strait Islander staff, patients, and community members.

Australian Living Evidence Collaboration

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

[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:

- *Misuse of **ADHD Prescription Stimulants** in Adults: Rapid evidence product*
<https://effectivehealthcare.ahrq.gov/products/misuse-prescription/rapid-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>

STOP VISITOR RESTRICTIONS MAY BE IN PLACE

For all staff

Combined contact & droplet precautions*
in addition to standard precautions

Before entering room/care zone	At doorway prior to leaving room/care zone
1 Perform hand hygiene	1 Remove and dispose of gloves if worn
2 Put on gown	2 Perform hand hygiene
3 Put on surgical mask	3 Remove and dispose of gown
4 Put on protective eyewear	4 Perform hand hygiene
5 Wear gloves, in accordance with standard precautions	5 Remove protective eyewear
	6 Perform hand hygiene
	7 Remove and dispose of mask
	8 Leave the room/care zone
	9 Perform hand hygiene

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

*e.g. Acute respiratory tract infection with unknown aetiology, seasonal influenza and respiratory syncytial virus (RSV)
For more detail, refer to the Australian Guidelines for the Prevention and Control of Infection in Healthcare and your state and territory guidance.

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- *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

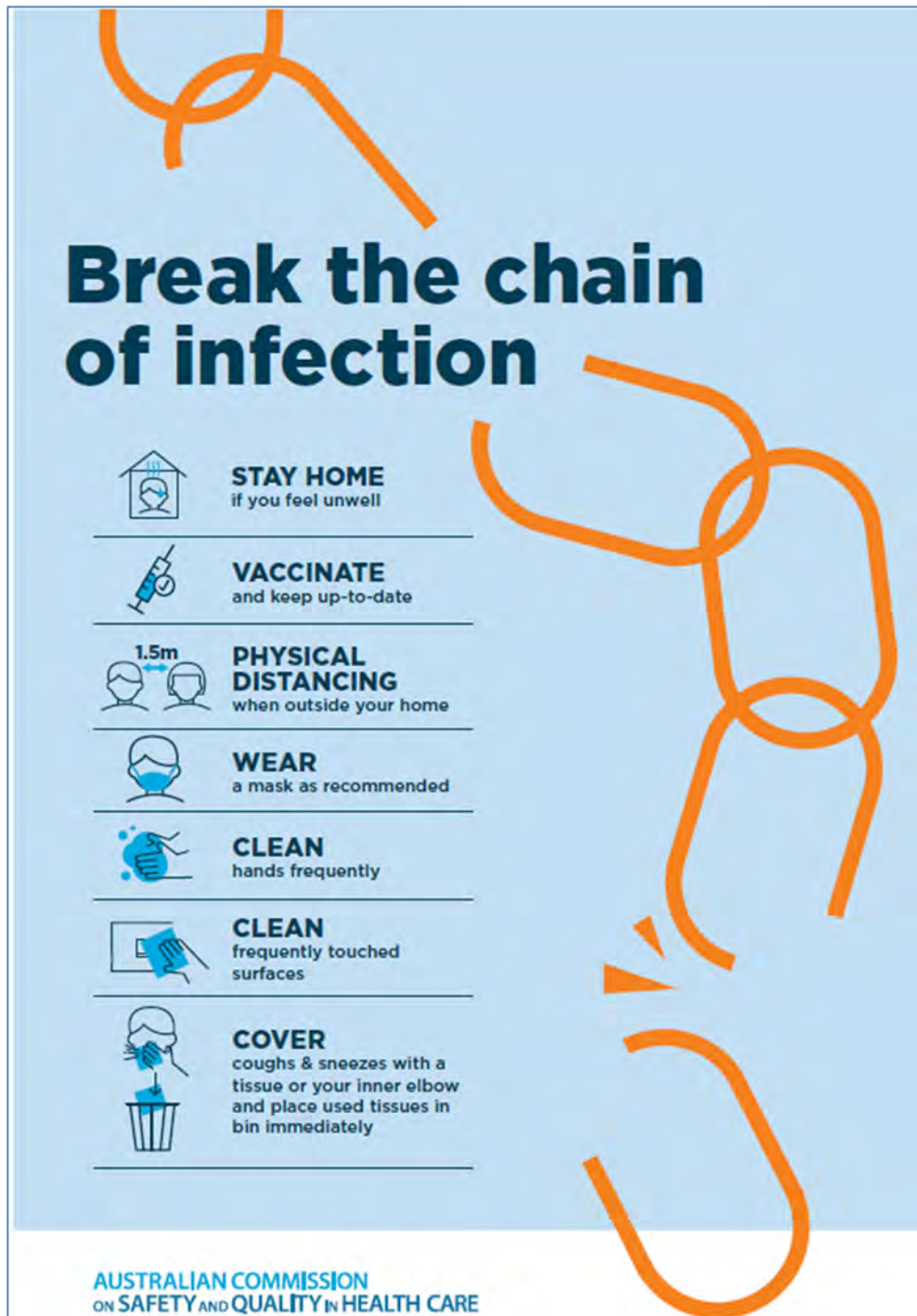
Before entering room/care zone	At doorway prior to leaving room/care zone
<div style="display: flex; align-items: center;"> <div style="background-color: red; color: white; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin-right: 10px;">1</div>  <div>Perform hand hygiene</div> </div>	<div style="display: flex; align-items: center;"> <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;"> <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;"> <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;"> <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;"> <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;"> <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;">4</div>  <div>Leave 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;">5</div>  <div>Wear gloves in accordance with standard precautions</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>Perform hand hygiene (in an anteroom/outside the room/care zone)</div> </div>
What else can you do to stop the spread of infections? <ul style="list-style-type: none"> 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 	<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;">6</div>  <div>Remove protective eyewear (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;">7</div>  <div>Perform hand hygiene (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;">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>

KEEP DOOR CLOSED AT ALL TIMES

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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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