

- » Antimicrobial Stewardship in Australian Hospitals
- » Accreditation Update
- » TallMan Lettering
- » External Evaluation of the National Clinical Handover Initiative Pilot Program
- » ACSQHC *On the Radar*
- » ACSQHC Legislation Announcement
- » Welcome to Dr Heather Buchan

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AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTHCARE

ANTIMICROBIAL STEWARDSHIP IN AUSTRALIAN HOSPITALS

On 7 April 2011 the Commission launched the book *Antimicrobial Stewardship in Australian Hospitals 2011*, as part of a national action to combat antimicrobial resistance in Australia.

The book highlights the dangers of unnecessary and inappropriate use of antibiotics (and other antimicrobials) and encourages hospitals to implement antimicrobial stewardship programs.

Antimicrobial Stewardship in Australian Hospitals 2011 demonstrates that an organised antimicrobial management program - known as antimicrobial stewardship - is an effective approach to antimicrobial resistance. Antimicrobial stewardship also reduces the rate of healthcare-associated infection by resistant organisms and subsequent transmission to other patients.

The Commission is undertaking a large number of initiatives to assist hospitals implement antimicrobial stewardship in their facilities in addition to providing copies of the book.

These include:

- A National Antimicrobial Stewardship Workshop held on 7 April 2011
- Providing a range of resources on the Commission web site
- Developing an antimicrobial online training module in conjunction with the National Prescribing Service and
- A checklist of essential AMS elements for hospital staff to use as a self-assessment tool (and available in June 2011 from the Commission web site).

The book and other resources are available for downloading from the Commission web site www.safetyandquality.gov.au



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Please feel free to forward this newsletter to others who may be interested in Commission activities. If this newsletter was forwarded to you by someone else and you would like to receive future issues directly, please contact Amy Winter at the Australian Commission on Safety and Quality in Health Care: (02) 9126 3605 or amy.winter@safetyandquality.gov.au. If you do not wish to receive future issues please let us know.

ACCREDITATION UPDATE

The Commission has developed ten draft National Safety and Quality Health Service Standards (the NSQHS Standards) following substantial consultation and collaboration with jurisdictions, technical experts and a wide range of stakeholders, including health professionals and consumers.

The NSQHS Standards have now been piloted in a range of health services, with feedback from the pilots to be incorporated into the final version of the NSQHS Standards before they are forwarded to Health Ministers for consideration in June 2011.

It is anticipated that the full implementation of the NSQHS Standards in all high risk healthcare settings will commence early in 2013. Accreditation of all these health services will include an assessment against the NSQHS Standards. Services that are not required to be accredited may use the NSQHS Standards as part of their internal quality frameworks.

The ten NSQHS Standards are:

- Governance for Safety and Quality in Health Service Organisations
- Partnering with Consumers
- Healthcare Associated Infections
- Medication Safety
- Patient Identification and Procedure Matching
- Clinical Handover
- Blood and Blood Products
- Prevention and Management of Pressure Injuries
- Recognising and Responding to Clinical Deterioration in Acute Health Care
- Preventing Falls and Harm from Falls

There will be a transitional phase of approximately 18 months when health services will be able to choose to be accredited under their current system or under a system using the NSQHS Standards.

By 2015, following full implementation, a process of evaluation and review will be completed and a process to update and amend the NSQHS Standards will commence.

The final NSQHS Standards and information about the implementation of the Australian Health Service Safety and Quality Accreditation Scheme will be distributed through the Commission's stakeholder networks and will also be available on the Commission web site.

If you would like to be included on the distribution list, please send your request by email to: mail@safetyandquality.gov.au.

TALLMAN LETTERING

The Commission has released a standardised National Tall Man Lettering approach for improving medication safety. Tall Man is a typographic technique that helps to reduce confusion between similar medicines names which can be confused and cause patient harm.

A methodology was developed to identify medicines with similar names and to prioritise those names by assessing the likelihood of them being confused and by establishing the severity of harm that may arise by the confusion. Through the process, pairs, or groups, of high priority confusable names were identified and form the first national list of similar medicines names with Tall Man lettering applied to them to reduce the risk of confusion and error.

National Tall Man Lettering will assist to:

- Prevent the proliferation of various lists of Tall Man names, which may lead to inconsistency in the application of the technique and result in confusion amongst clinicians, software vendors, regulators and the pharmaceutical industry
- Ensure that the best available scientific evidence is used to support the development of Tall Man names and
- Provide credibility to the technique as a tool which can be used to help reduce the risks associated with look alike, sound alike drug names.

National Tall Man Lettering can be used in a number of ways including incorporation into medical software to enable the presentation of selected drug names in Tall Man format in a variety of settings such as prescribing and dispensing software.

The Commission will maintain the National Tall Man Lettering list by removing medicines that are no longer available, and by adding those identified and tested through the established methodology.

To view the TallMan Lettering approach please visit the Commission web site.

EXTERNAL EVALUATION OF THE NATIONAL CLINICAL HANDOVER INITIATIVE PILOT PROGRAM

In 2010 the Commission engaged Grosvenor Managing Consulting to externally evaluate the National Clinical Handover Initiative Pilot Program (the Pilot Program).

The objectives of the Pilot Program were:

- to achieve significant, sustained and measurable reductions in communication gaps
- to develop reliable measures of impact on patient outcomes
- to achieve national learning on handover across the continuum of care
- to develop standardised operating protocols for handover based on the best available evidence and designed to accelerate systemic improvements

The evaluation was carried out in three stages. These included reviewing policy and program evidence on clinical handover at jurisdictional levels and for other stakeholders, analysing the outcomes, impacts, spread and sustainability of the individual pilot projects and reporting on achievements of the National Clinical Handover Initiative Pilot Program.

The evaluation found that overall the Pilot Program has:

- raised the profile of clinical handover as a key safety and quality issue and established a national impetus for change
- fostered expertise and clinical handover champions for change
- embedded improved handover in a number of health services
- developed a range of tools for improving different types of handover across different settings
- reinforced the need for effective approaches to change, spread and sustainability
- contributed to jurisdictional handover priorities and policies
- created a body of published work on pilot processes, outcomes and lessons learned

- identified gaps in handover knowledge and practice for further investment and development.

While the Pilot Program did not meet its objective of achieving reliable measures of impacts on patient outcomes, the evaluation found that this reflects the international literature on clinical handover and was a highly ambitious objective to achieve in the space of a short pilot. However, the Pilot Program has built a strong platform for the next phase of clinical handover work in Australia and the Commission will continue to work towards achieving improvements in patient outcomes through improved clinical handover.

The evaluation team has made recommendations for future areas of work in clinical handover, which the Commission will consider and work towards according to national clinical handover priorities. The Final Report of the evaluation will be publicly available on the Commissions website in April 2011.



ON THE RADAR

As of 21 February 2011 the Commission has made available, via its web site and a weekly e-bulletin, the information resource *On the Radar*.

On the Radar is an annotated listing of recent publications and other information considered relevant to the Commission's work and context. Some material directly relates to current Commission work areas while other information reflects current or emerging issues pertinent to the areas of interest.

To read *On the Radar* or sign up to the *On the Radar* e-bulletin please visit the Commission web site www.safetyandquality.gov.au.

ACSQHC LEGISLATION

On 21 March 2011 the Minister for Health and Ageing The Hon Nicola Roxon MP announced the passing of key health reform legislation that will drive safe, high quality health care for all Australians.

In welcoming the passing of legislation to establish a permanent Australian Commission on Safety and Quality in Health Care, Minister Roxon said that it delivers one of the major components of the Gillard Government's health reform agenda.

"The establishment of the Commission as a permanent, independent body from 1 July 2011, dedicated to monitoring safety and quality in health care, is critical to the Government's health reforms which are driving greater transparency and accountability of health services to the Australian public." Minister Roxon said.

The key functions of the permanent Australian Commission on Safety and Quality in Health Care, as outlined in the legislation, include:

- to promote, support and encourage the implementation of initiatives relating to health care safety and quality
- to collect, analyse, interpret and disseminate information relating to health care safety and quality
- to publish reports and papers relating to health care safety and quality
- to formulate, promote and support the implementation of standards, guidelines and indicators relating to health care safety and quality, and monitor their implementation and impact
- to advise on national clinical standards
- to formulate model national schemes that provide for the accreditation of organisations that provide health care services and relate to health care safety and quality

- to consult and co-operate with persons, organisations and governments on health care safety and quality
- to promote, support, encourage, conduct and evaluate training programs and research for purposes in connection with the performance of any of the Commission's functions.

Minister Roxon said the Commission would take a leading role in ensuring that all Australians had a healthcare system that provides safe, high-quality health care services.

WELCOME DR HEATHER BUCHAN

The Commission is pleased to welcome our new Director of Implementation Support, Dr Heather Buchan.

Heather is a public health physician with a particular interest in improving health care quality. She undertook her medical and specialty training in New Zealand and was then awarded a Nuffield Medical Fellowship to undertake post-graduate studies in epidemiology at the University of Oxford. She has worked in medical management and policy positions in New Zealand, the UK and Australia.

She was the Chief Executive Officer of the National Institute of Clinical Studies, established by the Australian Government to help close gaps between evidence and clinical practice, from its beginnings in 2001 until it became part of the NHMRC in 2007. She worked part-time in various positions for the NHMRC from 2007 – 2011 and was Vice-Chair of the Guidelines International Network from 2007 – 2009.

Heather will coordinate and develop the Commission's assistance role in implementation of Commission work programs.