# Australian COmmission on Safety and Quality in Health Care logo with Radar imageOn the Radar

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**On the Radar**

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**Books**

*Australian Atlas of Healthcare Variation*

Australian Commission on Safety and Quality in Health Care and National Health Performance Authority

Sydney: ACSQHC; 2015 26 November 2015.

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| URL | <http://www.safetyandquality.gov.au/atlas> |
| Notes | On Thursday 26 November, the Honourable Sussan Ley, Australian Minister for Health, launched the first national healthcare ‘atlas’, illuminating variation in health care provision across Australia.  The *Australian Atlas of Healthcare Variation* presents a clear picture of substantial variation in healthcare use across Australia, across areas such as antibiotic prescribing, surgical, mental health and diagnostic services.  Some variation is expected and associated with need-related factors such as underlying differences in the health of specific populations, or personal preferences. However, the weight of evidence in Australia and internationally suggests that much of the variation documented in the atlas is likely to be unwarranted. Understanding this variation is critical to improving the quality, value and appropriateness of health care.  Six clinical areas are examined in the atlas, covering prescribing, diagnostic, medical and surgical interventions. Priority areas for investigation and action include the use of antimicrobials and psychotropic medicines; variation in rates of fibre optic colonoscopy, knee arthroscopy, hysterectomy and endometrial ablation; and inequitable access to cataract surgery.  The Australian Commission on Safety and Quality in Health Care collaborated with the Australian, state and territory governments, specialist medical colleges, clinicians and consumer representatives to develop the atlas.  It is the first time that data from the Medicare Benefits Schedule (MBS), Pharmaceutical Benefits Scheme (PBS) and Admitted Patient Care National Minimum Data Set (APC NMDS) have all been used to explore variation across different healthcare settings.  The atlas includes key findings and recommendations for action. The atlas identifies a number of geographic and clinical areas where marked variation in practice is occurring. One of the aims is of providing information to improve the appropriateness of care for populations and individuals in Australia and increasing the value obtained from resources allocated to health. |

**Reports**

*Managing health services through devolved governance: A perspective from Victoria, Australia*

Ham C, Timmins N

London: The King's Fund; 2015. p. 50.

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| URL | <http://www.kingsfund.org.uk/publications/articles/managing-health-services-devolved-governance-victoria-australia> |
| Notes | The UK-based Kings Fund was commissioned by the Victorian Department of Health and Human Services to undertake an independent review of the model of the state’s devolved governance of health services.  The report’s authors found:  “Victoria delivers good results … being at, close to and sometimes above the average on many indicators. Underpinning Victoria’s performance is a well-understood governance model that gives the boards running health services at a local level considerable autonomy within a state-wide framework of priorities.  It is also important that there has been a high degree of organisational stability …and the pioneering use of case mix-funding that has contributed to the costs of care being lower than in other states.  …there are several areas in which Victoria could make improvements. These include reviewing the number of boards …and bringing greater independence into the appointment of board members to ensure they are selected on the basis of skills and experience.  There is also a compelling case for more collaboration between boards. This is particularly important in the case of boards responsible for regional and rural health services, where isolation from other health services creates risks in relation to the safety and quality of patient care….  The transparent reporting of data on performance is another area for improvement. Not only would this strengthen accountability to the public, but also it would support health care providers to compare their performance with others and identify areas in which they can improve.  … Increased transparency on safety and quality would also provide boards with the information they need to discharge their responsibilities.  A recurring theme …was the proper role of the health department in a model of devolved governance. …it ought to have greater involvement in the planning and oversight of clinical services. To do this, the health department would need to strengthen its own capabilities in clinical services planning and monitoring.” |

**Journal articles**

*Antibiotic resistance: are we all doomed?*

Collignon P

Internal Medicine Journal. 2015;45(11):1109-15.

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| DOI | <http://dx.doi.org/10.1111/imj.12902> |
| Notes | This piece appeared in the Royal Australasian College of Physicians’ journal and offers a cogent summary of the issue of antibiotic resistance – “a growing and worrying problem associated with increased deaths and suffering for people.”  But, as Collignon argues, there are **two factors** that drive **antimicrobial resistance**, and (fortunately) both can be controlled. The two factors are the **volumes of antimicrobials** used and the **spread of resistant micro-organisms** and/or the genes encoding for resistance.  The importance of recognising that the relevant antimicrobials are used in human and animal health is noted.  A range of activities that can help achieve better control of antimicrobial resistance are identified. These include:   * preventing infections * better surveillance with good data on usage patterns and resistance patterns across all sectors, both human and agriculture, locally and internationally * acting on such surveillance * ensuring that food and water sources do not spread multi-resistant micro-organisms or resistance genes * antimicrobial stewardship. |

For information on the Commission’s work on antimicrobial use and resistance in Australia, see <http://www.safetyandquality.gov.au/national-priorities/amr-and-au-surveillance-project/>

*Preoperative bathing or showering with skin antiseptics to prevent surgical site infection*

Webster J, Osborne S

Cochrane Database of Systematic Reviews. 2015.

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| DOI | <http://dx.doi.org/10.1002/14651858.CD004985.pub5> |
| Notes | From the Cochrane Library comes this review into the quite common practice of using an antiseptic solution for preoperative bathing or showering based on the expectation that it will help to prevent surgical site infections from developing. This review identified seven trials, with over 10,000 patients, that tested skin antiseptics (chlorhexidine solution) against normal soap or no pre-surgical washing. The review of these trials did not show clear evidence that the use of chlorhexidine solution before surgery was better than other wash products at preventing surgical site infections from developing after surgery. The authors also conclude that “Efforts to reduce the incidence of nosocomial surgical site infection should focus on interventions where effect has been demonstrated.” |

For information on the Commission’s work on healthcare associated infections, see <http://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/>

*Australian Journal of Primary Health*

Volume 21(4) 2015

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| URL | <http://www.publish.csiro.au/nid/262/issue/7505.htm> |
| Notes | A new issue of *Australian Journal of Primary Health* has been published. Articles in this issue of *Australian Journal of Primary Healt*h include:   * **Obesity management** by general practitioners: the unavoidable necessity (Sarah Jansen, Ben Desbrow and Lauren Ball) * Critical design features for establishing a **childhood obesity monitoring** program in Australia (Kathleen E Lacy, Melanie S Nichols, Andrea M de Silva, S E Allender, B A Swinburn, E R Leslie, L V Jones and P J Kremer) * Development of an Australian **practice-based research network** as a community of practice (Bridget Dijkmans-Hadley, Andrew Bonney and Stephen R Barnett) * Is there a role for **pharmacists** in **multidisciplinary health-care teams** at community outreach events for the homeless? (Vincent Chan, Marea Patounas, Debbie Dornbusch, Hung Tran and Patricia Watson) * Primary health-care responses to **methamphetamine use** in Australian Indigenous communities (Sarah MacLean, Angela Harney and K Arabena) * Systematic review of **integrated models of health care** delivered at the primary–secondary interface: how effective is it and what determines effectiveness? (Geoffrey K Mitchell, Letitia Burridge, Jianzhen Zhang, Maria Donald, Ian A Scott, Jared Dart and Claire L Jackson) * **Community participation** in **health service reform**: the development of an innovative remote Aboriginal primary health-care service (Carole Reeve, John Humphreys, John Wakerman, Vicki Carroll, Maureen Carter, Tim O’Brien, Carol Erlank, Rafik Mansour and Bec Smith) * Increasing **Pap smear rates** at an urban Aboriginal Community Controlled Health Service through translational research and continuous quality improvement (Melanie S Dorrington, Ana Herceg, Kirsty Douglas, Julie Tongs and Marianne Bookallil) * Trends in uptake of the **75+ health assessment** in Australia: a decade of evaluation (Aliza Haslinda Hamirudin, Abhijeet Ghosh, Karen Charlton, Andrew Bonney and Karen Walton) * **Medication-taking behaviour** in New South Wales patients with type 2 diabetes: an observational study (Teerapon Dhippayom and Ines Krass) * Building evidence for **peer-led interventions**: assessing the cost of the Adolescent Asthma Action program in Australia (Michael E Otim, Ranmalie Jayasinha, Hayley Forbes and Smita Shah) * Impact evaluation of a **health promotion-focused organisational development strategy** on a health service (Michelle Costello, Jane Taylor and Lily O’Hara) * Consistency of **denominator data in electronic health records** in Australian primary healthcare services: enhancing data quality (Ross Bailie, Jodie Bailie, Amal Chakraborty and Kevin Swift) * Impact of initiatives to reduce **public dental waiting lists** in Queensland, Australia (Ratilal Lalloo and Jeroen Kroon) |

*Journal for Healthcare Quality*

November/December 2015, Volume 37, Issue 6

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| URL | <http://journals.lww.com/jhqonline/toc/2015/11000> |
| Notes | A new issue of *Journal for Healthcare Quality* has been published. Articles in this issue of *Journal for Healthcare Quality* include:   * **Medication Discrepancies** During Transitions of Care: A Comparison Study (Trompeter, Jessica M.; McMillan, Ashlee N.; Rager, Michelle L.; Fox, Jeremy R.) * The Gap between Compliance with the Quality Performance Measure “**Perioperative Temperature Management**” and Normothermia (Steelman, Victoria M.; Perkhounkova, Yelena S.; Lemke, Jon H.) * What Influences **Participation in QI**? A Randomized Trial of Addiction Treatment Organizations (Grazier, Kyle L.; Quanbeck, Andrew R.; Oruongo, John; Robinson, James; Ford, James H. II; McCarty, Dennis; Pulvermacher, Alice; Johnson, Roberta A.; Gustafson, David H.) * A Coordinated **Patient Transport System for ICU Patients** Requiring Surgery: Impact on Operating Room Efficiency and ICU Workflow (Brown, Michael J.; Kor, Daryl J.; Curry, Timothy B.; Marmor, Yariv; Rohleder, Thomas R.) * Geographic Localization of Housestaff Inpatients Improves **Patient–Provider Communication, Satisfaction, and Culture of Safety** (Olson, Douglas P.; Fields, Barry G.; Windish, Donna M.) * A Falls Wheel in a Large Academic Medical Center: An Intervention to Reduce **Patient Falls** With Harm (Hefner, Jennifer L.; McAlearney, Ann Scheck; Mansfield, Jerry; Knupp, Amy M.; Moffatt-Bruce, Susan D.) |

*BMJ Quality and Safety* online first articles

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| URL | <http://qualitysafety.bmj.com/content/early/recent> |
| Notes | *BMJ Quality and Safety* has published a number of ‘online first’ articles, including:   * What methods are used to apply **positive deviance** within healthcare organisations? A systematic review (Ruth Baxter, Natalie Taylor, Ian Kellar, Rebecca Lawton) * An **embedded checklist** in the Anesthesia Information Management System improves pre-anaesthetic induction setup: a randomised controlled trial in a simulation setting (Douglas Wetmore, Andrew Goldberg, Nishant Gandhi, John Spivack, Patrick McCormick, Samuel DeMaria, Jr) * A behaviourally anchored rating scale for evaluating the use of the **WHO surgical safety checklist**: development and initial evaluation of the WHOBARS (Daniel A Devcich, Jennifer Weller, Simon J Mitchell, Scott McLaughlin, Lauren Barker, Jenny W Rudolph, Daniel B Raemer, Martin Zammert, Sara J Singer, Jane Torrie, Chris MA Frampton, Alan F Merry) * The problem with **preventable deaths** (Helen Hogan) * Half-life of a **printed handoff document** (Glenn Rosenbluth, Ronald Jacolbia, Dimiter Milev, Andrew D Auerbach) * Rapid cycle development of a multifactorial intervention achieved sustained reductions in **central line-associated bloodstream infections** in haematology oncology units at a children’s hospital: a time series analysis (Christopher E Dandoy, Jackie Hausfeld, Laura Flesch, Deanna Hawkins, Kathy Demmel, Deanna Best, Erin Osterkamp, T Bracke, R Nagarajan, S Jodele, J Holt, M J Giaccone, S M Davies, U Kotagal, J Simmons) |

**Online resources**

*[UK] NICE Guidelines and Quality Standards*

<http://www.nice.org.uk>

The UK’s National Institute for Health and Care Excellence (NICE) has published new (or updated) guidelines and quality standards. The latest updates are:

* NICE Guideline NG25 **Preterm labour and birth** <https://www.nice.org.uk/guidance/ng25>
* NICE Guidelines NG26 **Children’s attachment**: attachment in children and young people who are adopted from care, in care or at high risk of going into care <http://www.nice.org.uk/guidance/ng26>

*Linking data for better healthcare performance measurement.*

<http://bhi.nsw.gov.au/events>

The NSW Bureau for Health Information (BHI) recently hosted an event bringing together local and international experts to discuss *Linking data for better healthcare performance measurement*. The video and presentations from the event are now available on the BHI’s website, including the major presentation by Dr Rick Glazier, Senior Scientist and Program Lead of Primary Care and Population Health at the Institute for Clinical Evaluative Sciences, Canada.

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