



On the Radar

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On the Radar

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Reports

Models of Care for High-Need, High-Cost Patients: An Evidence Synthesis

McCarthy D, Ryan J, Klein S

New York: The Commonwealth Fund; 2015. p. 20.

URL	http://www.commonwealthfund.org/publications/issue-briefs/2015/oct/care-high-need-high-cost-patients
Notes	<p>The [US] Commonwealth Fund have released this ‘issue brief’ examining evidence on care models designed to improve outcomes and reduce costs for patients with complex needs (typically multiple chronic conditions and/or functional limitations). The authors report that successful models have several common attributes: targeting patients likely to benefit from the intervention; comprehensively assessing patients’ risks and needs; relying on evidence-based care planning and patient monitoring; promoting patient and family engagement in self-care; coordinating care and communication among patients and providers; facilitating transitions from the hospital and referrals to community resources; and providing appropriate care in accordance with patients’ preferences.</p> <p>The evidence of impact of such models is modest and few of these models have been widely adopted in practice because of barriers, such as a lack of supportive financial incentives under fee-for-service reimbursement arrangements. The authors suggest that “overcoming these challenges will be essential to achieving a higher-performing health care system for this patient population”.</p>

General practice activity in Australia 2014–15

General practice series No 38

Britt H, Miller GC, Henderson J, Bayram C, Harrison C, Valenti L, et al

Sydney: Sydney University Press; 2015. 210p.

URL	http://purl.library.usyd.edu.au/sup/9781743324523
Notes	<p>This is the latest report from the long-running Bettering the Evaluation and Care of Health (BEACH) project at the University of Sydney. The BEACH program uses a nationally representative sample of 99,500 patient encounters taken from 995 randomly selected GPs who each reach details of 100 patient encounters.</p> <p>According to the website, it is suggested that “for an ‘average’ 100 problems managed, GPs recorded: 66 medications (including 55 prescribed, 5 supplied to the patient and 6 advised for over-the-counter purchase); 11 procedures; 22 clinical treatments (advice and counselling); 6 referrals to specialists and 3 to allied health services; 30 orders for pathology tests and 7 imaging tests.</p> <p>A subsample study of measured risk factors in more than 31,000 patients suggests that in the adult (18 years and over) population who attended general practice at least once in 2014–15 the prevalence of obesity was 27%, overweight was 34%, daily smoking was 17%, and at-risk alcohol consumption was 26%. One in four people in the attending population had at least two of these risk factors.”</p>

The Road Is Made by Walking: Towards a better primary health care system for Australia’s First Peoples. Summary report

Dwyer J, Martini A, Brown C, Tilton E, Devitt J, Myott P, et al.

Melbourne: Lowitja Institute; 2015. p. 24.

URL	https://www.lowitja.org.au/lowitja-publishing/L046
Notes	<p>This is the summary report of a study of reforms in primary health care (PHC) for Aboriginal and Torres Strait Islander communities in the Northern Territory (between 2009 and 2014) and Cape York, Queensland (between 2006 and 2014). The reforms were intended to establish a regional system of PHC provision with reliable access to care for all Aboriginal and Torres Strait Islander communities in the regions along with increased community control of health care by transferring some or most of the responsibility for providing PHC from government health authorities to regional Aboriginal Community Controlled Health Organisations (ACCHOs). The report describes the case studies, the achievements of each, the barriers and implications, including the need for more realistic and explicit funding, targets, etc. and the importance of the regional approach with local community control.</p>

Good Beginnings: Getting it right in the early years. Review of the evidence on the importance of a healthy start to life and on interventions to promote good beginning

Emerson L, Fox S, Smith C

Melbourne: The Lowitja Institute; 2015. p. 98.

URL	https://www.lowitja.org.au/lowitja-publishing/L048
Notes	<p>The importance of early childhood to an individual’s health and wellbeing is no secret. This report from the Lowitja Institute is a compilation three papers commissioned as part of the Stewardship Dialogues for Aboriginal and Torres Strait Islander Health, a project of the Lowitja Institute. The first two were written to inform the discussion during the Stewardship Dialogues and the third was written after the Dialogues to address an identified need for decision makers to have access to a more systematic review of the evidence about the effectiveness of</p>

	<p>different interventions. These papers review the evidence on the importance of a healthy start to life and on interventions to promote good beginnings. Dialogue participants identified that education and early years interventions, implemented in collaboration with Aboriginal and Torres Strait Islander communities and properly adapted to their settings, held the potential to produce significant long-term effects on health and wellbeing</p>
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Journal articles

Getting rid of "never events" in hospitals

Morgenthaler T, Harper CM

Harvard Business Review. 2015 (20 October).

URL	https://hbr.org/2015/10/getting-rid-of-never-events-in-hospitals
Notes	The US Agency for Healthcare Research and Quality summarised this piece by noting “Never events are devastating and preventable, and health care organizations are under increasing pressure to eliminate them. This commentary discusses how the Mayo Clinic reduced never events by using a mortality-review process to identify opportunities for improvement and developing and disseminating safe practices through the organization.”

Health Expectations

Volume 18, Issue 6, December 2015

URL	http://onlinelibrary.wiley.com/doi/10.1111/hex.2015.18.issue-6/issuetoc
Notes	A new issue of <i>Health Expectations</i> has been published. The Table of Contents is extremely long as this issue is over 1,500 pages long. <i>Health Expectations</i> casts itself as ‘an international journal of public participation in health care and health policy’, so articles range across issues including shared decision making through to patient, family and carer involvement in health service planning, delivery and research.

Milbank Quarterly

December 2015 (Volume 93, Issue 4)

URL	http://www.milbank.org/the-milbank-quarterly/current-issue http://onlinelibrary.wiley.com/doi/10.1111/1468-0009.2015.93.issue-4/issuetoc
Notes	<p>A new issue of the <i>Milbank Quarterly</i> has been published. Articles in this issue of the <i>Milbank Quarterly</i> include:</p> <ul style="list-style-type: none"> • Health Services Research, Medicare, and Medicaid: A Deep Bow and a Rechartered Agenda (Donald M Berwick) • Accountability for Health (Joshua M Sharfstein) • A Tale of Two Diseases: Mental Illness and HIV/AIDS (Lawrence O Gostin) • Potential Policies and Laws to Prohibit Weight Discrimination: Public Views from 4 Countries (Rebecca M Puhl, Janet D Latner, Kerry S O’Brien, Joerg Luedicke, Sigrun Danielsdottir, and Ximena Ramos Salas) • Composite Measures of Health Care Provider Performance: A Description of Approaches (Michael Schwartz, Joseph D Restuccia, and Amy K Rosen) • How Effective Are Incident-Reporting Systems for Improving Patient Safety? A Systematic Literature Review (Charitini Stavropoulou, Carole Doherty, and Paul Tosey)

	<ul style="list-style-type: none"> • David Sackett's Unintended Impacts on Health Policy (John N Lavis and Peter Tugwell)
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Journal of Health Services Research & Policy
January 2016; Vol. 21, No. 1

URL	http://hsr.sagepub.com/content/21/1?etoc
Notes	<p>A new issue of the <i>Journal of Health Services Research & Policy</i> has been published. Articles in this issue of the <i>International Journal of Health Services Research & Policy</i> include:</p> <ul style="list-style-type: none"> • Editorial: Care homes and health services: an uneasy alliance (Claire Goodman) • Variation in avoidable emergency admissions: multiple case studies of emergency and urgent care systems (Alicia O’Cathain, Emma Knowles, Janette Turner, Enid Hirst, Steve Goodacre, and Jon Nicholl) • An evaluation tool for assessing performance in priority setting and resource allocation: multi-site application to identify strengths and weaknesses (William Hall, Neale Smith, C Mitton, J Gibson, and S Bryan) • Is drug choice by general practitioners influenced by exposure to specialists? Record-linkage study in Italy (Giulio Formoso and Marco Lombardi) • Enhancing the contribution of research to health care policy-making: a case study of the Dutch Health Care Performance Report (Ingrid Hegger, Lisanne K Marks, Susan WJ Janssen, A J Schuit, and H AM van Oers) • Improving access: modifying Penchansky and Thomas’s Theory of Access (Emily Saurman) • The challenge of creating a ‘Welsh NHS’ (Christopher Riley) • Acute ischaemic stroke patients – direct admission to a specialist centre or initial treatment in a local hospital? A systematic review (Alastair Pickering, Susan Harnan, Katy Cooper, A Sutton, S Mason, and J Nicholl) • Rationalizing medical work (Paul Taylor) • Why we need to move beyond diagnosis-related groups and how we might do so (Marie-Louise Kirchhoff Sørensen and Viola Burau) • Why are doctors dissatisfied? The role of origin myths (Robert Dingwall)

International Journal for Quality in Health Care
Vol. 27, No. 6, December 2015

URL	http://intqhc.oxfordjournals.org/content/27/6?etoc
Notes	<p>A new issue of the <i>International Journal for Quality in Health Care</i> has been published. Many of the papers in this issue have been referred to in previous editions of <i>On the Radar</i> (when they released online). Articles in this issue of the <i>International Journal for Quality in Health Care</i> include:</p> <ul style="list-style-type: none"> • The missing evidence: a systematic review of patients' experiences of adverse events in health care (Reema Harrison, Merrilyn Walton, Elizabeth Manias, Jennifer Smith–Merry, Patrick Kelly, Rick Iedema, and Lauren Robinson) • Population experiences of primary care in 11 Organization for Economic Cooperation and Development countries (James Macinko and F C Guanais) • Is compliance with hospital accreditation associated with length of stay and acute readmission? A Danish nationwide population-based study (Anne Mette Falstie-Jensen, Mette Nørgaard, Erik Hollnagel, Heidi

	<p>Larsson, and Søren Paaske Johnsen)</p> <ul style="list-style-type: none"> • Implementation of a multidisciplinary clinical pathway for the management of postpartum hemorrhage: a retrospective study (Hee Young Cho, Sungwon Na, Man Deuk Kim, Incheol Park, Hyun Ok Kim, Young-Han Kim, Yong-Won Park, Ja Hae Chun, Seon Young Jang, Hye Kyung Chung, Dawn Chung, Inkyung Jung, and Ja-Young Kwon) • Editor's choice: Patients' use of digital audio recordings in four different outpatient clinics (Maiken Wolderslund, Poul-Erik Kofoed, René Holst, and Jette Ammentorp) • Bradycardia as an early warning sign for cardiac arrest during routine laparoscopic surgery (Jonathan Yong, Peter Hibbert, William B Runciman, and Brendon J Coventry) • Is accreditation linked to hospital infection rates? A 4-year, data linkage study of Staphylococcus aureus rates and accreditation scores in 77 Australian acute hospitals (Virginia Mumford, Rebecca Reeve, David Greenfield, Kevin Forde, Johanna Westbrook, and Jeffrey Braithwaite) • Documentation and disclosure of adverse events that led to compensated patient injury in a Norwegian university hospital (Susanne Skjervold Smeby, Roar Johnsen, and Gudmund Marhaug) • Impact of working 48 h per week on opportunities for training and patient contact: the experience of Irish interns (Paul O'Connor, Sinéad Lydon, Gozie Offiah, Sean Ahern, Brian Moloney, and Dara Byrne) • Editor's choice: Quality management and perceptions of teamwork and safety climate in European hospitals (Solvejg Kristensen, Antje Hammer, Paul Bartels, Rosa Suñol, Oliver Groene, Caroline A Thompson, Onyebuchi A Arah, Halina Kutaj-Wasikowska, Philippe Michel, and Cordula Wagner) • Health services should collect feedback from inpatients at the point of service: opinions from patients and staff in acute and subacute facilities (Stephen D Gill, Jane Redden-Hoare, Trisha L Dunning, Andrew J Hughes, and Pamela J. Dolley) • Predictors and outcomes of unplanned readmission to a different hospital (Hongsoo Kim, William W. Hung, Myunghee Cho Paik, Joseph S. Ross, Zhonglin Zhao, Gi-Soo Kim, and Kenneth Boockvar) • The internal audit of clinical areas: a pilot of the internal audit methodology in a health service emergency department (Alison Brown, Mario Santilli, and Belinda Scott) • Quality improvement and accountability in the Danish health care system (Jan Mainz, Solvejg Kristensen, and Paul Bartels) • Pathology test-ordering behaviour of Australian general practice trainees: a cross-sectional analysis (Simon Morgan, Kim M Henderson, Amanda Tapley, John Scott, Mieke L Van Driel, Neil A Spike, Lawrie A Mcarthur, Andrew R Davey, Chris Oldmeadow, Jean Ball, and Parker J Magin)
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BMJ Quality and Safety online first articles

URL	http://qualitysafety.bmj.com/content/early/recent
Notes	<p><i>BMJ Quality and Safety</i> has published a number of 'online first' articles, including:</p> <ul style="list-style-type: none"> • Paperless handover: are we ready? (Arpana R Vidyarthi, Maitreya Coffey) • The Zen of quality improvement: the waves and the tide form a unity (Charles L Bosk) • Closing the loop: a process evaluation of inpatient care team

	<p>communication (Kristy Kummerow Broman, Clark Kensinger, Heather Hart, Jason Mathisen, Sunil Kripalani)</p> <ul style="list-style-type: none"> • Addressing basic resource needs to improve primary care quality: a community collaboration programme (Seth A Berkowitz, A Catherine Hulberg, Clemens Hong, B J Stowell, K J Tirozzi, C Y Traore, S J Atlas) • Patient safety room of horrors: a novel method to assess medical students and entering residents' ability to identify hazards of hospitalisation (Jeanne M Farnan, Sean Gaffney, Jason T Poston, Kris Slawinski, Melissa Cappaert, Barry Kamin, Vineet M Arora) • Mapping search terms to review goals is essential (Friedemann Geiger, Marla L Clayman, Isabelle Scholl, Katrin Liethmann, Jürgen Kasper) • Effect of patient-centred bedside rounds on hospitalised patients' decision control, activation and satisfaction with care (Kevin J O'Leary, Audrey Killarney, L O Hansen, S Jones, M Malladi, K Marks, H M Shah) • Associations between exemption and survival outcomes in the UK's primary care pay-for-performance programme: a retrospective cohort study (Evangelos Kontopantelis, David A Springate, Darren M Ashcroft, Jose M Valderas, Sabine N van der Veer, David Reeves, Bruce Guthrie, Tim Doran)
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International Journal for Quality in Health Care online first articles

URL	http://intqhc.oxfordjournals.org/content/early/recent?papetoc
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"> • Hand-hygiene practices and observed barriers in pediatric long-term care facilities in the New York metropolitan area (Borghild Løyland, Sibyl Wilmont, Bevin Cohen, and Elaine Larson) • Community-acquired pneumonia (CAP) hospitalizations and deaths: is there a role for quality improvement through inter-hospital comparisons? (W Aelvoet, N Terryn, A Blommaert, G Molenberghs, N Hens, F De Smet, M Callens, and P Beutels) • An analysis of closed medical litigations against the obstetrics departments in Taiwan from 2003 to 2012 (Kuan-Han Wu, Hsien-Hung Cheng, Fu-Jen Cheng, Chien-Hung Wu, Pai-Chun Yen, Yung-Lin Yen, and Te-Yao Hsu) • Health services should collect feedback from inpatients at the point of service: opinions from patients and staff in acute and subacute facilities (Stephen D Gill, Jane Redden-Hoare, Trisha L Dunning, Andrew J Hughes, and Pamela J Dolley)

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 NG27 **Transition between inpatient hospital settings and community or care home settings** for adults with social care needs <https://www.nice.org.uk/guidance/ng27>
- NICE Guideline NG28 **Type 2 diabetes in adults: management** <https://www.nice.org.uk/guidance/ng28>

[UK] Consequences of Cancer Toolkit

<http://www.rcgp.org.uk/coc>

The [UK] Royal College of General Practitioners have, produced in conjunction with Macmillan Cancer Care, this toolkit that provides resources and information for primary care professionals to identify and manage the consequences of cancer treatment, and support patients to live well after a cancer diagnosis. The consequences of treatment can include physical and psychological effects, such as chronic fatigue, sexual difficulties, mental health problems, pain and urinary or gastrointestinal problems. Certain cancer treatments also increase the risk of other serious long-term conditions such as heart disease, osteoporosis or a second primary cancer.

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