# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



### On the Radar

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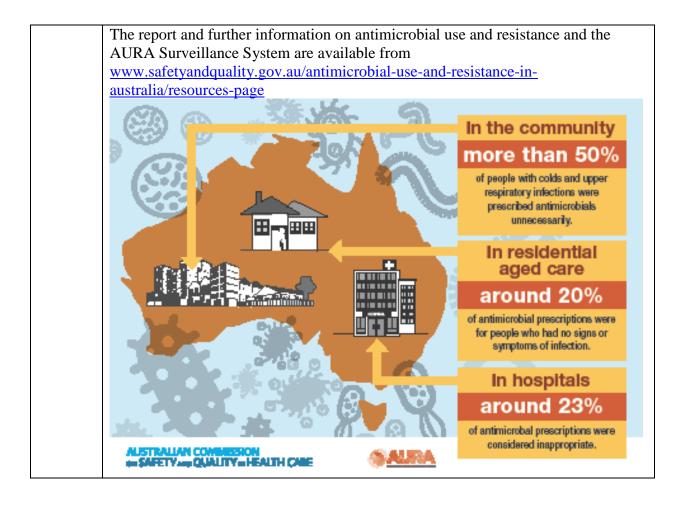
### On the Radar

Editor: Dr Niall Johnson <u>niall.johnson@safetyandquality.gov.au</u> Contributors: Niall Johnson, Dimity Herden, Amanda Mulcahy

AURA 2016: first Australian report on antimicrobial use and resistance in human health Australian Commission on Safety and Quality in Health Care

Sydney: ACSHQC; 2016. p. 196.

INDICES  http://www.safetyandquality.gov.au/antimicrobial-use-and-resistance-in-australia/resources-page/  The Australian Commission on Safety and Quality in Health Care has released the report Antimicrobial Use and Resistance in Australia (AURA 2016): First Australian report on antimicrobial use and resistance in human health. AURA 2016 contains valuable data on antimicrobial use in the community, hospitals and residential aged care facilities; key emerging issues for antimicrobial resistance; and a comparison of Australia's situation with other countries.  Antimicrobial use and resistance is a critical and immediate challenge to health systems in Australia and around the world. High and inappropriate antimicrobial use has accelerated the process of increasing resistance worldwide, including in Australia. Resistance to antibiotics is commonly found in Australian hospitals and increasingly in the community. The prevalence of multidrug-resistant bacterial pathogens is rising. In 2014, nearly half the people in the Australian community were prescribed antimicrobials; the threat of antimicrobial resistance has the potential to affect every individual.	<u> </u>	Julie y. 710311QC, 2010. p. 150.				
report Antimicrobial Use and Resistance in Australia (AURA 2016): First Australian report on antimicrobial use and resistance in human health. AURA 2016 contains valuable data on antimicrobial use in the community, hospitals and residential aged care facilities; key emerging issues for antimicrobial resistance; and a comparison of Australia's situation with other countries.  Antimicrobial use and resistance is a critical and immediate challenge to health systems in Australia and around the world. High and inappropriate antimicrobial use has accelerated the process of increasing resistance worldwide, including in Australia. Resistance to antibiotics is commonly found in Australian hospitals and increasingly in the community. The prevalence of multidrug-resistant bacterial pathogens is rising. In 2014, nearly half the people in the Australian community were prescribed antimicrobials; the threat of antimicrobial resistance has the potential to affect every individual.	-	URL				
action to prevent the spread of antimicrobial resistance.		Notes	report Antimicrobial Use and Resistance in Australia (AURA 2016): First Australian report on antimicrobial use and resistance in human health. AURA 2016 contains valuable data on antimicrobial use in the community, hospitals and residential aged care facilities; key emerging issues for antimicrobial resistance; and a comparison of Australia's situation with other countries.  Antimicrobial use and resistance is a critical and immediate challenge to health systems in Australia and around the world. High and inappropriate antimicrobial use has accelerated the process of increasing resistance worldwide, including in Australia. Resistance to antibiotics is commonly found in Australian hospitals and increasingly in the community. The prevalence of multidrug-resistant bacterial pathogens is rising. In 2014, nearly half the people in the Australian community were prescribed antimicrobials; the threat of antimicrobial resistance has the potential to affect every individual.  AURA data and reports will allow trends to be monitored over time and inform			



### Journal articles

Antimicrobial stewardship across 47 South African hospitals: an implementation study Brink AJ, Messina AP, Feldman C, Richards GA, Becker PJ, Goff DA, et al The Lancet Infectious Diseases. 2016 [epub].

Antimicrobial stewardship in South Africa: a fruitful endeavour Ramsamy Y, Muckart DJJ, Mlisana KP The Lancet Infectious Diseases. 2016.

DOI	Brink et al http://dx.doi.org/10.1016/S1473-3099(16)30012-3
	Ramsamy et al <a href="http://dx.doi.org/10.1016/S1473-3099(16)30052-4">http://dx.doi.org/10.1016/S1473-3099(16)30052-4</a>
	There exists a substantial literature on the value and utility of antimicrobial
	stewardship programs. Questions about the level of resources needed, including
	expertise, have been raised. This paper reports on an antibiotic stewardship
	program undertaken in a large, diverse hospital network of 47 hospitals in South
	Africa. The authors report an <b>18% reduction in antibiotic consumption</b> which
Notes	suggests that antibiotic stewardship can be <b>successfully implemented</b> in settings
Notes	where expertise and resources are limited.
	Ramsamy and colleagues provided a commentary on the study commending the
	reduction in antibiotic consumption and noting that the program was "implemented
	by clinicians, nurses, and pharmacists eager to learn antimicrobial stewardship
	skills, denouncing the myth of the need for infectious disease and microbiological
	specialists for such successes."

For information on the Commission's work on antimicrobial stewardship, including *Antimicrobial Stewardship in Australian Hospitals* and the resources around the relevant National Safety and Quality Health Service (NSQHS) Standard see <a href="https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/antimicrobial-stewardship/">www.safetyandquality.gov.au/our-work/healthcare-associated-infection/antimicrobial-stewardship/</a>

Clinical leadership and hospital performance: assessing the evidence base Sarto F, Veronesi G

BMC Health Services Research. 2016;16(2):85-97.

110 110 110 110 110 110 110 110 110 110		
DOI	http://dx.doi.org/10.1186/s12913-016-1395-5	
	Paper reporting on a review of the literature on clinical leadership, clinician	
	involvement in governance and hospital performance that focused on	
	'quantitatively-oriented studies' or 'scientific papers' with a final selection of 19	
	papers published in English language journals. The authors report that "In general	
Notes	terms, the findings show a <b>positive impact of clinical leadership</b> on different	
	types of outcome measures, with only a handful of studies highlighting a negative	
	impact on financial and social performance. Therefore, this review lends support to	
	the prevalent move across health systems towards increasing the presence of	
	clinicians in leadership positions in healthcare organisations."	

## Nursing Leadership Vol. 29, No. 1, 2016

01. 29, 110. 1, 2010				
URL	http://www.longwoods.com/publications/nursing-leadership/24638			
	A new issue of <i>Nursing Leadership</i> has been published, with a 'Special Focus On			
	The Fundamentals Of Care'. Articles in this issue of <i>Nursing Leadership</i> include:			
	• Introduction from the Guest Editors: Perspectives on Fundamental Care			
	(Alison Kitson and Kathleen MacMillan)			
	• Why Do We Need to <b>Study the Fundamentals of Care</b> ? (Alison Kitson)			
Notes	• Person-Centredness and Fundamentals of Care – Dancing with Beauty			
Notes	Rather than Fighting Ugliness (Brendan McCormack)			
	• The Economic Case for Fundamental Nursing Care (Jack Needleman)			
	• The Hidden Curriculum: What Are We Actually <b>Teaching about the</b>			
	Fundamentals of Care? (Kathleen MacMillan)			
	Engaging Patients to Meet their Fundamental Needs: Key to Safe and			
	Quality Care (Lianne Jeffs, Marianne Saragosa, J Merkley and M Maione)			

### International Journal for Quality in Health Care online first articles

URL	http://intqhc.oxfordjournals.org/content/early/recent?papetoc
	International Journal for Quality in Health Care has published a number of 'online
	first' articles, including:
	• Vital signs monitoring on general wards: clinical staff perceptions of
	current practices and the planned introduction of continuous monitoring
	technology (Mirela Prgomet, Magnolia Cardona-Morrell, Margaret
	Nicholson, Rebecca Lake, J Long, J Westbrook, J Braithwaite, K Hillman)
Notes	• Patient perspectives of care and process and outcome quality measures for
	heart failure admissions in US hospitals: how are they related in the era of
	public reporting? (Sydney Morss Dy, Kitty S. Chan, Hsien-Yen Chang,
	Allen Zhang, Junya Zhu, Deirdre Mylod)
	• The effectiveness and variation of <b>acute medical units</b> : a systematic review
	(Lindsay E M Reid, Lotte C Dinesen, Michael C Jones, Zoe J Morrison,
	Christopher J Weir, Nazir I Lone)

• Co-creating value through demand and supply integration in senior industry—observations on 33 senior enterprises in Taiwan (Ya-Ting Yang, Usman Iqbal, Ya-Mei Chen, Shyi Su, Yao-Mao Chang, Yujiro Handa, Neng-Pai Lin, and Yi-Hsin Elsa Hsu)

#### 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 Quality Standard QS12 *Breast cancer* <a href="https://www.nice.org.uk/guidance/qs12">https://www.nice.org.uk/guidance/qs12</a>

[Scotland] Medicines in Scotland: What's the right treatment for you? <a href="http://www.healthcareimprovementscotland.org/our\_work/technologies\_and\_medicines/ADTC\_resources/medicines\_factsheet.aspx">http://www.healthcareimprovementscotland.org/our\_work/technologies\_and\_medicines/ADTC\_resources/medicines\_factsheet.aspx</a>
Healthcare Improvement Scotland has produced this factsheet for patients and the public. The A5-sized factsheet is in a question and answer format and is structured around the patient journey starting at consultation and explains how healthcare professionals decide whether to prescribe a medicine and if so, which to prescribe.



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