



On the Radar

Issue 281

11 July 2016

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On the Radar

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Reports

Food and nutrition programs for Aboriginal and Torres Strait Islander Australians: what works to keep people healthy and strong?

Deeble Institute Issues Brief No 17

Browne J, Adams K, Atkinson P.

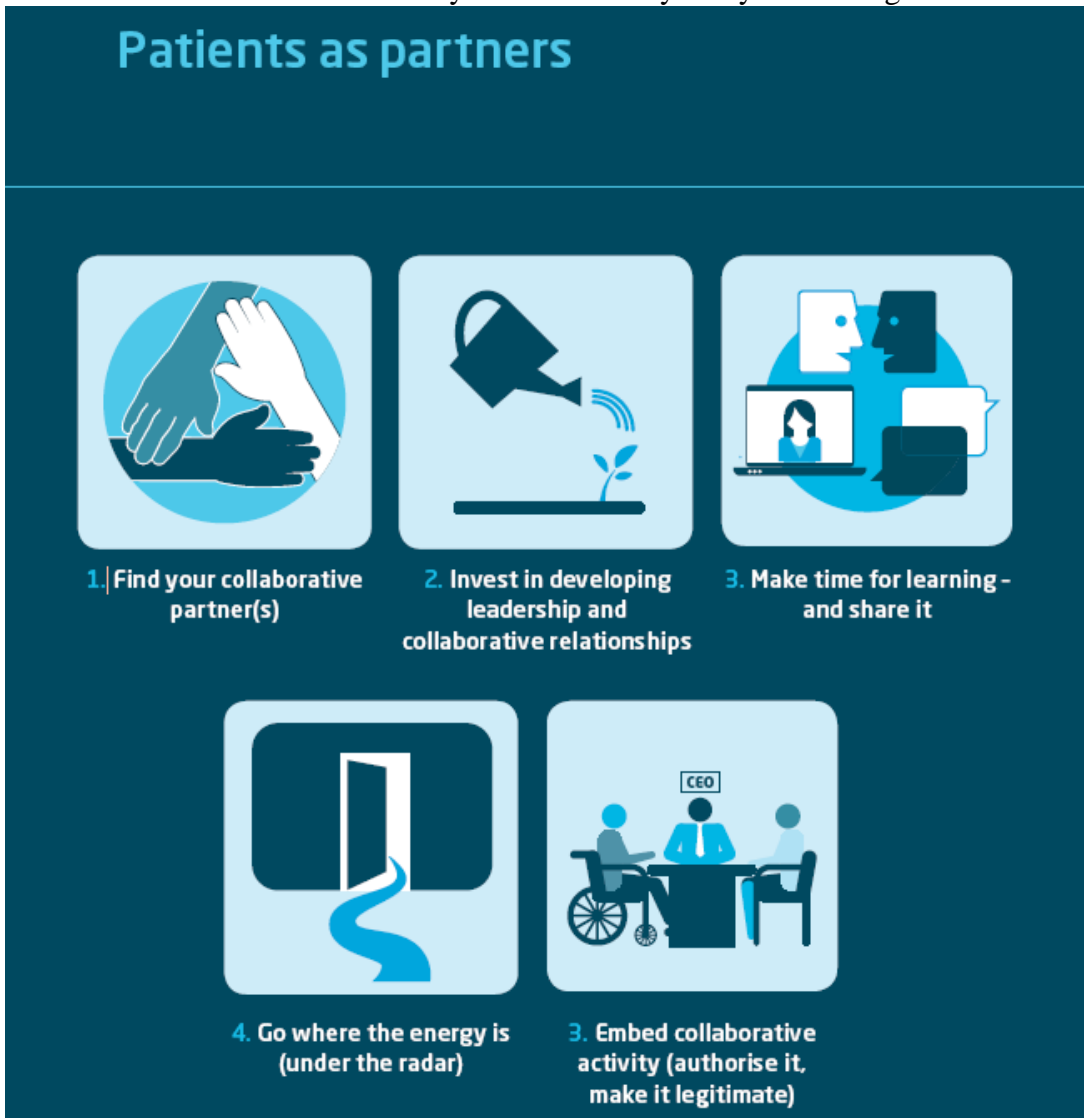
Canberra: Australian Healthcare and Hospitals Association; 2016. p. 35.

URL	https://ahha.asn.au/publication/issue-briefs/deeble-institute-issues-brief-no-17-food-and-nutrition-programs-aboriginal
Notes	This issues brief from the Deeble Institute examines the damaging health effects of disrupting Aboriginal and Torres Strait Islander cultural practices, and examines how nutrition programs can best work to close the health gap. The authors summarise the brief by noting “The evidence suggests that the most important factor determining the success of Aboriginal and Torres Strait Islander food and nutrition programs is community involvement in (and, ideally, control of) program development and implementation . Working in partnership with Aboriginal or Torres Strait Islander health professionals and training respected community members to deliver nutrition messages are examples of how local strengths and capacities can be developed. Incorporation of Aboriginal and Torres Strait Islander knowledge and culture into program activities is another key feature of strength-based practice which can be applied to food and nutrition programs.”

Patients as partners: Building collaborative relationships among professionals, patients, carers and communities

Seale B

London: The King's Fund; 2016. p. 36.

URL	http://www.kingsfund.org.uk/publications/patients-partners
TRIM	D16-23467
Notes	<p>This publication from the UK's King's Fund looked at how patients can be partners in their healthcare and the healthcare system. The author examined the question of what helps to build collaborative relationships among health and care professionals, patients, service users, carers and communities.</p> <p>The short report (36 pages) suggests five approaches to developing an effective relationship:</p> <ul style="list-style-type: none"> • find your collaborative partner(s) • invest in developing leadership and collaborative relationships • make time for learning and share that learning • go where the energy is • embed collaborative activity at all levels in your system or organisation.  <p>Patients as partners</p> <ol style="list-style-type: none"> 1. Find your collaborative partner(s) 2. Invest in developing leadership and collaborative relationships 3. Make time for learning and share it 4. Go where the energy is (under the radar) 5. Embed collaborative activity (authorise it, make it legitimate)

Supporting integration through new roles and working across boundaries

Gilbert H

London: The King's Fund; 2016. 70 p.

URL	http://www.kingsfund.org.uk/publications/supporting-integration-new-roles-boundaries
Notes	<p>Integrated care is seen as means by which patients can receive better co-ordination and continuity of their care. This report from the UK charity The King's Fund examines the evidence for creating new roles, such as care navigators, as part of an integrated workforce. The report shows that there has been limited assessment of the effectiveness of individual roles as most evaluations focused on the wider process of integration. There is also limited evidence of whether new roles can reduce costs. The report also describes some common factors that work in developing an integrated workforce.</p> <ul style="list-style-type: none">• Many of the skills required to deliver integrated care exist within the workforce and can be more effectively shared and distributed as part of an overall system of care.• Engagement with the workforce from the outset on the aims for integration and a focus on the needs of patients and service users can enable staff to take a lead in identifying innovative solutions.• Wider organisational support and buy-in with appropriate management and accountability for staff is essential to ensuring integrated care solutions provide quality care and are sustainable.• Acknowledgement of professional boundaries can serve to build trust and respect, which in turn can lead to greater role flexibility.

Journal articles

Safety of reduced antibiotic prescribing for self limiting respiratory tract infections in primary care: cohort study using electronic health records

Gulliford MC, Moore MV, Little P, Hay AD, Fox R, Prevost AT, et al.

BMJ. 2016 2016-07-04 23:06:02;354.

DOI	http://dx.doi.org/10.1136/bmj.i3410
Notes	<p>The use of antibiotics, particularly for certain types of infections, has been identified as an issue for a number of reasons. These include potential waste, appropriateness and antibiotic resistance. This study sought to see if reducing antibiotic prescribing/usage for the respiratory tract infections was associated with an increase in the incidence of pneumonia, peritonsillar abscess, mastoiditis, empyema, meningitis, intracranial abscess, and Lemierre's syndrome. The study was a cohort study covering patients registered 610 UK general practices with 45.5 million person years of follow-up from 2005 to 2014.</p> <p>The study's authors concluded that "General practices that adopt a policy to reduce antibiotic prescribing for RTIs might expect a slight increase in the incidence of treatable pneumonia and peritonsillar abscess. No increase is likely in mastoiditis, empyema, bacterial meningitis, intracranial abscess, or Lemierre's syndrome." They went to note that "Even a substantial reduction in antibiotic prescribing was predicted to be associated with only a small increase in numbers of cases observed, and this would be expected to reduce the risks of antibiotic resistance, the side effects of antibiotics, and the medicalisation of largely self limiting illnesses."</p>

GRADE Evidence to Decision (EtD) frameworks: a systematic and transparent approach to making well informed healthcare choices. 1: Introduction

Alonso-Coello P, Schünemann HJ, Moberg J, Brignardello-Petersen R, Akl EA, Davoli M, et al. *BMJ*. 2016;353:i2016.

GRADE Evidence to Decision (EtD) frameworks: a systematic and transparent approach to making well informed healthcare choices. 2: Clinical practice guidelines

Alonso-Coello P, Oxman AD, Moberg J, Brignardello-Petersen R, Akl EA, Davoli M, et al. *BMJ*. 2016;353:i2089.

DOI	http://dx.doi.org/10.1136/bmj.i2016 http://dx.doi.org/10.1136/bmj.i2089
Notes	<p>A pair of papers discussing the Evidence to Decision (EtD) frameworks that have been developed to help in people use evidence in a structured and transparent way to inform decisions. This first article introduces the frameworks and describes their purpose, development, and structure. It also describes how different organisations can adapt the frameworks to their own contexts and decision-making processes. The second article presents the framework for clinical recommendations. The EtD framework use a common structure that includes formulation of the question, an assessment of the evidence, and drawing conclusions, though there are some differences between frameworks for each type of decision.</p> <p>There is something of a move away from specific guidelines to talk more of ‘guidance’, particularly guidance that can be used in the clinical setting. Guidance can also mean the gamut of materials from the classic clinical practice guideline and the evidence base behind it through to the ‘derived’ tools such as decision support tools, decision aids, shared decision making resources, apps, etc. This is perhaps particularly aimed at making the evidence relevant in the context of the complexity of the lived experience of multi-morbidity, particularly of chronic conditions.</p>

Journal for Healthcare Quality

July/August 2016, Volume 38, Issue 4

URL	http://journals.lww.com/jhqonline/toc/2016/07000
Notes	<p>A new issue of the <i>Journal for Healthcare Quality</i> has been published. Articles in this issue of the <i>Journal for Healthcare Quality</i> include:</p> <ul style="list-style-type: none"> • Factors that Affect Nonurgent Emergency Department Visits in a Publicly Insured Pediatric Population: An Observational Study (Orlansky, Amy; Smolij, Carol; Moughan, Beth; Aronoff, Stephen C) • A Survey of Hospitals That Participated in a Statewide Collaborative to Implement and Sustain Rapid Response Teams (Stolldorf, Deonni P; Mion, Lorraine C; Jones, Cheryl B) • Ohio Children's Hospitals' Solutions for Patient Safety: A Framework for Pediatric Patient Safety Improvement (Lyren, Anne; Brill, Richard; Bird, Michael; Lashutka, Nicholas; Muething, Stephen) • Prevalence and Data Transparency of National Clinical Registries in the United States (Lyu, Heather; Cooper, Michol; Patel, Kavita; Daniel, Michael; Makary, Martin A) • Discharge Delays for Patients Requiring In-Hospital Guardianship: A Cohort Analysis (Chen, Jasper J; Finn, Christine T; Homa, Karen; St. Onge, Kenneth P; Caller, Tracie A)

	<ul style="list-style-type: none"> • Asthma Care Quality Measures at Children's Hospitals and Asthma-Related Outcomes (Subramony, Anupama; Hall, Matthew; Thomas, Cherie; Chiang, Vincent W; McClead, Richard E; Macias, Charles G; Frank, Gary; Simon, Harold K; Mann, Keith; Morse, Rustin) • Adolescents Are Less Satisfied with Inpatient Psychiatric Care than Their Parents: Does It Matter? (Madan, Alok; Sharp, Carla; Newlin, Elizabeth; Vanwoerden, Salome; Fowler, J Christopher)
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International Journal for Quality in Health Care

Vol. 28, No. 3

June 2016

URL	http://intqhc.oxfordjournals.org/content/28/3?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"> • Editorial: Advantages of involving patients in the guidelines development (Usman Iqbal, Shabbir Syed-Abdul, and Yu-Chuan Jack Li) • RAPADAPTE for rapid guideline development: high-quality clinical guidelines can be rapidly developed with limited resources (Brian S Alper, Mario Tristan, Anggie Ramirez-Morera, Maria M T Vreugdenhil, Esther J Van Zuuren, and Zbys Fedorowicz) • The patient satisfaction questionnaire of EUprimecare project: measurement properties (Marta Cimas, Alba Ayala, Sonia García-Pérez, Antonio Sarria-Santamera, and Maria João Forjaz) • Association between accessibility to emergency cardiovascular centers and cardiovascular mortality in Japan (Akiko Kada, Naohiro Yonemoto, Hiroyuki Yokoyama, Hiroshi Nonogi, , Hironori Hanada, Mamoru Hase, Tetsuya Sakamoto, Syunji Kasaoka, Migaku Kikuti, Ken Nagao, Kazuhiro Sase, Kazuo Kimura, Tetsuya Sumiyoshi, Kazuteru Fujimoto, O Hisao, S Shirai, M Kanemitsu, K Hayashi on behalf of J-PULSE III Investigators) • Cohort study for evaluation of dose omission without justification in a teaching general hospital in Bahia, Brazil (Bartyra Leite, Sostenes Mistro, Camile Carvalho, Sanjay R. Mehta, and Roberto Badaro) • Performance results for a workstation-integrated radiology peer review quality assurance program (Margaret M. O'Keeffe, Todd M Davis, and Kerry Siminoski) • Added value of involving patients in the first step of multidisciplinary guideline development: a qualitative interview study among infertile patients (Elvira M E den Breejen, Rosella P M G Hermens, Wienke H Galama, Wim N P Willemsen, Jan A M Kremer, and W L D M Nelen) • Influence of patient-assessed quality of chronic illness care and patient activation on health-related quality of life (Eindra Aung, Maria Donald, Gail M Williams, Joseph R Coll, and Suhail A R Doi) • SIMulation of Medication Error induced by Clinical Trial drug labeling: the SIMME-CT study (Cecile Dollinger, V�erane Schwiertz, Laura Sarfati, Chlo�e Gourc-Berthod, M-G Gu�edat, C Alloux, N Vantard, N Gauthier, S He, E Kiouris, A-G Caffin, D Bernard, F Ranchon, and C Rioufol) • Virtual obesity collaborative with and without decision-support technology (Bonnie Gance-Cleveland, Heather Aldrich, Sarah Schmiede,

	<p>and Karen Tyler)</p> <ul style="list-style-type: none"> • Off-hours admission and quality of hip fracture care: a nationwide cohort study of performance measures and 30-day mortality (Nina Sahlertz Kristiansen, Pia Kjær Kristensen, B M Nørgård, J Mainz, and S P Johnsen) • Development and testing of the cancer multidisciplinary team meeting observational tool (MDT-MOT) (Jenny Harris, Cath Taylor, Nick Sevdalis, Rozh Jalil, and James S A Green) • A mixed-methods study of the causes and impact of poor teamwork between junior doctors and nurses (Paul O’connor, Angela O’dea, Sinéad Lydon, gozie Offiah, Jennifer Scott, Antoinette Flannery, Bronagh Lang, Anthony Hoban, Catherine Armstrong, and Dara Byrne) • Patient satisfaction between primary care providers and hospitals: a cross-sectional survey in Jilin province, China (Jinghua Li, Pingping Wang, Xuan Kong, Hailun Liang, Xiumin Zhang, and Leiyu Shi) • Qualitative analysis of US Department of veterans affairs mental health clinician perspectives on patient-centered care (Steven K Dobscha, Risa Cromer, Aysha Crain, and Lauren M Denneson) • Development, implementation and evaluation of a patient handoff tool to improve safety in orthopaedic surgery (Joel J Gagnier, Joseph M Derosier, Joseph D Maratt, Mark E Hake, and James P Bagian) • A PICU patient safety checklist: rate of utilization and impact on patient care (Brianna L Mckelvie, James Dayre McNally, Kusum Menon, Maelle G R Marchand, Deepti N Reddy, and W David Creery) • Do integrated care structures foster processes of integration? A quasi-experimental study in frail elderly care from the professional perspective (Benjamin Janse, Robbert Huijsman, Ruben Dennis Maurice de Kuyper, and Isabelle Natalina Fabbriotti) • Improving handoff communication from hospital to home: the development, implementation and evaluation of a personalized patient discharge letter (Bianca M Buurman, Kim J Verhaegh, Marian Smeulers, Hester Vermeulen, Suzanne E Geerlings, S Smorenburg, and S E de Rooij) • Consumer perspectives of medication-related problems following discharge from hospital in Australia: a quantitative study (Daniela Eassey, Lorraine Smith, Ines Krass, Andrew McLachlan, and Jo-Anne Brien) • Reporting and use of the OECD Health Care Quality Indicators at national and regional level in 15 countries (Alexandru M Rotar, Michael J van den Berg, Dionne S Kringos, and Niek S Klazinga) • New approaches to infection prevention and control: implementing a risk-based model regionally (Martin Wale, Pamela Kibsey, Lisa Young, Beverly Dobbyn, and Jana Archer) • Preparing national health systems to cope with the impending tsunami of ageing and its associated complexities: Towards more sustainable health care (René Amalberti, Wendy Nicklin, and Jeffrey Braithwaite) • eHealth and quality in health care: implementation time (Hans C Ossebaard and Lisette Van Gemert-Pijnen) • How do we learn about improving health care: a call for a new epistemological paradigm (M Rashad Massoud, Danika Barry, Andrew Murphy, Yvonne Albrecht, Sylvia Sax, and Michael Parchman)
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URL	http://content.healthaffairs.org/content/35/7.toc
Notes	<p>A new issue of <i>Health Affairs</i> has been published. Articles in this issue of <i>Health Affairs</i> include:</p> <ul style="list-style-type: none"> • As Zika Reaches US Shores, States And Cities Struggle To Respond (Carina Storrs) • Health Spending For Low-, Middle-, And High-Income Americans, 1963–2012 (Samuel L Dickman, Steffie Woolhandler, Jacob Bor, Danny McCormick, David H Bor, and David U Himmelstein) • Where The Money Goes: The Evolving Expenses Of The US Health Care System (Sherry Glied, Stephanie Ma, and Claudia Solis-Roman) • The Great Recession And Increased Cost Sharing In European Health Systems (Raffaele Palladino, John Tayu Lee, Thomas Hone, Filippos T Filippidis, and Christopher Millett) • Private Sector An Important But Not Dominant Provider Of Key Health Services In Low- And Middle-Income Countries (Karen A Grépin) • An Insurer’s Care Transition Program Emphasizes Medication Reconciliation, Reduces Readmissions And Costs (Jennifer M Polinski, Janice M Moore, Pavlo Kyrychenko, Michael Gagnon, Olga S Matlin, Joshua W Fredell, Troyen A Brennan, and William H Shrank) • Medical Marijuana Laws Reduce Prescription Medication Use In Medicare Part D (Ashley C Bradford and W David Bradford) • Early Efforts By Medicare Accountable Care Organizations Have Limited Effect On Mental Illness Care And Management (Alisa B Busch, Haiden A. Huskamp, and J Michael McWilliams) • The Impact Of Medicare ACOs On Improving Integration And Coordination Of Physical And Behavioral Health Care (Catherine A Fullerton, Rachel M Henke, Erica Crable, A Hohlbauch, and N Cummings) • Ten-Year Trends In Treatment Services For Children With Attention Deficit Hyperactivity Disorder Enrolled In Medicaid (Kimberly E Hoagwood, Kelly Kelleher, B T Zima, J M Perrin, S Bilder, and S Crystal) • The Number Of Health Information Exchange Efforts Is Declining, Leaving The Viability Of Broad Clinical Data Exchange Uncertain (Julia Adler-Milstein, Sunny C Lin, and Ashish K Jha) • Declining Admission Rates And Thirty-Day Readmission Rates Positively Associated Even Though Patients Grew Sicker Over Time (Kumar Dharmarajan, Li Qin, Zhenqiu Lin, Leora I Horwitz, Joseph S Ross, Elizabeth E Drye, Amena Keshawarz, Faseeha Altaf, Sharon-Lise T Normand, Harlan M Krumholz, and Susannah M Bernheim) • Emergency Department Death Rates Dropped By Nearly 50 Percent, 1997–2011 (Hemal K Kanzaria, Marc A Probst, and Renee Y Hsia) • Contrary To Conventional Wisdom, Physicians Abandoned A Breast Cancer Treatment After A Trial Concluded It Was Ineffective (David H Howard, Pamela R Soulos, Anees B Chagpar, Sarah Mougalian, Bridgid Killelea, and Cary P Gross) • Identification Of Four Unique Spending Patterns Among Older Adults In The Last Year Of Life Challenges Standard Assumptions (Matthew Allen Davis, Brahmajee K Nallamothu, Mousumi Banerjee, and J P W Bynum)

	<ul style="list-style-type: none"> • Implementation Of Prescription Drug Monitoring Programs Associated With Reductions In Opioid-Related Death Rates (Stephen W Patrick, Carrie E Fry, Timothy F Jones, and Melinda B Buntin) • Beating A Cancer Death Sentence (Jonathan Friedlaender)
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American Journal of Medical Quality

July/August 2016; Vol. 31, No. 4

URL	http://ajm.sagepub.com/content/31/4?etoc
Notes	<p>A new issue of the <i>American Journal of Medical Quality</i> has been published. Articles in this issue of the <i>American Journal of Medical Quality</i> include:</p> <ul style="list-style-type: none"> • The Health Innovations Scholars Program: A Model for Accelerating Preclinical Medical Students’ Mastery of Skills for Leading Improvement of Clinical Systems (Joseph R Sweigart, Darlene Tad-y, Read Pierce, Emilie Wagner, and Jeffrey J Glasheen) • The Meaningful Use of Electronic Health Records and Health Care Utilization (Lisa M Kern, Alison Edwards, Rainu Kaushal, and HITEC Investigators) • Elucidating Reasons for Resident Underutilization of Electronic Adverse Event Reporting (Jonathan Hatoun, Winnie Suen, Constance Liu, Sandy Shea, Gregory Patts, Janice Weinberg, and Jessica Eng) • Automated Communication Tools and Computer-Based Medication Reconciliation to Decrease Hospital Discharge Medication Errors (Kenneth J Smith, Steven M Handler, Wishwa N Kapoor, G Daniel Martich, Vivek K Reddy, and Sunday Clark) • Population-Level Quality Measures for Behavioral Screening and Intervention (Richard L Brown and Mindy A Smith) • Physician Satisfaction in Practices That Transformed Into Patient-Centered Medical Homes: A Statewide Study in New York (Joshua E Richardson, Lisa M Kern, Michael Silver, Hye-Young Jung, Rainu Kaushal, and HITEC Investigators) • Addressing Disparities in Stroke Prevention for Atrial Fibrillation: Educational Opportunities (Rachel Karcher, Adam E Berman, Hartmut Gross, David C Hess, E C Jauch, P E Viser, N J Solenski, and A M D Wolf) • Influence of the Comprehensive Unit-based Safety Program in ICUs: Evidence From the Keystone ICU Project (Yea-Jen Hsu and J A Marsteller) • The Association Between Dialysis Facility Quality and Facility Characteristics, Neighborhood Demographics, and Region (Yue Zhang) • A Cross-Sectional Analysis of Publication Types in Quality Improvement Journals (Christopher J Wong, Andrew A White, Susan E Merel, Douglas M Brock, and Thomas O Staiger) • An Appraisal of Clinical Practice Guidelines for Diabetic Retinopathy (Connie M Wu, Annie M Wu, Benjamin K Young, Dominic J Wu, Curtis E Margo, and Paul B Greenberg) • The Value of Negative Results in Quality Improvement: A Simulation Perspective (Theodore Eugene Day and Ziad F Gellad) • Monthly “Grief Rounds” to Improve Residents’ Experience and Decrease Burnout in a Medical Intensive Care Unit Rotation (Lindsay Wilde, Brooke Worster, and David Oxman)

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">• Impact of continuity of care on preventable hospitalization and evaluating patient safety indicators between Italy and the USA (Shabbir Syed-Abdul, Usman Iqbal, and Yu-Chuan (Jack) Li)

Online resources

Medical Devices Safety Update

<http://www.tga.gov.au/publication-issue/medical-devices-safety-update-volume-4-number-4-july-2016>

Volume 4, Number 4, July 2016

The Therapeutic Goods Administration (TGA) has released the latest edition of its medical device safety bulletin. Topics covered in this issue include:

- TGA tests resolve potential issue with **intravenous catheter connection** – following an adverse event report, the TGA undertook tests on a needleless plastic valve, finding the likely cause of the reported issue and a simple way to resolve it.
- Practice Points: **The 'doctor's bag'** – a doctor's bag will sometimes be stored in challenging conditions and the TGA encourages doctors to consider the effects this may have on medical devices.
- **Adverse event reporting compliance** – the TGA actively monitors sponsors' compliance with regulations – particularly those that relate to conditions of inclusion on the Australian Register of Therapeutic Goods – and will take action when these conditions are not complied with.
- **Recent safety alerts.**

[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 NG48 **Oral health for adults in care homes**
<https://www.nice.org.uk/guidance/ng48>
- NICE Guideline NG49 **Non-alcoholic fatty liver disease (NAFLD): assessment and management** <https://www.nice.org.uk/guidance/ng49>
- NICE Guideline NG50 **Cirrhosis in over 16s: assessment and management**
<https://www.nice.org.uk/guidance/ng50>

[USA] *Effective Health Care Program reports*

<http://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:

- **Treatments for Fecal Incontinence**
For clinicians: *Treatments for Fecal Incontinence: Current State of the Evidence*
<https://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2252>
For consumers: *Treatments for Fecal Incontinence: A Review of the Research for Adults*
<https://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2251>

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