# 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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**Journal articles**

*Eight years of decreased methicillin-resistant* Staphylococcus aureus *health care-associated infections associated with a Veterans Affairs prevention initiative*

Evans ME, Kralovic SM, Simbartl LA, Jain R, Roselle GA

American Journal of Infection Control. 2017;45(1):13-6.

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| DOI | <http://dx.doi.org/10.1016/j.ajic.2016.08.010> |
| Notes | A number of interventions have become quite well-known due to their (initial) impact. This paper updates and extends the story on how an initiative in the US Veterans Affairs health system has had a sustained impact on rates of methicillin-resistant *Staphylococcus aureus* (MRSA) infection. This study used monthly data from 127 acute care facilities, 22 spinal cord injury units (SCIUs), and 133 long-term-care facilities (LTCFs) covering 23,153,240 intensive care unit (ICU) and non-ICU, and 1,794,234 SCIU patient-days from October 2007-September 2015, and 22,262,605 LTCF resident-days from July 2009-September 2015. Monthly health care-associated infections (HAI) rates fell 87.0% in intensive care units (ICUs) and 80.1% in non-ICUs while MRSA HAI rates fell 80.9% in spinal cord injury units and 49.4% in long-term care. |

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

*Identifying patient-centred recommendations for improving patient safety in General Practices in England: a qualitative content analysis of free-text responses using the Patient Reported Experiences and Outcomes of Safety in Primary Care (PREOS-PC) questionnaire*

Ricci-Cabello I, Saletti-Cuesta L, Slight SP, Valderas JM

Health Expectations. 2017 [epub].

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| DOI | <http://dx.doi.org/10.1111/hex.12537> |
| Notes | Paper reporting on a survey of English general practice patients that sought to explore patients’ experiences and perceptions of patient safety. The authors report that two main themes emerged:   1. experiences of safety problems – and 2. good practices and recommendations to improve patient safety in primary care.   They noted that the “most frequently reported experiences of safety problems were related to **appointments**, **coordination** between providers, **tests**, **medication** and **diagnosis**. Patients’ responses to these problems included increased **patient activation** (eg speaking up about concerns with their health care) and **avoidance of unnecessary health care**. Recommendations for safer health care included improvements in **patient-centred communication**, **continuity of care**, **timely appointments**, technical **quality** of care, active **monitoring**, **teamwork**, **health records** and **practice environment**.” |

For information on the Commission’s work on patient and consumer centred care, see <https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/>

*From Board to Bedside: How the Application of Financial Structures to Safety and Quality Can Drive Accountability in a Large Health Care System*

Austin JM, Demski R, Callender T, Lee KHK, Hoffman A, Allen L, et al

Joint Commission Journal on Quality and Patient Safety. 2017 [epub].

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| DOI | <http://dx.doi.org/10.1016/j.jcjq.2017.01.001> |
| Notes | Paper describing the structures established at Johns Hopkins Medicine that aim to ensure the prioritisation of improving quality, safety, and value. A reporting and oversight framework based on four components of **governance**, **accountability**, **reporting** of consolidated quality performance statements, and **auditing**.  Governance from a dedicated Patient Safety and Quality Board Committee.  Accountability of leaders to that Board Committee and with shared accountability between the board and clinical leadership.  The consolidated quality performance statement to ensure transparency around goals and priorities and inform leadership and the Board Committee.  Internal audits into the efficiency and effectiveness of processes for data collection, validation, and storage, as to ensure the accuracy and completeness of quality measure reporting. |

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

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| URL | <https://academic.oup.com/intqhc/advance-access?papetoc> |
| Notes | *International Journal for Quality in Health Care* has published a number of ‘online first’ articles, including:   * **Improving the quality of radiological examinations**: effectiveness of an internal participatory approach (Francisco Manuel Batista Mamede; Zenewton André da Silva Gama; Pedro Jesus Saturno-Hernández) * Measuring patient experience: a systematic review to evaluate psychometric properties of **patient reported experience measures (PREMs)** for emergency care service provision (Leanne Male; Adam Noble; Jessica Atkinson; Tony Marson) |

**Reports**

*Recommendations to OECD Ministers of Health from the High Level Reflection Group on the Future of Health Statistics: Strengthening the international comparison of health system performance through patient-reported indicators*

OECD

Paris: OECD; 2017. p. 89.

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| URL | <https://www.oecd.org/els/health-systems/Recommendations-from-high-level-reflection-group-on-the-future-of-health-statistics.pdf> |
| Notes | In some versions of last week’s issue of *On the Radar*, the URL for this report was incorrect. |

For information on the Commission’s work on PROMS, see <https://www.safetyandquality.gov.au/our-work/information-strategy/indicators/patient-reported-outcome-measures/>

**Online resources**

*Medical Devices Safety Update*

<http://www.tga.gov.au/publication-issue/medical-devices-safety-update-volume-5-number-2-march-2017>

Volume 5, Number 2, March 2017

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

* Documentation vital if **recalls** not complete – health facilities may have justifiable reasons for not following advice given by a medical device sponsor during a product recall, but it is important to document the risk assessment leading up to the decision.
* Practice points: **Topical creams** as devices – some topical creams are classed as medical devices, while others are classed as medicines.
* New committee takes over from **Advisory Committee on the Safety of Medical Devices** – functions of the Advisory Committee on the Safety of Medical Devices (ACSMD) have been incorporated into the Advisory Committee on Medical Devices
* What to report? Please **report adverse events**, as well as **near misses**

*[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:

* Quality Standard QS144 ***Care of dying adults*** *in the last days of life* <https://www.nice.org.uk/guidance/qs144>
* Quality Standard QS145 ***Vaccine uptake*** *in under 19s* <https://www.nice.org.uk/guidance/qs145>
* NICE Guideline NG65 ***Spondyloarthritis*** *in over 16s: diagnosis and management* <https://www.nice.org.uk/guidance/ng65>
* Quality Standard QS105 ***Intrapartum care*** <https://www.nice.org.uk/guidance/qs105>

*[UK] National Institute for Health Research*

<https://discover.dc.nihr.ac.uk/portal/home>

The UK’s National Institute for Health Research (NIHR) Dissemination Centre has released the latest ‘Signals’ research summaries. This latest release includes:

* Postal invitations, even with added incentives, don’t improve NHS **health check attendance**
* Breastfeeding reduces crying during **baby immunisation**
* **Collaborative care** can be moderately effective at treating **depression** regardless of physical health status
* **Rotavirus vaccine** estimated to have saved the NHS £12.5 million a year
* **Antenatal corticosteroids** reduce breathing problems in **late preterm babies**
* Enhanced patient education improves **bowel preparation** before **colonoscopy**
* **Corticosteroids** given early reduce risk of heart problems in children with **Kawasaki disease**
* **Parent-focused therapy** has some long-term benefits for children with **autism**
* **Ultrasound** could help diagnose **giant cell arteritis**
* Information delivered by **telemedicine** can improve **diabetes control**.

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