# 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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**Reports**

*Roads to Recovery: Organisation and Quality of Stroke Services. Themed review*

National Institute for Health Research

London: NHS NIHR; 2017. p. 66.

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| URL | <http://www.dc.nihr.ac.uk/themed-reviews/roads-to-recovery.htm> |
| Notes | The UK’s National Institute for Health Research (NIHR) have produced this themed review that draws together NIHR research relevant to those planning and delivering stroke services, those delivering treatments to people with stroke and to those living with stroke. The themed review looks at the configuration of stroke services, identifying stroke and acute management, recovery and rehabilitation, and life after stroke. It features 44 published studies, 29 ongoing studies along with questions to ask about stroke services. |

For information about the Commission’s *Acute Stroke Clinical Care Standard*, see <https://www.safetyandquality.gov.au/our-work/clinical-care-standards/acute-stroke-clinical-care-standard/>

**Journal articles**

*Patients' reports of adverse events: a data linkage study of Australian adults aged 45 years and over*

Walton MM, Harrison R, Kelly P, Smith-Merry J, Manias E, Jorm C, et al

BMJ Quality & Safety. 2017.

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| DOI | <http://dx.doi.org/10.1136/bmjqs-2016-006339> |
| Notes | This Australian study used data linkage to identify a random sample of 20,000 patients who had been recently in hospital. The patients were then surveyed to capture their experiences, including whether they had an adverse event (AE) and received honest communication about it.  7661 completed surveys were received from 18 993 eligible participants (40% response rate) and 474 (7%) reported having an AE. Most AEs related to **clinical processes and procedures** (33%), or **medications** and **intravenous fluids** (21%). **Country of birth** and **admission through emergency** were significant predictors of the occurrence of an event. An earlier admission in the prior 6 months or a transfer to another healthcare facility was also associated with more AEs. Of those who suffered an AE, 58% reported serious or moderate effects.  The finding of a 7% incidence of adverse events is, as the authors note, “similar to the approximately 10% rate reported in the general population by retrospective medical record reviews.” |

*CareMore: Improving Outcomes and Controlling Health Care Spending for High-Needs Patients*

Models for High-Need, High-Cost Patients

Hostetter M, Klein S, McCarthy D

New York: Commonwealth Fund; 2017.

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| URL | <http://www.commonwealthfund.org/publications/case-studies/2017/mar/caremore> |
| Notes | The (US) Commonwealth Fund has published this addition to their *Models for High-Need, High-Cost Patients* series. This case study looks at CareMore, a California-based Medicare Advantage plan and care provider that’s built its business around identifying the high-risk patients most likely to need a full range of coordinated primary care, behavioural health, and specialty services.  CareMore serves 130,000 people across six American states and this case study explores how CareMore has been able to achieve 20 percent fewer hospital admissions, 23 percent fewer bed days, and a 4 percent shorter length-of-stay for its members compared with beneficiaries covered under fee-for-service Medicare.  The authors also examine the company’s efforts to spread its model, both by serving Medicaid beneficiaries and by partnering with health systems that are moving toward risk-based contracting |

*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:   * **Patients' reports** of **adverse events**: a data linkage study of Australian adults aged 45 years and over (Merrilyn Margaret Walton, Reema Harrison, Patrick Kelly, Jennifer Smith-Merry, Elizabeth Manias, Christine Jorm, Rick Iedema) |

*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:   * Assessing the impact of diabetes on quality of life: validation of the Chinese version of the 19-item **Audit of Diabetes-Dependent Quality of Life** for Taiwan (Huey-Fen Wang; Clare Bradley; Tien-Jyun Chang; Lee-Ming Chuang; Mei Chang Yeh) * The effects of **patient education on patient safety**: can we change patient perceptions and attitudes?: Lessons from the Armed Forces Capital Hospital in Korea (JinOk An; Seung Ju Kim; Sohee Park; Ki Tae Moon; Eun-Cheol Park) * Assessing archetypes of **organizational culture** based on the **Competing Values Framework**: the experimental use of the framework in Japanese neonatal intensive care units (Hatoko Sasaki; Naohiro Yonemoto; Rintaro Mori; Toshihiko Nishida; Satoshi Kusuda; Takeo Nakayama) |

**Online resources**

*Clinical Communiqué*

Volume 4 Issue 1 March 2017

<http://www.vifmcommuniques.org/?p=4879>

*Clinical Communiqué* is a newsletter written by clinicians, using a case-study approach to report on lessons learned from deaths investigated by the Coroners’ Court.

This edition focuses on **pulmonary embolism** (PE) as the single, specific cause of death. As featured in the three cases presented, PE is a diagnosis that can occur in any healthcare setting, from general practice, to the emergency department, to the postoperative ward. It is a diagnosis that every healthcare practitioner needs to be familiar with to adequately detect and treat it in their patients, every time.

*[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 NG67 ***Managing medicines*** *for adults receiving social care in the community* <https://www.nice.org.uk/guidance/ng67>

*[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:

* *Preventing Complications and Treating Symptoms of* ***Diabetic Peripheral Neuropathy***<https://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2436>
* *Interventions to Prevent* ***Age-Related Cognitive Decline, Mild Cognitive Impairment****, and Clinical* ***Alzheimer's-Type Dementia***<https://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2456>

*[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:

* Personalised letters and a “taster session” help double **attendance** at NHS **stop smoking services**
* A **group weight loss programme** shows promise compared with usual approach
* **Nurses** and **pharmacists** can **prescribe** as effectively as doctors
* Research highlights the challenges of **preventing diabetes** with **group education sessions**
* GP letter to improve **medication** adherence did not reduce unplanned care for **children with asthma**
* **MRI scan** before biopsy could detect more **prostate cancer**

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