# 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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**Consultation on Review of the National Sentinel Events List**

The Australian Commission on Safety and Quality in Health Care (the Commission) is undertaking a Review of the National Sentinel Events List on behalf of the states, territories and the Commonwealth.

A survey has been developed for the purpose of open public consultation to gather as much feedback as possible from the Australian health sector. The results of this survey will be used to refine the proposed list of sentinel events and the definitions that have been specified for each proposed sentinel event.

The public consultation period begins on 9 June 2017 and closes on 25 June 2017.

To participate in the Commission’s public consultation on the national sentinel events list, follow this link <https://www.surveymonkey.com/r/SENTINELEVENTS>

If you have any questions about the Commission’s Review of the National Sentinel Events List, please email [sqis@safetyandquality.gov.au](mailto:sqis@safetyandquality.gov.au)

**Books**

*Mental health and new models of care: Lessons from the vanguards*

Naylor C, Taggart H, Charles A

London: The King's Fund and the Royal College of Psychiatrists; 2017.

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| URL | <https://www.kingsfund.org.uk/publications/mental-health-new-care-models> |
| Notes | This report draws on the King’s Fund research with ‘vanguard sites’ in England, conducted in partnership with the Royal College of Psychiatrists. The study found that where new models of care have been used to remove the barriers between mental health and other parts of the health system, local professionals saw this as being highly valuable in improving care for patients and service users. However, the report also notes the challenges to embedding mental health into integrated care teams, primary care, urgent and emergency care pathways. |

*Healthier, fairer, safer: the global health journey 2007–2017*

Donaldson L, Rutter P

Geneva: World Health Organization; 2017. 72 p.

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| URL | <http://www.who.int/publications/10-year-review/healthier-fairer-safer/en/> |
| Notes | The World Health Organization (WHO) commissioned this independent report, written by the former Chief Medical Officer of England, Sir Liam Donaldson to reflect on the trends, achievements and challenges in global health over the past decade. The report describe the role and contribution of the WHO in relation to issues such as the rise of non-communicable diseases, changes in life expectancy, and emerging threats like climate change and antimicrobial resistance. |

**Journal articles**

*Premature deaths of nursing home residents: an epidemiological analysis*

Ibrahim JE, Bugeja L, Willoughby M, Bevan M, Kipsaina C, Young C, et al

Medical Journal of Australia. 2017;206(10):422-47.

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| DOI | <http://dx.doi.org/10.5694/mja16.00873>  <https://www.mja.com.au/journal/2017/206/10/premature-deaths-nursing-home-residents-epidemiological-analysis> |
| Notes | A study of coronial deaths of people living in residential aged care facilities found that the annual number of deaths from external causes more than quadrupled from 1.2 per 1000 admissions in 2001–02 to 5.3 per 1000 admissions in 2011–12.  In a total of 3289 deaths, 15.2% resulted from external causes. Falls (81.5%), choking (7.9%) and suicide (4.4%) were the most common causes. While the incident usually occurred in the nursing home, the majority of people died outside the nursing home (67.1%).  An accompanying editorial (<http://dx.doi.org/10.5694/mja17.00268>) notes that death after a fall is defined as a violent death or unnatural death in all jurisdictions, and while acknowledging the complexity of falls harm reduction, challenges the system to do better for elderly nursing home residents. The authors of the analysis themselves call for a national policy framework to reduce premature deaths in Australian residents of nursing homes. |

*Hip arthroscopy for femoroacetabular impingement: use escalating beyond the evidence*

Cicuttini FM, Teichtahl AJ, Wang Y

Medical Journal of Australia. 2017;206(10):424-6.

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| DOI | <http://dx.doi.org/10.5694/mja16.00821> |
| Notes | The authors of this perspective article describe an increasing rate of hip arthroscopy in the US and UK for the indication of femoroacetabular impingement (FAI), a condition associated with an increased risk of hip osteoarthritis (OA) later in life. The authors caution about the low quality of existing evidence about the best treatment approach (both surgical and non-surgical), and a lack of studies comparing intervention effectiveness. Finally, they draw parallels with the use of knee arthroscopy for pain in knee OA, stating that “lessons learned from the knee strongly support the need for an evidence-based approach to examining the role of hip arthroscopy for FAI.” |

*Clinical quality registries for clinician-level reporting: strengths and limitations*

Ahern S, Hopper I, Evans SM

Medical Journal of Australia. 2017;206(10):427-9.

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| DOI | <http://dx.doi.org/10.5694/mja16.00659> |
| Notes | Article examining the pros and cons of using clinical quality registries as a vehicle for reporting on clinician performance. While there has been a strong argument for using registries to have greater influence on clinical practice through collecting and analysing high quality information and a timely feedback loop to clinicians, the arguments on clinician performance, particularly for public report, are less clear. The perspectives on this can also vary depending on where one sits. The piece cites the Commission’s work on clinical quality registries, including the *Framework for Australian clinical quality registries*. |

For information on the Commission’s work on clinical quality registries, see <https://www.safetyandquality.gov.au/our-work/information-strategy/clinical-quality-registries/>

*National progress on antimicrobial resistance*

The Lancet

The Lancet.389(10084):2082.

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| DOI | <http://dx.doi.org/10.1016/S0140-6736(17)31433-2> |
| Notes | This editorial reports on the World Organisation for Animal Health’s report on the first open survey of countries' national action plan preparedness on Antimicrobial Resistance (AMR) at the 70th World Health Assembly. 145 governments had responded, with a degree of progress being reported as 77 countries have a multi-sectoral plan and 57 are in the process of developing one. Yet, 37 countries reported no formal plan. High-income countries have reported more capacity in all aspects of the AMR response, with fragile states faring worse and human health systems are progressing better than those for animal health. |

For information on the Commission’s work on antimicrobial use and resistance, see <https://www.safetyandquality.gov.au/antimicrobial-use-and-resistance-in-australia/>

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

*Controlling antibiotic prescribing for lower respiratory tract infections*

Scott AM, Del Mar C

BMJ. 2017;357:j2398.

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| DOI | <https://doi.org/10.1136/bmj.j2398> |
| Notes | Editorial in the BMJ reflecting on a large prospective, observational study of 28 779 adults presenting with lower respiratory tract infections in which the authors compared adverse outcomes associated with three prescribing strategies: no antibiotics, delayed antibiotics, and immediate antibiotics. The study authors looked particularly at rates of re-consultation, and death or admission to hospital, both within 30 days and adjusted for many known potential confounders. The study found that antibiotics were prescribed far more often than might be expected from good evidence of poor effectiveness, doctors in the sample used delayed prescribing quite often, re-consultation was also common, and serious adverse events such as death or hospital admission are rare in people with acute cough and that an immediate antibiotic prescription is not associated with a significantly reduced risk. As the BMJ highlighted on the article’s webpage, “**Prescribing less is safe for patients and better for all of us**”. |

*Nurses are underutilised in antimicrobial stewardship – Results of a multisite survey in paediatric and adult hospitals*

Mostaghim M, Snelling T, McMullan B, Konecny P, Bond S, Adhikari S, et al.

Infection, Disease & Health. 2017 [epub].

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| DOI | <https://doi.org/10.1016/j.idh.2017.04.003> |
| Notes | Antimicrobial stewardship (AMS) is recognised as an important component in ameliorating antimicrobial resistance. This paper suggests how nurses could be better utilised in antimicrobial stewardship activities in hospitals. The authors suggest more engagement, education, support and acknowledgement to improve nursing participation in AMS. |

*Risks for Mental Illness in Indigenous Australian Children: A Descriptive Study Demonstrating High Levels of Vulnerability*

Twizeyemariya A, Guy S, Furber G, Segal L

Milbank Quarterly. 2017;95(2):319–57.

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| DOI | <https://dx.doi.org/10.1111/1468-0009.12263> |
| Notes | A substantial piece in the latest *Milbank Quarterly* that reports the alarming statistic that **more than 43% of Indigenous Australian children** aged 6 to 10 years have **6 or more risk factors for mental illness** in adulthood, and 23% are experiencing current psychological distress. Further, the authors state that “substantial risk is already present in infancy (eg, 67% exposed to 3 or more stressful family life events, and 42.5% are not living with both birth parents).” More than 25% of had conduct problems in the clinical range and more than 20% were experiencing high psychological distress.  Interestingly, it was also noted that few children (< 2%) were exposed to low parental warmth and less than 5% of children report low self-confidence. As the authors observe, “This suggests considerable resilience.” They go on to argue that “An integrated service system response that can both offer high-level therapeutic services and address associated multiple adversities, from conception to late adolescence, is urgently needed to address current psychological distress in Indigenous Australian children and to reduce the future burden of mental illness.” |

*Health Affairs*

1 June 2017; Vol. 36, No. 6

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| URL | <http://content.healthaffairs.org/content/36/6.toc> |
| Notes | A new issue of *Health Affairs* has been published, with the theme ‘Pursuing Health Equity’. Articles in this issue of *Health Affairs* include:   * Editorial: Pursuing Health Equity (Alan R Weil) * DataGraphic: Health Equity * The Health Effects Of Legalizing **Same-Sex Marriage** (David Tuller) * Three-Year **Impacts Of The Affordable Care Act**: Improved Medical Care And Health Among Low-Income Adults (Benjamin D Sommers, Bethany Maylone, Robert J Blendon, E John Orav, and Arnold M Epstein) * Progress In **Achieving Health Equity** Requires Attention To Root Causes (Steven H Woolf) * Emerging Trends Could Exacerbate **Health Inequities In The United States** (Mariana C Arcaya and José F Figueroa) * Mapping Neighborhood Health Geomarkers To Clinical Care Decisions To Promote **Equity In Child Health** (Andrew F Beck, Megan T Sandel, Patrick H Ryan, and Robert S Kahn) * Transitions Clinic Network: Challenges And Lessons In **Primary Care For People Released From Prison** (Shira Shavit, Jenerius A Aminawung, Nathan Birnbaum, Scott Greenberg, Timothy Berthold, Amie Fishman, Susan H Busch, and Emily A Wang) * HUD **Housing Assistance** Associated With Lower Uninsurance Rates And **Unmet Medical Need** (Alan E Simon, Andrew Fenelon, Veronica Helms, Patricia C Lloyd, and Lauren M Rossen) * Simulations Test Impact Of Education, Employment, And Income Improvements On **Minority Patients With Mental Illness** (Margarita Alegria, Robert E Drake, Hyeon-Ah Kang, Justin Metcalfe, Jingchen Liu, Karissa DiMarzio, and Naomi Ali) * The United States Leads Other Nations In **Differences By Income** In **Perceptions Of Health And Health Care** (Joachim O Hero, Alan M Zaslavsky, and Robert J Blendon) * Challenges To **Reducing Discrimination And Health Inequity** Through Existing Civil Rights Laws (Amitabh Chandra, Michael Frakes, and A Malani) * Identifying Policy Levers And Opportunities For Action Across States To **Achieve Health Equity** (Julia Berenson, Yan Li, Julia Lynch, and J A Pagán) * **Racial Disparities In Surgical Mortality**: The Gap Appears To Have Narrowed (Winta Tsegay Mehtsun, José F Figueroa, Jie Zheng, E John Orav, and Ashish K Jha) * For Selected Services, **Blacks And Hispanics More Likely To Receive Low-Value Care** Than Whites (William L Schpero, Nancy E Morden, Thomas D Sequist, Meredith B Rosenthal, Daniel J Gottlieb, and C H Colla) * **Impact Of Ambulance Diversion**: Black Patients With Acute Myocardial Infarction Had Higher Mortality Than Whites (Renee Y Hsia, Nandita Sarkar, and Yu-Chu Shen) * New Kidney Allocation System Associated With **Increased Rates Of Transplants Among Black And Hispanic Patients** (Taylor A Melanson, Jason M Hockenberry, Laura Plantinga, Mohua Basu, Stephan Pastan, Sumit Mohan, David H Howard, and Rachel E Patzer) * **Racial And Ethnic Disparities** Persist At Veterans Health Administration **Patient-Centered Medical Homes** (Donna L Washington, W Neil Steers, Alexis K Huynh, Susan M Frayne, Uchenna S Uchendu, Deborah Riopelle, Elizabeth M Yano, Fay S Saechao, and Katherine J Hoggatt) * **Organizational Change Management For Health Equity**: Perspectives From The Disparities Leadership Program (Joseph R Betancourt, Aswita Tan-McGrory, Karey S Kenst, Thuy Hoai Phan, and Lenny Lopez) * The Role Of Nonprofit Hospitals In Identifying And Addressing **Health Inequities In Cities** (Amy Carroll-Scott, Rosie Mae Henson, Jennifer Kolker, and Jonathan Purtle) * Trends In Inequalities In **Mortality Amenable To Health Care** In 17 European Countries (Johan P Mackenbach, Yannan Hu, Barbara Artnik, Matthias Bopp, Giuseppe Costa, Ramune Kalediene, Pekka Martikainen, Gwenn Menvielle, Bjørn H Strand, Bogdan Wojtyniak, and W J Nusselder) |

*BMJ Quality and Safety* online first articles

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| URL | <https://qualitysafety.bmj.com/content/early/recent> |
| Notes | *BMJ Quality and Safety* has published a number of ‘online first’ articles, including:   * Editorial: **Interruptions in medication administration**: are we asking the right questions? (Anne Marie Rafferty Bryony Dean Franklin) * Editorial: **Digitalisation of medicines**: artefact, architecture and time (Tony Cornford, Valentina Lichtner) * Mobilising or standing still?A narrative review of **Surgical Safety Checklist knowledge** as developed in 25 highly cited papers from 2009 to 2016 (Bethan Mitchell, Sayra Cristancho, Bryanna B Nyhof, Lorelei A Lingard) |

*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:   * **Adverse events** related to **hospital care**: a retrospective medical records review in a Swiss hospital (Patricia Halfon; Anthony Staines; Bernard Burnand) * The development and testing of the **Person-centred Practice Inventory – Staff (PCPI-S)** (Paul Slater; Tanya McCance; Brendan McCormack) * The relationship between **shared decision-making** and **health-related quality of life** among patients in Hong Kong SAR, China (Richard H Xu; Annie W L Cheung; Eliza L Y Wong) |

**Online resources**

*[UK] NICE Guidelines and Quality Standards*

<https://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 NG65***Spondyloarthritis*** *in over 16s: diagnosis and management* <https://www.nice.org.uk/guidance/ng65>
* Quality Standard QS151 ***Oral health*** *in care homes* <https://www.nice.org.uk/guidance/qs151>
* Clinical Guideline CG174 ***Head injury****: assessment and early management* <https://www.nice.org.uk/guidance/cg176>

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