## AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



# On the Radar

Issue 364 9 April 2018

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**On the Radar** Editor: Dr Niall Johnson <u>niall.johnson@safetyandquality.gov.au</u> Contributors: Niall Johnson

## Books

*The Safety and Quality of Abortion Care in the United States* National Academies of Sciences, Engineering, and Medicine Washington, DC: The National Academies Press; 2018. 240 p.

URL	https://www.nap.edu/catalog/24950/the-safety-and-quality-of-abortion-care-in-the- united-states	
Notes	As is well-known, the provision of abortion services can be rather contentious, perhaps particularly so in the United States. This document provides a comprehensive review of the current state of the science related to the provision of safe, high-quality abortion services in the United States. The quality of abortion care was assessed based on whether it is safe, effective, patient-centred, timely, efficient, and equitable according to well-established standards The reports notes that there is substantial variation in the likelihood that women will receive the type of abortion services that best meet their needs depending on where they live and examines the factors that may cause this. It also considers a number of research questions and presents conclusions, including gaps in research.	

## Reports

*The Patient Centred Medical Home: barriers and enablers to implementation* Pearse J, Mazevska D Sydney: Sax Institute; 2018. p. 89.

Sydney: Sax	iey: Sax Institute; 2018. p. 89.		
URL	https://www.saxinstitute.org.au/publications/evidence-check-library/patient-centred-		
OKL	medical-home-barriers-enablers-implementation/		
	The Sax Institute commissioned this review examining the recent literature on the		
	implementation patient centred medical home models. The authors identified five core		
	themes, with barriers and enablers applicable to each:		
Notes	<ul> <li>policy settings and funding incentives</li> </ul>		
	<ul> <li>transformation and change management</li> </ul>		
	<ul> <li>care coordination beyond the practice</li> </ul>		
	health information technology		
	• data and performance measurement.		
	The authors conclude that "The PCMH [Patient Centred Medical Home] model has		
	the potential to improve quality of care, and enhance the experiences of primary care		
	of patients and staff. However, it requires a major change effort for most practices,		
	involving changes to work roles, processes, and implementation of new technology."		

For information about the Commission's work on patient and consumer centred care, see <a href="https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/">https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/</a>

Planning and enacting a business continuity and disaster recovery strategy successfully in a health service Perspectives Brief No 1

Fidgeon N

Canberra: Deeble Institute; 2018. p. 8.

URL	https://ahha.asn.au/publication/deeble-institute-perspectives-brief/deeble-
	perspectives-brief-planning-and-enacting
	This first Perspectives Brief from the Deeble Institute of Health Policy Research
Notes	offers a demonstration of the importance that a robust and up-to-date business
	continuity (and disaster recovery) plan has in any healthcare organisation in order to
	ensure the safety and effective management of the business during challenging times.
	Based on the experience of the Merri Health's disastrous fire in 2017, and written by
	Merri Health's CEO, this brief offers advice and lessons from that experience.

What makes us healthy? An introduction to the social determinants of health Lovell N, Bibby J

London: The Health Foundation; 2018. p. 33.

URL	http://www.health.org.uk/publication/what-makes-us-healthy
Notes	This brief report from The Health Foundation in the UK serves as an introduction to the ideas about social determinants of health, that health is not simply the outcome of purely biological processes. The authors explore how a person's opportunity for health is influenced by factors outside the health and social care system. It also shows that many people don't have the same opportunities to be as healthy as others. It contains suggestions for further reading and, with the help of short case studies, highlights how action can create improvements in the health of the whole population, for the lasting benefit of individuals, society and the economy.

## Journal articles

Antibiotic-Resistant Infection Treatment Costs Have Doubled Since 2002, Now Exceeding \$2 Billion Annually Thorpe KE, Joski P, Johnston KJ

Health Affairs. 2018;37(4):662-9.

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DOI	https://doi.org/10.1377/hlthaff.2017.1153
	The potential impact and importance of antimicrobial resistance has been discussed
	for some time. This article quantifies that impact as it has already occurred – with the
	'headline' here being that, according to the authors' calculations, the increased cost of
	treating patients infected with a resistant organism has grown to more than USD2
Notes	billion per annum in the USA alone. The US CDC estimates that 23,000 Americans
	with antibiotic-resistant infections die each year. Using Medical Expenditure Panel
	Survey data, the authors calculated that antibiotic resistance added USD1,383 to
	the cost of treating a patient with a bacterial infection, leading to a national (US)
	cost of USD2.2 billion annually.

For information about the Commission's work on antimicrobial use and resistance in Australia, see <a href="https://www.safetyandquality.gov.au/antimicrobial-use-and-resistance-in-australia/">https://www.safetyandquality.gov.au/antimicrobial-use-and-resistance-in-australia/</a>

Health, performance and conduct concerns among older doctors: A retrospective cohort study of notifications received by medical regulators in Australia

Thomas LA, Milligan E, Tibble H, Too LS, Studdert DM, Spittal MJ, et al

Journal of Patient Safety and Risk Management. 2018 [epub].

DOI <a href="https://doi.org/10.1177/2516043518763181">https://doi.org/10.1177/2516043518763181</a> This Australian study sought to examine whether 'older' doctors (those aged over 65)had a higher risk of notifications regarding their health, performance and/or conductbeing made to regulators as compared to their younger (aged 36–60) peers. Using adataset of 12,878 notifications lodged with Australian medical regulators 1 January2011 and 31 December 2014 the study found that this older cohort "had higherNotesnotification rates (90.9 compared with 66.6 per 1000 practitioner years". This groupwere at higher risk for notifications relating to physical or cognitive impairment,inadequate record keeping, substandard certificates/reports, prescribing orsupply of medicines, disruptive behaviour and substandard treatment", but lowerrisk for notifications about and for performance issues relating to problems with	outhar of 1 adent barety and hisk management. 2010 [epub].		
<ul> <li>had a higher risk of notifications regarding their health, performance and/or conduct being made to regulators as compared to their younger (aged 36–60) peers. Using a dataset of 12,878 notifications lodged with Australian medical regulators 1 January 2011 and 31 December 2014 the study found that this older cohort "had higher notification rates (90.9 compared with 66.6 per 1000 practitioner years". This group were at higher risk for notifications relating to physical or cognitive impairment, inadequate record keeping, substandard certificates/reports, prescribing or supply of medicines, disruptive behaviour and substandard treatment", but lower risk for notifications about and for performance issues relating to problems with</li> </ul>	DOI		
procedures, mental illness or substance misuse.	Notes	This Australian study sought to examine whether 'older' doctors (those aged over 65) had a higher risk of notifications regarding their health, performance and/or conduct being made to regulators as compared to their younger (aged 36–60) peers. Using a dataset of 12,878 notifications lodged with Australian medical regulators 1 January 2011 and 31 December 2014 the study found that this <b>older cohort</b> "had <b>higher</b> <b>notification rates</b> (90.9 compared with 66.6 per 1000 practitioner years". This group were at higher risk for notifications relating to <b>physical or cognitive impairment</b> , inadequate <b>record keeping</b> , <b>substandard certificates/reports</b> , <b>prescribing</b> or supply of medicines, <b>disruptive behaviour</b> and <b>substandard treatment</b> ", but lower	

#### Australian Health Review

Volume 42 Number 2 2018

Volume 42 Trumber 2 2010		
URL	http://www.publish.csiro.au/ah/issue/8881	
Notes	<ul> <li>A new issue of <i>Australian Health Review</i> has been published. Articles in this issue of <i>Australian Health Review</i> include:</li> <li>Do acute hospitalised patients in Australia have a different body mass index to the general Australian population: a point prevalence study? (Diane M Dennis, Vicki Carter, M Trevenen, J Tyler, L Perrella, E Lori and I Cooper)</li> <li>Improving the ascertainment of refugee-background people in health datasets and health services (Jane Yelland, Elisha Riggs, Josef Szwarc, Dannielle Vanpraag, Wendy Dawson and Stephanie Brown)</li> <li>How could health information be improved? Recommended actions from the Victorian Consultation on Health Literacy (Sophie J Hill and T A Sofra)</li> <li>Health service planning and sustainable development: considering what, where and how care is delivered through a pro-environmental lens (Sharon</li> </ul>	

•	Health and well being of lesbian, gay, bisexual, transgender and
	intersex people aged 50 years and over (Mark Hughes)
•	Advance care planning, culture and religion: an environmental scan of
	Australian-based online resources (Amanda Pereira-Salgado, Patrick Mader and Leanne M Boyd)
•	<b>Supporting return to work</b> through appropriate certification: a systematic approach for Australian primary care (Harry Papagoras, Tania Pizzari, Paul Coburn, Kevin Sleigh and Andrew M Briggs)
•	Patient satisfaction of telephone or video interpreter services compared
	with in-person services: a systematic review (Corey Joseph, Marie Garruba and Angela Melder)
•	Healthcare-associated infections in Australia: tackling the 'known unknowns' (Philip L. Russo, Allen C. Cheng, Brett G. Mitchell and Lisa Hall)
•	<b>Emergency department utilisation by older people</b> in metropolitan Melbourne, 2008–12: findings from the Reducing Older Patient's Avoidable Presentations for Emergency Care Treatment (REDIRECT) study (Danielle Mazza, Christopher Pearce, Angela Joe, Lyle R Turner, Bianca Brijnath, Colette Browning, Marianne Shearer and Judy Lowthian)
•	<b>Working Together to Connect Care</b> : a metropolitan tertiary emergency department and community care program (Debra Harcourt, Clancy McDonald, Leonie Cartlidge-Gann and John Burke)
•	Effect of the 4-h target on 'time-to-ECG' in patients presenting with chest
	pain to an emergency department: a pilot retrospective observational study (James A Hughes, C J Cabilan, Caitlin Young and Andrew Staib)
•	Nurse perceptions of safety climate in Australian acute hospitals: a cross- sectional survey (Sze-Ee Soh, Renata Morello, Sheral Rifat, Caroline Brand and Anna Barker)
•	Feasibility evaluation of a pilot <b>scribe-training</b> program in an Australian <b>emergency department</b> (Katherine Walker, Matthew Johnson, William Dunlop, Margaret Staples, Hamish Rodda, Ian Turner and Michael Ben-Meir)
•	Contribution of Aboriginal Community-Controlled Health Services to <b>improving Aboriginal health</b> : an evidence review (Megan Ann Campbell, Jennifer Hunt, David J Scrimgeour, Maureen Davey and Victoria Jones)
•	Making every Australian count: challenges for the <b>National Disability</b> <b>Insurance Scheme</b> (NDIS) and the equal inclusion of <b>homeless Aboriginal</b>
	and Torres Strait Islander Peoples with neurocognitive disability (Clare Townsend, Paul White, Jennifer Cullen, Courtney J. Wright and H Zeeman)
•	Birthing on Country (in Our Community): a case study of engaging
	stakeholders and developing a best-practice Indigenous maternity service
	in an urban setting (Sue Kildea, Sophie Hickey, Carmel Nelson, Jody Currie,
	Adrian Carson, Maree Reynolds, Kay Wilson, Sue Kruske, Megan Passey, Yvette Roe, Roianne West, Anton Clifford, M Kosiak, S Watego and S Tracy)

## Health Affairs

Volume: 37, Number: 4 (April 2018)

URL	https://www.healthaffairs.org/toc/hlthaff/37/4
	A new issue of Health Affairs has been published, with the themes 'Culture Of Health,
Notes	The ACA & More'. Articles in this issue of Health Affairs include:
	• AIR Louisville: Addressing Asthma With Technology, Crowdsourcing,
	Cross-Sector Collaboration, And Policy (Meredith Barrett, Veronica Combs,

	Jason G. Su, Kelly Henderson, Michael Tuffli, and The AIR Louisville Collaborative)
•	Innovative Population Health Model Associated With <b>Reduced Emergency</b> <b>Department Use And Inpatient Hospitalizations</b> (Donald Wesson, Heather Kitzman, Kenneth H. Halloran, and Kristen Tecson)
•	Pervasive Income-Based Disparities In Inpatient Bed-Day Rates Across Conditions And Subspecialties (Andrew F Beck, Carley L Riley, Stuart C Taylor, Cole Brokamp, and Robert S Kahn)
•	Assessing The Value Of 40 Years Of <b>Local Public Expenditures On</b> <b>Health</b> (Jonathon P Leider, Natalia Alfonso, Beth Resnick, Eoghan Brady, J Mac McCullough, and David Bishai)
•	A <b>Balanced Investment Portfolio For Equitable Health And Well-Being</b> Is An Imperative, And Within Reach (David A Kindig, and Bobby Milstein)
•	Integrating Data On <b>Social Determinants Of Health Into Electronic</b> <b>Health Records</b> (Michael N Cantor, and Lorna Thorpe)
•	The <b>Complexity Of Billing And Paying</b> For Physician Care (Joshua D Gottlieb, Adam Hale Shapiro, and Abe Dunn)
•	<b>Primary Care</b> Practices' Abilities And Challenges In Using <b>Electronic</b> <b>Health Record Data For Quality Improvement</b> (Deborah J Cohen, David A Dorr, Kyle Knierim, C Annette DuBard, Jennifer R Hemler, Jennifer D Hall, Miguel Marino, Leif I Solberg, K John McConnell, Len M Nichols, Donald E Nease Jr., Samuel T Edwards, Winfred Y Wu, H Pham-Singer, A N Kho, R L Phillips Jr., LV Rasmussen, F D Duffy, and B A Balasubramanian)
•	Changes In Hospital Utilization Three Years Into Maryland's <b>Global Budget</b> <b>Program For Rural Hospitals</b> (Eric T. Roberts, Laura A. Hatfield, J. Michael McWilliams, Michael E. Chernew, Nicolae Done, Sule Gerovich, Lauren Gilstrap, and Ateev Mehrotra)
•	Antibiotic-Resistant Infection Treatment Costs Have Doubled Since 2002, Now Exceeding \$2 Billion Annually (Kenneth E Thorpe, Peter Joski, and Kenton J Johnston)
•	The Evolving Moral Landscape Of <b>Palliative Care</b> (Myrick C. Shinall, Jr.)

## HealthcarePapers Vol. 17, No. 2, 2017

URL         http://www.longwoods.com/publications/healthcarepapers/25405           A new issue of HealthcarePapers has been published, with the theme 'Experience of Care as a Critical Component of Health System Performance Measurement: Recommendations for Moving Forward'. Articles in this issue of HealthcarePapers	VOI. 17, INO. 2, 2017		
Care as a Critical Component of Health System Performance Measurement: Recommendations for Moving Forward'. Articles in this issue of <i>HealthcarePapers</i>	URL	http://www.longwoods.com/publications/healthcarepapers/25405	
<ul> <li>Shaping the Future of Patient Experience Measurement in Canadian Healthcare (Jason M Sutherland)</li> <li>Experience of Care as a Critical Component of Health System Performance Measurement: Recommendations for Moving Forward (Kerry Kuluski, Michelle L A Nelson, C Shawn Tracy, Carole Ann Alloway, Charles Shorrock, Sara Shearkhani and Ross E G Upshur)</li> <li>Measuring Patient Experiences: Is It Meaningful and Actionable? (Sabrina T Wong, Sharon Johnston, Fred Burge, Kim McGrail and William Hogg)</li> </ul>		<ul> <li>A new issue of <i>HealthcarePapers</i> has been published, with the theme 'Experience of Care as a Critical Component of Health System Performance Measurement:</li> <li>Recommendations for Moving Forward'. Articles in this issue of <i>HealthcarePapers</i> include:</li> <li>Shaping the Future of Patient Experience Measurement in Canadian Healthcare (Jason M Sutherland)</li> <li>Experience of Care as a Critical Component of Health System Performance Measurement: Recommendations for Moving Forward (Kerry Kuluski, Michelle L A Nelson, C Shawn Tracy, Carole Ann Alloway, Charles Shorrock, Sara Shearkhani and Ross E G Upshur)</li> <li>Measuring Patient Experiences: Is It Meaningful and Actionable? (Sabrina T Wong, Sharon Johnston, Fred Burge, Kim McGrail and William Hogg)</li> <li>Health System Performance Measurement: A UK Perspective (Jon Glasby)</li> <li>Reacting to Patient Experience Results – How Can We Be Proactive?</li> </ul>	

•	Engagement-Capable Environments – No Less Challenging than other
	Large System Changes (Carole A Estabrooks)
•	More than just Measurement (Malcolm B Doupe)
•	Experience of Care – Furthering the Patient Experience Agenda (Jennifer
	Quaglietta and Karyn Popovich)
•	Rethinking Healthcare Performance Evaluation Systems towards the
	People-Centredness Approach: Their Pathways, their Experience, their
	Evaluation (Sabina Nuti, Sabina De Rosis, Manila Bonciani and A M Murante)
•	Putting Performance Measurement Recommendations into Practice:
	Building on Current Practices (Rose McCloskey, Pamela Jarrett and L Yetman)
•	From Volumes to Valued Experiences: Measurement and the Challenge
	before Us (Kerry Kuluski, Michelle L A Nelson, C Shawn Tracy, Carole Ann
	Alloway, Charles Shorrock, Sara Shearkhani and Ross E G Upshur)

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: What can we learn from <b>patients' perspectives on the quality</b>
	and safety of hospital care? (Bev Fitzsimons, Jocelyn Cornwell)
	• Hospital-level care coordination strategies associated with better patient
	experience (Jose F Figueroa, Yevgeniy Feyman, Xiner Zhou, Karen Joynt
	Maddox)
	• Editorial: Thoughtless design of the electronic health record drives overuse,
	but purposeful design can nudge improved patient care (Valerie M Vaughn,
	Jeffrey A Linder)
	• Errors and discrepancies in the administration of intravenous infusions: a
	mixed methods multihospital observational study (Imogen Lyons, Dominic
	Furniss, Ann Blandford, Gillian Chumbley, Ioanna Iacovides, Li Wei, Anna
	Cox, Astrid Mayer, Jolien Vos, Galal H Galal-Edeen, Kumiko O Schnock,
	Patricia C Dykes, David W Bates, Bryony Dean Franklin)

International Journal for Quality in Health Care online first articles

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:
	<ul> <li>Appropriateness of magnetic resonance imaging requested by primary care physicians for patients with knee pain (J M Gómez-García; F J Gómez-Romero; M Arencibia-Jiménez; J F Navarro-Gracia; M Sánchez-Mollá)</li> <li>Time needed to resolve patient complaints and factors influencing it: a cohort study (Jonathan Lee; Tze Ping Loh; David Eng Hui Ong; Michael George Caleb; Aymeric Yu Tang Lim; Peter George Manning)</li> <li>Quality of cross-infection control in dental laboratories. A critical systematic review (I Vázquez-Rodríguez; A Estany-Gestal; J Seoane-Romero; M J Mora; P Varela-Centelles; U Santana-Mora)</li> </ul>
	<ul> <li>Electronic checklists improve referral letters in gastroenterology: a randomized vignette survey (Sigrun Losada Eskeland; Corina Silvia Rueegg; Cathrine Brunborg; Lars Aabakken; Thomas de Lange)</li> <li>A systematic approach to develop a core set of parameters for boards of directors to govern quality of care in the ICU (Anke J M Oerlemans; Evert de Jonge; Johannes G van der Hoeven; Marieke Zegers)</li> </ul>

• The application of <b>Iberoamerican study of adverse events</b> (IBEAS)
methodology in Brazilian hospitals (Walter Mendes; Ana Luiza Braz Pavão;
Mônica Martins; Cláudia Travassos)
• Comparison of <b>objective measures and patients' perceptions of quality</b> of services in government health facilities in the Democratic Republic of Congo (Janna M Wisniewski; Mark L Diana; Valerie A Yeager; David R Hotchkiss)
• Improving <b>immediate newborn care practices</b> in Philippine hospitals: impact of a national quality of care initiative 2008–2015 (Maria Asuncion A Silvestre; Priya Mannava; Marie Ann Corsino; Donna S Capili; Anthony P
Calibo; Cynthia Fernandez Tan; John C S Murray; J Kitong; H L Sobel)
• Team dynamics within quality improvement teams: a scoping review (Paula
Rowland; Dean Lising; Lynne Sinclair; G Ross Baker)
<ul> <li>Using routinely available data and statistical methods to monitor and evaluate quality of care (Wen Chen)</li> </ul>
<ul> <li>Pharmacist interventions in high-risk obstetric inpatient unit: a medication safety issue (Nice M O Silva; Mariana R Gnatta; Marília B Visacri; Amanda C Ferracini; Priscila G Mazzola; Mary  Parpinelli; Fernanda G Surita)</li> </ul>
• Is <b>health literacy</b> associated with greater medical care trust? (Tzu-I Tsai; Wen- Ry Yu; Shoou-Yih D Lee)
• Improving the capacity for <b>learning and improvement in health care</b> (Oliver Groene)

## Online resources

#### Clinical Communiqué

Volume 5 Issue 1 March 2018

#### http://vifmcommuniques.org/clinical-communique-volume-5-issue-1-march-2018/

This edition of the *Clinical Communiqué* focuses on the issue of gas embolism. Using four very different cases of gas embolism the authors discuss the common findings of rapid devastating deterioration and ultimately unsuccessful attempts at recovery. As ever, there is an expert commentary, in this case from an anaesthetist with extensive experience in hyperbaric medicine, that provides an overview of the causes, diagnosis and management of **gas embolism**.

## [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 reviews or updates are:

- Quality Standard QS165 *Drug misuse prevention* <u>https://www.nice.org.uk/guidance/qs165</u>
- Quality Standard QS166 Trauma https://www.nice.org.uk/guidance/qs166
- NICE Guideline NG91 *Otitis media* (acute): antimicrobial prescribing https://www.nice.org.uk/guidance/ng91
- NICE Guideline NG92 *Stop* **smoking** *interventions and services* <u>https://www.nice.org.uk/guidance/ng92</u>
- NICE Guideline NG93 *Learning disabilities and behaviour* that challenges: service design and delivery <u>https://www.nice.org.uk/guidance/ng93</u>
- NICE Guideline NG94 *Emergency and acute medical care* in over 16s: service delivery and organisation <u>https://www.nice.org.uk/guidance/ng94</u>

#### [USA] Clinician Well-Being Knowledge Hub https://nam.edu/clinicianwellbeing/

The [US] National Academy of Medicine has launched this site as a comprehensive resource repository on clinician burnout and well-being providing clinicians and health system leaders with valuable resources to combat clinician burnout in their organizations and personal lives. The Hub is intended to give a comprehensive overview of the causes of clinician burnout; its consequences for health care professionals, patients, and their families; and innovative approaches that organizations can take to promote clinician well-being. This site includes peer-reviewed research, news articles, blog posts, toolkits, reports, and briefs on clinician burnout and well-being. The knowledge hub provides a central source for health system leaders, clinicians, and trainees, to not only better understand what's causing burnout, but to adopt solutions.

## [USA] No One is Free from Harm

http://www.modernhealthcare.com/reports/no-one-free-from-harm-quality-and-safety-stories-fromhealthcare-experts/?

The US publication *Modern Healthcare* has produced this special report in which healthcare leaders and experts share personal stories that suggest the U.S. has a long way to go on quality and safety in healthcare.

## [UK] National Institute for Health Research

#### https://discover.dc.nihr.ac.uk/portal/search/signals

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

- Self-care support for children with long-term conditions may reduce emergency costs
- A third of health practitioners do not get vaccinated against flu
- Adding a third **antiplatelet drug** after a **stroke** increases harms but not benefits
- Multi-morbidity predicted to increase in the UK over the next 20 years
- Enriched food and snacks can increase nutritional intake in older people in hospital
- Person-centred care improves quality of life for care home residents with dementia
- Hospital admission rates and costs increase in line with BMI
- Statins are of no benefit in acute respiratory distress syndrome
- Common osteoporosis drugs may prevent breast cancer spreading to bone
- Hypertonic saline as effective as normal saline for trauma patients

## [USA] Effective Health Care Program reports

#### https://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:

- Role of Immunotherapy in the Treatment of **Asthma** https://effectivehealthcare.ahrq.gov/topics/asthma-immunotherapy/research
- Intermittent Inhaled Corticosteroids and Long-Acting Muscarinic Antagonists for **Asthma** https://effectivehealthcare.ahrq.gov/topics/asthma-pharmacologic-treatment/research-2017

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