



On the Radar

Issue 392

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On the Radar

Editor: Dr Niall Johnson niall.johnson@safetyandquality.gov.au

Contributors: Niall Johnson, Alice Bhasale

Journal articles

Australia is responding to the complex challenge of overdiagnosis

Moynihan R, Barratt AL, Buchbinder R, Carter SM, Dakin T, Donovan J, et al

Medical Journal of Australia. 2018;209(8):332-4.

DOI	https://doi.org/10.5694/mja17.01138
Notes	Moynihan and colleagues describe the activities of an alliance to address the problems of overdiagnosis and overtreatment in Australia — the Wiser Healthcare research collaboration on overdiagnosis. With the goal of developing a National Action Plan to Prevent Overdiagnosis and Overtreatment in Australia , the group has released an initial statement which has been endorsed by a number of key organisations. Wiser HealthCare has also developed a comprehensive map of the possible drivers and solutions for overdiagnosis, but notes that more research is needed to tackle this widespread “wicked” problem . Drivers of overdiagnosis are multifaceted and include ‘cultural beliefs that more tests and treatments are better; financial incentives at the health system level; technological change enabling identification of smaller and more minor abnormalities; professional fear of missing disease and cognitive biases in decision making; and public expectations that clinicians will “do something”.’ The Commission’s <i>Australian Atlas of Healthcare Variation</i> series and Clinical Care Standards are two initiatives mentioned as contributing to the solution; others include the RACP EVOLVE project and the Choosing Wisely initiative.

For information about and access to the *Australian Atlas of Healthcare Variation* series, see <https://www.safetyandquality.gov.au/atlas>

For information about the Commission’s work on Clinical Care Standards, see <http://safetyandquality.gov.au/ccs>

National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand: Australian clinical guidelines for the diagnosis and management of atrial fibrillation 2018

Brieger D, Amerena J, Attia JR, Bajorek B, Chan KH, Connell C, et al
 Medical Journal of Australia. 2018;209(8):356-62.

National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand: Australian clinical guidelines for the management of heart failure 2018

Atherton JJ, Sindone A, De Pasquale CG, Driscoll A, MacDonald PS, Hopper I, et al.
 Medical Journal of Australia. 2018;209(8):363-9.

DOI	Brieger et al https://doi.org/10.5694/mja18.00646 Atherton et al https://doi.org/10.5694/mja18.00647
Notes	<p>The latest issue of the <i>Medical Journal of Australia</i> contains these guidelines for atrial fibrillation (AF) and heart failure (HF) that have been developed under the aegis of the National Heart Foundation of Australia and the Cardiac Society of Australia and New Zealand.</p> <p>These are the first Australian guidelines for Atrial Fibrillation and include recommendations for screening, treatment of arrhythmia, stroke prevention, and multidisciplinary care. Recommendations include more emphasis on opportunistic community screening and the use of the CHA2DS2-VA score to assess stroke risk, which is sex-neutral. Treatment recommendations include use of beta-blockers or calcium channel antagonists for rate control; flecainide in preference to amiodarone for rhythm control and novel oral anticoagulants in preference to warfarin for stroke prevention. Each recommendation is rated for the strength of evidence using the GRADE process, as well as the strength of the recommendation according to consensus. The guideline is not NHMRC-endorsed; the guideline process is described in detail; conflicts of interests statements and governance processes are provided in accompanying documents to enable transparency</p> <p>These heart failure (HF) clinical practice guidelines focus on the diagnosis and management of HF with recommendations that have been graded on the strength of evidence and the likely absolute benefit versus harm. Recommendations include the lowering blood pressure and lipids to decrease the risk of developing HF, the use of sodium–glucose cotransporter 2 inhibitors in patients with type 2 diabetes and cardiovascular disease, use of an echocardiogram if HF is suspected or newly diagnosed (or measurement of plasma B-type natriuretic peptides) improves diagnostic accuracy. Treatment options for different patient categories are also recommended.</p>

ASHP guidelines on preventing medication errors in hospitals

Billstein-Leber M, Carrillo CJD, Cassano AT, Moline K, Robertson JJ
 American Journal of Health-System Pharmacy. 2018;75(19):1493-517.

DOI	http://doi.org/10.2146/ajhp170811
Notes	These guidelines from the American Society of Hospital Pharmacists give recommendations and describe best practices for pharmacists aimed at ensuring and improving medication safety in the hospital setting.

For information about the Commission’s work on medication safety, see <https://www.safetyandquality.gov.au/our-work/medication-safety/>

Drivers of potentially avoidable emergency admissions in Ireland: an ecological analysis
 Lynch B, Fitzgerald AP, Corcoran P, Buckley C, Healy O, Browne J
 BMJ Quality & Safety. 2018 [epub].

DOI	https://doi.org/10.1136/bmjqs-2018-008002
Notes	This Irish study examined the variations (at the county level) in potentially avoidable emergency admissions in Ireland over the period 2014–2016, with a view to understanding the population and health system factors that could be involved. Across Ireland, potentially avoidable emergency admissions (266 395) accounted for 22% of all emergency admissions in the study period. They found that a single standard deviation change in the county-level unemployment rate was associated with a 24% higher rate of potentially avoidable emergency admissions. Their analyses led the authors to conclude that ‘potentially avoidable emergency admissions and total/other emergency admissions are primarily driven by socioeconomic conditions , hospital admission policy and private health insurance coverage .’ There was also recognition that the term itself, or perhaps how it is defined, is problematic as the authors noted that ‘The distinction between potentially avoidable and all other emergency admissions may not be as useful as previously believed when attempting to identify the causes of regional variation in emergency admission rates.’

Sicker patients account for the weekend mortality effect among adult emergency admissions to a large hospital trust
 Sun J, Girling AJ, Aldridge C, Evison F, Beet C, Boyal A, et al
 BMJ Quality & Safety. 2018 [epub].

DOI	https://doi.org/10.1136/bmjqs-2018-008219
Notes	This latest addition to the literature on the seemingly endless debate about the “weekend effect” attributes the apparent difference to the fact that ‘Patients admitted to hospital on weekends are sicker than those admitted on weekdays.’ This British study undertook a retrospective analysis of 4 years weekend and weekday adult emergency admissions to a university teaching hospital in England. The reported results include ‘Despite similar emergency department daily attendance rates, fewer patients were admitted on weekends (mean admission rate 91/day vs 120/day) because of fewer general practitioner referrals. Weekend admissions were sicker than weekday (mean [baseline National Early Warning Score] NEWS 1.8 vs 1.7, p=0.008), more likely to undergo transfer to ICU within 24 hours (4.2% vs 3.0%), spent longer in hospital (median 3 days vs 2 days) and less likely to experience same-day discharge (17.2% vs 21.9%) (all p values <0.001).’

Number of treating team reviews prior to rapid response team activation
 Paterson TL, Greenaway MJ, Anstey MHR
 Resuscitation. 2018.

DOI	https://doi.org/10.1016/j.resuscitation.2018.10.001
Notes	Should decisions about “limitations of medical therapy” (LOMT) be made as part of a Rapid Response Team (RRT) review or with a patient’s treating team? That’s the question posed in this Research letter, which demonstrates that treating teams review patients on at least three occasions before a RRT activation. The paper notes that about one third of RRT calls result in a LOMT decision, which could potentially have been more appropriately discussed earlier.

For information about the Commission’s work on recognising and responding to clinical deterioration, see <https://www.safetyandquality.gov.au/our-work/recognising-and-responding-to-clinical-deterioration/>

Dr Google in the ED: searching for online health information by adult emergency department patients

Cocco AM, Zordan R, Taylor DM, Weiland TJ, Dilley S, Kant J, et al

Medical Journal of Australia. 2018;209(8):342-7.

DOI	https://doi.org/10.5694/mja17.00889
Notes	<p>Researchers who surveyed patients about their use of the internet to research their symptoms before attending to attending emergency departments (EDs) found that younger and e-health literate patients were particularly likely to look at online health information before presenting, with about 34% of the 400 patients in two Melbourne tertiary EDs carrying out such searches. While clinicians often express concern about “Dr Google”, patients surveyed reported that their prior knowledge helped them to understand their healthcare provider better and to ask more informed questions, and said they would not change recommended treatment based on conflicting online advice. However 40% of respondents agreed that online information made them worried or anxious compared to 31% who did not.</p>

BMJ Quality and Safety

November 2018 - Volume 27 - 11

URL	https://qualitysafety.bmj.com/content/27/11
Notes	<p>A new issue of <i>BMJ Quality and Safety</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 were released online). Articles in this issue of <i>BMJ Quality and Safety</i> include:</p> <ul style="list-style-type: none"> • Editorial: Mobile technologies in healthcare: systematising the move from point solutions to broad strategies (Payal Agarwal, Onil Bhattacharyya) • Editorial: Improving adherence to high-value medications through prescription cost-sharing policies (Melissa M Garrido, Austin B Frakt) • Comparing standard office-based follow-up with text-based remote monitoring in the management of postpartum hypertension: a randomised clinical trial (Adi Hirshberg, Katheryne Downes, Sindhu Srinivas) • Effect of copayment policies on initial medication non-adherence according to income: a population-based study (I Aznar-Lou, A Pottegård, A Fernández, María T Peñarrubia-María, A Serrano-Blanco, R Sabés-Figuera, M Gil-Girbau, M Fajó-Pascual, P Moreno-Peral, M Rubio-Valera) • 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) • Hospital admissions associated with medication non-adherence: a systematic review of prospective observational studies (Pajaree Mongkhon, Darren M Ashcroft, C Norman Scholfield, Chuenjid Kongkaew) • Unplanned early hospital readmission among critical care survivors: a mixed methods study of patients and carers (Eddie Donaghy, Lisa Salisbury, Nazir I Lone, Robert Lee, Pamela Ramsey, Janice E Rattray, Timothy S Walsh) • Speaking up about care concerns in the ICU: patient and family experiences, attitudes and perceived barriers (Sigall K Bell, Stephanie D Roche, Ariel Mueller, Erica Dente, Kristin O’Reilly, Barbara Sarnoff Lee, Kenneth Sands, Daniel Talmor, Samuel M Brown)

	<ul style="list-style-type: none"> Using a network organisational architecture to support the development of Learning Healthcare Systems (Maria T Britto, Sandra C Fuller, Heather C Kaplan, Uma Kotagal, Carole Lannon, Peter A Margolis, Stephen E Muething, Pamela J Schoettker, Michael Seid)
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International Journal for Quality in Health Care

Volume 30 Issue 8, October 2018

URL	https://academic.oup.com/intqhc/issue/30/8
Notes	<p>A new issue of <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 were released online). Articles in this issue include:</p> <ul style="list-style-type: none"> Editorial: Solve the problems for better health—from quality indicators to system audits (Yi-Hsin Elsa Hsu; Ya-Ting Yang) Is Lean sustainable in today's NHS hospitals? A systematic literature review using the meta-narrative and integrative methods (Samuel Woodnutt) Feasibility and efficacy of sepsis management guidelines in a pediatric intensive care unit in Saudi Arabia: a quality improvement initiative (Gamal M Hasan; Ayman A Al-Eyadhy; Mohamed-Hani A Temsah; Ali A Al-Haboob; Mohammad A Alkhateeb; Fahad Al-Sohime) Socio-demographic determinants of women's satisfaction with prenatal and delivery care services in Italy (Valentina Tocchioni; Chiara Seghieri; Gustavo De Santis ; Sabina Nuti) In pursuit of quality and safety: an 8-year study of clinical peer review best practices in US hospitals (Marc T Edwards) Evaluating the quality of the processes of care and clinical outcomes of premature newborns admitted to neonatal intensive care units in Mexico (Svetlana V Doubova; Heladia Josefa-García ; Irma Alejandra Coronado-Zarco; Sandra Carrera-Muñños; Guadalupe Cordero-Gonzalez; Leonardo Cruz-Reynoso; Leovigildo Mateos-Sanchez; A J Maya-García; R Pérez-Cuevas) Perceptions of patient safety culture among healthcare employees in tertiary hospitals of Heilongjiang province in northern China: a cross-sectional study (Ying Li; Yanming Zhao; Yanhua Hao; Mingli Jiao ; Hongkun Ma; Baijun Teng; Kai Yang; Tongbo Sun; Qunhong Wu; Hong Qiao) Frequent use of emergency departments by older people: a comparative cohort study of characteristics and outcomes (Maryann Street; Debra Berry; Julie Considine) Impact of the implementation of electronic health records on the quality of discharge summaries and on the coding of hospitalization episodes (José L Bernal; Sebastián DelBusto; María I García-Mañoso ; Emilia de Castro Monteiro; Ángel Moreno; Carolina Varela-Rodríguez; Pedro M Ruiz-lopez) Adaptation of a hospital electronic referral system for antimicrobial stewardship prospective audit and feedback rounds (Matthew D M Rawlins; Edward Raby ; Frank M Sanfilippo; Rae Douglass; Jonathan Chambers; Duncan McLellan; John R Dyer) Targeted educational program improves infant positioning practice in the NICU (L Charafeddine; S Masri; P Ibrahim; D Badin ; S Cheayto; H Tamim) Ultrasound guidance for central venous catheterisation. A Colombian national survey (José Andrés Calvache; Camilo Daza-Perdomo; Julio Gómez-Tamayo; Edison Benavides-Hernández ; Andrés Zorrilla-Vaca; M Klimek) Matt's story: learning from heartbreak (Kristen Miller; Alyssa Dastoli)

URL	http://journals.sagepub.com/toc/cric/23/5
Notes	<p>A new issue of the <i>Journal of Patient Safety and Risk Management</i> has been published. Articles in this issue of the <i>Journal of Patient Safety and Risk Management</i> include:</p> <ul style="list-style-type: none"> • Editorial: Reaching common ground: The role of shared mental models in patient safety (Albert W Wu) • Using patient factors to predict obstetric complaints and litigation: A mixed methods approach to quality improvement (Benjamin M Nowotny, Erwin Loh, Miranda Davies-Tuck, Ryan Hodges, and Euan M Wallace) • Legal liability in sepsis cases (Julian M Brown and John M Snell) • Measuring shared mental models in healthcare (Logan M Gisick, Kristen L Webster, Joseph R Keebler, Elizabeth H Lazzara, Sarah Fouquet, Keaton Fletcher, Agnes Fagerlund, Victoria Lew, and Raymond Chan) • The STEP-up programme: Engaging all staff in patient safety (DJ Hamblin-Brown and Judi Ingram)

URL	https://onlinelibrary.wiley.com/toc/13697625/2018/21/5
Notes	<p>A new issue of <i>Health Expectations</i> has been published. Articles in this issue of <i>Health Expectations</i> include:</p> <ul style="list-style-type: none"> • Editorial briefing: Exploring service users' views to reduce inequalities in healthcare (Louise Condon) • Patients' perceived needs for allied health, and complementary and alternative medicines for low back pain: A systematic scoping review (Louisa Chou, Tom A Ranger, Waruna Peiris, Flavia M Cicuttini, Donna M Urquhart, Andrew M Briggs, Anita E Wluka) • Who said dialogue conversations are easy? The communication between communication vulnerable people and health-care professionals: A qualitative study (Steffy E A Stans, Ruth J P Dalemans, Uta R Roentgen, Hester W H Smeets, Anna J H M Beurskens) • Solidarity and cost management: Swiss citizens' reasons for priorities regarding health insurance coverage (Mélinée Schindler, Marion Danis, Susan D Goold, Samia A Hurst) • Pre-adolescent children's experiences of receiving diabetes-related support from friends and peers: A qualitative study (David Rankin, Jeni Harden, Katharine D Barnard, John Stephen, Simita Kumar, Julia Lawton) • Being targeted as a "severely overweight pregnant woman" —A qualitative interview study (Drude S Lauridsen, Peter Sandøe, Lotte Holm) • Responding effectively to adult mental health patient feedback in an online environment: A coproduced framework (Rebecca Baines, John Donovan, Sam Regan de Bere, Julian Archer, Ray Jones) • Reciprocal relationships and the importance of feedback in patient and public involvement: A mixed methods study (Elspeth Mathie, Helena Wythe, Diane Munday, Paul Millac, Graham Rhodes, Nick Roberts, Nigel Smeeton, Fiona Poland, Julia Jone) • Patient experience of centralized acute stroke care pathways (Catherine Perry, Iliatha Papachristou, Angus I G Ramsay, Ruth J Boaden, Christopher McKevitt, Simon J Turner, Charles D A Wolfe, Naomi J Fulop)

	<ul style="list-style-type: none"> • Towards co-designing active ageing strategies: A qualitative study to develop a meaningful physical activity typology for later life (Cornelia Guell, Jenna Panter, Simon Griffin, David Ogilvie) • Aboriginal experiences of cancer and care coordination: Lessons from the Cancer Data and Aboriginal Disparities (CanDAD) narratives (Rachel Reilly, Jasmine Micklem, Paul Yerrell, David Banham, Kim Morey, Janet Stajic, Marion Eckert, Monica Lawrence, H B Stewart, A Brown, the other CanDAD Investigators and the CanDAD Aboriginal Community Reference Group)
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Journal of Health Services Research & Policy

Volume: 23, Number: 4 (October 2018)

URL	http://journals.sagepub.com/toc/hsrb/23/4
Notes	<p>A new issue of <i>Journal of Health Services Research & Policy</i> has been published. Articles in this issue of <i>Journal of Health Services Research & Policy</i> include:</p> <ul style="list-style-type: none"> • Editorial: Include, invest, innovate: health systems for prosperity and solidarity (Martin McKee and Hans Kluge) • Intimate partner violence and clinical coding: issues with the use of the International Classification of Disease (ICD-10) in England (Philippa Olive) • Diagnostic Assessment Reviews: is cost-effectiveness analysis helpful or necessary? (Hema Mistry and James Mason) • Targeting the ‘right’ patients for integrated care: stakeholder perspectives from a qualitative study (Jonathan Stokes, Lisa Riste, and S Cheraghi-Sohi) • Patient and family engagement in incident investigations: exploring hospital manager and incident investigators’ experiences and challenges (Josje Kok, Ian Leistikow, and Roland Bal) • The art and science of non-evaluation evaluation (Lorelei Jones) • Commentary on ‘The art and science of non-evaluation evaluation’ (Kath Checkland) • ‘The harmony of social theory in evaluation’ – commentary on ‘The art and science of non-evaluation evaluation’ (Joanne Greenhalgh and Nick Emmel) • A meta-ethnographic review of interprofessional teamwork in hospitals: what it is and why it doesn’t happen more often (Odessa Petit dit Dariel and Paula Cristofalo)

Nursing Leadership

Volume 31, Number 2, 2018

URL	https://www.longwoods.com/publications/nursing-leadership/25600
Notes	<p>A new issue of <i>Nursing Leadership</i> has been published with a focus on nursing leadership and quality improvement. Articles in this issue of <i>Nursing Leadership</i> include:</p> <ul style="list-style-type: none"> • Quality Bests Quantity (Lynn M Nagle) • Achieving the Quadruple Aim in Healthcare: The Essential Role of Authentic, Complex and Resilient Nurse Leaders (Lianne Jeffs) • Attributes and Actions Required to Advance Quality and Safety in Hospitals: Insights from Nurse Executives (Lianne Jeffs, G. Ross Baker, Ru Taggar, Pam Hubley, Joy Richards, Jane Merkley, Judy Shearer, Hailey Webster, Melissa Dizon and Jessie Ho Fong) • Moving Beyond the Quality and Safety Quagmire: Collective Wisdom from Nurse Leaders (Lianne Jeffs) • Patient and Family-Centred Home and Community Care: Realizing the Opportunity (Dipti Purbhoo and Anne Wojtak)

	<ul style="list-style-type: none"> • The Development of a Client Care Needs Assessment Tool for Mental Health and Addictions Settings Using a Modified Delphi Approach (Kristin Cleverley, Christina Bartha, G Strudwick, R Chakraborty and R Srivastava) • Advancing Family Practice Nursing in Canada: An Environmental Scan of International Literature and National Efforts towards Competency Development (Julia Lukewich, S Taylor, M-E Poitras and R Martin-Misener)
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BMJ *Quality and Safety* online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p>BMJ <i>Quality and Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Validation of the Primary Care Patient Measure of Safety (PC PMOS) questionnaire (Sally J Giles, Sahdia Parveen, Andrea L Hernan) • Provider interruptions and patient perceptions of care: an observational study in the emergency department (Anna Schneider, Markus Wehler, Matthias Weigl) • Editorial: From incident reporting to the analysis of the patient journey (Patricia Trbovich, Charles Vincent) • Community-acquired and hospital-acquired medication harm among older inpatients and impact of a state-wide medication management intervention (Karen Pellegrin, Alicia Lozano, Jill Miyamura, Joanne Lynn, Les Krenk, Sheena Jolson-Oakes, Anita Ciarleglio, Terry McInnis, Alistair Bairos, Lara Gomez, Mercedes Benitez-McCrary, Alexandra Hanlon) • Drivers of potentially avoidable emergency admissions in Ireland: an ecological analysis (Brenda Lynch, Anthony P Fitzgerald, Paul Corcoran, Claire Buckley, Orla Healy, John Browne) • Correspondence: External validity is also an ethical consideration in cluster-randomised trials of policy changes (Karl Y Bilimoria, Jeanette W Chung, Larry V Hedges) • Correspondence: External validity is also an ethical consideration in cluster-randomised trials of policy changes: the author’s reply (Karla Hemming)

Online resources

[USA] *A Surgeon So Bad It Was Criminal*

<https://www.propublica.org/article/dr-death-christopher-duntsch-a-surgeon-so-bad-it-was-criminal>

This ProPublica story about a neurosurgeon that is horrifying to the point of it being scarcely believable how long it took for action to be taken. This early paragraph alone gives an indication: *In the roughly two years that Duntsch — a blue-eyed, smooth-talking former college football player — had practiced medicine in Dallas, he had operated on 37 patients. Almost all, 33 to be exact, had been injured during or after these procedures, suffering almost unheard-of complications. Some had permanent nerve damage. Several woke up from surgery unable to move from the neck down or feel one side of their bodies. Two died in the hospital, including a 55-year-old schoolteacher undergoing what was supposed to be a straightforward day surgery.*

[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:

- NICE Guideline NG95 *Lyme disease* <https://www.nice.org.uk/guidance/ng95>

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