

# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

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## Hospital mortality indicators: A guide for Boards and Chief Executives

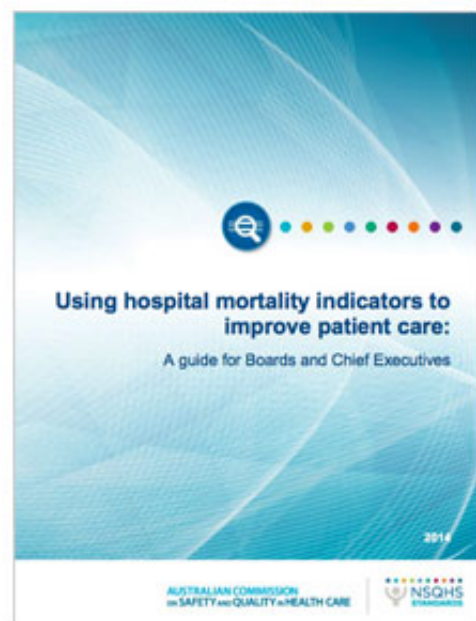
The Commission is supporting health service Boards and Chief Executives to understand their roles and responsibilities for clinical governance and the implementation of the National Safety and Quality Health Service Standards (NSQHS) through the development of supporting guides.

*NSQHS Standard 1: Governance for Safety and Quality in Health Service Organisations* requires leaders to implement governance systems to set, monitor and improve the performance of the organisation.

Hospital mortality indicators (i.e. indicators about trends of death) are crucial elements of a hospital patient safety monitoring program and are useful safety and quality screening tools. By identifying potential areas of concern, they allow hospitals to investigate the range of possible causes for data that varies from what is expected and make improvements where necessary.

To support local interpretation and use of these indicators, the Commission has launched a new guide *Using hospital mortality indicators to improve patient care: A guide for Boards and Chief Executives*.

The guide provides information on how hospital mortality indicators can be used to screen for potential safety and quality issues through existing clinical governance processes.



[Download \*Using hospital mortality indicators to improve patient care: A guide for Boards and Chief Executives.\*](#)

[More information on core hospital-based outcome indicators.](#)

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## **Consultation: NSQHS Standards Guide for Dental Practices and Services**

The Commission has collaborated with the Australian Dental Association and dental practitioners across the country to develop a draft NSQHS Standards Guide for Dental Practices and Services. The guide aims to assist dental practices and services to use the NSQHS Standards as a framework to improve the safety and quality of care. It provides information on preparing for accreditation, practical strategies to implement the NSQHS Standards and clinical scenarios highlighting how the NSQHS Standards can be applied in dental settings.

Whether receiving dental care in a private practice, community dental clinic or a large oral health service, accreditation to the NSQHS Standards provides a nationally consistent statement about the level of care consumers can expect.

Many dental practitioners from both the private and public sectors have freely given their time and expertise in the development of the guide. The Commission is now seeking feedback on the draft guide.

[Download the draft guide and details on how to contribute.](#)

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## **Improving care for Aboriginal and Torres Strait Islanders in hospital**

At the request of the National Aboriginal and Torres Strait Islander Health Standing Committee, the Commission has commenced a project to use the NSQHS Standards to improve the care provided to Aboriginal and Torres Strait Islander (Indigenous Australians) people in hospitals.

The project will consider safety and quality issues typically affecting Indigenous Australians in hospitals and will include:

- consultation with key stakeholders to consider elements of safe and high quality care for Indigenous Australians
- an analysis of the safety and quality issues commonly associated with health care for Indigenous Australians
- a report mapping these safety and quality issues to the NSQHS Standards
- a literature scan of relevant evidence based strategies for safety and quality
- a draft resource that aims to drive best practice care for Indigenous Australians in hospitals using the current version of the NSQHS Standards
- a report to jurisdictions with recommendations for progressing safety and quality in a systemic way in hospitals.

[More details about the project will be made available on the Commission's web site soon.](#)

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## **NEW APP A better way to care: Actions for clinicians**

In November 2014, the Commission launched resources to improve the safety and quality of care for

patients with dementia or delirium in hospital. To complement the resource for clinicians, the Commission has developed an App for mobile devices.

The aim of the *A better way to care* App is to provide clinicians with a quick access guide to the pathway for identifying and providing safe and high-quality care to patients with cognitive impairment in hospitals.

The App focuses on the following questions:

- Why is this important?
- Who should I be concerned about?
- What should I do?
- What does being alert mean to me?

The App will be available via the iPhone and Google Play App Stores in April.



Available now: [A better way to care posters](#).

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## Expert advisory group investigating appropriate management of knee pain

A recent report by the Organisation for Economic Cooperation and Development (OECD) suggests Australia has the highest per capita rates of knee replacement surgery compared to other countries (more than 200 per 100,000 population). Considerable variation in the rates of knee arthroscopy was also observed between regions in Australia.

In response to these findings the Commission established an Expert Advisory Group on Knee Pain (Knee Pain EAG). This is part of the Commission's work on identifying, mapping and addressing unwarranted healthcare variation, and improving appropriateness of care.

Comprising expert clinicians, orthopedic nurses, general practitioners, physiotherapists, rheumatologists and consumers, the Knee Pain EAG is investigating appropriate management of knee pain within the Australian context. The group aims to produce a set of recommendations to identify and address areas of unwarranted variation in knee surgery and improve the quality and appropriateness of care for patients with knee pain in Australia.

[Download the OECD report \*Geographic Variations in Health Care\*.](#)

[Download the Commission's report \*Exploring Healthcare Variation in Australia: Analyses Resulting from an OECD Study\*.](#)

[More information about the Australian Atlas of Healthcare Variation.](#)

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## Hip Fracture and Delirium Clinical Care Standards

The Clinical Care Standards program aims to improve patient outcomes and experiences, and ensure health care is safe and appropriate. The Clinical Care Standards also promote shared decision-making

between patients and clinicians.

In 2014, the Commission launched Clinical Care Standards for antimicrobial stewardship and acute coronary syndromes. This year, the program will be developing Clinical Care Standards for hip fracture and delirium.

### **Hip fracture**

In Australia, 91% of hip fractures occur in people aged 65 or over, with the vast majority associated with falls. As the Australian population continues to age, the number, and associated burden, of people admitted to hospital with a hip fracture is expected to increase annually.

[More information about the Hip Fracture Clinical Care Standard.](#)

### **Delirium**

Delirium is an acute disturbance of consciousness, attention and cognition that is common in older people in hospital and despite guidelines on managing delirium, it is under-recognised, misdiagnosed, and under treated.

[More information about the Delirium Clinical Care Standard.](#)

Public consultations on the Hip Fracture and Delirium Clinical Care Standards will take place in June 2015.

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