On the Radar is a summary of some of the recent publications in the areas of safety and quality in health care. Inclusion in this document is not an endorsement or recommendation of any publication or provider. Access to particular documents may depend on whether they are Open Access or not, and/or your individual or institutional access to subscription sites/services. Material that may require subscription is included as it is considered relevant.

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On the Radar
Editor: Dr Niall Johnson niall.johnson@safetyandquality.gov.au
Contributors: Niall Johnson, Alice Bhasale

Reports

Australia's Health 2018
Australia’s health series no. 16. AUS 221
Australian Institute for Health and Welfare

|-----|-------------------------------------------------------------------------------------------------|
| TRIM | D18-22472  
D18-22473 |

Notes
Australian Indigenous HealthInfoNet has released their report seeking to give a comprehensive summary of the most recent indicators of the health and current health status of Australia’s Aboriginal and Torres Strait Islander people. The initial sections of the Overview cover the context of Aboriginal and Torres Strait Islander health, population, and various measures of population health status. The remaining sections look at selected health conditions and risk and protective factors that contribute to the overall health of Aboriginal and Torres Strait Islander people. These sections comprise an introduction and evidence of the extent of the condition or risk/protective factor. The annual Overview is a resource relevant for workers, students and others who need to access up-to-date information about Aboriginal and Torres Strait Islander health.

### Journal articles

**Development of Indicators to Assess Quality of Care for Prostate Cancer**
Nag N, Millar J, Davis ID, Costello S, Duthie JB, Mark S, et al

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<tr>
<th>DOI</th>
<th><a href="https://doi.org/10.1016/j.euf.2016.01.016">https://doi.org/10.1016/j.euf.2016.01.016</a></th>
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Notes: Indicators and measures of care quality have a somewhat mixed history. Debate of topics such as development methods and the value of process or outcome measures are not uncommon. This paper describes the development of a set of indicators to enable assessment and reporting of quality of care for men with localised prostate cancer (PCa). An international panel was assembled and assessed 97 candidate indicators that had been identified from the literature. The panel endorsed 12 indicators covering pre-, intra-, and post-treatment of PCa care, within the limits of the data captured by the Prostate Cancer Outcomes Registry–Australia and New Zealand. The authors assert that “The 12 endorsed quality measures enable international benchmarking on the quality of care of men with localised PCa. Reporting on these indicators enhances safety and efficacy of treatment, reduces variation in care, and can improve patient outcomes.”

**Out-of-pocket medical expenses for Queenslanders with a major cancer**
Gordon LG, Elliott TM, Olsen CM, Pandeya N, Whiteman DC

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<th>DOI</th>
<th><a href="https://doi.org/10.5694/mja17.00815">https://doi.org/10.5694/mja17.00815</a></th>
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Notes: In one year, 452 participants in the Queensland Skin Cancer Registry were diagnosed with cancer of any kind. All Medicare costs and Medicare Benefits paid were identified. In a 2 year period, median out of pocket costs were highest for breast and prostate cancer - $4192 and $3175 respectively. The median proportion of provider fees covered by Medicare subsidies was 63%, ranging from 51% for prostate cancer to 89% for lung cancer. One quarter of cancer survivors paid upfront doctors’ fees of more than $20,000 over 2 years.
### A nurse-led model at public academic hospitals maintains high adherence to colorectal cancer surveillance guidelines


**DOI** https://doi.org/10.5694/mja17.00823

**Notes**

Paper reporting on a study that audited compliance with colonoscopy surveillance for colorectal cancer guidelines in nurse-led decision-making in public teaching hospitals compared with physician-led decision-making in private non-academic hospitals. In the nurse-led models 97% of colonoscopies corresponded to guideline recommendations compared with 83% of the private hospital physician models. (p<0.001). Of colonoscopies that were performed earlier than recommended, most were because of patient-related factors, including symptoms and faecal occult blood results. The ratio of the numbers of high risk adenomas to cancers increased from 6.6:1 during 2001–2005 to 16:1 during 2011–2015.

### Effects of post-discharge management on rates of early re-admission and death after hospitalisation for heart failure


**Outpatient heart failure programs: time for a new standard**

Halabi A, Chew DP


**DOI**

Huynh et al [https://doi.org/10.5694/mja17.00809](https://doi.org/10.5694/mja17.00809)

Halabi and Chew [https://doi.org/10.5694/mja18.00329](https://doi.org/10.5694/mja18.00329)

**Notes**

Huynh et al report on a prospective cohort study that compared outcomes for patients with heart failure in 5 Australian hospital cardiology departments. The impact of post-discharge care programs on readmission rates was assessed. Much of the variability between hospital readmission rates was explained by the types of post-discharge management, including nurse-led disease management programs and exercise programs. By hospital, 30-day re-admission rates ranged from 17% to 33%, and 90-day rates from 40% to 55%.

In their editorial Halabi and Chew argue that “Standardisation of care and validation of efficacy across Australia is imperative to improving outcomes and reducing the costs associated with this condition. In order to promote this change, health care services must implement standardised ambulatory heart failure programs that are accessible to all patients.”

### How antibiotic allergy labels may be harming our most vulnerable patients

Trubiano JA, Grayson ML, Thursky KA, Phillips EJ, Slavin MA


**DOI** https://doi.org/10.5694/mja17.00487

**Notes**

Antibiotic allergy labels often follow patients for life, even when their provenance is uncertain or the allergy is no longer present. While this protects patients from potential allergic reactions, it also increases the use of broad-spectrum antibiotics, increases pressure on antimicrobial resistance and a range of other negative outcomes. The authors provide a compelling case for considering antibiotic allergy testing in certain patients and simpler measures to ensure the accuracy of antibiotic allergy labels in others, such as “educating clinicians about antibiotic cross-reactivity, pursuing a viral aetiology instead of antibiotic prescription for childhood exanthems, forensically evaluating purported allergy in the electronic medical record, and deleting labels that are drug side effects (eg, gastrointestinal intolerance).”
Changes in the rate of publicly financed knee arthroscopies: an analysis of data from the Norwegian patient registry from 2012 to 2016
Holtedahl R, Brox JI, Aune AK, Nguyen D, Risberg MA, Tjomsland O
BMJ Open. 2018;8(6).
DOI https://doi.org/10.1136/bmjopen-2017-021199

In a recent issue of On the Radar, I discussed a paper describing a clinician-led evidence-based policy was implemented in one local health district in New South Wales in 2012 to reduce the use of knee arthroscopy for patients aged 50 years or over so as to encourage more appropriate and effective care (https://doi.org/10.1186/s12891-018-2043-5).

Holtedahl et al also sought to examine rates of knee arthroscopies. Using anonymised data from the Norwegian National Patient Registry in the period 2012–2016 and with one regional authority (South-Eastern Norway Regional Health Authority) requiring that 80% of the knee arthroscopies should be done on patients younger than 50 so as to avoid the use of the procedure on degenerative meniscus and arthritis, while other regions did not implement such a change. The authors found a decrease of 48% in the utilization rate in the region, compared with an average decrease of 13% in the other three regions and a national decrease of 33%. The proportion of older patients (>50) in Norway fell from 54% in 2012 to 46% in 2016.

Both these studies show that policy changes, albeit with different mechanisms, can shift practice and drive more appropriate care.

In addition to being a useful addition to the literature on knee arthroscopy, this is also a demonstration of the value and utility of good quality clinical registry data.

For information on the Commission’s work on variation and the Australian Atlas of Healthcare Variation, see https://www.safetyandquality.gov.au/atlas/

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

Characteristics and outcomes of emergency interhospital transfers from subacute to acute care for clinical deterioration
Considine J, Street M, Bucknall T, Rawson H, Hutchison AF, Dunning T, et al
DOI https://doi.org/10.1093/intqhc/mzy135

This study into emergency transfers in hospitals focused on acute and subacute healthcare facilities from five health services in Victoria. Looking at patients with an emergency interhospital transfer from subacute to acute hospital care, they also randomly selected two inpatients from the same subacute care ward as controls, with a final dataset covering 603 transfers in 557 patients and 1160 control patients.

They found that patients who require an emergency interhospital transfer from subacute to acute hospital care have significantly higher inpatient mortality, were more likely to have unplanned intensive care unit admissions and rapid response team calls during their entire hospital admission. They were also more likely to be male, born in a non-English speaking country, have lower functional independence, more frequent vital sign assessments and experience a serious adverse event during first acute care or subacute care admissions.

The authors suggest that “Clinical instability during the first acute care admission (serious adverse events or increased surveillance) may prompt reassessment of patient suitability for movement to a separate subacute care hospital.”
Chronic kidney disease (CKD) is a common and potentially serious complication of diabetes. This paper reports on a study that used data on 90,550 patients with Type 2 diabetes to examine the characteristics and proportion who are screened for CKD. The authors report that of the 90,550 patients, “44,394 (49.0%) were appropriately screened or monitored. 8,030 (8.9%) patients had a recorded diagnosis of CKD, whereas 6,597 (7.3%) patients had no recorded diagnosis of CKD despite pathology consistent with a diagnosis. Older age and diagnosis of hypertension or hyperlipidaemia were associated with increased odds of CKD diagnosis being recorded. Older patients, males, those with recorded diagnoses of hypertension or hyperlipidaemia and those who had their medical record opened more frequently were more likely to be screened appropriately.” As the authors note, “Screening and monitoring of CKD appears suboptimal.”
• **Diagnostic performance dashboards**: tracking diagnostic errors using big data (Ketan K Mane, Kevin B Rubenstein, Najla Nassery, Adam L Sharp, Ejaz A Shamim, Navdeep S Sangha, Ahmed Hassoon, Mehdi Fanai, Zheyu Wang, David E Newman-Toker)

• **Overdiagnosis and overtreatment** as a quality problem: insights from healthcare improvement research (Natalie Armstrong)

• **Can first-year medical students acquire quality improvement knowledge prior to substantial clinical exposure?** A mixed-methods evaluation of a pre-clerkship curriculum that uses education as the context for learning (Allison Brown, Aditya Nidumolu, Alexandra Stanhope, Justin Koh, Matthew Greenway, Lawrence Grierson)

*International Journal for Quality in Health Care*
Volume 30, Issue 5. June 2018

URL [https://academic.oup.com/intqhc/issue/30/5](https://academic.oup.com/intqhc/issue/30/5)

A new issue of the *International Journal for Quality in Health Care* has been published. Many of the papers in this issue have been referred to in previous editions of *On the Radar* (when they were released online). Articles in this issue of the *International Journal for Quality in Health Care* include:

- Editorial: Providing meaning to quality assessment work (Anthony Staines)
- The relationship between healthcare workers’ attachment styles and patient outcomes: a systematic review (Chizu Mimura; Ian J Norman)
- Monitoring quality of care in acute myocardial infarction patients using retrospective registry data (Giovanni Veronesi; Antonella Zambon; John F Beltrame; Francesco Gianfagna; Giovanni Corrao; Marco M Ferrario)
- Quality of care and clinical outcomes of chronic obstructive pulmonary disease in patients with schizophrenia. A Danish nationwide study (Mette Jørgensen; Jan Mainz; Peter Lange; Søren Paaske Johnsen)
- Hospitalization from the patient perspective: a data linkage study of adults in Australia (Reema Harrison; Merrilyn Walton; Patrick Kelly; Elizabeth Manias; Christine Jorm; Jennifer Smith-Merry; Rick Iedema; Karen Luxford; Amalie Dyda)
- A comprehensive framework identifying readmission risk factors using the CHAID algorithm: a prospective cohort study (Sidika Kaya; Gulay Sain Guven; Seda Aydan; Onur Toka)
- Decreasing triage time: effects of implementing a step-wise ESI algorithm in an EHR† (Stephen Villa; Ellen J Weber; Steven Polevoi; Christopher Fee; Andrew Maruoka; Tina Quon)
- Consecutive cycles of hospital accreditation: Persistent low compliance associated with higher mortality and longer length of stay (Anne Mette Falstie-Jensen; Søren Bie Bogh; Søren Paaske Johnsen)
- Nicotine addiction management following surgery: a quality improvement approach in the post anesthesia care unit (Barry A Finegan; Daniel Roblin; Fadi Hammal)
- A quality improvement project to increase self-administration of medicines in an acute hospital (S Garfield; H Bell; C Nathan; S Randall; F Husson; C Boucher; A Taylor; J Lloyd; A Backhouse; I Ritchie; B D Franklin)
- Recommendations from the Salzburg Global Seminar on Rethinking Care Toward the End of Life (Lauren R Bangerter; Joan M Griffin; Arielle Eagan; Manish Mishra; Angela Lunde; Véronique Roger; A Mulley; J Lotherington)

Notes
A new issue of *Pediatric Quality & Safety* has been published. Articles in this issue of *Pediatric Quality & Safety* include:

- Impact of a Daily PICU Rounding Checklist on Urinary Catheter Utilization and Infection (Benjamin I Siegel, Janet Figueroa, Jana A Stockwell)
- Shortened Taper Duration after Implementation of a Standardized Protocol for Iatrogenic Benzodiazepine and Opioid Withdrawal in Pediatric Patients: Results of a Cohort Study (Jane M Vipond, Amy L Heiberger, Paul A Thompson, Jody N Huber)
- Evaluating the Impact of a Feeding Protocol in Neonates before and after Biventricular Cardiac Surgery (Jamie Furlong-Dillard, Alaina Neary, Jennifer Marietta, Courtney Jones, Grace Jeffers, Lindsey Gakenheimer, Michael Puchalski, Aaron Eckauser, Claudia Delgado-Corcoran)
- Improving Wait Time for Patients in a Pediatric Echocardiography Laboratory - a Quality Improvement Project (Anitha Parthiban, Ashley Warta, Jennifer A Marshall, Kimberly J Reid, Keith Mann, Girish Shirali, T Swanson)
- Assessing Barriers to Uveitis Screening in Patients with Juvenile Idiopathic Arthritis Through Semi-Structured Interviews (Laura R Ballenger, Stacy P Ardonin, Kyla D Driet)
- Using a Pediatric Trigger Tool to Estimate Total Harm Burden Hospital-acquired Conditions Represent (David C Stockwell, Christopher P Landrigan, Mark A Schuster, Darren Klugman, Hema Bisarya, David C Classen, Zoele B Dizon, Matt Hall, Matthew Wood, Paul J Sharek)
- Improvement Science Takes Advantage of Methods beyond the Randomized Controlled Trial (Thomas Bartman, Darren A DeWalt, David P Johnson, David R Mehr, Asha S Payne, Lloyd P Provost)

A new issue of *Australian Journal of Primary Health* has been published. Articles in this issue of *Australian Journal of Primary Health* include:

- Consumer engagement critical to success in an Australian research project: reflections from those involved (Anneliese J Synnot, Catherine L Cherry, Michael P Summers, Rwth Stuckey, C A Milne, D B Lowe and S J Hill)
- Critical reflection: a general practice support group experience (Sophia Samuel and Heather Thompson)
- Partners in Recovery: paving the way for the National Disability Insurance Scheme (Victoria Stewart, Maddy Slattery, H Roennfeldt and A J Wheeler)
- The role of community mental health services in supporting oral health outcomes among consumers (Rebecca Meldrum, Hillary Ho and Julie Satur)
- Assessing the value of rural community health services (Jane Farmer, Hilary Davis, Irene Blackberry and Tracy de Cotta)
- Community-identified recommendations to enhance cancer survivorship for Aboriginal and Torres Strait Islander people (Judith A Meiklejohn, Brian...
<table>
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<th>Authors</th>
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<tr>
<td>Arley, Ross Bailie, Jon Adams, Gail Garvey, Jennifer H Martin, Euan T Walpole and Patricia C Valery</td>
<td>Barriers and enablers to postpartum contraception among Aboriginal Australian women: factors influencing contraceptive decisions (Sarah James, Maree Toombs and Wendy Brodribb)</td>
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<td>Formative research to promote the Get Healthy Information and Coaching Service (GHS) in the Australian-Chinese community (Leonie Cranney, Li Ming Wen, Huilan Xu, Nancy Tam, Anna Whelan, Myna Hua and N Ahmed)</td>
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<td>Healthcare resource utilisation by patients with coronary heart disease receiving a lifestyle-focused text message support program: an analysis from the TEXT ME study (Jay Thakkar, Julie Redfern, Ehsan Khan, Emily Atkins, Jeffrey Ha, Kha Vo, Aravinda Thiagalingam and Clara K. Chow)</td>
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<td>Stakeholder perspectives about general practice pharmacists in the Australian Capital Territory: a qualitative pilot study (Louise S Deeks, Sam Kosari, Mark Naunton, Gabrielle Cooper, Julie Porritt, Rachel Davey, Paresh Dawda, John Goss and Gregory Kyle)</td>
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<td>Australian pharmacists’ knowledge of the efficacy and safety of complementary medicines (Freya Waddington, Mark Naunton, Greg Kyle, Gabrielle O'Kane, Gabrielle Cooper and Jackson Thomas)</td>
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<td>Screening and diagnosis of chronic kidney disease in people with type 2 diabetes attending Australian general practice (Jo-Anne E. Manski-Nankervis, Sharmala Thuraisingam, Phyllis Lau, Irene Blackberry, Janet K Sluggett, Jenni Ilomaki, J Simon Bell and John Furler)</td>
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**Journal of Patient Experience**  
Volume: 5, Number: 2 (June 2018)  
URL: [http://journals.sagepub.com/toc/jpxa/5/2](http://journals.sagepub.com/toc/jpxa/5/2)  

A new issue of *Journal of Patient Experience* has been published. Articles in this issue of *Journal of Patient Experience* include:

- Treatment Collaboration When the Stakes Are High: Ethnographically Studying Family-Centered Care in an Outpatient Pediatric Specialty Clinic (Georgia Michalopoulou, Sheryllyn Briller, Kimberly Compton Katzer, Kaitlin C Muklewicz, Julia Wasiluk, B Crider, S Myers-Schim, and E Secord)
- Collaboration and Outside-the-Box Thinking to Overcome Training-Related Challenges for Including Patient Stakeholders as Data Collectors in a Patient-Engaged Research Project (Janet Page-Reeves, Lidia Regino, Hannah Cole McGrew, Maria Tellez, Blanca Pedigo, Amy Overby, Abigail Cunningham, Susan Tigert, and Mark Burge)
- A Lifesaving View of Vascularized Composite Allotransplantation: Patient Experience of Social Death Before and After Face, Hand, and Larynx Transplant (Katrina A Bramstedt)
- Emergency Department Patient Experience: A Systematic Review of the Literature (Jonathan D Sonis, Emily I. Aaronson, Rebecca Y Lee, Lisa L Philpotts, and Benjamin A White)
- Veteran Patient Perspectives and Experiences During Implementation of a Patient-Centered Medical Home Model (Anaís Tuepker, Summer Newell, Christina Nicolaïdis, Marie-Elena Reyes, Maria Carolina González-Prats, Eleni}

**Notes**  
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<th><strong>International Journal for Quality in Health Care online first articles</strong></th>
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<td>• Characteristics and outcomes of emergency <strong>interhospital transfers from subacute to acute care for clinical deterioration</strong> (Julie Considine; Maryann Street; Tracey Bucknall; Helen Rawson; Anastasia F Hutchison; Trisha Dunning; Mari Botti; Maxine M Duke; Mohammadreza Mohebbi; Alison M Hutchinson)</td>
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<td>• The <strong>quality and safety culture in general hospitals</strong>: patients’, physicians’ and nurses’ evaluation of its effect on patient satisfaction (Ilya Kagan; Nurit Porat; Sivia Barnoy)</td>
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<td>• <strong>Sepsis now a priority</strong>: a quality improvement initiative for early sepsis recognition and care (Christine M McDonald; Sarah West; David Dushenski; Stephen E Lapinsky; Christine Soong; Kate van den Broek; Melanie Ashby; Gillian Wilde-Friel; Carrie Kan; Mark McIntyre; Andrew Morris)</td>
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<td>• Discrepancy between the <strong>European clinical guidelines and myocardial revascularization</strong> in patients with stable coronary artery disease in Russia (Anton R Kiselev; Alexey S Korotin; Olga M Posnenkova; Yulia V Popova; Mikhail D Prokhorov; Vladimir I Gridnev)</td>
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<td>• <strong>Life after sepsis</strong>: an international survey of survivors to understand the post-sepsis syndrome (Cynthia Y Huang; Ron Daniels; Angie Lembo; Christiane Hartog; Jim O’Brien; Thomas Heymann; Konrad Reinhart; H Bryant Nguyen; Sepsis Survivors Engagement Project (SSEP))</td>
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<td>• <strong>Adverse events in a Tunisian hospital</strong>: results of a retrospective cohort study (Mondher Letaief; Sana El Mhamdi; Riham El-Asady; Sameen Siddiqi; Ahmed Abdullatif)</td>
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<td>• Application of the <strong>Six Sigma</strong> concept for <strong>quality assessment</strong> of different strategies in <strong>DBS surgery</strong> (Witold H Polanski; K Daniel Martin; Swen)</td>
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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 reviews or updates are:

- NICE Guideline NG97 Dementia: assessment, management and support for people living with dementia and their carers https://www.nice.org.uk/guidance/ng97

[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:

- Sodium and Potassium Intake: Effects on Chronic Disease Outcomes and Risks https://effectivehealthcare.ahrq.gov/topics/sodium-potassium/final-report-2018

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