quality, adverse events, reporting and standards

- Clinical Practice Guidelines Portal
- Quality use of Medicines in Australian Hospitals
- Australian Commission on Safety and Quality Health Care - safe ePrescribing and electronic medication management (EMM)
- Australian National Inpatient Medication Chart (NIMC)
- NEHTA - National E-Health Transition Authority
    - NEHTA - Clinical Knowledge Manager - development of standardised data for eHealth systems
- Australian Council on Healthcare Standards Clinical Indicator Program
- National Guideline Clearing House - initiative of the Agency for Healthcare Research and Quality, and the Department of Health and Human Services in the United States
- National Institue for Health and Clinical Excellence United Kingdom
- The Scottish Intercollegiate Guidelines Network (SIGN)
- Coroner's newsletter - Coronial Communique
- Agency for Healthcare Research & Quality (United States)
- Australian Emergency Medicine Events Register (EMER)
- Aust Fed Govt review of health 2017
- Vic Gov health incident and clinical risk reporting policy and Incident Severity Rating (ISR)
    - ISR rating depends upon:
        - degree of impact
        - level of care
        - treatment required
    - **ISR 1:** the most severe incident, requires notification within 3 days to Govt Sentinel Event Program, and may require a RCA to be concluded and reported within 60 days
    - **ISR 2:** less severe; requires in depth case review by 2 people and reported to hospital's Clinical Governance C'tee
    - **ISR 3:** minimal actual harm
    - **ISR 4:** near-miss
    - ISR 3&4 investigations to be commenced within 2 business days and completed or closed within 7 days
    - ISR 1&2 investigations to be reviewed ASAP and investigation completed within 30 days

do we measure and document too much?

- NY Times 2016: How Measurement Fails Doctors and Teachers