


# RISK WATCH

Selected research, publications, and resources to promote evidence-informed risk management in Canadian healthcare organizations. Prepared by Healthcare Risk Management staff at the Healthcare Insurance Reciprocal of Canada (HIROC). Titles with an open lock icon  indicate that a publication is open access. For all others a subscription or library access is required; the librarian at your organization may be able to assist you. Please contact [riskmanagement@hiroc.com](mailto:riskmanagement@hiroc.com) for assistance if required.

## COVID-19 Updates on HIROC.com

For information and resources related to COVID-19, please visit HIROC.com to access our [COVID-19 Updates page](#). For a Q&A of Subscriber questions, log in and select COVID-19: Your Questions Answered from the Member Portal Links dropdown.



**Anthony Soung Yee**

## *Editor's note*

The December 2023 issue of Risk Watch includes articles on four areas: maternal neonatal care, COVID-19 emergency response planning, healthcare human resources and workplace violence.

On maternal/neonatal issues, Reszel et al. investigated, through a qualitative study, maternal-newborn hospital teams' approaches to implementing practice changes. Le et al. conducted a systematic review to examine the current tools available to assess partner post-partum depression.

On the topic of COVID-19 emergency response planning, we have Canadian articles from Hawke et al. investigating the impacts of long COVID, and Poonai et al. evaluating pandemic-related changes in health care use for suicidal ideation, self-poisoning and self-harm among adolescents in Canada.

Articles on healthcare human resources include articles from Crea-Arsenio et al. investigating study investigating trends in the Internationally Educated Nurses (IENs) workforce and policies to address the nursing shortage in Ontario, and from McLeod et al. investigating health care utilization and outcomes of patients who used virtual urgent care compared with similar patients who had an in-person emergency department visit.

On the topic of workplace violence, Zhang et al. conducted a meta analysis of workplace violence during the COVID-19 pandemic showing an increased in verbal, physical or emotional abuse towards healthcare workers. Fricke et al. conducted a scoping review which revealed common strategies adopted by healthcare organizations to prevent and/or manage workplace violence.

You will also find a collection of resources, including an article from Canadian Medical Association Journal on the proliferation of cyber attacks on Canadian health information systems, and two resources from Healthcare Excellence Canada on policy guidance for emergency department closures and a patient engagement framework, among others.

If you have feedback about this quarterly edition of Risk Watch, please send them to me at [asoungyee@hiroc.com](mailto:asoungyee@hiroc.com)

# RISK WATCH

## MATERNAL NEONATAL

### [Planning and implementing practice changes in Ontario maternal-newborn hospital units: a secondary qualitative analysis](#)

Reszel J, Daub O, Dunn SI, Cassidy CE, Hafizi K, Lightfoot M, Pervez D, Quosdorf A, Wood A, Graham ID. *BMC Pregnancy Childbirth*. 2023 Oct 17;23(1):735. doi: 10.1186/s12884-023-06042-1. PMID: 37848826; PMCID: PMC10583424.

Canadian study on maternal-newborn hospital teams' approaches to implementing practice changes. The study aimed to identify what implementation steps teams take (or not) and identify strengths and potential areas or improvement based on best practices in implementation science. A supplementary qualitative secondary analysis of 22 interviews completed in 2014–2015 with maternal-newborn nursing leaders in Ontario, Canada was conducted. Authors identified variability across the 22 hospitals in the implementation steps taken, observed strengths and identified areas where further support may be needed. Authors suggest future work is needed to create opportunities and resources to support maternal-newborn healthcare providers and leaders to apply principles and tools from implementation science to their practice change initiatives.

### [Screening for partner postpartum depression: A systematic review](#)

Le J, Alhusen J, Dreisbach C. *MCN Am J Matern Child Nurs*. 2023 May-Jun 01;48(3):142-150. doi: 10.1097/NMC.0000000000000907. PMID: 36744867.

A systematic review was conducted to examine the current tools available to assess partner post-partum depression. Seventeen studies met inclusion criteria. The authors suggested routine screening of partners for postpartum depression should be recommended as part of stand care, and that nurses are critical liaisons for assessing risk and connecting relevant and timely resources to birthing people and their partners. Identifying the available screening tools may help to avoid adverse clinical outcomes associated with increased symptom severity and burden.

## COVID-19 EMERGENCY RESPONSE PLANNING

### [Swept under the carpet: a qualitative study of patient perspectives on Long COVID, treatments, services, and mental health](#)

Hawke LD, Nguyen ATP, Sheikhan NY, Strudwick G, Rossell SL, Soklaridis S, Kloiber S, Shields R, Ski CF, Thompson DR, Castle D. *BMC Health Serv Res*. 2023 Oct 11;23(1):1088. doi: 10.1186/s12913-023-10091-9. PMID: 37821939; PMCID: PMC10568931.

Canadian study on the impacts of long COVID, which refers to long-term physical symptoms after an acute COVID-19 infection. The study by CAMH aimed to improve our understanding of the Long COVID treatment, service experiences and preferences of individuals experiencing mental health and quality of life impacts of Long COVID. Focus group discussions revealed systemic barriers to accessing care, and challenges navigating the unknowns of Long COVID which to lead to negative impacts on patient emotional well-being and recovery. The study authors recommend developing Long COVID-specific knowledge and services, enhancing support for financial well-being, and improving awareness and the public representation of Long COVID.

# RISK WATCH

## [Emergency department visits and hospital admissions for suicidal ideation, self-poisoning and self-harm among adolescents in Canada during the COVID-19 pandemic](#)

Poonai N, Freedman SB, Newton AS, Sawyer S, Gaucher N, Ali S, Wright B, Miller MR, Mater A, Fitzpatrick E, Jabbour M, Zemek R, Eltorki M, Doan Q; CMAJ. 2023 Sep 18;195(36):E1221-E1230. doi: 10.1503/cmaj.220507. PMID: 37722746; PMCID: PMC10506508.

Canadian study seeking to evaluate pandemic-related changes in health care use for suicidal ideation, self-poisoning and self-harm among adolescents in Canada. Data from the Canadian Institute for Health Information on emergency department visits and hospital admissions from April 2015 to March 2022 among adolescents aged 10-18 years in Canada revealed that the average quarterly percentage of emergency department visits for suicidal ideation, self-poisoning and self-harm relative to all-cause emergency department visits was 2.30% during the prepandemic period and 3.52% during the pandemic period. The results showed a significant increasing increase among females aged 10-14 years and 15-18 years, which underscore the importance of understanding drivers behind health care use for mental health and the need to promote public health policies and intervention strategies.

## HEALTHCARE HUMAN RESOURCES

## [The changing profile of the internationally educated nurse workforce: Post-pandemic implications for health human resource planning](#)

Crea-Arsenio M, Baumann A, Blythe J. *Healthc Manage Forum*. 2023 Nov;36(6):388-392. doi: 10.1177/08404704231198026. Epub 2023 Aug 31. PMID: 37649432; PMCID: PMC10604379.

Canadian study investigating trends in the Internationally Educated Nurses (IENs) workforce and policies to address the nursing shortage in Ontario. An analysis of the demographic and employment characteristics of IENs over a 10-year period from 2013 to 2022 found that twice as many IENs (28%) as Domestically Educated Nurses (DENs) (14%) are employed in the long-term care (LTC) sector. Study findings also indicate that involuntary part-time work is an issue, with almost half of IENs who were employed in part-time nursing positions would prefer full-time work. The disproportionate number of IENs working in the LTC sector emphasizes their underutilization and highlights the need for policies to further integrate IENs into the broader Canadian health system.

# RISK WATCH

## [Health care utilization and outcomes of patients seen by virtual urgent care versus in-person emergency department care](#)

McLeod SL, Tarride JE, Mondoux S, Paterson JM, Plumtre L, Borgundvaag E, Dainty KN, McCarron J, Ovens H, Hall JN. *CMAJ*. 2023 Nov 6;195(43):E1463-E1474. doi: 10.1503/cmaj.230492. PMID: 37931947; PMCID: PMC10627570.

Canadian study seeking to evaluate subsequent health care utilization and outcomes of patients who used virtual urgent care (VUC) compared with similar patients who had an in-person emergency department visit. Analysis of 19,595 patient encounters in Ontario found that patients who were referred promptly to the emergency department (ED) by a VUC provider had rates of health care utilization similar to those of patients who presented in-person to the ED. Furthermore, patients seen by a VUC provider with no further referral were more likely to have an in-person ED visit with a longer stay than patients who presented to the ED in-person and were discharged home. The authors found that the overall impact of the provincial VUC pilot program on subsequent health care utilization was not significant.

## WORKPLACE VIOLENCE

### [Workplace violence against healthcare workers during the COVID-19 pandemic: a systematic review and meta-analysis](#)

Zhang S, Zhao Z, Zhang H, Zhu Y, Xi Z, Xiang K. *Environ Sci Pollut Res Int*. 2023 Jun;30(30):74838-74852. doi: 10.1007/s11356-023-27317-2. Epub 2023 May 20. PMID: 37209334; PMCID: PMC10199297.

Meta analysis of workplace violence during the COVID-19 pandemic. It was found that there has been an increase in medical staff who experienced some form of WPV, whether it was verbal, physical or emotional. Increases in physical and verbal violence were observed from the middle to the end of the pandemic, as a higher rate of physical violence among nurses compared to physicians, though the rate of verbal violence was comparable.

### [Workplace Violence in Healthcare Settings: A Scoping Review of Guidelines and Systematic Reviews](#)

Fricke J, Siddique SM, Douma C, Ladak A, Burchill CN, Greysen R, Mull NK. *Trauma Violence Abuse*. 2023 Dec;24(5):3363-3383. doi: 10.1177/15248380221126476. Epub 2022 Nov 6. PMID: 36341578.

Scoping review to identify and summarize evidence on strategies to prevent and/or manage workplace violence in healthcare settings. The searches were limited to evidence-based clinical practice guidelines and systematic reviews published between 2015 and 2021. Results found that a number of common strategies including education and training, post-incident debriefing, multidisciplinary rapid response teams, and environmental modifications. However, the strength of evidence and certainty of conclusions were limited across reviews. The authors indicate that a strong leadership that cultivates and enforces a culture of inclusivity, support, and respect is a prerequisite for a successful workplace violence prevention program.

# RISK WATCH

## OTHER RESOURCES OF INTEREST

- [Cyberattacks on Canadian health information systems](#) (*Canadian Medical Association Journal, November 2023*)

Article on the proliferation of cyber attacks on Canadian health information systems, stressing a proactive approach from health organizations, practices and individual clinicians to improve their cybersecurity posture.

- [Policy Guidance on Emergency Department Closures in Northern, Rural and Remote Regions](#) (*Healthcare Excellence Canada, June 2023*).

Report developed by HEC synthesizing opportunities for responsive ways to deliver care to residents of northern, rural and remote communities for improving emergency department care and addressing closures.

- [Patient Engagement Framework](#) (*Healthcare Excellence Canada, October 2023*).

The Healthcare Excellence Canada (HEC) Patient Engagement Framework outlines how to embed patient, caregiver and community perspectives into programming, activities, and initiatives. It was developed through engagement with patient partners and staff at HEC.

- [List of Confused Drug Names](#) (*ISMP, July 2023*).

Updated list of confused drug names, which includes both the FDA-approved and the ISMP-recommended tall man (mixed case) letters. The updated list contains an additional [80 pairs](#). The list is available for download with a free registration to the ISMP website.

- [“Copy and Paste” Notes and Autopopulated Text in the Electronic Health Records](#) (*Patient Safety Network, October 2023*).

Case studies with an article illustrating electronic health record (EHR) errors that can occur with utilizing the “copy and paste” function. The author lists some risk management strategies to help mitigate the risk of EHR errors.