January 2018

Latest Evidence

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Discharge Planning

Nurse-managed transitional beds as a method of increasing geographic placement of an academic inpatient service.
[Team-based care can be challenging when the patients of a consultant are scattered across various hospital units. We used transition beds—beds dedicated for patients moving onto or out of the unit in order to make it easier to control patient flow. We saw an immediate increase in our average census from ~8 to ~15 patients as well as a major shift of the median admission time to 3.5 hours earlier in the day. Unfortunately, it was an added burden to our already stressed charge nurses.] Freely available online

The impact of seven-day working for patients and staff in an acute physical older adults unit: A service evaluation.
[Statement of context The occupational therapy service within an acute unit for complex older patients began operating over seven days, in response to the government strategy for the National Health Service to improve patient outcomes. This evaluation shares findings on patient outcomes in the acute unit and a qualitative review of staff perspectives of the changes. ] Freely available online

An introduction to psychodynamic counselling.
[Latest edition of this respected introduction to psychodynamic counselling. This new edition includes a new chapter on developing confidence in working with social difference and diversity, discussion of the different phases of counselling work and examination of the role of organisational settings in therapists' everyday practice. ]

**Available with appropriate registration or membership**

**Cognitive psychology: a student's handbook.**
Eysenck MW & Keane MT. 7th ed.. Psychology Press. 2015. Library Shelf Location: WLM 400 EYS.
[A leading undergraduate textbook in the field, this book offers comprehensive coverage of all key areas of cognitive psychology. The book is designed to help students develop a thorough understanding of the fundamentals of cognitive psychology, providing them with detailed knowledge of the latest advances in the field. Includes extended coverage of cognitive neuroscience, additional content on computational cognitive science and new case studies.]

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**Health promotion & wellbeing in people with mental health problems.**
Bradshaw T & Mairs H. SAGE Publications. 2017. Library Shelf Location: WM 100.1 HEA.
[This practical guide for nursing students and other healthcare professionals helps them to promote and improve the health and well-being of those with mental health problems by looking closely at disparities that people with mental health problems face in relation to their physical health. ]

**Available with appropriate registration or membership**

**In therapy together: family therapy as a dialogue.**
Roper P. Palgrave Macmillan. 2017. Library Shelf Location: WM 432 ROB.
[Moving away from the medically focused problem-diagnosis-treatment model of psychotherapy, this new text]
conceptualises family therapy as a dialogue between living, breathing people. It emphasises the mutuality and relational context that serves as the backdrop of a therapeutic encounter which practitioners will need to navigate carefully. Contains case studies, examination of key theories and concepts including the different schools of narrative-oriented therapies. ]

**Available with appropriate registration or membership**

**Achieving Hospital-wide Patient Flow.**
Institute for Healthcare Improvement; 2017.
http://www.ihi.org/resources/Pages/IHIWhitePapers/Achieving-Hospital-wide-Patient-Flow.aspx

[IHI White Paper. The culmination of approximately two decades of IHI’s research, innovation, and learning about hospital-wide patient flow, this white paper guides leaders and quality improvement teams through an in-depth examination of a systems view of patient flow, theories for improvement, and high-leverage strategies and interventions to achieve hospital-wide patient flow.]

*Freely available online*

**Homerton QTc Newsletter– Quality Teaching over coffee**
Homerton; 2017.

[This month we get an introduction to the members of the Quality and Risk Team and there is an update on where we are at with regards to incident reporting. We cover some recent warnings that have been highlighted and what to do if you are faced by a corrosive attack (acid attack). Also this month we continue the ‘Risk Alert’ – an area that poses as a potential risk to all of us, no matter where we work.]

*Freely available online*
**A day in the life of a paramedic advanced clinical practitioner in primary care.**
[First person account of experiences working as a paramedic in an inner-city GP practice while training to be an advanced clinical practitioner. The author demonstrates how paramedics can complement and extend skills of a primary care team. Accounts of actual patient encounters demonstrate paramedic role is evolving beyond traditional ambulance service/emergency care roles. Also mentions the role of Physicians Associates and authors role in training PA students.]
*Available with an NHS OpenAthens password for eligible users*

**Better patient safety: implementing exploration and exploitation learning in daily medical practice.**
[Current medical daily practice relies on guidelines, protocols and procedures (GPPs), which require exploitation. However, diagnosis, treatment, risk management and process improvements require exploration. Despite the importance of timely leaping between exploration and exploitation, in some events, medical teams fail to make the appropriate leap. This study tested a new approach including (1) a ‘thinking protocol’ (2) a GPP that encouraged leaping from exploration to exploitation.]
*Freely available online*

**Determining the optimal place and time for procedural education. [Editorial]**
Pusic MV. BMJ Quality & Safety 2017;26(11):863 - 865. ["Just-in-time performance support as an educational process. In an apprenticeship model, for a trainee who is developing their skills, situating them in the workplace has distinct advantages. Starting from legitimate peripheral participation, the developing clinician is moulded by social interaction and collaboration while they learn from the spectrum of patients that make up a given clinical population..."]

Freely available online

**Emotion management and occupational therapy student learning on placement: A post-structuralist exploration.**

Healey J. British Journal of Occupational Therapy 2017;80(11):676-683. [This doctoral research explored the emotional aspects of placement learning with a group of seven third-year occupational therapy students, using a post-structural theoretical framework and methodology. A creative arts–based qualitative methodology was employed. The research raises questions for the [OT] profession about the hidden emotional aspects of our practice and proposes an alternative view of emotion management to that which is implied in the concept of emotional intelligence.]

Contact the library for a copy of this article

**Just-in-time simulation-based training. [Editorial]**

Aggarwal R. BMJ Quality & Safety 2017;26(11):866 - 868. [Simulation-based training and assessment in healthcare are now commonplace in the majority of industrialised nations. The role of standardised patients, high-fidelity and low-fidelity manikins, synthetic, animal and virtual reality platforms, and simulation suites, are accepted, and integrated into training curricula in medical and nursing schools, and residency programmes. ]

Freely available online

**Speaking up about traditional and professionalism-related**
patient safety threats: a national survey of interns and residents.
[Objective: Compare interns' and residents' experiences, attitudes and factors associated with speaking up about traditional versus professionalism-related safety threats.]
Available with an NHS OpenAthens password for eligible users

Speaking up against unsafe unprofessional behaviours: the difficulty in knowing when and how. [Editorial]
[Residents now undergo formal training about the importance of contributing to a culture of safety by speaking up to avoid errors or harm, but still face difficulties enacting these behaviours in practice. In this issue of the journal, Martinez et al have attempted to tease out differences in speaking-out behaviours between traditional and professionalism-related patient safety threats.]
Freely available online

The time has come to support occupational therapy scholarship once again.
[[Editorial] Jennifer Creek argues "Yes, the profession needs more high-quality research to build an evidence base for the effectiveness of our interventions, but we also have to address the chronic weakness of our knowledge base through scholarly activity. If we acknowledge that much of the anxiety about our professional role and identity stems from ignoring our 'weakness in a theoretical field' (...), then perhaps the tide will turn and theorising will once more become a valued occupation."]
Freely available online
**Competences: an education and training competence framework for administering medicines intravenously to children and young people.**
Royal College of Nursing (RCN); 2017.
[https://www.rcn.org.uk/professional-development/publications/pub-006302](https://www.rcn.org.uk/professional-development/publications/pub-006302)

[This education and training competence framework for administering medicines intravenously to children and young people was first published in 2005. It has been revised in 2017 to reflect a number of current political and professional issues and initiatives. The framework describes the theoretical and practical competences and overall indicative content for education and training programmes for administering medicines intravenously to children and young people.]

*Freely available online*

**Good intentions, good enough? A review of the experiences and outcomes of children and young people in residential special schools and colleges.**
Department for Education (DfE); 2017.

[An independent review from the Department for Education of the experiences and outcomes of children in residential special schools and colleges. This sets out how children and young people with special educational needs and disability (SEND) are currently supported in residential special schools and colleges and gives recommendations to support children, young people and their families to improve their experiences and outcomes. The government’s response is also available.]

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Freely available online

Finance and Procurement

A Simple Way to Involve Frontline Clinicians in Managing Costs.
[How can organizations engage clinical staff in improving value? By offering point-of-care tools to manage costs and increase efficiency. This article describes the building blocks of a value-management system in health care, using an approach developed by the Institute for Healthcare Improvement.]
Freely available online

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[A leading undergraduate textbook in the field, this book offers comprehensive coverage of all key areas of cognitive psychology. The book is designed to help students develop a thorough understanding of the fundamentals of cognitive psychology, providing them with detailed knowledge of the latest advances in the field. Includes extended coverage of cognitive neuroscience, additional content on computational cognitive science and new case studies.]
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[This popular book is written by leading experts in the field and covers all the key aspects of healthcare management. Written with healthcare managers, professionals and students in mind, it provides an accessible and evidence-based guide to healthcare systems, services, organizations and management.]

Available with appropriate registration or membership

A two-way street: What can CCGs teach us about accountability in STPs?
Nuffield Trust; 2017.
https://www.nuffieldtrust.org.uk/research/a-two-way-street
[A report exploring the challenges and opportunities presented by sustainability and transformation partnerships (STPs) for accountability in the NHS. The report explores how commissioners and providers respond to different approaches to accountability and performance management. It then considers the implications of this learning from current and past experience for the future development of STPs, accountable care organisations and accountable care systems.]

Freely available online

General Pharmaceutical Services: England 2007/08 to 2016/17 [National Statistic].
NHS Digital; 2017.
https://digital.nhs.uk/catalogue/PUB30135

Freely available online
How will our future relationship with the EU shape the NHS?
Nuffield Trust; 2017.
https://www.nuffieldtrust.org.uk/research/brexit-relationship-eu-shape-nhs
[What effect will the Brexit negotiations have on the way the NHS operates in future? This briefing looks at five key areas where the agreements that are made with the European Union will shape health and social care over the coming decades. ]
Freely available online

King’s Fund Quarterly Monitoring Report: How is the NHS performing? November 2017
The King’s Fund; 2017.
[This is the 24th report and aims to take stock of what has happened over the past few months and to assess the state of the health and care system. It provides an update on how the NHS is coping as it continues to grapple with productivity and reform challenges under continued financial pressure. Performance against a number of key indicators is worse than at this time last year, and finances remain precarious despite an emergency funding injection.]
Freely available online

NHS Digital; 2017.
https://digital.nhs.uk/catalogue/PUB30152
[This report presents summary figures relating to medicine costs at list price in hospitals and in the community in England for 2016/17, and the recent growth in use. The report aims to show the relative use of medicines in hospital and in primary care and the wider health economy. It also includes a section looking at the costs at list price of medicines positively]
appraised by NICE. Many of these are used mainly or exclusively in hospitals.]

Freely available online

The Autumn Budget: joint statement on health and social care.
Nuffield Trust; 2017.
https://www.nuffieldtrust.org.uk/research/autumn-budget-2017
[Nuffield Trust, the Health Foundation and The King’s Fund are urging the government to address the critical state of health and social care in its forthcoming Autumn Budget. ]

Freely available online

Towards an effective NHS payment system: eight principles.
NHS Providers; 2017.
http://nhsproviders.org/towards-an-effective-nhs-payment-system
[The Health Foundation and NHS Providers have engaged NHS trusts to explore how the current payment system impacts on those providing care to patients by considering what works well, what problems they encounter, and how these problems could be addressed in a reformed payment system that supports new ways of delivering care.]

Freely available online

Vive la devolution: devolved public-services commissioning.
Reform; 2017.
http://www.reform.uk/publication/vive-la-devolution-devolved-public-services-commissioning/
[This report makes 10 recommendations for improving public services commissioning. It argues that commissioning of over £100 billion of public services spend, including 95 per cent of the NHS budget, could be devolved to around 38 regions and could deliver better outcomes at a lower cost.]

Freely available online
Leadership

Clinical leadership in paramedic services: a narrative synthesis.  
[This narrative synthesis critically examines the long-established North American Emergency Medical Services medical direction model and makes some comparisons with the UK inspired clinical governance approaches that are used to monitor and manage the quality and safety in several other Anglo-American paramedic services.]  
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Mind Tools; 2017.
[Whether you're preparing for your first management role, or you've been managing teams for years, there'll always be something new to learn, and existing skills to develop. In this article, you can explore 114 tools to help you to become an effective manager.]
Freely available online

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http://nhsproviders.org/resource-library/reports/accountable-care-the-art-of-the-possible
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[This report explores the factors that have helped organisations to launch a quality improvement strategy and sustain a focus on quality improvement. It identified three common themes for successfully launching a quality improvement strategy: having a clear rationale; ensuring staff are ready for change; understanding the implications for the organisation’s leadership team in terms of style and role. ]
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Freely available online

Mintzberg's Management Roles: Identifying the Roles Managers Play.
Mind Tools; 2017.
[As a manager, you probably fulfill many different roles every day. Management expert and professor Henry Mintzberg recognized this, and he argued that there are ten primary roles or behaviors that can be used to categorize a manager's different functions.]
Freely available online

People performance management toolkit: communications pack.
NHS Employers; 2017.

[Aimed at human resources and communications colleagues, this information pack provides guidance for encouraging people to talk performance using the people performance management toolkit.]

Freely available online

**There for us: A better future for the NHS workforce.**

NHS Providers; 2017.

http://nhsproviders.org/a-better-future-for-the-nhs-workforce

[A new report from NHS Providers provides a comprehensive overview of where the workforce challenges are greatest, how these have developed, and what needs to be done to address them.]

Freely available online

### Long Term Conditions

**[Articles] Clinical outcomes and cost-effectiveness of brief guided parent-delivered cognitive behavioural therapy and solution-focused brief therapy for treatment of childhood anxiety disorders: a randomised controlled trial.**


[Our findings show no evidence of clinical superiority of brief guided parent-delivered CBT. However, guided parent-delivered CBT is likely to be a cost-effective alternative to solution-focused brief therapy and might be considered as a first-line treatment for children with anxiety problems.]

Available with an NHS OpenAthens password for eligible users

**Antipsychotic polypharmacy prescribing and risk of**
hospital readmission.
Psychopharmacology 2017;October early view articles:First online.
[This open access study used data from the South London and Maudsley case register to determine if there was an association between those with serious mental illness being discharged on antipsychotic polypharmacy and risk of readmission into secondary mental health care. The results suggested that those discharged on polypharmacy were more likely to be readmitted within six months than those on monotherapy.]
Freely available online

Association of Blood Pressure Lowering With Mortality and Cardiovascular Disease Across Blood Pressure Levels: A Systematic Review and Meta-analysis.
[In this systematic review and meta-analysis, including 74 trials and more than 300 000 patients, treatment to lower blood pressure was associated with a reduced risk for death and cardiovascular disease if baseline systolic blood pressure was 140 mm Hg or above. Below 140 mm Hg, the treatment effect was neutral in primary preventive trials, but with possible benefit on nonfatal cardiovascular events in trials of patients with coronary heart disease.]
Available with an NHS OpenAthens password for eligible users

[Women with bipolar disorder may benefit from continuation of their medications during pregnancy, but there may be risks to the fetus associated with some of these medications. This article examines the evidence relating to the effect of bipolar
disorder and pharmacologic treatments for bipolar disorder on pregnancy outcomes.]

*Available with an NHS OpenAthens password for eligible users*

**Direct oral anticoagulants versus warfarin for preventing stroke and systemic embolic events among atrial fibrillation patients with chronic kidney disease.**
Kimachi M. *Cochrane Database of Systematic Reviews* 2017;(11):CD011373.
[Our findings indicate that DOAC are as likely as warfarin to prevent all strokes and systemic embolic events without increasing risk of major bleeding events among AF patients with kidney impairment.]
*Freely available online*

**Examining a new functional electrical stimulation therapy with people with severe upper extremity hemiparesis and chronic stroke: A feasibility study.**
[Upper extremity impairment post-stroke is common and results in decreased occupational engagement. For those with chronic stroke and severe hemiparesis, few treatment options are available. MyndMove™ is a functional electrical stimulation technology programmed to stimulate up to eight muscle groups in reach and grip patterns. A pre–post, cohort, feasibility study was conducted to inform the design of a randomized controlled trial examining the effectiveness of MyndMove™ therapy.]
*Contact the library for a copy of this article*

**How to approach psychotic symptoms in a non-specialist setting.**
Sami MB. *BMJ* 2017;359:j4752.
[Article highlights that identification of psychotic symptoms in non-specialist settings is key to initiating timely pathways to
care. It covers when to consider emerging psychosis, how to approach psychotic symptoms, risk-assessment, when to refer, and tests/investigations.

Available with an NHS OpenAthens password for eligible users

**Prebiotics for the prevention of allergies: A systematic review and meta-analysis of randomized controlled trials.**


[We performed a systematic review of studies assessing the effects of prebiotic supplementation with an intention to prevent the development of allergies.]

Available with an NHS OpenAthens password for eligible users


Spence SH. *Child and Adolescent Mental Health* 2017; doi: 10.1111/camh.12251.

[The assessment of youth anxiety should ideally include a multi-informant, multimethod approach, with measures tailored to the age of the child, and the purpose of the evaluation. There is now a sufficiently strong research base to enable clinicians and researchers to ensure that they select evidence-based instruments.]

Available with an NHS OpenAthens password for eligible users

**Should oral steroids be routinely supplied to prevent asthmatic relapse?**


[Literature review. Recent recommendations from the National Review of Asthma Deaths (NRAD) 2014 recognised the significant burden of associated morbidity among avoidable factors that commonly contribute towards asthma deaths.]

Available with an NHS OpenAthens password for eligible users
Virtual reality for stroke rehabilitation.
Laver KE. Cochrane Database of Systematic Reviews 2017;(11):CD008349.
[We found evidence that the use of virtual reality and interactive video gaming was not more beneficial than conventional therapy approaches in improving upper limb function. Virtual reality may be beneficial in improving upper limb function and activities of daily living function when used as an adjunct to usual care (to increase overall therapy time).]
Freely available online

Vitamin D supplementation for chronic liver diseases in adults.
[This review suggests that vitamin D has no beneficial or harmful effects on chronic liver diseases. However, there were too few trials on the individual diagnosis of chronic liver diseases and there were too few participants in the individual trials as well as in our meta-analysis. Therefore, neither benefits nor harms can be excluded.]
Freely available online

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**Dementia care at a glance.**
Jenkins C. John Wiley. 2016. Library Shelf Location: WT 155 JEN. [Intended for health and social care professionals, nurses and students but also useful for family members and voluntary workers needing information and guidance about dementia care. This book takes a holistic, person centred and interpersonal approach. It covers the common forms and manifestations of dementia, their causes and how to address them. Covers interventions, truncation, care planning, medication, therapy, leadership and ethical/legal issues. ] Available with appropriate registration or membership

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Bradshaw T & Mairs H. SAGE Publications. 2017. Library Shelf Location: WM 100.1 HEA. [This practical guide for nursing students and other healthcare professionals helps them to promote and improve the health and well-being of those with mental health problems by looking closely at disparities that people with mental health problems face in relation to their physical health. ] Available with appropriate registration or membership
**Bullying in childhood: cause or consequence of mental health problems?**
The Mental Elf; 2017.

[A recent study, which looks at the role of vulnerability and resilience in relation to mental health and bullying in childhood. It's #AntiBullyingWeek, so look out for lots of activity around this theme on social media.]
Freely available online

**Cancer treatment response may be affected by gut bacteria.**
NHS Choices - Behind The Headlines; 2017.

[The study involved looking at the gut bacteria of 249 people who'd received immunotherapy for different types of cancer, some of whom had also taken antibiotics. Researchers found gut bacteria differed between people who responded well to immunotherapy and those who didn't. People who had a positive response tended to have more of a certain bacteria called Akkermansia muciniphila.]
Freely available online

**Could a blood test in middle age predict dementia risk?**
NHS Choices - Behind The Headlines; 2017.

[Researchers in the US say people who have higher measures of inflammation in middle age are likely to have less brain tissue in some parts of their brain in older age. The differences in brain volume, seen on MRI scans, were also accompanied by small differences in performance on memory tests. But the study didn't find that people with raised inflammatory measures in middle age were more likely to get]
dementia, as it wasn't set up to directly measure dementia risk.

Freely available online

**Family involvement in acute mental health care.**
The Mental Elf; 2017.
[A recent collaborative conceptual review asks why and how families should get involved in acute mental health care. ]
Freely available online

**Mental ill-health among children of the new century.**
National Children’s Bureau and UCL Institute of Education; 2017.
https://www.ncb.org.uk/news-opinion/news-highlights/one-four-girls-depressed-age-14-new-study-reveals
[The briefing summarises the prevalence of mental health problems among children taking part in the Millennium Cohort Study and shows that while the majority of 3-14-year-olds in the UK are not suffering from mental ill-health, a substantial proportion experience significant difficulties.]
Freely available online

**Nutrient drink for Alzheimer's has disappointing result in trial.**
NHS Choices - Behind The Headlines; 2017.
[The trial investigated the effects of Fortasyn Connect – a patented mix of vitamins and minerals, found in the drink Souvenaid – on memory in individuals showing early signs of Alzheimer's disease. Overall, the study provides no evidence that this drink can prevent or slow the progress of dementia.]
Freely available online
Personal well-being networks for severe mental illness: the importance of being social.
The Mental Elf; 2017.
https://www.nationalelfservice.net/mental-health/schizophrenia/personal-well-being-networks-for-severe-mental-illness-the-importance-of-being-social/
[The University College London Mental Health Masters students summarise a recent exploratory study on personal well-being networks, social capital and severe mental illness.]
Freely available online

Some cancer patients may be at risk of PTSD.
NHS Choices - Behind The Headlines; 2017.
[BBC News reports that "a fifth of cancer patients experience post-traumatic stress disorder (PTSD)". This was based on a study of more than 400 people with cancer (any type) assessed at a single Malaysian hospital.]
Freely available online

Still no evidence brain training protects us against dementia.
NHS Choices - Behind The Headlines; 2017.
[Researchers looked at a group of people who had participated in a trial of three types of memory training game 10 years earlier. At the time, the study was designed to look at whether training improved aspects of memory and daily function, but the researchers wanted to see whether anyone in the study had gone on to develop dementia. Overall the findings were not that convincing.]
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Comparison of control charts for monitoring clinical performance using binary data.
[Background: Time series charts are increasingly used by clinical teams to monitor their performance, but statistical control charts are not widely used, partly due to uncertainty about which chart to use. Although there is a large literature on methods, there are few systematic comparisons of charts for detecting changes in rates of binary clinical performance data.]
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[Advice for trusts to ensure that their approach to job planning for allied health professionals (AHPs) is consistent with best practice.]
Freely available online

**Do Not Attempt Cardiopulmonary Resuscitation, Allow Natural Death (DNACPR) Policy.**
Brighton and Sussex University Hospitals NHS Trust (BSUH);2017.
[The purpose of the policy is to provide direction and guidance for the planning and implementation of high-quality and robust decisions related to DNACPR orders within BSUH. This policy]
also takes into consideration policies from surrounding areas to allow for transparency between services, effective communication of decisions and a joint approach to end of life care.]

*Only available via the Trust Intranet*

**Team Management - Start Here: Discover 114 Top Team Management Skills.**
Mind Tools; 2017.

[Whether you're preparing for your first management role, or you've been managing teams for years, there'll always be something new to learn, and existing skills to develop. In this article, you can explore 114 tools to help you to become an effective manager.]

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Freely available online

Measuring Outcomes and Performances

Investigating the organisational factors associated with variation in clinical productivity in community pharmacies: a mixed-methods study.
[Objectives: To inform the commissioning of community pharmacy services by (1) exploring variation in clinical productivity (levels of service delivery and service quality) in pharmacies, (2) identifying the organisational factors associated with this variation and (3) developing a toolkit for commissioners.]
Freely available online

Comparison of control charts for monitoring clinical performance using binary data.
[Background: Time series charts are increasingly used by clinical teams to monitor their performance, but statistical control charts are not widely used, partly due to uncertainty about which chart to use. Although there is a large literature
on methods, there are few systematic comparisons of charts for detecting changes in rates of binary clinical performance data.]

Available with an NHS OpenAthens password for eligible users

**Determining the optimal place and time for procedural education. [Editorial]**
["Just-in-time performance support as an educational process. In an apprenticeship model, for a trainee who is developing their skills, situating them in the workplace has distinct advantages. Starting from legitimate peripheral participation, the developing clinician is moulded by social interaction and collaboration while they learn from the spectrum of patients that make up a given clinical population..."]

Freely available online

**From research to practice: results of 7300 mortality retrospective case record reviews in four acute hospitals in the North-East of England.**
[Cases were reviewed by consultant reviewers with support from other disciplines and graded in terms of quality of care and preventability of deaths. Results were compared with the estimates published in the Preventable Incidents, Survival and Mortality (PRISM) studies. Inhouse reviews produce lower estimates of preventable deaths than published results using external clinicians. RCRR conducted internally is a feasible mechanism for delivering quantitative analysis.]

Freely available online

**How to attribute causality in quality improvement: lessons from epidemiology. [Viewpoint]**
[Background: Quality improvement and implementation (QI&I)
initiatives face critical challenges in an era of evidence-based, value-driven patient care. Whether front-line staff, large organisations or government bodies design and run QI&I, there is increasing need to demonstrate impact to justify investment of time and resources in implementing and scaling up an intervention...

Available with an NHS OpenAthens password for eligible users

Improving the patient booking service to reduce the number of missed appointments at East London NHS Foundation Trust Community Musculoskeletal Physiotherapy Service.
[We aimed to reduce the percentage of missed appointments within the Community MSK Service. Patient complaints suggested there were issues with the patient booking service. The changes introduced included text message reminders. Non-attendance of newly referred patients reduced by 43.35%. Non-attendance of follow-up patients reduced by 44.14%). By listening to the opinions of service users, it was possible to improve the patient booking system and the flexibility of appointments.]

Freely available online

Just-in-time simulation-based training. [Editorial]
[Simulation-based training and assessment in healthcare are now commonplace in the majority of industrialised nations. The role of standardised patients, high-fidelity and low-fidelity manikins, synthetic, animal and virtual reality platforms, and simulation suites, are accepted, and integrated into training curricula in medical and nursing schools, and residency programmes. ]

Freely available online
NICE: Advanced paramedics to ease pressure on A&E?
[New draft Guidance from NICE suggests the NHS provide increased numbers of Advanced Paramedic Practitioners to assess and manage lower acuity presentations in the community, reducing pressure on emergency departments. Evidence from three studies was considered. Although the results from these studies are positive, the author expresses concern about their size and applicability. Additional funding and regulation would be needed for the guidelines to be put into practice.]
Available with an NHS OpenAthens password for eligible users

Nurse-managed transitional beds as a method of increasing geographic placement of an academic inpatient service.
[Team-based care can be challenging when the patients of a consultant are scattered across various hospital units. We used transition beds—beds dedicated for patients moving onto or out of the unit in order to make it easier to control patient flow. We saw an immediate increase in our average census from ~8 to ~15 patients as well as a major shift of the median admission time to 3.5 hours earlier in the day. Unfortunately, it was an added burden to our already stressed charge nurses.]
Freely available online

Patients’ perspectives of emergency care quality and priorities for care improvement.
[Studies have examined strategies implemented to strengthen quality of emergency care in healthcare provider institutions in Ghana. But few studies have focused on what determines quality of emergency care from the patient’s perspective. The]
purpose of this paper is to fill that gap by examining factors salient to gauging quality of emergency care and priority areas for care improvement.

Available with an NHS OpenAthens password for eligible users

**Right service, right place: optimising utilisation of a community nursing service to reduce planned presentations to the emergency department.**


[This study investigated the impact of a Community Nursing Enhanced Connections Service (CoNECS) on planned presentations to a regional Australian ED. CoNECS collaboratively evolved between acute care and community services in 2014. Annual ED planned presentations decreased by 43% (527 presentations) after implementation. Factors supporting the service were endorsement from senior administration and strong leadership to drive responsive quality improvement strategies.]

*Freely available online*

**The clinical governance of multidisciplinary care.**


[This clinical governance matrix is presented as a methodology to monitor quality assurance in the settings of health and social care.]

*Available with an NHS OpenAthens password for eligible users*

**A two-way street: What can CCGs teach us about accountability in STPs?**

Nuffield Trust; 2017.

https://www.nuffieldtrust.org.uk/research/a-two-way-street

[A report exploring the challenges and opportunities presented by sustainability and transformation partnerships (STPs) for
accountability in the NHS. The report explores how commissioners and providers respond to different approaches to accountability and performance management. It then considers the implications of this learning from current and past experience for the future development of STPs, accountable care organisations and accountable care systems.]  
Freely available online

**Embedding a culture of quality improvement.**  
The King’s Fund; 2017.  
https://www.kingsfund.org.uk/publications/embedding-culture-quality-improvement  
[This report explores the factors that have helped organisations to launch a quality improvement strategy and sustain a focus on quality improvement. It identified three common themes for successfully launching a quality improvement strategy: having a clear rationale; ensuring staff are ready for change; understanding the implications for the organisation’s leadership team in terms of style and role. ]  
Freely available online

**General Pharmaceutical Services: England 2007/08 to 2016/17 [National Statistic].**  
NHS Digital; 2017.  
https://digital.nhs.uk/catalogue/PUB30135  
Freely available online

**Hospital Accident and Emergency Activity, 2016-17.**  
NHS Digital; 2017.  
https://digital.nhs.uk/catalogue/PUB30112  
[This is a publication on Accident and Emergency (A&E)
activity in English NHS hospitals and English NHS-commissioned activity in the independent sector. This annual publication covers the financial year ending March 2017. It contains final data and replaces the provisional data that are published each month.]

Freely available online

**King's Fund Quarterly Monitoring Report: How is the NHS performing? November 2017**
The King's Fund; 2017.
[This is the 24th report and aims to take stock of what has happened over the past few months and to assess the state of the health and care system. It provides an update on how the NHS is coping as it continues to grapple with productivity and reform challenges under continued financial pressure. Performance against a number of key indicators is worse than at this time last year, and finances remain precarious despite an emergency funding injection.]

Freely available online

**The non-executive director's guide to NHS data – Part one: Hospital activity, data sets and performance.**
NHS Confederation; 2017.
[As a non-executive director (NED), understanding your organisation's data is an essential part of providing effective oversight and driving improvement. This guide will help you to better understand NHS data and how it can be used to determine what is happening in your organisation. It is the first in a series of briefings unpacking data across the healthcare system.]

Freely available online

[This online training course is provided free of charge and is available to all healthcare staff and patient/carer partners across KSS as well as others interested in supporting or delivering improvement. As a foundation level module it is designed for people who would like an introduction to QI or as a basic refresher. It takes approximately two hours to complete.]

Freely available online

Patient Safety

Better patient safety: implementing exploration and exploitation learning in daily medical practice.

[Current medical daily practice relies on guidelines, protocols and procedures (GPPs), which require exploitation. However, diagnosis, treatment, risk management and process improvements require exploration. Despite the importance of timely leaping between exploration and exploitation, in some events, medical teams fail to make the appropriate leap. This study tested a new approach including (1) a ‘thinking protocol’ (2) a GPP that encouraged leaping from exploration to exploitation.]

Freely available online

Clinical leadership in paramedic services: a narrative synthesis.
[This narrative synthesis critically examines the long-established North American Emergency Medical Services medical direction model and makes some comparisons with the UK inspired clinical governance approaches that are used to monitor and manage the quality and safety in several other Anglo-American paramedic services.]

Available with an NHS OpenAthens password for eligible users

**Comparisons of Interventions for Preventing Falls in Older Adults: A Systematic Review and Meta-analysis.**
Tricco AC. *JAMA* 2017;318(17):1687-1699.

[Exercise alone and various combinations of interventions were associated with lower risk of injurious falls compared with usual care. Choice of fall-prevention intervention may depend on patient and caregiver values and preferences.]

Available with an NHS OpenAthens password for eligible users

**Fall risk and prevention agreement: engaging patients and families with a partnership for patient safety.**

[A Fall Prevention Agreement (FPA) between the nursing team and older adults being admitted to medical oncology units was introduced. The patient's risk for fall was communicated to patients and families on admission. Fall and fall injury rates showed reductions of 37% and 58.6% respectively compared to baseline. Engagement with patients and families seems to communicate the need for a collaborative effort for fall prevention during the hospitalisation.]

Freely available online

**From research to practice: results of 7300 mortality retrospective case record reviews in four acute hospitals in the North-East of England.**

[Cases were reviewed by consultant reviewers with support from other disciplines and graded in terms of quality of care and preventability of deaths. Results were compared with the estimates published in the Preventable Incidents, Survival and Mortality (PRISM) studies. Inhouse reviews produce lower estimates of preventable deaths than published results using external clinicians. RCRR conducted internally is a feasible mechanism for delivering quantitative analysis.]

*Freely available online*

**Identifying patient and practice characteristics associated with patient-reported experiences of safety problems and harm: a cross-sectional study using a multilevel modelling approach.**


[Conclusions: Practices’ safety activation levels and patients’ age and health status are associated with patient-reported safety outcomes in English family practices. The development of interventions aimed at improving patient safety outcomes would benefit from focusing on the identified groups.]

*Available with an NHS OpenAthens password for eligible users*

**NICE: Advanced paramedics to ease pressure on A&E?**


[New draft Guidance from NICE suggests the NHS provide increased numbers of Advanced Paramedic Practitioners to assess and manage lower acuity presentations in the community, reducing pressure on emergency departments. Evidence from three studies was considered. Although the results from these studies are positive, the author expresses concern about their size and applicability. Additional funding and regulation would be needed for the guidelines to be put in to practice.]

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[Studies have examined strategies implemented to strengthen quality of emergency care in healthcare provider institutions in Ghana. But few studies have focused on what determines quality of emergency care from the patient’s perspective. The purpose of this paper is to fill that gap by examining factors salient to gauging quality of emergency care and priority areas for care improvement.]
Available with an NHS OpenAthens password for eligible users

Reducing medical-surgical inpatient falls and injuries with videos, icons and alarms.
[The intervention consisted of a combination of patient education in the form of a video, icons of individual patient risk factors and interventions placed at patients’ bedsides and beds with integrated three-mode sensitivity exit alarms activated for confused patients at risk of falling. A significant reduction in all falls (20%) among medical-surgical inpatients was achieved. Patient education and continued use of bed exit alarms were associated with large decreases in injury.]
Freely available online

Speaking up about traditional and professionalism-related patient safety threats: a national survey of interns and residents.
[Objective: Compare interns' and residents' experiences, attitudes and factors associated with speaking up about traditional versus professionalism-related safety threats.]
Available with an NHS OpenAthens password for eligible users

**Speaking up against unsafe unprofessional behaviours: the difficulty in knowing when and how.** [Editorial]
[Residents now undergo formal training about the importance of contributing to a culture of safety by speaking up to avoid errors or harm, but still face difficulties enacting these behaviours in practice. In this issue of the journal, Martinez et al have attempted to tease out differences in speaking-out behaviours between traditional and professionalism-related patient safety threats.]
Freely available online

**Health promotion & wellbeing in people with mental health problems.**
Bradshaw T & Mairs H. SAGE Publications. 2017. Library Shelf Location: WM 100.1 HEA.
[This practical guide for nursing students and other healthcare professionals helps them to promote and improve the health and well-being of those with mental health problems by looking closely at disparities that people with mental health problems face in relation to their physical health.]
Available with appropriate registration or membership

**In therapy together: family therapy as a dialogue.**
Roper P. Palgrave Macmillan. 2017. Library Shelf Location: WM 432 ROB.
[Moving away from the medically focused problem-diagnosis-treatment model of psychotherapy, this new text conceptualises family therapy as a dialogue between living, breathing people. It emphasises the mutuality and relational context that serves as the backdrop of a therapeutic encounter which practitioners will need to navigate carefully. Contains case studies, examination of key theories and concepts]
including the different schools of narrative-oriented therapies. ]

Available with appropriate registration or membership

**Do Not Attempt Cardiopulmonary Resuscitation, Allow Natural Death (DNACPR) Policy.**
Brighton and Sussex University Hospitals NHS Trust (BSUH); 2017.

[The purpose of the policy is to provide direction and guidance for the planning and implementation of high-quality and robust decisions related to DNACPR orders within BSUH. This policy also takes into consideration policies from surrounding areas to allow for transparency between services, effective communication of decisions and a joint approach to end of life care.]

Only available via the Trust Intranet

**Hospital Accident and Emergency Activity, 2016-17.**
NHS Digital; 2017.
https://digital.nhs.uk/catalogue/PUB30112

[This is a publication on Accident and Emergency (A&E) activity in English NHS hospitals and English NHS-commissioned activity in the independent sector. This annual publication covers the financial year ending March 2017. It contains final data and replaces the provisional data that are published each month.]

Freely available online
Physiotherapy

BET 2: Should children with sport-related concussion observe strict physical rest until symptom-free? [Best evidence topic reports]
[A short cut review was carried out to establish whether strict physical rest following sports related concussion in children is better than normal activity in reducing post-concussional symptoms. ]
Available with an NHS OpenAthens password for eligible users

Comparisons of Interventions for Preventing Falls in Older Adults: A Systematic Review and Meta-analysis.
Tricco AC. JAMA 2017;318(17):1687-1699.
[Exercise alone and various combinations of interventions were associated with lower risk of injurious falls compared with usual care. Choice of fall-prevention intervention may depend on patient and caregiver values and preferences.]
Available with an NHS OpenAthens password for eligible users

Effects of weight loss interventions for adults who are obese on mortality, cardiovascular disease, and cancer: systematic review and meta-analysis.
Ma C. BMJ 2017;359:j4849.
[Conclusions: Weight reducing diets, usually low in fat and saturated fat, with or without exercise advice or programmes, may reduce premature all cause mortality in adults with obesity.]
Freely available online

**Fibreglass Total Contact Casting, Removable Cast Walkers, and Irremovable Cast Walkers to Treat Diabetic Neuropathic Foot Ulcers: A Health Technology Assessment.**
[Ulcer healing improved with total contact casting, irremovable cast walkers, and removable cast walkers, but total contact casting and irremovable cast walkers had higher rates of ulcer healing than removable cast walkers. Increased access to offloading devices could result in cost savings for the health system because of fewer amputations.]
Freely available online

**Neuromuscular electrical stimulation for the prevention of venous thromboembolism.**
Hajibandeh S. Cochrane Database of Systematic Reviews 2017;(11):CD011764.
[Low-quality evidence shows no clear difference in the risk of DVT between NMES and alternative methods of prophylaxis but suggest that NMES may be associated with lower risk of DVT compared with no prophylaxis (moderate-quality evidence) and higher risk of DVT compared with low-dose heparin (low-quality evidence).]
Freely available online

**Postoperative rehabilitation following thumb base surgery: a systematic review of the literature.**
[Early active recovery is used more often in the literature and does not lead to worse outcomes or more complications. This systematic review provides guidance for clinicians in the content of postoperative rehabilitation on CMC-1 arthroplasty. The review also clearly identifies the almost complete lack of
high quality, comparative studies on postoperative rehabilitation after CMC-1 arthroplasty.]
Available with an NHS OpenAthens password for eligible users

**Surgical Treatment Versus Conservative Management for Acute Achilles Tendon Rupture: A Systematic Review and Meta-Analysis of Randomized Controlled Trials.**
[Acute Achilles tendon ruptures can be treated with surgical and nonsurgical treatment. However, the optimal intervention for acute Achilles tendon rupture remains controversial. The aim of the present study was to compare the clinical outcomes of surgical treatment versus conservative management for acute Achilles tendon rupture.]
Available with an NHS OpenAthens password for eligible users

**Verbal augmented feedback in the rehabilitation of lower extremity musculoskeletal dysfunctions: a systematic review.**
Storberget M. *BMJ Open Sport & Exercise Medicine* 2017;3(1):e000256.
[VAF should be considered in the rehabilitation of lower extremity musculoskeletal dysfunctions. However, it cannot be unequivocally confirmed that VAF is effective in this population, owing to study heterogeneity and a lack of high-quality evidence.]
Freely available online

**Virtual reality for stroke rehabilitation.**
Laver KE. *Cochrane Database of Systematic Reviews* 2017;(11):CD008349.
[We found evidence that the use of virtual reality and interactive video gaming was not more beneficial than conventional therapy approaches in improving upper limb...
Virtual reality may be beneficial in improving upper limb function and activities of daily living function when used as an adjunct to usual care (to increase overall therapy time).]

**Allied health professionals job planning: a best practice guide.**
NHS Improvement; 2017.
[Advice for trusts to ensure that their approach to job planning for allied health professionals (AHPs) is consistent with best practice.]

**Guidance for mental health services in exercising duties to safeguard people from the risk of radicalisation.**
[This guidance is aimed at staff working in NHS mental health services. It is designed to support providers and staff to exercise their statutory and professional duties to safeguard vulnerable adults, children and young people at risk of radicalisation.]

**Moderate physical activity linked to longer lifespan in older women.**
NHS Choices - Behind The Headlines; 2017.
[For women who recorded doing the highest levels of moderate to vigorous exercise, their risk of death was around 70% lower than women doing the lowest levels.]
Investigating the organisational factors associated with variation in clinical productivity in community pharmacies: a mixed-methods study.


[Objectives: To inform the commissioning of community pharmacy services by (1) exploring variation in clinical productivity (levels of service delivery and service quality) in pharmacies, (2) identifying the organisational factors associated with this variation and (3) developing a toolkit for commissioners.]

Freely available online

A regional collaborative working to improve health care quality, outcomes, and affordability.


[The Bree Collaborative was established by the Washington State Legislature to convene public and private health care stakeholders with the goal of identifying specific mechanisms to improve health care quality, outcomes, and affordability.]

Available with an NHS OpenAthens password for eligible users

Can more appropriate support and services be provided for people who attend the emergency department frequently? National Health Service staff views.


[Interventions designed to help Emergency Department (ED)
staff manage frequent attenders are labour-intensive and only benefit a small sample of frequent attenders. This study aims to use the in-depth knowledge of health professionals with experience of working with ED frequent attenders to understand the challenges of managing this group of patients and their opinions on providing more appropriate support.] 
Available with an NHS OpenAthens password for eligible users

**Comparison of prehospital triage and five-level triage system at the emergency department.**
Tsai L. *Emergency Medicine Journal* 2017;34(11):http://dx.doi.org/10.1136/emermed-2015-205304. [There is lack of scientific evidence regarding the effectiveness of prehospital triage systems. This study compares the two-level Taiwan Prehospital Triage System (TPTS) with the five-level Taiwan Triage and Acuity Scale (TTAS) at ED arrival with regards to the prediction of patient outcomes and the utilisation of medical resources.] 
Available with an NHS OpenAthens password for eligible users

**Five-level emergency triage systems: variation in assessment of validity.**
Kuriyama A. *Emergency Medicine Journal* 2017;34(11):http://dx.doi.org/10.1136/emermed-2016-206295. [Triage systems are scales developed to rate the degree of urgency among patients who arrive at EDs. A number of different scales are in use; however, the way in which they have been validated is inconsistent. Also, it is difficult to define a surrogate that accurately predicts urgency. This systematic review describes reference standards and measures used in previous validation studies of five-level triage systems.] 
Available with an NHS OpenAthens password for eligible users

**Incorporating nursing complexity in reimbursement**
coding systems: the potential impact on missed care.
[Viewpoint]
["...Therefore, we consider missed care a call to incorporate intensity of nursing care into the Diagnosis Related Groups (DRG) systems, ensuring in this way that hospitals have fresh resources for nursing to address the antecedents of missed care and, consequently, improve patient outcomes. This paradigm shift also implies that nurse administrators make appropriate decisions to implement nursing care models according to evidence-based staffing levels..."]
Available with an NHS OpenAthens password for eligible users

International practice settings, interventions and outcomes of nurse practitioners in geriatric care: A scoping review.
[This review demonstrates improved or non-inferiority results of nurse practitioner care in older people across settings. More well-designed, rigorous studies are needed particularly in relation to costs.]
Freely available online

NICE: Advanced paramedics to ease pressure on A&E?
[New draft Guidance from NICE suggests the NHS provide increased numbers of Advanced Paramedic Practitioners to assess and manage lower acuity presentations in the community, reducing pressure on emergency departments. Evidence from three studies was considered. Although the results from these studies are positive, the author expresses concern about their size and applicability. Additional funding and regulation would be needed for the guidelines to be put in to practice.]
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[This study investigated the impact of a Community Nursing Enhanced Connections Service (CoNECS) on planned re-presentations to a regional Australian ED. CoNECS collaboratively evolved between acute care and community services in 2014. Annual ED planned re-presentations decreased by 43% (527 presentations) after implementation. Factors supporting the service were endorsement from senior administration and strong leadership to drive responsive quality improvement strategies.]
*Freely available online*

**Validity of triage systems for paediatric emergency care: a systematic review.**
[Paediatric triage is a complex task, which presents many challenges to the triage team due to communication difficulties with young children and their parents and high variability over a wide range of factors within each age group, such as physiological parameters, epidemiology and clinical presentation of various diseases. This systematic review assesses the validity of triage systems for paediatric emergency care.]
*Available with an NHS OpenAthens password for eligible users*

**Allied health professionals job planning: a best practice guide.**
[Advice for trusts to ensure that their approach to job planning for allied health professionals (AHPs) is consistent with best practice.]

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Only available via the Trust Intranet

**WHO Guidelines on Integrated Care for Older People (ICOPE).**
World Health Organization (WHO);2017.

[The provision of integrated care is key for older people. The WHO Guidelines on Integrated Care for Older People (ICOPE) propose evidence-based recommendations for health care professionals to prevent, slow or reverse declines in the physical and mental capacities of older people. The ICOPE Guidelines will allow countries to improve the health and well-being of their older populations, and to move closer to the achievement of universal health coverage for all at all ages.]
A two-way street: What can CCGs teach us about accountability in STPs?
Nuffield Trust; 2017.  
https://www.nuffieldtrust.org.uk/research/a-two-way-street

[A report exploring the challenges and opportunities presented by sustainability and transformation partnerships (STPs) for accountability in the NHS. The report explores how commissioners and providers respond to different approaches to accountability and performance management. It then considers the implications of this learning from current and past experience for the future development of STPs, accountable care organisations and accountable care systems.]
Freely available online

Accountable care - the art of the possible.
NHS Providers; 2017.  
http://nhsproviders.org/resource-library/reports/accountable-care-the-art-of-the-possible

[This joint publication with Hempsons sets out eight steps and considerations in working more closely with partners in accountable care systems.]
Freely available online

Achieving Hospital-wide Patient Flow.
Institute for Healthcare Improvement; 2017.  
http://www.ihi.org/resources/Pages/IHIWhitePapers/Achieving-Hospital-wide-Patient-Flow.aspx

[IHI White Paper. The culmination of approximately two decades of IHI’s research, innovation, and learning about hospital-wide patient flow, this white paper guides leaders and quality improvement teams through an in-depth examination of a systems view of patient flow, theories for improvement, and high-leverage strategies and interventions to achieve hospital-wide patient flow.]
Freely available online
**How will our future relationship with the EU shape the NHS?**
Nuffield Trust; 2017.
https://www.nuffieldtrust.org.uk/research/brexit-relationship-eu-shape-nhs
[What effect will the Brexit negotiations have on the way the NHS operates in future? This briefing looks at five key areas where the agreements that are made with the European Union will shape health and social care over the coming decades. ]
*Freely available online*

**Impact Analysis of Social Prescribing on (London) local health economies.**
Healthy London Partnership; 2017.
http://i5health.com/SPDashboard
[Healthy London Partnership •This impact analysis of social prescribing for London was presented to the London STP leads in May 2017 to support development of an interactive dashboard for London social prescribing and expert patient programmes. •The dashboard is a collection of localised population health analysis tools, including heat maps, developed to support planning, implementation and potential savings resulting form of social prescribing in London. ]
*Freely available online*

**Public health: everyone’s business?**
NHS Providers; 2017.
http://nhsp providers.org/provider-voices-public-health
[The second report in the Provider Voices series includes 12 interviews from health leaders focusing on public health.]
*Freely available online*

**The NMC register.**
Nursing and Midwifery Council (NMC); 2017.
[In July, the NMC published data which showed that for the first time there were more nurses and midwives leaving the register than joining it. New figures show that trend is continuing. Over the last 12 months the number of UK graduates leaving the profession has increased by nine percent.]

Freely available online

**There for us: A better future for the NHS workforce.**
NHS Providers; 2017.
http://nhsproviders.org/a-better-future-for-the-nhs-workforce

[A new report from NHS Providers provides a comprehensive overview of where the workforce challenges are greatest, how these have developed, and what needs to be done to address them.]

Freely available online

**Vive la devolution: devolved public-services commissioning.**
Reform; 2017.
http://www.reform.uk/publication/vive-la-devolution-devolved-public-services-commissioning/

[This report makes 10 recommendations for improving public services commissioning. It argues that commissioning of over £100 billion of public services spend, including 95 per cent of the NHS budget, could be devolved to around 38 regions and could deliver better outcomes at a lower cost.]

Freely available online

**Quality Improvement Training - Bronze.**

[This online training course is provided free of charge and is available to all healthcare staff and patient/carer partners across KSS as well as others interested in supporting or delivering improvement. As a foundation level module it is designed for people who would like an introduction to QI or as
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