Latest Evidence
March 2018

Tip:
Press the Ctrl key and the F key to search for key words in this document.
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discharge Planning</td>
<td>4</td>
</tr>
<tr>
<td>Articles</td>
<td>4</td>
</tr>
<tr>
<td>Books</td>
<td>4</td>
</tr>
<tr>
<td>Events</td>
<td>5</td>
</tr>
<tr>
<td>Reports</td>
<td>5</td>
</tr>
<tr>
<td>Education</td>
<td>8</td>
</tr>
<tr>
<td>Articles</td>
<td>8</td>
</tr>
<tr>
<td>Books</td>
<td>11</td>
</tr>
<tr>
<td>Measuring Outcomes and Performance</td>
<td>13</td>
</tr>
<tr>
<td>Articles</td>
<td>13</td>
</tr>
<tr>
<td>Books</td>
<td>17</td>
</tr>
<tr>
<td>Events</td>
<td>18</td>
</tr>
<tr>
<td>Patient Safety</td>
<td>19</td>
</tr>
<tr>
<td>Articles</td>
<td>19</td>
</tr>
<tr>
<td>Events</td>
<td>21</td>
</tr>
<tr>
<td>Guidelines</td>
<td>21</td>
</tr>
<tr>
<td>Reports</td>
<td>22</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>26</td>
</tr>
<tr>
<td>Articles</td>
<td>26</td>
</tr>
<tr>
<td>Books</td>
<td>29</td>
</tr>
<tr>
<td>Guidelines</td>
<td>29</td>
</tr>
<tr>
<td>Reports</td>
<td>30</td>
</tr>
<tr>
<td>Service Design and Commissioning</td>
<td>32</td>
</tr>
<tr>
<td>Articles</td>
<td>32</td>
</tr>
<tr>
<td>Books</td>
<td>36</td>
</tr>
</tbody>
</table>
Discharge Planning

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

A qualitative exploration of the discharge process and factors predisposing to readmissions to the intensive care unit.
[Quantitative studies have demonstrated several factors predictive of readmissions to intensive care. Clinical decision tools, derived from these factors have failed to reduce readmission rates. The purpose of this study was to qualitatively explore the experiences and perceptions of physicians and nurses to gain more insight into intensive care readmissions.]
Freely available online

Books

*New book(s) from the Library and Knowledge Service. Call into your nearest library or contact me for more information.*

**ABC of clinical reasoning.**
Cooper N. John Wiley. 2017. Library Shelf Location: WB 141 ABC.
[Clinical reasoning and decision making is a critical skill for doctors and other healthcare professionals. This book covers]
the core elements of clinical reasoning informed by latest advances in cognitive psychology, education and studies of expertise. Contents include evidence based history and examination; use of diagnostic tests; models of clinical reasoning; cognitive and affective biases; patient centred evidence-based medicine; and teaching clinical reasoning. ]

Available with appropriate registration or membership

Events

You may be interested in this (these) forthcoming event(s):

**Fighting Stigma in Mental Health and losing (Panel Discussion).**
["1 in 4 people suffer from mental illness" is routinely quoted in anti-stigma campaigns to normalise psychiatric disorder. However, does it trivialise and add to stigma? Anthony David (Professor of Cognitive Neuropsychiatry, NIHR Senior Investigator and Vice Dean Academic Psychiatry at the IoPPN) is joined by a panel with diverse perspectives: from personal experience and charities to media and academia. With the audience’s help they will explore innovative solutions to combat stigma. ]
Safra Lecture Theatre, Strand Campus
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https://www.eventbrite.co.uk/e/the-kings-lectures-fighting-stigma-in-mental-health-and-losing-panel-discussion-tickets-40899696092

Reports

The following report(s) may be of interest:

**Delayed transfers of care: a quick guide.**
The King’s Fund; 2018.
"A ‘delayed transfer of care’ occurs when a patient is ready to leave a hospital or similar care provider but is still occupying a bed. Delays can occur when patients are being discharged home or to a supported care facility, such as a residential or nursing home, or are awaiting transfer to a community hospital or hospice."

Freely available online

Hometon QTc: March’s edition of the QTc
Homerton University Hospital NHS Foundation Trust; 2018.
[This month we cover: - A year’s worth of data across the Trust - Incidents and learning from medication errors - A New Risk Alert – ‘Coroner’s Court’ And to test yourself: -Do you know your 8Rs? -Which colleague will you challenge to compete with the quick maths test! ]
Only available via the Trust Intranet

NIHR Signal: Introducing a primary care risk prediction tool did not reduce emergency admissions.
NIHR Dissemination Centre; 2018.
https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000557
[Predicting emergency admissions paradoxically increased hospital admissions from primary care across all risk groups by about 3% overall. The Predictive Risk Stratification Model (PRISM) was evaluated in a trial in general practices in Wales, and there is little evidence it benefits patients by reducing deaths or improving quality of life either.]
Freely available online

Spotlight on Safety Vol 9
Whittington Health; 2018.
http://whittnet.whittington.nhs.uk/document.ashx?id=11728
[The latest issue of the Whittington Health Spotlight on Safety update. This issue looks at: the effectiveness of the STOPfalls
campaign; community referrals; Oxygen cylinders; Flu advice; reducing avoidable harm and poor experiences for patients with learning disabilities]  
Only available via the Trust Intranet
The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

**A values-based curriculum to support aesthetic ‘ways of knowing’ in an undergraduate midwifery programme.**
[In higher education, the term 'values-based learning' is used to emphasise aesthetic, values-based knowing; that is, the art, rather than the science, of caring. In midwifery, aesthetic learning is premised on the creation of meaningful relationships and the use of knowledge and skills that recognise individuality and support humanity. This article presents a pragmatic approach to designing and developing values-based learning in a midwifery undergraduate programme in one English university]

Available with an NHS OpenAthens password for eligible users

**An introduction to ethical theory for healthcare assistants.**
["This article will summarise the four main ethical theories that have relevance for healthcare assistants. These are: utilitarianism, deontology, virtue ethics and principlism."]

Available with an NHS OpenAthens password for eligible users
users

**Anatomy and physiology, 5. The musculoskeletal system.**

[This article considers the musculoskeletal system, which provides form, support, stability, and movement to the body. The healthcare assistant and assistant practitioner (HCA and AP) should have an understanding of the skeletal system as they offer care to a variety of patients across the lifespan. A glossary of terms is provided at the end of the article, along with a short quiz.]

*Available with an NHS OpenAthens password for eligible users*

**Designing and evaluating vascular access training using educational theory.**
Hulse AL. *British Journal of Nursing* 2018;27(2):S27-S33.

[Evidence illustrates many different approaches to learning. There has been a significant change in the medical education paradigm towards a more structured work-based competency assessed approach to learning. This paper explores the theoretical aspects of clinical skills learning and leadership theory in healthcare practice, placing emphasis on interprofessional and collaborative working and learning partnerships.]

*Available with an NHS OpenAthens password for eligible users*

**Developing a digital learning version of a mentorship training programme.**
Casey D. *British Journal of Nursing* 2018;27(2):82-86.

[This article describes the experience of one university team in developing, delivering and evaluating an online Nursing and Midwifery Council-approved mentorship programme for nurses and midwives who support pre-registration students in practice. The article does not discuss this programme as an
exemplar of best practice, but aims to share the learning gained from the experience of introducing a digital learning version of a mentorship course.]
Available with an NHS OpenAthens password for eligible users

Educating the workforce: improving the education and competencies of healthcare assistants in an acute surgical unit.
['It is widely recognised that healthcare assistants (HCAs) have taken some registered nurse (RN) roles; however, the importance of competencies, supervision and monitoring of HCAs is not always recognised. The aim of this project was to examine the education needs of HCAs for the tasks delegated to them and to provide an education day relevant to these needs.'](Available with an NHS OpenAthens password for eligible users

Organisational barriers to the facilitation of overseas volunteering and training placements in the NHS.
[Undertaking a period of voluntary work or a professional placement overseas has long been a feature of medical training in the UK. There are now a number of high profile National Health Service (NHS) initiatives aimed at increasing access to such opportunities for staff at all levels. We present findings from a qualitative study involving a range of NHS staff and other stakeholders which explored barriers to participation in these activities.]

The personal and professional importance of post-registration postgraduate education.
[The nature of both pre-registration and post-registration
midwifery education has changed dramatically over the last two decades, being firmly established within academia and higher education. This article will explore professional perceptions of the post-registration educational journey, the concept of further academic development for individual midwives and how engagement of midwives in postgraduate study could benefit both individual midwives and the collective profession of midwifery.]

Available with an NHS OpenAthens password for eligible users

Books

New book(s) from the Library and Knowledge Service. Call into your nearest library or contact me for more information.

Critical thinking skills for healthcare.
McKendry S. Routledge. 2016. Library Shelf Location: LB 200 MCK.
[Thinking critically is an essential skill, both for students and for the modern, evidence-based, healthcare practitioner. You need to be able to find, understand and evaluate the evidence that underpins your assignments, clinical decision making and practice. These skills are used in everyday life. This book will help you take these critical skills and apply them to your academic and clinical work. An essential resource for all health and Allied health professionals in training.]
Available with appropriate registration or membership

Nurse as educator: principles of teaching and learning for nursing practice.
Bastable SB. 5th ed.. Jones and Bartlett. 2017. Library Shelf Location: WY 21 NUR.
[This book tackles the roles of nurses in patient teaching, health education and health promotion. This latest edition has been thoroughly revised and includes promotion of health
literacy, teaching people with disabilities, the use of technology for patient and professional education, and legal and ethical issues. This edition also emphasises quality and safety in nursing, patient centred care, self-care, and the teach back approach to enhance motivation and compliance. ]

Available with appropriate registration or membership

**Principles and practices of teaching and training: a guide for teachers and trainers in the FE and skills sectors.**
Gravells A. SAGE Publications. 2017. Library Shelf Location: LC 250 GRA.

[Written by bestselling author Ann Gravells, this is the complete go-to guide for anyone wanting to be (or working as) a teacher or trainer in the further education and skills sector. It has all the information you need to work towards a qualification such as the Award, Certificate or Diploma in Education and Training. It is also relevant to anyone taking a Train the Trainer course, or an international teaching qualification. ]

Available with appropriate registration or membership
Measuring Outcomes and Performance

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

Anticipation, teamwork and cognitive load: chasing efficiency during robot-assisted surgery.
[Conclusions: Anticipation and active engagement by the surgical team resulted in shorter operative time, and higher familiarity scores were associated with fewer inconveniences. Less anticipation and non-verbal requests were also associated with lower cognitive load for the console surgeon. Training efforts to increase anticipation and team familiarity can improve team efficiency during RAS.]
Available with an NHS OpenAthens password

Are Facebook user ratings associated with hospital cost, quality and patient satisfaction? A cross-sectional analysis of hospitals in New York State.
[Background: Hospital care costs are high while quality varies across hospitals. Patient satisfaction may be associated with better clinical quality, and social media ratings may offer another opportunity to measure patient satisfaction with care. ]
Available with an NHS OpenAthens password
Are the NHS national outcomes frameworks past their sell-by date*. [Viewpoint]
[The National Health Service (NHS) outcomes frameworks for public health, health and adult social care in England were launched in 2010–2012 with ambitions that they would transform health outcomes in England. However, unprecedented financial pressures in the NHS are compelling changes in government policy designed to make the NHS financially sustainable while ensuring high-quality care for a population with a growing burden of chronic disease and multimorbidity...]
Available with an NHS OpenAthens password

Calculating the proportion of avoidable attendances at UK emergency departments: analysis of the Royal College of Emergency Medicine’s Sentinel Site Survey data.
[Avoidable attendances (AAs; defined as non-urgent, self-referred patients who could be managed more effectively and efficiently by other services) have been identified as a contributor to ED crowding. This pilot study used data from the Royal College of Emergency Medicine’s Sentinel Site Survey to estimate the proportion of AAs in 12 EDs across England on a standard day (20 March 2014). ]
Available with an NHS OpenAthens password for eligible users

Elevated mortality among weekend hospital admissions is not associated with adoption of seven day clinical standards.
[Patients admitted to hospital in an emergency at weekends have been found to experience higher mortality rates than those admitted during the week. The National Health Service
(NHS) in England has introduced four priority clinical standards for emergency hospital care with the objective of reducing deaths associated with this ‘weekend effect’. This study aimed to determine whether adoption of these clinical standards is associated with the extent to which weekend mortality is elevated.]
Available with an NHS OpenAthens password for eligible users

Intraoperative non-technical skills: a critical target for improving surgical outcomes.[Editorial]
Vande Walle K. BMJ Quality & Safety 2018;27(2):99 - 101. [The important role of intraoperative non-technical skills in determining surgical safety and outcomes has been increasingly recognised in recent years. To that end, in this issue, Sexton et al evaluate the non-technical skills of teamwork and situation awareness. Specifically, they examine the effect of team anticipation on operative time and cognitive load in the environment of robotic surgery...]
Freely available online

Lending a hand: could machine learning help hospital staff make better use of patient feedback'. [Editorial]
Gibbons C. BMJ Quality & Safety 2018;27(2):93 - 95. [In the first of the two studies, Lee and colleagues examine how written patient experience comments feedback is used in the National Health Service (NHS). Uniquely, the authors focus their investigation on the way in which Boards of Directors use patient experience information to monitor and improve care. The second study, conducted by Griffiths and Leaver, illustrates how computational tools could automate the collection and analysis of patient experience data.]
Freely available online

Nursing home Facebook reviews: who has them, and how do they relate to other measures of quality and experience'.
Gaudet Hefele J. BMJ Quality & Safety 2018;27(2):130 - 139. [Conclusions: Given the disconnect between Facebook ratings and other, more scientifically grounded measures of quality, concerns about the validity and use of social media ratings are warranted. However, it is likely consumers will increasingly turn to social media ratings of NHs, given the lack of consumer perspective on most state and federal report card sites. Thus, social media ratings may present a unique opportunity for healthcare report cards to capture real-time consumer voice.]

Available with an NHS OpenAthens password

**Predictive risk stratification model: a randomised stepped-wedge trial in primary care (PRISMATIC).**
Snooks H. Health Services and Delivery Research 2018;6(1):https://doi.org/10.3310/hsdr06010. [Objectives: To (1) measure the effects on service usage, particularly emergency admissions to hospital; (2) assess the effects of the Predictive Risk Stratification Model (PRISM) on quality of life and satisfaction; (3) assess the technical performance of PRISM; (4) estimate the costs of PRISM implementation and its effects; and (5) describe the processes of change associated with PRISM.]

Freely available online

**Qualitative assessment of the primary care outcomes questionnaire: a cognitive interview study.**
Murphy M. BMC Health Services Research 2018;18(1):79. [The Primary Care Outcomes Questionnaire (PCOQ) is a new patient-reported outcome measure designed specifically for primary care. This paper describes the developmental process of improving the item quality and testing the face validity of the PCOQ through cognitive interviews with primary care patients.]

Freely available online

**The use of patient feedback by hospital boards of**
[Discussion and conclusions: We have identified limitations in the uses of patient feedback by hospital boards that suggest that boards should review their current practice to ensure that they use the different kinds of patient feedback that are available to them more effectively to improve, monitor and assure the quality of care.]
Available with an NHS OpenAthens password

Wisdom of patients: predicting the quality of care using aggregated patient feedback.
[Objective: To determine whether the near real-time, automated collection and aggregation of multiple sources of patient feedback can provide a collective judgement that effectively identifies risks to the quality of care, and hence can be used to help prioritise inspections.]
Available with an NHS OpenAthens password

Books

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[Clinical reasoning and decision making is a critical skill for doctors and other healthcare professionals. This book covers the core elements of clinical reasoning informed by latest advances in cognitive psychology, education and studies of expertise. Contents include evidence based history and examination; use of diagnostic tests; models of clinical reasoning; cognitive and affective biases; patient centred...
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Events

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**Elevated mortality among weekend hospital admissions is not associated with adoption of seven day clinical standards.**  
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Evaluating the impact of a falls prevention community of practice in a residential aged care setting: a realist approach.
[The aims of this study were to evaluate the impact of a falls prevention CoP on its membership; actions at facility level; and actions at organisation level in translating falls prevention evidence into practice.]
Freely available online

Feasibility and predictive performance of the Hendrich Fall Risk Model II in a rehabilitation department: a prospective study.
[Falls are a common adverse event in both elderly inpatients and patients admitted to rehabilitation units. The Hendrich Fall Risk Model II (HIIFRM) has been already tested in all hospital wards with high fall rates, with the exception of the rehabilitation setting. This study's aim is to address the feasibility and predictive performances of HIIFRM in a hospital rehabilitation department.]
Freely available online

Intraoperative non-technical skills: a critical target for improving surgical outcomes.[Editorial]
[The important role of intraoperative non-technical skills in determining surgical safety and outcomes has been increasingly recognised in recent years. To that end, in this issue, Sexton et al evaluate the non-technical skills of teamwork and situation awareness. Specifically, they examine]
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Freely available online

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Guidelines

The following new guidance has recently been published:

**Falls prevention: cost-effective commissioning**
Public Health England (PHE);2018.
[A resource to help commissioners and communities provide cost-effective falls prevention activities. The return on
investment tool pulls together evidence on the effectiveness and associated costs for interventions aimed at preventing falls in older people living in the community. The second report summarises the findings from a literature review carried out to identify cost-effective interventions.]

Freely available online

**Safeguarding Adults Policy.**
Brighton and Sussex University Hospitals NHS Trust (BSUH); 2017.

[This policy sets out the standards and procedures required to ensure that staff in BSUH NHS Trust understand their responsibilities when they become aware of or suspect abuse, in adherence to the Sussex Safeguarding Adults Policy and Procedures.]

Only available via the Trust Intranet

**Supporting routine frailty identification and frailty through the GP Contract 2017/2018**
https://www.england.nhs.uk/ourwork/ltc-op-eolc/older-people/frailty/frequently-asked-questions/

[GP practices are now required to identify people (aged 65 +) who may be living with severe or moderate frailty using the electronic frailty index (eFI) or similar evidenced based tool, and provide clinically appropriate interventions as required. NHS Digital has published Q3 frailty data to support planning of frailty services. NHS Digital is asking practices to avoid batch-coding of eFI scores and provides guidance on the correct coding method in the frailty FAQ on the NHS England website.]

Freely available online

**Reports**
The following report(s) may be of interest:

**NIHR Signal: A frailty checklist was completed in only a quarter of older people at hospital admission.**
NIHR Dissemination Centre; 2018.
[https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000559](https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000559)
[Frailsafe is a simple safety checklist offering the opportunity to improve safety and quality of care for frail older people while in hospital. It aims to increase key clinical assessments or practices on things like risk of falls, mobility and delirium, and to facilitate communication between staff. However, the relatively low completion rate highlights the need to understand how this approach can be better embedded in the complex care that is typical of services provided for older people.] Freely available online

**Prevalence and Economic Burden of Medication Errors in The NHS in England: Rapid evidence synthesis and economic analysis of the prevalence and burden of medication error in the UK.**
Policy Research Unit in Economic Evaluation of Health and Care Interventions (EEPRU); 2018.
[It is estimated 66 million potentially clinically significant medication errors occur in England/year; 71.0% in primary care. Definitely avoidable ADRs cost the NHS £98.5 million per year, with NSAIDs, anticoagulants and antiplatelets causing over a third of related admissions.] Freely available online

**Rapid review on safeguarding to inform the Healthy Child Programme 5 to 19 - Executive summary and key findings**
Public Health England (PHE); 2018.
[The review synthesises relevant systematic review level evidence, supplemented with some primary impact evaluations, about 'what works' in the areas of child abuse and neglect, child sexual abuse and exploitation, intimate partner violence (IPV), female genital mutilation (FGM) and gang violence. In line with the remit of the HCP for 5 to 19 year-olds, the focus is on prevention and early intervention]

**Freey available online**

**Safe, sustainable and productive staffing: An improvement resource for adult inpatient wards in acute hospitals.**
NHS Improvement; 2018.
https://improvement.nhs.uk/resources/safe-staffing-improvement-resources-adult-inpatient-acute-care/

[A guide to help standardise staffing decisions in adult inpatient wards in acute hospitals.]

**Freey available online**

**Safe, sustainable and productive staffing: an improvement resource for the district nursing service.**
NHS Improvement; 2018.
https://improvement.nhs.uk/resources/safe-staffing-district-nursing-services/

[Improvement resource to help standardise safe, sustainable and productive staffing decisions in the district nursing service.]

**Freey available online**

**The Getting it right first time (GIRFT) programme.**
NHS Providers; 2018.
http://nhsproviders.org/resource-library/briefings/getting-it-right-first-time-programme

[This briefing provides an overview of the GIRFT programme, a partnership between the NHS Royal National Orthopaedic...]

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**Weston Area Health**

**NHS Trust**

form_the_healthy_child_programme_5_to_19Executive_summary_and_key_findings.pdf

(The review synthesises relevant systematic review level evidence, supplemented with some primary impact evaluations, about 'what works' in the areas of child abuse and neglect, child sexual abuse and exploitation, intimate partner violence (IPV), female genital mutilation (FGM) and gang violence. In line with the remit of the HCP for 5 to 19 year-olds, the focus is on prevention and early intervention]

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NHS Improvement; 2018.
https://improvement.nhs.uk/resources/safe-staffing-improvement-resources-adult-inpatient-acute-care/

[A guide to help standardise staffing decisions in adult inpatient wards in acute hospitals.]

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NHS Improvement; 2018.
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[Improvement resource to help standardise safe, sustainable and productive staffing decisions in the district nursing service.]

**Freey available online**

**The Getting it right first time (GIRFT) programme.**
NHS Providers; 2018.
http://nhsproviders.org/resource-library/briefings/getting-it-right-first-time-programme

[This briefing provides an overview of the GIRFT programme, a partnership between the NHS Royal National Orthopaedic...]

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Hospital Trust and NHS Improvement, to support NHS trusts to improve care quality and increase operational productivity by reducing unwarranted variation in care. The programme encompasses 35 clinical and medical specialties delivered in acute hospitals, with work underway to expand into mental health services. 
*Freely available online*

**The Report of the Short Life Working Group on reducing medication-related harm.**
Department of Health and Social Care; 2018.
[This report makes recommendations for a programme of work to tackle medication error and improve medicine safety. Early priorities identified, include improved shared decision making and shared care, and the development of a repository of good practice to share learning.]
*Freely available online*
Physiotherapy

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

**An overview of clinical guidelines for the management of vertebral compression fracture: a systematic review.**  
[Four guidelines from three countries, published in the period 2010–2013, were included ... The use of plain radiography or dual-energy X-ray absorptiometry for diagnosis was recommended in two of the four guidelines. Vertebroplasty or kyphoplasty was recommended in three of the four guidelines. The recommendation for bed rest, trunk orthoses, electrical stimulation, and supervised or unsupervised exercise was inconsistent across the included guidelines.]  
Available with an NHS OpenAthens password for eligible users

**Comprehensive geriatric assessment for older people admitted to a surgical service.**  
Eamer G. *Cochrane Database of Systematic Reviews* 2018;(1):CD012485.  
[There is evidence that CGA can improve outcomes in people with hip fracture. There are not enough studies to determine when CGA is most effective in relation to surgical intervention or if CGA is effective in surgical patients presenting with conditions other than hip fracture.]  
Freely available online
Developmental coordination disorder is more than a motor problem: Children describe the impact of daily struggles on their quality of life.
[Affecting 5–6% of children, developmental coordination disorder is a neurodevelopmental disorder characterized by poor motor coordination and difficulty learning motor skills. Although quantitative studies have suggested that children with developmental coordination disorder experience reduced quality of life, no known qualitative studies have reported what daily life is like from their perspective...13 children (8–12 years) were asked to describe what life is like in their own words. ]
Freely available online

Early Botulinum Toxin Injections in Infants with Musculoskeletal Disorders: A Systematic Review of Safety and Effectiveness.
[Data of 473 infants were analysed. Fifty-five infants had cerebral palsy, 112 had obstetric brachial plexus palsy, 257 had clubfoot and 44 had congenital torticollis. No studies reported any severe adverse event that could be attributed to the BTI. The rate of mild to moderate adverse events reported varied from 5 to 25%. Results regarding efficacy were preliminary, dependant on the pathology and limited by the small number of studies and their low levels of evidence.]
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Feasibility and predictive performance of the Hendrich Fall Risk Model II in a rehabilitation department: a prospective study.
[Falls are a common adverse event in both elderly inpatients
and patients admitted to rehabilitation units. The Hendrich Fall Risk Model II (HIIFRM) has been already tested in all hospital wards with high fall rates, with the exception of the rehabilitation setting. This study's aim is to address the feasibility and predictive performances of HIIFRM in a hospital rehabilitation department.

*Freely available online*

**Motor imagery training after stroke: a systematic review and meta-analysis of randomized controlled trials.**

[A number of studies have suggested that imagery training (motor imagery (MI)) has value for improving motor function in persons with neurologic conditions. We performed a systematic review and meta-analysis to assess the available literature related to efficacy of MI in the recovery of individuals after stroke.]

*Freely available online*

**Obstetric emergencies: enhancing the multidisciplinary team through simulation.**

[This study discusses and analyses the importance of using the multidisciplinary team during a high fidelity simulation held in an annual maternity staff training study day. The aim was to review how effective the staff thought the simulation was in supporting them to enhance their skills working as a team. Following the simulation session with the multidisciplinary team, a feedback sheet in the form of a questionnaire was given to all participants of the study day to evaluate its effectiveness.]

*Available with an NHS OpenAthens password for eligible users*

**Validation of a core patient-reported-outcome measure set for operationalizing success in multimodal pain**
therapy: useful for depicting long-term success?
[The study aims to validate a previously developed and published combined success criterion for patients after multimodal pain therapy (Donath et al., BMC Health Serv Res 15:272, 2015). The criterion classifies treated patients as successful in the long term on the basis of pain severity, disability through pain, depressiveness, and health-related quality of life.]

Books

New book(s) from the Library and Knowledge Service. Call into your nearest library or contact me for more information.

Movement disorders in childhood.
Singer HS. 2nd ed.. Elsevier. 2016. Library Shelf Location: WS 430 SIN.
[Information on the diseases and disorders that affect motor control, an important area of specialisation within child neurology.]

Guidelines

The following new guidance has recently been published:

Parkinson's disease.
National Institute for Health and Care Excellence (NICE);2018. https://www.nice.org.uk/guidance/gs164
[This quality standard covers the management of Parkinson’s disease in adults. It does not include treatment of parkinsonism not caused by Parkinson’s disease. It describes high-quality care in priority areas for improvement.]
Freely available online

Pressure Injury Prevention and Treatment Policy.
Brighton and Sussex University Hospitals NHS Trust (BSUH); 2018.

[The aim of this policy is to ensure that the necessary risk assessments are completed to prevent avoidable pressure injuries developing whilst patients are under the care of BSUH and to ensure best practice by following national guidance, minimising the potential of inconsistency of care and standardising approaches to pressure injury prevention and management.]

Only available via the Trust Intranet

Reports

The following report(s) may be of interest:

**NIHR Signal: A frailty checklist was completed in only a quarter of older people at hospital admission.**
NIHR Dissemination Centre; 2018.
https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000559

[Frailsafe is a simple safety checklist offering the opportunity to improve safety and quality of care for frail older people while in hospital. It aims to increase key clinical assessments or practices on things like risk of falls, mobility and delirium, and to facilitate communication between staff. However, the relatively low completion rate highlights the need to understand how this approach can be better embedded in the complex care that is typical of services provided for older people.]

Freely available online
Service Design and Commissioning

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

**A systematic review of team-building interventions in non-acute healthcare settings.**
Miller CJ. *BMC Health Services Research* 2018;18(1):146.
[Healthcare is increasingly delivered in a team-based format emphasizing interdisciplinary coordination. While recent reviews have investigated team-building interventions primarily in acute healthcare settings (e.g. emergency or surgery departments), we aimed to systematically review the evidence base for team-building interventions in non-acute settings (e.g. primary care or rehabilitation clinics).]

**An integrated primary care approach for frail community-dwelling older persons: a step forward in improving the quality of care.**
[High-quality care delivery for frail older persons, many of whom have multiple complex needs, is among the greatest challenges faced by healthcare systems today. The Chronic Care Model (CCM) may guide quality improvement efforts for primary care delivery to frail older populations.]

*Freely available online*
Are the NHS national outcomes frameworks past their sell-by date?. [Viewpoint]
[The National Health Service (NHS) outcomes frameworks for public health, health and adult social care in England were launched in 2010–2012 with ambitions that they would transform health outcomes in England. However, unprecedented financial pressures in the NHS are compelling changes in government policy designed to make the NHS financially sustainable while ensuring high-quality care for a population with a growing burden of chronic disease and multimorbidity...]
Available with an NHS OpenAthens password

Calculating the proportion of avoidable attendances at UK emergency departments: analysis of the Royal College of Emergency Medicine’s Sentinel Site Survey data.
[Avoidable attendances (AAs; defined as non-urgent, self-referred patients who could be managed more effectively and efficiently by other services) have been identified as a contributor to ED crowding. This pilot study used data from the Royal College of Emergency Medicine’s Sentinel Site Survey to estimate the proportion of AAs in 12 EDs across England on a standard day (20 March 2014). ]
Available with an NHS OpenAthens password for eligible users

Clinical leadership in service redesign using Clinical Commissioning Groups: a mixed-methods study.
[Objectives: This research examined the extent to which, and the methods by which, clinicians stepped forward to take up a leadership role in service redesign using Clinical Commissioning Groups (CCGs) as a platform.]
Freely available online

**Facilitators and barriers of implementing and delivering social prescribing services: a systematic review.**
Pescheny JV. *BMC Health Services Research* 2018;18(1):86. [Social Prescribing aims to promote partnership working between the health and the social sector to address the wider determinants of health. To date, there is a weak evidence base for Social Prescribing services. The objective of the review was to identify factors that facilitate and hinder the implementation and delivery of SP services based in general practice involving a navigator.]
Freely available online

**Finding value in ‘inappropriate’ visits: A new study demonstrates how variation in ED use for preventable visits can be used to detect problems with access to healthcare in our communities.**
Weber EJ. *Emergency Medicine Journal* 2018;35(2):http://dx.doi.org/10.1136/emermed-2017-206953. [There is a paper out there that is likely to remain unread by many emergency physicians, in large part because it appears in the journal Health Services Research. Yet this study by Sheryl Davies et al is worthy of our attention because it marks a new line of enquiry about those pesky ‘inappropriate’ ED visits.]
Available with an NHS OpenAthens password for eligible users

**Future Dietitian 2025: informing the development of a workforce strategy for dietetics.**
Hickson M. *Journal of Human Nutrition and Dietetics* 2018;31(1):23-32. [A series of recommendations were made for the next steps in moving the workforce to a new future. The future for dietetics looks bright, embracing technology, as well as exploring different ways of working and new opportunities, as this
dynamic profession continues to evolve.}

Freely available online

**New models of care in practice: acute care collaboration, multispecialty community provision, urgent and emergency care.**


['50 ‘vanguard’ organisations were selected to take a lead on the development of new care models, which will act as the blueprints for the NHS moving forward and the inspiration to the rest of the health and care system.‘]

Available with an NHS OpenAthens password for eligible users

**Primary care professionals providing non-urgent care in hospital emergency departments.**

Gonçalves-Bradley D. *Cochrane Database of Systematic Reviews* 2018;(2):CD002097.

[We cannot be sure whether placing primary care professionals in the ED to provide care for patients with non-urgent problems is as effective or safe as regularly scheduled emergency physician care, as we found little evidence with inconsistent results, which we assessed as of very low certainty. Safety has not been examined.]

Freely available online

**The benefits of co-location in primary care practices: the perspectives of general practitioners and patients in 34 countries.**


[There is no clear evidence as to whether the co-location of primary care professionals in the same facility positively influences their way of working and the quality of healthcare as perceived by patients. The aim of this study was to identify the relationships between general practitioner (GP) co-location with other GPs and/or other professionals and the GP
outcomes and patients' experiences.]

Freely available online

Books

New book(s) from the Library and Knowledge Service. Call into your nearest library or contact me for more information.

**ABC of clinical reasoning.**
Cooper N. John Wiley. 2017. Library Shelf Location: WB 141 ABC.
[Clinical reasoning and decision making is a critical skill for doctors and other healthcare professionals. This book covers the core elements of clinical reasoning informed by latest advances in cognitive psychology, education and studies of expertise. Contents include evidence based history and examination; use of diagnostic tests; models of clinical reasoning; cognitive and affective biases; patient centred evidence-based medicine; and teaching clinical reasoning. ]

Available with appropriate registration or membership

Guidelines

The following new guidance has recently been published:

**Refreshing NHS Plans for 2018/19.**
[Joint NHS England/NHS Improvement guidance setting out the expectations for commissioners and providers in updating their operational plans for 2018/19.]

Freely available online

Reports
The following report(s) may be of interest:

**Reimagining community services: making the most of our assets.**
The King's Fund; 2018.  
[https://www.kingsfund.org.uk/publications/community-services-assets](https://www.kingsfund.org.uk/publications/community-services-assets)  
[This report differs from some previous analyses of community services by adopting a broad definition of their scope. The King's fund include services commissioned by the NHS and local authorities as well as related services delivered by the third sector, the private sector, carers and families. Taken together, these services comprise a wide range of assets and there are many opportunities to use them more effectively to meet the population’s needs.]  
_Freely available online_

**Volunteering in general practice: Opportunities and insights.**
The King's Fund; 2018.  
[Interest is growing in the contribution that volunteering can make in health and social care. This paper examines the ways in which volunteers are involved with, and are contributing to, general practice.]  
_Freely available online_

**Approaches to social care funding: social care funding options.**
The Health Foundation; 2018.  
[This working paper from the Health Foundation and The King's Fund considers five approaches to funding social care for older people in England. The chosen models reflect the solutions most commonly raised in the debate around social care funding options.]  
_Freely available online_
care funding, and are not a comprehensive list of possible models.]

Freely available online

Delayed transfers of care: a quick guide.
The King’s Fund; 2018.

"A ‘delayed transfer of care’ occurs when a patient is ready to leave a hospital or similar care provider but is still occupying a bed. Delays can occur when patients are being discharged home or to a supported care facility, such as a residential or nursing home, or are awaiting transfer to a community hospital or hospice.”]

Freely available online

Divided we fall: getting the best out of general practice.
Nuffield Trust; 2017.

[This report asks how best to balance the proliferation of GP services prioritising speed and convenience with the traditional view of general practice based on deep knowledge, community-based understanding and continuity of care? ]

Freely available online

Health Foundation response to Health Select Committee inquiry on nursing workforce.
The Health Foundation; 2018.

"We submitted written evidence to the Health Select Committee to inform on what is a key area of interest and expertise for the Health Foundation. In our response, we outline the shortage in NHS nurse numbers and review the government’s move away from a bursary system to the standard student loan system, reflecting on the long running
cap on the number of available nurse training places."]

Freely available online

Integrated care: what does it mean for commissioning?
Nuffield Trust; 2018.

"NHS England’s decision to consult on new contracts for ACOs, alongside the two legal challenges that have been mounted on the status of these potential organisations, have brought the somewhat niche world of NHS commissioning firmly into the public eye. While the focus of the debate has remained on whether or not these new organisational arrangements will result in increased privatisation within the NHS, there has been less attention on the impact they may have on NHS commissioning."

Freely available online

Learning from the vanguards: Supporting people and communities to stay well.
NHS Confederation; 2018.

[This briefing explores how the vanguards have sought to design health and care services around the needs of people who use them, focusing on the outcomes that matter to people and tailoring care to their needs and goals. The publication forms part of a series developed by the NHS Confederation, NHS Clinical Commissioners, NHS Providers and Local Government Association.]

Freely available online

Left to chance: the health and care nursing workforce supply in England.
Royal College of Nursing (RCN); 2018.
https://www.rcn.org.uk/professional-development/publications/pdf-006682
[Following two reports from the RCN last year, we asked frontline nursing staff how the 40,000 shortfall in health and care affects their day-to-day care of patients. With those powerful testimonies still echoing - and being added to each day – the report explains in part how England got to this point.]
Freely available online

**Making sense of accountable care.**
The King's Fund; 2018.
"Put simply, accountable care is a synonym for integrated care. This happens when NHS organisations work together to meet the needs of their local population. Accountable care also aims to improve population health by tackling the causes of illness and the wider determinants of health. Some forms of accountable care involve local authorities and the third sector alongside NHS organisations in working towards these objectives."
Freely available online

**NIHR Signal: A frailty checklist was completed in only a quarter of older people at hospital admission.**
NIHR Dissemination Centre; 2018.
[https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000559](https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000559)
"Frailsafe is a simple safety checklist offering the opportunity to improve safety and quality of care for frail older people while in hospital. It aims to increase key clinical assessments or practices on things like risk of falls, mobility and delirium, and to facilitate communication between staff. However, the relatively low completion rate highlights the need to understand how this approach can be better embedded in the complex care that is typical of services provided for older people."
Freely available online
NIHR Signal: Introducing a primary care risk prediction tool did not reduce emergency admissions.
NIHR Dissemination Centre; 2018. https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000557
[Predicting emergency admissions paradoxically increased hospital admissions from primary care across all risk groups by about 3% overall. The Predictive Risk Stratification Model (PRISM) was evaluated in a trial in general practices in Wales, and there is little evidence it benefits patients by reducing deaths or improving quality of life either.]
Freely available online

Safe, sustainable and productive staffing: An improvement resource for adult inpatient wards in acute hospitals.
[A guide to help standardise staffing decisions in adult inpatient wards in acute hospitals.]
Freely available online

Safe, sustainable and productive staffing: an improvement resource for the district nursing service.
[Improvement resource to help standardise safe, sustainable and productive staffing decisions in the district nursing service.]
Freely available online

The Getting it right first time (GIRFT) programme.
[This briefing provides an overview of the GIRFT programme,
a partnership between the NHS Royal National Orthopaedic Hospital Trust and NHS Improvement, to support NHS trusts to improve care quality and increase operational productivity by reducing unwarranted variation in care. The programme encompasses 35 clinical and medical specialties delivered in acute hospitals, with work underway to expand into mental health services.

Freely available online
Finance and Procurement

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

**Can we improve care and save money?**
Foster S. *British Journal of Nursing* 2017;26(22):1267-1267. [The author response to comments from British Secretary of State for Health Jeremy Hunt on medical care costs. She discusses Hunt's views on the National Health Service, evaluating the quality of medical care at British health facilities, and collaboration between management and frontline staff at hospitals.]
*Available with an NHS OpenAthens password for eligible users*

**Disinvestment in healthcare: an overview of HTA agencies and organizations activities at European level.**
Calabrò GE. *BMC Health Services Research* 2018;18(1):148. [In an era of a growing economic pressure for all health systems, the interest for "disinvestment" in healthcare increased. In this context, evidence based approaches such as Health Technology Assessment (HTA) are needed both to invest and to disinvest in health technologies.]

**Managing the costs of clinical negligence within hospital trusts.**
Tingle J. *British Journal of Nursing* 2018;27(2):102-103. [The article discusses the management of the costs of clinical negligence in British hospital trusts. Topics include legal costs
related to medical negligence in Great Britain, a report from the British House of Commons Committee of Public Accounts, and factors in the culture of the British National Health Services (NHS) related to legal costs.]

Available with an NHS OpenAthens password for eligible users

Events

You may be interested in this (these) forthcoming event(s):

**Procurement law: developments, challenges and risks**
[PAID EVENT: The session is aimed at staff responsible for commissioning and/or decision making and will cover the latest procurement law issues, in particular the implications of the “light touch regime”. Following the session you will have a greater understanding of the legal principles that apply when you make commissioning decisions in this ever-changing area of law. You will also have considered the key areas of risk that may arise when making your commissioning decisions]
London
All day event on: 26th April, 2018
https://www.pccevents.co.uk/pcc/frontend/reg/thome.csp?pageID=950421&eventID=1773&traceRedir=2
For more information, please contact events@pcc-cic.org.uk.

Reports

The following report(s) may be of interest:

**Brexit and the impact on patient access to medicines and medical technologies.**
NHS Confederation; 2018.
[This briefing explores how UK and EU citizens could be
affected by the disruption in trade that could result from the UK’s exit from the EU, as well as in the event of lack of cooperation in the regulation of medicines and devices between the EU and the UK post Brexit.]
Freely available online

**Sustainability and transformation in the NHS.**
National Audit Office (NAO); 2018.
["The NHS has received extra funding, but this has mostly been used to cope with current pressures and has not provided the stable platform intended from which to transform services. Repeated short-term funding-boosts could turn into the new normal, when the public purse may be better served by a long-term funding settlement that provides a stable platform for sustained improvements".]
Freely available online
Leadership and Management

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

A call to action to improve the visibility of research by nursing, midwifery and care staff.
[The article discusses the need to make research by medical staff accessible, noting a call to action from the English National Health Service (NHS) framework "Leading Change, Adding Value" (LCAV). Topics include the involvement of the organisation Council of Deans of Health (CoDH) in implementing the framework, the connection between nursing and health education, and the promotion of nursing and midwifery research.]
Available with an NHS OpenAthens password for eligible users

Clinical leadership in service redesign using Clinical Commissioning Groups: a mixed-methods study.
[Objectives: This research examined the extent to which, and the methods by which, clinicians stepped forward to take up a leadership role in service redesign using Clinical Commissioning Groups (CCGs) as a platform.]
Freely available online

Designing and evaluating vascular access training using educational theory.
Hulse AL. *British Journal of Nursing* 2018;27(2):S27-S33.

[Evidence illustrates many different approaches to learning. There has been a significant change in the medical education paradigm towards a more structured work-based competency assessed approach to learning. This paper explores the theoretical aspects of clinical skills learning and leadership theory in healthcare practice, placing emphasis on interprofessional and collaborative working and learning partnerships.]

*Available with an NHS OpenAthens password for eligible users*

**Team culture.**

['The RCP has produced a compendium of reports aiming to promote high-functioning teamworking in the medical setting. This present resource focuses on team culture and is one of the ‘Improving teams in healthcare’ series. The document will: Outline the features that impact on team culture; Describe the interaction between each of these features and Offer practical steps for improving team culture in a climate with limited resources.‘]

*Available with an NHS OpenAthens password for eligible users*

**The use of external change agents to promote quality improvement and organizational change in healthcare organizations: a systematic review.**
Alagoz E. *BMC Health Services Research* 2018;18(1):42.

[External change agents can play an essential role in
healthcare organizational change efforts. This systematic review examines the role that external change agents have played within the context of multifaceted interventions designed to promote organizational change in healthcare—specifically, in primary care settings.]

Freely available online

**Ward staff perceptions of the role of the advanced nurse practitioner in a ‘hospital at day’ setting.**
Halliday S. *British Journal of Nursing* 2018;27(2):92-97. [This article aims to examine ward staff perceptions on the role of the ‘hospital at day’ advanced nurse practitioner (ANP). This term is used locally to refer to a model first introduced into ‘hospital at night’ teams, in response to changes in working patterns of junior doctors, where an advanced nurse practitioner is based on the ward—the model was subsequently rolled out to daytime teams. Participants were interviewed individually using semi-structured interviews.]

Available with an NHS OpenAthens password for eligible users

**Events**

*You may be interested in this (these) forthcoming event(s):*

**Fighting Stigma in Mental Health and losing (Panel Discussion).**
["1 in 4 people suffer from mental illness" is routinely quoted in anti-stigma campaigns to normalise psychiatric disorder. However, does it trivialise and add to stigma?*
Anthony David (Professor of Cognitive Neuropsychiatry, NIHR Senior Investigator and Vice Dean Academic Psychiatry at the IoPPN) is joined by a panel with diverse perspectives: from personal experience and charities to media and academia. With the audience’s help they will explore innovative solutions to combat stigma.

Safra Lecture Theatre, Strand Campus
Date: 7th March, 2018, 6:00pm- 7:00pm
https://www.eventbrite.co.uk/e/the-kings-lectures-fighting-stigma-in-mental-health-and-losing-panel-discussion-tickets-40899696092

**Practical skills for time management and taking control.**
[In this BMA course, experienced trainers will help you take control of increasingly challenging workloads. You’ll be shown techniques that you can apply immediately. Increase your confidence and buy yourself more time to deliver the best care to your patients, and maintain a healthy work-life balance.]
BMA House, London
All day event on: 12th March, 2018
https://www.bma.org.uk/events/2018/march/time-management-masterclass-london-12-march

**The power to change minds - drama-based training.**
[Good drama has the power to change hearts and minds. It can challenge perceptions, improve understanding and create recognition and empathy in a ‘safe’, positive learning environment. AFTA Thought create drama-based training – dealing with difficult]
subjects, sensitively and sensibly, to enable positive change in the workplace. Courses running at PRH on 19 March and RSCH on 28 March. Contact Janet.Marshall@bsuh.nhs.uk for further info and to book.

Princess Royal Hospital
All day event on: 19th March, 2018
For more information, please contact Janet.Marshall@bsuh.nhs.uk.

Reports
The following report(s) may be of interest:

**Equality, Diversity and Human Rights Week 2018 - Communications Toolkit.**
NHS Employers; 2018.

[This toolkit provides support for communications teams to deliver local campaigns for this year's Equality, Diversity and Human Rights Week #EQW2018 (14-18 May 2018).]

Freely available online

**Learning from the vanguards: Spreading and scaling up change.**
NHS Confederation; 2018.

[This briefing explores the ten key factors that the vanguards have identified are crucial to encourage the
spread of initiatives. The publication forms part of a series developed by the NHS Confederation, NHS Clinical Commissioners, NHS Providers and Local Government Association.]
*Freely available online*

**Learning from the vanguards: Staff at the heart of new care models.**
NHS Confederation; 2018.
[This briefing looks at how the vanguards have broken down traditional organisational barriers across whole systems, how they have engaged staff in the programmes, communicated change and supported staff to work differently. The publication forms part of a series developed by the NHS Confederation, NHS Clinical Commissioners, NHS Providers and Local Government Association.]
*Freely available online*

**NHS hospital boards: caught on the horns of a dilemma?**
University of Birmingham; 2017.
[NHS boards have a statutory duty to ensure quality and safety in their organisation, but there is a dearth of research evidence as to how best to do this and the effectiveness of different board practices. In 2014, [DH] commissioned a suite of studies to examine the response to and impact of the Francis Inquiry. One of
these projects focused on the ways in which hospital boards had responded to the inquiry report, in particular in how they lead their organisation. (Includes links to reports)]
Freely available online