May 2018
Monthly Bulletin
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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 Multidisciplinary Discharge Timeout Checklist Improves Patient Education and Captures Discharge Process Errors.**
Gao MC. *Quality Management in Health Care* 2018;27(2):63-68.
[Abstract: To design and implement a discharge timeout checklist, and to assess its effects on patients’ understanding as well as the potential impact on preventable medical errors surrounding hospital discharges to home. Conclusions: A multidisciplinary discharge timeout directly involving the patient can be effective in targeting additional areas for patient education and in potentially reducing preventable adverse events.]

*Available with an NHS OpenAthens password for eligible users*

**Hospital-at-home Integrated Care Programme for the management of disabling health crises in older patients: comparison with bed-based Intermediate Care.**
[Conclusions: in our study, the extended CGA-based hospital-at-home programme was associated with*
shorter stay and favourable clinical outcomes. Future studies might test this intervention to the whole Catalan integrated care system.]

Available with an NHS OpenAthens password for eligible users

**Impact of tailored falls prevention education for older adults at hospital discharge on engagement in falls prevention strategies postdischarge: protocol for a process evaluation.**


*Freely available online*

**Pediatric Patient-Centered Transitions From Hospital to Home: Improving the Discharge Medication Process.**

Hospital Pediatrics 2017;(December):10.1542/hpeds.2017-0053. [Medications prescribed at hospital discharge can lead to patient harm if there are access barriers or misunderstanding of instructions. Filling prescriptions before discharge can decrease these risks. We aimed to increase the percentage of patients leaving the hospital with new discharge medications in hand to 70% by 18 months. We used sequential plan-do-study-act cycles from January 2015 to September 2016. ]

Available with an NHS OpenAthens password for eligible users

**Structured nurse-led follow-up for patients after discharge from the intensive care unit.**

Jónasdóttir RJ. *Journal of Advanced Nursing* 2018;74(3):709-723.

Available with an NHS OpenAthens password for eligible users
users

**Systematic review and meta-analysis of the effectiveness of pharmacist-led medication reconciliation in the community after hospital discharge.**
[Conclusions Pharmacists can identify and resolve discrepancies when completing medication reconciliation after hospital discharge, but patient outcome or care workload improvements were not consistently seen. Future research should examine the clinical relevance of discrepancies and potential benefits on reducing healthcare team workload.]
*Available with an NHS OpenAthens password*

**The feasibility of an interactive voice response system (IVRS) for monitoring patient safety after discharge from the ED.**
[Return ED visits are frequent and may be due to adverse events: adverse outcomes related to healthcare received. An interactive voice response system (IVRS) is a technology that translates human telephone input into digital data. Use of IVRS has been explored in many healthcare settings but to a limited extent in the ED. This study aims to determine the feasibility of using an IVRS to assess for adverse events after ED discharge.]
*Available with an NHS OpenAthens password for eligible users*

**Transferring skills in quality collaboratives focused**
on improving patient logistics.
[A quality improvement collaborative, often used by the Institute for Healthcare Improvement, is used to educate healthcare professionals and improve healthcare at the same time. Our research focused on quality improvement collaboratives aiming to improve patient logistics and tried to identify which knowledge and skills are required and to what extent these were enhanced during the QIC.]

Ward nurses' experiences of the discharge process between intensive care unit and general ward.
[Intensive care unit (ICU) discharges are challenging practices that carry risks for patients. Despite the existing body of knowledge, there are still difficulties in clinical practice concerning unplanned ICU discharges, specifically where there is no step-down unit. The aim of this study was to explore general ward nurses' experiences of caring for patients being discharged from an ICU.]

Available with an NHS OpenAthens password for eligible users

Reports
The following report(s) may be of interest:
Allied health professions supporting patient flow: a quick guide.
NHS Improvement; 2018.
https://improvement.nhs.uk/resources/allied-health-professions-ahps-supporting-patient-flow/
[This quick guide demonstrates how NHS emergency care can benefit from the skills of AHPs and highlights innovative service redesign and the delivery of new care models.]
Freely available online

Education

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 opportunity for inspiration: A student perspective of attending an occupational therapy conference.
[[Editorial] Conference attendance provides a valuable opportunity to present work to peers, network and share experience with professional colleagues, and keep abreast of new developments in research, policy and practice. BJOT’s editor-in-chief Christine Craik, will be attending the RCOT Annual Conference and the WFOT Congress; some members of our editorial board will be
[The failure of high-income countries, such as Ireland, to achieve a self-sufficient medical workforce has global implications, particularly for low-income, source countries.]

**Flipped classroom improves student learning in health professions education: a meta-analysis.**
Hew KF. *BMC Medical Education* 2018;18:38.
[Current evidence suggests that the flipped classroom approach in health professions education yields a significant improvement in student learning compared with traditional teaching methods.]

**Health workforce cultural competency interventions: a systematic scoping review.**
[Addressing health workforce cultural competence is a common approach to improving health service quality for culturally and ethnically diverse groups. Research evidence in this area is primarily focused on cultural competency training and its effects on practitioners' knowledge, attitudes, skills and behaviour. While improvements in measures of healthcare practitioner
cultural competency and other healthcare outcomes have been reported, there are concerns around evidence strength and quality.]

**Improving student nurses’ confidence in managing the acutely ill patient.**
[The Acute Illness Management (AIM) course was introduced into NHS trusts across Greater Manchester in 2002/03 for registered nurses. In preparation for the transition from student to registered nurse, the AIM course was then included in the final year of the undergraduate nursing programme. The aim of this study was to evaluate the impact of the AIM course on student nurses’ confidence in managing the acutely ill patient.]

*Available with an NHS OpenAthens password for eligible users*

**Innovation in assessment: building student confidence in preparation for unfamiliar assessment methods.**
[Innovative assessment methods in which students are active participants promote deeper learning. At the University of Nottingham, a group debate and a 'webfolio' were implemented as methods of assessment in the 2015 undergraduate midwifery curriculum, and were evaluated by students. Thematic analysis of the evaluations showed that students enjoyed undertaking innovative methods of assessment: however, thorough preparation of students is vital in fostering student confidence.]
Link lecturers’ views on supporting student nurses who have a learning difficulty in clinical placement.
King L. British Journal of Nursing 2018;27(3):141-145. [Literature that reports the experiences of facilitating reasonable adjustments for student nurses who have a learning difficulty (LD) in clinical placement from the viewpoint of link lecturers is limited and warrants further exploration. Research aim: to explore link lecturers’ views on reasonable adjustments in clinical placement and whether they are confident with their own knowledge of the processes involved.]
Available with an NHS OpenAthens password for eligible users

The personal and professional importance of post-registration postgraduate education.
Walker L. British Journal of Midwifery 2018;26(2):120-124. [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
Which resources are most helpful to support development of an ePortfolio?
Ryan JA. British Journal of Nursing 2018;27(5):266-271. [This study evaluates the benefit of resources available in developing and maintaining an undergraduate nursing student ePortfolio. A mixed-methods approach was taken during 2016, using an internet polling tool. The quantitative data identified that the most beneficial resource was the student workshops facilitated by student academic mentors (SAMs).]
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Why education matters: reflections on the last 50 years.
Rosser E. British Journal of Nursing 2018;27(3):161-161. [A personal narrative is presented in which the author reflects on her career in nursing and decision to become a nurse educator.]
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.

Fundamentals of mental health nursing: an essential
guide for nursing and healthcare students.
Clifton A. Wiley Blackwell. 2018. Library Shelf Location: WM 100.1 FUN.
[An accessible evidence-based introduction to the role of the mental health nurse. This comprehensive overview explores concepts of mental health, ethics and accountability, key nursing models to be aware of, and the prevalence, predisposing factors and features of the most commonly occurring mental health problems. The authors place mental health conditions and interventions within a wider holistic context and place recovery at the centre of mental health nursing practice.]
Available with appropriate registration or membership

Handbook of mindfulness : theory, research, and practice.
Brown KW. Guilford Press. 2015. Library Shelf Location: WM 507 HAN.
[Leading scholars explore mindfulness in the context of contemporary psychological theories as well as with the contemplative traditions. After surveying basic research from neurobiological, cognitive, emotional/affective, and interpersonal perspectives, the book examines interventions for behavioural and emotion dysregulation disorders, depression, anxiety, and addictions, and for physical health conditions.]
Available with appropriate registration or membership
Measuring Outcomes and Performances

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 evaluation of a near real-time survey for improving patients’ experiences of the relational aspects of care: a mixed-methods evaluation.  
[This study found that near real-time feedback from patients produced a modest improvement in relational care and made recommendations for trusts wishing to implement this approach.]  
Freely available online

Do the stars align’ Distribution of high-quality ratings of healthcare sectors across US markets.  
[Conclusions: Few US healthcare markets exhibit high-quality performance across four distinct healthcare service sectors, suggesting that high-quality care in one sector may not be dependent on or improve care quality in other sectors. Policies that promote accountability for quality across sectors (eg, bundled payments and shared quality metrics) may be needed to systematically improve quality across sectors.]  
Available with an NHS OpenAthens password

Measuring quality in community nursing: a mixed-methods study.  
[Current quality indicators for community nursing are of limited use and lack of nurse and service user involvement in indicator selection processes impacted negatively on their application.]

Freely available online

Reports

The following report(s) may be of interest:

**Health Foundation submission to PAC inquiry on sustainability and transformation in the NHS.**

[The Health Foundation responded to the Public Accounts Committee inquiry on sustainability and transformation in the NHS. There is no clear evidence that the model of the NHS, predominantly tax funded and free at the point of use, is unsustainable. However, there is plenty of evidence that continuing to deliver services in the way that we do, and our expectations of what services can deliver with the funding available is not sustainable.]

Freely available online

**Productivity of the English National Health Service: 2015/16 update.**

[This paper provides an update on the productivity growth of the NHS in England over 2014/15 to 2015/16. It finds that there has been a significant growth in NHS activity over this period, accompanied by a growth in staff. While the rate of
productivity in this period has also grown, from 2014/15 onwards, it has failed to outpace that of the economy.]

Freely available online

**The changing nature of regulation in the NHS.**
NHS Providers; 2018.

[Our latest report outlines the results of our fourth regulation survey and details trusts' experiences of regulation over the preceding 12 months. Our survey findings show that trusts are concerned that the regulatory framework is not keeping pace with the developments taking place on the ground. They highlighted that the oversight of STPs and ICSs risks becoming an extra layer of performance management.]

Freely available online

**The state of care in independent online primary health services**
Care Quality Commission (CQC); 2018.
http://www.cqc.org.uk/publications/major-report/state-care-independent-online-primary-health-services

[This publication presents findings from our programme of inspections of primary health care services provided online in the independent sector, such as those that provide GP consultations and prescriptions through websites and apps.]

Freely available online
Patient Safety

Articles

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[Abstract: To design and implement a discharge timeout checklist, and to assess its effects on patients’ understanding as well as the potential impact on preventable medical errors surrounding hospital discharges to home. Conclusions: A multidisciplinary discharge timeout directly involving the patient can be effective in targeting additional areas for patient education and in potentially reducing preventable adverse events.]
*Available with an NHS OpenAthens password for eligible users*

**Age and sex of surgeons and mortality of older surgical patients: observational study.**
Tsugawa Y. *BMJ* 2018;361:k1343.
[To investigate whether patients' mortality differs according to the age and sex of surgeons.]

**Excess mortality associated with weekend hospital admissions may be due to patient-level differences, rather than reduced staffing or services.**
de Cordova P B. *Evidence-Based Nursing* 2018;21(2):49.
[The 'weekend effect' is defined as a higher mortality risk for
patients admitted to the hospital on a weekend. In an attempt to explain why patients are at higher risk for death, researchers have focused on decreased resources including staffing and changes in service provision. However, differences in patient characteristics who are admitted on the weekend have not been fully explored. ]

Available with an NHS OpenAthens password

**Impact of tailored falls prevention education for older adults at hospital discharge on engagement in falls prevention strategies postdischarge: protocol for a process evaluation.**
*Freely available online*

**Providing feedback following Leadership WalkRounds is associated with better patient safety culture, higher employee engagement and lower burnout.**
[Conclusion: ...We suggest that when WalkRounds (WR) are conducted, acted on, and the results are fed back to those involved, the work setting is a better place to deliver and receive care as assessed across a broad range of metrics, including teamwork, safety, leadership, growth opportunities, participation in decision-making and the emotional exhaustion component of burnout...]

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**The influence of environmental conditions on safety management in hospitals: a qualitative study.**
[Previous research has shown that organisations generally shape their safety management approach along the lines of
control- or commitment-based management. Using a heuristic framework, based on the contextually-based human resource theory, we analysed how environmental pressures affect the safety management approach used by hospitals.]

**Web-based educational intervention improves enrolled nurses’ knowledge and performance with deteriorating patients.**
Lavoie P. *Evidence-Based Nursing* 2018;21(2):55. [Nurses who provide bedside care, including enrolled nurses are in a pivotal position to recognise, manage and report on signs and symptoms of patient deterioration. This study evaluated the effectiveness of a web-based educational intervention designed to improve enrolled nurses’ knowledge of the physiological compensatory mechanisms of deterioration as well as improve their skills in terms of assessment and management of and communication regarding patient deterioration] Available with an NHS OpenAthens password

**Reports**

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

**Spotlight on Safety Volume 10 March 2018**
Whittington Health; 2018. http://whittnet.whittington.nhs.uk/default.asp?c=25572 [Spotlight on Safety is Whittington Health’s regular patient safety update. Volume 10 is now available. It includes information on a new never event, looks at a radiology reporting incident, sets out learning points on medicines safety on JAC and gives a progress update on our STOPfalls campaign.] Only available via the Trust Intranet
Websites

The following website(s) may be of interest:

Safeguarding children newsletter
[Welcome to the Spring/Summer 2018 edition of Homerton's safeguarding children newsletter. Keep up to date with service updates, guidance and local and national safeguarding children news. ]
Only available via the Trust Intranet
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.

**A meta-ethnography of health-care professionals' experience of treating adults with chronic non-malignant pain to improve the experience and quality of healthcare.**
[This study highlights areas that help us to understand why the experience of health care can be difficult for patients and health-care professionals and, importantly, that health-care professionals can find it challenging not to find a diagnosis.] Freely available online

**Developmental coordination disorder, psychopathology and IQ in 22q11.2 deletion syndrome.**
Available with an NHS OpenAthens password for eligible users

**Economic evaluation and cost of interventions for cerebral palsy: a systematic review.**
[Prevention of CP would avoid significant economic burden. Some treatments and interventions have been shown to be cost-effective, although stronger evidence of clinical effectiveness is needed. ] Available with an NHS OpenAthens password for eligible users
Effectiveness of postdischarge interventions for reducing the severity of chronic pain after total knee replacement: systematic review of randomised controlled trials.
[The aim of this systematic review was to evaluate the effectiveness of postdischarge interventions commenced in the first 3 months after surgery in reducing the severity of chronic pain after TKR.]
*Freely available online*

Interventions to enhance coping after traumatic brain injury: A systematic review.
[Conclusions: There is insufficient evidence to support practice recommendations strongly. Targeting specific subgroups of people who have experienced TBI might allow the development of more effective coping interventions. Further a more unified concept of coping in TBI need to be articulated allowing larger scale evaluations.]
*Contact the library for a copy of this article*

Systematic review describing the effect of early mobilisation after dysvascular major lower limb amputations.
[This systematic review reveals a lack of evidence to determine whether early mobilisation interventions are beneficial to this vulnerable patient group. Nevertheless, ambulation from the first postoperative day with temporary prosthesis is possible among the heterogeneous population of dysvascular lower limb-amputated patients if the necessary
interdisciplinary team is dedicated to the task.]
Freely available online

The effectiveness of physical therapies for patients with base of thumb osteoarthritis: Systematic review and meta-analysis.
Ahern M. *Musculoskeletal Science and Practice* 2018;35:46-54.
[High quality evidence shows unimodal and multimodal physical therapy treatments can result in clinically worthwhile improvements in pain and function for patients with base of thumb OA.]
Available with an NHS OpenAthens password for eligible users

Guidelines

The following new guidance has recently been published:

EULAR revised recommendations for the management of fibromyalgia.
European League Against Rheumatism (EULAR);2018.
http://ard.bmj.com/content/76/2/318
[These recommendations are underpinned by high-quality reviews and meta-analyses. The size of effect for most treatments is relatively modest. We propose research priorities clarifying who will benefit from specific interventions, their effect in combination and organisation of healthcare systems to optimise outcome.]
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.

What evidence is there for the identification and management of frail older people in the emergency department? A systematic mapping review.
[A substantial body of evidence on interventions for frail and high-risk older people was identified and mapped, but evidence of their usefulness is inconclusive.]
Freely available online

A Multidisciplinary Discharge Timeout Checklist Improves Patient Education and Captures Discharge Process Errors.
Gao MC. Quality Management in Health Care 2018;27(2):63-68.
[Abstract: To design and implement a discharge timeout checklist, and to assess its effects on patients' understanding as well as the potential impact on preventable medical errors surrounding hospital discharges to home. Conclusions: A multidisciplinary discharge timeout directly involving the patient can be effective in targeting additional areas for patient education and in potentially reducing preventable adverse events.]
Available with an NHS OpenAthens password for eligible users

Being a pioneer in emergency medicine.
Marrow J. *Emergency Medicine Journal* 2018;35(3):http://dx.doi.org/10.1136/emermed-2017-207169. [An early A & E consultant gives a history of his journey through the profession.]

*Available with an NHS OpenAthens password for eligible users*

**Clinical and economic outcomes of nurse-led services in the ambulatory care setting: A systematic review.**
[With the increasing burden of chronic and age-related diseases, and the rapidly increasing number of patients receiving ambulatory or outpatient-based care, nurse-led services have been suggested as one solution to manage increasing demand on the health system as they aim to reduce waiting times, resources, and costs while maintaining patient safety and enhancing satisfaction.]

*Contact the library for a copy of this article*

**Hospital-at-home Integrated Care Programme for the management of disabling health crises in older patients: comparison with bed-based Intermediate Care.**
[Conclusions: in our study, the extended CGA-based hospital-at-home programme was associated with shorter stay and favourable clinical outcomes. Future studies might test this intervention to the whole Catalan integrated care system.]

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**Pediatric Patient-Centered Transitions From Hospital to Home: Improving the Discharge Medication Process.**
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patient harm if there are access barriers or misunderstanding of instructions. Filling prescriptions before discharge can decrease these risks. We aimed to increase the percentage of patients leaving the hospital with new discharge medications in hand to 70% by 18 months. We used sequential plan-do-study-act cycles from January 2015 to September 2016. 

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The feasibility of an interactive voice response system (IVRS) for monitoring patient safety after discharge from the ED.


[Return ED visits are frequent and may be due to adverse events: adverse outcomes related to healthcare received. An interactive voice response system (IVRS) is a technology that translates human telephone input into digital data. Use of IVRS has been explored in many healthcare settings but to a limited extent in the ED. This study aims to determine the feasibility of using an IVRS to assess for adverse events after ED discharge.]

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Ward nurses' experiences of the discharge process between intensive care unit and general ward.


[Intensive care unit (ICU) discharges are challenging practices that carry risks for patients. Despite the existing body of knowledge, there are still difficulties in clinical practice concerning unplanned ICU discharges, specifically where there is no step-down unit. The aim of this study was to explore general ward nurses' experiences of caring for patients being discharged from an ICU.]
Available with an NHS OpenAthens password for eligible users

Guidelines

The following new guidance has recently been published:

**Emergency and acute medical care in over 16s: service delivery and organisation.**
National Institute for Health and Care Excellence (NICE); 2018.
https://www.nice.org.uk/guidance/ng94
[This guideline covers organising and delivering emergency and acute medical care for people aged over 16 in the community and in hospital. It aims to reduce the need for hospital admissions by giving advanced training to paramedics and providing community alternatives to hospital care. It also promotes good-quality care in hospital and joint working between health and social services.]
Freely available online

**Planning, assuring and delivering service change for patients.**
[This guidance is designed to be used by those considering, and involved in, substantial service change to navigate a clear path from inception to implementation. It will support commissioners and providers to consider how to take forward their proposals, including effective public involvement, enabling them to reach robust decisions on change in the best interests of their patients.]
Freely available online
Reviewing and Assessing Service Redesign and/or Change Proposals: RCN guidance.
Royal College of Nursing (RCN); 2018.
https://www.rcn.org.uk/professional-development/publications/pdf-006911
[Service redesign may be required to improve patient pathways, move care out of hospitals closer to patients' homes, maximise efficiency or a combination of all these factors. This guidance is intended to assist those responsible for undertaking the process of reviewing and assessing proposals for service redesign and change.]
Freely available online

Reports

The following report(s) may be of interest:

Allied health professions supporting patient flow: a quick guide.
NHS Improvement; 2018.
https://improvement.nhs.uk/resources/allied-health-professions-ahps-supporting-patient-flow/
[This quick guide demonstrates how NHS emergency care can benefit from the skills of AHPs and highlights innovative service redesign and the delivery of new care models.]
Freely available online

Commissioning a community pharmacy Minor Ailment Service (business case)
Pharmaceutical Services Negotiating Committee (PSNC); 2018.
https://psnc.org.uk/services-commissioning/commissioning-toolkit-programme/
[As part of PSNC’s work to support LPCs to get local services...]

Freely available online
commissioned and to ensure services are costed correctly, PSNC is developing template toolkits for a range of locally commissioned services, the first of which is for Minor Ailment Services. It has resources to assist with the commissioning of a service, for example, a costing toolkit; a business case; service specification; implementation plan; and resources to notify local GP practices about the commissioning of a new service.

Freely available online

Health Foundation responds to Health and Social Care Committee inquiry into integrated care.
The Health Foundation; 2018.
[The Health Foundation submitted evidence to the Commons Health and Social Care Select Committee inquiry on integrated care. In their response, they laid out the key challenges facing STPs and outlined their evidence on transformation and whole-system change. They discussed looking beyond short-term demand management, and ensuring national programmes are aligned and support local action. ]
Freely available online

How should payment systems evolve in the new era of integrated care?
Nuffield Trust; 2018.
[Dr Richard Lewis and George Agathangelou look at the strengths and weaknesses of different approaches to funding integrated care – arguing that a successful solution must be easy to understand and aligned to participants’ core mission and values. ]
Freely available online
Managing the hospital and social care interface: interventions targeting older adults.
Nuffield Trust; 2018.
[Given the national policy drive for better integrated care across sectors, what examples already exist of individual hospitals and social care providers working together to reduce delayed transfers of care, length of hospital stay and admissions for older people - and how successful are they? ]
Freely available online

Messages on the future of domiciliary care services.
Institute of Public Care (IPC); 2018.
http://ipc.brookes.ac.uk/publications/Messages-on-the-future-of-domiciliary-care-services.html
[Professor John Bolton and Dr Jane Townson (Somerset Care) offer their own experience and suggestions on the what and the how (i.e. price, supply, demand, service design and innovation) requires specific consideration to effectively deliver outcomes through domiciliary care services in the future. They describe the importance of transparency and good working relationships between commissioners and providers as being critical in this area.]
Freely available online