



Current awareness for Nursing Recent guidelines and reports, articles and websites April 2021

Items relating specifically to Covid-19 start on page 6.

Reports

The following report(s) may be of interest:

Case study: Integrated End of Life Care with a population data dashboard. [Video]

North East Essex Health and Wellbeing Alliance; 2021.

https://www.youtube.com/watch?v=tGWUNZB9PBU

[North East Essex Health and Wellbeing Alliance has developed an End-of-Life Board with representation across health and social care organisations including the third sector.]

Freely available online

Engaging patients and families in safety: recommendations, resources, and case examples.

Institute for Healthcare Improvement (IHI); 2021.

http://www.ihi.org/communities/blogs/engaging-patients-and-families-in-safety-recommendations-resources-and-case-examples

[Evidence-based practices, widely known and effective interventions, exemplar case examples, and newer innovations to support the US "Safer Together: A National Action Plan to Advance Patient Safety."] Freely available online

Strong Integrated Care Systems Everywhere. [Video]

NHS England; 2021.

https://www.england.nhs.uk/integratedcare/

[Video explaining how Integrated Care Systems (ICSs) embed collaboration across local councils, the NHS and voluntary and community organisations, helping local services to respond to the challenges of the pandemic and beyond.]

Freely available online

Websites

Evidently Cochrane: Evidence for Nursing

Cochrane: 2021

Links to the latest evidence and resources for nurses and support staff arranged by topic: includes featured reviews on: wound cleaning for treating venous leg ulcers, negative-pressure wound therapy for surgical sounds; pressure injury, perioperative care, emergency care and care of the newborn.

Articles

The following article(s) may be of interest:

Clinical studies on platelet-rich plasma (PRP) therapy for chronic cutaneous ulcers: a systematic review and metaanalysis of randomized controlled trials.

Qu S. Advances in Wound Care 2021;:DOI: 10.1089/wound.2020.1186.

[Platelet-rich plasma (PRP) may be a potential drug for treatment of chronic refractory ulcers, which increase the risk of systemic infection and local canceration. However, the efficacy and safety of clinical application of PRP are still controversial. Thus, this study was aimed to assess the efficacy and safety of PRP in patients with chronic ulcers. Future directions: Our findings shows that PRP may be a beneficial treatment of chronic skin ulcers and that APRP may be much safer than HPRP.]

Contact the library for a copy of this article

Clinical supervision for advanced practitioners.

Reynolds J. British Journal of Nursing 2021;30(7):422-424.

[Effective clinical supervision is an essential component in the development of advanced clinical practitioners (ACPs). When delivered correctly clinical supervision can be, as Milne and Martin (2019) suggested, a social interaction between supervisor and supervisee where both participants can work through shared decision making, using support and encouragement.]

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Clinical teacher self-efficacy: a concept analysis.

Bourne M. Nurse Education in Practice 2021;52:103029.

[Self-efficacy is a well-researched concept and a key component of Bandura's Social Cognitive Theory. Teacher self-efficacy is widely researched within education; it affects student achievement and motivation as well as teacher performance and commitment. Minimal information exists on teacher self-efficacy within clinical settings of practice professions which likely affects patient outcomes.]

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<u>Communication and role clarity inform TeleICU use: a qualitative analysis of opportunities and barriers in an established program using AACN framework.</u>

Krupp A. BMC Health Services Research 2021;21(1):277.

[Flexible, provider-driven approaches for integrating teleICU services into daily practice may help define the future use of the teleICU model's applicability. Future work should focus on the importance of effective communication and role clarity in integrating the emerging teleICU services into teleICU/ICU practice.]

<u>Crossing knowledge boundaries: health care providers' perceptions and experiences of what is important to achieve more person-centered patient pathways for older people.</u>

Olsen CF. BMC Health Services Research 2021;21(1):310.

[A thematic analysis resulted in five themes which outline central elements of the HCPs' perceptions and experiences relevant to achieving more person-centered patient pathways: 1) Finding common ground through the mapping of the patient journey; 2) the importance of understanding the whole patient pathway; 3) the significance of getting to know the older patient; 4) the key role of home care providers in the patient pathway; and 5) ambiguity toward checklists and practice implementation.]

<u>Culturally tailored therapeutic interventions for people affected by dementia: a systematic review and new conceptual model.</u>

James T. The Lancet Healthy Longevity 2021;2(3):E171-E179.

[Most people with dementia live in low and middle-income countries (LMICs) and there is an increased dementia prevalence in some minority ethnic groups in high-income countries. However, most interventions are devised for majority populations in high-income countries. We systematically searched 11 electronic databases for culturally tailored interventions for people with dementia and their family carers in LMICs and minority ethnic groups, without limit on language or date.]

Freely available online

<u>Decision-Making Authority During Tele-ICU Care Reduces Mortality and Length of Stay: A Systematic Review and Meta-Analysis.</u>

Kalvelage C. Critical Care Medicine 2021;:doi: 10.1097/CCM.000000000004943.

[In contrast to expert tele-consultations, decision-making authority during tele-ICU care reduces mortality and length of stay in the ICU. This work confirms the urgent need for evidence-based ICU telemedicine guidelines and reveals potential benefits of uniform regulations regarding the level of authority when providing tele-ICU care.] Contact the library for a copy of this article

<u>Does interprofessional team-training affect nurses' and physicians' perceptions of safety culture and communication practices?</u> Results of a pre-post survey study.

Schmidt J. BMC Health Services Research 2021;21(1):341.

[This study suggest that interprofessional team-trainings of a small group of professionals can successfully be transferred into clinical practice and indicates the importance of safety culture aspects for such transfer processes. Thus, we recommend the consideration of safety culture aspects before starting a training intervention.]

<u>Efficacy of topical cadexomer iodine treatment in chronic wounds: Systematic review and meta-analysis of comparative clinical trials.</u>

Woo K. International Wound Journal 2021;:doi: 10.1111/iwj.13560...

[The aim of this study was to summarise the clinical evidence supporting almost 40 years of topical cadexomer iodine (CIOD) use in wound bed preparation by removing barriers to healing such as exudate, slough, bioburden, and infection and allowing chronic wound progression. This meta-analysis demonstrates the efficacy of CIOD on chronic wounds through removal of barriers to healing. CIOD should be considered in wound bed preparation and treatment protocols.]

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Nurses' role in curbing the pandemic affirms their wider remit in disease prevention and promoting vaccination. Newland R. *British Journal of Nursing* 2021;30(6):382-383.

[Creating immunity through vaccination is second only to clean water in the fight against infectious disease-related deaths worldwide (Andre et al, 2008). Thankfully, vaccination means that individuals, families and communities in the UK no longer experience the devastating effects of more than 20 diseases (Jakab, 2020). Although primarily used to prevent disease, as in the case of smallpox, vaccines also reduce transmission and severity of disease.]

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Nursing interventions for pressure injury prevention among critically ill patients: A systematic review.

Alshahrani B. Journal of Clinical Nursing 2021;:doi: 10.1111/jocn.15709...

[Conclusions: Nurses are well qualified to lead in the prevention of pressure injuries. Every critically ill patient requires interventions to prevent pressure injuries, and the prevention of PIs should be considered a complex intervention. Nurses must plan and implement evidence-based care to prevent all types of pressure injuries, including medical device-related pressure injuries. Education and training programmes for nurses on PI prevention are important for prevention of pressure injuries.]

Contact the library for a copy of this article

<u>Patient safety culture improves during an in situ simulation intervention: a repeated cross-sectional intervention</u> study at two hospital sites.

Schram A. BMJ Open Quality 2021;10(1):DOI: 10.1136/bmjoq-2020-001183.

[Objectives: This study aimed to investigate staff's perceptions of patient safety culture (PSC) in two Danish hospitals before and after an in situ simulation intervention. Conclusions: Safety attitude outcomes indicate an improvement in PSC from before to after the in situ simulation intervention period. However, it is possible that an effect is more profound in an acute care hospital versus an elective setting.]

Patient safety: tensions, challenges and opportunities.

Tingle J. British Journal of Nursing 2021;30(6):378-379.

[In all fields of academic study there are 'seminal' books, reports and policy documents that have been highly influential and change-making. We all have our own favourites and my top three are An Organisation With a Memory (Department of Health, 2000), the Francis report (2013) and Opening the Door to Change (Care Quality

Commission (CQC), 2018). These reports all brought new knowledge and perspectives to patient safety and continue to influence policy direction.]

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<u>Predictive validity of the braden scale for pressure injury risk assessment in adults: A systematic review and meta-analysis.</u>

Huang C. Nursing Open 2021;:DOI: 10.1002/nop2.792.

[Conclusion: The evidence indicated that the Braden Scale had a moderate predictive validity. It was more suitable for mean age

Freely available online

Quality improvement report: setting up a hospital at night service, limitations of bleep filtering and using an electronic task management system.

Sagib A. BMJ Open Quality 2021;10(1):DOI: 10.1136/bmjog-2020-001007.

[Developing an 'hospital at night' (H@N) service still remains a major piece of work across some National Health Service (NHS) trusts and effective multidisciplinary team communication is vital to implementing change of this magnitude. The H@N project at our trust remains a work in progress but a lot of positive changes have been delivered since this project was undertaken.]

Randomised controlled trials of alcohol-based surgical site skin preparation for the prevention of surgical site infections: Systematic review and meta-analysis.

Peel TN. Journal of Clinical Medicine 2021;:doi: 10.3390/jcm10040663...

[Conclusions: The use of chlorhexidine-alcohol skin preparations was associated with a reduced risk of SSI compared to iodophor-alcohol agents. However, the efficacy of alcohol-based preparation agents may differ according to the surgical procedure group. This difference must be interpreted with caution given the low number of studies and potential for bias, however, it warrants further investigation into the potential biological and clinical validity of these findings.]

Relationships between nurse managers' work activities, nurses' job satisfaction, patient satisfaction, and medication errors at the unit level: a correlational study.

Nurmeksela A. BMC Health Services Research 2021;21(1):296.

[The findings suggest that nurse managers should focus on improving nursing practices by managing and organizing nurses' work in a way that makes their employees feel supported, motivated and secure. Furthermore, nurse managers should adopt a leadership style that emphasizes safe and patient-centered care.]

Simulation-based evaluation of operating room management policies.

Schoenfelder J. BMC Health Services Research 2021;21(1):271.

[Our simulation-based approach allows operating theater managers to test a multitude of potential changes in operating room management without disrupting the ongoing workflow. The close collaboration between management and researchers in the design of the simulation framework and the data analysis has yielded immediate benefits for the scheduling policies and data collection efforts at our practice partner.]

<u>Systematic early versus late mobilization or standard early mobilization in mechanically ventilated adult ICU patients: systematic review and meta-analysis.</u>

Menges D. Critical Care 2021;:doi: 10.1186/s13054-020-03446-9.

[This review aimed to determine the effectiveness of systematic early mobilization in improving muscle strength and physical function in mechanically ventilated intensive care unit (ICU) patients. Conclusion: The evidence regarding a benefit of systematic early mobilization remained inconclusive. However, our findings indicate that the larger the difference in the timing between the intervention and the comparator, the more likely an RCT is to find a benefit for early mobilization.]

Freely available online

The management of urinary tract infections in older patients within an urgent care out-of-hours setting. Dexter J. British Journal of Nursing 2021;30(6):334-342.

[This article critically analyses the prevalence, assessment and management of urinary tract infections (UTIs) in patients over the age of 65, in an urgent care out-of-hours service in order to enhance care. It is undertaken from the perspective of working as an Advanced Nurse Practitioner (ANP). A synopsis of UTI is presented, examining the epidemiology and aetiology.]

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The transition from nursing student to practicing nurse: an integrative review of transition to practice programs.

Hampton K. *Nurse Education in Practice* 2021;52:103031.

[The transition from student to novice is a difficult time. Although the novice nurse is excited to start working, the nurse struggles with acclimating to a new role with new responsibilities and the need to reconcile disparities between what was taught in school and what is practiced in the real world. To lessen the impact of the transition experience, health care organizations have implemented transition-to-practice programs including orientations, preceptorships, and residencies.]

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The urgent need to improve health professionals' communication skills.

Tingle J. British Journal of Nursing 2021;30(7):448-449.

[The author discusses some recent reports that consider how health professionals communicate with patients. There are certain general expectations that are held by most people when they deal with each other, particularly in a professional capacity. There will be a general recognition that it is poor practice to talk to the person in a condescending tone or other inappropriate manner, and that clear explanations should always be given and material risks, options and likely outcomes stated.]

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<u>Vitamin D supplementation to prevent acute respiratory infections: a systematic review and meta-analysis of aggregate data from randomised controlled trials.</u>

Jolliffe DA. *The Lancet Diabetes & Endocrinology* 2021;:doi.org/10.1016/S2213-8587(21)00051-6.

[Review of 46 RCTs (n=75,541) found a lower proportion of participants receiving vitamin D supplementation had acute respiratory tract infections vs placebo (61.3% vs 62.3%, OR 0.92, 95%CI 0.86-0.99). Authors highlight the relevance of these findings to COVID-19 is unknown.]

Freely available online

What does the patient have to say? Valuing the patient experience to improve the patient journey.

Gualandi R. BMC Health Services Research 2021;21(1):347.

[By contributing to the literature on how patient-reported data could be collected and used in hospital quality improvement, this study opens the debate about the use of real-time focused data. Further studies should explore how to use patient-reported data effectively (including what the patient reports are working well) and how to improve hospital processes by profiling patients' needs and defining the appropriate methodologies to capture the experiences of vulnerable patients.]

Podcasts

Well Pod by Imperial College Healthcare NHS Trust

Imperial College Healthcare NHS Trust; 2021.

https://podcasts.google.com/feed/aHR0cHM6Ly9hbmNob3IuZm0vcy81MWJhYjlmOC9wb2RjYXN0L3Jzcw==

[Well Pod is a series of wellbeing podcasts created for staff and brought to you by staff from across Imperial College NHS Trust. The series will cover a range of wellbeing topics – like short breathing exercises from our yoga teachers, psychological wellbeing from our leadership team and healing after trauma from our in-house counsellors. Well Pod is designed to give you on-the-go wellbeing support, information and exercises, ready for you to listen to whenever and wherever works for you.]

Freely available online

Awards

RCN Nursing Awards.

Royal College of Nursing (RCN); 2021.

https://rcni.com/nurse-awards

[In the most challenging time in NHS history, the RCN Nursing Awards (formerly the RCNi Nurse Awards) are back to recognise excellence in nursing and healthcare. The 2021 awards acknowledge the outstanding efforts, commitment and achievements made by the whole of the nursing community. Deadline: 30th April 2021.]

Freely available online

The Learning Awards.

The Learning Awards; 2021.

https://thelearningawards.com/

[Gold, silver and bronze awards are made in each category. The awards can be entered by any company, organisation or individual who excel in the field of learning and innovative approaches. Deadline: 24th September 2021.]

Survey

The National Education and Training Survey (NETS).

Health Education England (HEE); 2021.

https://www.hee.nhs.uk/our-work/quality/national-education-training-survey

[This survey asks students to provide feedback on their time in clinical placements. The results offer universities, colleges, health care placement providers and Health Education England further insight into the quality of the clinical learning environment. This year, as students may be undertaking clinical placements during pandemic surges, the survey provides an additional opportunity to understand their experience and any impact on the quality of training.] *Freely available online*

Covid-19

Guidelines

COVID-19 rapid guideline: managing COVID-19.

National Institute for Health and Care Excellence (NICE); 2021.

https://www.nice.org.uk/guidance/ng191

[This guideline covers the management of COVID-19 for children, young people and adults in all care settings. It brings together our existing recommendations on managing COVID-19 so that healthcare staff and those planning and delivering services can find and use them more easily. The guideline includes new recommendations on therapeutics, and we will update the guideline further as new evidence emerges.]

Freely available online

COVID-19 rapid guideline: rheumatological autoimmune, inflammatory and metabolic bone disorders.

National Institute for Health and Care Excellence (NICE); 2021.

https://www.nice.org.uk/guidance/ng167

[On 31 March 2021, NICE integrated content from the NHS England specialty guide on rheumatology during the coronavirus pandemic into this guideline. This includes information on making treatment decisions based on the person's condition and their medicines, advice on shielding and self-isolation, and recommendations on organising services based on COVID-19 prevalence.]

Freely available online

COVID-19 vaccination: blood clotting information for healthcare professionals.

Public Health England (PHE); 2021.

https://www.gov.uk/government/publications/covid-19-vaccination-blood-clotting-information-for-healthcare-professionals

[Information for healthcare professionals on blood clotting following COVID-19 vaccination.] *Freely available online*

<u>Guidance produced from the Expert Haematology Panel (EHP) focussed on Covid-19 Vaccine induced Thrombosis</u> and Thrombocytopenia (VITT)

British Society of Haematology; 2021.

https://b-s-h.org.uk/media/19530/guidance-version-13-on-mngmt-of-thrombosis-with-thrombocytopenia-occurring-after-c-19-vaccine 20210407.pdf

[There are currently no robust data to inform management of this condition. In the absence of evidence, these are pragmatic guidelines based on experience of managing alternative similar conditions and the theoretical risks and benefits of interventions. As evidence emerges, recommendations are expected to change. Patient management should be individualised according to specific circumstances.]

Freely available online

<u>Guidelines recommend measures to manage acute and chronic conditions during the COVID-19 pandemic:</u> updated.

BMJ Best Practice; 2021.

https://bestpractice.bmj.com/topics/en-us/3000190/

[Further guidelines have been published to inform the management of patients with coexisting conditions during the COVID-19 pandemic. Updates within the following topics: Patients requiring anticoagulation; Mental health of children and adolescents; Acute kidney injury; Community-acquired pneumonia; Hospital-acquired pneumonia; Learning disability; Non-ST-elevation myocardial infarction (NSTEMI); Palliative care; ST-elevation myocardial infarction (STEMI); Tuberculosis.]

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Management of patients presenting to the Emergency Department/ Acute Medicine with symptoms

Royal College of Emergency Medicine (RCEM); 2021.

https://www.rcem.ac.uk/docs/Policy/ED-AM%20%20Vaccine%20pathway%20concerns%20-%20RCP%20-%20SAM%20-%20RCEM.pdf

[The condition of concern is Covid-19 Vaccine induced Thrombosis and Thrombocytopenia (VITT).] Freely available online

Website

Covid-19 evidence: a Cochrane round-up

Cochrane: 2021

A blog rounding up the Cochrane evidence on COVID-19

Reports

Aerosols and making spaces safe.

IRIHS, University of Oxford; 2021.

https://www.phc.ox.ac.uk/research/resources/aerosols-and-making-spaces-space

[A series of animated video summaries about aerosols and preventing the spread of COVID-19. Based on reviews undertaken by Professor Trish Greenhalgh from the IRIHS team in collaboration with academic colleagues.]

<u>HElping Alleviate the Longer-term consequences of COVID-19 (HEAL-COVID): a national platform trial.</u> HEAL-COVID; 2021.

https://www.heal-covid.net/about/

[This study, which will enrol patients admitted to hospital with Covid-19 who are about to be discharged, will investigate whether apixaban (for 2 weeks) or atorvastatin (for 12 months) could prevent or reduce long-term outcomes for patients with Covid-19.]

Information about vaccines.

Nursing and Midwifery Council (NMC); 2021.

https://www.nmc.org.uk/news/coronavirus/vaccines/

[A national protocol is also being developed to enable those who are registered health and care professionals who do not normally vaccinate (this may include nursing associates in England) and people who are not registered health and care professionals (this may include student nurses, student midwives and student nursing associates) to safely administer a Covid-19 or flu vaccine.]

Freely available online

Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK.

Office for National Statistics (ONS); 2021.

https://www.gov.uk/government/statistics/prevalence-of-ongoing-symptoms-following-coronavirus-covid-19-infection-in-the-uk

[Estimates of the prevalence of 'long COVID' in the UK, using Coronavirus (COVID-19) Infection Survey data to 6 March 2021. Over the four-week period ending 6 March 2021, an estimated 1.1 million people in private households in the UK reported experiencing long COVID (symptoms persisting more than four weeks after the first suspected coronavirus (COVID-19) episode that are not explained by something else).] Freely available online

Articles

<u>Association between Clinical Frailty Scale score and hospital mortality in adult patients with COVID-19 (COMET):</u> an international, multicentre, retrospective, observational cohort study.

Sablerolles R. The Lancet Healthy Longevity 2021;2(3):E163-E170.

[During the pandemic, the scarcity of resources has necessitated triage of critical care for patients with the disease. In patients aged 65 years and older, triage decisions are regularly based on degree of frailty measured by the Clinical Frailty Scale (CFS). The CFS could also be useful in patients younger than 65 years. We aimed to examine the association between CFS score and hospital mortality and between CFS score and admission to intensive care in patients of all ages with COVID-19.]

Freely available online

Association between pre-existing respiratory disease and its treatment, and severe COVID-19: a population cohort study.

Aveyard P. The Lancet Respiratory Medicine 2021;:https://doi.org/10.1016/S2213-2600(21)00095-3.

[The risk of severe COVID-19 in people with asthma is relatively small. People with COPD and interstitial lung disease appear to have a modestly increased risk of severe disease, but their risk of death from COVID-19 at the height of the epidemic was mostly far lower than the ordinary risk of death from any cause. Use of inhaled steroids might be associated with a modestly increased risk of severe COVID-19.]

Freely available online

Do Systemic Corticosteroids Reduce Mortality in Critically III Adult Patients With COVID-19?

Yoo MJ. Annals of Emergency Medicine 2021;77(4):407-409.

[Corticosteroids are associated with reduced rates of all-cause mortality in critically ill adult patients receiving respiratory support who have suspected or confirmed coronavirus disease 2019.]

Inhaled budesonide in the treatment of early COVID-19 (STOIC): a phase 2, open-label, randomised controlled trial.

Ramakrishnan S. *The Lancet Respiratory Medicine* 2021;:https://doi.org/10.1016/S2213-2600(21)00160-0. [Early administration of inhaled budesonide reduced the likelihood of needing urgent medical care and reduced time to recovery after early COVID-19.]

Freely available online

Multisystem inflammatory syndrome in pediatric COVID-19 patients: a meta-analysis.

Duchesne J. World Journal of Pediatrics 2021;:doi: 10.1007/s12519-021-00419-y...

[Conclusions: Recognizing the typical and atypical presentation of the multisystem inflammatory syndrome in pediatric COVID-19 patients has important implications in identifying children at risk. Monitoring cardiac and renal decompensation and early interventions in patients with multisystem inflammatory syndrome is critical to prevent further morbidity.]

Freely available online

Post-covid syndrome in individuals admitted to hospital with covid-19: retrospective cohort study.

Ayoubkhani D. BMJ 2021;372:n693.

[Individuals discharged from hospital after covid-19 had increased rates of multiorgan dysfunction compared with the expected risk in the general population. The increase in risk was not confined to the elderly and was not uniform across ethnicities. The diagnosis, treatment, and prevention of post-covid syndrome requires integrated rather than organ or disease specific approaches, and urgent research is needed to establish the risk factors.]

Ten scientific reasons in support of airborne transmission of SARS-CoV-2.

The Lancet; 2021.

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00869-2/fulltext

[Heneghan and colleagues' systematic review, funded by WHO, published in March, 2021, as a preprint, states: "The lack of recoverable viral culture samples of SARS-CoV-2 prevents firm conclusions to be drawn about airborne transmission". This conclusion, and the wide circulation of the review's findings, is concerning because of the public health implications.]

Freely available online

Update to living systematic review on drug treatments for covid-19.

BMJ 2021;372:n858.

[This living systematic review by Siemieniuk and colleagues (BMJ 2020;370:m2980) has been updated. The latest version of this living systematic review includes results for new interventions angiotensin-converting enzyme inhibitors, anakinra, full dose anticoagulation, ivermectin, ivermectin plus doxycycline, JAK inhibitors, lopinavir-ritonavir plus interferon-beta, peginterferon lambda, proxalutamide, sulodexide, vitamin C, and vitamin D (but certainty is generally low or very low).]

Update to living WHO guideline on drugs for covid-19.

BMJ 2021;372:n860.

[The latest version of this WHO living guidance provides a recommendation against ivermectin in patients with covid-19 regardless of disease severity, except in the context of a clinical trial.]

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