

Current awareness for Nursing Recent guidelines and reports, articles and websites December 2020

Items relating specifically to Covid-19 start on page 8

Guidelines

The following new guidance has recently been published:

Advancing mental health equalities strategy

NHS England (NHSE); 2020.

https://www.england.nhs.uk/publication/advancing-mental-health-equalities-

strategy/?utm_source=The%20King%27s%20Fund%20newsletters%20%28main%20account%29&utm_medium=ema il&utm_campaign=11901608_NEWSL_HMP%202020-10-20&dm_i=21A8%2C733C8%2CJKBRTL%2CSNCWU%2C1_

[This strategy summarises the core actions that we all need to take to bridge the gaps for communities fairing worse than others in mental health services. It is also an important element of the overall NHS plans to accelerate action to address health inequalities in the next stage of responding to COVID-19.] *Freely available online*

Aerosol generation during airway management

Difficult Airway Society; 2020.

https://das.uk.com/node/592

[The precautionary principle should be adhered to and while there is uncertainty HCW safety should be prioritised. Public Health bodies from England, Scotland, Wales and Northern Ireland and NERVTAG may update their guidance in the light of the evolving evidence base, but until then, our recommendation is to maintain current standards of protection against aerosol transmission during airway management.] *Freely available online*

BDA Critical Care Specialist Group COVID-19 Best Practice Guidance: Feeding Patients on Critical Care Units in the Prone Position (awake and sedated). Second Edition.

British Dietetic Association (BDA); 2020.

https://www.bda.uk.com/resource/best-practice-guidance-enteral-feeding-in-prone-position.html

[Placing the patient in the prone position is a strategy frequently undertaken for patients with COVID-19, particularly in mechanically ventilated patients during the first surge. Whilst there is little published evidence regarding enteral feeding in the prone position it has historically been thought to carry some risk of aspiration of gastric contents.] *Freely available online*

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

BMJ Best Practice; 2020.

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

[Further guidelines have been published to inform the management of patients with coexisting conditions during the COVID-19 pandemic. New this update: Chronic obstructive lung disease (updated), Diabetes (type 1) (updated),

Haematopoietic stem cell transplantation (updated), Substance use disorders (updated). 8 December.] Available with an NHS OpenAthens password

National infection control campaigns led to a rapid decline in superbug infections in UK intensive care units. NIHR Evidence; 2020.

https://evidence.nihr.ac.uk/alert/infection-control-campaigns-reduced-superbugs-in-uk-icus/

[NIHR Alert. There was a 97% reduction in MRSA bloodstream infections in ICU patients between 2007 and 2016, and a 78% decrease in bloodstream infections overall, demonstrating the success of the national drive to control infection. However, the decrease in bloodstream infections has levelled off since 2012. This indicates that any further reductions may require a new approach.]

Freely available online

Transformation of urgent and emergency care: models of care and measurement

NHS England & NHS Improvement; 2020.

https://www.england.nhs.uk/wp-content/uploads/2020/12/Transformation-of-urgent-and-emergency-care_models-of-care-and-measurement-report_Final.pdf

[The NHS National Medical Director was asked in June 2018 to review access standards to ensure that they measure what matters most both to patients and clinically. Building on The NHS Long Term Plan, we set out here the next steps to transform urgent and emergency care for patients, drawing on the learning from the coronavirus pandemic and building on the findings of the Clinically-led Review of Standards (CRS).] *Freely available online*

Websites

Hampshire and Isle of Wight personalised care: case study

Hampshire and Isle of Wight Sustainability and Transformation Partnership; 2020. https://personalisedcare.hiowhealthandcare.org/

[The web-site includes access to resources to help promote personalised care as well as digital self- care tools and other resources for practice websites. There is also information about our work in social prescribing, as well as opportunities to get involved by reading about our work in personalised care across Hampshire and the Isle of Wight, signing up for training and events and engaging with stories where personalised care has made a difference in our communities.]

Freely available online

Reports

The following report(s) may be of interest:

Busting bureaucracy: empowering frontline staff by reducing excess bureaucracy in the health and care system in England.

Department of Health and Social Care (DHSC); 2020.

<u>https://www.gov.uk/government/consultations/reducing-bureaucracy-in-the-health-and-social-care-system-call-for-evidence/outcome/busting-bureaucracy-empowering-frontline-staff-by-reducing-excess-bureaucracy-in-the-health-and-care-system-in-england</u>

[Government response to a consultation held July to September 2020 on reducing bureaucracy in the health and social care system. The consultation raised six main areas of concern and highlights changes during COVID-19 and sets out 8 priority areas for action.]

Freely available online

Improving flow along care pathways: Learning from the Flow Coaching Academy programme.

The Health Foundation; 2020.

https://www.health.org.uk/publications/reports/improving-flow-along-care-pathways

[The Health Foundation has been supporting efforts to improve the flow of patients along care pathways for more than 10 years. This has culminated in a UK-wide programme, the Flow Coaching Academy (FCA), led by the Sheffield

Teaching Hospitals NHS Foundation Trust. This learning report is based on the formative FCA evaluation completed in 2019 by RAND Europe and interviews with FCA programme leads during the COVID-19 pandemic.] *Freely available online*

Improving nurses' work-life balance.

NHS Employers; 2020.

https://www.nhsemployers.org/case-studies-and-resources/2020/11/improving-nurses-work-life-balance

[Read how Birmingham Women's and Children's NHS Foundation Trust implemented a team-based rostering system for nurses and improved their work-life balance. The trust began its work in 2017, with the ultimate goal to improve the retention of nurses and fulfil needs outlined by them for flexible working.] *Freely available online*

Managing medication: older people and their families need support to deal with the hidden burden of medication. NIHR Evidence; 2020.

https://evidence.nihr.ac.uk/alert/managing-medication-older-people-need-support-hidden-burden/

[NIHR Alert. The MEMORABLE (Medication Management in Older people: Realist Approaches Based on Literature and Evaluation) study aimed to understand the difficulties patients have in managing medication. One of the key findings was that medication management places a large burden on older people and family carers and that this burden is often hidden. The study recommends that doctors, pharmacists and nurses consider burden when prescribing or changing medicines.]

Freely available online

The Vanguard programme to integrate health and social care achieved some of its aims but took time to show an effect.

NIHR Evidence; 2020.

https://evidence.nihr.ac.uk/alert/vanguard-integrated-health-social-care-took-time-to-achieve-aims/

[NIHR Alert. This research is the first evaluation of integrated care models that were piloted across England between 2015 and 2018. Two models focused on the general population; another on care homes. The NHS England programme slowed the rise in emergency admissions to hospital among care home residents but did not achieve its other aims.]

Freely available online

Articles

The following article(s) may be of interest:

A person-centred communication approach to working with older people who have dementia.

Coleman D. *British Journal of Healthcare Assistants* 2020;14(11):575–579. [Key points: Dementia affects a person's ability to communicate; Loss of hearing or vision may limit an older person's ability to communicate; A person-centred communication approach to care is best; Verbal and non-verbal communication skills are needed; The involvement of family members is vital.] *Available with an NHS OpenAthens password for eligible users*

Adverse effects of non-steroidal anti-inflammatory drugs in patients with viral respiratory infections: rapid systematic review.

von Philipsborn P. BMJ Open 2020;10(11):e040990.

[It is unclear whether the use of NSAIDs increases the risk of severe adverse outcomes in patients with viral respiratory infections. This absence of evidence should not be interpreted as evidence for the absence of such risk. This is a rapid review with a number of limitations.] *Freely available online*

Assembly Line ICU: what the Long Shops taught us about managing surge capacity for COVID-19.

Oakley C. BMJ Open Quality 2020;9(4):DOI: 10.1136/bmjoq-2020-001117.

[Conclusions: We report how the challenge of managing a huge influx of patients and redeployed staff was met by deconstructing ICU care into its constituent parts. Although reported from the largest colocated ICU in the UK, we believe that this offers solutions to ICUs of all sizes and may provide a generalisable model for critical care pandemic surge planning.]

Can we prepare healthcare professionals and students for involvement in stressful healthcare events? A mixedmethods evaluation of a resilience training intervention.

Johnson J. BMC Health Services Research 2020;20(1):1094.

[In order to understand how we can better support healthcare professionals in the workplace, this study evaluated a tailored resilience coaching intervention comprising a workshop and one-to-one coaching session addressing the intrinsic challenges of healthcare work in health professionals and students. We found preliminary evidence that the intervention was well received and effective, but further research using a randomised controlled design will be necessary to confirm this.]

<u>Change and improvement 50 years in the making: a scoping review of the use of soft systems methodology in</u> <u>healthcare</u>.

Augustsson H. BMC Health Services Research 2020;20(1):1063.

[SSM is flexible and applicable to a range of problem situations in healthcare settings. However, better reporting of how SSM has been applied as well as evaluation of different types of outcomes, including implementation and intervention outcomes, is needed in order to appreciate more fully the utility and contribution of SSM in healthcare.]

<u>Components of the transitional care model (TCM) to reduce readmission in geriatric patients: a systematic review.</u> Morkisch N. *BMC Geriatrics* 2020;20(1):345 .

[Our findings suggest that high intensity multicomponent and multidisciplinary interventions are likely to be effective reducing readmission rates in geriatric patients, without increasing cost. Components such as type of staffing, assessing and managing symptoms, educating and promoting self-management, maintaining relationships and fostering coordination seem to have an important role in reducing the readmission rate.] *Freely available online*

<u>Costs and consequences of using average demand to plan baseline nurse staffing levels: a computer simulation</u> <u>study</u>.

Saville C. BMJ Quality & Safety 2021;30(1):7-16.

[Conclusion: ...Flexible staffing, while an important adjunct to the baseline staffing, was most effective at avoiding understaffing when high numbers of permanent staff were employed. Low staffing establishments with flexible staffing saved money because shifts were unfilled rather than due to efficiencies. Thus, employing low numbers of permanent staff (and relying on temporary staff and redeployments) risks quality of care and patient safety.]

Effectiveness of Hydrocolloid Dressings for Treating Pressure Ulcers in Adult Patients: A Systematic Review and Meta-Analysis.

Kamińska MS. International Journal of Environmental Research and Public Health 2020;17(21):7881. [The present meta-analysis shows that hydrocolloid dressings are not significantly better than alternative ones in the healing of pressure ulcers in adult patients.] Freely available online

Effectiveness of ultrasonic debridement on reduction of bacteria and biofilm in patients with chronic wounds: A scoping review.

Kataoka Y. International Wound Journal 2020;:doi: 10.1111/iwj.13509.

[Findings suggest that non-contact devices are useful for wound healing as they reduce the inflammatory response, although the bacterial load is not significantly changed. Ultrasonic debridement devices that require direct contact with the wound promote wound healing through reduction of biofilm or bacterial load.] *Freely available online*

Evaluation of the impact of an augmented model of The Productive Ward: Releasing Time to Care on staff and patient outcomes: a naturalistic stepped-wedge trial.

Williams B. BMJ Quality & Safety 2021;30(1):27-37.

[Conclusions: We found evidence that the augmented version of The Productive Ward: Releasing Time to Care Intervention was successful in improving a number of dimensions of nurse experience and ward culture, in addition to improved patient experience and evaluations of the quality of care received. Despite these positive summary findings across all wards, intervention implementation appeared to vary between wards...]

Fall prevention implementation strategies in use at 60 United States hospitals: a descriptive study.

Turner K. BMJ Quality & Safety 2020;29(12):1000-1007.

[Conclusions: Our study is the first to our knowledge to examine which expert-recommended implementation strategies are being used and how they are being operationalised in US hospitals. Future studies are needed to document fall prevention implementation strategies in detail and to test which implementation strategies are most effective at reducing falls. Additionally, research is needed to evaluate the quality of implementation (eg, fidelity) of fall prevention interventions.]

How to optimise duration of antibiotic treatment in patients with sepsis?

Hellyer TP. BMJ 2020;371:m4357.

Improving care for residents in long term care facilities experiencing an acute change in health status.

Munene A. BMC Health Services Research 2020;20(1):1075.

[Many transfers from LTC to ED are unnecessary, and expose residents to discontinuity in care and iatrogenic harms. This knowledge translation project aims to implement a standardized LTC-ED care and referral pathway for LTC facilities seeking transfer to ED, which optimizes the use of resources both within the LTC facility and surrounding community.]

Involvement un-enabled? An ethnographic study of the challenges and potentials of involving relatives in the acute ambulatory clinical pathway.

Sagoo SN. BMC Health Services Research 2020;20(1):1086.

[The aim of this study is to explore the practice of involving relatives in the acute ambulatory clinical pathway in the ED, as seen from the perspectives of patients and relatives. As a start, it is advisable that the medical staff ask the patients on arrival who has accompanied them in the ED, and if and in what way they want their companions involved in the ED.]

Leveraging big data to guide better nurse staffing strategies. [Editorial]

Spetz J. BMJ Quality & Safety 2021;30(1):1-3.

[Analytical methods that fully leverage the large datasets compiled through electronic health records, human resources systems and other sources can be applied to advance research on the composition of nursing teams to improve quality of care. As noted above, prior research has applied machine learning and discrete event simulation to analyses of healthcare staffing. Other recent studies have leveraged natural language processing of nursing notes to identify fall risk factors]

Reflection and you.

Stonehouse D. British Journal of Healthcare Assistants 2020;14(11):572–574.

[Key points: Reflection is a key part of any health professional's role and should become routine practice; Using a model will give structure to your reflections; The action plan at the end of the reflection is the most important part; Reflections can be either informal or formal; When recording reflections, ensure confidentiality of everyone and everywhere is maintained.]

Available with an NHS OpenAthens password for eligible users

Series 5, chronic wounds; part 4g. Pressure ulcers: support surfaces (mattresses).

Lloyd Jones M. *British Journal of Healthcare Assistants* 2020;14(10):482–487. [Conclusion: Over the years, support surfaces have evolved from the water bed in the 1800s to the very sophisticated equipment that we see today. However, the general principle remains the same: the relief of pressure and the prevention of pressure injuries. No support surfaces should be allocated to a patient without a holistic assessment, which should be carried out by a healthcare professional with the appropriate skill and knowledge.] *Available with an NHS OpenAthens password for eligible users*

Simulation: a key tool for refining guidelines and demonstrating they produce the desired behavioural change. [Editorial]

Fan M. BMJ Quality & Safety 2021;30(1):4-6.

Team-working: our part in making it effective.

Grainger A. British Journal of Healthcare Assistants 2020;14(10):474-480.

[The purpose of this article is to consider, first, the factors that make for good and effective team-working, and second, to identify the factors that inhibit team-working, which also includes handling matters of bullying and harassment. Finally, there are some reflective questions to facilitate an in-depth awareness of team-working and to foster a personal insight into the part you play in your team's dynamics.] *Available with an NHS OpenAthens password for eligible users*

The micropolitics of implementation; a qualitative study exploring the impact of power, authority, and influence when implementing change in healthcare teams.

Rogers L. BMC Health Services Research 2020;20(1):1059.

[To date, micropolitics has received scant attention in implementation science literature. This study introduces the micropolitical concepts of power, authority and influence as essential contextual determinants and outlines the mechanisms through which these concepts influence implementation processes.]

The Safety and Efficacy of Phage Therapy for Superficial Bacterial Infections: A Systematic Review.

Steele A. Antibiotics (Basel, Switzerland) 2020;9(11):754.

[This review strongly suggests that the use of purified phage to treat superficial bacterial infections can be highly effective and, by various routes of administration, is safe and without adverse effects.] *Freely available online*

The use of factor analysis and abductive inference to explore students' and practitioners' perspectives of feedback: divergent or congruent understanding?

Ossenberg C. BMC Medical Education 2020;20(1):466.

[The importance of feedback in workplace-based settings cannot be underestimated. Approaches that evaluate feedback reflect either the sender's or receiver's viewpoint in isolation of each other. This study investigated prevailing student and practitioner views of feedback resulting from development and testing of a survey about feedback.]

Freely available online

Understanding the nursing process.

Stonehouse D. British Journal of Healthcare Assistants 2020;14(11):568–571.

[Key points: Support workers are key members of the team in ensuring the success of the nursing process; Support workers should be involved in all aspects of the nursing process; Care should be planned using 'SMART' goals; Evaluation of care should occur throughout the implementation stage; The term 'nursing process' could be seen as being misleading, where 'care process' might be a more accurate term today.] *Available with an NHS OpenAthens password for eligible users*

<u>User-testing guidelines to improve the safety of intravenous medicines administration: a randomised in situ</u> <u>simulation study.</u>

Jones MD. BMJ Quality & Safety 2021;30(1):17-26.

[Conclusion: User-testing injectable medicines guidelines reduces the number of errors and the time taken to prepare and administer intravenous medicines, while increasing staff confidence.]

Valuing hospital investments in nursing: multistate matched-cohort study of surgical patients.

Lasater KB. BMJ Quality & Safety 2021;30(1):46-55.

[Conclusion: Hospitals with better nursing resources provided better clinical outcomes for surgical patients at a small additional cost. Generally, the sicker the patient, the greater the value at better nursing resourced hospitals.]

What information do patients want about their medicines? An exploration of the perspectives of general medicine inpatients.

Chan AHY. BMC Health Services Research 2020;20(1):1131.

[Although patients' medicines information needs varied between individuals, the importance of receiving information in an accessible, timely manner, and having good relationships with health providers, were common to most. Considering these needs is important to optimise information delivery in general medical patients.]

Awards

NICE Shared Learning Awards 2021.

National Institute for Health and Care Excellence (NICE); 2020.

https://www.nice.org.uk/about/what-we-do/into-practice/shared-learning-case-studies/shared-learning-awards [The NICE Shared Learning Awards recognise and reward examples of how NICE guidance has been put into practice in the NHS, local authorities, voluntary organisations and elsewhere. Deadline: 21st February 2021.]

Patient Experience Network (PEN) National Awards 2020.

Patient Experience Network; 2020.

https://patientexperiencenetwork.org/awards/

[The PEN National Awards are the first patient experience awards in the UK, celebrating the delivery of outstanding patient experience by those involved in the health and social care industry. Deadline: 29th January 2021.]

Covid-19

Guidelines

COVID-19 rapid guideline: delivery of systemic anticancer treatments.

National Institute for Health and Care Excellence (NICE); 2020. https://www.nice.org.uk/guidance/ng161

[The purpose of this guideline is to maximise the safety of patients with cancer and make the best use of NHS resources during the COVID-19 pandemic, while protecting staff from infection. In November 2020, NICE removed the option to defer treatments that prevent long-term complications, and amended guidance on treatments suitable for home delivery.]

Freely available online

COVID-19 rapid guideline: managing the long-term effects of COVID-19.

National Institute for Health and Care Excellence (NICE); 2020.

https://www.nice.org.uk/guidance/ng188

[This guideline covers identifying, assessing and managing the long-term effects of COVID-19, often described as 'long COVID'. It makes recommendations about care in all healthcare settings for adults, children and young people who have new or ongoing symptoms 4 weeks or more after the start of acute COVID-19. It also includes advice on organising services for long COVID.]

Freely available online

COVID-19 rapid guideline: reducing the risk of venous thromboembolism in over 16s with COVID-19.

National Institute for Health and Care Excellence (NICE); 2020.

https://www.nice.org.uk/guidance/ng186

[This guideline covers pharmacological VTE prophylaxis for patients being treated for COVID-19 pneumonia. It includes patients receiving treatment in hospital or in a community setting such as a 'hospital at home' service or COVID-19 'virtual ward'. The guideline applies to all patients with COVID-19 pneumonia, including those who have other conditions.]

Freely available online

COVID-19 rapid guideline: vitamin D.

National Institute for Health and Care Excellence (NICE); 2020. https://www.nice.org.uk/guidance/ng187

[The recommendations bring together: evidence from published literature on vitamin D supplementation for preventing or treating COVID-19, associations of vitamin D status with COVID-19, and indirect evidence on vitamin D supplementation for preventing acute respiratory tract infection in the general population (from the updated Scientific Advisory Committee on Nutrition rapid review); existing national guidance and policies (including UK government advice on taking a vitamin D supplement)]

Freely available online

COVID-19 vaccination programme.

Public Health England (PHE); 2020.

https://www.gov.uk/government/collections/covid-19-vaccination-programme

[Documents relating to the new coronavirus (COVID-19) vaccination programme, including: COVID-19: vaccination programme guidance for healthcare practitioners, and COVID-19: the green book, chapter 14a.]

COVID-19: vaccination programme guidance for healthcare practitioners.

Public Health England (PHE); 2020.

https://www.gov.uk/government/publications/covid-19-vaccination-programme-guidance-for-healthcarepractitioners

[Guidance for healthcare practitioners about the coronavirus (COVID-19) vaccination programme. 4 December 2020: Update report: details on page 3.]

Designated settings for people discharged to a care home.

Public Health England (PHE); 2020.

https://www.gov.uk/government/publications/designated-settings-for-people-discharged-to-a-care-home [Guidance on the designated settings scheme for people discharged from hospital to a care home with a positive coronavirus (COVID-19) test.] *Freely available online*

Excipients information for Pfizer-BioNTech COVID-19 Vaccine.

Specialist Pharmacy Service (SPS); 2020.

https://www.sps.nhs.uk/articles/excipients-information-for-pfizer-biontech-covid-19-vaccine/

[This page summarises and signposts to publicly available information that we're aware of from professional and government bodies relating to the Pfizer-BioNTech. This page highlights available data about the excipients contained in the vaccine and any potential adverse effects. The excipients in the vaccine may need to be considered by special patient groups e.g. vegans.]

Freely available online

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

BMJ Best Practice; 2020.

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

[Further guidelines have been published to inform the management of patients with coexisting conditions during the COVID-19 pandemic. New this update: Chronic obstructive lung disease (updated), Diabetes (type 1) (updated), Haematopoietic stem cell transplantation (updated), Substance use disorders (updated). 8 December.] Available with an NHS OpenAthens password

Long-COVID and COVID-19 rehabilitation.

Contact, Help, Advice and Information Network (CHAIN); 2020. <u>https://www.chain-network.org.uk/subgroup_resources.html#top</u> [Covid-19 resources from the CHAIN network. [REgistration required].] *Available with appropriate registration or membership*

Mask use in the context of COVID-19.

World Health Organization (WHO); 2020.

https://www.who.int/publications/i/item/advice-on-the-use-of-masks-in-the-community-during-home-care-and-in-healthcare-settings-in-the-context-of-the-novel-coronavirus-(2019-ncov)-outbreak

[This document provides updated guidance on mask use in health care and community settings, and during home care for COVID-19 cases. It is intended for policy makers, public health and infection prevention and control professionals, health care managers and health workers. Updated 1 December 2020.]

Pfizer-BioNTech COVID-19 Vaccine summary of guidance for Healthcare Professionals.

Specialist Pharmacy Service (SPS); 2020.

https://www.sps.nhs.uk/articles/summary-of-covid-19-medicines-guidance-pfizer-biontech-vaccine/

[This page summarises and signposts to publicly available information that we're aware of from professional and government bodies relating to the Pfizer-BioNTech COVID-19 vaccine. Published 10 December.] *Freely available online*

Summary of COVID-19 medicines guidance: Diabetes.

Specialist Pharmacy Service (SPS); 2020.

https://www.sps.nhs.uk/articles/summary-of-covid-19-medicines-guidance-diabetes/

[This page summarises and signposts to medicine related guidance we're aware of from professional and government bodies relating to coronavirus and diabetes.] *Freely available online*

Summary of COVID-19 medicines guidance: Endocrine system disorders.

Specialist Pharmacy Service (SPS); 2020.

https://www.sps.nhs.uk/articles/summary-of-covid-19-medicines-guidance-endocrine-system-disorders/

[This article summarises and signposts to medicine related guidance from professional and government bodies relating to coronavirus and endocrine system disorders and includes guidance on androgen replacement therapy, fertility treatment and more.] *Freely available online*

Summary of COVID-19 medicines guidance: Later life.

Specialist Pharmacy Service (SPS); 2020.

https://www.sps.nhs.uk/articles/summary-of-covid-19-medicines-guidance-later-life/

[This page summarises and signposts to medicine related guidance we're aware of from professional and government bodies relating to coronavirus and later life disorders.] *Freely available online*

The effect of the covid-19 outbreak on people affected by dementia.

House of Commons Library; 2020.

https://researchbriefings.files.parliament.uk/documents/CDP-2020-0122/CDP-2020-0122.pdf

[This research briefing provides background material, statistics, parliamentary proceedings and news material concerning the effect that Covid-19 has had on people with dementia.] *Freely available online*

Therapeutics and COVID-19: living guideline.

World Health Organization (WHO); 2020.

https://www.who.int/publications/i/item/therapeutics-and-covid-19-living-guideline

[Recommendations: The panel made a conditional recommendation against the use of remdesivir in hospitalized patients with COVID-19, regardless of disease severity. This guidance adds to recommendations published in the previous version: a strong recommendation for systemic corticosteroids in patients with severe and critical COVID-19, and a conditional recommendation against systemic corticosteroids in patients with non-severe COVID-19.]

Tocilizumab for patients admitted to ICU with COVID-19 Pneumonia (Adults)

Medicines and Healthcare Products Regulatory Agency (MHRA); 2020.

https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAttachment.aspx?Attachment_id=103715 [Following early positive signals of benefit from the immune modulation therapy domain of the REMAP-CAP platform trial, a UK wide position statement has been agreed to support off-label prescribing and access to tocilizumab, administered intravenously, for eligible COVID positive patients in the intensive care setting. The interim position statement will be reviewed as further evidence becomes available, including from the REMAP-CAP trial.]

Reports

Freely available online

Unequal impact? Coronavirus and BAME people.

House of Commons Women and Equalities Committee; 2020.

https://committees.parliament.uk/work/318/unequal-impact-coronavirus-and-bame-people/publications/ [This report outlines the findings of an inquiry that aimed to explore the pre-existing inequalities facing people from ethnic minorities and how these inequalities have impacted on their vulnerability to the virus. It makes a series of recommendations to help mitigate the impacts of the pandemic on ethnic minority groups.] *Freely available online*

Articles

Association Between Achieving Inpatient Glycemic Control and Clinical Outcomes in Hospitalized Patients With COVID-19: A Multicenter, Retrospective Hospital-Based Analysis.

Klonoff DC. *Diabetes Care* 2020;:dc201857.

[Both hyperglycemia and hypoglycemia were associated with poor outcomes in patients with COVID-19. Admission

glucose was a strong predictor of death among patients directly admitted to the ICU. Severe hyperglycemia after admission was a strong predictor of death among non-ICU patients.] *Freely available online*

Audio Interview: Caring for Hospitalized Patients with Covid-19

Rubin E. *New England Journal of Medicine* 2020;:DOI: 10.1056/NEJMe2034472. [In this audio interview conducted on December 2, 2020, the editors discuss the WHO's Solidarity study and the changing recommendations for the care of hospitalized patients.] *Freely available online*

Critically Ill Patients with COVID-19: A Narrative Review on Prone Position.

Qadri SK. Pulmonary Therapy 2020;6(2):233-246.

[Based on the findings of our review, we recommend prone position in patients with moderate to severe COVID-19 ARDS as per existing guidelines. A trial of prone position should be considered for non-intubated COVID-19 patients with hypoxemic respiratory failure, as long as this does not result in a delay in intubation.] *Freely available online*

Hospital-Acquired SARS-CoV-2 Infection: Lessons for Public Health.

Richterman A. JAMA 2020;324(21):2155-2156.

[Viewpoint reviews the rare incidence of nosocomial SARS-CoV-2 infection and discusses ways it can be minimised, including use of surgical masks, proper ventilation, physical distancing, eye protection, regular testing, and the availability of sick leave for health care workers.] *Freely available online*

Racial and Ethnic Disparities in COVID-19–Related Infections, Hospitalizations, and Deaths: A Systematic Review.

Mackey K. Annals of Internal Medicine 2020;:doi.org/10.7326/M20-6306.

[African American/Black and Hispanic populations experience disproportionately higher rates of SARS-CoV-2 infection and COVID-19–related mortality but similar rates of case fatality. Differences in health care access and exposure risk may be driving higher infection and mortality rates.] *Freely available online*

Racing to immunity: Journey to a COVID-19 vaccine and lessons for the future.

Calvo Fernández E. *British Journal of Clinical Pharmacology* 2020;:doi: 10.1111/bcp.14686. [This review compiles a list of all COVID-19 vaccines undergoing pre-clinical and clinical testing. The most advanced vaccines are discussed in more detail, with a focus on their technology, advantages and disadvantages, as well as any available recent clinical findings. It aims to facilitate a more thorough understanding of the extensive COVID-19 clinical testing vaccine landscape as it unfolds.] *Freely available online*

Remdesivir for severe covid-19: a clinical practice guideline.

BMJ 2020;371:m4542.

[The latest version of this WHO living guidance focuses on remdesivir, following the 15 October 2020 preprint publication of results from the WHO SOLIDARITY trial. It contains a weak or conditional recommendation against the use of remdesivir in hospitalised patients with covid-19]

<u>Repurposed Antiviral Drugs for Covid-19 — Interim WHO Solidarity Trial Results</u>

WHO Solidarity Trial Consortium. *New England Journal of Medicine* 2020;:DOI: 10.1056/NEJMoa2023184. [At 405 hospitals in 30 countries, 11,330 adults underwent randomization to one of 5 drug regimens or control. The interim results of the trial found that no drug definitely reduced mortality, overall or in any subgroup, or reduced initiation of ventilation or hospitalization duration. These remdesivir, hydroxychloroquine, lopinavir, and interferon regimens had little or no effect on hospitalized patients with Covid-19.] *Freely available online*

Safety and efficacy of inhaled nebulised interferon beta-1a (SNG001) for treatment of SARS-CoV-2 infection: a randomised, double-blind, placebo-controlled, phase 2 trial. Monk PD. *The Lancet Respiratory Medicine* 2020;:https://doi.org/10.1016/S2213-2600(20)30511-7. [Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection carries a substantial risk of severe and prolonged illness. Patients who received SNG001 had greater odds of improvement and recovered more rapidly from SARS-CoV-2 infection than patients who received placebo, providing a strong rationale for further trials.] *Available with an NHS OpenAthens password*

The Use of Therapeutic-Dose Anticoagulation and Its Effect on Mortality in Patients With COVID-19: A Systematic Review.

Wijaya I. *Clinical and Applied Thrombosis/Hemostasis* 2020;:doi.org/10.1177/1076029620960797. [The incidence of venous thromboembolism (VTE) events in patients with COVID-19 treated with a standard thromboprophylaxis dose of anticoagulants remains high. We conducted a systematic review in order to explore the association between therapeutic-dose anticoagulation and its effect on mortality in patients with COVID-19. Of 8 studies in review, 3 retrospective cohort studies reported reduction in mortality rate, while 5 other studies showed no mortality benefits in this population.]

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