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

Guidelines
The following new guidance has recently been published:

Defnyddio hebryngwyr yn ystod triniaethau meddygol personol / Use of chaperones during intimate medical procedures.
Llywodraeth Cymru / Welsh Government;2020.
https://gov.wales/use-chaperones-during-intimate-medical-procedures-whc2019039
Guidance for healthcare staff on the appropriate use of a chaperone during intimate examinations.
Freely available online

Supporting adult carers.
National Institute for Health and Care Excellence (NICE);2020.
https://www.nice.org.uk/guidance/ng150
This guideline covers support for adults (aged 18 and over) who provide unpaid care for anyone aged 16 or over with health or social care needs. It aims to improve the lives of carers by helping health and social care practitioners identify people who are caring for someone and give them the right information and support. It covers carers' assessments, practical, emotional and social support and training, and support for carers providing end of life care.
Freely available online

The matron's handbook: For aspiring and experienced matrons.
NHS Improvement;2020.
https://improvement.nhs.uk/resources/matrons-handbook/
This handbook is a practical guide for those who aspire to be a matron, those who are already in post, and for organisations that want to support this important role. It can be used to prepare ward, department and service leaders for the matron's role, and to support newly appointed matrons.
Freely available online

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

An organisation losing its memory? Patient safety alerts: implementation, monitoring and regulation in England.
Action Against Medical Accidents; 2020.
https://www.avma.org.uk/news/nhs-losing-its-memory/
"...reveals serious delays in NHS trusts implementing patient safety alerts which are one of the main ways in which the NHS seeks to prevent known patient safety risks harming or killing patients.
Compliance with alerts issued under the now abolished National Patient Safety Agency and NHS England are no longer monitored – even though patient safety incidents continue to be reported to the NHS National Reporting and Learning System."
Freely available online

Fewer infections with antibiotic-impregnated shunts for hydrocephalus.
NIHR Dissemination Centre; 2020.
https://discover.dc.nihr.ac.uk/content/signal-000863/fewer-infections-with-antibiotic-impregnated-shunts-for-hydrocephalus
NIHR Signal. Antibiotic-impregnated shunt catheters led to fewer infections than standard catheters in this study,

although the overall rate of shunt revision remained about the same.
Freely available online

[Gender and Nursing as a Profession: Valuing nurses and paying them their worth.](#)
Royal College of Nursing (RCN); 2020.
https://www.rcn.org.uk/professional-development/publications/pub-007954
This report explores and critiques the gendered construction of value within the nursing profession and evaluates how value is attributed to nursing, the value placed on individuals and the status of the profession.
Freely available online

[Impact of a national quality improvement programme for hospital wards is unclear.](#)
NIHR Dissemination Centre; 2020.
https://discover.dc.nihr.ac.uk/content/signal-000862/the-productive-ward-quality-improvement-programme-evaluation
NIHR Signal. The Productive Ward quality improvement programme has shown some procedural changes on hospital wards in England in the 10 years since it was introduced. But evidence to show any sustained changes to the experiences of staff or patients is hard to find.
Freely available online

[Living in the Red: The cost of living crisis for London's nursing workforce.](#)
Royal College of Nursing (RCN); 2020.
https://www.rcn.org.uk/professional-development/publications/pub-009012
This report investigates how London's cost of living impacts on nursing staff working in the capital. It showed that London's high cost of living is forcing nursing staff out of the capital due to high accommodation and travel costs. Our members told us they feel less financially secure compared to 12 months ago and 57% said they are considering or planning to leave London in the next five years - up 17% from 2016. We have set out three recommendations to help address the problem.
Freely available online

[NICEimpact dementia.](#)
National Institute for Health and Care Excellence; 2020.
https://www.nice.org.uk/about/what-we-do/into-practice/measuring-the-use-of-nice-guidance/impact-of-our-guidance/niceimpact-dementia
Report highlighting progress made by the health & care system in implementing NICE guidance, considering how it can contribute to improvements in the care of people with dementia. It is based on data showing the uptake of guidance and quality statement measures from national audits, reports, surveys and indicator frameworks. It considers prevention or delay of onset of dementia; referral, diagnosis and care planning; hospital care; social care; carer support; and prescribing of antipsychotics.
Freely available online

[Preventing healthcare associated Gram-negative bloodstream infections (GNBSI).](#)
NHS Improvement; 2020.
https://improvement.nhs.uk/resources/preventing-gram-negative-bloodstream-infections/
An improvement resource to help health and social care economies reduce the number of GNBSIs, with an initial focus on Escherichia coli (E.coli). Updated January 2020.
Freely available online

[Staffing for Safe and Effective Care in the UK 2019 report: Reviewing the progress of health and care systems against our principles.](#)
Royal College of Nursing (RCN); 2020.
https://www.rcn.org.uk/professional-development/publications/staffing-for-safe-and-effective-care-pub-008067
This report provides an overview of progress made against the safe staffing campaign principles during 2019. It includes country-specific updates as well as a look ahead to priorities during 2020.
Freely available online

[Two commonly used pressure redistributing mattresses are similar for preventing pressure ulcers but differ on price.](#)
NIHR Dissemination Centre; 2020.

https://discover.dc.nihr.ac.uk/content/signal-000857/two-pressure-redistributing-mattresses-similar-for-preventing-pressure-ulcers-but-differ-on-price

NIHR Signal. The choice of mattress used in hospital makes no difference to whether adults develop pressure ulcers, or how quickly, but differ on price. This large NIHR-funded trial included 2,029 participants at high risk of developing pressure ulcers and found fewer pressure ulcers overall than expected (7.9%).
Freely available online

Working With Seasonal Affective Disorder or SAD: Managing Winter Symptoms.
Mind Tools; 2020.
https://www.mindtools.com/pages/article/seasonal-affective-disorder.htm
In this article, we'll look at what SAD is, and explore how you can manage its symptoms – so that you and your team can stay productive and experience greater well-being during winter.
Freely available online

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 the library.

'This is our liver patient…': use of narratives during resident and nurse handoff conversations.
Kannampallil T. *BMJ Quality & Safety* 2020;29(2):135-141.
Conclusion: Narratives are acknowledged as an integral part of handoff conversations. However, there is limited incorporation of this feature into the design of handoff tools. We highlighted specific manifestations of narratives that can have potential implications for patient safety and the design of handoff tools for residents and nurses. Additional research is needed to translate the narrative needs of clinicians into specific design requirements in handoff tools. *Freely available online*

A systematic review exploring the content and outcomes of interventions to improve psychological safety, speaking up and voice behaviour.
O'Donovan R. *BMC Health Services Research* 2020;20(1):101.
This review synthesises the content, theoretical underpinnings and outcomes of interventions which have targeted psychological safety, speaking up, and voice behaviour within a healthcare setting. It aims to identify successful interventions and inform the development of more effective interventions. *Freely available online*

Advance care planning.
Merlane H. *British Journal of Nursing* 2020;29(2):96-97.
This article provides an overview of advance care planning (ACP), discusses why ACP is important, highlights the barriers to having conversations and discusses the role of the nurse in supporting patients with ACP. Around half a million people die each year, and about three quarters of these deaths are expected (NHS Improving Quality, 2014). There is, therefore, the potential to improve how the care of people is managed in the final year, months or days of their life.
Available with an NHS OpenAthens password for eligible users

Dementia 6. Frontotemporal dementia: diagnosis, treatment and medical management.
Nazarko L. *British Journal of Healthcare Assistants* 2020;14(1):36-43.
Key points: Frontotemporal dementia refers to a range of conditions that are a major cause of young onset dementia; Frontotemporal dementia produces brain atrophy involving the frontal and temporal lobes; Up to around a quarter of cases arise from dominant mutations in one of three major causative genes; Treatment remains supportive, but patients and families may need extensive counselling, future planning, and involvement of social and mental health services.
Available with an NHS OpenAthens password for eligible users

Development and implementation of a standardised emergency department intershift handover tool to improve physician communication.
Kwok ESH. *BMJ Open Quality* 2020;9(1):doi: 10.1136/bmjoq-2019-000780.
Conclusions: We achieved sustained improvements in the amount of information communicated during physician emergency department (ED) handovers using established quality improvement (QI) methodologies. Engaging

stakeholders in handover tool customisation for local context was an important success factor. We believe this approach can be easily adopted by any ED. *Freely available online*

Drug therapy for delirium in terminally ill adults.
Finucane AM. *Cochrane Database of Systematic Reviews* 2020;1:CD004770.
Delirium is a syndrome characterised by an acute disturbance of attention and awareness which develops over a short time period and fluctuates in severity over the course of the day. It is commonly experienced during inpatient admission in the terminal phase of illness. It can cause symptoms such as agitation and hallucinations and is distressing for terminally ill people, their families and staff. Delirium may arise from any number of causes and treatment should aim to address these causes.
Freely available online

Early versus delayed mobilization for in-hospital mortality and health-related quality of life among critically ill patients: a systematic review and meta-analysis.
Okada Y. *Journal of Intensive Care* 2019;7:57.
Our study indicated no apparent differences between early mobilization and usual care in terms of in-hospital mortality and health-related QOL. Detailed larger studies are warranted to evaluate the impact of early mobilization on in-hospital mortality and health-related QOL in critically ill patients. *Freely available online*

Effect of Incisional Negative Pressure Wound Therapy vs Standard Wound Dressing on Deep Surgical Site Infection After Surgery for Lower Limb Fractures Associated With Major Trauma: The WHIST Randomized Clinical Trial
Costa ML. *JAMA* 2020;323(6):519–526.
 Among patients who underwent surgery for major trauma-related lower limb fractures, use of incisional negative pressure wound therapy, compared with standard wound dressing, resulted in no significant difference in the rate of deep surgical site infection. The findings do not support the use of incisional negative pressure wound therapy in this setting, although the event rate at 30 days was lower than expected. *Contact the library for a copy of this article*

Electrical stimulation for treating pressure ulcers.
Arora M. *Cochrane Database of Systematic Reviews* 2020;1:CD012196.
Pressure ulcers (also known as pressure sores, decubitus ulcers or bedsores) are localised injuries to the skin or underlying tissue, or both. Pressure ulcers are a disabling consequence of immobility. Electrical stimulation (ES) is widely used for the treatment of pressure ulcers. However, it is not clear whether ES is effective. *Freely available online*

Evaluation of clinically indicated removal versus routine replacement of peripheral vascular catheters.
McGuire R. *British Journal of Nursing* 2020;29(2):S10-S16.
Latest clinical guidelines for peripheral vascular catheters (PVC) recommend that they should be removed only when clinically indicated and not routinely removed and replaced. In 2017, the authors' hospital policy was changed to align with the new recommendations and, between March and July 2019, 500 PVCs were audited at two main sites to evaluate the efficacy of the change. *Available with an NHS OpenAthens password for eligible users*

Failure of vital sign normalization is more strongly associated than single measures with mortality and outcomes.
Levin N. *American Journal of Emergency Medicine* 2019;:doi:10.1016/j.ajem.2019.12.024.
Dynamic vital signs in the emergency department, as categorized by delta MEWS, and failure to normalize abnormalities, were associated with increased mortality, ICU admission, LOS, and the diagnosis of sepsis. Our results suggest that MEWS scores that do not normalize, from triage onward, are more strongly associated with outcome than any single score.
Contact the library for a copy of this article

How does the WHO Surgical Safety Checklist fit with existing perioperative risk management strategies? An ethnographic study across surgical specialties.
Wæhle HV. *BMC Health Services Research* 2020;20(1):111.
This study aimed to explore how members of the multidisciplinary perioperative team integrate the SSC within their risk management strategies. When the SSC is not integrated within existing risk management strategies, but perceived as an "add on", its fidelity is compromised, hence limiting its potential clinical effectiveness.
Implementation strategies for the SSC should thus integrate it as a risk-management tool and include it as part of risk-management education and training. *Freely available online*

[**Impact, challenges and limits of inpatient palliative care consultations - perspectives of requesting and conducting physicians**](.)
Coym A. *BMC Health Services Research* 2020;20(1):86.
Inpatient palliative care consultation (IPCC) teams have been established to improve care for patients with specialist palliative care (PC) needs throughout all hospital departments. The objective is to explore physicians' perceptions on the impact of IPCC, its triggers, challenges and limits, and their suggestions for future service improvements. *Freely available online*

[**Increasing the documentation of 48-hour antimicrobial reviews**](.)
Sahota RS. *BMJ Open Quality* 2020;9(1): doi: 10.1136/bmjoq-2019-000805 .
Conclusion: This QIP was able to identify interventions that can be used to improve staff engagement with antimicrobial stewardship and assess the effectiveness of these on two surgical wards. At the end of our QIP, the proportion of the 48-hour antimicrobial reviews being documented in the patient notes was 77%... *Freely available online*

[**International consensus document. Implementing TIMERS: the race against hard-to-heal wounds. Part 1.**](.)
Lloyd Jones M. *British Journal of Healthcare Assistants* 2019;13(12):578–579.
According to the International Consensus Document, Implementing TIMERS (Atkin et al, 2019), hard-to-heal wounds are a challenge for the patient, the health professional and the NHS...However, the consensus document goes on to highlight the fact that analysis of The Health Improvement Network (THIN) database demonstrated deficiencies in delivery of care for both venous leg ulcers (VLUs) and diabetic foot ulcers (DFUs). *Available with an NHS OpenAthens password for eligible users*

[**International consensus document. Implementing TIMERS: the race against hard-to-heal wounds. Part 2.**](.)
Lloyd Jones M. *British Journal of Healthcare Assistants* 2020;14(1):12-14.
This section of the document begins with a look at chronic wounds, explaining that wounds can start by either direct trauma to tissue which is already compromised, or by breakdown of tissue under unbroken skin. In some cases, the patient may not be aware that they have sustained an injury, for example, in a patient with diabetic neuropathy, where the patient has no sensation of pain from the wound and may only realise that they have an injury when they notice bleeding.
Available with an NHS OpenAthens password for eligible users

[**Key occupational stressors in the ED: an international comparison**](.)
Greenslade JH. *Emergency Medicine Journal* 2020;37(2):106-111.
The ED Stressor Scale outlines 15 stressors that are of importance for ED staff. Limited research has identified how commonly such stressors occur, or whether such factors are perceived with similar importance across different hospitals. This study sought to examine the frequency or perceived severity of these 15 stressors using a multicentre cohort of emergency clinicians (nurses and physicians) in EDs in two countries (Australia and Sweden). *Available with an NHS OpenAthens password for eligible users*

[**Medication-related harm in older adults following hospital discharge: development and validation of a prediction tool**](.)
Parekh N. *BMJ Quality & Safety* 2020;29(2):142-153.
To develop and validate a tool to predict the risk of an older adult experiencing medication-related harm (MRH) requiring healthcare use following hospital discharge. Conclusions: The PRIME tool could be used to identify older patients at high risk of MRH requiring healthcare use following hospital discharge. Prior to clinical use we recommend the tool's evaluation in other settings. *Freely available online*

[**Portable nursing stations reduce the rate of inpatient falls in UK hospitals.**](.)
Haghgoshayie E. *Evidence-Based Nursing* 2020;23(1):29.
Overall, 2875 inpatient falls were identified, and 17 wards participated between April 2014 and December 2017. The fallers' mean age was 78±13. Fifty-eight per cent of participants were men. Most falls, 99.41%, resulted in none, slight or moderate harm, 0.45% in severe harm and 0.14% in death. The falls rate monthly increased by 0.119 per 1000 OBDs (p<0.005) before April 2016, then decreased by 0.222 per 1000 OBDs (p<0.001) after April 2016 until December 2017. *Available with an NHS OpenAthens password*

Practices to Foster Physician Presence and Connection With Patients in the Clinical Encounter.
Zulman DM. *JAMA* 2020;323(1):70-81.
This mixed-methods study identified 5 practices that have the potential to enhance physician presence and meaningful connection with patients in the clinical encounter. Evaluation and validation of the outcomes associated with implementing the 5 practices is needed, along with system-level interventions to create a supportive environment for implementation.
Available with an NHS OpenAthens password for eligible users

Practising personalised care. [Comment]
Mello M. *British Journal of Nursing* 2020;29(2):82.
The NHS Long-Term Plan sets out a commitment to rolling out the comprehensive model for personalised care so that it reaches 2.5 million people by 2023/24 (NHS England and NHS Improvement, 2019). This model aims to support a more individualised approach to health care by reframing the relationship between people/patients and clinicians. It advocates a better balance between 'what's the matter with you?' and 'what matters to you?'.
Available with an NHS OpenAthens password for eligible users

Reducing hospital admissions in older care home residents: a 4-year evaluation of the care home innovation Programme (CHIP).
Giebel C. *BMC Health Services Research* 2020;20(1):94.
Older care home residents frequently attend emergency departments with a high conversion to admissions. For this purpose, a novel Care Home Innovation Programme (CHIP) was introduced with the aim of reducing potentially avoidable hospital admissions by 30%. The aim of this study is to evaluate the implementation of this innovative service in practice. *Freely available online*

Sitters as a Patient Safety Strategy to Reduce Hospital Falls: A Systematic Review.
Greeley AM. *Annals of Internal Medicine* 2020;:DOI: 10.7326/M19-2628.
Bedside "sitters" are often used for patients at high risk for falls, but they are expensive and their effectiveness is unclear. Of 20 studies meeting inclusion criteria, 2 added sitters to usual care and 18 compared alternatives to sitters. Despite a compelling rationale, evidence is scant that adding sitters to usual care reduces falls. *Contact the library for a copy of this article*

The effectiveness of multicomponent pressure injury prevention programs in adult intensive care patients: A systematic review.
Lin F. *International Journal of Nursing Studies* 2019;102:103483.
Much of the work on multicomponent pressure injury prevention programs has been undertaken as quality improvement projects and before and after research studies with limited rigour. However, positive outcomes and strong theoretical rationales for the components in the programs suggest that they are beneficial. This calls for future high-quality research such as randomised controlled trials to test the effectiveness of multicomponent interventions and their implementation strategies.
Contact the library for a copy of this article

The use of 3.15% chlorhexidine gluconate/70% alcohol hub disinfection to prevent central line-associated bloodstream infections in dialysis patients.
Marty Cooney R. *British Journal of Nursing* 2020;29(2):S24-S26.
Preventing CLABSI events in the dialysis inpatient population represents significant challenges. Bacteremia associated with lines or grafts are common health-associated infections that lead to adverse patient outcomes. Dialysis patients represent a much higher infection risk due to health frequency needs, more frequent hospitalizations, multiple comorbidity issues, fistula functionality, and multiple attempts for line access leading to additional complications, costs, morbidity, and mortality.
Available with an NHS OpenAthens password for eligible users

Towards a safer NHS in 2020?
Tingle J. *British Journal of Nursing* 2020;29(2):122-123.
John Tingle, Lecturer in Law, Birmingham Law School, University of Birmingham, looks back at some patient safety policy publications and crises in 2019 and asks whether the NHS will be any safer in 2020 and whether any lessons have been learnt. The year 2019 was another bumper year for patient safety policy developments and crises. Some major patient safety publications were produced, and stories of patient safety crisis continued to regularly hit the

headlines.
Available with an NHS OpenAthens password for eligible users

[Working towards the trans-inclusive workforce.](#)
Peate I. *British Journal of Healthcare Assistants* 2020;14(1):31-35.
Key points; If unsure about a person's preferred personal pronoun, ask the person politely how it is that they wish to be known; Human rights apply to all of us. All staff, including transgender people, have the right to equal treatment and protection from discrimination; Our NHS will not tolerate discrimination, victimisation or harassment on the basis of a person's gender identity, gender expression or trans status; .
Available with an NHS OpenAthens password for eligible users

Survey

Future Nurse standards survey
In 2018, the Nursing and Midwifery Council, released new national standards for the proficiency, education and training of nurses:
- 'Future nurse' specifies the standards of proficiency now expected of all registered nurses
- 'Realising professionalism' sets out arrangements for nurse education and training – including new arrangements for the supervision and assessment of student nurses on placement.

The Future Nurse Oversight Board would like to invite you to complete a survey looking at provider's experience of implementing the standards by clicking on [this link](#) and submitting your response as soon as possible, and no later than 6 March 2020.
The survey is a 'perception only' survey – that is, it asks only for your views – and takes less than 15 minutes to complete. Your response will help identify appropriate resources to help providers implement the new standards. All responses are confidential and will be anonymised.

Websites

[How-to guide: non face-to-face clinics.](#)
https://uclpartners.com/non-face-to-face-clinics-resource/
This website includes a range of resources aimed at supporting colleagues / partners in the planning and implementation of non face-to-face models of care.
Freely available online

KGH Knowledge and Library Service

Phone: 01536 492862

Email: library.index@kgh.nhs.uk

Library Website:
http://kghlibrary.koha-ptfs.co.uk

@KGHNHSLibrary

Would you like help to find information to support CPD and revalidation?
Or to receive personal alerts to articles and reports on topics of particular interest to you?

Ask us about **KnowledgeShare** to receive fortnightly emails highlighting relevant reports and articles