

Current awareness for Nursing

Recent guidelines and reports, articles and websites

May 2020

The listing of more general resources starts on page 8.

Coronavirus

We are regularly updating the [library website](#) with lists of the latest evidence and research published, links to training resources, and guidelines from the Royal Colleges and Professional Societies. These can be found on our [Coronavirus webpage](#).

Coronavirus – Guidelines

Please find a selection of the guidelines relating to coronavirus that may be of interest. Please note that these are continually being updated as fresh evidence emerges.

[Bridging guidance for critical care during restoration of NHS services](#)

Faculty of Intensive Care Medicine (FICM); 2020.

https://www.ficm.ac.uk/sites/default/files/ficm_bridging_guidance_for_critical_care_during_the_restoration_of_nhs_services_-_22_may_2020.pdf

[During the period of COVID-19 new models of Critical Care (CC) delivery will be required in the short/medium term, based on safety, workforce sustainability and high quality patient care. GPICS and PICS standards remain the goal and any deviation must be time limited with a clear strategy for returning to these. There must be an appropriate governance structure during the period of deviation and a plan to ensure the safety of these temporary models of care]

Freely available online

[Covid-19 and cardiovascular disease.](#)

Fulchard S. *BMJ* 2020;369:m1997.

[Guideline: Diagnosis and management of cardiovascular disease during the covid-19 pandemic Published by the European Society of Cardiology. This summary is based on the version published on 21 April 2020

(<https://www.escardio.org/Education/COVID-19-and-Cardiology/ESC-COVID-19-Guidance>).]

[COVID-19 rapid guideline: acute kidney injury in hospital.](#)

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

<https://www.nice.org.uk/guidance/ng175>

[The purpose of this guideline is to help healthcare professionals prevent, detect and manage acute kidney injury in adults in hospital with known or suspected COVID-19. This is important to improve outcomes and reduce the need for renal replacement therapy.]

[COVID-19 rapid guideline: acute myocardial injury.](#)

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

<https://www.nice.org.uk/guidance/ng171>

[The purpose of this guideline is to help healthcare professionals who are not cardiology specialists identify and treat acute myocardial injury and its cardiac complications in adults with known or suspected COVID-19 but without known pre-existing cardiovascular disease.]

Freely available online

COVID-19 rapid guideline: antibiotics for pneumonia in adults in hospital.

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

<https://www.nice.org.uk/guidance/ng173>

[The purpose of this guideline is to ensure the best antibiotic management of suspected or confirmed bacterial pneumonia in adults in hospital during the COVID-19 pandemic. This includes people presenting to hospital with moderate to severe community-acquired pneumonia and people who develop pneumonia while in hospital. It will enable services to make the best use of NHS resources.]

Freely available online

COVID-19 rapid guideline: chronic kidney disease.

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

<https://www.nice.org.uk/guidance/ng176>

[The purpose of this guideline is to maximise the safety of adults with chronic kidney disease during the COVID-19 pandemic. It also aims to protect staff from infection and enable services to make the best use of NHS resources. This guideline focuses on what you need to stop or start doing during the pandemic.]

COVID-19 rapid guideline: critical care in adults.

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

<https://www.nice.org.uk/guidance/ng169>

[Updated on 29 April 2020. NICE added an example to clarify the role of specialists in our recommendation on frailty assessment.]

Freely available online

COVID-19 rapid guideline: dermatological conditions treated with drugs affecting the immune response.

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

<https://www.nice.org.uk/guidance/ng169>

[Updated on 30 April 2020. NICE highlighted that immunosuppression may continue for some time after some drugs are stopped.]

Freely available online

COVID-19 rapid guideline: gastrointestinal and liver conditions treated with drugs affecting the immune response

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

<https://www.nice.org.uk/guidance/ng172>

[The purpose of this guideline is to maximise the safety of children and adults who have gastrointestinal or liver conditions treated with drugs affecting the immune response during the COVID 19 pandemic. It also aims to protect staff from infection and enable services to make the best use of NHS resources.]

COVID-19 rapid guideline: interstitial lung disease.

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

<https://www.nice.org.uk/guidance/ng177>

[The purpose of this guideline is to maximise the safety of adults with interstitial lung disease, including idiopathic pulmonary fibrosis and pulmonary sarcoidosis, during the COVID-19 pandemic. It also aims to protect staff from infection and enable services to make the best use of NHS resources.]

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

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

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

[Updated on 30 April 2020. NICE highlighted that immunosuppression may continue for some time after some drugs are stopped.]

Freely available online

Guidance: COVID-19: infection prevention and control (IPC)

Public Health England (PHE); 2020.

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

[Guidance on infection prevention and control for COVID-19. Sustained community transmission is occurring across the UK.

3 May 2020: Added HSE statement about use of FFP2 respirators to the 'Considerations for acute personal protective equipment (PPE) shortages' attachment.]

Freely available online

Guidance: COVID-19: investigation and initial clinical management of possible cases

Public Health England (PHE); 2020.

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases>

[Information on case definitions, and the initial assessment and investigation of possible cases of COVID-19 infection. 18 May 2020: Updated information on case definition.]

Freely available online

Guidance: COVID-19: management of exposed healthcare workers and patients in healthcare settings

Public Health England (PHE); 2020.

<https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings>

[Guidance on the management of healthcare staff and patients who have been exposed to COVID-19.

6 May 2020: Updated title and content to provide clarification that the guidance applies to any healthcare setting, not just hospitals.]

Freely available online

How tests and testing kits for coronavirus (COVID-19) work.

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

<https://www.gov.uk/government/publications/how-tests-and-testing-kits-for-coronavirus-covid-19-work>

[This is information for members of the public, patients, professionals and industry about COVID-19 tests and testing kits, including how they work, the different types of tests and the specifications manufacturers need to follow. 13 May.]

Freely available online

Meeting the psychological needs of people recovering from severe coronavirus (Covid-19)

British Psychological Society (BPS); 2020.

<https://www.bps.org.uk/news-and-policy/bps-advises-meeting-psychological-needs-people-recovering-severe-coronavirus>

[This guidance considers the likely psychological needs of people who have been hospitalised with severe coronavirus (Covid-19), and the most effective ways to support their recovery.]

Freely available online

Nasogastric tube placement checks before first use in critical care settings during the COVID-19 response

British Association of Parenteral and Enteral Nutrition; 2020.

https://static1.squarespace.com/static/5e6613a1dc75b87df82b78e1/t/5ebbddc6456e905ff24b9436/1589370310526/NG-Tube-Placement_13.05.20.pdf

[This easy reference guide has been produced because some aspects of COVID-19 presentation and treatment present special challenges for safely confirming nasogastric tube position. The dense ground-glass x-ray images can make x-ray interpretation more difficult, and the increasing use of proning manoeuvres in conscious patients increases the risk of regurgitation of gastric contents into the oesophagus and aspiration into the lungs which will render pH checks less reliable]

Freely available online

Prevention and Treatment of Venous Thromboembolism Associated with Coronavirus Disease 2019 Infection: A Consensus Statement before Guidelines.

Zhai Z. *Thrombosis and Haemostasis* 2020;:doi: 10.1055/s-0040-1710019.

[Based on frontline practical experience and comprehensive literature review, here a panel of experts and physicians from China and Europe developed an evidence and opinion-based consensus on the prophylaxis and management of

VTE associated with COVID-19.]
Freely available online

Treatment of patients with nonsevere and severe coronavirus disease 2019:

Ye Z. *CMAJ* 2020;;10.1503/cmaj.200648.

[The panel made only 1 weak recommendation in favour of treatment: use of corticosteroids in patients with acute respiratory distress syndrome (ARDS)]

The panel made weak recommendations against use of corticosteroids in patients without ARDS, against use of convalescent plasma and against several antiviral drugs that have been suggested as potential treatments for COVID-19]

Freely available online

UK guideline provides recommendations for differentiating viral COVID-19 pneumonia from bacterial pneumonia.

BMJ Best Practice; 2020.

<https://bestpractice.bmj.com/topics/en-gb/3000108>

[BMJ Best Practice update. The National Institute for Health and Care Excellence (NICE) in the UK has published guidance on the management of suspected or confirmed pneumonia in the community during the COVID-19 pandemic. [27 April]]

Available with an NHS OpenAthens password

Coronavirus – Reports

COVID-19 Pandemic / Disaster Recovery Toolkit

BHT Library and Knowledge Service; 2020.

<https://kfh.libraryservices.nhs.uk/wp-content/uploads/2020/04/Apr039-Search-Pandemic-recovery-resource-bank-17-04-20-1.pdf>

[This toolkit is based on a literature search carried out by the Buckingham NHS library service.

It identifies tools, resources and literature arranged under the following headings:

- recovery planning
- projected long-term impacts of Covid 19/capacity planning
- workforce resilience and well-being
- leadership
- learning lessons
- organisational resilience]

Freely available online

COVID-19 rapid evidence summary: acute use of non-steroidal anti-inflammatory drugs (NSAIDs) for people with or at risk of COVID-19.

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

<https://www.nice.org.uk/advice/es23/chapter/Key-messages>

[The available evidence suggests that, although the anti-inflammatory effects of NSAIDs reduce acute symptoms (such as fever), they may either have no effect on, or worsen, long-term outcomes, possibly by masking symptoms of worsening acute respiratory tract infection. Further evidence is needed to confirm this, and to determine whether these results also apply to infections such as COVID-19.]

Freely available online

COVID-19 rapid evidence summary: Long-term use of non-steroidal anti-inflammatory drugs (NSAIDs) for people with or at risk of COVID-19.

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

<https://www.nice.org.uk/advice/es25/chapter/Key-messages>

["There is no evidence to suggest that people taking NSAIDs for a long-term condition should be advised to stop treatment in the context of COVID-19. Gastrointestinal, respiratory, cardiovascular and renal adverse effects are listed among the possible adverse effects of NSAIDs in the BNF. COVID-19 may also lead to respiratory, cardiovascular and renal complications."]

Freely available online

COVID-19 Rapid Review - Video calls for reducing social isolation and loneliness in older people.

Cochrane Collaboration; 2020.

<https://www.cochrane.org/news/covid-19-rapid-review-video-calls-reducing-social-isolation-and-loneliness-older-people>

[Many countries have introduced restrictions on people's movement to protect them from COVID-19. Visiting older friends and relatives may not be possible. Can calling Grandma with a video call help her feel less lonely and isolated? Can video calls affect symptoms of depression or quality of life? What does the evidence say?]

Freely available online

Recovery and Rehabilitation for Patients Following the Pandemic

Faculty of Intensive Care Medicine (FICM); 2020.

https://www.ficm.ac.uk/sites/default/files/ficm_rehab_provisional_guidance.pdf

[The Coronavirus (COVID-19) Pandemic has put a strain on NHS critical care services. Whilst recovering from the acute phase of the pandemic, we need to think of the aftermath and seek solutions to provide effective recovery and rehabilitation services for affected patients and their families. This is a unique opportunity to elevate public understanding of the impact of critical illness on outcomes and recovery.]

Recovery of surgical services during and after COVID-19

Royal College of Surgeons (RCS); 2020.

<https://www.rcseng.ac.uk/coronavirus/recovery-of-surgical-services/>

[This document provides a list of principles, recommendations and key considerations in order to facilitate elective surgery. These can be used in combination with national, specialty and local trust recovery plans.]

Freely available online

Safeguarding adults with dementia during the COVID-19 crisis.

Social Care Institute for Excellence (SCIE); 2020.

<https://www.scie.org.uk/care-providers/coronavirus-covid-19/dementia/safeguarding>

[Safeguarding adults with dementia is an important part of everyday work for providers of adult social care. This quick guide aims to support care providers and staff to safeguard people with dementia during the crisis. There are increased concerns that, during the COVID-19 crisis, people may be more vulnerable to abuse or neglect.]

Freely available online

The impact of coronavirus on health and social care workers.

House of Commons Library; 2020.

<https://commonslibrary.parliament.uk/insights/mental-health-awareness-week-the-impact-of-coronavirus-on-health-and-social-care-workers/>

[This House of Commons Library Insight paper considers the impact of the coronavirus pandemic on the mental health of health and social care staff and what measures have been put in place to support them.]

Freely available online

Violence, abuse and mental health Covid 19 reports and online resources

VAMHN; 2020.

<https://www.vamhn.co.uk/covid-19-resources.html>

[The Violence, Abuse and Mental Health Network has put together this page of links to recent reports, webinars and other online resources relevant to those who work with those suffering from or at risk of various forms of abuse during the Covid 19 situation.]

Freely available online

Coronavirus – Articles

COVID-19 and Cardiovascular Disease.

Clerkin KJ. *Circulation* 2020;141(20):1648–1655.

[This review summarises the rapidly evolving data in this field linking COVID-19 with increased morbidity and mortality from CVD, and it also reiterates that continuation of clinically indicated ACEIs and ARBs is recommended based on current evidence.]

Freely available online

Coronavirus and isolation: supporting yourself and your colleagues.

Mental Health at Work; 2020.

<https://www.mentalhealthatwork.org.uk/toolkit/coronavirus-and-isolation-supporting-yourself-and-your-colleagues/>

[At a time when things are moving and changing fast, we just want to make sure you've got some useful and practical information when you need it. However, we think too much information can sometimes be as bad as too little, so we'll keep this page focused.

In terms of workplace wellbeing, the coronavirus situation presents a few different things to think about, and we've chosen resources that can help with each of them.]

Freely available online

Coronavirus and older people.

British Geriatrics Society (BGS); 2020.

<https://www.bgs.org.uk/resources/resource-series/coronavirus-and-older-people>

[This resource series brings together current advice from experts within the BGS relating to older people and the current COVID-19 pandemic.]

Freely available online

COVID-19 potential transmission through aerosols in surgical procedures and blood products

Hamish A. *Bone and Joint Research* 2020;9(4): 200-201 .

[In summary the following general advice should be followed:

Avoid using diathermy especially cutting diathermy; Avoid pulse lavage; Avoid ultrasonic tools;

Place sucker near to power tool/tissue interface; Use a tourniquet when possible; Consider using a powered air-purifying respirator (PAPR) or a surgical body suit/space suit. During bone and joint procedures: Limit use of power tools when possible; Avoid use of ultradrive and high speed burr if revising hips]

Freely available online

HCA roles in COVID-19: the emotional cost of sacrifice.

Hayes C. *British Journal of Healthcare Assistants* 2020;14(5):246–249.

["In conscious acknowledgement of all those who give so selflessly, this short article has been written to encourage HCAs to actively consider the concept of 'emotional labour' and 'emotional giving', so that those who read it might be at least more aware of their need and right to acknowledge their service to society in continuing their daily work."]

Available with an NHS OpenAthens password for eligible users

Hypertension, Thrombosis, Kidney Failure, and Diabetes: Is COVID-19 an Endothelial Disease? A Comprehensive Evaluation of Clinical and Basic Evidence.

Sardu C. *Journal of Clinical Medicine* 2020;:E1417.

[Herein, we report a systematic and comprehensive evaluation of both clinical and preclinical evidence supporting the hypothesis that the endothelium is a key target organ in COVID-19, providing a mechanistic rationale behind its systemic manifestations.]

Freely available online

Intensive care management of coronavirus disease 2019 (COVID-19): challenges and recommendations.

Phua J. *The Lancet Respiratory Medicine* 2020;8(5): P506-517.

[In this review, authors draw on experience of Asian ICU practitioners & available literature to provide an overview of the challenges the ICU community faces and recommendations for navigating these complexities including critical care triage & rationing of scarce ICU resources.]

Freely available online

Medical Masks vs N95 Respirators for Preventing COVID-19 in Healthcare Workers: A Systematic Review and Meta-Analysis of Randomized Trials

Bartoszko JJ. *Influenza and Other Respiratory Viruses* 2020;:10.1111/irv.12745.

[Low certainty evidence suggests that medical masks and N95 respirators offer similar protection against viral respiratory infection including coronavirus in healthcare workers during non-aerosol-generating care. Preservation of N95 respirators for high-risk, aerosol-generating procedures in this pandemic should be considered when in short supply.]

Freely available online

Guidelines

The following new guidance has recently been published:

End of Life Care in Frailty

British Geriatrics Society (BGS); 2020.

<https://www.bgs.org.uk/resources/resource-series/end-of-life-care-in-frailty>

[The aim of this guidance is to support clinicians and others in considering the needs of and providing high quality care for frail older people as they move towards the end of their lives.

It aims to prompt and support timely discussions about preferences for care, ideally at a time which facilitates the input of the older person themselves.]

Freely available online

Enhanced Care: Guidance on service development in the hospital setting

Faculty of Intensive Care Medicine (FICM); 2020.

https://www.ficm.ac.uk/sites/default/files/enhanced_care_guidance_final_-_may_2020.pdf

[The guidance outlines a framework to consider when creating a service for patients whose care needs fall into the gap between what can be provided on a normal ward and in critical care....To ensure there is an overarching governance structure we recommend a set of principles to follow during development and implementation, including close liaison with critical care so that there can be seamless transition for patients should they need it.]

Freely available online

How to have urgent conversations about withdrawing and withholding life-sustaining treatments in critical care – including phone and video calls

Faculty of Intensive Care Medicine (FICM); 2020.

https://www.ficm.ac.uk/sites/default/files/how_to_have_urgent_conversations_about_withdrawing_and_withholding_life-sustaining_treatments_in_critical_care.pdf

[This rapidly produced guidance encompasses urgent phone or video call conversations about withholding, or withdrawing life-sustaining treatments in critical care, in the context of the COVID-19 pandemic, between professionals and people close to the patient – usually family members. This guide is based on existing best practice guidance and research.]

Freely available online

Reports

The following report(s) may be of interest:

Activities delivered at home by family carers to maintain cognitive function in people with dementia socially isolating during COVID-19: Evidence for Non – technology based activities / interventions.

Centre for Evidence-Based Medicine; 2020.

<https://www.cebm.net/covid-19/activities-delivered-at-home-by-family-carers-to-maintain-cognitive-function-in-people-with-dementia-socially-isolating-during-covid-19-evidence-for-non-technology-based-activities-inte/>

[The aim of this rapid review is to establish the evidence for which non-technology based activities that can be delivered at home by family carers, are effective in maintaining cognitive function in people with dementia who are socially isolating during COVID-19. There is a small body of evidence to suggest that these activities may have some positive effects on cognition (and mood). All activities should be tailored to meet the individual needs and preferences of people with dementia.]

Freely available online

Critical Illness: Essential medicines information to support complex decision-making in critical care.

Medicines Complete; 2020.

<https://about.medicinescomplete.com/publication/critical-illness/>

[We are currently developing a resource to guide the most effective treatment for adult patients in intensive care. Due to these exceptional circumstances we are releasing as much content as we can now and at no charge, to support the NHS and MedicinesComplete users working in critical care during the COVID-19 crisis. The advance release comprises 6 monographs considered core for critical care units (voriconazole; piperacillin with tazobactam;

ceftriaxone; fentanyl; propofol; gentamicin).]
Freely available online

Emerging findings on the impact of COVID-19 on black and minority ethnic people.

Mental Health Foundation (MHF); 2020.

<https://www.health.org.uk/news-and-comment/charts-and-infographics/emerging-findings-on-the-impact-of-covid-19-on-black-and-min>

[This article sets out some of the key points emerging from recent research on COVID-19 and health inequalities. It reviews the evidence that black and minority ethnic communities are at greater risk of catching and dying from the virus. It also considers the reasons why these groups are at greater risk.]

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.

A mixed methods study examining teamwork shared mental models of interprofessional teams during hospital discharge.

Manges K. *BMJ Quality & Safety* 2020;29(6):499-508.

[Conclusions: Examining the quality and agreement of Teamwork Shared Mental Models (teamwork-SMMs) among teams provides a better understanding of how teams coordinate care and may facilitate the development of specific team-based interventions to improve patient care at hospital discharge.]

A qualitative study of old patients' experiences of the quality of the health services in hospital and 30 days after hospitalization.

Lilleheie I. *BMC Health Services Research* 2020;20(1):446.

[The World Health Organization (WHO) defines healthcare quality as care that is effective, efficient, integrated, patient centered, equitable and safe. To deliver quality healthcare, services must include all six of the dimensions listed above. Our findings show that they do not. Healthcare focused on measurable values and biomedical inquiries. Further work must be done to ensure that integrated services are provided without a financial burden, centered on the needs and rights of older people.]

Adaptive design: adaptation and adoption of patient safety practices in daily routines, a multi-site study.

Dekker-van Doorn C. *BMC Health Services Research* 2020;20(1):426.

[Most interventions to improve patient safety (Patient Safety Practices (PSPs)), are introduced without engaging front-line professionals. Consequently, PSPs are not fully adapted to the professionals' needs or to the local context and as a result, adoption is low. To support adoption, two theoretical concepts, Participatory Design and Experiential Learning were combined in a new model: Adaptive Design.]

Best practice for peripheral intravenous catheter replacement.

Hacker Bravo P. *Evidence-Based Nursing* 2020;23(2):49.

[No difference was found in rates of catheter-related bloodstream infections (CRBSI), thrombophlebitis, pain or mortality between routine and clinically indicated peripheral intravenous catheter (PIVC) removal and replacement. Routine PIVC change does decrease infiltration and catheter occlusion. Clinically indicated catheter exchange may be a cost-saving measure for healthcare systems.]

Available with an NHS OpenAthens password

Dementia care and treatment issues.

Heale R. *Evidence-Based Nursing* 2020;23(2):40-42.

[Dementia rates are growing internationally and along with this are the complexities of caring for this growing cohort of people. It is helpful to explore the literature related specifically to this issue. Commentaries related to dementia and cognitive decline were found from January 2017 to January 2020. Key themes were identified followed by a summary and discussion]

Freely available online

Does Preoperative Decolonization Reduce Surgical Site Infections in Elective Orthopaedic Surgery? A Prospective Randomized Controlled Trial

Rohrer F. *Clinical Orthopaedics and Related Research* 2020;;10.1097/CORR.0000000000001152.

[We found no difference in the risk of SSI between the decolonization and control groups, both in *S. aureus* carriers and non-carriers. Because of the low event numbers, no definite conclusion about efficacy of routine preoperative decolonization can be drawn. The results, however, may be helpful in future meta-analyses.]

Contact the library for a copy of this article

Early rehabilitation reduces the likelihood of developing intensive care unit-acquired weakness: a systematic review and meta-analysis.

Anekwe DE. *Physiotherapy* 2020;107:1-10.

[Early rehabilitation was associated with a decreased likelihood of developing ICUAW. Our findings support early rehabilitation in the ICU. While results were consistent in both the screened and randomized populations, the wide confidence intervals suggest that well-conducted trials are needed to validate our findings.]

Contact the library for a copy of this article

Early warning scores for detecting deterioration in adult hospital patients: systematic review and critical appraisal of methodology.

Gerry S. *BMJ* 2020;369:m1501.

[Early warning scores are widely used prediction models often mandated in daily clinical practice to identify early clinical deterioration in hospital patients. However, many in clinical use were found to have methodological weaknesses. EWSs might not perform as well as expected and could have a detrimental effect on patient care. Future work should focus on approaches for developing and evaluating EWSs and investigating the impact and safety of using these scores in clinical practice.]

Effect of postoperative continuation of antibiotic prophylaxis on the incidence of surgical site infection: a systematic review and meta-analysis.

de Jonge SW. *The Lancet Infectious Diseases* 2020;;doi.org/10.1016/S1473-3099(20)30084-0.

[Overall, we identified no conclusive evidence for a benefit of postoperative continuation of antibiotic prophylaxis over its discontinuation. When best practice standards were followed, postoperative continuation of antibiotic prophylaxis did not yield any additional benefit in reducing the incidence of surgical site infection. These findings support WHO recommendations against this practice.]

Freely available online

Efficacy of topical silicone gel in scar management: A systematic review and meta-analysis of randomised controlled trials.

Wang F. *International Wound Journal* 2020;17(3):765-773.

[In summary, topical silicone gel was effective in post-operative scar prevention.]

Available with an NHS OpenAthens password for eligible users

Global prevalence and incidence of pressure injuries in hospitalised adult patients: A systematic review and meta-analysis.

Li Z. *International Journal of Nursing Studies* 2020;105:103546.

[This study suggested that the burden of pressure injuries remains substantial with over one in ten adult patients admitted to hospitals affected. Superficial pressure injuries, such as Stage I and II, are most common stages and are preventable. Our results highlight healthcare institutions' focus on pressure injuries globally and supports the need to dedicate resources to prevention and treatment on pressure injuries.]

Contact the library for a copy of this article

Heel Pressure Injuries: Consensus-Based Recommendations for Assessment and Management.

Rivolo M. *Advances in Wound Care* 2020;9(6):332-347.

[Experts strongly endorsed 20 recommendations. Offloading, stages I and II pressure injuries, and referral criteria were areas characterized by higher level of agreement.]

Freely available online

Hospital admission may increase the risk of potentially inappropriate prescribing among older primary care patients.

Schwanda M. *Evidence-Based Nursing* 2020;23(2):56-57.

[Overall, the analyses showed a significant association between hospital admission and potentially inappropriate prescribing.]

Available with an NHS OpenAthens password

Incidence and prevalence of medical device-related pressure ulcers in children and adults.

Hu J. *Evidence-Based Nursing* 2020;23(2):62.

[Medical devices used for diagnostic, preventive or therapeutic purposes may have unintended consequences on patients such as medical device-related pressure injuries, which affect patients' well-being and increase the cost of care. Further research is warranted to inform strategies for risk assessment and prevention of medical device-related pressure ulcers.]

Available with an NHS OpenAthens password

Informing children of their parent's illness: A systematic review of intervention programs with child outcomes in all health care settings globally from inception to 2019.

Oja C. *PLoS One* 2020;:doi.org/10.1371/journal.pone.0233696.

[Children are impacted when parents are ill. This systematic review gives an overview of the current state of research and extracts what children and parents found helpful in the interventions aimed at informing children of their parent's illness.]

Intensive decontamination of emergency department surfaces is required to prevent spread of methicillin-resistant Staphylococcus aureus from actively colonised patients.

Al Mamum M. *Evidence-Based Nursing* 2020;23(2):60.

[Appropriate environmental surface decontamination practice and use of personal protective equipment are essential to reduce transmission of methicillin-resistant Staphylococcus aureus (MRSA) in emergency department care settings. Further investigations are required to explore improved environmental disinfection techniques and MRSA decolonisation strategies in order to address MRSA surface contamination when treating MRSA-infected patients.]

Interventions to Improve Older Adults' Emergency Department Patient Experience: A Systematic Review.

Berning MJ. *American Journal of Emergency Medicine* 2020;:doi: 10.1016/j.ajem.2020.03.012.

[Department-wide interventions, including geriatric ED and comprehensive geriatric assessment unit, focused care coordination with discharge planning and referral for community services, were associated with improved patient experience. Providing an assistive listening device to those with hearing loss and having a pharmacist reviewing the medication list showed an improved patient perception of quality of care provided.]

Contact the library for a copy of this article

Patient and family centered actionable processes of care and performance measures for persistent and chronic critical illness: a systematic review.

Rose L. *Critical Care Explorations* 2019;1(4):e0005.

[We identified 42 distinct actionable processes of care relevant to patients with persistent or chronic critical illness and their families, with most frequently studied processes relating to weaning, rehabilitation/mobilization, and family communication. Qualitative studies highlighted the need to address psychologic needs and distressing symptoms as well as enabling patient communication.]

Freely available online

Series 5, Part 4b. Pressure ulcers—risk assessment and risk factors.

Lloyd Jones M. *British Journal of Healthcare Assistants* 2020;14(5):225–229.

[In this section of the pressure ulcer series, the aim is to look at the purpose of undertaking a risk assessment, the value of risk assessment tools and an understanding of how risk factors increase the chances of a patient developing pressure ulcers.]

Available with an NHS OpenAthens password for eligible users

Short-term urinary catheters and their risks: an integrated systematic review.

Gyesi-Appiah E. *British Journal of Nursing* 2020;29(9):S16-S22.

[This thematic review was part of a bigger literature review into the effects of short-term urinary catheters on patients who are discharged home from an acute hospital. This integrated review examined the risks associated with short-term urinary catheters.]

Available with an NHS OpenAthens password for eligible users

Study finds medication errors common after Intensive Care Unit transfer.

Bravo P H. *Evidence-Based Nursing* 2020;23(2):61.

[Nearly half of patients transferred from Intensive Care Unit to non-Intensive Care Unit (ICU) settings experience medication error. Renal replacement therapy, anti-infective medications, haematological agents, intravenous fluids, electrolytes and diuretics prescribed during ICU stay place patients at highest risk for error. Future research must identify innovative interdisciplinary and technological interventions to decrease medical errors among high-risk transfers.]

Supporting others to learn: the role of the HCA.

Grainger A. *British Journal of Healthcare Assistants* 2020;14(5):240–245.

["Having previously looked at the key factors that facilitate our own learning let us now consider how healthcare assistants/healthcare support workers (HCAs and HCSWs) can support the learning of others in a clinical setting."]

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Supporting the person with dementia to live at home.

Nazarko L. *British Journal of Healthcare Assistants* 2020;14(5):230–236.

[Key points: The person with dementia is at increased risk of emergency hospital admission; On admission, the individual is vulnerable to adverse effects of hospitalisation, such as falls and dehydration; High-quality nursing care is crucially important in enabling the person with dementia to function to capacity; Around 36% of people with dementia admitted to hospital do not return home; Assessment and discharge planning enable people with dementia to return home, whenever possible.]

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The relationship between common risk factors and the pathology of pressure ulcer development: a systematic review.

Blackburn J. *Journal of Wound Care* 2020;29(Sup3):S4-S12.

[This review systematically analysed five papers exploring the relationship between risk factors for PU development and aetiology. It identified many risk factors and underlying pathological mechanisms that interact in the development of PU including ischaemia, stress, recovery of blood flow, tissue hypoxia and the pathological impact of pressure and shear.]

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Therapeutic Hypothermia in Critically Ill Patients: A Systematic Review and Meta-Analysis of High Quality Randomized Trials

Kim JH. *Critical Care Medicine* 2020;;10.1097/CCM.0000000000004364.

[High-quality randomized evidence indicates that therapeutic hypothermia is associated with higher mortality and no difference in good neurologic outcome in critically ill patients. Although there still might be a possibility that therapeutic hypothermia is beneficial in a specific setting, routine application of therapeutic hypothermia would better be avoided outside the settings indicated by international guidelines (adult cardiac arrest and hypoxic-ischemic encephalopathy of newborns).]

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The utilization of debriefing for simulation in healthcare: a literature review.

Kim Y. *Nurse Education in Practice* 2020;43:102698.

[The aim of this review was to examine how debriefings have been conducted in healthcare simulations. There is no absolute way to do the best debriefing. Self-led and peer-led debriefings can be effective when learners have enough ability to reflect and criticize by themselves. Learners can have rich and informative simulation learning when various methods were used for debriefing. Structured debriefing allows learners to reflect on their

performance in a psychologically safe environment.]
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Understanding hand hygiene behaviour in the intensive care unit to inform interventions: an interview study.

Lambe K. *BMC Health Services Research* 2020;20(1):353.

[This study has demonstrated that short interviews with ICU staff, founded on appropriate behavioural change frameworks, can provide an understanding of HH behaviour. This understanding can then be applied to design interventions appropriately tailored to the needs of a specific unit, which will have an increased likelihood of improving HH compliance.]

Online resources

The following resource(s) may be of interest:

Integrating Care: Depression, Anxiety and Physical Illness [online course]

King's College London; 2020.

<https://www.futurelearn.com/courses/integrating-mental-and-physical-health-depression-and-anxiety/1>

[Understand the connection between physical and mental health and improve your ability to identify symptoms and sources of help. This course is for anyone affected by physical and mental illness, their families and carers, and those working in healthcare. It has been accredited by the CPD Certification Service, which means it can be used to provide evidence of your continuing professional development.]

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