

Current awareness for Nursing

Recent guidelines and reports, articles and websites

September 2020

Guidelines

The following new guidance has recently been published:

[COVID 19 rapid guideline: renal transplantation.](#)

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

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

[In August 2020, we added recommendations for regional networks on responding to changes in local prevalence of COVID-19. We aligned recommendations for donors and recipients with our COVID-19 guideline on arranging planned care in hospitals and diagnostic services. NICE has also produced COVID-19 rapid guidelines on chronic kidney disease and dialysis service delivery.]

Freely available online

[COVID-19 rapid guideline: critical care in adults.](#)

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

<https://www.nice.org.uk/guidance/ng159>

[The purpose of this guideline is to maximise the safety of patients who need critical care during the COVID-19 pandemic, while protecting staff from infection. It will also enable services to make the best use of NHS resources. On 3 September 2020, we added guidance on treatment with corticosteroids for people with severe or critical COVID-19]

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>

[In August 2020, we updated recommendations on modifications to care in line with our COVID-19 rapid guideline on arranging planned care in hospitals and diagnostic services. This guideline focuses on what you need to stop or start doing during the pandemic. Follow the usual professional guidelines, standards and laws (including those on equalities, safeguarding, communication and mental capacity), as described in making decisions using NICE guidelines.]

Freely available online

[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.

Change made: Added COVID-19 risk pathways to support returning services.]

[COVID-19: long-term health effects.](#)

Public Health England (PHE); 2020.

<https://www.gov.uk/government/publications/covid-19-long-term-health-effects>

[Information and guidance on persistent health problems reported following acute COVID-19 disease. There is

accumulating evidence to suggest that cases of coronavirus (COVID-19) who have experienced both mild and severe symptoms can experience long-term health effects. This document provides information on the health problems reported in COVID-19 cases following acute disease, and guidance for healthcare professionals on how to advise recovering COVID-19 patients.]

[Hospital discharge service: action cards.](#)

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

<https://www.gov.uk/government/publications/hospital-discharge-service-action-cards>

[The action cards summarise the responsibilities of health and care staff in the hospital discharge process. Published 21 August 2020.]

Freely available online

[Hospital discharge service: policy and operating model.](#)

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

<https://www.gov.uk/government/publications/hospital-discharge-service-policy-and-operating-model>

[Sets out how health and care systems should support the safe and timely discharge of people who no longer need to stay in hospital. Published 21 August 2020.]

Freely available online

[NHS entitlements: migrant health guide.](#)

Public Health England (PHE); 2020.

<https://www.gov.uk/guidance/nhs-entitlements-migrant-health-guide>

[Advice and guidance for healthcare practitioners on the health needs of migrant patients.

8 September 2020: Link to guidance on reducing COVID-19 transmission, translated into 10 languages.]

[Perioperative care in adults.](#)

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

<https://www.nice.org.uk/guidance/ng180>

[This guideline covers care for adults (aged 18 and over) having elective or emergency surgery, including dental surgery. It covers all phases of perioperative care, from the time people are booked for surgery until they are discharged afterward. The guideline includes recommendations on preparing for surgery, keeping people safe during surgery and pain relief during recovery. The recommendations in this guideline were developed before the COVID-19 pandemic.]

Freely available online

[Recommendations for continued care and support of people who are clinically extremely vulnerable](#)

Royal College of Physicians (RCP); 2020.

<https://www.rcplondon.ac.uk/file/24221/download>

[Statement from the Royal College of Physicians, Royal College of Emergency Medicine, Royal College of General Practitioners, Royal College of Paediatrics and Child Health, National Voices and specialist societies highlighting the challenges faced by both doctors and patients in identifying and reducing the risks associated with COVID-19 for the most clinically vulnerable people.]

Freely available online

[Surgical site infections: prevention and treatment.](#)

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

<https://www.nice.org.uk/guidance/ng125>

[This guideline covers preventing and treating surgical site infections in adults, young people and children who are having a surgical procedure involving a cut through the skin. In August 2020, we added links to the NICE guideline on perioperative care in adults for additional recommendations on intravenous fluids, cardiac monitoring and blood glucose control in adults.]

Freely available online

[Weight management: guidance for commissioners and providers.](#)

Public Health England (PHE); 2020.

<https://www.gov.uk/government/collections/weight-management-guidance-for-commissioners-and-providers>

[Guides to support the commissioning and delivery of tier 2 weight management services for children, families and adults. These guides support commissioners and providers of tier 2 weight management services for children and their families, and adults including: local authorities; clinical commissioning groups; NHS institutions; providers of weight management services.]

[WHO Guidance on Corticosteroids for COVID-19.](#)

World Health Organization (WHO); 2020.

<https://www.who.int/publications/i/item/WHO-2019-nCoV-Corticosteroids-2020.1>

[WHO has published guidance for clinicians and health care decision-makers on the use of corticosteroids in patients with COVID-19. It recommends systemic corticosteroids for the treatment of patients with severe and critical COVID-19. We suggest not to use corticosteroids in the treatment of patients with non-severe COVID-19 as the treatment brought no benefits, and could even prove harmful. Treatment should be under supervision of a clinician.]

Reports

The following report(s) may be of interest:

[Action for equality: The time is now.](#)

NHS Confederation; 2020.

<https://www.nhsconfed.org/resources/2020/09/action-for-equality-the-time-is-now>

[This report by the NHS Confederation's Health & Care Women Leaders Network builds on and expands the work undertaken for the 2017 NHS Women on Boards 50:50 by 2020 report which examined the steps the NHS needed to take to reach the target of equal gender representation on boards by 2020. The report concludes that we need 150 more women in board level positions to reach our goal of truly diverse boards.]

Freely available online

[Creating the workforce of the future: a new collaborative approach for the NHS and colleges in England.](#)

NHS Confederation; 2020.

<https://www.nhsconfed.org/resources/2020/09/creating-the-workforce-of-the-future-collaborative-nhs-colleges>

[This report, part of the NHS Reset campaign, follows a November 2019 roundtable held by the NHS Confederation and the Independent Commission on the College of the Future. It focused on the relationship between colleges and the NHS through the lens of integrated care systems. By better embedding colleges into core NHS workforce development, and better using their local recruitment and training power, we can help to ensure a sustainable, agile and innovative future health and care workforce.]

Freely available online

[Early warning scores used in hospitals must be based on sound science.](#)

NIHR Evidence; 2020.

<https://evidence.nihr.ac.uk/alert/early-warning-scores-used-in-hospitals-must-be-based-on-sound-science/>

[NIHR Alert. A new study suggests that many early warning scores are based on flawed research. The scores may not be as effective as they are believed to be. This has important implications both in clinical care and for policy makers.]

Freely available online

[Families and healthy weight approaches: qualitative review.](#)

Public Health England (PHE); 2020.

<https://www.gov.uk/government/publications/families-and-healthy-weight-approaches-qualitative-review>

[A scoping review exploring the barriers and facilitators to supporting families with children most at risk of developing excess weight. The review presents evidence from the UK and Europe in considering practice implications for the development and delivery of weight management services looking specifically at qualitative evidence relating to families with children: from certain minority ethnic groups; from low socio-economic communities; living with intellectual and/or physical disabilities.]

[Impact of perioperative care on healthcare resource use: Rapid research review.](#)

Centre for Perioperative Care; 2020.

<https://cpoc.org.uk/cpoc-publishes-major-evidence-review-impact-perioperative-care>

[This review suggests perioperative care can have clinical benefits for patients and improve healthcare resource use, particularly length of hospital stay. Interventions such as prehabilitation, exercise, and smoking cessation could reduce complications after surgery by 30-80%.]

Freely available online

[NHS nursing workforce.](#)

House of Commons Public Accounts Committee; 2020.

<https://publications.parliament.uk/pa/cm5801/cmselect/cmpublicacc/408/40802.htm>

[This report finds that the NHS has 40,000 nursing vacancies, with tens of thousands of nurses leaving every year and 36 per cent of the current workforce considering leaving in the next year. It says that the progress on increasing the number of nurses in the NHS is too slow and expresses concerns about the Department of Health and Social Care's approach to addressing shortages in adult social care nurses.]

Freely available online

[NMC Strategy 2020-2025.](#)

Nursing and Midwifery Council (NMC); 2020.

<https://www.nmc.org.uk/about-us/our-role/our-strategy/>

[We have postponed a number of programmes of work outlined in our strategy, with a view to revisiting them later in the year. Our new strategy has already helped us navigate this unfolding situation. The three core pillars – regulate, support and influence - that will guide us over the next five years have enabled us to adapt our approach and be confident in our decision making in response to this pandemic.]

Freely available online

[Planned care rapid evidence review: Transforming outpatients](#)

Midlands DSU Network; 2020.

<https://midlandsdecisionsupport.nhs.uk/documents/transforming-outpatients/>

[This review is part 3 of a 3-part series exploring the evidence base of interventions to improve planned care. This pack is presented as a directory of interventions, covering eight main interventions for transforming outpatient appointments, including: One-stop clinics; community-based clinics; alternatives to consultant-led care; virtual consultations; and, virtual follow-up clinics.]

Freely available online

[Whistleblowing disclosures report 2020.](#)

Healthcare Professional Regulators; 2020.

<https://www.pharmacyregulation.org/sites/default/files/document/2020-whistleblowing-report.pdf>

[As with previous years, healthcare professional regulators have compiled a joint whistleblowing disclosures report to highlight their coordinated effort in working together to address the serious issues raised to them.]

Freely available online

Articles

[A living WHO guideline on drugs for covid-19.](#)

Lamontagne F. *BMJ* 2020;370:m3379.

[The panel made a strong recommendation for use of corticosteroids in severe and critical covid-19. In contrast, the panel concluded that patients with non-severe covid-19 would decline this treatment because they would be unlikely to benefit and may be harmed. Indiscriminate use of any therapy for covid-19 would potentially rapidly deplete global resources and deprive patients who may benefit from it most as potentially lifesaving therapy.]

Available with an NHS OpenAthens password for eligible users

[A systematic review evaluating the influence of incisional Negative Pressure Wound Therapy on scarring.](#)

Zwanenburg PR. *Wound Repair and Regeneration* 2020;:doi: 10.1111/wrr.12858.

[Preclinical as well as clinical evidence indicates a beneficial influence of iNPWT on scarring. Moderate level evidence

indicates that iNPWT decreases scar width and improves patient and observer-reported scar satisfaction.]
Freely available online

[**Aromatherapy for dementia.**](#)

Ball EL. *Cochrane Database of Systematic Reviews* 2020;8:CD003150.

[BACKGROUND: Complementary therapies, including aromatherapy, are attractive to patients, practitioners and families, because they are perceived as being unlikely to cause adverse effects. Therefore there is interest in whether aromatherapy might offer a safe means of alleviating distressed behaviours in dementia.] *Freely available online*

[**Black lives matter and the disparities and risk of COVID-19 in BAME nurses.**](#)

Brathwaite B. *British Journal of Healthcare Assistants* 2020;14(7):318–320.

[Inequalities based on ethnicity have a part to play in the higher death rates and the impact of long-term conditions on BAME people (Brathwaite, 2020). COVID-19 has highlighted these long-standing inequalities in health and society (Marmot et al, 2020).]

Available with an NHS OpenAthens password for eligible users

[**Closing the loop on test results to reduce communication failures: a rapid review of evidence, practice and patient perspectives.**](#)

Wright B. *BMC Health Services Research* 2020;20(1):897.

[This paper draws together multiple perspectives on the problem of failures in diagnostic test results communication to inform appropriate interventions. Across the three studies, technology was identified as the most feasible option for closing the loop on test result communication. However, the importance of clear, consistent communication and more streamlined processes were also key elements that emerged.] *Freely available online*

[**Coproduction: when users define quality.**](#)

Elwyn G. *BMJ Quality & Safety* 2020;29(9):711-716.

[There are indications that interest in a concept called coproduction in healthcare is increasing. The core thesis is that by leveraging professional and end user collaboration, patients can be supported to contribute more to the management of their own conditions. This is especially true when dealing with long-term conditions, where supporting the person to learn how best to reduce the burden of both illness and treatment is an undisputed good...] *Available with an NHS OpenAthens password for eligible users*

[**Delivering exceptionally safe transitions of care to older people: a qualitative study of multidisciplinary staff perspectives.**](#)

Baxter R. *BMC Health Services Research* 2020;20(1):780.

[Transitions of care are often risky, particularly for older people, and shorter hospital stays mean that patients can go home with ongoing care needs. Most previous research has focused on fundamental system flaws, however, care generally goes right far more often than it goes wrong. We explored staff perceptions of how high performing general practice and hospital specialty teams deliver safe transitional care to older people as they transition from hospital to home.] *Freely available online*

[**Development and validation of a new instrument to measure nursing students compassion strengths: The Bolton Compassion Strengths Indicators.**](#)

Durkin M. *Nurse Education in Practice* 2020;46:102822.

[Despite considerable research and rhetoric on the importance of compassion in nursing, progress has been hindered by the lack of an adequate psychometric instrument to measure its multidimensional nature. This paper reports several studies conducted over three stages, to develop and validate a new instrument to measure nurses' compassion strengths. A purposive sample of UK pre-registered nursing students studying at a University took part in this study.]

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[**Education and training for preventing and minimizing workplace aggression directed toward healthcare workers.**](#)

Geoffrion S. *Cochrane Database of Systematic Reviews* 2020;9:CD011860.

[Workplace aggression constitutes a serious issue for healthcare workers and organizations. Aggression is tied to physical and mental health issues at an individual level, as well as to absenteeism, decreased productivity or quality of work, and high employee turnover rates at an organizational level. To counteract these negative impacts, organizations have used a variety of interventions, including education and training, to provide workers with the knowledge and skills to prevent aggression.] *Freely available online*

[Evaluation of nurses' experiences of a post education program promoting recognition and response to patient deterioration: Phase 2, clinical coach support in practice.](#)

Duff B. *Nurse Education in Practice* 2020;46:102835.

[Front-line nurses providing around the clock care are pivotal to the identification, recognition, and response to patient deterioration. However, there is growing evidence that patient deterioration indicators are poorly managed and not escalated to rapid response teams (RRTs), contributing to adverse outcomes. Access to effective educational programs has been cited as vital in optimising nurses' recognition and response to deteriorating patients.]

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[High fidelity simulation evaluation studies in nursing education: A review of the literature.](#)

Hanshaw S. *Nurse Education in Practice* 2020;46:102818.

[Simulation is an experiential learning process which provides a safe environment for learning, preventing the risk of patient harm. A review of the literature was conducted using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses approach to explore the question: What is the state of the science on the evidence of learning outcomes in high-fidelity simulation in undergraduate nursing education?]

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[How can patient-held lists of medication enhance patient safety? A mixed-methods study with a focus on user experience.](#)

Garfield S. *BMJ Quality & Safety* 2020;29(9):764-773.

[Conclusion: Our findings suggest that patients and healthcare professionals perceive patient-held medication lists to have a wide variety of benefits. Interventions are needed to raise awareness of the potential role of these lists in enhancing patient safety. Such interventions should empower patients and carers to identify a method that suits them best from a range of options and avoid a 'one size fits all' approach.]

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[Impact of a targeted bundle of audit with tailored education and an intubation checklist to improve airway management in the emergency department: an integrated time series analysis.](#)

Groombridge C. *Emergency Medicine Journal* 2020;37(9):576-580.

[This bundle of airway management initiatives was associated with significant improvement in the first-attempt success rate of ETI. The introduction of a regular education programme based on the audit of a dedicated airway registry, combined with a periprocedure checklist is a worthwhile ED quality improvement initiative.]

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[Impact of organizational silence and favoritism on nurse's work outcomes and psychological well-being](#)

De Los Santos J. *Nursing forum* 2020;:1-11.

[The study aimed to assess the impacts of organizational silence and favoritism on work outcomes and psychological wellbeing among nurses working in hospitals. The results of this study provide an insight to the effects of organizational silence and favoritism towards nurses' work outcomes and psychological wellbeing. Improving the channels of communication among the healthcare team is vital to promote inclusivity among healthcare workers and enhance organizational viability.]

Available with an NHS OpenAthens password

[Improving the quality of trauma meetings by implementation of a modern trauma management platform.](#)

Sephton BM. *BMJ Open Quality* 2020;9(3):DOI: 10.1136/bmjoq-2020-000998.

[To conclude, introduction of a new cloud-based trauma management platform has had a positive impact overall within our trust. Modern electronic trauma systems have the ability to improve our trauma management, this must go hand in hand, however, with a structured and effectively communicated trauma meeting.] *Freely available online*

[Incidence of Venous Thromboembolism in Hospitalized Coronavirus Disease 2019 Patients: A Systematic Review and Meta-Analysis.](#)

Zhang C. *Frontiers in Cardiovascular Medicine* 2020;7:151 .

[This meta-analysis revealed that the estimated VTE incidence was 25% in hospitalized COVID-19 patients. Higher incidence of VTE was observed in COVID-19 patients with a severe condition or with a low rate of pharmacologic thromboprophylaxis. Assessment of VTE risk is strongly recommended in COVID-19 patients, and effective measures of thromboprophylaxis should be taken in a timely manner for patients with high risk of VTE.]

Freely available online

[Mobile technologies to support healthcare provider to healthcare provider communication and management of care.](#)

Gonçalves-Bradley DC. *Cochrane Database of Systematic Reviews* 2020;8:CD012927.

[OBJECTIVES: To assess the effects of mobile technologies versus usual care for supporting communication and consultations between healthcare providers on healthcare providers' performance, acceptability and satisfaction, healthcare use, patient health outcomes, acceptability and satisfaction, costs, and technical difficulties.] *Freely available online*

[Openness in the NHS: a secondary longitudinal analysis of national staff and patient surveys.](#)

McCarthy I. *BMC Health Services Research* 2020;20(1):900.

[Data suggest that the Francis inquiry may have had a positive impact on staff and acute inpatients' perceptions and experiences of openness in the NHS. However such improvements have not transpired in mental health. How best to create an environment in which patients can discuss their care and raise concerns openly in mental health settings may require further consideration.] *Freely available online*

[Oxygen targets in the intensive care unit during mechanical ventilation for acute respiratory distress syndrome: a rapid review.](#)

Cumpstey AF. *Cochrane Database of Systematic Reviews* 2020;9:CD013708.

[OBJECTIVES: To address how oxygen therapy should be targeted in adults with ARDS (particularly ARDS secondary to COVID-19 or other respiratory viruses) and requiring mechanical ventilation in an intensive care unit, and the impact oxygen therapy has on mortality, days ventilated, days of catecholamine use, requirement for renal replacement therapy, and quality of life.] *Freely available online*

[Prescribing medicines to older people: How to consider the impact of ageing on human organ and body functions.](#)

Drenth-van Maanen AC. *British Journal of Clinical Pharmacology* 2020;86(10):1921– 1930.

[Summarises most clinically relevant changes in human organ and body functions and consequential changes in pharmacokinetics and pharmacodynamics in older people, along with possible dosing consequences or alternatives for drugs frequently prescribed to this population]

Freely available online

[Prognostic utilization of models based on the APACHE II, APACHE IV, and SAPS II scores for predicting in-hospital mortality in emergency department.](#)

Rahmatinejad Z. *American Journal of Emergency Medicine* 2020;38(9):1841-1846.

[APACHE IV outperformed APACHE II and SAPS II in terms of discrimination and calibration. More validation is needed for using these models for decision-making about individual patients, although they would perform best at a cohort level.]

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[Prospective validation of classification of intraoperative adverse events \(ClassIntra\): international, multicentre cohort study.](#)

Dell-Kuster S. *BMJ* 2020;370:m2917.

[ClassIntra is the first prospectively validated classification for assessing intraoperative adverse events in a standardised way, linking them to postoperative complications with the well established Clavien-Dindo classification. ClassIntra can be incorporated into routine practice in perioperative surgical safety checklists, or used as a

monitoring and outcome reporting tool for different surgical disciplines.] *Available with an NHS OpenAthens password for eligible users*

[Protecting frontline workers and their patients from infection.](#)

Glasper A. *British Journal of Healthcare Assistants* 2020;14(7):342–348.

[Key points: The primary role of personal protective equipment (PPE) within the healthcare environment is either to protect the patient from the healthcare worker or the healthcare worker from the patient; The Care Quality Commission (CQC) checks that staff members receive effective training in safety systems, processes and practices, so that PPE can be used effectively.]

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[Risk stratification of patients admitted to hospital with covid-19 using the ISARIC WHO Clinical Characterisation Protocol: development and validation of the 4C Mortality Score.](#)

Knight SR. *BMJ* 2020;370:m3339.

[An easy-to-use risk stratification score has been developed and validated based on commonly available parameters at hospital presentation. The 4C Mortality Score outperformed existing scores, showed utility to directly inform clinical decision making, and can be used to stratify patients admitted to hospital with covid-19 into different management groups. The score should be further validated to determine its applicability in other populations.]

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[Series 5, chronic wounds. Part 4d. Classification of pressure ulcers.](#)

Lloyd Jones M. *British Journal of Healthcare Assistants* 2020;14(7):321–323.

[Pressure ulcers are reported by category and it is therefore important that the same classifications of pressure ulcers and terms are used by everyone. NHS Improvement (2018) had identified inconsistency in reporting pressure ulcers; in an attempt to ensure consistency, it introduced a revised document in 2018 to try and clarify the categorising and reporting of pressure ulcers.]

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[Severe COVID-19 Infections - Knowledge Gained and Remaining Questions.](#)

Bos LDJ. *JAMA Internal Medicine* 2020;;doi:10.1001/jamainternmed.2020.6047.

[Editorial outlines the evidence for the management of patients with severe COVID-19 and acute respiratory distress syndrome, emphasising the current certainties and gaps in knowledge.]

Freely available online

[The Comparative Efficacy of Chlorhexidine Gluconate and Povidone-iodine Antiseptics for the Prevention of Infection in Clean Surgery: A Systematic Review and Network Meta-analysis.](#)

Wade RG. *Annals of Surgery* 2020;; doi: 10.1097/SLA.0000000000004076.

[Alcoholic formulations of 4%-5% CHG seem to be safe and twice as effective as PVI (alcoholic or aqueous solutions) in preventing infection after clean surgery in adults. Our findings concur with the literature on contaminated and clean-contaminated surgery, and endorse guidelines worldwide which advocate the use of alcoholic CHG for preoperative skin antisepsis.]

Freely available online

[The Comparative Efficacy of Multiple Interventions for Mild Cognitive Impairment in Alzheimer's Disease: A Bayesian Network Meta-Analysis.](#)

Lai X. *Frontiers in Aging Neuroscience* 2020;12:121 .

[Among the nine treatments studied, music therapy appears to be the best treatment for MCI, followed by acupuncture. Our study provides new insights into potential clinical treatments for MCI due to AD, and may aid the development of guidelines for MCI in AD.]

Freely available online

[What factors predict length of stay in the intensive care unit? Systematic review and meta-analysis](#)

Peres IT. *Journal of Critical Care* 2020;60:183-194.

[This work suggested a list of risk factors that should be considered in prediction models for ICU LoS, as follows: severity scores, mechanical ventilation, hypomagnesemia, delirium, malnutrition, infection, trauma, red blood cells,

and PaO₂:FiO₂. Our findings can be used by prediction models to improve their predictive capacity of prolonged stay patients, assisting in resource allocation, quality improvement actions, and benchmarking analysis.]

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Websites

[Frailty Hub.](#)

British Geriatrics Society (BGS); 2020.

<https://www.bgs.org.uk/resources/resource-series/frailty-hub>

[This page brings together articles, national guidelines and best practice relevant to frailty and is frequently reviewed and updated by the BGS Clinical Quality Committee and the Frailty in Urgent Care Settings Special Interest Group (SIG). The hub consists of 6 areas: Introduction to frailty ; Frailty in specific settings; Setting up and developing frailty services; Frailty and the NHS; Education and training resources; Research.]

Freely available online

[Using nurse degree apprenticeships webinar.](#)

NHS Employers; 2020.

<https://www.nhsemployers.org/case-studies-and-resources/2020/09/using-nurse-degree-apprenticeships-webinar>

[Watch the recording of our webinar and find out what funding is available to support you to train nursing apprentices. Hear good practice from University Hospitals Southampton NHS Foundation Trust and Newcastle Upon Tyne Hospitals NHS Trust about how they've used nurse degree apprenticeships within their organisations.]

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