

Current awareness for Nursing

Recent guidelines and reports, articles and websites

September 2021

Items relating specifically to Covid-19 start on page 7.

Guidelines

[Babies, children and young people's experience of healthcare.](#)

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

<https://www.nice.org.uk/guidance/ng204>

["This guideline describes good patient experience for babies, children and young people, and makes recommendations on how it can be delivered. It aims to make sure that all babies, children and young people using NHS services have the best possible experience of care. It is recognised that parents and carers play a key role, and where appropriate, we took their views into account when developing the recommendations."]

Freely available online

[End of life care for adults.](#)

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

<https://www.nice.org.uk/guidance/qs13>

[In September 2021, this quality standard was updated and replaced the previous version published in 2011. The topic was identified for update following the annual review of quality standards. The review identified changes in the priority areas for improvement and new NICE guidance on end of life care for adults and supporting adult carers.]

Freely available online

Reports

The following report(s) may be of interest:

[Behaviour change interventions to optimise antibiotic prescribing.](#)

Public Health England (PHE); 2021.

<https://www.gov.uk/government/publications/behaviour-change-interventions-to-optimise-antibiotic-prescribing>

[Strategic behavioural analysis that aims to help understand and change behaviours related to antimicrobial stewardship and antibiotic prescribing.]

Freely available online

[Compensating for clinical negligence: the need to go back to basics.](#)

Tingle J. *British Journal of Nursing* 2021;30(16):986-987.

[The author discusses several reports looking at how our clinical negligence compensation system operates, and possible reform of this. Currently our adversarial, tort-based clinical negligence compensation system is being reviewed by the Government with a view to reform (Hyde, 2021). This review will raise some fundamental issues such as the nature and purpose of the system. What are and what should be the underlying objectives of the system? How do we deal with competing interests?]

Available with an NHS OpenAthens password for eligible users

[Health and Care Bill: combined impact assessments.](#)

Department of Health and Social Care (DHSC); 2021.

<https://www.gov.uk/government/publications/health-and-care-bill-combined-impact-assessments/>

[The Health and Care Bill was introduced to Parliament on 6 July 2021, following publication of the white paper Integration and innovation: working together to improve health and social care for all in February 2021. This primary legislation will build on the NHS' own proposals for reform to make the health and care system less bureaucratic, more accountable, and more integrated in the wake of COVID-19. The Regulatory Policy Committee has rated these impact assessments as fit-for-purpose.]

Freely available online

[National survey of malnutrition and nutritional care in adults.](#)

British Association for Parenteral and Enteral Nutrition (BAPEN); 2021.

<https://www.bapen.org.uk/news-and-media/news/907-national-survey-of-malnutrition-and-nutritional-care-in-adults-survey-report-published>

[This report outlines the findings of a survey that aimed to take the temperature on the status of nutritional care across all health and social care settings in the UK. The survey found that 40 per cent of patients were at risk of malnutrition but also that the majority of patients had a nutritional care plan in place, particularly for those who were at medium or high risk of malnutrition.]

Freely available online

[Patient Experience in England 2021.](#)

Patient Experience Library; 2021.

<https://pexlib.net/?231942=>

[This annual overview of the evidence gives a patient's-eye view of service quality, and of some of the big issues in healthcare, including: The elective care backlog, where the question for patients is not just "why are we waiting", but "how are we waiting"; Digital healthcare, taking in people's anxieties about data sharing, and looking at the quality and reliability of healthcare apps; Compliments and complaints.]

Freely available online

[Preoperative hair removal to reduce surgical site infection.](#)

Tanner J. *Cochrane Database of Systematic Reviews* 2021;8:CD004122.

[BACKGROUND: Hair has traditionally been removed from the surgical site before surgery; however, some studies claim that this increases surgical site infections (SSIs) and should be avoided. This is the second update of a review published in 2006 and first updated in 2011.

OBJECTIVES: To determine whether routine preoperative hair removal (compared with no removal) and the method, timing, or setting of hair removal effect SSI rates.]

[Reducing catheter-associated urinary tract infections.](#)

Public Health England (PHE); 2021.

<https://www.gov.uk/government/publications/reducing-catheter-associated-urinary-tract-infections>

[Strategic behavioural analysis that aims to help understand and change behaviours related to catheter-associated urinary tract infections.]

Freely available online

[Right time, right place: urgent community-based care for older people.](#)

British Geriatrics Society (BGS); 2021.

<https://www.bgs.org.uk/righttimerightplace>

[This document explores emerging community models for responding to an older person's urgent care needs without them being admitted to hospital. It identifies commonalities and connections between different community responses, offering a brief explanation of the main models, such as hospital at home and urgent community response. There is a lack of consensus around definitions of services and provision in different parts of the country.]

Freely available online

[Urgent and emergency care survey 2020.](#)

Care Quality Commission (CQC); 2021.

<https://www.cqc.org.uk/publications/surveys/urgent-emergency-care-survey-2020>

[Survey (n=48,630) shows most people felt they were treated with respect and dignity, but they were less positive about areas of care including pain management, emotional support, availability of staff when they felt they needed attention, and information provided at discharge.]

Freely available online

[What support do nurses and midwives qualifying in the age of Covid-19 need? Insights from UNISON members 2021.](#)

UNISON; 2021.

<https://www.unison.org.uk/content/uploads/2021/08/UNISON-Health-NQN-NQM-support-during-Covid-19-1.pdf>

[This report finds that more than two-thirds (70 per cent) of students or newly qualified nurses and midwives believe they have missed out on important learning experiences during Covid. The findings also show more than half (56 per cent) of final year students worry they're not as prepared for qualification as they should be. The report calls for the government and NHS leaders to give greater support to the newly qualified health staff.]

Freely available online

Articles

The following article(s) may be of interest:

[Ability of triage nurses to predict, at the time of triage, the eventual disposition of patients attending the emergency department \(ED\): a systematic literature review and meta-analysis.](#)

Afnan MAM. *Emergency Medicine Journal* 2021;38(9):694-700.

[Triage nurse prediction of disposition is not accurate enough to expedite admission for ED patients on a one-to-one basis. Future research should explore the benefit, and best method, of predicting total demand.] *Available with an NHS OpenAthens password for eligible users*

[Accuracy of weight estimation methods in adults, adolescents and children: a prospective study.](#)

Cattermole GN. *Emergency Medicine Journal* 2021;38(9):718-723.

[This prospective study of weight estimation methods across all age groups is the first adult study of PAWPER and Mercy methods. In children, age-based rules performed poorly. In patients of all ages, the PAWPER XL-MAC and guardian/participant estimates of weight were the most reliable and we would recommend their use in this setting.]

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[Acute hospital preoperative assessment redesign: streamlining the patient pathway and reducing on-the-day surgery cancellations.](#)

Brazil D. *BMJ Open Quality* 2021;10(3):DOI: 10.1136/bmjopen-2021-001338.

[Avoidable surgery cancellations in an acute trust were often attributed to inadequate preoperative assessment. These assessments, undertaken shortly before surgery, were delivered across eight different locations, 60% by a central nursing team and the remainder by other healthcare professionals. Conclusion: The bundle of 17 interlinked interventions proved highly effective in delivering sustained improvements, which could be adopted by other trusts.]

Freely available online

[Addressing Institutional Racism in Healthcare Organizations.](#)

Botwinick L. *Healthcare Executive* 2021;36(3):42-43.

[This article presents strategies in five core areas to guide health care leaders as they seek to address institutional racism in their organizations, one component of IHI's framework for Achieving Health Equity: A Guide for Health Care Organizations. Such efforts involve a commitment to change structures, processes, and norms and to engage all who work at the organization.]

Available with free registration

[Addressing the current challenges of adopting evidence-based practice in nursing.](#)

Kerr H. *British Journal of Nursing* 2021;30(16):970-974.

[This aim of this article is to explore the current position of evidence-based practice (EBP) in nursing. The article provides an overview of the historical context and emergence of EBP with an outline of the EBP process. There is an exploration of the current challenges facing the nursing profession as it endeavours to adopt EBP into care delivery, along with actions to address these challenges. There will also be a discussion on how to integrate EBP into undergraduate nursing curricula.]

Available with an NHS OpenAthens password for eligible users

[**Airborne infection risk during open-air cardiopulmonary resuscitation.**](#)

Dbouk T. *Emergency Medicine Journal* 2021;38(9):673-678.

[The fluid dynamics, simulation-based AIR Index provides a classification of the risk of contagion by victim's aerosol in the case of hands-only CPR considering environmental factors such as wind speed and direction, relative humidity and temperature. Therefore, we recommend that rescuers perform a quick assessment of their airborne infectious risk before starting CPR in the open air and positioning themselves to avoid wind directed to their faces.]

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[**"Awareness to touch": a qualitative study of nurses' perceptions of interpersonal professional contact after an experiential training.**](#)

De Luca E. *Nurse Education in Practice* 2021;56:103187.

[This study aimed to explore nurses' perceptions of touch in their professional practice and how these perceptions were articulated in discourse, among participants who attended a specific training on touch and those who did not. Touch is an essential part of nursing practice. Research showed that the use of touch influences patients' general well-being, improving a sense of presence and infusing security and encouragement.]

Available with an NHS OpenAthens password for eligible users

[**Education and training as key drivers for improving the quality of fluid balance charts: findings from a quality improvement project.**](#)

Madu A. *BMJ Open Quality* 2021;10(3):DOI: 10.1136/bmj-2020-001137.

[Conclusion: The problem of poor-quality fluid balance charts and its toll on patients' care is perennial. The practicability and sustainability of this project are buttressed by the fact that its implementation comes at no added cost. Even as hospitals transition to paperless documentations, education and training remain key to achieving success in improving the quality of fluid balance charts]

Freely available online

[**Effect of intravenous fluid treatment with a balanced solution vs 0.9% saline solution on mortality in critically ill patients: the baSICS randomized clinical trial.**](#)

JAMA 2021;;e2111684.

[Among critically ill patients requiring fluid challenges, use of a balanced solution compared with 0.9% saline solution did not significantly reduce 90-day mortality. The findings do not support the use of this balanced solution.]

Contact the library for a copy of this article

[**Empathy and patient advocacy: a medical student's perspective.**](#)

Chitambara T. *British Journal of Nursing* 2021;30(16):981.

[As a medical student, I am often required to reflect on my experiences during my time on clinical placements. There are a wide variety of themes on which these reflective pieces can focus, and the experiences can be good, bad or both. It can be difficult to select individual experiences and concisely articulate them. However, an area that gained my interest was the nurse-patient relationship.]

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[**Empowering patients: simplifying discharge instructions.**](#)

DeSai C. *BMJ Open Quality* 2021;10(3):DOI: 10.1136/bmj-2021-001419.

[Conclusion:...Many patients do not read their discharge papers, and it is important to motivate them to read these important documents by making them as accessible as possible. Through the EHR, we applied the concepts of the simplified information page (SIP) to create a more accessible cover page for the standard printed patient discharge packet, creating a sustainable improvement in patient discharge instructions.] *Freely available online*

[**Factors influencing physician responsiveness to nurse-initiated communication: a qualitative study.**](#)

Manojlovich M. *BMJ Quality & Safety* 2021;30(9):747-754.

[Conclusions: Physician responsiveness to communications from bedside nurses depends on a complex combination of factors related to the message itself and non-message related factors. How quickly physicians respond is a multifactorial phenomenon, and strategies to promote a timely response within the context of a given situation must be directed to both groups.]

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[**“Feel the fear and do it anyway” ... nursing students’ experiences of confronting poor practice.**](#)

Jack K. *Nurse Education in Practice* 2021;56:103196.

[The two aims of this study were, first, to explore nursing students’ experiences and perspectives of reporting poor care and second, examine the process by which they raised concerns. The nursing literature is replete with studies which explore nursing students’ experiences of clinical placement. However only a small number explore students experiences of challenging poor care and how this is enacted in the practice setting.]

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[**Implementing technology to support the deteriorating patient in acute care: evaluating staff views.**](#)

Irons A. *British Journal of Nursing* 2021;30(16):950-955.

[Early warning scores (EWS) have been widely used to aid in the detection of deterioration. The use of technology, alongside EWS, may improve patient safety and lead to improvements in the accuracy of documentation. The aim of this service evaluation was to understand nurses' and healthcare support worker views around the implementation of handheld electronic devices for documenting care related to the deteriorating patient.]

Available with an NHS OpenAthens password for eligible users

[**Interventions to Improve Communication at Hospital Discharge and Rates of Readmission: A Systematic Review and Meta-analysis.**](#)

Becker C. *JAMA Network Open* 2021;4(8):e2119346.

[In this systematic review and meta-analysis including a pooled analysis of 19 randomized clinical trials involving 3953 patients for the primary end point, communication interventions at discharge were significantly associated with lower readmission rates, higher medication adherence, and higher patient satisfaction.]

Freely available online

[**Journey mapping as a novel approach to healthcare: a qualitative mixed methods study in palliative care.**](#)

Ly S. *BMC Health Services Research* 2021;21(1):915.

[Journey mapping involves the creation of visual narrative timelines depicting the multidimensional relationship between a consumer and a service. The use of journey maps in medical research is a novel and innovative approach to understanding patient healthcare encounters. Participants were able to identify barriers to effective palliative care and opportunities to improve care delivery by observing patterns of patient function and healthcare encounters over multiple settings.]

Freely available online

[**Organizing work in local service implementation: an ethnographic study of nurses' contributions and competencies in implementing a municipal acute ward.**](#)

Krone-Hjertstrøm H. *BMC Health Services Research* 2021;21(1):840.

[Our study illustrates that nurses' contributions are vital to coordinating and adjusting extended services. Organizing work, in addition to clinical work, is a crucial aspect of nursing work. It 'glues' the complex and varied components of the individual patient's services into coherent and holistic care trajectories. It is this organizing competence that nurses utilize when coordinating and adjusting extended services.]

Freely available online

[**Preparation for the next major incident: are we ready? Comparing major trauma centres and other hospitals.**](#)

Mawhinney JA. *Emergency Medicine Journal* 2021;38(10):765-768.

[Confidence in using MIPs among specialty registrars in England remains low. Doctors at MTCs tended to be better prepared and more knowledgeable, but this effect was only marginally significant. We make several

recommendations to improve education on major incidents.]
Available with an NHS OpenAthens password for eligible users

[SECURE: a multicentre survey of the safety of emergency care in UK emergency departments.](#)

Flowerdew L. *Emergency Medicine Journal* 2021;38(10):769-775.

[This study provides the first step towards assessing ED safety culture and describing risks in the UK. Identifying outlier sites provides opportunities to learn from excellence. Repeat application of the survey will enable monitoring of safety interventions on a local and national level.]

Available with an NHS OpenAthens password for eligible users

[Systematic review of the effects of antimicrobial cycling on bacterial resistance rates within hospital settings.](#)

Chatzopoulou M. *British Journal of Clinical Pharmacology*

2021;:https://bpspubs.onlinelibrary.wiley.com/doi/abs/10.1111/bcp.15042.

[Dearth of robust designs and standardised protocols limits our ability to reach safe conclusions. Nonetheless, in view of the available data we find no reason to believe that cycling should be expected to improve antibiotic resistance rates within hospitals.]

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[Team working part 4: managing a team.](#)

Fowler J. *British Journal of Nursing* 2021;30(16):988.

[A positive, well-managed team can help turn a difficult and demanding job into one that is supportive and rewarding. Over the years, I have worked for nurses who were good leaders, but poor managers and also for nurses who were good managers, but poor leaders. I've also worked for some who were both good managers and good leaders, although they were in the minority.]

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[The global elements of vital signs' assessment: a guide for clinical practice.](#)

Elliott M. *British Journal of Nursing* 2021;30(16):956-962.

[The assessment of vital signs is critical for safe, high-quality care. Vital signs' data provide valuable insight into the patient's condition, including how they are responding to medical treatment and, importantly, whether the patient is deteriorating. Although abnormal vital signs have been associated with poor clinical outcomes, research has consistently found that vital signs' assessment is often neglected in clinical practice.]

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[The innovation characteristics of person-centred care as perceived by healthcare professionals: an interview study employing a deductive-inductive content analysis guided by the consolidated framework for implementation research.](#)

Fridberg H. *BMC Health Services Research* 2021;21(1):904.

[We identified nine CFIR constructs that seem pertinent to HCPs' perceptions of PCC. HCPs report an array of mixed perceptions of PCC, underlining its complex nature. The perceptions are shaped by a range of factors, such as their individual understandings of the concept and the operationalisation of PCC in their local context. Stakeholders in charge of implementing PCC might use the results as a guide, delineating factors that may be important to consider in a wide range of healthcare contexts.]

Freely available online

Events

[Urgent and emergency care \(virtual conference\)](#)

[PAID EVENT. Despite moves away from hospital-based care towards alternative solutions, urgent and emergency care is still under great pressure. Join this event to hear about the latest debates and solutions to a very challenging issue: trying to ease the pressure on urgent and emergency care delivery.]

Virtual conference, web-based

From: 4th October, 2021 9:30am Until: 7th October, 2021 12:30pm <https://www.kingsfund.org.uk/events/urgent-and-emergency-care-virtual-conference>

Newsletters

Monthly update from the CQC

<https://content.govdelivery.com/accounts/UKCQC/bulletins/2ef2c4b>

A monthly update for health and social care professionals on how CQC is implementing its new strategy and transforming how it regulates.

NICE News August 2021

<https://mailchi.mp/nice/nice-news-august-210825?e=38186568b8>

The latest news, features and guidance from NICE

Cochrane Connect August 2021

<http://emails.cochrane.org/previewCampaign.aspx?c=97648&a=236479&ea=m.theaker@nhs.net&cid=170>

Coronavirus updates, featured reviews and organisational news.

Covid-19

Guidelines

[Clinical guide for the management of critical care for adults with COVID-19 during the Coronavirus pandemic – UPDATED SECTION 5 CONTENT \(recovery, respiratory failure\)](#)

The Faculty of Intensive Care Medicine; 2021.

<https://icmanaesthesiacovid-19.org/clinical-guide-for-the-management-of-critical-care-for-adults-with-covid-19-during-the-coronavirus-pandemic>

[This clinical guidance provides contemporary information for practising clinicians caring for critically ill adult patients with COVID-19. Whilst many of these patients will be cared for on intensive care units, some patients receiving continuous positive airways pressure (CPAP) and/or non-invasive ventilation (NIV) may be cared for on specialist respiratory wards. Version 6 updates the previous FICM and ICS guidelines published in April 2021, section 5 ‘Management of respiratory failure’.]

Freely available online

[COVID-19 rapid guideline: managing COVID-19.](#)

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

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

[In September 2021, NICE added new recommendations on non-invasive respiratory support and doxycycline, and updated existing recommendations on heparins.]

Freely available online

[COVID-19 vaccination: blood clotting information for healthcare professionals.](#)

Public Health England (PHE); 2021.

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

[Information for healthcare professionals on blood clotting following COVID-19 vaccination. 23 August 2021: Updated guidance document.]

Freely available online

[COVID-19 vaccination: myocarditis and pericarditis information for healthcare professionals.](#)

Public Health England (PHE); 2021.

<https://www.gov.uk/government/publications/covid-19-vaccination-myocarditis-and-pericarditis-information-for-healthcare-professionals>

[Information for healthcare professionals on myocarditis and pericarditis following COVID-19 vaccination.]

Freely available online

[Guidance from the Expert Haematology Panel \(EHP\) on Covid-19 Vaccine-induced Immune Thrombocytopenia and Thrombosis \(VITT\)](#)

British Society for Haematology; 2021.

<https://b-s-h.org.uk/media/20075/guidance-version-22-20210903.pdf>

[Updated Guidance on Management. Version 2.2 31 August 2021]

Freely available online

[Interventions for palliative symptom control in COVID-19 patients.](#)

Andreas M. *Cochrane Database of Systematic Reviews* 2021;8:CD015061.

[BACKGROUND: Individuals dying of coronavirus disease 2019 (COVID-19) may experience distressing symptoms such as breathlessness or delirium. Palliative symptom management can alleviate symptoms and improve the quality of life of patients. An understanding of the effectiveness of pharmacological and non-pharmacological palliative interventions to manage specific symptoms of COVID-19 patients is required.] *Freely available online*

Articles

[Standard prophylactic versus intermediate dose enoxaparin in adults with severe COVID-19: A multi-center, open-label, randomized controlled trial.](#)

Perepu US. *Journal of Thrombosis and Haemostasis : JTH* 2021;;doi: 10.1111/jth.15450.

[In hospitalized adults with severe COVID-19, standard prophylactic dose and intermediate dose enoxaparin did not differ significantly in preventing death or thrombosis at 30 days.]

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