

Reshaping Clinical Care in General Practice – 5th January 2018

[Covering dementia, long term conditions, older people, integrated care, safeguarding]

Supporting the CPD Zone - the 'Go To' place for CPD in General Practice across Thames Valley <u>http://www.oxfordhealth.nhs.uk/library/cpd-zone/</u>

Dementia

General Practice Clinical Data Help Identify Dementia Hotspots: A Novel Geospatial Analysis Approach.

Bagheri, Nasser et al.Journal of Alzheimer's disease :JAD; 2018; 61(1):125-134This study aimed to compute a dementia risk score for individuals to assess spatial variation of
dementia risk, identify significant clusters (hotspots), and explore their association with
socioeconomic status.

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New tool to help young people when visiting loved ones with dementia

21st December 2017 Economic and Social Research Council Young people who have difficulty talking to older relatives or friends with dementia can now be helped by a smartphone app called Ticket to Talk designed by researchers at Newcastle University as part of a collaboration funded by the ESRC Impact Acceleration Account (IAA) and EPSRC.

Cognitive functioning, cognitive reserve, and residential care placement in patients with Alzheimer's and related dementias.

Kadlec, Helena et al.Aging & Mental Health; Jan 2018; 22(1):19-25Once cognitive reserve of more highly educated dementia patients is depleted and they approach
residential care placement, their cognitive functioning deteriorates faster. Finding effective
interventions that maintain or enhance cognitive reserve may increase the time in the community for
dementia patients.

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Managing diabetes in people with dementia: a realist review.

Bunn F. HealthTechnology Assessment December 2017;21(75Aimed to identify the key features or mechanisms of programmes that aim to improve the
management of diabetes in people with dementia and to identify areas needing further research.

Recorded dementia diagnoses, November 2017

15th December 2017

NHS Digital

This includes a dementia diagnosis rate indicator which compares the number of people thought to have dementia with the number of people diagnosed with dementia, aged 65 and over. The expanded data now includes information on prescription of antipsychotic medication.



Views of patient, healthcare professionals and administrative staff on flow of information and collaboration in a regional health information exchange: a qualitative study

Maenpaa, Tiina; Asikainen, Paula; Suominen, Tarja. Scandinavian J of Caring Sciences; Dec 2017; 31 (4); p. 939 This Finnish study found that patients took on more responsibility for transferring their follow-up treatment information. Healthcare information exchange between professionals improves patient care/patient involvement in their own care, but also requires that patient self-care is integrated into HIE systems to share information amongst professionals, and between patients and professionals. *Contact the Library for a copy of this article*

Practice Procedures in Models of Primary Care Collaboration for Children With ADHD

Moore, Jessica A. et al.Families, Systems, & Health; Dec 2017This American study compared 2 models of primary care with behavioural health integration.Understanding how best to integrate behavioural health and primary care services will optimizeoutcomes for children and families.

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A realist evaluation of social prescribing: an exploration into the context and mechanisms underpinning a pathway linking primary care with the voluntary sector.

Bertotti, Marcello et al. Primary health care research & development; Dec 2017; p. 1-14 Through linking primary care to non-clinical community services via a social prescribing coordinator (SPC), some models of social prescribing could contribute to reduce the burden on primary care, tackle health inequalities and encourage people to make greater use of non-clinical forms of support.

Long-Term Conditions

[including Cancer, Diabetes, and general management]

Assessing the value of practice-based leg ulcer education to inform recommendations for change in practice.

Mitchell, Aby British Journal of Community Nursing; Dec 2017; vol. 22

All nurses commented they had changed at least one aspect of practice following the module with the majority confirming improved knowledge, practical skills, treatment and patient concordance. The evaluation was limited to a small cohort of primary care nurses and further longitudinal research is required to investigate the effectiveness across multiple cohorts. *Contact the Library for a copy of this article*

Changing care needs of stroke survivors in primary care

Moore C. et al.

International Journal of Stroke; Nov 2017; vol. 12 (no. 5); p. 53

Key unmet needs were identified across all phases of recovery. Findings will inform a new model of primary care which includes an annual structured person-centred review of patient needs and a practice-based single point of contact.

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Factors influencing re-referral to specialist care in stroke survivors: Insights from focus groups on long-term care after stroke

Lim L. et al. International Journal of Stroke; Nov 2017; vol. 12 (no. 5); p. 24-25 GPs often have to be pragmatic when making referral decisions as it is person and time specific; the current local service landscape is an important factor influencing referrals. GPs may not be aware of currently available services, referral pathways or referral criteria. There may be a need for increased awareness among about stroke guidelines.

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Primary care-led weight management for remission of type 2 diabetes (DiRECT): An open-label, cluster-randomised trial

Lean M.E.J. et al. The Lancet; 2017 (article in press) This trial was carried out at 49 primary care practices in Scotland and the Tyneside region of England. Findings show that, at 12 months, almost half of participants achieved remission to a non-diabetic state and off antidiabetic drugs. Remission of type 2 diabetes is a practical target for primary care. Contact the Library for a copy of this article

Preschool growth and nutrition service - Addressing common nutritional problems: A community based, primary care led intervention

Ross S.; Wright C. London Journal of Primary Care; Nov 2017; vol. 9 (no. 6); p. 104-108 This article examines a health service approach to improving recognition and management of preschool nutritional problems as part of training health care professionals. It explores the practicalities of setting up a local pathway for managing cases in the community with appropriate specialist support. This model has now been adapted to tackle childhood obesity.

Cardiovascular outcomes for patients with symptomatic peripheral artery disease: A cohort study in The Health Improvement Network (THIN) in the UK

Cea Soriano L. et al; European Journal of Preventive Cardiology; Dec 2017; vol. 24 (no. 18); p. 1927-1937 Patients with symptomatic peripheral artery disease in a clinical practice population have a high risk of death and cardiovascular-related outcomes. Minimising risk is important in the ongoing management of these patients.

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New models of care: A liaison psychiatry service for medically unexplained symptoms and frequent attenders in primary care

Bestall J. et al Psychiatrist; Dec 2017; vol. 41 (no. 6); p. 340-344 Results included high levels of patient and staff satisfaction, and reductions in the utilisation of primary and secondary healthcare, with associated cost savings. A multidisciplinary liaison psychiatry service integrated in primary care is feasible and may be evaluated using routinely collected data.

Validation of the Long-Term Conditions Questionnaire (LTCQ) in a diverse sample of health and social care users in England

Potter C. et al;Health and Quality of Life Outcomes; Oct 2017; vol. 15This study provides evidence for the reliability and validity of the LTCQ, which has potential for use in
a variety of health and social care settings and could meet a need for an outcome measure that goes
beyond symptoms and physical function, providing a more holistic metric for living well with LTCs.
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Empowering people to help speak up about safety in primary care: Using codesign to involve patients and professionals in developing new interventions for patients with multimorbidity

Knowles, Sarah et al.;

Health Expectations Dec 2017

The process was feasible and acceptable to participants, who valued the opportunity to jointly propose new interventions. Final recommendations included the need for accessible reminders to support medication adherence and medication reviews for particularly vulnerable patients conducted with pharmacists within GP practices.

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Diagnosing cancer in primary care: results from the National Cancer Diagnosis Audit.

Swann, Ruth et al. The British journal of general practice Dec 2017 The findings identify avenues for quality improvement activity and provide a baseline for future audit of the impact of 2015 National Institute for Health and Care Excellence guidance on management and referral of suspected cancer.

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The economic cost of treatment-resistant depression in patients referred to a specialist service.

McCrone, Paulet al.Journal of mental health; Dec 2017; p. 1-7Severe forms of TRD are associated with high costs in which unpaid care and lost work predominate.Treatments that improve functioning may reduce the large degree of burden.Contact the Library for a copy of this article

Diabetic foot ulcer management in clinical practice in the UK: costs and outcomes.

Guest, Julian F; Fuller, Graham W; Vowden, Peter Consolidated medical records from a primary care held database highlighted the consequences of inefficient and inadequate management of DFUs in clinical practice in the UK. Clinical and economic benefits to both patients and the NHS could accrue from strategies that focus on (i) wound prevention, (ii) improving wound-healing rates and (iii) reducing infection and amputation rates. *Contact the Library for a copy of this article*

Improving diabetes control in the community: a nurse managed intervention model in a multidisciplinary clinic.

Ginzburg, Tatyana. Australian Journal of Advanced Nursing; Dec 2017; vol. 35 (no. 2); p. 23-30 Multidisciplinary intervention managed by a nurse, improve diabetes management and control measures. Observed changes persisted after the intervention period. *Contact the Library for a copy of this article*

Palliative and End of Life Care Toolkit.

RCGP Clinical Innovation and Research Centre (CIRC);2017. This toolkit provides a collection of tools, knowledge, and current guidance for healthcare professionals to support patients nearing the end of life to live well until they die. The resources include information for patients and those close to them.

<u>GPs' perceptions of advance care planning with frail and older people: a</u>

qualitative study

Tim Sharp, Alexandra Malyon and Stephen Barclay,Br J Gen Pract, December 18, 2017This study highlights the difficulties for GPs of encouraging dialogue and respecting individuals' wisheswithin the constraints of the existing health and social care system.

Inequalities in later life

18th December 2017

This report highlights how poor education, work opportunities and a lack of social connection can have long-term consequences on physical and mental health.

Understanding and managing constipation in older adults.

Nazarko, Linda,Practice Nursing; Dec 2017; 28(12):517-522This article outlines the causes of this common symptom, explores normal bowel function and
explains what factors can lead to constipation and how these can be identified and treated.
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Optimal NHS service delivery to care homes: a realist evaluation of the features and mechanisms that support effective working for the continuing care of older people in residential settings.

Goodman C et al. Health Services and Delivery Research 2017;5(29) NHS services work well with care homes when payments and role specification endorse the importance of this work at an institutional level as well as with individual residents. GPs need additional support from other services. Strategies that promote co-design-based approaches between the NHS and care homes have potential to improve residents' access to and experience of health care.

Enhanced health in care homes: learning from experiences so far.

2017

The King's Fund

This report is aimed at people working in care homes, NHS services, local authorities and clinical commissioning groups, who want to develop enhanced health in care homes approaches. Its focus is on practice and leadership.

Influence of Poor Oral Health on Physical Frailty: A Population-Based Cohort Study of Older British Men.

Ramsay, Sheena E. et al. Journal of the American Geriatrics Society; Dec 2017 The presence of oral health problems was associated with greater risks of being frail and developing frailty in older age. The identification and management of poor oral health in older people could be important in preventing frailty.

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Safeguarding

Safeguarding is a key governance priority for all charities, says charity regulator

6th December 2017Charity CommissionSafeguarding goes beyond protecting at risk groups. Trustees should ensure no one who contacts the
charity suffers distress or harm, as well as safeguarding children and adults at risk.

Older people

Centre for Ageing Better



Safeguarding adults reviews: How can they improve practice?

Dalphinis, JuliePractice Nursing; Dec 2017; vol. 28 (no. 12); p. 538-540Reviews take place when an 'at risk' adult has died/suffered permanent harm from serious abuse andneglect, and there is concern about how the agencies involved acted. An overview of a recent reviewof the process in London is provided with recommendations for improving practice in primary care.Contact the Library for a copy of this article

Safeguarding Children Toolkit for General Practice.

RCGP Clinical Innovation and Research Centre (CIRC);2017.

The toolkit is a series of practical workbooks for GPs and the primary healthcare team to recognise when a child, under the age of 18, may be at risk of abuse.

Safeguarding Adults at Risk of Harm Toolkit.

RCGP Clinical Innovation and Research Centre (CIRC);2017.

The toolkit provides infosheets, templates, and handy guides for all the primary care team. The toolkit assists good knowledge and use of relevant legislation when promoting good care for adults at risk of harm, or those lacking the capacity to make decisions for themselves.

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