

Reshaping Clinical Care in General Practice – 27th April 2018

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

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

Dementia

[Long-term risk of dementia among people with traumatic brain injury in Denmark: a population-based observational cohort study](#)

Jess R Fann et al, Lancet Psychiatry, April 2018

Traumatic brain injury (TBI) was associated with an increased risk of dementia both compared with people without a history of TBI and with people with non-TBI trauma. Greater efforts to prevent TBI and identify strategies to ameliorate the risk and impact of subsequent dementia are needed.

Available with an NHS Open Athens account for eligible users

[How do doctors deliver a diagnosis of dementia in memory clinics?](#)

Dooley J. British Journal of Psychiatry 2018;212(4):239-245.

Doctors are naming dementia to patients. Direct approaches reflect attempts to ensure clear diagnosis. Downplaying and avoiding prognosis demonstrates concerns about preserving hope but may compromise understanding about and planning for the future.

Available with an NHS Open Athens account for eligible users

[The impact of community-based arts and health interventions on cognition in people with dementia: a systematic literature review.](#)

Young R. Aging and Mental Health 2016;20(4):337-351.

The existent literature suggests that arts activities are helpful interventions within dementia care. A consensus has yet to emerge, however, about the direction for future research including the challenge of measurement and the importance of methodological flexibility.

Available with an NHS Open Athens account for eligible users

Adaptive interaction as a method of non-verbal communication in individuals with dementia.

Currie, Linda, Practice Nursing; Apr 2018; 29(4):176-180

In the final stages of dementia, individuals may experience a loss of verbal language ability. All staff in general practice are in a key position to engage with individuals using non-verbal communication methods. Adaptive interaction is one such method, which is simple to initiate, and in doing so offers a lifeline to help prevent social isolation.

Contact the library for a copy of this article

Living and dying with advanced dementia: A prospective cohort study of symptoms, service use and care at the end of life

Sampson E.L. et al, Palliative Medicine; Mar 2018; 32(3):668-681

People with advanced dementia lived with distressing symptoms. Service provision was not tailored to their needs. Longitudinal multidisciplinary input could optimise symptom control and quality of life.

Contact the library for a copy of this article

Dementia case-finding in hospitals: A qualitative study exploring the views of healthcare professionals in English primary care and secondary care

Burn A.M. et al,

BMJ Open; Mar 2018; 8(3):e020521

Information communicated to primary care from hospitals needs to be comprehensive, appropriate and consistent before GPs can effectively plan further investigation, treatment or care. Follow-up in primary care further requires access to options for post diagnostic support. There is a need to evaluate outcomes for patients and the economic impact on health and care services across settings.

Person-centred care improves quality of life for care home residents with dementia

NIHR Signal

20th March 2018

This study supports the feasibility of implementing person-centred care in residential homes. It is essentially in line with guideline recommendations to restrict the use of antipsychotics and tailor non-drug interventions to the person's interests.

Thinking Differently: Preparing today to implement future dementia treatments

Alzheimer's UK

March 2018

We commissioned the London School of Economics to study how five hypothetical treatments might impact people living with Alzheimer's disease, the most common cause of dementia, and how they might impact the NHS. We found that our health system will need to think differently to cope with the unique challenges presented by future treatments.

Reminiscence therapy for dementia.

Woods B. Cochrane Database of Systematic Reviews 2018;3:CD001120.

This updated Cochrane Review of reminiscence therapy (RT) for dementia was first published in 1998, and last updated in 2005. RT involves the discussion of memories and past experiences with other people using tangible prompts such as photographs or music to evoke memories and stimulate conversation. RT is implemented widely in a range of settings using a variety of formats.

Integrated Care

Emergency and acute medical care in over 16s: service delivery and organisation.

National Institute for Health and Care Excellence (NICE);2018.

This guideline aims to reduce the need for hospital admissions by giving advanced training to paramedics and providing community alternatives to hospital care. It also promotes good-quality care in hospital and joint working between health and social services.

Nurse-led follow up replaces consultant outpatient clinic.

Williams, Mark et al. British Journal of Healthcare Management; Apr 2018; vol. 24 (no. 4); p. 191-197

Domiciliary NLFU at 6 weeks provides a feasible follow-up mechanism for primary hip and knee total joint arthroplasty, with high patient satisfaction levels. This helps to reduce follow-up appointments, in turn releasing capacity for new referrals and freeing staff for other duties.

[Contact the library for a copy of this article](#)

Responsibility for prescribing between primary and secondary/tertiary care.

NHS England; 2018.

This guidance aims to provide clarity on the responsibilities of all professionals involved in commissioning and prescribing across primary, secondary and tertiary care, and to provide support in developing shared care agreements and in the transfer of care.

Transforming health care in nursing homes: An evaluation of a dedicated primary care service in outer east London.

Nuffield Trust; 2018.

The study indicates that providing residents of care homes with increased GP access and continuity of primary care more generally may help to reduce hospital admissions.

Managing the hospital and social care interface: interventions targeting older adults.

Nuffield Trust; 2018.

Given the national policy drive for better integrated care across sectors, what examples already exist of individual hospitals and social care providers working together to reduce delayed transfers of care, length of hospital stay and admissions for older people - and how successful are they?

Maldistribution or scarcity of nurses? The devil is in the detail.

Both-Nwabuwe, Jitske M. C. et al. Journal of Nursing Management; Mar 2018; vol. 26 (no. 2); p. 86-93

Nursing workforce challenges are caused by a maldistribution of nurses and the scarcity of nurses in general. Integrated and effective transitioning programmes are required to address nursing shortages and to diminish maldistribution. In addition, increased recruitment and retention as well as new models of care are required to address the scarcity of nurses in general.

[Contact the library for a copy of this article](#)

Drivers for successful long-term lifestyle change, the role of e-health: A qualitative interview study

Brandt C.J.; Nielsen J.B.; Sondergaard J.; Clemensen J. BMJ Open; Mar 2018; vol. 8 (no. 3)

The most important driver in long-term weight loss was a strong relationship with a healthcare professional. Collaborative e-health tools can support the relationship and behavioural changes through monitoring and providing relevant feedback. The support from family and peers also matters, and long-term success depends on the ability to establish strong, positive support on a day-to-day basis.

Becoming an integrated (accountable) care system.

Deffenbaugh, John British Journal of Healthcare Management; Apr 2018; vol. 24 (no. 4); p. 175-180

This is the second in a series of three articles that explains integrated care and explores its anticipated impact on the NHS in England. This article uncovers the concept of an integrated care system.

[Contact the library for a copy of this article](#)

Learning disabilities and behaviour that challenges: service design and delivery.

National Institute for Health and Care Excellence (NICE);2018.

This guideline covers services for children, young people and adults with a learning disability (or autism and a learning disability) and behaviour that challenges. It aims to promote a lifelong approach to supporting people and their families and carers, focusing on prevention and early intervention and minimising inpatient admissions.

Long-Term Conditions

[including Cancer, Diabetes, and general management]

Improving access to better care for people with knee and/or hip pain: service evaluation of allied health professional-led primary care.

Walker, A. et al.

Musculoskeletal Care; Mar 2018; vol. 16 (no. 1); p. 222-232

AHP-led care is a popular, effective, efficient and sustainable way to manage joint pain, without compromising safety or quality of care.

Available with an NHS Open Athens account for eligible users

Routes to diagnosis of heart failure: Observational study using linked data in England

Bottle A et al. Heart; Apr 2018; vol. 104 (no. 7); p. 600-605

Few patients appear to follow a pathway supported by guidelines for investigation and referral. There are likely to be missed opportunities for earlier HF diagnosis in primary care.

Efficacy of self-monitored blood pressure, with or without telemonitoring, for titration of antihypertensive medication (TASMINH4): an unmasked randomised controlled trial

McManus R.J et al.

The Lancet; Mar 2018; vol. 391 (no. 10124); p. 949-959

Self-monitoring, with or without telemonitoring, when used by general practitioners to titrate antihypertensive medication in individuals with poorly controlled blood pressure, leads to significantly lower blood pressure than titration guided by clinic readings.

Creating and facilitating change for Person-Centred Coordinated Care (P3C): The development of the Organisational Change Tool (P3C-OCT).

Horrell, Jane et al.

Health Apr 2018;vol. 21 (no. 2); p. 448-456

The P3C-OCT can be used to generate a shared understanding of the core domains of P3C at a service delivery level, and support reorganization of care for those with complex needs. It can reliably detect change over time, as demonstrated in a sample of 40 UK general practices. It is being further developed as a training tool for the delivery of P3C.

Morphine is not superior to ibuprofen for managing children's pain following minor orthopedic surgery.

Groenewald C B.

Evidence-Based Nursing 2018;21(2):48.

Nurses should encourage parents to use ibuprofen along with paracetamol as the first-line treatment for their children's postoperative pain at home. Future research is needed to determine the added benefit versus risk of using morphine alongside ibuprofen for postoperative pain control

Deprescribing in nursing homes is safe and should be pursued.

Tommelein E.

Evidence-Based Nursing 2018;21(2):53.

Evidence that deprescribing in older patients does not worsen outcomes and decreases adverse drug events and medication costs is growing. However results of research considering deprescribing of antihypertensives, antipsychotics and antidepressants may conflict.

The epidemiology of multimorbidity in primary care: A retrospective cohort study

Cassell A. et al.

British Journal of General Practice; Apr 2018; vol. 68 (no. 669)

Multimorbidity is common, socially patterned, and associated with increased health service utilisation. These findings support the need to improve the quality and efficiency of health services providing care to patients with multimorbidity at both practice and national level

Impact of issuing longer- versus shorter-duration prescriptions: a systematic review.

King, Sarah et al.; *British journal of general practice*; Apr 2018; vol. 68 (no. 669); p. e286

There is insufficient evidence relating to the overall impact of differing prescription lengths on clinical and health service outcomes, although studies do suggest medication adherence may improve with longer prescriptions. UK recommendations to provide shorter prescriptions are not substantiated by the current evidence base.

[Contact the library for a copy of this article](#)

Nurse-led video conference (VC) clinic follow-up of IBD patients in the remote and rural setting of the Scottish Highlands

Armour D.; Fraser M.; Potts L.

Journal of Crohn's and Colitis; Feb 2018; vol. 12

Conclusions: (i) Nurse Led VC clinics are safe. (ii) Well-accepted by patients. (iii) Offer an excellent alternative to traditional follow-up models. (iv) Time and cost-effective.

[Contact the library for a copy of this article](#)

Evaluating practical support stroke survivors get with medicines and unmet needs in primary care: A survey

Jamison J. et al.

BMJ Open; Mar 2018; vol. 8 (no. 3)

More than half of patients who replied needed help with taking medication, and 1 in 10 had unmet needs in this regard. Stroke survivors dependent on others have more unmet needs, are more likely to miss medicines and might benefit from focused clinical and research attention. Novel primary care interventions focusing on the practicalities of taking medicines are warranted.

Increasing participation of people with learning disabilities in bowel screening.

Gray J.

British Journal of Nursing 2018;27(5):250-253.

People with learning disabilities are less likely to participate in bowel screening than other sectors of the population, despite there being evidence of this population being at an increased risk of developing bowel cancer. Learning disability nurses are a key agent of change in enabling people with learning disabilities to participate in the screening programmes

Care delivery and self-management strategies for children with epilepsy.

Fleeman N. *Cochrane Database of Systematic Reviews* 2018;3:CD006245.

In response to criticism that epilepsy care for children has little impact, healthcare professionals and administrators have developed various service models and strategies to address perceived inadequacies.

Interventions for autumn exacerbations of asthma in children.

Pike KC. *Cochrane Database of Systematic Reviews* 2018;3:CD012393.

Asthma exacerbations in school-aged children peak in autumn, shortly after children return to school following the summer holiday. This might reflect a combination of risk factors. Since this peak is predictable, interventions targeting modifiable risk factors might reduce exacerbation-associated morbidity and strain upon health resources

Older people

Practice pharmacists and the opportunity to support general practitioners in deprescribing in the older person

Peterson G.M. et al, *Journal of Pharmacy Practice and Research*; Apr 2018; 48(2):183-185

The colocation of pharmacists with GPs can enhance interprofessional communication and the development of collaborative working relationships while reducing fragmentation of care, facilitating the delivery of patient-centred interdisciplinary chronic disease and medication management services.

Care and support of people growing older with learning disabilities [NG96]

NICE

April 2018

This guideline covers identifying changing needs, planning for the future, and delivering services including health, social care and housing. It aims to support people to access the services they need as they get older.

Factors associated with polypharmacy in primary care: A cross-sectional analysis of data from the English Longitudinal Study of Ageing (ELSA)

Slater N. et al, *BMJ Open*; Mar 2018; 8(3): e020270

This study has identified that lower wealth, obesity, increasing age and chronic health conditions are significantly associated with polypharmacy and hyperpolypharmacy prevalence.

"Why call it care when no one cares?"

Age UK

April 2018

This report summarises the results of a series of listening events held with older people who are receiving care and their family early in 2018. Participants said that they would be prepared to pay more for care and that either a rise in general taxation or a percentage from estates following death should be used to fund care.

UTOPIA project. Using Telecare for Older People In Adult social care: The findings of a 2016-17 national survey of local authority telecare provision for older people in England.

Kings College London

February 2018

This report presents the findings from a project that aimed to understand the role of telecare in supporting older people, how it is deployed and what information can be collected by social care providers for assessment purposes.

Optimal nonpharmacological management of agitation in Alzheimer's disease: challenges and solutions.

Millan-Calenti JC. Clinical Interventions in Aging 2016;11:175-184.

This review suggests that music therapy is optimal for the management of agitation in institutionalized patients with moderately severe and severe AD, particularly when the intervention includes individualized and interactive music.

Safeguarding

Acceptability of text messages for safety netting patients with low-risk cancer symptoms: a qualitative study.

Hirst, Yasemin; Lim, Anita Wey Wey

British journal of general practice Mar 2018

Text messages were perceived to be an acceptable potential strategy for safety netting patients with low-risk cancer symptoms. Further work is needed to ensure it is cost-effective, user friendly, confidential, and acceptable to patients.

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; Apr 2018; vol. 21 (no. 2); p. 539-548

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.

A systematic review to explore influences on parental attitudes towards antibiotic prescribing in children.

Bosley, Helen et al.

Journal of Clinical Nursing; Mar 2018; vol. 27 (no. 5/6); p. 892-905

Parents wanted reassurance and advice regarding children's illnesses, had poor antibiotic knowledge and were influenced by personal past experiences. More accessible education, including simple information leaflets, is required. Healthcare professionals must provide adequate time for reassurance and explanations of decision-making. Easy-to-read information regarding appropriate antibiotic usage should be easily accessible for parents.

Medication errors most common in primary care prescribing.

Practice Nurse; Mar 2018; vol. 48 (no. 3); p. 7-7

A detailed review has found that more than 2.3 million medication errors occur every year in England. More than 38% of the errors identified were in primary care. Almost half (48%) of the primary care medication errors related to prescribing. Dispensing errors accounted for 36% of errors, and 16% were attributed to monitoring.

Using the electronic health record to build a culture of practice safety: evaluating the implementation of trigger tools in one general practice.

Margham, Tom; Symes, Natalie; Hull, Sally A. *British journal of general practice* 68 (no. 669); p. e279

Electronic trigger tools can identify patients for review in domains of clinical risk for primary care. The high yield of safety events engaged clinicians and provided validation of the need for routine safety checks.

[Contact the library for a copy of this article](#)

GPs' views and perspectives on patient non-adherence to treatment in primary care prior to suicide.

Saini, Pooja; Chantler, Khatidja; Kapur, Navneet *Journal of mental health* Apr 2018; vol. 27 (no. 2); p. 112-119

For suicide prevention, it is crucial for health professionals to assess patients and manage the possible causes of non-adherence. Policies for increasing treatment adherence, improving services for dual diagnosis, or providing alternative treatments to meet individual patient needs may help to achieve the best health outcomes and could potentially prevent suicide.

[Contact the library for a copy of this article](#)

Incidence and cost of medication-related harm in older adults following hospital discharge in the UK: Results from the prime study

Parekh N. et al;

Age and Ageing; Apr 2018; vol. 47

We estimate post-discharge MRH in older adults to cost the NHS 395.5 million annually, of which 243.4 million is potentially avoidable. Interventions to prevent avoidable MRH could lead to considerable savings for the NHS.

[Contact the library for a copy of this article](#)

Retrospective data collection research and audit of services at a clinic for survivors of Female Genital Mutilation (FGM) in East London, England

Subramanian G.N.; Patel P.; Barter J.

BJOG Mar 2018; vol. 125 ; p. 156-157

Collectively this audit has filled knowledge gaps and points to improvements needed particularly with safeguarding. Recommendations include the need for holistic service to address the complex case; further education and training for healthcare professionals and continued advocacy campaigns among the immigrants from FGM practising communities.

[Contact the library for a copy of this article](#)

All content and links are provided for information only and we do not sponsor, endorse or otherwise approve of any mentioned website or the contents of the news items. Please refer to the terms and conditions of the relevant website should you wish to reproduce any of the information.

Oxford Health Libraries publish a range of targeted News Bulletins. Sign up [here](#).

GPs and Practice staff in Oxfordshire benefit from our comprehensive knowledge service. Other NHS staff in Thames Valley can access similar knowledge services via their local NHS libraries.



To find out more, or to obtain journal articles, contact us via
library.enquiries@oxfordhealth.nhs.uk