

Reshaping Clinical Care in Primary Care – 11th September 2020

[Covering <u>dementia</u>, <u>integrated care (including Primary Care Networks and emerging roles),</u>
<u>long term conditions</u>, <u>older people</u>, <u>safeguarding</u>, <u>safety</u>]

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COVID-19 Research, resources, training

<u>Development of an integrated rehabilitation pathway for individuals recovering from COVID-19 in the community</u>

Sivan M. Journal of rehabilitation medicine; Aug 2020

Health services dealing with the COVID-19 pandemic should adopt a comprehensive telephone screening system and an integrated rehabilitation pathway to manage the large number of survivors in a timely and effective manner and to enable the provision of targeted interventions.

Management of post-acute covid-19 in primary care

Trisha Greenhalgh, et al. BMJ 2020;370:m3026

Management of covid-19 after the first three weeks is currently based on limited evidence; Approximately 10% of people experience prolonged illness after covid-19; Many such patients recover spontaneously (if slowly) with holistic support, rest, symptomatic treatment, and gradual increase in activity; Home pulse oximetry can be helpful in monitoring breathlessness; Indications for specialist assessment include clinical concern along with respiratory, cardiac, or neurological symptoms that are new, persistent, or progressive

Managing cancer patients during the COVID-19 pandemic: An ESMO Interdisciplinary Expert Consensus

Curigliano. Annals of Oncology 2020;S0923-7534(20):39948-8.

Twenty-eight clinical statements to guide healthcare professionals and assist them in overcoming many of the clinical and technical obstacles related to diagnosis, risk assessment response assessment, surgical planning, radiation therapy and medical treatment

COVID-19 and dementia: factors affecting patient outcomes and experience along the dementia pathway.

Wessex Clinical Senate and Networks; 2020.

Dementia remains a diagnosis with significant impact with a need to balance the timeliness of diagnosis with patient experience and outcomes. Covid may become endemic and our adapted ways of working may become the new normal. Recent webinars have brought clinicians, service managers and commissioners together to consider factors affecting the dementia pathway in a Covid environment. This document aims to give an overview of factors identified that affect the pathway.

<u>COVID-19 and dementia: the interface between primary care and memory</u> assessment services.

Wessex Clinical Senate and Networks.

2020.

An initial webinar looked at the experiences of memory clinics, their capability for receiving referrals and undertaking assessments, the tools and tests available for making a diagnosis and the management of risk. This subsequent webinar examined the implications of COVID-19.



<u>COVID-19 rapid guideline: gastrointestinal and liver conditions treated with drugs affecting the immune response.</u>

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

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.

<u>COVID-19 rapid guideline: children and young people who are immunocompromised.</u>

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

We updated the recommendation on safeguarding to remove a link to government guidance that has been withdrawn. The guideline covers children and young people (aged 17 and under). It may also be relevant for newborn babies under 72 hours, and 18 to 24 year olds using healthcare services

Dementia

Guidance developed for dementia carers when dealing with COVID-19 infection

University College London

September 2020

A team of researchers from University College London (UCL) have developed a decision-making guide for dementia carers, to ensure they can provide the right support and with dignity, should those they care for become infected with coronavirus.

<u>COVID-19 and Dementia: Factors affecting patient outcomes and experience along the dementia pathway</u>

Wessex Clinical Senate and Networks

July 2020

The COVID-19 pandemic has impacted significantly on the delivery of NHS services. We have an opportunity to learn from the rapid and necessary service transformation and consider how we recover our services.

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.

The challenge of pain identification, assessment, and management in people with dementia: A qualitative study

Bullock, L et al, BJGP Open, vol. 4 (2)

Given the complexity of pain identification, assessment, and management, primary care should work together with family caregivers and community services, with case finding for pain being considered in all assessment and management plans.



<u>Unburdening dementia - a basic social process grounded theory based on a primary care physician survey from 25 countries.</u>

Petrazzuoli, Ferdinando et al. Scandinavian Journal of Primary Health Care Sep 2020; vol 38 (3): 253-264 Our study provides unique data about dementia management in European primary care for the benefit of national and international stakeholders.

<u>Dog therapy for dementia: can fluffy friends help with thinking and memory problems?</u>

The Mental Elf. 2020

A recent systematic review on the effectiveness of dog therapy for people living with dementia suggests that animal assisted therapy may be a useful complementary treatment to help with the behavioural and psychological symptoms of dementia.

<u>Effectiveness of Exergaming in Improving Cognitive and Physical Function in People With Mild Cognitive Impairment or Dementia: Systematic Review.</u>

Zhao Y. JMIR Serious Games 2020;8(2):e16841.

Overall, exergaming is an innovative tool for improving physical and cognitive function in people with mild cognitive impairment or dementia, although there is high heterogeneity among studies in terms of the duration, frequency, and gaming platform used.

Integrated Care (including Primary Care Networks and emerging roles)

Community pharmacies: promoting health and wellbeing.

National Institute for Health and Care Excellence (NICE).

August 2020.

This quality standard covers how community pharmacies can support the health and wellbeing of the local population. It describes high-quality care in priority areas for improvement. This quality standard was developed before the coronavirus pandemic and is intended to support quality improvement as services return to normal.

<u>Pharmacy's role in primary care network multidisciplinary teams supporting</u> care homes.

NHS Confederation 2020.

This briefing explores how pharmacy professionals are supporting care homes. It spotlights examples of collaborative working in local areas and provides top tips to support PCNs.

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.

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Long-Term Conditions

<u>Prioritising primary care patients with unexpected weight loss for cancer</u> investigation: Diagnostic accuracy study

Nicholson B.D. et al. BMJ; Aug 2020; vol. 370

The risk of cancer in adults with unexpected WL presenting to primary care is 2% or less and does not merit investigation under current UK guidelines. However, in male ever smokers aged 50 years or older and in patients with concurrent clinical features, the risk of cancer warrants referral for invasive investigation. Clinical features typically associated with specific cancer sites are markers of several cancer types when they occur with unexpected WL.

Health service use by patients with heart failure living in a community setting: A cross-sectional analysis in North West London

Kim D. British Journal of General Practice; Aug 2020; vol. 70 (no. 697)
Patients with HF make heavy but heterogeneous use of services. Relatively low and falling use of GP consultations, and the apparently low uptake of community rehabilitation services by patients with HF, are concerning and suggest challenges in primary care access and integration of care.

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<u>Self-management interventions to reduce healthcare use and improve quality of life among patients with asthma: systematic review and network meta-analysis.</u>

Hodkinson A. BMJ 2020;370:m2521.

This network meta-analysis indicates that regularly supported self-management reduces the use of healthcare resources and improves quality of life across all levels of asthma severity. Future healthcare investments should provide support that offer reviews totalling at least two hours to establish self-management skills, reserving multidisciplinary case management for patients with complex disease. *Available with an NHS OpenAthens log in for eligible users*

Qualitative study exploring the barriers and facilitators of implementing a cardiovascular disease risk reducing intervention for people with severe mental illness into primary care contexts across England: the 'PRIMROSE' trial.

Hassan, Suzan et al.

BMC health services research; Aug 2020; vol. 20 (no. 1); p. 753

Future interventions for physical health in people with SMI could consider the following items to improve implementation: 1) training for practitioners in CVD risk prevention to increase practitioners knowledge of physical interventions 2) training in SMI to increase practitioner confidence to engage with people with SMI and reduce mental health stigma and 3) access to resources including specialist services, additional staff and time. Access to specialist behaviour change services may be beneficial for patients with specific health goals. Additional staff to support workload and share knowledge may also be valuable. More time for appointments with people with SMI may allow practitioners to better meet patient needs.

Fluoxetine does not improve outcomes after stroke.

NIHR Evidence. 2020.

Fluoxetine has been used to reduce disability following a stroke but it is unclear how effective it is. The first of three large-scale trials into the impact of fluoxetine in stroke patients is called FOCUS (Fluoxetine or control under supervision). This study found that fluoxetine has no beneficial impact. In fact, it was linked to an increase in falls and fractures. Fewer people experienced depression when taking fluoxetine, but this effect disappeared when the drug was stopped.



Effect of mammographic screening from age 40 years on breast cancer mortality (UK Age trial): final results of a randomised, controlled trial

Duffy S.W. et al. The Lancet Oncology; Sep 2020; vol. 21 (no. 9); p. 1165-1172

Yearly mammography before age 50 years, commencing at age 40 or 41 years, was associated with a relative reduction in breast cancer mortality, which was attenuated after 10 years, although the absolute reduction remained constant. Reducing the lower age limit for screening from 50 to 40 years could potentially reduce breast cancer mortality.

Older people

<u>Delivering exceptionally safe transitions of care to older people: a qualitative study of multidisciplinary staff perspectives.</u>

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.

Current Perspective on Age-Related Macular Degeneration.

Chakravarthy U. JAMA 2020;:doi:10.1001/jama.2020.5576.

This clinical update reviews the epidemiology, clinical manifestations, classification, diagnosis, prevention, and approved and investigational treatment of age-related macular degeneration in older adults.

Reorganisation of primary care for older adults during COVID-19: a crosssectional database study in the UK.

Joy M. British Journal of General Practice 2020;70(697):e540-e547.

The coronavirus disease 2019 (COVID-19) pandemic has resulted in a rapid change in workload across healthcare systems. Factors related to this adaptation in UK primary care have not yet been examined. This study aimed to assess the responsiveness and prioritisation of primary care consultation type for older adults during the COVID-19 pandemic.

The effects of cognitive-motor training interventions on executive functions in older people: a systematic review and meta-analysis.

Wollesen B. European Review of Aging and Physical Activity 2020;17:9.

Ageing is associated with physical and cognitive decline, affecting independence and quality of life in older people. Recent studies show that in particular executive functions are important for daily-life function and mobility. This systematic review investigated the effectiveness of cognitive-motor training including exergaming on executive function (EF, set-shifting, working memory, inhibitory control) in healthy older people.

Safeguarding, Safety

A pharmacist-led pilot using a performance dashboard to improve psychotropic medication use in a skilled nursing facility.

Bell K. BMJ Open Quality 2020;9(3).

Inappropriate use of psychotropic medications in the elderly, particularly those with dementia, is a critical safety and quality concern. Conclusions: The Psychotropic Drug Safety Initiative (PDSI)



dashboard was efficient and effective in identifying patients at risk for inappropriate use of psychotropic medications. A clinical pharmacist was essential for implementing and communicating recommendations from the dashboard to providers.

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Tools, guidance and key events for general practice nurses.

Practice Nursing. Aug 2020; vol. 31 (no. 8); p. 357-357

The article provides updates on tools, guidance, and key events for general practice nurses in Great Britain, including an online resource launched by the Royal College of Nursing to help demystify the role of digital technology in nursing, a guideline to boost the safety of patients with chronic obstructive pulmonary disease during the COVID-19 pandemic while protecting staff from infection, and new principles for preceptorship developed by the Nursing and Midwifery Council.

Safety huddle in a community nursing setting.

*Gray T.*British Journal of Community Nursing 2020;25(9):446-450.

District nursing caseloads are rising at a remarkable pace, with approximately 4000 nurses caring for almost 55 million people; Safety huddles are daily meetings attended by members of the multidisciplinary team in community settings, which were designed to focus on certain patient groups; These meetings aim to prevent patient harm and promote patient and staff safety; Promotion of digital technology is needed to enhance nursing practice.

Available with an NHS OpenAthens log in for eligible users

Patient Safety Toolkit for Family Practices.

Campbell, Stephen M. Journal of patient safety; Sep 2020; vol. 16 (no. 3); p. e182

Patient safety is complex and multidimensional. The Patient Safety Toolkit is easy to use and hosted on a single platform with a collection of tools generating practical and actionable information. It enables family practices to identify safety deficits that they can review and change procedures to improve their patient safety across a key sets of patient safety issues

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