



## Reshaping Clinical Care in Primary Care – 12<sup>th</sup> March 2021

[Covering [COVID-19](#), [dementia](#), [integrated care \(including Primary Care Networks and emerging roles\)](#), [long term conditions](#), [older people](#), [safeguarding](#), [safety](#)]

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### COVID-19 Research, resources, training

#### [Rapid evaluation of health and care services- planning a sustainable solution for the post-COVID reset](#)

*The AHSN Network.*

2021.

Explores the barriers and facilitators to performing timely, rigorous and effective evaluations of these changes. It sets out recommendations for how to prioritise and resource rapid service evaluations to enable more efficient and effective scale-up of health and care innovations, both regionally and nationally.

#### [Ventilation and air conditioning during the coronavirus \(COVID-19\) pandemic.](#)

Health and Safety Executive (HSE); 2021.

This guidance covers helping to identify and take action in poorly ventilated areas; other factors to consider when assessing the risk from aerosol transmission, and determining whether adequate ventilation is being provided to reduce this risk

### Dementia

#### [Potentially inappropriate prescribing in dementia, multi-morbidity and incidence of adverse health outcomes](#)

*Joao Delgado et al*

*Age and Ageing, March 2021, 50 (2):457-464*

Patients with dementia frequently receive PIPs, and those who do are more likely to experience AHO. These results highlight the need to optimise medication in dementia patients, especially those with comorbidities.

#### [Psychotropic drug prescription rates in primary care for people with dementia from recorded diagnosis onwards](#)

*Joling, K.J. et al*

*International Journal of Geriatric Psychiatry, 2021, 36: 443-451*

After a dementia diagnosis is recorded in general practice, the prevalence of psychotropic drug prescriptions is substantial and increases steadily during the disease trajectory of persons with dementia.

#### [Frailty and neuropathology in relation to dementia status: The Cambridge city over-75s cohort study](#)

*Wallace, Lindsay et al*

*International Psychogeriatrics Feb 2021*

In the very old, frailty contributes to the risk for dementia beyond its relationship with the burden of traditional dementia neuropathologies. Reducing frailty could have important implications for controlling the burden of dementia.

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## [Impact of deprivation, dementia prevalence and regional demography on prescribing of anti-dementia drugs in England: a time trend analysis](#)

Neha Vohra et al

*British Journal of Clinical Pharmacology, Feb 2021*

The three-fold rise in the number of prescription items for anti-dementia drugs in the study period reflects the policy emphasis on early diagnosis and treatment of dementia. Higher rates of prescribing in the least deprived areas may be reflective of better and early diagnoses and access to treatments.

## [Dementia: recognition and cognitive testing in primary care settings](#)

Karen Harrison Denning et al

*Journal of Community Nursing, Feb 2021, 35 (1):43-49*

This paper is the first in a series relating to dementia that will follow two families through their progression with dementia and considers the recognition and initial cognitive tests that can be used in a primary care setting. Each of the papers in the series will build upon our understanding of both families, as they face different issues and scenarios over the life course of the dementia.

## **Integrated care (including Primary Care Networks and emerging roles)**

### [Government launches call for evidence to improve health and wellbeing of women in England](#)

DHSS

6 March 2021

Women are being encouraged to share their experiences of the health and care system via a call for evidence aimed at improving healthcare for women to form the basis of a new Women's Health Strategy.

### [Integrated health Services for Children: a qualitative study of family perspectives.](#)

Satherley RM.

*BMC Health Services Research 2021;21(1):167.*

Children and families identify care navigation and a holistic approach as key components that make high quality integrated care services. Service developments strengthening these aspects will align well with family perspectives on what works and what matters

### **The inverse care law and the potential of primary care in deprived areas**

Mercer, Stewart W et al.

*The Lancet; Feb 2021; vol. 397 (no. 10276); p. 775*

The Deep End Project has given identity, profile, voice, shared learning, and joint activity to participating GPs. For Deep End GPs, the inverse care law is the difference between what they can do under current conditions and what they could do with and for patients with more time and better connections, organisation, and support.

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### [Integrated care systems and place-based partnerships \(virtual conference\)](#)

*Kings Fund 26 - 29 April 2021*

With April 2021 marking the deadline for all areas in England to be part of an integrated care system (ICS), this virtual conference looks at the future of place and how building multi-agency place-based partnerships can support the continuous development of ICSs.



## **Health on the High Street: Embedding healthy living into urban regeneration after the pandemic.**

*Social Market Foundation*

*January 2021*

This report argues that town centres where shops and offices fall vacant should be used to establish new 'health hubs' combining GP surgeries, health and social care services and gyms. The report profiles examples where local authorities and health care bodies are already developing such hubs, which it suggested could be a model for other areas in future

## **Integrated care systems in London: Challenges and opportunities ahead**

*King's Fund*

*22<sup>nd</sup> February 2021*

Commissioned by the Greater London Authority, this report looks at how the five ICSs in London were developing before Covid-19 and how this has changed as a result of the response to the pandemic. Key strategic priorities for London's ICSs are considered, focusing particularly on how they are addressing health inequalities, the use of digital technologies, workforce challenges, estates and social care.

## **Integration and innovation: working together to improve health and social care for all**

*Dept Health and Social Care*

*11<sup>th</sup> February 2021*

This government White Paper sets out legislative proposals for a Health and Care Bill. The proposals are designed to support the health and care system to work together to provide high-quality health and care, so people can live longer, healthier, active and more independent lives.

## **Integrated care**

*Nuffield Trust*

*18<sup>th</sup> February 2021*

After two years, indicators looking at the quality of integrated care using the latest available data, show that while some measures, such as employment rate among adults with a long-term condition, have improved over time, others, such as support for people with multiple long-term conditions, and the proportion of people with multiple emergency admissions in the last year of life, have not.

## **Anticipatory care planning.**

*Health Improvement Scotland.*

*2021.*

Anticipatory care planning aims to provide people with person-centred, coordinated care, reducing inappropriate interventions and repeated difficult conversations. The ACP toolkit pulls together guidance and resources to support health and social care professionals throughout the ACP process.

## **Anticipatory care planning in the context of COVID-19.**

*Health Improvement Scotland.*

*2021.*

A range of resources that have been developed since the outset of the pandemic in March 2020 and include: information on ACP in the context of COVID-19; the Essential ACP - a tool to support rapid production and sharing of an ACP during the COVID-19 pandemic; guidance on developing Anticipatory Care Plans for people with Dementia.

## **Legislating for integrated care systems: five recommendations to government and parliament**

*NHS England.*

*February 2021*

Five specific recommendations to the government are made on the question of how to legislate to place integrated care systems (ICSs) on a statutory footing, having gathered the views of the NHS, local government and wider stakeholders.



## **NHS reform: Five key questions about the future of primary care networks in England**

*The Health Foundation.*

2021.

Explores five key questions that the proposals raise for the future of primary care networks in England. It discusses the conditions required for PCNs to find their place within newly established integrated care systems, while continuing to develop and strengthen local primary care.

## **Consultation response: Next steps to building strong and effective integrated care systems across England.**

*NHS Confederation.*

2021.

This document builds on previous work in this area and presents views from across all parts of the NHS on the future of integrated care systems (ICSs).

## **Brexit and the end of the transition period: what does it mean for the health and care system?**

*The King's Fund.*

2021.

While the new agreement provides some welcome certainty, effectively removing the prospect of an immediate 'no-deal' cliff edge, it does introduce a wide range of changes that will have implications for health and care organisations both now and in years to come. Sets out key changes for the health and care system and what their immediate and long-term, implications might be.

## **Health creation: how can primary care networks succeed in reducing health inequalities?**

*The Health Creation Alliance.*

2021.

Summarises discussions held at a series of multi-stakeholder events in 2020 which considered how general practice and primary care work differently with communities and local partners to reduce health inequalities and what primary care networks can do to enable and create the conditions for practices to work differently with local partners to reduce health inequalities.

## **Support for Primary Care Networks.**

*FutureNHS.*

2021.

A collection of key resources and policy documents. Part of Primary Care Networks Development Support. Registration required

*Available with appropriate registration or membership*

## **Long-Term Conditions**

### **Weight loss and risk reduction of obesity-related outcomes in 0.5 million people: evidence from a UK primary care database.**

*Haase, Christiane Lundegaard et al.*

*International journal of obesity (2005); Mar 2021*

This study provides quantification of the effects of weight loss on selected outcomes, with greatest benefits observed for established CVD risk factors T2D, hypertension and dyslipidaemia.

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### **Adherence to gout guidelines: where do we stand?**

*Ho, Gary H; Pillinger, M H; Toprover, M. Curr opinion in rheumatology; Mar 2021; vol. 33 (no. 2); p. 128-134*

Standardized gout treatment protocols should be established for all primary care and specialty practices. Two successful methods of improving adherence include using nonphysician providers to coordinate urate lowering therapy titration and monitoring serum urate. Having more frequent outpatient visits to focus on direct patient care and education has also been successful.

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## **Implementation and Evaluation of a Standardized Non-Vitamin K Oral Anticoagulant (NOAC) Patient Safety Alert Card Across the Northern Region of England.**

*Thomas ; Smyth, Louise*

*Journal of Primary Care & Community Health; Jan 2020 ; p. 1-4*

We developed a standard patient alert card with the support of the North of England Strategic Clinical network to clearly provide key safety information for patients and health care professionals. The evaluation shows a simple and inexpensive intervention delivered with no formal funding can address this patient safety concern. The card has been widely shared and implemented across the UK.

## **Loneliness and Migraine Self-Management: A Cross-Sectional Assessment.**

*Lui ; Young et al.*

*Journal of Primary Care & Community Health; Jan 2020; p. 1-9*

Loneliness has significant effects on the illness experience of patients with chronic migraines, including their ability to self-manage or be satisfied with their care. Psychosocial models of care that address loneliness among patients with chronic migraine may improve health outcomes and management.

## **NICE impact cardiovascular disease management**

*National Institute for Health and Care Excellence (NICE).*

*February 2021*

Highlights progress made in implementing guidance on CVD management.

## **Congenital heart disease in children.**

*Gowland K.*

*British Journal of Nursing 2021;30(2):102-105.*

Congenital heart disease affects 1% of live births each year, equivalent to up to 9 in every 1000 babies born in the UK (Knowles and Hunter, 2014). A recent study by Nisselrooj et al (2020) identified that CHD is frequently missed during prenatal screening, and this can impact on morbidity and mortality.

## **Diagnosis and Treatment of Hip and Knee Osteoarthritis: A Review.**

*Katz JN.*

*JAMA 2021;325(6):568-578.*

Hip and knee OA are highly prevalent and disabling. Education, exercise and weight loss are cornerstones of management, complemented by NSAIDs (for patients who are candidates), corticosteroid injections, and several adjunctive medications. For persons with advanced symptoms and structural damage, total joint replacement effectively relieves pain.

## **Vaping and cardiac disease.**

*Shahandeh N.*

*Heart 2021*

There are no long-term outcome studies on the cardiovascular risk of vaping electronic cigarettes. This review summarises evidence that supports the notion that while electronic cigarettes may be less harmful than traditional cigarettes, they are not harmless.

## **Abortion care**

*National Institute for Health and Care Excellence (NICE).*

*2021.*

This quality standard covers care for women of any age (including girls and young women under 18) who request an abortion. It describes high-quality care in priority areas for improvement. In response to the COVID-19 pandemic the Department of Health and Social Care has issued temporary approval of home use for both stages of early medical abortion.

## [Guide for delivering preconception care to women with a serious mental illness](#)

*KCL, PHE, NHSE and Tommy's*

*March 2021*

This guide provides the latest evidence to support health care professionals having informed conversations on the considerations regarding mental and physical health for women of childbearing age with serious mental illness (SMI), whether or not they are planning a pregnancy. It should be used along national clinical guidance and associated updates.

## [Transforming the care of children and young people in London with asthma: Development of the London Asthma Standards.](#)

*NICE Shared Learning Database.*

*2021.*

Key aims of the London Asthma Standards were to pull together local, national and international guidance concerning CYP asthma into one resource describing the entire asthma pathway and all organisations involved in the treatment/management/support of this patient group.

## [Mind-body treatments of irritable bowel syndrome symptoms: an updated meta-analysis.](#)

*Shah K.*

*Behaviour Research and Therapy 2020;128:103462.*

There is considerable evidence that an array of mind-body and other psychological therapies can be effective complements to medical treatment for IBS symptom severity, with little evidence for relative superiority of any particular approach.

## [Childhood obesity prevention evidence biased towards lifestyle interventions](#)

*NIHR Applied Research Collaboration West.*

*10 Feb 2021*

An analysis of the studies included in the Cochrane review 'Interventions for Preventing Obesity in Children' has revealed a strong bias towards interventions that aim to change individual "lifestyle" behaviours. This bias could influence types of policy implemented to prevent childhood obesity.

## **Can effective supervised pelvic floor muscle training be provided by primary care nurses? A randomized controlled trial.**

*Waterfield, Ann.*

*International urogynecology journal; Feb 2021*

SPFMT provided by trained primary care nurses achieved improvements in pelvic floor muscle strength compared with controls (and comparable to that of a urogynaecology nurse specialist). This could have implications for the provision of PFMT and may help in the prevention of pelvic floor dysfunction.

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## **Older people**

### [Delivering prevention in an ageing world: democratising access to prevention](#)

*International Longevity Centre*

*March 2021*

The consultation paper sets out key criteria that will allow governments and health care systems to democratise access and deliver prevention across the life course. Submissions and feedback will be accepted until 9 April 2021.

## **Digital inclusion and older people – how have things changed in a Covid-19 world?**

*Age UK*

*March 2021*

This briefing paper looks at the impact the pandemic has had on internet use among people aged 52+ in England.

## **Effects of dance on cognitive function in older adults: a systematic review and meta-analysis.**

*Hewston P.*

*Age and Ageing 2020*

Dance improves global cognitive function and executive function. However, there is little difference in complex attention, and evidence also suggests little effect on learning and memory. Future research is needed to determine the optimal dose and if dance results in greater cognitive benefits than other types of physical activity and exercise.

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## **Effects of physical exercise on executive function in cognitively healthy older adults: a systematic review and meta-analysis of randomized controlled trials: physical exercise for executive function.**

*Xiong J.*

*International Journal of Nursing Studies 2021;114:103810.*

Regular physical exercise training, especially aerobic exercise and mind-body exercise, had positive benefit for improving working memory, cognitive flexibility and inhibitory control of executive function in cognitively healthy older adults.

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## **Combined physical and cognitive training for older adults with and without cognitive impairment: a systematic review and network meta-analysis of randomized controlled trials.**

*Malmberg Gavelin H.*

*Ageing Research Reviews 2020.*

Our findings suggest that simultaneously and sequentially combined interventions are efficacious for promoting cognitive alongside physical health in older adults, and therefore should be preferred over implementation of single-domain training.

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## **Effectiveness of combined cognitive and physical interventions to enhance functioning in older adults with mild cognitive impairment: a systematic review of randomized controlled trials.**

*Yang C.*

*The Gerontologist 2020;60(8):633-642.*

There is preliminary evidence to support the positive effects of multicomponent interventions to improve cognitive-motor abilities in older adults at risk of developing dementia. The strength of this research evidence is, however, limited. Longitudinal studies are needed to determine whether these effects are maintained over time.

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## **Evidence on physical activity and falls prevention for people aged 65+ years: systematic review to inform the WHO guidelines on physical activity and sedentary behaviour.**

Sherrington C. *The International Journal of Behavioral Nutrition and Physical Activity* 2020  
Exercise prevents falls in older adults. Regular updates of estimated effects of exercise on falls are warranted given the number of new trials, the increasing number of older people globally and the major consequences of falls and fall-related injuries. Given the strength of this evidence, effective exercise programs should now be implemented at scale.

### **Safeguarding, Safety**

## **Talking about self-harm and suicide in primary care: the views of young people.**

Jo Lockwood. *The Mental Elf*; 2021.  
This blog summarises a qualitative paper which finds that young people want GPs to initiate conversations about self-harm and suicide in primary care.

## **Raising and escalating concerns about patient care: RCN guidance.**

Glasper A. *British Journal of Nursing* 2021;30(2):128-129.  
In November 2020 the Royal College of Nursing (RCN) published a new policy document entitled Raising and Escalating Concerns (RCN, 2020). The document emphasised that all care staff should feel safe and supported when raising any concerns about patient care. The guidance is timely, given the stress on NHS staff caused by the ongoing pandemic.

## **Implementing the duty of candour: a guide for healthcare support staff.**

Glasper A. *British Journal of Healthcare Assistants* 2021  
Being able to acknowledge a patient safety incident (PSI) and then apologising and explaining why things went wrong is fundamental to the duty of candour. The subsequent investigative process should be made fully transparent to the affected patients, their families and carers, with the key goal of learning lessons to help prevent such PSIs happening again.

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## **How to conduct written online consultations with patients in primary care**

Bakhai, Minal; Atherton, Helen. *BMJ : British Medical Journal (Online)*; Feb 2021; vol. 372  
A written online consultation is a two-way written exchange between a healthcare professional and a patient using an online medium (such as an online web platform or email portal). Such exchanges offer an alternative route of access for patients alongside telephone and face-to-face consultations. This article offers a guide to help clinicians, use written online consultations effectively with their patients.

## **Factors associated with potentially missed acute deterioration in primary care.**

Cecil, Elizabeth et al. *The British journal of general practice* Mar 2021  
Differentiating deterioration from self-limiting conditions can be difficult for clinicians, particularly in patients with sepsis, UTI or with long-term conditions. Our findings support the call for longer GP consultations and cautions reliance on telephone consultations in primary care.





## **Psychometric Testing of Errors of Care Omission Survey: A New Tool on Patient Safety in Primary Care**

*Lusine Poghosyan et al.*

*Journal of patient safety March 2021*

The ECOS can be used in primary care to identify critical omissions, so actions can be taken by clinicians and administrators to prevent them before they result in patient harm.

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