

## Future-proofing Primary Care – 30<sup>th</sup> April 2021

[Covering COVID-19, [innovation and digital health](#), [leadership](#), [skill mix & workforce planning](#)]

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### COVID-19 training/resources/research

#### [Evaluation of a 'drop box' doorstep assessment service to aid remote assessments for COVID-19 in general practice.](#)

Irving G. et al.

BMJ open quality, 2021 Mar; Vol. 10 (1).

Quality improvement methods have facilitated the successful integration of doorstep assessments into clinical care.

#### [Management and patient safety of complex elderly patients in primary care during the COVID-19 pandemic in the UK-Qualitative assessment.](#)

Alboksmaty A; Kumar S; Parekh R; Aylin P.

PloS one 2021 Mar 29; Vol. 16 (3), pp. e0248387

The COVID-19 pandemic has affected all levels of the health system in the UK, particularly primary care. Based on the GPs' perspective in NWL, changes to practice have offered opportunities to maintain safe healthcare as well as possible drawbacks that should be of concern.

#### [Effects of the Covid-19 pandemic on primary care-recorded mental illness and self-harm episodes in the UK: a population-based cohort study.](#)

Carr, Matthew et al.

The Lancet Public Health, 2021; 6 (2): e124-e135 (February 2021)

Consequences of the considerable reductions in primary care-recorded mental illness and self-harm could include more patients subsequently presenting with greater severity of mental illness and increasing incidence of non-fatal self-harm and suicide. Addressing the effects of future lockdowns and longer-term impacts of economic instability on mental health should be prioritised.

#### [General Practice in the Time of COVID-19: A Mixed-Methods Service Evaluation of a Primary Care COVID-19 Service.](#)

Hibberd J et al.

Int. journal of environmental research and public health 2021 Mar 12; Vol. 18

Findings suggest that the management of many patients with COVID-19 symptoms is possible in routine general practice with minimal risk through the implementation of remote consultation methods and in patients who present after the post-infectious period. Additionally the use of remote saturation monitoring and local GP COVID-19 "experts" can support practices to manage COVID-19 patients.

#### **Long term conditions and mental health: An audit of local data**

Morrissey H. et al. International Journal of Current Pharmaceutical Research; Mar 2021; vol. 13 (no. 2); p. 32-38

It was demonstrated during COVID-19 that pharmacists are well-positioned as easily accessible health care facilities to support patients, especially when the other NHS facilities are stretched or closed. Community pharmacies can offer large-scale screening programs such as self-completed anxiety, depression and cognitive function screening surveys and refer to general practitioners for further investigations.

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## **Innovation and Digital Health**

### **Going virtual: youth attitudes toward and experiences of virtual mental health and substance use services during the COVID-19 pandemic.**

*Hawke LD.*

*BMC Health Services Research 2021;21(1):340.*

This study examined the attitudes toward and experiences of virtual mental health and substance use services among youth drawn from clinical and non-clinical samples. The majority of youth with mental health or substance use challenges would be willing to consider individual virtual services, but fewer would consider group virtual services. Advantages and disadvantages of virtual services are discussed, including accessibility benefits and technological barriers.

### **Delivering prevention in an ageing world: using technology effectively**

*International Longevity Centre UK*

*April 2021*

This consultation paper identifies the key areas where technology can play a crucial role in helping push forward the prevention agenda. The paper also collates examples of good practice, including learnings from the ongoing Covid-19 pandemic.

### **Shaping the future of digital technology in health and social care**

*The King's Fund*

*7<sup>th</sup> April 2021*

This report, commissioned by the Health Foundation, provides a summary of evidence for how emerging technologies such as artificial intelligence, smartphones, wearable devices and the internet of things are being used within care settings around the world.

### **Remote working toolkit for general practices and primary care networks.**

*The King's Fund*

*2021.*

This short digital guide was developed for practice and primary care network (PCN) leaders to help them adopt practices and techniques to ensure that their teams work as well as possible, even if all the members of the team can't be physically together in one place.

### **Diagnosing community-acquired pneumonia via a smartphone-based algorithm: a prospective cohort study in primary and acute-care consultations**

*Paul Porter et al.*

*Br J Gen Pract April 2021 71:e258-e265*

The algorithm provides rapid and accurate diagnosis of CAP. It offers improved accuracy over current protocols when clinical evaluation is difficult. It provides increased capabilities for primary and acute care, including telehealth services, required during the COVID-19 pandemic.

### **The implementation of remote home monitoring models during the COVID-19 pandemic in England**

*Cecilia Vindrola-Padros et al.*

*EClinical Medicine, 34, 2021, 100799*

The models varied in relation to the healthcare settings and mechanisms used for patient triage, monitoring and escalation. Implementation was embedded in existing staff workloads and budgets. Good communication within clinical teams, culturally-appropriate information for patients/carers and the combination of multiple approaches for patient monitoring (app and paper-based) were considered facilitators in implementation.

## **One year later: How online triage has changed the face of general practice**

*Digital Health.*

27 March 2021

Dr Thomas Patel-Campbell shares the experiences of Haxby Group GP practices after 12 months of using online triage and patient flow management technology.

## **Implementation of remote consulting in UK primary care following the Covid-19 pandemic: a mixed-methods longitudinal study**

*Murphy, Mairead et al.*

*British Journal of General Practice, 2021; 71 (704): 166-177 (March 2021)*

The shift to remote consulting was successful and a focus maintained on vulnerable patients. It was driven by the imperative to reduce contagion and may have risks; post-pandemic, the model will need adjustment.

## **Leadership**

### **Leadership and management for nurses working at an advanced level.**

*Wood C.*

*British Journal of Nursing 2021;30(5):282–286.*

Leadership and management form a key part of advanced clinical practice and work in synergy with the other pillars of advanced practice. Advanced clinical practitioners focus on improving patient outcomes, and with application of evidence-based practice, using extended and expanded skills, they can provide cost-effective care.

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### **How might leadership roles evolve in integrated health and care systems?**

*NHS Leadership Academy.*

March 2021

This report explores some of the implications of the Long Term Plan and its supporting plans on leadership within local health and care systems, the roles that may emerge over time, and what knowledge, skills and support leaders need in the future.

### **What makes a leader? GP trainee, Dr Nish Manek, on getting people behind a purpose.**

*The King's Fund.*

2021.

In this podcast Helen McKenna speaks with Dr Nish Manek, a GP trainee and founder of the NextGen leadership programme, about her leadership journey, how she's dealt with imposter syndrome, and the impact of Covid-19 on how we deliver primary care. 34 minutes listen.

### **The content of the nurses in the lead programme for empowering community nurse leadership in implementing evidence**

*Vogel R. et al.*

*Leadership in health services (Bradford, England); Apr 2021*

The NitL programme has been developed to empower the leadership of community nurses in implementing evidence targeted at encouraging functional activities of older adults. The leadership role of community nurses is key for delivering high-quality care and implementing evidence within the community care setting for encouraging functional activities of older adults to preserve their independence

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## Skill Mix & Workforce Planning

### [A survey of the retention of GPs following the induction and refresher scheme in London.](#)

Shah R.; Nayar V.; Grzesiak A. *Education for primary (pp 1-4), 2021. Date of Publication: 14 Apr 2021.*

An evaluation of the I&R Scheme in London shows that 94% of all doctors who have been through the Scheme remain on the Medical Performers List with 82% of respondents continuing to work in UK general practice. The implication is that the Scheme is successful in its aim of retaining GPs in NHS practice. Most respondents found the Scheme to be of value, practically and emotionally in supporting their return to practice whether they were UK returners or if they were new to UK general practice.

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### [Helping us grow generations of GPs \(HUGG\): a pilot study evaluating Longitudinal Support Networks \(LSNs\) on recruitment, retention and resilience of GPs in Derbyshire.](#)

Imtiaz-Umer S.; Taggar J.; Allsopp G.

*Education for primary care (pp 1-3), 2021. 10 Apr 2021.*

LSNs can benefit all stages of a GP career, with further implementation across a larger geographical area considered and evaluated as an adjunct to formal mentoring and support already available.

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### ['Do nurses really do that'? An exploratory mixed methods study of Students' willingness to lead.](#)

Topola, Leanne, Miller, Kathleen.

*Nurse Education Today, May2021; 100*

Student responses indicated that the 'other guy' should do it, not them. The results identify the need to develop and implement strategies to prepare future nurses who are interested and willing to participate in a career based on leadership, political action, and healthcare transformation.

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### [HEE Star: Accelerating workforce redesign.](#)

Health Education England (HEE).

2021.

HEE Star Value Proposition: A report to Health Education England by Economics By Design. During the summer of 2020, HEE commissioned health economists Economics By Design to qualify and quantify the value to providers and systems of applying the HEE Star methodology to planning workforce redesign.

### [Exploring the barriers and facilitators of psychological safety in primary care teams: a qualitative study.](#)

Remtulla R.

*BMC Health Services Research 2021;21(1):269.*

Factors influencing psychological safety can be individualistic, team-based or organisational. Although previous literature has largely focused on the role of leaders in promoting psychological safety, safe environments can be created by all team members. Members can facilitate psychological safety in instances where positive leadership behaviours are lacking - for example, strengthening interpersonal relationships, finding support in silos or rotating the chairperson in team meetings.

### **Non-medical prescribing for paramedics in primary care.**

*Dixon, Matt.*

*Journal of Paramedic Practice, Apr2021; 13(4): 140-143. (4p)*

The number of paramedics working in primary care is on the rise. Knowledge of non-medical prescribing specifically for paramedics in these settings is necessary, as are new frameworks for medicines management beyond the ambulance services and for general practice in particular.

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### **The evaluation of an e-learning prescribing course for general practice**

*Salema N.-E. et al.*

*Education for primary care; Apr 2021; p. 1-7*

Over 90% of the respondents agreed that the e-learning course was easy to use and a useful part of their continuing professional education. This study shows that clinicians recognise the on-going need for training in prescribing, but the lack of training is one of the factors contributing to errors, which suggests that more education is needed, not just for GPs in training, but for qualified GPs as well.

### **Development, spread and impact of primary care and musculoskeletal communities of practice to assist rapid translation of evidence into practice**

*Kay Stevenson et al.*

*Musculoskeletal Care 23 March 2021*

The CoP model encourages the rapid translation of evidence into practice by engaging staff to identify areas of clinical concern in their own context, thereby stimulating their interest and involvement. This creates a meaningful link between research and practice. Clinical leadership and the CoP model ensure that practice change is quick and efficient. This model can be replicated at scale. Consideration needs to be given to the key ingredients to achieve impact.

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