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20/06/14 Innovation and Improvement Bulletin

This bulletin includes research which focuses on improving and developing services to improve the patient journey and make services more effective and efficient. It also includes information on service evaluations and future challenges for services that need to be considered in planning.

Contents

Urgent care

Effect of a redesigned fracture management pathway and 'virtual' fracture clinic on ED performance
J Vardy, P J Jenkins, K Clark, et al.
BMJ Open 2014;4:e005282 doi:10.1136/bmjopen-2014-005282
Objectives Collaboration between the orthopaedic and emergency medicine (ED) services has resulted in standardised treatment pathways, leaflet supported discharge and a virtual fracture clinic review. Patients with minor, stable fractures are discharged with no further follow-up arranged. We aimed to examine the time taken to assess and treat these patients in the ED along with the rate of unplanned reattendance.
Design A retrospective study was undertaken that covered 1 year before the change and 1 year after. Prospectively collected administrative data from the electronic patient record system were analysed and compared before and after the change.
Setting An ED and orthopaedic unit, serving a population of 300 000, in a publicly funded health system.
Participants 2840 patients treated with referral to a traditional fracture clinic and 3374 patients managed according to the newly redesigned protocol.
Outcome measures Time for assessment and treatment of patients with orthopaedic injuries not requiring immediate operative management, and 7-day unplanned reattendance.
Results Where plaster backslabs were replaced with removable splints, the consultation time was reduced. There was no change in treatment time for other injuries treated by the new discharge protocol. There was no increase in

unplanned ED attendance, related to the injury, within 7 days (p=0.149). There was a decrease in patients reattending the ED due to a missed fracture clinic appointment.

Conclusions This process did not require any new time resources from the ED staff. This process brought significant benefits to the ED as treatment pathways were agreed. The pathway reduced unnecessary reattendance of patients at face-to-face fracture clinics for a review of stable, self-limiting injuries.

Integrated care

Integrated care: economic impact evidence

The European Observatory on health systems and policies has published Policy Summary 11: What is the evidence on the economic impacts of integrated care? It is a review of existing evidence on the economic impact of integrated care approaches. It is generally accepted that integrated care models have a positive effect on the quality of care, health outcomes and patient satisfaction, but it is less clear how cost-effective they are.

Long term conditions

One in three adults in England at risk of developing diabetes

Research published in the British Medical Journal indicates more than a third of adults are on the edge of developing type-2 diabetes. The article, Prevalence of prediabetes in England from 2003 to 2011: population-based, cross-sectional study, highlights a rapid rise in pre-diabetes since 2003. The authors predict a surge in type-2 diabetes in the coming years, with consequences for life expectancy and disability. The report concludes that the socioeconomically deprived are at substantial risk.

Prevalence of prediabetes in England from 2003 to 2011: population-based, cross-sectional study

BMJ Open

This analysis of Health Survey for England (HSE) data found that there has been a marked increased in the prevalence of prediabetes (Hba1c between 5.7% and 6.4%) in adults in England - from 11.6% in 2003 to 35.3% in 2011. Modelling, evaluating and implementing cost effective services to reduce the impact of stroke.

Modelling, evaluating and implementing cost effective services to reduce the impact of stroke

Wolfe C, Rudd A, McKevitt C. *Programme Grants Appl Res* 2014;2(2)

The team aimed to provide a breadth of information to underpin the implementation of national recommendations for stroke care including an estimation of the risk of stroke, its underlying causes and trends, long term needs and outcomes, risk of recurrence of stroke, user perspectives, and more. The programme demonstrated that stroke is a very long term condition with persisting consequences for the patient and produced information that led to the development of programmes aiming to improve stroke services nationally. It has provided a sustainable platform for health services research, the maintenance of a unique long-term condition register and opportunities for capacity building in health services research for healthcare professionals and scientists.

Medicines management

Medicines optimisation prototype dashboard launched

NHS England has launched the Medicines Optimisation Prototype Dashboardwhich is designed to encourage CCGs and trusts to think more about how well their patients are supported to use medicine and less about focusing on cost and volume of drugs. The prototype dashboard includes hospital admission data and patient experience indicators and looks at areas such as medication safety and utilisation of community pharmacy services. CCGs and Trusts can work together to agree how to use this dashboard locally.

Pharmacotherapy for weight loss
British Medical Journal *BMJ 2014;348:g3526*
This ‘Practice’ article discusses the currently available drug treatments for obesity, illustrated with a case example. It summarises the evidence to support their use, safety issues and precautions, administration and monitoring, and cost-effectiveness.

Innovation and improvement policy

Reforming the NHS from within
The King's Fund has published Reforming the NHS from within: Beyond hierarchy, inspection and markets. This paper reviews the impact of three approaches to NHS reform in England since the late 1990s: targets and performance management, inspection and regulation, and competition and choice. It argues for a fundamental shift in how the NHS is reformed, learning from what has worked (and what has not) in England and elsewhere. This the final publication in the programme of work, 'Time to Think Differently' which was set up to stimulate debate about the changes needed for the NHS and social care to meet the challenges of the future.

Urgent and planned care: operational resilience and capacity planning
Monitor, NHS England, the NHS Trust Development Authority and ADASS (Association of Directors of Adult Social Services) have published Operational resilience and capacity planning for 2014/15. This framework sets out best practice requirements across planned and urgent and emergency care that local healthcare systems should reflect in their local plans, as well as providing information on more general requirements such as operational planning, patient experience and planning for higher dependency patient groups.

New service models of health care
The Reform Research Trust has published Going with change: Allowing new models of healthcare to be provided for NHS patients. The report argues that within a decade new service models from within the public or the independent sector will make major changes to the way nearly 75 per cent of NHS hospitals and GP practices operate. The authors of the report argue that the NHS should adopt the same thinking that has cut costs and improved quality in grocery retail, high street retail and car manufacturing. They warn that the "protectionism and political conservatism" of the NHS is itself a barrier to good patient care. The authors predict that new models of healthcare provided by both public and independent organisations will replace nearly three-quarters of NHS care by 2024.

Bulletins for CCGs: issue 61

Innovation and improvement tools and techniques

There is always a better way...
NHS Partners Network has published a briefing highlighting the top five entries from a competition to find the best examples of innovation from the independent sector. There is always a better way demonstrates the benefit of believing there is a better way – and having both the freedom and the support to explore ways of finding it. The five services are: recovery at home service; musculoskeletal services; post-operative support for patients at home; referral service; and clinical management solution.

Provider Services

Smaller hospitals have a future in the NHS
A new report from Monitor suggests small district general hospitals can thrive but the way services are provided to

Patient Care … Professional Development … Commissioning … Evidence-based Practice … Revalidation … Research … Clinical Pathways … Knowledge Management … Books … Journals … Critical Appraisal …Bulletins … Alerts …DynaMed…Map of Medicine … Health Education Resources … Athens … Laptops … Literature Searching … MEDLINE … Referencing …

local patients must change to guarantee quality care. [Facing the future: smaller acute providers](#) found no clear evidence that smaller acute hospitals performed any worse clinically than larger counterparts. The analysis of a variety of clinical measures found no systematic evidence of poorer quality in small hospitals and found only a limited effect of size on financial performance, but this is likely to become more important in the future.

Public health

Public Health England knowledge strategy
Public Health England has published [Knowledge strategy: harnessing the power of information to improve the public's health](#). This strategy provides a framework within which knowledge from data, research and experience can be used to best inform public health decision-making. The strategy addresses the entire knowledge lifecycle from understanding the requirements of those who are using public health knowledge, through to what technologies Public Health England will use to disseminate it. It concentrates on openness, transparency and partnership working to deliver the best available knowledge to the right people at the right time.

Cholesterol: a forgotten public health issue?
This [report](#) assesses health and wellbeing strategies in London on their prioritisation of cholesterol. It found that, while a number of health and wellbeing boards are considering cardiovascular disease (CVD) and cholesterol in their joint strategic needs assessments, this is often not the case in joint health and wellbeing strategies. Cholesterol is often overlooked and remains a 'Cinderella' risk factor for CVD in these important public health initiatives. It makes a total of 11 recommendations to health and wellbeing boards and policy makers to help address this.

Systematic reviews of and integrated report on the quantitative, qualitative and economic evidence base for the management of obesity in men
Robertson C, Archibald D, Avenell A, et al. Health Technology Assessment, 2014, Vol. 18, Issue: 35
Fewer men join weight loss programmes but are more likely than women to stick with them, according to analysis of international obesity studies funded by the NIHR. Men also prefer the use of simple 'business-like' language, welcome humour used sensitively, and benefit from the moral support of other men in strategies to tackle obesity. These are some of the findings of scientists prompting them to suggest if weight loss programmes were specifically designed for men these might be more effective at helping them lose weight.

Researchers from the Universities of Aberdeen, Bournemouth and Stirling analysed evidence from around the world, gathered from weight loss trials and studies that have also taken men's views. The team particularly investigated what would make services more appealing for men.   From their [systematic review](#) of the evidence on obesity management published by the National Institute for Health Research Health Technology Assessment (HTA) Programme, researchers also found:

- Cutting calories together with exercise and following advice on changing behaviour are the best way for obese men to shed pounds. This can also help reduce the risk of health problems such as type 2 diabetes.
- Obese men who eat less lose more weight than those who take more exercise but don't eat less.
- In the long term, one calorie-reducing diet has not yet been found to be better than another for weight loss for men.
- Middle-aged men are motivated to lose weight once they perceive they have a health problem they want to tackle.
- A desire to improve personal appearance without looking too thin is also a motivator for weight loss in men.
- Men are likely to prefer weight-loss programmes delivered by the NHS rather than those run commercially.
- Group-based weight management programmes run only for men provide moral support.

- Obesity interventions in sports clubs, such as football clubs, have been very effective, with low dropout rates and very positive responses from men.

New guidance on improving oral health

Public Health England has published [Local authorities improving oral health: commissioning better oral health for children and young people: An evidence-informed toolkit for local authorities](#). The guidance makes recommendations to help local authorities review and develop their oral health improvement strategies in their new role as commissioners of oral health improvement programmes. The guidance is based on the best evidence currently available and provides advice on a range of options that local authorities can consider, depending on the needs of their local populations.

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Children and young people

Children's transition to adult health services

The Care Quality Commission has published [From the pond into the sea: children's transition to adult health services](#). The findings show that young people with complex health needs do not always receive the necessary care and support when they move on to adult care services. The report found that there is plenty of guidance on what makes for good transition planning and good commissioning of care. It found a significant shortfall between policy and practice. For young people, their families and sometimes the stafff caring for them this created confusion and frustration. It highlights that young people can often also find themselves without essential care or equipment because of the diffferent ways services are provided, or while funding arrangements are resolved.

Implementing the 0 to 25 special needs system

The Department of Health and the Department of Education have [added Draft guidance on transition to the new 0 to 25 special educational needs and disability system](#) to their 0-25 special needs system guidance documentation The document explains how legislation relating to children and young people with special educational needs (SEN) in England will operate between 1 September 2014 and 31 March 2018, and how and when the new SEN and disability system will be made available to all children and young people with SEN in England by 31 March 2018.

The future for community children's nursing

Royal College of Nursing , Publication code: 004 596; 16 June 2014
ISBN: 978-1-910066-56-0
Children's nurses play a pivotal role in an individual's transition from children's services to adult services. Many young people are mow living into early adulthood with complex disability and long-term conditions. This [publication](#) sets out the RCN perspective of contemporary children's and young people's nursing services in primary and community settings and the crucial role community children's nursing (CCN) performs as the bedrock of integrated care closer to home.

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Mental health

Mental Capacity Act 2005

The Government has published [Valuing every voice, respecting every right: making the case for the Mental Capacity Act](#). This is the Government's (and partners) response to the 39 recommendations of the House of Lords Select Committee. This response sets out a system-wide programme of work over 2014 to 2015 and beyond that they believe will make an improvement to the implementation of the Mental Capacity Act 2005.

Lester Tool: cardio and metabolic health assessments for people with mental illness
NHS England has launched a new tool, The Lester Tool, which is intended to help frontline staff make assessments of cardiac and metabolic health, helping to cut mortality for people with mental illnesses. The Lester Tool is a summary poster to guide health workers to assess the cardiometabolic health of people experiencing psychosis and schizophrenia, enabling staff to deliver safe and effective care to improve the physical health of mentally ill people.

Mental Health Dementia and Neurology Intelligence Network
Public Health England has launched a new health intelligence network Mental Health Dementia and Neurology Intelligence Network. The network analyses information and data and turns it into health intelligence for commissioners, policy makers, clinicians and health professionals to improve services, outcomes and reduce the negative impact of mental health, dementia and neurology problems. It consists of four pilot profiling tools covering: common mental health disorders; severe mental illness (including psychosis); community mental health profiles (updated from last year's publication); and neurology (emergency admissions and epilepsy).

Dementia-friendly technology charter / Dementia drugs
NHS England's National Clinical Director for Dementia has welcomed the Alzheimer's Society launch of its dementia-friendly technology charter helping people with dementia live at home for longer. The charity has created a guide improving access to life-changing technology including products and home modifications. The Dementia-friendly technology charter provides guidance to health, housing and social care professionals on how to make technology work for people based on their individual needs.

Assessment and treatment of dementia in older adults
A systematic review finds that brief cognitive assessment tools can adequately detect early dementia, but whether interventions for mild cognitive impairment or early dementia have a clinically significant effect is unclear.

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Other

Seven day care
Royal College of Nursing; Publication code: 004658; 12 June 201
This publication has been written to inform RCN members of the RCN's work on seven day care. It looks at the provision of seven day care and what this means for the nursing profession. It is also part of a wider project and we would like members to contribute their views and ideas.

Seven day service tool
NHS Improving Quality has launched a Seven Day Service Self-Assessment Tool to help organisations assess their current level of service provision, using nationally agreed definitions.
The tool helps organisations get a better understanding of local needs and requirements to deliver extended services, identify barriers and drivers around areas such as workforce and finance, as well as self-assess against the national clinical standards for seven day services.

Taking a proactive and strategic approach to improving safety
We all understand the need for a proactive approach to improving safety – one which changes culture and builds staff knowledge about improvement – but it can be hard to know where to start. This month we look at work that is driving the safety agenda forward, from award winning local projects to national approaches helping organisations develop their safety strategy.

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