

# TRFT Library & Knowledge Service

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The Rotherham **NHS**  
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Library &  
Knowledge  
Service

10/04/2015 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

[Intermediate care](#)

[Patient safety](#)

[General Practice](#)

[Patient engagement](#)

[Innovation and improvement policy](#)

[Public health](#)

[Innovation and improvement tools and techniques](#)

[Older people](#)

[Clinical commissioning](#)

[Mental health](#)

[Workforce innovation and improvement](#)

[Learning disabilities](#)

[Cost improvement & NHS Funding](#)

[Palliative care](#)

[Health informatics](#)

[Other](#)

[Long term conditions](#)

## Intermediate care

[Nurse telephone follow-up immediately after discharge is feasible](#)

Follow-up calls to patients' families after discharge can provide extra information and may reduce readmission rates.

Researchers from the US examined the feasibility of using call centre nurses who are experts in telephone triage to conduct post discharge telephone calls. Families of children with bronchiolitis were called one to two days after discharge. The average length of calls was 12 minutes. Calls helped to identify gaps in the information provided to families. There was a reported reduction in readmissions.

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 ...

Reference: Kirsch SD, Wilson LS, Harkins M, Albin D, Del Beccaro MA. Feasibility of using a pediatric call center as part of a quality improvement effort to prevent hospital readmission. [Journal of Pediatric Nursing](#). 2015 Mar;30(2):333-337

[Back to top](#)

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## General Practice

### Half of spent time in GP visits could be done another way

About half of the time GPs spend in clinic visits could be reassigned to telephone, online or other consultation types or undertaken by other professionals.

Researchers from the US assessed what proportion of primary care visits to doctors could be delivered in another way, such as by another team member or without a face-to-face visit. One hundred and twenty-one clinic visits were videoed. Two doctors reviewed each visit and judged independently which components could have been delivered in another way. The doctors judged that half of the minutes of consultations could have been assigned to another team member or consultation type. Whilst physical examinations were thought to need a doctor, tasks such as medication reviews could be reassigned.

Pelak M, Pettit AR, Terwiesch C, Gutierrez JC, Marcus SC. Rethinking primary care visits: how much can be eliminated, delegated or performed outside of the face-to-face visit?. [Journal of Evaluation in Clinical Practice](#). 2015 Mar;

[Back to top](#)

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## Innovation and improvement policy

### NHS England Business Plan 2015/16

NHS England has published its [business plan for 2015/16](#), summarising the headline goals and priorities for the year ahead. The plan sets out ten priorities to improve quality and access to services for patients, drive better value for money and to build the foundations for the future health and care system. The plan describes how the increased financial settlement for 2015/16, along with further reallocated resources from NHS England, has resulted in a total of £1.98 billion for frontline services, helping to kick start the investment needed to create new care models and further invest in primary care.

[Back to top](#)

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## Innovation and improvement tools and techniques

### Quick guides

The Health Foundation has published two new quick guides. The details are as follows:

- [Evaluation: what to consider](#). This guide aims to answer some of the most commonly asked questions about how those new to the topic might approach evaluation of quality improvement in healthcare.
- [Using communications approaches to spread improvement](#). This guide introduces key concepts about spreading ideas, and the role communications approaches can play. It suggests practical actions you can take to effectively communicate and spread improvement work.

## NHS and sustainability

The National Audit Office has published [NHS and sustainability](#). The document has been prepared for the Environmental Audit Committee. It focuses on identifying potential good practice, opportunities and challenges and draws on the National Audit Office's good practice criteria. The briefing covers four aspects of sustainability within an organisation: policy and policy making; governance; operations and procurement.

## CQC celebrates good care

This report examines what underpins high quality care. It includes a collection of short [case studies](#) illustrating some of the qualities shown by care providers that are rated good or outstanding overall. It also shares the views of some people responsible for care quality and what they do to drive improvement.

[Back to top](#)

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## Clinical commissioning

### CCG Bulletin:

- [Issue 80](#)
- [Issue 81](#)

## Toolkit to reduce poor experience of in-patient care

NHS England has published [a toolkit to support NHS commissioners to reduce poor experience of in-patient care](#). The toolkit has been developed to support NHS commissioners to work collaboratively with patients, carers and NHS provider organisations to reduce poor experience of in-patient care.

It has been co-designed with the help of a number of Clinical Commissioning. It addresses key aspects of support identified by commissioners to assist improvement work and is intended to be updated annually.

[Back to top](#)

## **Workforce innovation and improvement**

### Revised Code for nurses and midwives

The Nursing and Midwifery Council (NMC) has published a [revised Code for all UK registered nurses and midwives](#). The Code which came into effect on 1 April 2015, has been updated to reflect changes in contemporary professional nursing and midwifery practice and to reflect the public expectations of care. The NMC has published a number of additional resources to support the revised Code.

[Back to top](#)

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## **Cost Improvement & NHS Funding**

### Hospital finances and productivity

The Health Foundation has published [Hospital finances and productivity: in a critical condition?](#) This report examines the financial performance of NHS providers, focusing on hospitals. It identifies areas of cost pressure using their financial accounts up to 2013/14 and quarterly reporting data up to December 2014 (Q3 2014/15). It also examines trends in efficiency and productivity from 2009/10 to 2013/14.

Additional link: [NHS Confederation press release](#)

[Back to top](#)

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## **Health informatics**

### Latest round of technology funding announced

Health and social care providers across the country will benefit from £78m this year to invest in technology and help them move from paper-based clinical records to integrated digital care records.

£43 million of [integrated digital care funding](#) will be used by NHS trusts and local authorities to put in place electronic information systems which make sharing information between care settings easier and ensure that patients only tell their story once.

### Text messages can prompt positive behaviour change

Sending text messages as part of health improvement programmes can help to kick start behaviour change, but the longer-term effectiveness remains unknown.

Method: Systematic review

Findings: This study compiled systematic reviews about mobile text-messaging interventions to support

health improvement and behaviour change. The review found that most published studies reported that text-messaging interventions were effective for improving diabetes self-management, weight loss, physical activity, smoking cessation and medication adherence. However there was less information about the characteristics of the most effective interventions, such as content, duration and target population. The long-term effects remain uncertain.

Reference:

Hall AK, Cole-Lewis H, Bernhardt JM. [Mobile text messaging for health: a systematic review of reviews](#). **Annual Review of Public Health**. 2015 Mar;36:393-415.

Access to electronic records may improve self-care

Reviewers from England examined the impact of giving people access to their general practice electronic health records and other linked online services. Ten bibliographic databases and websites were searched for studies available as of December 2012. One hundred and seventy-six studies were identified, 17 of which were randomised trials, cohort or cluster studies. The review found that access to electronic medical records and related online services was associated with improved patient satisfaction, better communication and engagement with clinicians, improved self-care, more patient identification of medication issues and greater use of preventive services. The impact for clinicians included a moderate increase in e-mail, no change in telephone contact and variable effects on face-to-face contact. Other tasks were also needed to sustain these services which impacted on clinician time. There were variations in record access and use by specific ethnic and socioeconomic groups.

Reference:

Mold F, de Lusignan S, Sheikh A, Majeed A, Wyatt JC, Quinn T, et al. Patients' online access to their electronic health records and linked online services: a systematic review in primary care. [British Journal of General Practice](#). 2015 Mar;65(632):e141-e151.

[Back to top](#)

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**Long term conditions**

Technology can improve self-management and self-confidence

Technology such as smartphones, websites and self-monitoring tools can improve self-management confidence and behaviours and symptom control in people with diabetes.

This review examined the types of technology available to facilitate self-management for people with diabetes and the impacts of this technology. Three bibliographic databases were searched for empirical research published between 2008 and 2015. Fourteen studies were included. The review found that technological interventions were associated with improved blood sugar control, self-management behaviours and self-efficacy.

Reference:

Hunt CW. Technology and diabetes self-management: An integrative review. [World Journal of Diabetes](#). 2015 Mar;6(2):225-233.

[Back to top](#)

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## Patient Safety

### Patient Safety

The [Health and Social Care \(Safety and Quality\) Act 2015](#) which aims to improve safety and quality of care has received Royal Assent. Among the measures introduced by the act is a duty on health and adult social care providers to share information about a person's care with other health and care professionals. Relevant health and adult social care bodies will also be required to use a consistent identifier the NHS Number when processing and/or sharing information about an individual for their direct care. The aim being to enable better connection of health and care records as people move between services, so relevant information is shared, leading to safer and better aligned care.

### Wearing two sets of gloves reduces contamination in surgery

A simple intervention such as wearing double gloves and removing the outer layer after touching the patient during surgery can reduce contamination.

This study tested, in a simulated environment, whether anaesthetists wearing two pairs of gloves reduced contamination in surgery. The outer set of gloves was removed immediately after placing a tube into the airway. In half of the 22 simulation sessions personnel wore a single pair of gloves and in the other half they wore two sets of gloves. Before the simulation, the lips and inside of the mouth of the mannequin were coated with a fluorescent gel to represent a pathogen. After the simulation, an observer examined 40 different sites to determine whether the 'pathogen' was transferred to the patient or the patient's environment. There was a significant reduction in the rate of contamination with double gloves. Single gloves were associated with an average of 20 contaminated sites compared to five with double gloves.

Reference: Birnbach DJ, Rosen LF, Fitzpatrick M, Carling P, Arheart KL, Munoz-Price LS. Double gloves: a randomized trial to evaluate a simple strategy to reduce contamination in the operating room. [Anesthesia and Analgesia](#). 2015 Mar;120(4):848-852

### Motivation and environmental perceptions influence hand hygiene

Motivation and perceptions of the working environment influence the extent to which healthcare workers comply with hand hygiene guidelines. Interventions to educate, change behaviour and empower staff may be useful.

Reviewers from Ireland examined qualitative literature about healthcare workers' compliance with hand hygiene guidelines. Factors that workers said contributed to the level of compliance included motivational factors and perceptions of the work environment. Motivational factors could be influenced by behaviour change interventions. The way in which staff perceive their work environment may be influenced by empowerment and culture change.

Reference: Smiddy MP, O'Connell R, Creedon SA. Systematic qualitative literature review of health care workers' compliance with hand hygiene guidelines. [American Journal of Infection Control](#). 2015 Mar;43(3):269-274

[Back to top](#)

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## Patient engagement

### Tablets speed up surveys in primary care

Researchers from the US explored ways to collate data for improvement routinely in primary care. They found that it was feasible to use tablet computers and commercially available software to quickly survey patients in the waiting room. It took patients an average of 40 seconds to complete each survey. Data were automatically analysed and displayed. This may help to collect real-time data for use in quality improvement initiatives.

Reference: Wofford JL, Campos CL, Jones RE, Stevens SF. Real-time patient survey data during routine clinical activities for rapid-cycle quality improvement. [Journal of Medical Internet Research Medical Informatics](#). 2015 Mar;3

[Back to top](#)

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## Public health

### Drug and alcohol services

The Local Government Association has published [Local Solutions, Healthy Lives: council's role in drug and alcohol services](#). This document describes how public health in a number of councils has started to use the opportunities of a local government setting to improve health and wellbeing. It includes case studies showing a range of ways in which public health in councils is approaching drug and alcohol services. They include councils spread across England, covering both rural and urban environments and with varying levels of deprivation and affluence.

### PHE bulletin: 25 March 2015

The latest Public Health England bulletin features the launch of the national diabetes initiative.

### Public health transformation: adding value to tackle local health needs

This [compilation of case studies](#) shows how local authorities are continuing to make progress on improving health and wellbeing and tackling health inequalities since public health was formally transferred in April 2013. It follows last year's compilation, Public health transformation nine months on: bedding in and reaching out.

## Physical activity return on investment tool

As part of its savings and productivity collection, NICE has published [Physical activity return on investment tool](#). The tool has been developed to help decision making in physical activity programme planning at local and sub-national levels. The tool enables the user to evaluate a portfolio of interventions in their geographical area (e.g. region, county or local authority) and models the economic returns that can be expected in different payback timescales. The different interventions included in the tool can be mixed and matched to see which intervention portfolio or package provides the best 'value for money', compared with 'no package of interventions' or any other specified package.

[Back to top](#)

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## **Older people**

### New standards to prevent falls in older people

Falls and fall-related injuries are a common and serious problem for older people. Three in 10 people over the age of 75 in England – about 2.5 million - will have at least one fall each year. Half of those aged 80 or above will have a fall.

The [quality standard](#) for assessing older people after a fall and preventing further falls aims to support hospitals and community services to help improve the quality of life of older people and reduce the number of fall-related injuries occurring in people aged 65 and older.

[Back to top](#)

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## **Mental health**

### Ensuring people with autism get the best treatment and care

Health and social care practitioners can ensure they are delivering the best treatment and support for people with autism by following NICE's quality standard.

NICE's [quality standard](#) on autism in adults and those under 18 has eight measurable statements, which organisations can use to improve the quality of care for those with the condition.

NICE says that it is important that the assessment is conducted as soon as possible so that appropriate health and social care interventions, advice and support can be offered. Ensuring those who are affected by autism are given access to support as quickly as possible can help improve outcomes.

### The route to employment: the role of mental health recovery colleges

Recovery colleges can help people with mental health problems to get back into work.

This [report](#) examines the role of these institutions, and suggests ways that their effectiveness can be enhanced. It argues that recovery colleges should focus on employment outcomes, supported by more rigorous and systematic evaluation of the overall impact of the model.

[Back to top](#)

## **Learning disabilities**

### Care services for people with learning disabilities and challenging behaviour

This [report](#) finds that despite the agreed aim that people with learning disabilities should live and receive care in the community, there has been no closure programme for large mental health hospitals. It noted that the availability of places in mental health hospitals has reduced the pressure on local commissioners to revise their strategies to expand the capacity and capability of local community services. It recommends that the Department of Health should mandate the timely collection of a consistent dataset on people with learning disabilities and challenging behaviour, to inform effective planning and management of their care. It also recommends that NHS England should use its commissioning framework to require local commissioners to comply fully with the Department of Health's stated aim to promote community based services rather than hospital admissions for people with learning disabilities.

[Back to top](#)

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## **Palliative Care**

### Equity in the provision of palliative care

The London School of Economics and Political Science has published [Equity in the Provision of Palliative Care in the UK: Review of Evidence](#). The study was commissioned by Marie Curie and provides a summary of available academic and statistical evidence on inequities in palliative care for adults across the UK. In particular, it aimed to identify and explore systematic differences in access or outcomes, between geographical areas, settings or different groups of service-users, and to do this, as far as possible, in the context of people's different needs and preferences. The report discusses the economic case for extending the reach of palliative care to those currently under-served, looking at the evidence on cost effectiveness and the costs of extending palliative care to those who would benefit from it but are not currently receiving it.

[Back to top](#)

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