Patient Safety Bulletin January 2020

Articles

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'This is our liver patient...': use of narratives during resident and nurse handoff conversations.
[Conclusion: Narratives are acknowledged as an integral part of handoff conversations. However, there is limited incorporation of this feature into the design of handoff tools. We highlighted specific manifestations of narratives that can have potential implications for patient safety and the design of handoff tools for residents and nurses. Additional research is needed to translate the narrative needs of clinicians into specific design requirements in handoff tools.]

Can feedback approaches reduce unwarranted clinical variation? A systematic rapid evidence synthesis.
[Feedback using administrative databases to provide benchmarking data has been utilised in several countries to explore clinical care variation and to enhance guideline adherent care. The review findings suggest value in the use of feedback approaches to respond to clinical variation and understand when action is warranted. Evaluation of the effectiveness of particular feedback approaches is now required to determine if there is an optimal approach to create change where needed.]

Impact of medicines regulatory risk communications in the UK on prescribing and clinical outcomes: Systematic review, time series analysis and meta-analysis.
Weatherburn CJ. *British Journal of Clinical Pharmacology* 2019; doi.org/10.1111/bcp.14104.
[UK regulatory risk communications were associated with significant changes in targeted prescribing and potential changes in clinical outcomes. Further research is needed to systematically study the impact of regulatory interventions.] Available with an NHS OpenAthens password for eligible users

Medication-related harm in older adults following hospital discharge: development and validation of a prediction tool.
[To develop and validate a tool to predict the risk of an older adult experiencing medication-related harm (MRH) requiring healthcare use following hospital
Conclusions: The PRIME tool could be used to identify older patients at high risk of MRH requiring healthcare use following hospital discharge. Prior to clinical use we recommend the tool’s evaluation in other settings.

**Multifactorial falls prevention programmes for older adults presenting to the emergency department with a fall: systematic review and meta-analysis.**
[There is insufficient evidence to support the use of multifactorial interventions to prevent falls or hospital utilisation in older people presenting to ED following a fall. Further research targeting this population group is required.]
*Available with an NHS OpenAthens password for eligible users*

**Patients' and healthcare workers' recommendations for a surgical patient safety checklist - a qualitative study.**
[This study aims to identify what the patients and healthcare workers find to be the risk elements that should be included in a patient-driven surgical patient safety checklist. Developing a surgical safety checklist based on these risk elements might reduce complications and unwanted errors.]

**The ageing surgeon: a qualitative study of expert opinions on assuring performance and supporting safe career transitions among older surgeons.**
[Conclusion: Experts perceive the need for a staged approach to assessing the performance of older surgeons and tailoring interventions. Most older surgeons are seen to make decisions around career transitions with self-awareness and concern for patient safety. ..Developing robust processes to assess performance, remediate deficits and adjust scopes of practice could help to support safe career transitions at any age.]

**The efficacy and safety of exercise for prevention of fall-related injuries in older people with different health conditions, and differing intervention protocols: a meta-analysis of randomized controlled trials.**
[Exercise is effective in preventing fall-induced injuries across a variety of baseline participant characteristics and exercise protocols. Exercise was associated with a low injury rate and had a good compliance, suggesting it is a feasible approach to managing fall-related injuries.]
*Freely available online*

Events

*You may be interested in this (these) forthcoming event(s):*
[The IHI/BMJ International Forum on Quality and Safety in Healthcare is a triannual gathering of healthcare professionals in quality improvement and patient safety. The conference theme in Copenhagen 2020 is Breaking Down Barriers.]
Copenhagen, Denmark
From: 28th April, 2020 9:00am Until: 30th April, 2020 5:00pm
https://internationalforum.bmj.com/copenhagen/

Guidelines

The following new guidance has recently been published:

Guidance For Prone Positioning in Adult Critical Care
Faculty of Intensive Care Medicine (FICM);2019.
[Developed along with the Intensive Care Society, this resource was guided by the results of a national survey of members to identify current practices and challenges in managing patients in the prone position and to determine whether there was a need for national guidance.]
Freely available online

Reports

The following report(s) may be of interest:

Action Against Medical Accidents; 2020.
["...reveals serious delays in NHS trusts implementing patient safety alerts which are one of the main ways in which the NHS seeks to prevent known patient safety risks harming or killing patients. Compliance with alerts issued under the now abolished National Patient Safety Agency and NHS England are no longer monitored – even though patient safety incidents continue to be reported to the NHS National Reporting and Learning System."]
Freely available online
Impact of a national quality improvement programme for hospital wards is unclear.
NIHR Dissemination Centre; 2020.
https://discover.dc.nihr.ac.uk/content/signal-000862/the-productive-ward-quality-improvement-programme-evaluation
[NIHR Signal. The Productive Ward quality improvement programme has shown some procedural changes on hospital wards in England in the 10 years since it was introduced. But evidence to show any sustained changes to the experiences of staff or patients is hard to find.]
Freely available online

Staffing for Safe and Effective Care in the UK 2019 report: Reviewing the progress of health and care systems against our principles.
Royal College of Nursing (RCN); 2020.
[This report provides an overview of progress made against the safe staffing campaign principles during 2019. It includes country-specific updates as well as a look ahead to priorities during 2020.]
Freely available online

NHS Digital; 2020.
[The SHMI is the ratio between the actual number of patients who die following hospitalisation at the trust and the number that would be expected to die on the basis of average England figures, given the characteristics of the patients treated there. It covers patients admitted to hospitals in England who died either while in hospital or within 30 days of being discharged.]
Freely available online

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