Reshaping Clinical Care in Primary Care – 14th August 2020
[Covering dementia, integrated care (including Primary Care Networks and emerging roles), long term conditions, older people, safeguarding, safety]

COVID-19 Research, resources, training

COVID-19 support fund for general practice
*NHS England* 4th August 2020
The Government described the intention to create a COVID-19 general practice support fund to assist with the legitimate additional costs of the response borne by GP practices.

How might COVID-19 affect the number of GPs available to see patients in England?
*Health Foundation* 6th August 2020
NHS England has suggested that NHS staff at potentially higher risk from coronavirus (COVID-19) are risk assessed and have their activities adjusted accordingly, including ceasing face-to-face patient contact.

RCGP survey data gives snapshot into how GP care is being accessed
*National Health Executive* 31st July 2020
The Royal College of GPs has urged post-Covid there must still be provisions for patients to access services in ways which meet their health needs and preferences. Data from a survey of 829 GPs across the UK by the RCGP in July 2020, demonstrated a significant shift towards remote consultation with 61% of GP appointments being conducted by telephone, and 16% spent doing telephone triage.

Your Covid Recovery
*NHS England* August 2020
This new NHS website is designed to help people recover from the long-term effects of COVID-19 and support them to manage their recovery. It includes information from rehabilitation experts about how to manage ongoing symptoms and health needs at home, and signposts to sources of support.

Over-exposed and under-protected: the devastating impact of Covid-19 on black and minority ethnic communities in Great Britain
*Runnymede Trust* August 2020
This report illuminates why BME groups are at greater risk from Covid-19: they are more likely to be working outside their home, more likely to be using public transport, more likely to be working in key worker roles, less likely to be protected with PPE and more likely to live in multigenerational, overcrowded housing, so much less able to self-isolate and shield.

The impact of Covid-19 on community health services
*NHS Confederation* August 2020
This report, produced together with NHS Providers, captures the community health sector’s response during the pandemic and showcases the achievements of community providers and their staff.
Briefing: Adult social care and COVID-19: Assessing the impact on social care users and staff in England so far.

*The Health Foundation. 2020.*

Provides an overview of the impact of the COVID-19 pandemic on social care in England. Since March, there have been more than 30,500 deaths among care home residents than we would normally expect, and a further 4,500 excess deaths among people receiving care in their own homes.

Easy read guidance for young carers.


This guidance contains advice for people under the age of 25 who are providing care for someone during the coronavirus outbreak.

The Dr Will Zoom You Now: getting the most out of the virtual health and care experience.

*National Voices. 2020.*

Remote consultations and the use of technology offer some great opportunities to make significant improvements to general practice, hospital outpatient and mental health appointments, but making the most of this opportunity means understanding the patient experience.

OpenSAFELY: factors associated with COVID-19 death in 17 million patients

*Walker A.J. et al Nature; 2020*

Primary care records of 17,278,392 adults were pseudonymously linked to 10,926 COVID-19-related deaths. COVID-19-related death was associated with being male older age and diabetes; severe asthma; and various other medical conditions. Compared with people with white ethnicity, Black and South Asian people were at higher risk even after adjustment for other factors.

Dementia

**What is the role of the practice nurse in the care of people living with dementia, or cognitive impairment, and their support person(s)?: a systematic review.**

*Gibson et al. BMC Family Practice; Jul 2020; vol. 21 (no. 1); p. 1-18*

Embedding an evidence-based model that describes the role of the Practice Nurse in dementia care provision has the potential to increase early recognition of cognitive impairment and more appropriate primary care management of dementia.

**Patterns and Factors Influencing Oral Anticoagulant Prescription in People with Atrial Fibrillation and Dementia: Results from UK Primary Care**

*Mongkhon P. British journal of clinical pharmacology; Jul 2020*

In the UK primary care, OAC use increased from 2000 to 2015 in AF patients with dementia/CI, with a substantial increase in DOACs use. Characteristics related to frailty are associated with lower odds of OAC prescription. Given the increasing use of DOACs in patients with dementia/CI, further studies are needed to investigate the safety and effectiveness of DOACs in this important patient group.
The Effect of Exercise Training on Brain Structure and Function in Older Adults: A Systematic Review Based on Evidence from Randomized Control Trials.


This systematic review indicates that older adults involved in exercise training may derive general benefits to brain health, as reflected by intervention-induced changes in brain structure and function. However, such benefits are dependent upon the dose of the exercise intervention.


The Lancet 2020

Excessive alcohol consumption, traumatic brain injury, and air pollution have been added to the list of potentially modifiable risk factors for dementia. Together the 12 listed modifiable risk factors account for around 40% of worldwide dementias.

Loneliness in people with dementia is linked to social isolation and depression.


One-third of people with mild-to-moderate dementia experience loneliness. 30% are moderately lonely and 5% are severely lonely, reports one of the first major studies to look at the issue. These figures are comparable to the general population of older people.

Recognising pain in dementia: what has changed?

Dening KH. British Journal of Neuroscience Nursing 2020;16(3):125-130.

Pain is common among older people due to the increased prevalence of age-related conditions. However, this might be misidentified and poorly managed in those with dementia. Effective diagnostic and treatment strategies are presented.

Integrated Care (including Primary Care Networks and emerging roles)

Advanced Clinical Practitioners in Primary Care in the UK: A Qualitative Study of Workforce Transformation


Significant variations in ACP education, skills and experience led to a bespoke approach to their deployment, impeding system-wide innovation and creating challenges for recruitment and ongoing professional development. High workforce pressures and high service demand were causing stress and there was a need for greater mentorship and workplace support. System wide changes to ACP education and support are required to enable ACPs to realise their full potential in primary care.

Identifying naturally occurring communities of primary care providers in the English National Health Service in London

Clarke J. et al. BMJ open; Jul 2020; vol. 10 (no. 7)
With PCNs expected to take a role in population health management and with community providers expected to reconfigure around them, it is vital to recognise how PCNs represent their communities. Our method may be used by policymakers to understand the populations and geography shared between networks.

**Emergency general surgery 'Hot Clinic': Efficiency, prevention of hospital admissions and factors influencing patient experience**

*Patel N.; Ravindran R.; Paterson-Brown S.*  
*The surgeon Jul 2020*

Most referrals to the HC were appropriate and it continues to prevent unnecessary emergency surgical admissions. The HC service is valued by NHS patients, who prefer HC treatment over admission. Various factors to improve the patient experience in HC have been identified.

**Opportunistic screening for atrial fibrillation by clinical pharmacists in UK general practice during the influenza vaccination season: A cross-sectional feasibility study**

*Savickas V. et al.*  
*PLoS medicine; Jul 2020; vol. 17 (no. 7)*

This study demonstrates that AF screening performed by GP practice-based pharmacists was feasible, economically viable, and positively endorsed by participants. Furthermore, diagnosis of AF by the clinical pharmacist using an SLECG was more sensitive and more specific than the use of pulse palpation alone.

**Long-Term Conditions**

**Technology and innovation for long-term health conditions**

*Collins, Ben.*  
*Kings Fund 3rd Aug 2020*

This paper looks at four digital innovations in health services from the UK and the Nordic countries: the TeleCare North programme, which provides remote treatment for people with chronic obstructive pulmonary disease (COPD); the Patients Know Best portal and electronic health record; remote diabetes monitoring for children at Helsinki University Hospital; and the Huoleti app that connects patients with a support network.

**What is the evidence for the impact of gardens and gardening on health and well-being: a scoping review and evidence-based logic model to guide healthcare strategy decision making on the use of gardening approaches as a social prescription**

*Howarth M.; Brettle A.; Hardman M.; Maden M.*  
*BMJ open; Jul 2020; vol. 10 (no. 7)*

Gardens and gardening can improve the health and well-being for people with a range of health and social needs. The benefits of gardens and gardening could be used as a 'social prescription' globally, for people with long-term conditions (LTCs). Our logic models provide an evidence-based illustration that can guide health strategy decision making about the referral of people with LTCs to socially prescribed, non-medical interventions involving gardens and gardening.

**Identification and management of frailty in English primary care: a qualitative study of national policy**

*van Marwijk H.; Blakeman T.; Reeves D.; Alharbi K.*  
*British journal of general practice Jun 2020; vol. 70*
Findings suggest that additional focused resources and the development of a stronger evidence base are essential to facilitate professional engagement in policies to improve the targeted coding and management of frailty in primary care.

**Weight assessment and the provision of weight management advice in primary care: a cross-sectional survey of self-reported practice among general practitioners and practice nurses in the United Kingdom.**

Critchlow et al. BMC Family Practice; Jun 2020; vol. 21 (no. 1); p. 1-1

Opportunities to provide weight management advice in primary care, including to patients with an obese BMI, are potentially missed. Future research should test alternative mechanisms to increase weight assessment and advice provision, examine the effectiveness of advice frequently given, and seek solutions to reported barriers for providing weight management advice.

**Impact of obesity and metabolic health status in the development of non-alcoholic fatty liver disease (NAFLD): A United Kingdom population-based cohort study using the health improvement network (THIN)**

Vusirikala A. et al. BMC endocrine disorders; Jun 2020; vol. 20 (no. 1); p. 96

Metabolically Healthy Obese individuals are at greater risk of developing NAFLD compared to those with normal weight. This finding supports that the MHO phenotype is a temporary state, and weight must be considered a risk factor even before other risk factors develop. Being normal weight with metabolic abnormalities was also associated with risk of NAFLD.

**How do you diagnose asthma? A multiple case study design to understand and explain current use of national guidelines by primary care clinicians**

Hares F. et al. The British journal of general practice. Jun 2020; vol. 70

It is striking and concerning that the thematic outcomes of this study bear a strong resemblance to that which was demonstrated over a decade ago. The guideline-implementation gap in asthma diagnostics will likely persist unless there is significant restructuring, financial investment and greater empowerment of nursing staff in primary care.

**Health and cost impact of stepping down asthma medication for UK patients, 2001-2017: A population-based observational study**

Bloom C.I. et al. PLoS medicine; Jul 2020; vol. 17 (no. 7)

In this UK study, we observed that asthma patients were increasingly prescribed higher levels of treatment, often without clear clinical indication for such high doses. Stepping down medication did not adversely affect outcomes and was associated with substantial cost savings.

**General practitioners' perceptions of compassionate communities: a qualitative study**

Abbey E.; Mayland C.R.; Craig C. BMC palliative care; Jul 2020; vol. 19 (no. 1); p. 97

GPs recognised the importance of the wider community in caring for palliative care patients, however most were unfamiliar with the compassionate community approach. Further research into the approach's practical implementation, and exploring the views of other key stakeholders, would help establish the feasibility of compassionate communities in practice, and guide its future application.
Delays in referral from primary care worsen survival for patients with colorectal cancer: A retrospective cohort study
Arhi C.S.  
British Journal of General Practice; Jul 2020; vol. 70 (no. 696)
The first presentation to the GP provides a referral opportunity to identify the underlying cancer, which, if missed, is associated with a later stage in diagnosis and worse survival.

Coping among adolescents with long-term health conditions: a mixed-methods study.
Al-Yateem N.  
Adolescents with long-term health conditions may be at risk of developing psychological comorbidities and adopting ineffective coping mechanisms if they are not adequately supported at home or school. This study aimed to understand the strategies adolescents use when dealing with challenging health situations and gain an in-depth understanding of the characteristics of their preferred care environment if they have unexpected health crises.

Gulliford M.C  
PLoS medicine; Jul 2020; vol. 17 (no. 7)
These stratified estimates of risk help to identify groups in which antibiotic prescribing may be more safely reduced. Risks of sepsis and benefits of antibiotics are more substantial among older adults, persons with more advanced frailty, or following UTIs.

Older people

What works in managing complex conditions in older people in primary and community care? A state-of-the-art review
Rachael Frost et al.  
Health and Social Care in the Community, Jul 2020
We found that the models of care were more likely to improve depressive symptoms and mental health outcomes than physical health or service use outcomes. Interventions including self-management, patient education, assessment with follow-up care procedures, and structured care processes or pathways had greater evidence of effectiveness.

Reorganisation of primary care for older adults during COVID-19: a cross-sectional database study in the UK
Joy, Mark et al.  
The British Journal of General Practice; Jul 2020
Primary care has undergone an unprecedented in-pandemic reorganisation while retaining focus on patients with increased complexity.

New research supports the move to raise the blood pressure target for frail older people.
NIHR Evidence; 2020.
The medical records of more than 400,000 patients in primary care were reviewed. The researchers found that lower than normal blood pressures were associated with a higher death rate among older people, particularly those over the age of 85 or those who were very frail. These findings are in line
with the most recent 2019 NICE guidelines which recommend a higher blood pressure target, of 150mmHg, in people aged 80 years or more.

Safeguarding, Safety

First Do No Harm: The report of the Independent Medicines and Medical Devices Safety Review
Baroness Julia Cumberledge et al. July 2020
This report comes after a two-year review, chaired by Baroness Julia Cumberlege, of harrowing patient testimony and a large volume of other evidence concerning three medical interventions: Primodos, sodium valproate and pelvic mesh. It sets out nine major recommendations to bring much-needed help and support to those who have suffered as a result of these interventions, and to reduce the risk of avoidable harm from medicines and medical devices in the future.

Sharing reports about domestic violence and abuse with general practitioners: a qualitative interview study.
Pitt et al. BMC Family Practice; Jun 2020; vol. 21 (no. 1); p. 1-10
GPs regarded external reports about DVA as relevant to their role, but safely recording this information in the electronic medical record and using it to support patients required complex judgements. Both GPs and police staff emphasised the importance of clarity of information and responsibility for action when information was shared between agencies about patients affected by DVA.

GPs’ experience of safeguarding in care homes: what do they see and what do they do?
Alton E.; White C. The British journal of general Jun 2020; vol. 70
GP work in care homes is a complex and skilled role, in which GPs encounter evidence of poor care and abuse. Key themes in respect of barriers and facilitators of good care were highlighted. The reliance on others for information and the need to build relationships with staff/managers may raise tensions in respect of safeguarding practice.

Learning from complaints in healthcare: a realist review of academic literature, policy evidence and front-line insights.
If healthcare settings are better supported to report, analyse and use complaints data in a standardised manner, complaints could impact on care quality in important ways. This review has established a range of evidence-based, short-term recommendations to achieve this.

SAFER diagnosis: a teaching system to help reduce diagnostic errors in primary care.
Silverston British Journal of General Practice; Jul 2020; vol. 70 (no. 696); p. 354-355
This article describes a mnemonic, SAFER AAA’S (Box 1), which can be used to both prevent and detect those diagnostic errors that are the most likely to cause serious harm to patients in the primary care.
setting. In primary care, patients present with a symptom, not a diagnosis, so it is important that a symptom-based, patient safety-focused approach is taken during the diagnostic process.

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