



# clinical effectiveness bulletin

health library north staffordshire

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This update was made with the help of: **KnowledgeShare**; bespoke updates and horizon scanning for UHNM staff and other groups:

<https://www.keele.ac.uk/healthlibrary/find/currentawareness/>

The Clinical Effectiveness Bulletin aims to highlight some key pieces of evidence, published in the previous month.

Where possible, links to the full text documents are included. If you are employed by UHNM, CHC, or you are ICB or GP practice staff in Staffordshire, get in touch to find out more about your NHS library service.

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## Population Health

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### **Health disparities and health inequalities: applying All Our Health.**

Office for Health Improvement & Disparities (OHID); 2022.

<https://www.gov.uk/government/publications/health-disparities-and-health-inequalities-applying-all-our-health>

[Evidence and information for health and care professionals and the wider workforce on health disparities and health inequalities, and how they can be addressed. This resource will help frontline professionals and organisations use their trusted relationships with individuals, families and communities to address the impact of health disparities and health inequalities on groups or populations. We also recommend important actions that managers and staff holding strategic roles can take.]

*Freely available online*

### **Infection prevention and control in adult social care: COVID-19 supplement.**

Department of Health and Social Care (DHSC); 2022.

<https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-covid-19-supplement>

[11 October 2022: Advice added on 1. PPE guide for non-aerosol generating procedures. 2. COVID-19 PPE guide for unpaid carers.]

*Freely available online*

### **Food poverty: households, food banks and free school meals**

House of Commons Library; 2022.

<https://commonslibrary.parliament.uk/research-briefings/cbp-9209/>

[There is no widely accepted definition of 'food poverty'. However, a household can broadly be defined as experiencing food poverty or 'household food insecurity' if they cannot (or are uncertain about whether they can) acquire "an adequate quality or sufficient quantity of food in socially acceptable ways". The increase in the cost of living has increased household food insecurity.]

*Freely available online*

## Integrated Care

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### [Exploring potential for occupational therapy practice models within areas of social deprivation: A qualitative inquiry within a community-centred food cooperative.](#)

Adams R. *British Journal of Occupational Therapy* 2022;85(10):828-836.

[A health inequalities gap exists between wealthy and deprived areas. Community-level occupation-focused interventions may support citizens and address inequities within their environments. Community volunteer initiatives have responded by providing for their residents. The aim of this study was to explore how occupational therapists may be agents for social change through exploring perspectives of members and volunteers from a community food cooperative in an area of social deprivation.]

Freely available online

### **Value-based healthcare: a patient-centred approach.** [\[Abstract\]](#)

Lawrence P. *British Journal of Community Nursing* 2022;27(Sup10):S5.

[Check for full-text availability](#)

[Discusses value-based healthcare using the example of Welsh lymphoedema services pre-pandemic, from a two-year long Patient Related Outcome Measures (PROM) project to its eventual Wales-wide implementation in 2022.]

## General Practice

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### **Adapting standard care to support self-management for a patient with lymphoedema and neurological co-morbidities: a case report.** [\[Abstract\]](#)

Murray S. *British Journal of Community Nursing* 2022;27(Sup10):S14-S20.

[Check for full-text availability](#)

[This case report discusses the role of a practitioner managing a patient with secondary lymphoedema as part of a self-management regime. The case report illustrates how a patient-centred plan can help people with lymphoedema and co-morbidities. The evidence behind treatment decisions is considered, and modifications made to the care plan to accommodate the needs of the individual. The teaching and rehabilitation role of the practitioner is explored.]

### **Promoters and inhibitors for quality improvement work in general practice: a qualitative analysis of 2715 free-text replies.** [\[Abstract\]](#)

Eide TB. *BMJ Open Quality* 2022;11(4):e001880.

[Check for full-text availability](#)

[Continuous quality improvement (QI) is necessary to develop and maintain high quality general practice services. General Practitioners (GPs') motivation is an important factor in the success of QI initiatives. We aimed to identify factors that impair or promote GPs' motivation for and participation in QI projects.]

## Evaluation of the introduction of QOF quality improvement modules in English general practice: early findings from a rapid, qualitative exploration of implementation.

[\[Abstract\]](#)

Bramwell D. *BMJ Open Quality* 2022;11(3):e001960.

[Check for full-text availability](#)

[A 2018 review of the English primary care pay-for-performance scheme, the Quality and Outcomes Framework, suggested evolution to better support holistic, patient-centred care and leadership for quality improvement. As part of the vision of change, financially incentivised QI cycles (initially in prescribing safety and end-of-life care), were introduced. OBJECTIVES: A rapid evaluation of staff attitudes, experiences and plans in relation to the implementation of the first two QI modules.]

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## Practice Nursing

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### Red legs: how to differentiate between cellulitis, venous eczema and lipodermatosclerosis. [\[Abstract\]](#)

Nazarko L. *British Journal of Community Nursing* 2022;27(10):486-494.

[Check for full-text availability](#)

[Community nurses often encounter people with red legs. There are a number of reasons why an individual may develop red legs. The most common causes of red legs are cellulitis, venous eczema and lipodermatosclerosis. All have different causes and require different treatments. This article aims to enable readers to differentiate between these conditions which can appear similar, and to offer effective evidence-based care.]

### [European guideline \(EuroGuiDerm\) on atopic eczema: part I – systemic therapy.](#)

Wollenberg. *Journal of the European Academy of Dermatology and Venereology : JEADV* 2022;36(9):1409-1431.

[Part 1 provides guidance on treatment with systemic therapies, as well as recommendations and drug information. The systemic treatment options discussed in the guideline comprise conventional immunosuppressive drugs, biologics and janus kinase inhibitors. Part 2 addresses avoidance of provocation factors, dietary interventions, immunotherapy, educational interventions, occupational and psychodermatological aspects and considerations for paediatric, pregnant and breastfeeding patients.]

*Freely available online*

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## Practice Management

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### **Promoters and inhibitors for quality improvement work in general practice: a qualitative analysis of 2715 free-text replies. [\[Abstract\]](#)**

Eide TB. *BMJ Open Quality* 2022;11(4):e001880.

[Check for full-text availability](#)

[Continuous quality improvement (QI) is necessary to develop and maintain high quality general practice services. General Practitioners (GPs') motivation is an important factor in the success of QI initiatives. We aimed to identify factors that impair or promote GPs' motivation for and participation in QI projects.]

### **[Creating a highly usable and accessible GP website for patients.](#)**

NHS England; 2022.

<https://www.england.nhs.uk/long-read/creating-a-highly-usable-and-accessible-gp-website-for-patients/>

[This guide is for practice managers, primary care networks (PCNs), integrated care systems (ICSs) (formerly CCGs), GP federations and anyone who is looking for guidance for improving general practice (GP) websites.]

*Freely available online*