



NHS information support for evidence-based practice

Alert 127

Selected resources published in July/August 2024

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Healthcare AI: Evaluating developmental data quality



The development of trustworthy deep learning applications is of critical importance to health care, but while this encompasses a range of considerations, such as safety, ethical standards and transparency, the role of data quality in the training and testing of these tools is also essential to their evaluation and regulation as this will ultimately dictate the behaviour of these applications.

Schwabe, et al, set out to isolate which characteristics of data quality should be evaluated when employing a dataset for use in medical AI applications. They conducted a systematic review using PRISMA guidelines to answer this question.

The authors synthesise existing knowledge on data quality frameworks and apply it to the context of medical applications, for which mitigating the risk of bias, ensuring interpretability and that data is robustly supported is essential to ensuring that an application is fit for its intended purpose.

They propose the METRIC-framework, a specialised data quality framework for medical training data, comprising of 15 awareness dimensions, along which developers should investigate dataset quality. It is specifically not designed to assess a dataset in a vacuum. Rather, it was conceived with the end purpose of each tool in mind.

The current framework is a starting point as future work requires assigning quantitative and qualitative measures to each of the data quality dimensions. In future, adoption of the framework may facilitate the swifter approval of medical AI products and serve to substantially increase product confidence for patients, clinicians and commissioners.

Read [The METRIC-framework for assessing data quality for trustworthy AI in medicine: a systematic review](#).

KNOWLEDGESHARE Team

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Patient Experience and Safety

Guideline / Policy

Balancing the risks and benefits of AI in the production of health information.

Patient Information Forum (PIF); 2024.

<https://pifonline.org.uk/resources/publications/balancing-the-risks-and-benefits-of-ai-in-the-production-of-health-information/>

[This statement, developed in collaboration with an expert working group, outlines Patient Information Forum's position on the risks and benefits of using artificial intelligence (AI) in the development of health information.]

Report

Our vision for improving patient experience of diagnosis.

National Voices; 2024.

https://s42139.pcdn.co/wp-content/uploads/Diagnosis-Vision-Report_v05.pdf

[The process of getting a diagnosis is becoming increasingly challenging, with February 2024 statistics showing that the proportion of patients waiting six weeks or more for diagnostic tests is 20.8%. This report from National Voices (a coalition of 200 health and social care charities in England) sets out nine key recommendations they believe will significantly improve people's experiences of diagnosis, and of health and care more widely.]

Addressing the barriers to people-centred clinical research: Recommendations for system-wide action.

NHS Health Research Authority; 2024.

<https://www.hra.nhs.uk/planning-and-improving-research/best-practice/people-centred-clinical-research/>

[This report identifies the hallmarks of good people-centred research and the barriers to doing it. It makes 19 recommendations for system-wide action and asks the research community to use the report to help them make improvements to any research they carry out in the future.]

Investigation report: Digital tools for online consultation in general practice.

Health Services Safety Investigations Body; 2024.

<https://www.hssib.org.uk/patient-safety-investigations/workforce-and-patient-safety/second-investigation-report/>

[This investigation explored the patient safety risks associated with the use of online consultation tools in general practice. The investigation focussed on the use of these tools for 'asynchronous' consultation where the patient and healthcare professional are not in the same room, and the patient does not receive a response in real time.]

AI incident reporting: Addressing a gap in the UK's regulation of AI.

Centre for Long-Term Resilience; 2024.

<https://www.longtermresilience.org/post/ai-incident-reporting-addressing-a-gap-in-the-uk-s-regulation-of-ai>

[AI has a history of failing in unanticipated ways, with over 10,000 safety incidents recorded by news outlets in deployed AI systems since 2014. With greater integration of AI into society, incidents are likely to increase in number and scale of impact. This report sets out the case for a well-functioning incident reporting regime, and provides practical steps that the Department for Science, Innovation & Technology (DSIT) can take to address it.]

A local diagnosis: learning the lessons of community diagnostic centres.

Healthwatch England; 2024.

https://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/20240828_A%20local%20diagnosis.pdf

[A community diagnostic centre is a place where people can go for planned (elective) diagnostic care. Before these centres were established, most of these tests were performed in acute hospital settings — the same place where people needing emergency tests would go. This research looks at people's experiences of using community diagnostic centres and lessons for expanding community-based care.]

The power of prevention: boosting vaccine uptake for better outcomes.

Reform; 2024.

<https://reform.uk/wp-content/uploads/2024/08/The-power-of-prevention-3.pdf>

[This briefing paper focuses on three broad factors involved in people's attitudes to vaccination – confidence, complacency and convenience – which influence uptake. Taking each in turn, it sets out practical steps for the new government that would help keep the UK protected against vaccine-preventable diseases, reducing unwarranted variation in health outcomes while freeing up valuable, limited resource in the rest of the health system.]

Managing and Leading People

Guideline / Policy

[Principles of Safe Staffing for Radiography Leaders.](#)

The Society of Radiographers; 2024.

[https://www.sor.org/learning-advice/professional-body-guidance-and-publications/documents-and-publications/policy-guidance-document-library/principles-of-safe-staffing-for-radiography-le-\(1\)](https://www.sor.org/learning-advice/professional-body-guidance-and-publications/documents-and-publications/policy-guidance-document-library/principles-of-safe-staffing-for-radiography-le-(1))

[This document aims to provide principles which should be considered when reviewing staffing models for clinical imaging or radiotherapy/oncology services. This replaces the first published document of May 2015.]

Original Research

[Healthcare leaders navigating complexity: a scoping review of key trends in future roles and competencies.](#) [\[Abstract\]](#)

Spanos S. *BMC Medical Education* 2024;24(1):720.

[Check for full-text availability](#)

[As healthcare systems rapidly become more complex, healthcare leaders are navigating expanding role scopes and increasingly varied tasks to ensure the provision of high-quality patient care. Despite a range of leadership theories, models, and training curricula to guide leadership development, the roles and competencies required by leaders in the context of emerging healthcare challenges have not been sufficiently well conceptualized.]

Report

[CIPD Good Work Index 2024.](#)

Chartered Institute of Personnel and Development (CIPD); 2024.

<https://www.cipd.org/en/knowledge/reports/goodwork/>

[An annual benchmark of job quality in the UK, giving evidence-based insight on how to improve work and working lives. In the latest research, workplace conflict emerged as the central focus of analysis.]

[NHS Providers briefing on NHS pay.](#)

NHS Providers; 2024.

<https://nhsproviders.org/media/698902/pay-briefing-for-new-mps.pdf>

[This briefing outlines the importance of prioritising the announcement of the 2024/25 pay award for NHS staff and explains the pay review process in England, with an overview of: the NHS Pay Review Body (NHSPRB), covering most NHS staff; the Doctors' and Dentists' Remuneration Body (DDRb); and the Senior Salaries Review Body (SSRB), covering very senior public sector managers, including in the NHS.]

[Philips Future Health Index 2024: Better care for more people - bridging the gaps in healthcare.](#)

Philips; 2024.

<https://www.philips.com/a-w/about/news/future-health-index/reports/2024/better-care-for-more-people.html>

[In the largest global survey of its kind, the Future Health Index 2024 report analyzes the priorities and perspectives of healthcare leaders. This year's report focuses on gaps that stand in the way of achieving timely, high-quality care for everyone and examines ways of overcoming them.]

Toolkit

[Employee engagement and motivation.](#)

Chartered Institute of Personnel and Development (CIPD); 2024.

<https://www.cipd.org/en/knowledge/factsheets/engagement-factsheet/>

[This factsheet examines the nature of employee engagement and its benefits, assessing and measuring engagement, and ways to foster an engaged workforce.]

Education and Professional Practice

Guideline / Policy

[Guidance on conduct and ethics for students.](#)

Health and Care Professions Council (HCPC); 2024.

<https://www.hcpc-uk.org/resources/guidance/guidance-on-conduct-and-ethics-for-students/>

[This document gives students on approved programmes information about HCPC's standards of conduct,

performance and ethics]

Guidance on the use of social media.

Health and Care Professions Council (HCPC); 2024.

<https://www.hcpc-uk.org/standards/meeting-our-standards/communication-and-using-social-media/guidance-on-use-of-social-media/>

[This page sets out HCPC's standards in relation to the use of social media, tips for using social networks effectively and answers to frequently asked questions.]

Position Statement: College of Radiographers Update on Advanced and Consultant Practitioner Accreditation and Planned Resources.

The Society of Radiographers; 2024.

<https://www.sor.org/learning-advice/professional-body-guidance-and-publications/documents-and-publications/policy-guidance-document-library/position-statement-college-of-radiographers-update>

[Following a period of review of current accreditation schemes, the College of Radiographers is making changes to advanced and consultant practitioner accreditation and will be embarking on the development of a new model to support advanced and consultant level practice.]

Systematic Review / Meta-Analysis

A systematic review of whether Health Impact Assessment frameworks support best practice principles.

R McDermott. *Public Health* 2024;233:137-144.

[There is marked variation in the degree to which HIA frameworks support the best practice principles. HIA practitioners could select elements from different frameworks for practical guidance to meet all the best practice principles.]

Do educational interventions reduce the gender gap in communication skills? A systematic review.

[Abstract]

Driscoll AM. *BMC Medical Education* 2024;24(1):827.

[Check for full-text availability](#)

[Efficient doctor-patient communication is essential for improving patient care. The impact of educational interventions on the communication skills of male and female students has not been systematically reviewed. The aim of this review is to identify interventions used to improve communication skills in medical curricula and investigate their effectiveness in improving the communication skills of male and female medical students.]

Effects of Immersive Technology-Based Education for Undergraduate Nursing Students: Systematic Review and Meta-Analysis Using the Grading of Recommendations, Assessment, Development, and Evaluation (GRADE) Approach.

Park S. *Journal of Medical Internet Research* 2024;26:e57566.

[Check for full-text availability](#)

[These findings support the effectiveness of immersive technology-based education for undergraduate nursing students, despite heterogeneity in methods and interventions. We suggest that long-term cohort studies be conducted to evaluate the effects of immersive technology-based nursing education on NWKM level 4.]

Immersive simulation in nursing and midwifery education: a systematic review.

Ben Yahya L. *Journal of Educational Evaluation for Health Professions* 2024;21:10.3352/jeehp.2024.21.19.

[Immersive simulation, as demonstrated by this study, has a significant potential to enhance student engagement, motivation, and academic performance, surpassing traditional teaching methods. This potential underscores the urgent need for future research in various contexts to better integrate this innovative educational approach into nursing and midwifery education curricula, inspiring hope for improved teaching methods.]

Influence of simulation fidelity on student learning in a prehospital setting.

Graham S. *Journal of Paramedic Practice* 2024;16(7):296–302.

[Although evidence is sparse, simulation offers benefits to paramedic students and paramedics. It is particularly useful regarding rarely occurring events, especially those with significant consequences. While a high-fidelity prehospital scenario can be difficult to achieve, simulation can be educationally effective.]

Psychometric properties of instruments used to measure the informatics competence of nurses: a systematic review.

Li Y. *Nurse Education in Practice* 2024;79:104070.

[This systematic review aimed to assess the psychometric properties of existing nursing informatics scales of competence and provide an evidence-based basis for selecting the most appropriate assessment instruments for specific populations. Informatics competency is one of the fundamental competencies that nurses should have.]

Using an informatics competency assessment instrument is an effective way to identify competency gaps and develop a professional development plan to address them.]

Quality and impact of pharmacology digital simulation education on pre-registration healthcare students: A systematic literature review.

Sharad Rayamajhi. *Nurse Education Today* 2024;140:-.

[This systematic literature review provides evidence of the potential of digital simulation-based education in pharmacology teaching among healthcare pre-registration students. In future studies, the integration of polypharmacy content with an intra and interprofessional teaching-learning approach is recommended.]

The effect of simulation-based learning on nursing students' clinical decision-making skills: Systematic review and meta-analysis.

Selçuk Görücü. *Nurse Education Today* 2024;140:106270.

[The analysis revealed that simulation-based educational practices appeared to improve undergraduate nursing students' clinical decision-making skills.]

Report

Innovation and integrity: AI in paramedic education.

Frankland J. *Journal of Paramedic Practice* 2024;16(8):315-317.

[The increasing sophistication and accessibility of artificial intelligence (AI) technologies pose significant challenges to the authenticity and integrity of certain assessments in paramedic curricula.]

Alignment of intrinsic and extrinsic motivators are required to encourage nurse educators to remain in academia. [Abstract]

Allison R. *Evidence-Based Nursing* 2024;27(3):115.

[Check for full-text availability](#)

[Nurse educators are influenced mostly by their intrinsic motivators, but also when aligned with extrinsic motivators, to remain in their academic roles. Increased understanding and consideration of these motivators can improve recruitment and retention of nurse educators.]

Teaching to address overdiagnosis. [Abstract]

Edmiston N. *BMJ Evidence-Based Medicine* 2024;29(4):275-278.

[Check for full-text availability](#)

[While it is evident that overdiagnosis is a reality, the imperative in medical education is to graduate doctors who are able to contribute to reducing overdiagnosis, not necessarily doctors who are able to define overdiagnosis, its drivers and harms. Learning that a diagnosis should not just be correct but should have utility, and that making a diagnosis is part of clinical decision-making, may be more important than understanding overdiagnosis terminology.]

Care and health career academies: what good looks like.

Local Government Association (LGA); 2024.

<https://www.local.gov.uk/publications/care-and-health-career-academies-what-good-looks>

[Care and health career academies are relatively new initiatives, and the national picture is constantly evolving. This project was undertaken to develop a better understanding of care and health career academies in England. It aims to share emerging learning on the development of academies and insights as to what good looks like.]

The state of medical education and practice in the UK: workplace experiences 2024.

General Medical Council (GMC); 2024.

https://www.gmc-uk.org/-/media/documents/somep-workplace-report-2024-full-report_pdf-107930713.pdf

[This report includes data and insights to highlight where action needs to be taken to address workplace pressures and help retain doctors across all four countries of the UK. The report finds that doctors are increasingly taking steps themselves to address workload and capacity pressures, with higher proportions of doctors reducing their hours and declining to take on additional work.]

Finance and Procurement

Evidence-Based Summary

Why the spaces in which we deliver care matter: implications and recommendations for general practice.

[\[Abstract\]](#)

Kent L. *British Journal of General Practice* 2024;74(744):326-328.

[Check for full-text availability](#)

[Estates issues are high on the agenda of NHS England and PCNs, making it an ideal time to consider the wider impacts of healthcare spaces on key outcomes. It is vital that the design of primary care estates moves from a 'making do' approach to one that is driven by supportive design theory with the potential to improve the wellbeing and healthcare needs of patients, and the ability of staff to deliver excellent care]

Report

[**Capital spending in public services: fixing how the government invests in the NHS, schools and prisons.**](#)

Institute for Government; 2024.

<https://www.instituteforgovernment.org.uk/sites/default/files/2024-06/capital-spending-public-services.pdf>

[This report, published with Grant Thornton UK LLP, reveals the impact of the UK's historically low – and badly spent – capital budgets on the Department of Health and Social Care, Department for Education and Ministry of Justice.]

[**Public health funding.**](#)

Association of Directors of Public Health (ADPH); 2024.

<https://www.adph.org.uk/wp-content/uploads/2024/08/ADPH-Public-Health-Funding-Briefing-Final-1-1.pdf>

[This briefing presents an overview of the public health funding landscape across the UK, including recommendations for how public health funding can be reformed to ensure people can live healthier, happier and more productive lives.]

Service Design and Commissioning

Evidence-Based Summary

[**Community health services explained.**](#)

The King's Fund; 2024.

<https://www.kingsfund.org.uk/insight-and-analysis/long-reads/community-health-services-explained>

[Compared with other parts of the NHS, community health services are often poorly understood by policy-makers, national and local health service leaders, and staff working in other parts of the system, and have not always received the same national profile as the rest of the NHS. The way these services are structured and delivered is complicated, and as a result, data about them is hard to aggregate. In this explainer we outline what we know about community health services in England.]

[**10 facts about the NHS workforce**](#)

NHS Providers; 2024.

<https://nhsproviders.org/resources/briefings/10-facts-about-the-nhs-workforce>

[Although the size of its workforce is rising, the level of growth is not sufficient to meet the increasing demand for healthcare and complexity or level of patient need. Increases in staff numbers are not consistent across roles, and the service faces high numbers of vacancies overall. This briefing presents 10 facts outlining the current state of the NHS workforce.]

Report

[**Enabling Integrated Care Systems to work better.**](#)

Institute for Government; 2024.

<https://www.instituteforgovernment.org.uk/publication/nhs-integrated-care-system>

[One of NHS England's roles is to take some of the management of the NHS out of the Department of Health and Social Care. Since 2022 it has done this with the help of ICSs. However, senior officials in these bodies are still complaining about various forms of micro-management. This short paper, based on interviews with those involved in ICSs, looks at how the new arrangements can be made to work better.]

[**District Nursing Today: The View of District Nurse Team Leaders in the UK.**](#)

The Queen's Nursing Institute (QNI); 2024.

<https://qni.org.uk/news-and-events/news/district-nursing-today-the-views-of-team-leaders-revealed-in-qni-report/>

[Over 1500 District Nurse team leaders from all countries of the UK contributed to this report, through an online survey undertaken in 2023. The survey makes extensive comparison with data gathered in 2019, illustrating trends in the workforce since the Covid-19 pandemic. The report focuses on the demographic profile of the workforce, working practices and technology, education and professional development, and capacity in nursing teams.]

Effective virtual wards for people with frailty

NIHR Applied Research Collaboration (ARC); 2024.

<https://arc-w.nihr.ac.uk/news/rapid-realist-review-reveals-how-to-achieve-effective-virtual-wards-for-people-with-frailty/>

[Proactive care, a whole-system approach and a 'team-of-teams' are important elements in achieving effective virtual wards for people with frailty, according to the first rapid realist review of the evidence. The findings of the National Institute of Health and Care Research (NIHR) funded review, published in Age and Ageing, also apply to multidisciplinary virtual wards for other complex conditions. Review included extensive consultation with stakeholders including patients, carers & clinicians.]

Elective Hubs.

NHS Providers; 2024.

<https://nhsproviders.org/provider-collaboratives-building-capacity-elective-hubs>

[This is the second instalment in our Provider collaboratives building capacity series, which highlights how provider collaboration is enabling delivery on major health system priorities. This report focuses on the role collaboration is playing in building capacity through the development of elective hubs. The first instalment, published in February, highlighted the role provider collaboration is playing in building diagnostic capacity through the development of community diagnostic centres.]

Expecting the unexpected: homecare providers' views of hospital discharge.

United Kingdom Homecare Association (UKHCA); 2024.

[This report looks at hospital discharge in the UK through the eyes of homecare providers and the people they support. The report reveals widespread problems with hospital discharge. Despite guidance, funding and a national taskforce, many integrated care systems (ICSs) are not getting the basics right. This puts the safety and wellbeing of people leaving hospital at risk.]

Forgotten Generation: Shaping Better Services for Children and Young People.

NHS Providers; 2024.

<https://nhsproviders.org/forgotten-generation-shaping-better-services-for-children-and-young-people>

[Increasing demand for children and young people's services, and increasing acuity of patients, have been growing concerns among trust leaders in recent years. We hope to highlight the importance for all trusts of prioritising improving outcomes for children and young people. Our findings demonstrate that where one part of the system fails to meet children and young people's needs, there will be a knock-on impact elsewhere on service demand.]

Health at the heart of government: rebuilding the nation's health through mission-driven government.

The Health Foundation; 2024.

https://www.health.org.uk/sites/default/files/upload/publications/2024/202407_Health%20at%20the%20heart%20of%20government.pdf

[This briefing sets out practical and achievable solutions for rebuilding the health of the UK through mission-driven government. It is informed by an in-depth analysis on how government should operate and by insights and expertise from an expert panel.]

People not structures: putting people at the heart of integrated care.

Local Government and Social Care Ombudsman & Parliamentary and Health Service Ombudsman; 2024.

<https://www.lgo.org.uk/information-centre/news/2024/jul/councils-and-nhs-need-to-work-more-closely-to-improve-local-care>

[This report finds that integrated care systems (ICSs) are not doing enough to put the vulnerable people they support at the heart of what they do. The report details some of the things that can and do go wrong when people are not prioritised and local organisations do not work together effectively.]

Realising the potential of integrated care systems.

The King's Fund; 2024.

<https://www.kingsfund.org.uk/insight-and-analysis/reports/integrated-care-systems-workforce>

[This research examines the development of ICSs by assessing their efforts to develop system-wide approaches to the recruitment, training and retention of staff. The findings are based on 24 in-depth interviews with local leaders in four case study sites plus a series of online workshops.]

System working in the NHS: how trusts work in partnership to improve care and outcomes for people.

NHS Providers; 2024.

<https://nhsproviders.org/media/698899/systems-explainer-briefing-july-2024.pdf>

[This resource looks at the role of system working in the NHS and how trusts can work in partnerships to improve outcomes.]

[Realising the potential of primary care provider collaboratives.](#)

NHS Confederation; 2024.

<https://www.nhsconfed.org/publications/realising-potential-primary-care-provider-collaboratives>

[Assessing the development of primary care provider collaboratives and what they need to thrive.]

[The reality of, and potential for, digitally enabled care in the community.](#)

The King's Fund; 2024.

<https://www.kingsfund.org.uk/insight-and-analysis/long-reads/reality-potential-digitally-enabled-care-community>

[Digital technology could help to deliver the long-held but unrealised ambition of moving care closer to home. This ambition would not just reduce the need for people to access already over-stretched hospital-based care, but would also provide more effective, higher-quality care in the community. This report shares the findings of our research into the current reality of digital technology use in community services, and what the future could – and should – hold.]

[The state of primary care: a PCN evaluation.](#)

Pulse; 2024.

<https://www.pulsetoday.co.uk/pulse-pcn/the-state-of-primary-care-a-pcn-evaluation/>

[Primary care networks (PCNs) have been the biggest change in the primary care landscape in a decade. The development of these networks has been controversial and has affected all areas of primary care. As part of Pulse's State of Primary Care survey (which was answered by more than 1,700 health care professionals), GPs, nurses, pharmacists and managers were asked about the impact of PCNs on their profession.]

Toolkit

[Transfers of care toolkit.](#)

Professional Record Standards Body; 2024.

<https://theprsb.org/toolkits/transfersofcare/about-this-toolkit/>

[High volumes of patients are transferred every day between health and care settings. This toolkit concentrates on the PRSB eDischarge Summary Standard, which specifies the data to be shared between secondary and primary care to support the discharge of a patient from hospitals across the UK. It does not propose a one-size-fits-all approach, and recognises that health and care services are organised in different ways across the UK

Quality Improvement and Innovation

Guideline / Policy

[Care Quality Commission assessments for adult social care: Must know guide for chief executives](#)

Local Government Association (LGA); 2024.

<https://www.local.gov.uk/publications/care-quality-commission-assessments-adult-social-care-must-know-guide-chief-executives>

[Adult social care in all councils in England will be assessed by the Care Quality Commission (CQC) before the end of 2025.]

Systematic Review / Meta-Analysis

Between-hospital variation in indicators of quality of care: a systematic review. [\[Abstract\]](#)

van der Linde M. *BMJ Quality & Safety* 2024;33(7):443-455.

[Check for full-text availability](#)

[Hospital-level variation in quality indicator scores is generally small relative to residual variation. However, meaningful variation between hospitals does exist for multiple indicators, especially for care processes which can be directly influenced by hospital policy. Quality improvement strategies are likely to generate more impact if preceded by level-specific and indicator-specific analyses of variation, and when absolute variation is also considered.]

[Healthcare workers' informal uses of mobile phones and other mobile devices to support their work: a qualitative evidence synthesis.](#) [\[Abstract\]](#)

Glenton C. *Cochrane Database of Systematic Reviews* 2024;8:CD015705.

[Check for full-text availability](#)

[Healthcare workers sometimes develop their own informal solutions to deliver services. One such solution is to use their personal mobile phones or other mobile devices in ways that are unregulated by their workplace. This can help them carry out their work when their workplace lacks functional formal communication and information

systems, but it can also lead to new challenges.]

[Landscape and challenges in economic evaluations of artificial intelligence in healthcare: a systematic review of methodology.](#)

Kastrup N. *BMC Digital Health* 2024;2:39.

[This systematic review seeks to map the evidence on the general methodological quality of health economic evaluations (HEEs) for AI technologies to identify potential areas which can be subject to quality improvements. There was a concerning low number of full HEEs relative to the number of AI publications, however the trend is that the number of studies per year is increasing.]

Leadership for AI Transformation in Health Care Organization: Scoping Review. [\[Abstract\]](#)

Sriharan A. *Journal of Medical Internet Research* 2024;26:e54556.

[Check for full-text availability](#)

[Our literature mapping reveals that successful AI integration within healthcare organizations requires leadership engagement across technological, strategic, operational, and organizational domains. Leaders must demonstrate a blend of technical expertise, adaptive strategies, and strong interpersonal skills to navigate the dynamic healthcare landscape shaped by complex regulatory, technological, and organizational factors.]

Mapping Digital Public Health Interventions Among Existing Digital Technologies and Internet-Based Interventions to Maintain and Improve Population Health in Practice: Scoping Review. [\[Abstract\]](#)

Maaß L. *Journal of Medical Internet Research* 2024;26:e53927.

[Check for full-text availability](#)

[Although this scoping review was able to map characteristics and technical functions among 13 intervention types in DiPH, emerging technologies such as artificial intelligence might have been underrepresented in our study. This review underscores the diversity of DiPH interventions among and within intervention groups. Moreover, it highlights the importance of precise terminology for effective planning and evaluation.]

[The ethics of ChatGPT in medicine and healthcare: a systematic review on Large Language Models \(LLMs\).](#)

Haltaufderheide J. *npj Digital Medicine* 2024;7:183.

[Four general fields of applications emerged showcasing a dynamic exploration phase. Advantages of using LLMs are attributed to their capacity in data analysis, information provisioning, support in decision-making or mitigating information loss and enhancing information accessibility. However, our study also identifies recurrent ethical concerns connected to fairness, bias, non-maleficence, transparency, and privacy.]

[The METRIC-framework for assessing data quality for trustworthy AI in medicine: a systematic review.](#)

Schwabe D. *npj Digital Medicine* 2024;7:203.

[Authors propose the METRIC-framework, a specialised data quality framework for medical training data comprising 15 awareness dimensions, along which developers of medical ML applications should investigate the content of a dataset.]

The Use of Deep Learning and Machine Learning on Longitudinal Electronic Health Records for the Early Detection and Prevention of Diseases: Scoping Review. [\[Abstract\]](#)

Swinckels L. *Journal of Medical Internet Research* 2024;26:e48320.

[Check for full-text availability](#)

[Longitudinal EHRs proved to be helpful for support in health care. Current ML models on EHRs can support the detection of diseases in terms of accuracy and offer preliminary screening benefits. Regarding the prevention of diseases, ML and specifically DL models can accurately predict or detect diseases earlier than current clinical diagnoses. Adding personally responsible factors allows targeted prevention interventions.]

Evidence-Based Summary

[Artificial intelligent tools: evidence-mapping on the perceived positive effects on patient-care and confidentiality.](#)

Botha NN. *BMC Digital Health* 2024;2:33.

[This review aimed to establish the extent and type of evidence of the positive effects of the use of AI tools in patient care. The review mapped evidence by using articles published between January 1, 2010, and October 31, 2023.]

Report

Framework for routine outcome measurement in liaison psychiatry (FROM-LP II)

Royal College of Psychiatrists (RCPsych); 2024.

https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr241---from-lp-ii.pdf?sfvrsn=9dd3612d_3

[There is a growing need to accurately capture how mental health care positively impacts people's lives, both to help improve services and to promote the value of well-funded mental health care. The FROM-LP (II) report is intended to help liaison psychiatry services across the NHS effectively provide the best care possible with the aim of securing better outcomes for patients.]

Frontline digitisation: creating the conditions for a digital NHS.

NHS Confederation; 2024.

<https://www.nhsconfed.org/publications/frontline-digitisation>

[What ICSs need to be able to move from paper-based to digital systems for patient information, clinical notes and access to data.]

Preparing the NHS for the AI era: a digital health record for every citizen.

Tony Blair Institute for Global Change; 2024.

<https://assets.ctfassets.net/751a1c9taeh/39zGVfbDtqIbfYGpm7b0b5/2ba391d9fa40b1c2b929f7d3bec81776/4gsYbwlvvZVFVHnOahWlcV--150416082024>

[This report proposes a digital health record (DHR) to drive improvements to health and care, and ensure that the NHS is ready for the AI era. Each person's DHR would be the 'single source of truth' for their health and care data – data that currently sits in silos across hospitals, GP practices, pharmacies and phones. It would be the fundamental building block of all modern health systems and open up a whole new way of generating health and delivering health care in the future.]

The connected health revolution.

Capgemini Research Institute; 2024.

<https://www.capgemini.com/insights/research-library/connected-health-research/>

[Based on a survey of 420 industry executives from biotechnology, pharmaceutical, and MedTech organisations, this study provides insight into the adoption and maturity of connected health initiatives. The report highlights the growing importance of connected health, fuelled by the increasing adoption of digital health solutions such as telemedicine platforms, clinical decision-support systems, and wearable technologies.]

The reality of, and potential for, digitally enabled care in the community.

The King's Fund; 2024.

<https://www.kingsfund.org.uk/insight-and-analysis/long-reads/reality-potential-digitally-enabled-care-community>

[Digital technology could help to deliver the long-held but unrealised ambition of moving care closer to home. This ambition would not just reduce the need for people to access already over-stretched hospital-based care, but would also provide more effective, higher-quality care in the community. This report shares the findings of our research into the current reality of digital technology use in community services, and what the future could – and should – hold.]

Climate Change and Sustainability

Guideline / Policy

Local net zero: support for local authorities and communities.

Department for Energy Security and Net Zero (DESNZ); 2024.

<https://www.gov.uk/government/publications/local-net-zero-support-for-local-authorities-and-communities>

[Local authorities and community groups play an essential role in driving local action to tackle climate change. Central government provides a range of support for local areas to decarbonise.]

Systematic Review / Meta-Analysis

Governance related factors influencing the implementation of sustainability in hospitals: A systematic literature review.

van Schie. *Health Policy* 2024;:Pre print.

[Climate change is a pressing issue that has a negative impact on the planet but also on public health. The healthcare sector contributes to environmental pollution, while it aims to improve health. Therefore, its environmental sustainability should be improved. This study focuses on the governance of sustainability in

hospitals, since hospitals are the largest operational units in the healthcare system and can therefore make a large impact.]

Original Research

[A health financing policy agenda for climate mitigation and adaptation.](#)

World Health Organization (WHO); 2024.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC11046162/pdf/BLT.23.291253.pdf>

[The international community increasingly acknowledges the contribution of health systems to climate change and environmental degradation. This contribution is mainly due to energy-intensive production and transportation of supplies such as drugs, commodities and equipment, as well as energy consumption within health facilities and waste treatment. This paper looks at the health finance side of this issue.]

Report

[Making sustainable healthcare decisions: three turns towards sustainable guidelines.](#) [Abstract]

Wiering S. *BMJ Evidence-Based Medicine* 2024;29(4):219-222.

[Check for full-text availability](#)

[The new challenges of sustainable guidelines show once again that guideline development cannot be a cookbook or tick-box exercise. Transforming guideline development takes time but there is so little when it comes to climate change. Fundamental values need a swift rebalance as environmental and equity considerations reform what until now have been considered effective and acceptable health and care recommendations.]

[Health-related climate adaptation: How to innovate and scale global action for local needs.](#)

McKinsey Health Institute; 2024.

<https://www.mckinsey.com/mhi/our-insights/health-related-climate-adaptation-how-to-innovate-and-scale-global-action-for-local-needs>

[Managing the threats posed by climate change to human health requires a rapid upscaling of adaptation interventions. This article highlights three areas of opportunity for innovation and the scaling of solutions that specifically target climate-related health challenges, including development of medical products and technologies that seek to reduce the burden of climate change on health.]

[Plastic smart hospitals: a review of plastic usage within the hospital sector: exploring methods to reduce, reuse and recycle plastic.](#)

Mepex; 2024.

https://handelensmilijofond.ams3.digitaloceanspaces.com/reports/Plastsmart-Sykehus-Tiltakspakke-nasjonal-okt-23_ENG_v3_low-res.pdf

[Single-use plastic serves to save time, streamline infection control, and maintain sterility standards. However, the widespread reliance on plastic significantly impacts our health, the natural environment, and the climate. There is an urgent need to reassess our dependence on plastic and its extensive use, also within the healthcare sector.]

Public Health

Guideline / Policy

[Creating Health and Wellbeing: A partnership approach to evidence-led planning and design in our cities, towns and villages. A guide for local authorities.](#)

Quality of Life Foundation; 2024.

<https://www.qolf.org/wp-content/uploads/Evidence-led-planning-and-design-spreads-compressed.pdf>

[Evidence-led planning and design can shape a better built environment that provides health-creating conditions. This guide, created in partnership with Prior + Partners summarises the different planning and design tools available to local authorities in England and how evidence can be used to link these to the local context and challenges. It also includes case studies, shining a light on ambitious local authorities that are leading health creation.]

Systematic Review / Meta-Analysis

[Why Do Only Some Cohort Studies Find Health Benefits From Low-Volume Alcohol Use? A Systematic Review and Meta-Analysis of Study Characteristics That May Bias Mortality Risk Estimates.](#)

Stockwell T. *Journal of Studies on Alcohol and Drugs* 2024;85(4):441–452.

[Assumptions about alcohol's health benefits profoundly influence global disease burden estimates and drinking guidelines. Using theory and evidence, we identify and test study characteristics that may bias estimates of all-

cause mortality risk associated with low-volume drinking. Conclusions: Studies with lifetime selection biases may create misleading positive health associations. These biases pervade the field of alcohol epidemiology and can confuse communications about health risks.]

Evidence-Based Summary

Action on salt and hypertension: reducing cardiovascular disease burden in the WHO European Region.

World Health Organization (WHO); 2024.

<https://www.who.int/europe/publications/i/item/9789289060813>

[Evidence-based interventions for salt reduction strategies and hypertension control are proposed, along with a discussion of barriers to their implementation and potential solutions, concluding with policy considerations. The document is rooted in real-world examples and available evidence, draws on lived experience and signposts to relevant WHO resources.]

The real face of men's health.

Movember; 2024.

<https://cdn.movember.com/uploads/files/Media%20Room/UK/The%20Real%20Face%20of%20Mens%20Health%20Report%20-%20Movember%20UK.pdf>

[This report features examples, from the UK and abroad, on what is effective across four elements of health systems to successfully engage with men: health promotion programmes; a responsive health system, including health services, screenings, checks and facilities; a health workforce with the competencies to respond to men; and research that works to build, evaluate and translate its findings into practice to reach and benefit all men. Includes an interactive data map on premature mortality.]

Report

Building new health system action to reduce obesity: Audit findings of Integrated Care Board Forward Plans.

Future Health; 2024.

<https://www.futurehealth-research.com/new-research-finds-that-obesity-is-not-a-priority-for-over-85-of-nhs-systems/>

[This report, sponsored by Johnson and Johnson, reveals that obesity is not a priority for 37 of the 42 NHS integrated care boards across England. Only five included obesity or the importance of the population maintaining a healthy weight as part of their top priorities. This is despite obesity rates tripling since 1975, and with two-thirds of the population now overweight or obese.]

Healthy industry, prosperous economy.

Institute for Public Policy Research (IPPR); 2024.

https://ippr-org.files.svdcn.com/production/Downloads/Health_and_business_July24_2024-07-30-150125_xyeb.pdf

[This paper finds that rising workplace sickness is costing UK businesses billions every year. Arguing that it is necessary to harness the role of industry in supporting people's health, the report proposes a new 'Health in All Industries' approach that would bring together public health and industrial policy. It explores what products and practices organisations should move away from as part of a plan for health, growth and prosperity, both in the workplace and in the wider economy.]

Making sense of health inequalities.

NHS Providers; 2024.

<https://nhsproviders.org/media/698891/making-sense-of-health-inequalities.pdf>

[This resource, produced as part of NHS Providers' Health Inequalities programme, looks at the current state of the nation in relation to health inequalities and the role that NHS trusts have to play in addressing them.]

Men's health: The lives of men in our communities.

Local Government Association (LGA); 2024.

<https://www.local.gov.uk/publications/mens-health-lives-men-our-communities>

[Men in deprived areas in England live nearly 10 years fewer than those in the least deprived. It is clear working in partnership is the key to addressing men's health – and councils are ideally placed to lead and foster that.]

Module 1: the resilience and preparedness of the United Kingdom.

UK Covid-19 Inquiry; 2024.

<https://covid19.public-inquiry.uk/wp-content/uploads/2024/07/18095012/UK-Covid-19-Inquiry-Module-1-Full-Report.pdf>

[The UK Covid-19 Inquiry has published its first in a series of reports and recommendations following the

conclusion of its first investigation. The Inquiry's investigations are organised into modules, and module 1 examines the state of the UK's central structures and procedures for pandemic emergency preparedness, resilience and response.]

[Suicide by people in contact with drug and alcohol services: a national study 2021 to 2022.](#)

University of Manchester; 2024.

<https://sites.manchester.ac.uk/ncish/reports/suicide-by-people-in-contact-with-drug-and-alcohol-services/>

[This study aimed to examine factors associated with suicide by people under the care of drug and alcohol services. This was achieved by linking existing databases and collecting supplementary incident report data.]

[Testing the waters: reducing health risks from water pollution.](#)

National Engineering Policy Centre; 2024.

<https://raeng.org.uk/news/new-report-urges-upgrades-in-wastewater-infrastructure-to-protect-public-health>

[Led by the Royal Academy of Engineering, the report's findings are based on risk-based assessments and consultations with more than 100 engineers, wastewater experts, the water industry, campaign organisations and policymakers. This is the first time a comprehensive report has been undertaken to assess actions to mitigate public health risks associated with the use of public waters, contaminated by faecal matter from human waste.]

[Unleashing health and prosperity throughout Britain.](#)

NHS Confederation; 2024.

<https://www.nhsconfed.org/publications/unleashing-health-and-prosperity-throughout-britain>

[Supporting health systems to unlock social and economic development.]



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