# KnowledgeShare

*NHS information support for evidence-based practice*

# Alert 129

*Selected resources published in November/ December 2024*

## Content

## Patient Safety 2024: A Call for National Priorities

Imperial College London's Institute of Global Health Innovation have published a report examining the state of patient safety in England's NHS in 2024. Following up on the findings of its first report in 2022, this analysis draws upon publicly available data to construct a summary of current progress and consider how patient safety can be improved.

Reviewing data on hospital mortality, waiting times, maternal and neonatal outcomes, hospital onset infection and staff and patient perceptions of safety, the authors found that out of the twenty-two metrics originally assessed, there has been a further decline in twelve of these in the period leading up to 2024.

The report summarises the considerable human, societal and economic costs, and highlights the widening performance gap in contrast to other OECD countries and their average rates of death from treatable causes.

The authors observe that many NHS organisations are individually prioritising common patient safety problems, while at a national level there are a lengthy list of priorities that the system is failing to keep pace with.

With a view to providing a more focused approach, the authors set out two recommendations:

**Local NHS organisations must be supported to adopt evidence-based interventions to tackle the most common safety problems causing significant harm to patients**. Analysis of individual Trust patient safety plans identified six common problems that many organisations are tackling, such as pressure ulcers and falls. The authors propose a national repository of evidence-based interventions and the provision of support to implement these nationwide.

**National organisations must agree on a focused set of patient safety improvement priorities**. The report notes a multitude of patient safety bodies, opaque national priority setting, and evidence that local systems are struggling to action the current volume of recommendations they receive. The authors suggest that national bodies rationalise their activities to ensure the NHS is supported to deliver improvements against them, and that patients and healthcare workers are included as partners in the development of these priorities.

**Read: National State of Patient Safety 2024: Prioritising improvement efforts in a system under stress**

## *Patient Experience and Safety*

## Report

**National state of patient safety 2024: prioritising improvement efforts in a system under stress.**
Imperial College; 2024.
https://www.imperial.ac.uk/Stories/National-State-Patient-Safety-2024/
[This report finds that patient safety in England has deteriorated in a majority of categories over the past two years. Analysis of publicly available data for the report shows worsening performance on several key patient safety indicators, particularly in maternity services. It also highlights a stark divide between the North and South of England: harmful, unintended effects of medical treatment are twice as high in the North East than in Greater London.]

**Knowledge is power: a survey of 2,000 UK adults using the Ipsos KnowledgePanel.**
Patient Information Forum (PIF); 2024.
https://pifonline.org.uk/download/file/N29PUW5PMzh0Rzh2ZEJTcjdzcDFIQT09/knowledge-is-power-report/
[This report contains research into health information access across the UK. It aims to offer insights on information access, trusted sources, communication with health care professionals, and the impact of misinformation. It is based on a cross-sectional, nationally representative survey of 2,003 adults in the UK from May to June 2024 using the Ipsos KnowledgePanel. It reveals the demand for the NHS to signpost trusted information, and wide support for the verification of health information.]

**Medication not given: administration of time critical medication in the emergency department.**
Health Services Safety Investigations Body (HSSIB); 2024.
https://www.hssib.org.uk/patient-safety-investigations/medication-related-harm/investigation-report/
[This report is intended for NHS organisations, patient safety leads, healthcare staff, and patients and their families and carers, to help improve patient safety in relation to time critical medications being provided in emergency department (ED) settings. For readers less familiar with this area of healthcare, medical terms are explained in section 1.]

**Sexual safety: the implications for patient safety.**
Health Services Safety Investigations Body (HSSIB); 2024.
https://www.hssib.org.uk/patient-safety-investigations/sexual-safety-the-implications-for-patient-safety/report/
[Health and care organisations can improve patient safety by capturing the impacts, events and circumstances where sexual safety incidents have affected the provision of safe care. This would help organisations to understand and assess the risks posed to patient safety.]

## Toolkit

**Always Events Toolkit.**
Institute for Healthcare Improvement (IHI); 2024.
https://www.ihi.org/resources/tools/always-events-toolkit
[Always Events are aspects of the patient experience that are so important to patients, their care partners, and service users that health care providers must aim to perform them consistently for every individual, every time. The toolkit supports providers in partnering with patients and family members to co-design, reliably implement, and sustain and spread Always Events to dramatically improve the care experience.]

## *Managing and Leading People*

## Guideline / Policy

**Supporting mental health at work: Practical guidance.**
Chartered Institute of Personnel and Development (CIPD); 2024.
https://www.cipd.org/en/knowledge/guides/mental-health-support-guide/
[This guide sets out the practical steps that employers can take to create a mentally healthy workplace through ill health prevention, early intervention, encouraging people to talk about mental health and providing support. It contains information, practical advice and conversation checklists to better support people experiencing stress and challenges with their mental health.]

**Guidance for and to support neurodivergent SLTs in their careers.**
Royal College of Speech and Language Therapists (RCSLT); 2024.
https://www.rcslt.org/news/new-guidance-to-support-neurodivergent-slts/
[Written by neurodivergent speech and language therapists, the guidance focuses on how all SLTs can be allies and support neurodivergent SLTs in the workforce, with the aim of promoting inclusion and belonging, improving workforce retention and recognising the strengths and lived experience of the neurodivergent workforce.]

**Speaking up (whistleblowing) policy.**
Health and Care Professions Council (HCPC); 2024.
https://www.hcpc-uk.org/resources/policy/whistleblowing-policy/
[The HCPC is committed to being open and accountable and maintaining high ethical standards in everything we do. We want all employees and everyone who works with the HCPC to feel able to speak up when they have any concerns and know that they will be listened to. Speaking up at work will help the HCPC to keep improving how we protect the public, support our registrants and provide a positive working environment for our employees.]

# Report

**Counting the cost: Understanding your ethnicity pay gap.**
NHS Providers; 2024.
https://nhsproviders.org/counting-the-cost-understanding-your-ethnicity-pay-gap
[This guide gives practical guidance, case studies highlighting action taken by others, and provides a list of questions for board members to consider when examining their own data and interventions.]

**From the frontline: empowering staff to drive the NHS reform agenda.**
Institute for Public Policy Research; 2024.
https://www.ippr.org/articles/from-the-frontline
[This report puts forward a new approach to 'reform' for the NHS – one that is based on ideas of democracy and decentralisation as the way to achieve better decision-making throughout the NHS. It argues that the twin crises in the NHS – low productivity and poor staff retention – are interlinked and reinforce one another. Staff churn and discontent leads to high costs and holds back care, while widespread workplace inefficiencies drive staff dissatisfaction.]

**Implementing a long-term plan for health: what can we learn from international examples?**
The King's Fund; 2024.
https://www.kingsfund.org.uk/insight-and-analysis/long-reads/10-year-health-plan-learnings-international-examples
[The government is developing a 10-year plan for health in England, which will be designed in partnership with the public and health care professionals. To support those involved in this work (and supplement the Department of Health and Social Care's own work to review previous NHS plans), The King's Fund has looked to some other countries for inspiration. We wanted to understand how other governments have effectively implemented new health plans and what we can learn from them.]

**The NMC register UK mid-year update: 1 April – 30 September 2024.**
Nursing and Midwifery Council (NMC); 2024.
https://www.nmc.org.uk/globalassets/sitedocuments/data-reports/2024/september/the-nmc-register-uk-mid-year-update.pdf
[This mid-year report on the register of all nursing and midwifery professionals who can practise in the UK has reached a record 841,367. However, a pillar of recent growth – international recruitment – has slowed in pace. For the first time, there are more than 200,000 internationally educated professionals on the register – 23.8% of the total available UK nursing and midwifery workforce.]

**The state of medical education and practice in the UK: workforce report 2024**
General Medical Council (GMC); 2024.
https://www.gmc-uk.org/-/media/documents/somep-workforce-report-2024-full-report_pdf-109169408.pdf
[This report highlights the changing nature of the country's medical workforce. It finds that, UK-wide, the overall headcount of doctors rose in the past year at the fastest rate since the report began over a decade ago. But one group has been growing much faster than others – locally employed (LE) doctors. The report argues that the roles are often poorly defined, with limited opportunities for career progression and training, and many LE doctors employed in short-term or non-permanent posts.]

## *Education and Professional Practice*

## Systematic Review / Meta-Analysis

**Exploring alternative practice placement models in occupational therapy and physiotherapy: perspectives and experiences of learners and practice educators: a qualitative systematic review.** [Abstract]
Deaves A. *BMC Medical Education* 2024;24(1):1325.
Check for full-text availability
[Within physiotherapy and occupational therapy practice placements, there is a predominance of the one-to-one supervision model which creates limitations for placement capacity expansion. Alternative placement models must be explored to meet training requirements. The aim of this review is to explore the experiences and perceptions of practice educators and learners regarding alternative placement models, to inform future planning and the adoption of these opportunities.]

**Effectiveness of eLearning programme for capacity building of healthcare professionals: a systematic review**
Aryee GFB. *Human Resources for Health* 2024;22:60 .
[This review assessed the effectiveness of eLearning in healthcare professional development and its barriers and facilitators. Evidence from 44 studies highlighted that asynchronous, synchronous, blended, and self-learning methods are effective. Facilitators included user-friendly interfaces and relevant content, while barriers included poor computer skills, high workloads, inadequate ICT, and infrastructure issues, with disparities between economies noted.]

**ChatGPT integration within nursing education and its implications for nursing students: A systematic review and text network analysis.**
Joko Gunawan. *Nurse Education Today* 2024;141:106323.
[This study highlights the transformative potential of ChatGPT in nursing education, advocating for its responsible integration to empower nursing students with advanced skills and uphold ethical standards in artificial intelligence (AI) utilization. Four topics are crucial for guiding educators, researchers, and practitioners in nursing education to navigate the integration of AI tools effectively.]

**Game design elements of serious games in the education of medical and healthcare professions: a mixed-methods systematic review of underlying theories and teaching effectiveness.**
Aster A. *Advances in Health Sciences Education* 2024;29:1825–1848.
[Serious games enhance medical education by incorporating game design elements, yet their effectiveness depends on evidence-based selection. This systematic review analysed 91 studies from 1006 records, identifying points, storyline, and feedback as common elements. Few theories were cited, and no specific elements were evaluated. The GATE framework is proposed to guide theory-based selection of game elements, ensuring meaningful learning outcomes in medical education.]

**Outcomes of interprofessional education for pharmacy students: a systematic review.** [Abstract]
Ni J. *BMC Medical Education* 2024;24(1):1334.
Check for full-text availability
[Interprofessional education (IPE) refers to a teaching and learning method in which students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes. A systematic review was performed to investigate the current practice and the effectiveness of IPE in pharmacy education.]

**Simulation in podiatry teaching and learning: A scoping review.** [Abstract]
Anning N. *Journal of Foot and Ankle Research* 2024;17(4):e70020.
Check for full-text availability
[Overall, the findings suggest that simulation teaching in podiatry, whether through direct skill enhancement or through educational impact assessments, holds potential in improving competency, confidence, and educational outcomes in podiatry practice. This scoping review identified a small yet diverse evidence base for simulation modalities in podiatry education, demonstrating gaps in long-term effects and comparative effectiveness studies.]

**The use of long-arm (indirect) supervision for nursing, midwifery and allied health professionals in health and social care settings: A systematic literature review.**
Rebecca Dew. *Nurse Education Today* 2025;144:106410.
[This review highlights the variability in approaches to indirect supervision. Positive perceptions around using indirect supervision in health and social care settings has been widely reported, however further research is warranted to explore this across professions.]

**Effects of advanced practice nurses on health-care costs, quality of care, and patient well-being: A meta-analysis of randomized controlled trials.**
*International Journal of Nursing Studies* 2024;162:104953.
[Integrating advanced practice nurses into health-care settings contributes to reducing health-care cost, improving quality of care, and enhancing patient well-being. This meta-analysis provides evidence supporting advanced practice nurses, reinforcing their vital role in the health-care system and highlighting the need for initiatives and advocacy to enhance their scope of practice and promote advanced education.]

# Report

**Practice learning in nursing and midwifery education: an independent rapid review.**
Nursing and Midwifery Council (NMC); 2024. https://www.nmc.org.uk/globalassets/sitedocuments/education-standards/reviewing-nursing-and-midwifery- practice-learning/2024/nuffield-trust---fnf  nmc-practice-learning-review_web.pdf
[This review of practice learning requirements for nursing and midwifery students has revealed varied learning experiences and supervision, and calls for action to ensure high-quality education. The report, commissioned from Nuffield Trust, in partnership with the nursing and midwifery charity Florence Nightingale Foundation (FNF), sought to better understand what contributes to effective practice learning across the UK and in other countries.]

**The potential impacts of additional advanced practice regulation on internationally educated nurses and midwives in the UK: final report.**
Florence Nightingale Foundation; 2024.
https://florence-nightingale-foundation.org.uk/ap_regulation_ienm_needs_report/
[This study from the Florence Nightingale Foundation, commissioned by the NMC, shows that advanced nursing and midwifery talent is being lost within the health and social care system. Findings show that internationally educated professionals struggle to have their expertise recognised, but regulatory changes could transform the landscape for nurses and midwives practising at an advanced level.]

**Mental health nursing students and generic proficiencies: how educators can support assessment.**
[Abstract]
Cutts M. *British Journal of Nursing* 2024;33(20):956-962.
Check for full-text availability
[Recent shifts in nursing education towards generic proficiencies pose challenges to the unique demands of mental health nursing education. Student mental health nurses at the authors' higher education institution (HEI) have provided service feedback that has expressed the difficulties they have encountered. This article examines the issues faced by students, assessors and educators in interpreting and applying the proficiency standards set by the Nursing and Midwifery Council.]

**How L&D can create value: Focusing on social collaborative learning.**
Chartered Institute of Personnel and Development (CIPD); 2024.
https://www.cipd.org/en/views-and-insights/thought-leadership/insight/learning-value-social-collaborative/
[This article examines the data behind the growing adoption of collaborative learning and explores how L&D professionals can leverage the key principles to impact and improve organisational performance.]

## Toolkit

**How to … navigate specialised programmes for early-career doctors in medical education.**
Lim JJ. *The Clinical Teacher* 2024;21(6):e13832.
[Investing in early-career medical education programmes for aspiring clinician-educators, scholars and leaders offers a strategic approach to shaping the future of health professions education internationally. This paper explores the design and impact of a nationally funded Specialised Foundation Programme (SFP) within the United Kingdom.]

# *Finance and Procurement*

## Systematic Review / Meta-Analysis

**General practice characteristics associated with pay-for-performance in the UK: a systematic review.**
Srai RK. *BJGP Open* 2024;:BJGPO.2024.0174..
[Associations with characteristics both within and outside practices' control were identified. Pay-for-performance instruments may systematically disadvantage practices serving those at greatest risk of ill-health, such as older and more deprived populations. Given the cross-sectional design of many studies and focus on the early years of QOF, more up-to-date evidence is needed to understand if and why these relationships persist]

## Report

**Health care funding: the latest funding figures for England.**
The Health Foundation; 2024.
https://www.health.org.uk/publications/long-reads/health-care-funding
[The REAL Centre explores the latest health care funding figures for England. This includes how much funding government has committed over the next 2 years, how this compares to historical levels and how it stacks up against what is needed to meet the pressures facing health services.]

**How much does the NHS spend on capital projects?**
NHS Providers; 2024.
https://nhsproviders.org/resources/briefings/how-much-does-the-nhs-spend-on-capital-projects
[This briefing provides a brief history of NHS capital funding and outlines the current challenges NHS trusts are facing in delivering operational priorities within a pressurised financial environment.]

**Medicines shortages: solutions for empty shelves.**
Royal Pharmaceutical Society (RPS); 2024.
https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Medicines%20Shortages/Medicines%20Shortages%20-%20Digital%20-%20201124.pdf
[This report from the RPS, and backed by charities and patient groups, calls on the government to create a national strategy to manage medicine shortages and to change legislation to allow community pharmacists to amend prescriptions when medicines are in short supply. The report explains how medicine supply chains are global and complex, with shortages caused by manufacturing problems and disrupted, less resilient supply chains.]

**Supply Chain Management.**
THIS Institute; 2024.
https://www.cambridge.org/core/elements/supply-chain-management/0A5EEC1C13863EC37EA2BD43E415F535
[This Element introduces the key principles and definitions of healthcare supply chains. Practical insights into the design and operation of healthcare supply chains are provided. Core characteristics of effective supply chain management such as performance management, systems thinking, and supply chain integration are examined along with the application of specific supply chain design and improvement approaches.]

**The NHS productivity challenge: driving improvement through finance transformation**
Healthcare Financial Management Association (HFMA); 2024.
https://www.hfma.org.uk/system/files/2024-11/Finance%20Productivity%20Briefing_1.pdf
[NHS finance and other corporate functions have a significant role to play in both contributing to improved finance productivity and in facilitating productivity gains across the NHS. This joint briefing with NHS Shared Business Services explores the impact that striving for greater productivity is likely to have on the NHS finance community.]

**Protecting patients and the NHS through full transparency in industry–NHS collaborations.**
Institute for Policy Research; 2024.
https://www.bath.ac.uk/publications/protecting-patients-and-the-nhs-through-full-transparency-in-industry-nhs-collaborations/attachments/protecting-patients-and-the-nhs-through-full-transparency-in-industry-nhs-collaborations.pdf
[This policy brief, written by a team of international academic researchers and UK-based patient advocates, recommends key legislative reforms to enhance financial transparency in industry–NHS collaborations. It recommends legislative changes in three key areas and argues that these reforms will promote transparency and will support the government's core missions to strengthen the NHS and drive investment in life sciences.]

**Unlocking productivity through the ambulance estate.**
NHS Confederation; 2024.
https://www.nhsconfed.org/publications/unlocking-productivity-through-ambulance-estate
[Exploring the role improved support and control facilities can play in increasing the ambulance service's productivity.]

# *Managing Data, Knowledge and Information*

## Report

**Reporting health and medical research.** [Abstract]
Hansford HJ. *BMJ Evidence-Based Medicine* 2024;29(6):358-362.
Check for full-text availability
[Transparent reporting is essential for evidence-based medicine. Reporting guidelines help researchers provide clear, complete accounts of their studies, ensuring they can be understood, replicated, assessed, and used. Adhering to guidelines early and during writing enhances research quality. Complete reporting benefits all stakeholders, improving the reliability and utility of health and medical research findings.]

**Uniting the UK's health data: a huge opportunity for society.**
Health Data Research UK; 2024.
https://www.hdruk.ac.uk/news/independent-review-maps-a-route-to-transform-the-uks-health-data-system/
[Independent review led by Professor Cathie Sudlow. The review flags complexities and inefficiencies impeding the use of health data in the UK. It emphasises that health data should be seen as critical national infrastructure requiring careful leadership and vital investment. The review includes five recommendations that highlight the need to remove barriers, streamline processes, and enable safe and secure data use across the UK.]

**Rapid reviews methods series: considerations and recommendations for evidence synthesis in rapid reviews.** [Abstract]
King VJ. *BMJ Evidence-Based Medicine* 2024;29(6):419-422.
Check for full-text availability
[RRs should include a descriptive summary of studies and narrative interpretation of findings. When possible, meta-analyses are recommended for efficient evidence synthesis. RRs can expedite synthesis by focusing on critical PICO elements, using experienced teams, single reviewer abstraction with checks and limiting descriptive text when data are presented in tables. Transparency about shortcuts and their bias impact is crucial.]

**Data for people: principles and priorities for the collection, storage, sharing and use of data around care and support.**
Think Local Act Personal; 2024.
https://thinklocalactpersonal.org.uk/resources/data-for-people/
[The government has made improving data in care a core part of its programme for reform. This report draws on the experiences of those who draw on care and support, as well as family and friend carers. It contains 15 key principles and 6 actions relating to the collection, storage, sharing and use of data in care in England. It covers themes such as commitment to co-production, equity and inclusion, and trust and transparency.]

**Integrating large language models in systematic reviews: a framework and case study using ROBINS-I for risk of bias assessment.** [Abstract]
Hasan B. *BMJ Evidence-Based Medicine* 2024;29(6):394-398.
Check for full-text availability
[Large language models can aid systematic reviews, but their integration is unclear. A study evaluated GPT-4's agreement with humans using the ROBINS-I tool for risk of bias assessment. Results showed highest agreement for 'Classification of Intervention' and moderate agreement in 'Participant Selection', 'Missing Data', and 'Measurement of Outcomes'. A proposed framework for LLM integration covers rationale, protocol, execution, and reporting. LLM-human pairing is necessary for reliability.]

**To book, visit:** https://www.uhsussex.nhs.uk/professionals/knowledge-and-libraries/information-skills-teaching/finding-quality-health-information/

# *Service Design and Commissioning*

## Guideline / Policy

**Modern outpatient care - using resources to add value: an implementation guide for local and regional teams.**
Royal College of Physicians (RCP); 2024.
https://medicalcare.rcp.ac.uk/transforming-outpatient-care/
[This new outpatient care guide stresses the need to make planned, specialist care pathways more sustainable for the future. It provides practical principles for efficient and effective outpatient care and includes clinic template recommendations to support local and regional clinical teams.]

**Public health commissioning in the NHS: 2024 to 2025.**
Department of Health and Social Care (DHSC); 2024.
https://www.gov.uk/government/publications/public-health-commissioning-in-the-nhs-2024-to-2025
[Information about NHS England's objectives and funding arrangements as it commissions public health services.]

## Systematic Review / Meta-Analysis

**Factors influencing multiple non-utilised healthcare appointments from patients' and healthcare providers' perspectives: a qualitative systematic review of the global literature.**
Aldadi A. *BJGP Open* 2024;:BJGPO.2024.0075.
[Complex factors influence multiple non-utilised appointments. Strong provider–patient relationships improve care accessibility. Flexible scheduling and patient-centred approaches are pivotal, alongside addressing workplace discrimination. Tailored healthcare services and overcoming geographical barriers are essential. Ensuring safety, accessibility, and communication are necessary. Equitable access to services and alternative transportation solutions are essential.]

# Evidence-Based Summary

**Is the integration of health and social care meeting the growing demand?**
Gomez K. *British Journal of Healthcare Management* 2024;30(11):1-7.
[Integration of health and social care has been suggested as a solution to overcome the increasing financial and service pressures on the UK healthcare system. This commentary aimed to critically appraise a systematic review that investigated the national and international evidence base for the impact of integrating care, both on perceived and actual service delivery outcomes. The authors also aimed to identify the review's implications for practice, policy and future research.]

# Report

**2024 autumn survey.**
Association of Directors of Adult Social Services (ADASS); 2024.
https://www.adass.org.uk/wp-content/uploads/2024/10/ADASS-Autumn-Survey-2024-EMBARGO-0001-6-NOV.pdf
[The survey results highlight the challenges facing councils as they work to provide access to care and support for people with disabilities, long-term health conditions and their carers amidst financial pressures. The report finds that currently, 81% of councils expect to overspend their adult social care budgets this year – up from 72% in 2023/24.]

**Are intermediate care services stretched too thin?**
The Health Foundation; 2024.
https://www.health.org.uk/reports-and-analysis/briefings/are-intermediate-care-services-stretched-too-thin
[This briefing presents analysis from the Networked Data Lab (NDL). Led by the Health Foundation, the NDL is a network of five analytical teams across England, Scotland and Wales. These teams accessed, linked and analysed local data sources to explore access to and journeys through intermediate care services. It also includes a national analysis of step-down intermediate care in England.]

**Creating integrated neighbourhood teams: learning from experience.**
National Association of Primary Care (NAPC); 2024.
https://napc.co.uk/wp-content/uploads/2024/11/Creating-Integrated-Neighbourhood-Teams_final.pdf
[This paper is the collective view of the NAPC leadership and brings together NAPC's experience of how to make integrated neighbourhood teams work and how to manage the process of change, bringing in evidence from the UK and internationally.]

**Earlier action and support: The case for prevention in adult social care and beyond.**
Local Government Association (LGA); 2024.
https://www.local.gov.uk/publications/earlier-action-and-support-case-prevention-adult-social-care-and-beyond
[Prevention is a central feature of the new Government's mission-led approach to national renewal. This joint publication makes the case for a shift towards taking action and offering support earlier, so that more people can live the lives they want. This creates a new opportunity to deliver.]

**Exploring health and social care perspectives on the implementation of 'Right Care, Right Person', under the National Partnership Agreement.**
The Partnership for Responsive Policy Analysis and Research (PREPARE); 2024.
https://www.york.ac.uk/media/healthsciences/images/research/prepare/reportsandtheircoverimages/Health-and-SocialCarePerspectives%20(1).pdf
[Right Care, Right Person (RCRP) is a policy designed to end the inappropriate and avoidable involvement of police in responding to incidents involving people with mental health needs. This report from the University of York, York St John University and The King's Fund explores the views of health and care staff on implementing the policy and the emerging impact on practice and care.]

**Providers Deliver: shifting care upstream.**
NHS Providers; 2024.
https://nhsproviders.org/providers-deliver-shifting-care-upstream
[This report examines how trusts are increasing the amount of patient need that is being met within the community and out of hospital. It looks at several case studies which highlight some of the successes trusts are having to enable people to access the care they need.]

**Hospital of the future: a framing paper.**
Reform; 2024.
https://reform.uk/wp-content/uploads/2024/12/Hospital-of-the-Future-a-framing-paper-1.pdf
[The role of hospitals in a future healthcare model is largely overlooked. This framing paper attempts to diagnose

the problems in hospitals today – what they are, why they exist, and the long-term prognosis. It will be followed by the publication of several papers outlining a detailed programme of reform to reimagine hospitals for the 21st century. This paper is the latest paper in Reform's Reimagining Health programme.]

**Investigation into the NHS dental recovery plan.**
National Audit Office (NAO); 2024.
https://www.nao.org.uk/wp-content/uploads/2024/11/Investigation-into-the-NHS-dental-recovery-plan-HC-308-1.pdf
[The dental recovery plan, published in February 2024 under the previous government, aimed to increase access to NHS dentistry services. The £200 million plan was intended to deliver more than 1.5 million additional NHS dentistry treatments in 2024–25. This report sets out information on the current delivery of NHS dentistry services and the development and progress of the plan for 2024–25. It finds that the dental recovery plan is not on course to fulfil this ambition.]

**National paediatric critical care report (PICANet).**
Healthcare Quality Improvement Partnership (HQIP); 2024.
https://www.hqip.org.uk/resource/picanet-dec24/
[The Paediatric Intensive Care Audit Network (PICANet) has published a report summarising paediatric critical care activity within designated Level 3 paediatric intensive care units (PICU) and Specialist Paediatric Critical Care Transport Services in the UK and Republic of Ireland between 2021 and 2023.]

**Progress in preventing cardiovascular disease.**
National Audit Office (NAO); 2024.
https://www.nao.org.uk/wp-content/uploads/2024/11/progress-in-preventing-cardiovascular-disease.pdf
[This report finds that the current system to make sure that eligible people in England are offered and attend Health Checks is not working effectively. It recommends a review of how NHS Health Checks are provided in England to help prevent cases of CVD, which affects millions of people and costs the economy tens of billions of pounds each year.]

## *Quality Improvement and Innovation*

## Systematic Review / Meta-Analysis

**If health organisations and staff engage in research, does healthcare improve? Strengthening the evidence base through systematic reviews.**
Boaz A. *Health Research Policy and Systems* 2024;22(1):113.
[The updated review collates a substantial pool of studies which are largely positive in terms of the impact of research engagement on processes of care and patient outcomes. Of the potential engagement mechanisms, the review highlights the important role played by research networks. The review also identifies various papers which consider how far there is a "dose effect" from differing amounts of research engagement. Additional lessons come from analyses of equity issues and negative papers.]

**The Impact of Patient Access to Electronic Health Records on Health Care Engagement: Systematic Review.** [Abstract]
Alomar D. *Journal of Medical Internet Research* 2024;26:e56473.
Check for full-text availability
[The findings suggested a positive association between patient access to EHRs and health care engagement. The implications of these findings for health care providers, policy makers, and patients should be considered, highlighting the potential benefits and challenges associated with implementing and promoting patient access to EHRs. Further research directions have been proposed to deepen our understanding of this dynamic relationship.]

**Components of pharmacist-led medication reviews and their relationship to outcomes: a systematic review and narrative synthesis.** [Abstract]
Craske ME. *BMJ Quality & Safety* 2024;33(12):808-822.
Check for full-text availability
[This systematic review identified common themes and components, for example, goal setting, action planning, additional support and follow-up, that may influence outcomes of pharmacist-led medication reviews. Researchers, health professionals and commissioners could use these for a comprehensive evaluation of medication review implementation]

**New colleague or gimmick hurdle? A user-centric scoping review of the barriers and facilitators of robots in hospitals.**
Rasmussen MK. *PLOS Digital Health* 2024;:doi.org/10.1371/journal.pdig.0000660.
[Finding that organisational aspects are at the core of most barriers, we suggest that future research should investigate the dynamics between hospital employees as professional users and the procedures and workflows of the hospitals as institutions, as well as the ambivalent role of anthropomorphisation of hospital robots, and emerging issues of privacy and confidentiality raised by increasingly communicative robots.]

## Report

**Planning for the end: a review of the quality of care provided to adult patients towards the end of life**
National Confidential Enquiry into Patient Outcome and Death (NCEPOD); 2024.
https://www.ncepod.org.uk/2024eolc/Full%20report_end%20of%20life%20care.pdf
[Each year more than 600,000 people die in the UK and many of these deaths occur in hospital, despite the majority of people saying that they would prefer not to die there. The annual number of deaths in the UK is predicted to rise by mid-2035. Therefore, the provision of care at the end of life must meet the needs of the population. This review looks at the quality of care provided towards the end of life for adults with a diagnosis of dementia, heart failure, lung cancer or liver disease.]

**Impact report 2023–24.**
Health Innovation Oxford & Thames Valley; 2024.
https://thehealthinnovationnetwork.co.uk/wp-content/uploads/2024/12/Health-Innovation-Network-2023-24-Impact-Report.pdf
[This report outlines how the 15 health innovation networks (HINs) benefited patients, addressed NHS challenges and supported economic growth. It highlights progress led by HINs across the country in addressing cardiovascular disease, patient safety, health inequity and more in 2023–24. It finds that HINs collectively made a difference to the lives of more than 1 million patients, and leveraged around £467 million investment through innovator support.]

**Driving digital transformation: techUK's recommendations for health and social care.**
techUK; 2024.
https://www.techuk.org/resource/driving-digital-transformation-techuk-s-recommendations-for-health-social-care.html
[This report contains a series of recommendations aimed at improving health and social care services and outcomes through greater adoption of digital, data and technology. The recommendations call for collective action from key stakeholders across the health and social care system, including the UK government and local authorities, the NHS, and social care organisations.]

**Trust and confidence in technology-enabled care: a joint analysis with Q.**
The Health Foundation; 2024.
https://www.health.org.uk/publications/long-reads/trust-and-confidence-in-technology-enabled-care
[Digital and data-driven technology has great potential to help the NHS meet the challenges it faces. Yet realising the benefits of technology-enabled care can be difficult, and progress has been slower than hoped. Lord Ara Darzi's report on the state of the NHS in England and the Prime Minister's response highlight the urgent need to make progress in digitising NHS services. It is therefore vital to understand the factors that influence the adoption of technology in health and care.]

## *Climate Change and Sustainability*

## Evidence-Based Summary

**Environmentally sustainable surgical systems.**
Virginia Ledda. *BMJ Global Health* 2024;9(Suppl 4):e015066 .
[Describes personal, professional and organisational changes to start creating impact. Change can be hard so this new community needs to blend carbon literacy and behavioural change techniques for success.Focuses on the front-line team and is written by experts in behavioural change and sustainable practice. It intends to challenge individual readers to start making changes now, and to challenge systems leaders to start making larger-scale changes urgently.]

**How might Hospital at Home enable a greener and healthier future?**
Dylan Powell. *NPJ Digital Medicine* 2024;7(1):252 .
[Traditional healthcare delivery models face mounting pressure from rising costs, increasing demand, and a growing environmental footprint. Hospital at Home (HaH) has been proposed as a potential solution, offering care at home through in-person, virtual, or hybrid approaches. Explores the environmental opportunities and

challenges associated with HaH compared to traditional hospital care and reinforces the case for further research to comprehensively quantify the environmental impact including]

## Report

**Energy and emissions projections: 2023 to 2050.**
Department for Energy Security and Net Zero (DESNZ); 2024.
https://www.gov.uk/government/publications/energy-and-emissions-projections-2023-to-2050
[Projections of energy demand, greenhouse gas emissions and electricity generation from 2023 to 2050, including projections of the demand for each type of fuel in different sectors of the economy.]

**Plant-powered planet: building a healthy and sustainable food system.**
UK Health Alliance of Climate Change; 2024.
https://s41874.pcdn.co/wp-content/uploads/Plant-powered-Planet-Report-final.pdf
[Food systems account for about a third of greenhouse gas emissions and much of the loss of nature, yet globally, a billion people go to bed hungry and billions are obese. Transforming food systems to be healthier, sustainable and efficient is critical. This policy report highlights six recommendations to drive a just transition to sustainable and healthy food systems, and five recommendations for the health sector to enable, promote and support good health.]

# *Public Health*

## Guideline / Policy

**Adverse Weather and Health Plan**
UK Health Security Agency (UKHSA); 2024.
https://www.gov.uk/guidance/adverse-weather-and-health-plan
[The Adverse Weather and Health Plan (AWHP) aims to protect individuals and communities from the health effects of adverse weather and to build community resilience.]

**Oral health survey of adults in care homes 2024 to 2025.**
Office for Health Improvement and Disparities (OHID); 2024. https://www.gov.uk/government/publications/oral-health-survey-of-adults-in-care-homes-2024-to-2025-toolkit
[Protocol and documents that fieldworkers should use to collect oral health data for the survey of adults 65 years and older living in care homes 2024 to 2025. The findings of these surveys provide comparable details of caries levels and other clinical measures at local authority level. This informs decisions by local authorities, the NHS and other partners.]

**Restricting advertising of less healthy food or drink on TV and online: products in scope.**
Department of Health and Social Care (DHSC); 2024.
https://www.gov.uk/government/publications/restricting-advertising-of-less-healthy-food-or-drink-on-tv-and-online-products-in-scope
[Outlines the provisions of the Advertising (Less Healthy Food Definitions and Exemptions) Regulations 2024 which will come into force on 1 October 2025.]

**Rough Sleeping Accommodation Programme 2021-24.**
Office for Health Improvement and Disparities (OHID); 2024.
https://www.gov.uk/government/publications/rough-sleeping-accommodation-programme-2021-24
[Updated: Added Rough Sleeping Accommodation Programme 2025-26 allocations.]

**School Streets: how to set up and manage a scheme.**
Department for Transport and Active Travel England; 2024.
https://www.gov.uk/government/publications/school-streets-how-to-set-up-and-manage-a-scheme
[Guidance for local authorities in England on how to set up and manage a School Streets scheme, with case studies. The guidance provides an overview of: what School Streets are; the key steps and factors to consider when developing and implementing schemes; how School Streets fit within the wider context of enabling walking, wheeling and cycling to school.]

## Systematic Review / Meta-Analysis

**Early mathematical models of COVID-19 vaccination in high-income countries: a systematic review.**
E Burch. *Public Health* 2024;236:207-215.
[This review demonstrates a need for long-term models that focus on outcome measures such as quality-adjusted

life years, the population-level effects of long COVID and the cost effectiveness of future policies - all of which are essential considerations in the planning of long-term vaccination strategies]

**'You can change your life through sports'-physical activity interventions to improve the health and well-being of adults experiencing homelessness: a mixed-methods systematic review.**
Jo Dawes. *British Journal of Sports Medicine* 2024;58(8):444-458 .
[Qualitative evidence suggests that physical activity interventions for PEH can benefit health and well-being with positive translation to wider life. There was limited positive quantitative evidence, although most was inconclusive. Although the evidence suggests a potential recommendation for physical activity interventions for PEH, results may not be transferable outside high-income countries. Further research is required to determine the effectiveness and optimal programme design.]

**Do health warning labels on alcohol packaging attract visual attention? A systematic review.**
S Lacoste-Badie. *Public Health* 2024;236:184-192.
[Further investigations using eye-tracking are needed to collect additional evidence on attention devoted to AWLs. Meanwhile, we put forward implications for policymakers and future avenues for research based on our review of the existing literature.]

# Report

**Chief Medical Officer's annual report 2024: health in cities.**
Department of Health and Social Care (DHSC); 2024.
https://www.gov.uk/government/publications/chief-medical-officers-annual-report-2024-health-in-cities
[Professor Whitty's report outlines a broad range of health opportunities and challenges for city populations, and includes case studies from core cities in England.]

**Children, violence and vulnerability 2024: The third annual Youth Endowment Fund report into young people's experiences of violence.**
Youth Endowment Fund; 2024.
https://youthendowmentfund.org.uk/reports/children-violence-and-vulnerability-2024/
[This year, YEF surveyed over 10,000 teenage children aged 13-17 in England and Wales about their experiences of violence. Amid the everyday pressures of adolescence — school, friendships and self-discovery — many teenagers are also having to navigate a more troubling issue: violence. This year's findings are detailed across five reports, each focusing on a different aspect.]

**Our future homes: housing that promotes wellbeing and community for an ageing population.**
Ministry of Housing, Communities and Local Government; 2024.
https://www.gov.uk/government/publications/the-older-peoples-housing-taskforce-report/our-future-homes-housing-that-promotes-wellbeing-and-community-for-an-ageing-population
[This report seeks to understand the market in England for older people's housing today and into the future. It outlines the enablers for older people when seeking to move into appropriate or specialist housing. It also looks at the opportunities and benefits of broadening provision and choice for older people, including continuing to live in their own home if they wish to do so. It aims to develop a viable and implementable approach for enhancing choice for older people in the housing market.]

**Tackling health inequalities through English devolution.**
Centre for Local Economic Strategies; 2024.
https://cles.org.uk/wp-content/uploads/2024/10/Tackling-health-inequalities-through-English-devolution-towards-a- new-framework-FINAL-COPY.pdf
[This report sets out a bold vision for tackling health inequalities across England through devolution, exploring regional devolution as an effective approach to narrowing health inequalities and setting out key considerations for the government, including ensuring that economic growth acts to narrow health inequalities; enabling stronger joint working between local and regional government and integrated care systems; and delivering a fairer funding deal for councils.]

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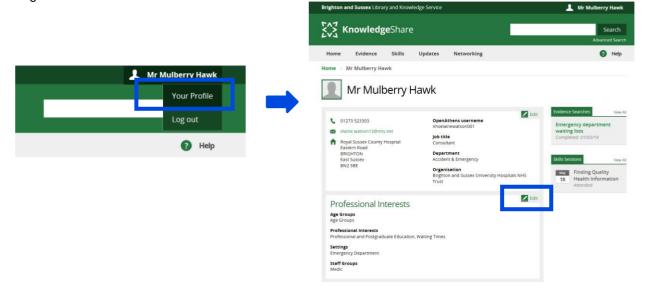
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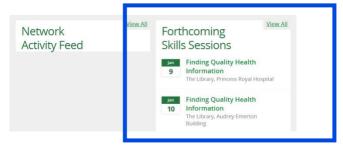
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