



# KnowledgeShare

*NHS information support for evidence-based practice*

## Alert 111

*Resources published in September/October 2021*

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### Health and climate change

The COP26 UN Climate Change Conference is taking place from 31 October – 12 November in Glasgow. Responding to the climate emergency, the NHS has committed to becoming the world’s first ‘net zero’ emissions health care system.

**Going green: what do the public think about the NHS and climate change?** is a new long read from the Health Foundation exploring public perceptions of climate

change, health and the NHS. It highlights key findings from a nationally representative survey of 1,858 UK adults, conducted by Ipsos MORI in July 2021. The public are concerned about the health impacts of climate change – globally and in the UK. But the NHS’s role as a major contributor of emissions is not well recognised. Only around a quarter (26%) of people surveyed believe the NHS is contributing to climate change.

October also saw the publication of **A healthy future: tackling climate change mitigation and human health together**. This report, from the Academy of Medical Sciences and the Royal Society, reviews evidence from a range of sources around the health impacts of initiatives to tackle climate change. It concludes that if health is made central to the climate agenda, then actions taken to reach UK net-zero greenhouse gas emissions by 2050 will have near-term benefits for human health, in the UK, as well as helping to reduce the risks to health from global climate change.

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***NICE – COVID-19 Rapid Guideline*****COVID-19 rapid guideline: managing COVID-19**[www.nice.org.uk/guidance/ng191](http://www.nice.org.uk/guidance/ng191)***NICE – Guideline*****Cardiovascular disease: risk assessment and reduction, including lipid modification**[www.nice.org.uk/guidance/cg181](http://www.nice.org.uk/guidance/cg181)**Looked-after children and young people**[www.nice.org.uk/guidance/ng205](http://www.nice.org.uk/guidance/ng205)**Myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome: diagnosis and management**[www.nice.org.uk/guidance/ng206](http://www.nice.org.uk/guidance/ng206)***NICE – Quality Standard*****End of life care for adults**[www.nice.org.uk/guidance/qs13](http://www.nice.org.uk/guidance/qs13)**Workplace health: long-term sickness absence and capability to work**[www.nice.org.uk/guidance/qs202](http://www.nice.org.uk/guidance/qs202)***NICE - Technology Appraisals*****Bimekizumab for treating moderate to severe plaque psoriasis**[www.nice.org.uk/guidance/ta723](http://www.nice.org.uk/guidance/ta723)**Nivolumab with ipilimumab and chemotherapy for untreated metastatic non-small-cell lung cancer**[www.nice.org.uk/guidance/ta724](http://www.nice.org.uk/guidance/ta724)**Abemaciclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy**[www.nice.org.uk/guidance/ta725](http://www.nice.org.uk/guidance/ta725)**Daratumumab with pomalidomide and dexamethasone for treating relapsed or refractory multiple myeloma (terminated appraisal)**[www.nice.org.uk/guidance/ta726](http://www.nice.org.uk/guidance/ta726)**Isatuximab with carfilzomib and dexamethasone for treating relapsed or refractory multiple myeloma (terminated appraisal)**[www.nice.org.uk/guidance/ta727](http://www.nice.org.uk/guidance/ta727)**Midostaurin for treating advanced systemic mastocytosis**[www.nice.org.uk/guidance/ta728](http://www.nice.org.uk/guidance/ta728)**Sapropterin for treating hyperphenylalaninaemia in phenylketonuria**[www.nice.org.uk/guidance/ta729](http://www.nice.org.uk/guidance/ta729)**Avapritinib for treating unresectable or metastatic gastrointestinal stromal tumours (terminated appraisal)**[www.nice.org.uk/guidance/ta730](http://www.nice.org.uk/guidance/ta730)**Vericiguat for treating chronic heart failure with reduced ejection fraction (terminated appraisal)**[www.nice.org.uk/guidance/ta731](http://www.nice.org.uk/guidance/ta731)**Baloxavir marboxil for treating acute uncomplicated influenza (terminated appraisal)**[www.nice.org.uk/guidance/ta732](http://www.nice.org.uk/guidance/ta732)**Inclisiran for treating primary hypercholesterolaemia or mixed dyslipidaemia**[www.nice.org.uk/guidance/ta733](http://www.nice.org.uk/guidance/ta733)**Secukinumab for treating moderate to severe plaque psoriasis in children and young people**[www.nice.org.uk/guidance/ta734](http://www.nice.org.uk/guidance/ta734)**Tofacitinib for treating juvenile idiopathic arthritis**[www.nice.org.uk/guidance/ta735](http://www.nice.org.uk/guidance/ta735)**Nivolumab for treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy**[www.nice.org.uk/guidance/ta736](http://www.nice.org.uk/guidance/ta736)**Pembrolizumab with platinum- and fluoropyrimidine-based chemotherapy for untreated advanced oesophageal and gastro-oesophageal junction cancer**[www.nice.org.uk/guidance/ta737](http://www.nice.org.uk/guidance/ta737)

Berotrastat for preventing recurrent attacks of hereditary angioedema

[www.nice.org.uk/guidance/ta738](http://www.nice.org.uk/guidance/ta738)

Atezolizumab for untreated PD-L1-positive advanced urothelial cancer when cisplatin is unsuitable

[www.nice.org.uk/guidance/ta739](http://www.nice.org.uk/guidance/ta739)

Apalutamide with androgen deprivation therapy for treating high-risk hormone-relapsed non-metastatic prostate cancer

[www.nice.org.uk/guidance/ta740](http://www.nice.org.uk/guidance/ta740)

Apalutamide with androgen deprivation therapy for treating hormone-sensitive metastatic prostate cancer

[www.nice.org.uk/guidance/ta741](http://www.nice.org.uk/guidance/ta741)

### *NICE - Interventional Procedures*

Lateral elbow resurfacing for arthritis

[www.nice.org.uk/guidance/ipg705](http://www.nice.org.uk/guidance/ipg705)

Transapical transcatheter mitral valve-in-valve implantation for a failed surgically implanted mitral valve bioprosthesis

[www.nice.org.uk/guidance/ipg706](http://www.nice.org.uk/guidance/ipg706)

Transapical transcatheter mitral valve-in-ring implantation after failed annuloplasty for mitral valve repair

[www.nice.org.uk/guidance/ipg707](http://www.nice.org.uk/guidance/ipg707)

Genicular artery embolisation for pain from knee osteoarthritis

[www.nice.org.uk/guidance/ipg708](http://www.nice.org.uk/guidance/ipg708)

Laparoscopic renal denervation for loin pain haematuria syndrome

[www.nice.org.uk/guidance/ipg709](http://www.nice.org.uk/guidance/ipg709)

Percutaneous endovascular forearm arteriovenous fistula creation for haemodialysis access

[www.nice.org.uk/guidance/ipg710](http://www.nice.org.uk/guidance/ipg710)

### *NICE - Medical technologies Guidance*

DyeVert Systems for reducing the risk of acute kidney injury in coronary and peripheral angiography

[www.nice.org.uk/guidance/mtg60](http://www.nice.org.uk/guidance/mtg60)

## *Patient Safety*

### Report

**[A thematic analysis of HSIB's first 22 national investigations.](#)**

Healthcare Safety Investigation Branch (HSIB); 2021.

<https://www.hsib.org.uk/investigations-and-reports/a-thematic-analysis-of-hsibs-first-22-national-investigations/>

[This national learning report is an analysis of themes in the first 22 national investigations published by HSIB. This work was undertaken as HSIB recognised that similar issues were arising in investigations that were undertaken in very different clinical fields. The analysis identified the following three recurring patient safety themes: access to care and transitions of care, communication and decision making, and checking at the point of care.]

**[Digital Clinical Safety Strategy.](#)**

NHSX; 2021.

<https://www.nhsx.nhs.uk/key-tools-and-info/digital-clinical-safety-strategy/>

[The Digital Clinical Safety Strategy will attempt to upskill digital leaders and provide a safer service when using digital technology, including through better use of data and training. Developed jointly NHSX, NHS Digital and NHS England and Improvement, the strategy expands on the 2019 NHS Patient Safety Strategy.]

## *Managing and Leading People*

### Guideline

**[Equality, Diversity and Inclusion Training: A good practice guide.](#)**

NHS Employers; 2021.

<https://www.nhsemployers.org/publications/equality-diversity-and-inclusion-training>

[This guidance includes information on: who should receive the training; training objectives; training content outline; a definition of health inequalities; and legislative requirements and policies. It also covers equality standards in the NHS; understanding bias and strategies for embedding equality, diversity and inclusion. The guide is aimed at equality, diversity and inclusion leads, HR and learning and development professionals, and trade union representatives.]

### **Welfare facilities for healthcare staff.**

NHS Employers; 2021.

<https://www.nhsemployers.org/publications/welfare-facilities-healthcare-staff>

[This guidance, developed by the NHS Staff Council's Health, Safety and Wellbeing Partnership Group, aims to support NHS organisations to improve their provision of staff welfare facilities. It includes the case for improving and providing welfare facilities and the legal requirements for organisations to have suitable and sufficient facilities for staff.]

## Report

### **Developing the digital skills of the social care workforce.**

Nuffield Trust; 2021.

<https://www.nuffieldtrust.org.uk/research/developing-the-digital-skills-of-the-social-care-workforce>

[Adult social care roles suffer from poor retention rates, but could digital technologies hold the answer to enabling skill development and improved job satisfaction in the sector? This summary explores how domiciliary care agencies have trained staff to use digital technology in order to monitor the vital signs of services users, and presents findings relating to the experience and skills development of care staff.]

### **Future systems leadership scoping project.**

NHS Confederation; 2021.

<https://www.nhsconfed.org/publications/future-systems-leadership-scoping-project>

[This paper considers how to enable and facilitate multi-agency, multidisciplinary clinical leadership within integrated care systems.]

### **Inclusive recruitment: increasing supply, widening access to employment and addressing inequality.**

NHS Employers; 2021.

<https://www.nhsemployers.org/publications/inclusive-recruitment-0>

[As an anchor institution the NHS can play a key role in addressing the inequalities that persist in our communities by providing work opportunities.]

## Toolkit

### **Embedding the Workforce Disability Equality Standard.**

NHS Employers; 2021.

<https://www.nhsemployers.org/articles/embedding-workforce-disability-equality-standard>

[Learn about the Workforce Disability Equality Standard (WDES) and access guidance and resources to help you support staff with disabilities.]

### **Inspire, attract and recruit toolkit: Resources and guidance to support your workforce supply.**

NHS Employers; 2021.

<https://www.nhsemployers.org/inspire-attract-and-recruit>

[This resource has been developed for NHS HR professionals, recruitment teams and managers to help inspire, attract and recruit your future workforce.]

### **International recruitment toolkit.**

NHS Employers; 2021.

<https://www.nhsemployers.org/publications/international-recruitment-toolkit>

[Use this resource to plan your approach to overseas recruitment activity, or to review the quality and efficiency of your existing practices.]

## *Using Guidelines and Evidence*

### Professional Development

#### Understanding the evidence

## Finance and Procurement

### Report

#### **Health and social care funding projections 2021.**

The Health Foundation; 2021.

<https://www.health.org.uk/publications/health-and-social-care-funding-projections-2021>

[The report sets out what it may cost the government to fund the NHS and social care system in England along with workforce requirements over the next 10 years. The projections are based on underlying funding pressures – such as population size and age structure – and additional funding pressures, such as policy choices.]

#### **Pressures on the NHS.**

Institute for Fiscal Studies (IFS); 2021.

<https://ifs.org.uk/publications/15606>

[This analysis assesses how the government's new funding settlement compares with the pressures facing the health service. The new funding will likely be sufficient to cover Covid-19-related pressures on the NHS over the next two years, 2022–23 and 2023–24. However, the government's new plans imply little in the way of additional virus-related support after that point, suggesting that the newly announced funding might be insufficient to meet virus-related pressures in the medium term.]

#### **The Comprehensive Spending Review: what more for health and care spending?**

The King's Fund; 2021.

<https://www.kingsfund.org.uk/publications/comprehensive-spending-review-health-and-care-spending>

[Overall, while recent health and care funding increases have been significant and necessary, there are key areas of health and care spending where budgets have either not been set or remain uncertain. The Comprehensive Spending Review is the opportunity to address this.]

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## Managing Knowledge and Information

### Guideline

#### **What Good Looks Like: seven success measures for successful digital transformation.**

NHSX; 2021.

<https://www.nhsx.nhs.uk/digitise-connect-transform/what-good-looks-like/>

[Our What Good Looks Like (WGLL) framework has seven success measures which are applicable to all care settings.]

### Report

#### **Making better use of voluntary sector data and intelligence in health service planning.**

National Association for Voluntary and Community Action (NAVCA); 2021.

<https://navca.org.uk/health-and-wellbeing>

[Members of the VCSE Health and Wellbeing Alliance (HW Alliance) engaged their networks in a study of how data and intelligence held by the VCSE sector is used currently in service planning and development, along with barriers and enablers to that data and intelligence it being more systematically and widely used. This timely work comes as we enter the next phase of integrated care implementation.]

#### **Secondary use of health data in Europe.**

Open Data Institute; 2021.

<https://theodi.org/project/discover-how-ready-your-country-is-for-the-secondary-use-of-health-data>

[This report (and accompanying interactive tool) compares the policy readiness of countries across Europe for the secondary use of health data, and identifies good practice across the region. The pandemic has shown us the value of bringing together population health data from multiple sources. But efforts to share health data across European countries is currently very fragmented. Secondary use of health data can play a crucial role in improving health systems.]

#### **The National Strategy for AI in Health and Social Care.**

NHSX; 2021.

<https://www.nhsx.nhs.uk/ai-lab/ai-lab-programmes/the-national-strategy-for-ai-in-health-and-social-care/>

[The NHS AI Lab is developing a national strategy for the development, implementation, scaling and monitoring of

AI-driven technologies in the UK's health and social care system. The NHS AI Lab has published its draft strategy on the AI Lab Virtual Hub so that health and care leaders can give their feedback.]

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## *Patient and Carer Experience*

### Report

#### **Adult inpatient survey 2020.**

Care Quality Commission (CQC); 2021.

<https://www.cqc.org.uk/publications/surveys/adult-inpatient-survey-2020>

[Survey (over 73,000 responses) showed generally positive experiences of care, with no differences between Covid-19 and non-Covid-19 patients; findings were however less positive for areas of care including emotional support, information sharing and hospital discharge.]

#### **Annual review of adult social care complaints 2020-21.**

Local Government and Social Care Ombudsman; 2021.

<https://www.lgo.org.uk/information-centre/news/2021/sep/failing-social-care-system-reflected-in-relentless-rise-in-ombudsman-s-upheld-complaints>

[This annual review of social care complaints – covering both councils and independent care providers across England – shows the service found fault in 72 per cent of the complaints it investigated last year. The report discovers that the faults found during investigations are often not due to one-off errors caused by staff working under pressure, but are increasingly caused by the measures employed by councils and care providers to mitigate the squeeze on their resources.]

#### **Online services in general practice: patterns of use and barriers to uptake.**

Public Health England (PHE); 2021.

[www.gov.uk/government/publications/online-services-in-general-practice-patterns-of-use-and-barriers-to-uptake](http://www.gov.uk/government/publications/online-services-in-general-practice-patterns-of-use-and-barriers-to-uptake)

[This project is in line with the national ambition to support the adoption of a range of technology initiatives in general practice. The aims were to understand the needs of the population relating to the effectiveness of online services to support general practice, and identifying groups and exploring barriers and enablers to the use of GP online services. The report is mainly intended for commissioners and providers of GP services.]

#### **Patient Experience in England 2021.**

Patient Experience Library; 2021.

<https://pexlib.net/?231942=>

[This annual overview of the evidence gives a patient's-eye view of service quality, and of some of the big issues in healthcare, including: The elective care backlog, where the question for patients is not just "why are we waiting", but "how are we waiting"; Digital healthcare, taking in people's anxieties about data sharing, and looking at the quality and reliability of healthcare apps; Compliments and complaints.]

#### **Urgent and emergency care survey 2020.**

Care Quality Commission (CQC); 2021.

<https://www.cqc.org.uk/publications/surveys/urgent-emergency-care-survey-2020>

[Survey (n=48,630) shows most people felt they were treated with respect and dignity, but they were less positive about areas of care including pain management, emotional support, availability of staff when they felt they needed attention, and information provided at discharge.]

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## *Service Design and Commissioning*

### Guideline

#### **2021 to 2022 Better Care Fund policy framework.**

Department of Health and Social Care (DHSC); 2021.

<https://www.gov.uk/government/publications/better-care-fund-policy-framework-2021-to-2022/2021-to-2022-better-care-fund-policy-framework>

[Better Care Fund plans are jointly developed by health and social care partners in every area in England and support integrated, person-centred care in communities. This policy framework is intended for use by those responsible for delivering the Better Care Fund at a local level (such as CCGs, local authorities, health and wellbeing boards) and NHS England.]

NHS England and NHS Improvement; 2021.

[https://www.england.nhs.uk/wp-content/uploads/2021/06/B0662\\_Building-strong-integrated-care-systems-everywhere-guidance-on-the-ICS-people-function-August-2021.pdf](https://www.england.nhs.uk/wp-content/uploads/2021/06/B0662_Building-strong-integrated-care-systems-everywhere-guidance-on-the-ICS-people-function-August-2021.pdf)

[This guidance builds on the priorities set out in the People Plan. It is intended to help NHS system leaders and their partners support their 'one workforce' by delivering key outcome-based people functions from April 2022.]

### **Building strong integrated care systems everywhere: ICS implementation guidance on effective clinical and care professional leadership.**

NHS England and NHS Improvement; 2021.

<https://www.england.nhs.uk/wp-content/uploads/2021/06/B0664-ics-clinical-and-care-professional-leadership.pdf>

[This guidance supports the development of distributed clinical and care professional leadership across integrated care systems (ICSs). It describes 'what good looks like' in this regard, based on an extensive engagement exercise involving more than 2,000 clinical and care professional leaders from across the country, led by a multiprofessional steering group.]

### **Building strong integrated care systems everywhere: ICS implementation guidance on partnerships with the voluntary, community and social enterprise sector.**

NHS England and NHS Improvement; 2021.

<https://www.england.nhs.uk/wp-content/uploads/2021/06/B0905-vcse-and-ics-partnerships.pdf>

[This guidance is for health and care leaders from all organisations in ICSs that are developing partnerships across local government, health, housing, social care and the voluntary, community and social enterprise (VCSE) sector. This guidance provides more detail on how to embed VCSE sector partnerships in ICSs.]

### **Guidance on Integrated Care Partnership (ICP) engagement.**

Local Government Association (LGA); 2021.

<https://www.local.gov.uk/publications/guidance-integrated-care-partnership-icp-engagement>

[This guidance sets out The Department of Health and Social Care, NHS England and the LGA's expectations for the role of Integrated Care Partnerships (ICPs) within Integrated Care Systems.]

### **Guidance on the functions and governance of the integrated care board, and the model constitution.**

NHS Providers; 2021.

<https://nhsproviders.org/media/692060/nhs-providers-next-day-briefing-integrated-care-board-governance.pdf>

[NHS England and NHS Improvement (NHSE/I) published several integrated care system (ICS) guidance documents and accompanying resources on 19 August 2021 to support systems' transition into statutory integrated care boards (ICBs) by 1 April 2022. This briefing summarises these resources and provides detailed commentary on the ICB functions and governance guidance, model constitution and ICS people guidance.]

### **Primary Care Networks: plans for 2021/22 and 2022/23.**

NHS England; 2021.

<https://www.england.nhs.uk/publication/primary-care-networks-plans-for-2021-22-and-2022-23/>

[Plans for the gradual introduction of new service requirements for Primary Care Networks (PCNs) and confirm how PCNs will access the funding available for their activities through the Investment and Impact Fund (IIF) across the second half of 2021/22 and 2022/23. Five areas of focus for PCNs over the coming 18 months are identified.]

### **The Winter Access Fund: system-working to support primary care.**

NHS Confederation; 2021.

<https://www.nhsconfed.org/publications/winter-access-fund>

[This guide provides an overview of the Winter Access Fund announced on 14 October. It provides examples of how providers and systems have been improving access to primary care and poses a number of questions to help facilitate discussions and planning between primary care providers and clinical commissioning groups/systems.]

### **Thriving places: guidance on the development of place-based partnerships as part of statutory integrated care systems.**

NHS England and NHS Improvement; 2021.

[www.england.nhs.uk/wp-content/uploads/2021/06/B0660-ics-implementation-guidance-on-thriving-places.pdf](http://www.england.nhs.uk/wp-content/uploads/2021/06/B0660-ics-implementation-guidance-on-thriving-places.pdf)

[This document, produced together with the Local Government Association (LGA), seeks to support all partner organisations in integrated care systems (ICSs) to collectively define their place-based partnership working, and to consider how they will evolve to support the transition to the new statutory ICS arrangements, anticipated from April 2022. It reflects learning to date, and the intention is to support partners to build on existing arrangements.]

## Report

### **Build Back Better: Our Plan for Health and Social Care.**

HM Government; 2021.

<https://www.gov.uk/government/publications/build-back-better-our-plan-for-health-and-social-care>

[This paper sets out the government's new plan for health and social care. It provides an overview of how this plan will tackle the elective care backlog in the NHS and put the NHS on a sustainable footing. It sets out details of the plan for adult social care in England, including a cap on social care costs and how financial assistance will work for those without substantial assets.]

### **Building back inclusively: radical approaches to tackling the elective backlog.**

NHS Confederation; 2021.

<https://www.nhsconfed.org/publications/building-back-inclusively>

[This briefing recommends radical, whole-system changes to tackle the elective backlog inclusively. Aimed at healthcare leaders overseeing elective recovery, as well as policymakers with the levers to effect change, it puts forward ten practical measures to manage the backlog.]

### **Building frontiers.**

National Association of Primary Care (NAPC); 2021.

<https://napc.co.uk/news-and-publications/publications/>

[This paper explores ways of supporting system integration and shaping future care design, formed from the collective experience of the Frontiers Group (clinicians and managers from primary care, secondary care and mental health).]

### **Have integrated care programmes reduced emergency admissions? Lessons for Integrated Care Systems.**

The Health Foundation; 2021.

[www.health.org.uk/publications/long-reads/have-integrated-care-programmes-reduced-emergency-admissions](http://www.health.org.uk/publications/long-reads/have-integrated-care-programmes-reduced-emergency-admissions)

[One of the key aims of ICSs is to provide more integrated services and strengthen disease prevention. Faced with the challenge of year-on-year increases in NHS activity, ICSs will likely want to try to reduce reliance on emergency hospital care. One mechanism for doing this will be by introducing integrated care initiatives aimed at providing more joined-up care and improving patient outcomes.]

### **Integrated care systems: how will they work under the Health and Care Bill?**

The King's Fund; 2021.

<https://www.kingsfund.org.uk/audio-video/integrated-care-systems-health-and-care-bill>

[Integrated care systems (ICSs) are part of a fundamental shift in the way the health and care system is organised – away from competition and organisational autonomy and towards collaboration, with health and care organisations working together to integrate services and improve population health. The Health and Care Bill will put them on a statutory footing from April 2022. This diagram and accompanying narrative are based on the provisions in the Bill as currently drafted.]

### **Integration in action: tackling the elective backlog.**

NHS Confederation; 2021.

<https://www.nhsconfed.org/publications/integration-action-tackling-elective-backlog>

[This report provides some early examples of how local systems are addressing the elective recovery challenge. Based on interviews with healthcare leaders, it details how integrated approaches are enabling rapid improvement and innovation in service delivery.]

### **Lessons learned: Delivering programmes at speed.**

National Audit Office (NAO); 2021.

<https://www.nao.org.uk/report/lessons-learned-from-delivering-programmes-at-speed/>

[The government is responsible for delivering effective and efficient programmes, which the NAO has a statutory remit to examine. As part of this statutory role, the NAO reviewed programmes where the government aimed to deliver outcomes much more quickly than would normally be expected through effective and efficient processes. This includes external events such as the Covid-19 pandemic and European Union exit where outcomes must be achieved as soon as possible or by a fixed date.]

### **Planning guidance 2021/22 update: October 2021 to March 2022.**

NHS Confederation; 2021.

<https://www.nhsconfed.org/publications/planning-guidance-202122-update-october-2021-march-2022>

[On 30 September, NHS England and NHS Improvement (NHSEI) chief executive Amanda Pritchard wrote to NHS organisations to outline an updated version of 2021/22 operational planning guidance and the NHS's priorities between now and March 2022. This briefing sets out our view on the guidance and summarises some of the key issues.]



**Solving the puzzle: Delivering on the promise of integration in health and care.**

Institute for Public Policy Research (IPPR); 2021.

<https://www.ippr.org/research/publications/solving-the-integration-puzzle>

[This report reviews the Health and Care Bill and suggests the proposed reforms could be a 'turning point' in the drive towards a more integrated health care system. However, it warns that improved outcomes will only be delivered if combined with changes to the way health care is organised and how services work together.]

**The NHS Long Term Plan and COVID-19: Assessing progress and the pandemic's impact.**

The Health Foundation; 2021.

<https://www.health.org.uk/publications/reports/the-nhs-long-term-plan-and-covid-19>

[This analysis looks at progress on the main pledges in the NHS Long Term Plan and the impact of COVID-19 on their delivery. This analysis finds that the core principles set out in the long term plan remain as relevant now as they were before COVID-19, but their implementation has been derailed. The NHS now faces major delay, disruption and increased demands on services.]

**The recovery challenges for NHS hospital services.**

Care Quality Commission (CQC); 2021.

<https://www.cqc.org.uk/news/stories/recovery-challenges-nhs-hospital-services>

[This month's Insight report looks at how NHS trusts are planning for people's care while tackling a backlog of treatment caused by COVID-19.]

**What the NHSEI package means for general practice.**

British Medical Association (BMA); 2021.

<https://www.bma.org.uk/advice-and-support/covid-19/gp-practices/support-your-surgery#plan>

[NHSEI (NHS England and NHS Improvement), supported by the Government, has published a plan it claims will improve access for patients and support general practice in the current crisis. In this analysis the BMA outlines its reasons for believing that the Government's 'rescue package' for GPs is flawed and patient care will suffer as a result.]

**What's happened and what's next for councils?**

Institute for Fiscal Studies (IFS); 2021.

<https://ifs.org.uk/publications/15673>

[This report describes how the upcoming Spending Review follows a decade of austerity and unprecedented new financial pressures and service responsibilities for councils as a result of the Covid-19 pandemic. This briefing examines what's happened and what's next for councils in England and Wales, focusing on the short-term financial impact of the Covid-19 pandemic, the medium-term financial outlook, and planned and potential financial and service reforms over the next few years.]

## *Quality Improvement*

### Evidence-Based Summary

**Primary care: Trends in quality.**

Quality Watch; 2021.

<https://www.nuffieldtrust.org.uk/news-item/primary-care-1>

[Indicators on the quality of primary care, largely focusing on general practice. At the start of the coronavirus (Covid-19) pandemic, the number of GP appointments fell by a third but practices are now reporting a high demand for services. There have also been significant changes in how patients access services, with a rapid switch towards online triage systems and remote appointments either by telephone or video.]

### Report

**Agility: the missing ingredient for NHS productivity: Some improvement approaches that can increase productivity, and how to make them happen.**

The Health Foundation; 2021.

<https://www.health.org.uk/publications/long-reads/agility-the-missing-ingredient-for-nhs-productivity>

[Maximising productivity is critical if the NHS is to survive the pressures it faces in the aftermath of COVID-19 and from the long-term growth in demand for health care. In this long read the Health Foundation highlight some service improvement agendas that offer opportunities to improve productivity. They look at skill mix change, patient activation, improving flow and the use of technology. They explore these approaches can be used to improve existing models and create new models of care.]

**NHS performance summary: July-August 2021: Monthly round-up of the latest NHS performance data.**

Nuffield Trust; 2021.

<https://www.nuffieldtrust.org.uk/news-item/nhs-performance-summary-july-august-2021>

[In August 2021, over one in five people (23%) attending A&E spent more than four hours from arrival to admission, transfer or discharge, the worst performance since records began. In July 2021, 28% of patients waited longer than two months to start their first treatment following an urgent GP referral for suspected cancer, the worst performance for any July on record.]

**Waiting for care: Understanding the pandemic's effects on people's health and quality of life.**

The Health Foundation; 2021.

<https://www.health.org.uk/publications/long-reads/waiting-for-care>

[The effects of the pandemic should not be measured in mortality alone. The suspension of routine NHS care has affected people's health and wellbeing – with the significance of this depending on the type of condition or treatment delayed. For some conditions, a delay in care will make little or no difference. For others, a delay could lead both to living longer in pain – worsening quality of life – and/or a deterioration in their condition.]

## *Health Facility Environment*

### Report

**Beyond bricks and mortar: capital funding for the NHS.**

NHS Confederation; 2021.

<https://www.nhsconfed.org/publications/beyond-bricks-and-mortar-capital-funding-NHS>

[Insufficient capital funding may hamper the government's plans for the NHS, impacting safety standards, digital innovations and worsening inequalities.]

**Going green: what do the public think about the NHS and climate change?**

The Health Foundation; 2021.

[www.health.org.uk/publications/long-reads/going-green-what-do-the-public-think-about-the-nhs-and-climate-change](http://www.health.org.uk/publications/long-reads/going-green-what-do-the-public-think-about-the-nhs-and-climate-change)

[Climate change is a major concern for the public and is recognised as a direct risk to the health of people in the UK. But the public do not clearly recognise the NHS's role as a contributor to these risks. The NHS is facing many challenges and the public see bigger priorities for the next 10 years than addressing climate change. Aligning net zero plans to wider NHS objectives should help to maintain focus on the essential task of honouring vital environmental sustainability commitments.]

## *Public Health*

### Guideline

**Health inequalities: place-based approaches to reduce inequalities.**

Public Health England (PHE); 2021.

<https://www.gov.uk/government/publications/health-inequalities-place-based-approaches-to-reduce-inequalities>

[Guidelines to support local action on health inequalities. The place-based approaches for reducing health inequalities aims to reinforce a common understanding of the complex causes and costs of health inequalities and provide a practical framework and tools for places to reduce health inequalities.]

**NHS population screening: identifying and reducing inequalities.**

Public Health England (PHE); 2021.

<https://www.gov.uk/guidance/nhs-population-screening-identifying-and-reducing-inequalities>

[Guidance and resources to support providers and commissioners in reducing screening inequalities.]

**Public health protection and health security: provisional common framework.**

Department of Health and Social Care (DHSC); 2021.

[www.gov.uk/government/publications/public-health-protection-and-health-security-provisional-common-framework/](http://www.gov.uk/government/publications/public-health-protection-and-health-security-provisional-common-framework/)

[The Common Framework on Public Health Protection and Health Security has been jointly agreed between the

policy. It supports cooperation on issues which require UK-wide approaches, as well as on devolved issues where the sharing of knowledge and expertise is beneficial.]

## Report

### **A healthy future: tackling climate change mitigation and human health together.**

Academy of Medical Sciences; 2021.

[acmedsci.ac.uk/more/news/climate-change-action-will-improve-health-and-save-lives-now-and-in-the-future](https://acmedsci.ac.uk/more/news/climate-change-action-will-improve-health-and-save-lives-now-and-in-the-future)

[This report brings together 11 leading experts to review evidence from a range of sources around the health impacts of initiatives to tackle climate change. It concludes that if health is made central to the climate agenda, then actions taken to reach UK net-zero greenhouse gas emissions by 2050 will have near-term benefits for human health in the UK, as well as helping to reduce the risks to health from global climate change.]

### **Health Profile for England: 2021.**

Public Health England (PHE); 2021.

<https://www.gov.uk/government/publications/health-profile-for-england-2021>

[The fourth annual profile combining data and knowledge with information from other sources to give a broad picture of the health of people in England in 2021.]

### **The disease of disparity: A blueprint to make progress on health inequalities in England.**

Institute for Public Policy Research (IPPR); 2021.

<https://www.ippr.org/research/publications/disease-of-disparity>

[This report identifies six areas where policy needs to change to tackle health inequality, and makes recommendations across the NHS and the socio-economic drivers of poor health. Combined, these provide a constructive plan to tackle the 'disease of disparity' in England – and to achieve the health, social and economic gains possible from addressing health inequality.]



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