Innovation/Improvement

Foundation of Nursing Leadership. Turning your innovative idea into reality in 13 minutes. A two part video showing you how to turn an innovative idea into reality. See: Part 1 and Part 2.

TEDx Talk. Innovation. Dave Dawes also outlines his take on the foundations of innovation.

NHS England. Winners of NHS England’s Regional Innovation Fund announced. Chief Executive Simon Stevens has announced the winners of NHS England’s Regional Innovation Fund. The £2.5 million fund, open to all NHS organisations, is designed to improve patient care through innovation and spread of best practice across the NHS.

Guardian. Concerns raised over incorrect ethnicity data in NHS hospital records. Research suggests faults in NHS records may impact the identification of disease prevalence in different ethnic groups.

Journal of Medical Internet Research (JMIR). Use of Social Media Across US Hospitals: Descriptive Analysis of Adoption and Utilization. “Although most hospitals adopted at least one social media platform, utilization of social media varied according to several hospital characteristics. This preliminary investigation of social media adoption and utilization among US hospitals provides the framework for future studies investigating the effect of social media on patient outcomes, including links between social media use and the quality of hospital care and services.”

NHS Employers. New to the NHS? Your guide to using social media. New to the NHS? For those new to working in the NHS, it’s important to understand how social media is impacting on the way healthcare is planned, delivered and discussed. In the UK, the whole healthcare sector is represented on multiple social media platforms such as Twitter, Facebook, YouTube and LinkedIn. Every day, NHS staff, patients, and the public are discussing the NHS from feedback on services to the detail of commissioning.

BBC News Health. Text messaging service ‘helps people take their pills’. A text messaging service could help people remember to take the medicines they have been prescribed, say researchers. A test scheme, which involved heart patients, cut the numbers who forgot or just stopped taking their pills. One in six was helped to continue their treatment, reducing their risk of heart attack and stroke. It has been estimated that the NHS spends more than £500m on wasted medicines and avoidable illness.

BMC Medical Informatics & Decision Making. Practicing evidence based medicine at the bedside: a randomized controlled pilot study in undergraduate medical students assessing the practicality of tablets, smartphones, and computers in clinical life. “Using a mobile device at the bedside to perform an extensive search is not suitable for
students who prefer using computers. However, mobility is regarded as a substantial advantage, and therefore future applications might facilitate quick and simple searches at the bedside.”

Journal of Medical Internet Research. Use of an Electronic Patient Portal Among the Chronically Ill: An Observational Study. “Electronic patient portals may enhance effective interaction between the patient and the health care provider. To grasp the full potential of patient portals, health care providers need more knowledge on which patient groups prefer electronic services and how patients should be served through this channel.”

Legal and Ethical Issues

‘She can’t come here!’ Ethics and the case of birth centre admission policy in the UK Mandie Scamell J Med Ethics 2014;40:813-816 [Abstract]


Withdrawal and withholding of medical treatment for patients lacking capacity who are in a critical condition – reflections on the judgment of the Supreme Court in Aintree University Hospitals NHS Foundation Trust v James Mr Ian Wise QC Med Leg J December 2014 82: 144-154 Abstract

The travelling patient: A clinician’s guide to the law surrounding medical tourism Nicholas Keyi Sim Med Leg J December 2014 82: 159-163 Abstract

Sudden death due to coronary artery insufficiency as a result of massive cardiomegaly – a case report Basappa S Hugar, S Praveen, J Vinay, and Akshith Raj S Shetty Med Leg J December 2014 82: 164-166 Abstract

Patient and Public Involvement/Patient Experience

Improving the experience of care for cancer patients Using cancer patient experience survey (CPES) data to drive improvements 24 November 2014: This introductory guide will help cancer teams and professionals at all levels within a Trust to drive continual improvement in patient experience, using tried and tested tools and techniques. The consistently high level of response to cancer patient experience surveys (CPES) demonstrates how much patients value the opportunity to feedback and make their voices heard. It is vital that patients are seen as partners in improvement initiatives and here we see how this can and is being done. See more at: http://www.nhsiq.nhs.uk/resource-search/publications/improving-the-experience-of-care-for-cancer-patients.aspx#sthash.wKtAMKSm.dpuf


Adolescents and young adults on the acute medical unit: how might we do it better?
Albon L, Vaughan L.

Creating an Outpatient Center of Excellence in CT.
Itri JN, Bakow E, Woods J.

Wake up, wake up! It's me! It's my life! patient narratives on person-centeredness in the integrated care context: a qualitative study.
Greenfield G, Ignatowicz AM, Belsi A, Pappas Y, Car J, Majeed A, Harris M.
BMC Health Serv Res. 2014 Nov 29;14(1):619. [Epub ahead of print]

Methodological Considerations When Studying the Association between Patient-Reported Care Experiences and Mortality.
Xu X, Buta E, Anhang Price R, Elliott MN, Hays RD, Cleary PD.
Health Serv Res. 2014 Dec 7. [Epub ahead of print]

Drivers of Inpatient Hospital Experience Using the HCAHPS Survey in a Canadian Setting.
Kemp KA, Chan N, McCormack B, Douglas-England K.
Health Serv Res. 2014 Dec 8. [Epub ahead of print]

Patient Satisfaction Surveys: An Evaluation of POSNA Members’ Knowledge and Experience.
Halsey MF, Albanese SA, Thacker M; Project of the POSNA Practice Management Committee.

Questions in friends and family test will be made more child-friendly.
Walker C.

Putting the patient at the heart of it all.
Reyes S.

A proven pathway for stoma care: the value of stoma care services.
Davenport R.

Cystic fibrosis (CF) care through the patients’ eyes - A nationwide survey on experience and satisfaction with services using a disease-specific questionnaire.

Questions in friends and family test will be made more child-friendly: A children’s version is being piloted that aims to be more accessible and coax feedback. Christine ...
C Walker - Nursing Children and Young People, 2014
One idea for preventing the development of mental health problems is for schools to teach ‘resilience’, and there could be a role for school nurses in teaching this, adds Mr Baldwin. He says the taskforce also needs to examine why CAMHS spending per child varies so ...

Belavy D.

DH. Formal launch of MyNHS. Health Secretary Jeremy Hunt has formally launched MyNHS. This is a new site on NHS Choices where people can compare the performance of their local NHS hospital, their care services and
their local authority with up-to-date information. The launch comes one year after the government's response to the Francis Inquiry on Mid Staffordshire. It is the first time such a wide range of performance indicators has been made available to the public in this way. It includes simple, searchable data on food quality, staffing, patient safety and mental health.

European Observatory on Health Systems and Policies. Public reporting in health and long-term care to facilitate provider choice. In the policy summary authors review the literature on the measurement and reporting of quality information to aid the public in choosing health and long-term care providers, provide insights to support future investment in public reporting systems, and summarise strategies aiming to increase the use of reporting by patients and users. It shows that widespread use of quality information has been slow to materialise across health and long-term care, despite the extensive investment in reporting systems by governments and private sector organisations. There is, however, some evidence that reporting encourages providers to address quality issues to improve their reputation in the sector.

Health Foundation. Person-centred care resource centre – Spotlight on renal care. The UK's Health Foundation has a major focus on 'person-centred care'. This microsite, within their Person-centred care resource centre allows them to share some examples of person-centred approaches in use in the UK, where people living with kidney disease reported greater control over their illness and greater confidence.

Healthwatch. My expectations for raising concerns and complaints. This vision aims to align the health and social care sector on what good looks like from the user perspective when raising concerns and complaints about health and social care. It also allows measurement of progress so that organisations can determine the action they need to take to improve.

International Longevity Council. My life, my decision. My Life, My Decision will empower older people across the country to make informed decisions about their treatment and care at the end of life by giving them information on their choices and the opportunity to discuss their wishes. Volunteers and healthcare professionals will be trained to support people in how they can plan ahead for the end of life, including by making an Advance Decision setting out their medical treatment wishes, or by appointing a trusted person to make health and welfare decisions for them using Lasting Powers of Attorney. My Life, My Decision is run by Compassion in Dying in partnership with local branches of Age UK.

INVOLVE. Guidance on the use of social media to actively involve people in research. This guidance provides information on: different types of social media currently being used to involve the public in research; examples of how social media is being used; benefits and challenges; risks and ethics; top tips and things to think about and a jargon buster and useful reading.

King's Fund. People in control of their own health and care: the state of involvement. The idea that people should have a stronger voice in decisions about their health and care, and that services should better reflect their needs and preferences, has been a policy goal of politicians and senior policy-makers in health for at least 20 years. Patients want it, and the evidence shows that when they are involved, decisions are better, health and health outcomes improve, and resources are allocated more efficiently. Despite this, and some small pockets of improvement, there has generally been a lack of progress towards fully involving people in their own health and care. This report examines the reasons behind this, and considers how to advance the cause of making person-centred care the core of health and care reform.

National Voices. I'm still me... a narrative for coordinated support for older people (PDF 1MB). This report sets out how coordinated – or integrated – care and support looks and feels to older people and is written from their point of view.

NHS England. Realising the Value programme. NHS England has launched the Realising the Value Programme, a new initiative which will empower people and communities to take more control of their health. Through this initiative, NHS England will award a grant of up to £500,000 to a charity or not for profit organisation (or consortium) to identify evidence-based approaches to self-care. This programme will also support the commissioning and spread of such approaches, across local communities, and in the NHS, to empower people to take an active role in their health and care.
NHS Improving Quality. Improving the experience of care for cancer patients. This introductory guide will help cancer teams and professionals at all levels within a Trust to drive continual improvement in patient experience, using tried and tested tools and techniques.

Parliamentary and Health Service Ombudsman. My expectations for raising concerns and complaint. Patients and service users have described their expectations for good complaint handling across health and social care in new research published by the Parliamentary and Health Service Ombudsman, the Local Government Ombudsman and Healthwatch England. See also: summary leaflet.

Parliamentary and Health Service Ombudsman. Complaints about acute trusts 2013-14 and Q1 and Q2 2014-15. The Parliamentary and Health Service Ombudsman regularly publishes complaints information about NHS organisations. This data enables organisations to examine how they are performing relative to others.

Patients Association. Parliamentary and Health Service Ombudsman: the ‘people’s’ ombudsman – how it failed us. This report calls on the Parliamentary and Heath Service Ombudsman to establish a truly independent, transparent and people’s ombudsman. It provides a list of recommendations to improve the ombudsman going forward, including an independent review.

Social Care Institute for Excellence (SCIE). New dignity films. Four new films illustrate how care services can support people’s dignity and respect. Produced by SCIE for Social Care TV, the films show dignity in practice and explore some of the key factors that contribute to a caring and respectful experience: choice and control; communication; privacy; and social isolation. See also: Improvement support for care providers.

Care Quality Commission. Complaints matter. This report into complaints handling finds that there is wide variation in the way complaints are handled across the NHS, primary care and adult social care services in England, with complainants being met too often with a defensive culture rather than one that listens and is willing to learn. Although examples of good practice have been found, the report highlights the need for more to be done to encourage people to come forward with their complaints, to keep them informed on the progress, to reassure them that action will be taken as a result, and to assess that whether they are satisfied with how it has been resolved.

CQC. Accident and emergency survey 2014. An Accident and Emergency survey published by the Care Quality Commission has shown that patients are having a better overall experience at A&E departments. The majority of patients that completed the survey rated their overall experience as good with 80 per cent rating their visit at least seven out of ten.

ComRes. Dying Matters Public Attitudes to Bereavement Survey. Almost half of Britons (47 per cent) say they would feel uncomfortable talking to someone who has been recently bereaved and significant numbers of bereaved people have experienced negative reactions to their grief, including people avoiding them and the loss of friendships according to a new study conducted by ComRes and released by the Dying Matters Coalition.

Healthwatch England. Hospital complaints handling. This chart contains data from Freedom of Information requests into hospital complaints handling procedures. It shows that more than a third of hospitals across England are turning away concerned citizens wishing to report incidents of poor care that they have witnessed. Of 123 respondents, only 30 trusts reported having investigated patient complaints and were able to provide details of how many cases they have had over the last three years. See also: Those who witness poor care being denied right to complain by NHS.

National Institute for Health Research (NIHR). Responsiveness of primary care services: development of a patient-report measure: qualitative study and initial quantitative pilot testing. This study aimed to explore the meaning of responsiveness in primary care and develop a patient-report questionnaire for use as a measure of patient experience of responsiveness. It found that responsiveness is a complex concept which involves alignment between service delivery and the needs of diverse patient groups. Reactive and proactive strategies at individual and population level are required, but primary care organisations mainly rely on reactive approaches.
**National Survivor User Network (NSUN). 4PI national involvement standards.** This framework aims to help create meaningful involvement with service users and carers. Developed within a mental health context, these standards are universally relevant to involvement and co-production in all areas of health and social care.

**National Voices. I'm still me: a narrative for coordinated support for older people.** This document, produced in collaboration with UCLPartners and Age UK, sets out how integrated care and support looks and feels to older people and is written from their point of view. It outlines five themes that older people say are key to coordinated support: independence, community interactions, decision making, care and support and terminology.

**NHS England. Friends and Family test rolls out to GPs.** On 1 December The Friends and Family Test went live in 8000 GP practices across England, giving up to a million patients a day the opportunity to have a say about their care and treatment. The Friends and Family Test aims to drive service improvement in local healthcare by providing people with the opportunity to feedback on their experience.

**NHS England. NHS England launches initiative to empower patients and communities to take control of their health.** NHS England has launched the Realising the Value Programme, a new initiative to empower people and communities to take more control of their health. Through this initiative, NHS England will award a grant of up to £500,000 to a charity or not for profit organisation to identify evidence-based approaches to self-care.

**Social Care Institute for Excellence. End of Life and palliative care: Thinking about the words we use.** Recent reports have highlighted examples of very poor care for people who are dying. Poor communication has often been at the root of the problem. People in the final stages of life, along with their families and carers, do not always understand that they are dying. A new video addresses this by looking at the words that care and health staff often use when someone has been given a terminal diagnosis or is dying.

## Patient Safety

**Quantification of the Hawthorne effect in hand hygiene compliance monitoring using an electronic monitoring system: a retrospective cohort study**  
Jocelyn A Srigley, Colin D Furness, G Ross Baker, Michael Gardam  
*BMJ Qual Saf* 2014;23:974-980  
[Abstract][Full text][PDF][Request permissions]

**Creating spaces in intensive care for safe communication: a video-reflexive ethnographic study**  
Su-yin Hor, Rick Iedema, Elizabeth Manias  
*BMJ Qual Saf* 2014;23:1007-1013  
[Abstract]

**Exploring new avenues to assess the sharp end of patient safety: an analysis of nationally aggregated peer review data**  
Derek W Meeks, Ashley N D Meyer, Barbara Rose, Yuri N Walker, Hardeep Singh  
*BMJ Qual Saf* 2014;23:1023-1030  
[Abstract]

**BMC Nursing. Patient safety subcultures among registered nurses and nurse assistants in Swedish hospital care: a qualitative study.** "The aim of this study was to explore subcultures among registered nurses and nurse assistants in Sweden in terms of their assumptions, values and norms with regard to practices associated with patient safety."

**British Standards Institution. Specification for the planning, application, measurement and review of cleanliness services in hospitals.** The British Standards Institution has revised the specification for planning and measuring hospital cleanliness. Sponsored by the Department of Health, the document was first published in 2011 to help acute, community, and mental health hospitals demonstrate high levels of cleanliness. The new version offers an exemplar assessment of the level of risk that poor cleaning standards can pose for patients, staff, and visitors.
Care Quality Commission. Have your say on how safety incidents will be acted upon from next April. The Health and Safety Executive (HSE), the regulator for workplace health and safety, is seeking views with CQC on how various bodies should take action when staff and people who are receiving health and care services experience avoidable harm in these environments.

Medicines and Healthcare products Regulatory Agency. Yellow Card Scheme looks to the future at 50th anniversary forum as MHRA signs up to safety. The MHRA has hosted an expert stakeholder forum to develop a future roadmap for the Yellow Card Scheme, as the adverse reaction reporting system celebrates its 50th anniversary.

MHRA. Don't miss the latest drug safety advice from the MHRA. The MHRA is changing its arrangements for sending out email alerts about Drug Safety Update.


NHS England. Safer staffing: a guide to care contact time. This guide is for providers and commissioners as part of the drive to deliver safe and effective care. It gives providers a suite of toolkits to support them in making decisions to secure safe staffing care for their patients and service users and recommends that organisations review the contact time staff spend with their patients. It also supports commissioners working with providers to assure themselves that there is sufficient nurse, midwifery and care staff capacity and capability to meet appropriate outcomes and quality standards and to use commissioning and contractual levers to help secure improvements.

CLAHRC Partnership Programme. CLAHRC community e-newsletter - Patient Safety. This newsletter brings the latest news and interesting developments from across the thirteen collaborations and the health service research community. The NIHR CLAHRCs are funded by the NIHR and form part of the NIHR infrastructure. This newsletter looks at the work NIHR CLAHRCs are doing on patient safety.

Health Foundation. 5000 patient safety fellows. On 4 December, the Health Foundation announced plans to work with NHS England and others including royal colleges in the development and delivery of Berwick’s recommendation for ‘5,000 Patient Safety Fellows’. This initiative will be delivered in 2015 and will boost the expertise available in the NHS to improve the quality of patient care throughout the UK.

Health Foundation. Safer Clinical Systems: evaluation findings. Safer Clinical Systems is an approach for improving safe and reliable health care. It is based on principles adapted from high-reliability organisations, established risk management techniques from hazardous industries, and quality improvement methods. The approach aims to improve patient safety not by imposing pre-defined solutions on organisations, but by developing their own capacity to detect and assess system-level weaknesses and introduce interventions to address them.

Healthcare Quality Improvement Partnership. Bowel cancer sees 80 per cent survival rate. The audit report, which looked at data for almost 32,000 bowel cancer patients diagnosed in 2012-13, was commissioned by the Healthcare Quality Improvement Partnership as part of the National Clinical Audit Programme, and developed by the Health and Social Care Information Centre, the Association of Coloproctology of Great Britain and Ireland and the Royal College of Surgeons of England.

NHS Improving Quality. Safety collaborative plans. NHS Improving Quality and NHS England are working nationally with the Academic Health Science Networks to provide support and opportunities for the safety collaboratives to learn from each other, ensuring the most effective and successful solutions are rapidly spread and adopted across England.

NICE. Midwife-led units safest for straightforward births. In updated guidance, the evidence now shows that midwife-led care is safer than hospital care for women having a straightforward, low risk, pregnancy. This is
because the rate of interventions, such as the use of forceps or an epidural, is lower and the outcome for the baby is no different compared with an obstetric unit.

**Quality Improvement**

Outcomes in patients with heart failure treated in hospitals with varying admission rates: population-based cohort study
R Sacha Bhatia, Peter C Austin, Therese A Stukel, Michael J Schull, Alice Chong, Jack V Tu, Douglas S Lee
BMJ Qual Saf 2014;23:981-988
[Abstract][Full text][PDF][Supplementary Data][Request permissions]

Cost and turn-around time display decreases inpatient ordering of reference laboratory tests: a time series
Daniel Z Fang, Gurmeet Sran, Daniel Gessner, Pooja D Loftus, Ann Folkins, John Y Christopher III, Lisa Shieh
BMJ Qual Saf 2014;23:994-1000
[Abstract]

Insights from staff nurses and managers on unit-specific nursing performance dashboards: a qualitative study
Lianne Jeffs, Susan Beswick, Joyce Lo, Yonda Lai, Aline Chhun, Heather Campbell
BMJ Qual Saf 2014;23:1001-1006
[Abstract]

Designing quality improvement initiatives: the action effect method, a structured approach to identifying and articulating programme theory
Julie E Reed, Christopher McNicholas, Thomas Woodcock, Laurel Issen, Derek Bell
BMJ Qual Saf 2014;23:1040-1048
[Abstract][Full text][PDF][Supplementary Data][Request permissions]

CQC. New NHS regulations to improve openness and transparency. The CQC will now be enforcing two new regulations for the NHS. This follows their announcement about the publication of guidance for NHS organisations to help them meet the requirements of the duty of candour and fit and proper persons requirement.

Commission on Hospital Care for Frail Older People. Commission on Hospital Care for Frail Older People main report. The commission addressed the problem of how the NHS should care for the country’s increasing number of frail older people. The commission’s central conclusion is that hospital providers and commissioners should not rely on government plans for greater integration between health and social care as a solution – they must and can take action now themselves to tackle the problem.

Commonwealth Fund. Multinational comparisons of health systems data 2014. This chartpack uses data collected by the Organization for Economic Cooperation and Development (OECD) to compare health care systems and performance on a range of topics, including: spending; hospitals; physicians; pharmaceuticals; prevention; mortality; quality and safety; and prices. It presents data across several industrialised countries including the United Kingdom.

HQIP. Earlier detection needed for oesophageal and gastric cancer. The largest study of oesophageal and stomach cancer care in England and Wales has been published. It finds that 30 and 90 day survival rates for patients undergoing surgery for oesophageal and gastric cancer have improved over the past five years, but earlier detection of the disease is still required.

Monitor. Encouraging better NHS efficiency and improved care. Proposed changes to the NHS payment system for 2015/16 aim to incentivise the efficient provision of high quality care while also encouraging the better management of increasing demand for services.
King’s Fund. The reconfiguration of clinical services: what is the evidence? This paper aims to help those planning and implementing major clinical service reconfigurations ensure that change is as evidence-based as possible. It investigates the five key drivers – quality, workforce, cost, access and technology – across 13 clinical service areas, and summarises the research evidence and professional guidance available in each. It builds on a major forthcoming analysis of reviews of service reconfigurations commissioned by the National Institute of Health Research and conducted by the National Clinical Advisory Team (NCAT).

CQC. Regulators to share information to improve patient care. A new agreement to help drive improvements to patient care has been formalised between the Care Quality Commission (CQC) and the General Medical Council (GMC), the regulator for doctors. Although the two regulators have different responsibilities, they have a shared goal - to ensure patients receive the best possible care and are protected from harm.

Clinical Audit Support Centre. eNewsletter, Issue 68. The December 2014 issue is now available.

Health and Social Care Information Centre. National Lung Cancer Audit: 2013 Patient Cohort. The purpose of the annual report of the National Lung Cancer Audit is to summarise the key findings of the audit for patients diagnosed with lung cancer who were first seen in 2013.

Royal College of Physicians (RCP). Sentinel Stroke National Audit Programme (SSNAP) reports. These two reports from SSNAP show that despite steady progress in the care of stroke patients in the UK, there are still major shortages of both nurses and doctors. The organisational audit measures the staffing levels, resources and facilities available in every hospital that cares for stroke patients acutely whilst the annual patient care audit provides answers to questions about the type of patient having a stroke, whether or not they are being treated quickly enough, receive enough therapy, where patients go for treatment including after their hospital stay, and whether they get the clot-busting drugs they require.

Department of Health (DH). Examining new options and opportunities for providers of NHS care: the Dalton review. This report is the result of an independent review which looked at the challenges faced by providers of NHS care by examining organisational models to identify key markers and characteristics in order to improve quality of hospital care. It highlights five important themes which include the need for quicker transactional and transformational change; the need for sustainability within the provider sector; and that a one-size-fits-all approach does not work.

DH. Improving outcomes: a strategy for cancer - fourth annual report. This report outlines the progress made against the national cancer strategy. It details progress against the ambition to save an additional 5,000 lives per year by 2015; progress in screening programmes; progress in ensuring better access for all to the best possible treatment, particularly radiotherapy; and developments in the collection and reporting of new datasets and the analysis of information, particularly accurate stage at diagnosis data for England.

DH. Introducing mandatory reporting for FGM. This open consultation seeks views on how to introduce a mandatory reporting requirement in cases of female genital mutilation (FGM).

RCN. Introducing mandatory reporting for FGM. RCN event. The RCN will be holding an event, FGM: zero tolerance and maximum action on 6th February 2015 at RCN HQ where we will be launching the updated RCN Publication – guidance for nurses and midwives, designed to increase awareness among nurses and midwives.

Health and Social Care Information Centre (HSCIC). Health Survey for England – 2013. The Health Survey for England series was designed to monitor trends in the nation’s health, to estimate the proportion of people in England who have specified health conditions, and to estimate the prevalence of certain risk factors and combinations of risk factors associated with these conditions. The surveys provide regular information that cannot be obtained from other sources on a range of aspects concerning the public’s health and many of the factors that affect health.

Monitor. Exploring international acute care models. This report examines international acute service line models to help inform the current thinking on potential new models of care in the NHS. It identifies three service models which could offer benefits if adopted widely within the NHS: ‘risk tiers’ for maternity and paediatric services; use of technology, particularly to deliver care remotely; and out-of-hours care delivered by GPs.
Monitor: Reforming the payment system for NHS services: supporting the Five Year Forward View. This paper from Monitor and NHS England describes how the NHS payment system could begin to look from 2020. It sets out several payment approaches that Monitor and NHS England want to develop further with NHS providers and commissioners, including those in social and primary care. The payment models aim to support the development of integrated care approaches; urgent and emergency care networks; high quality elective care and specialised services; and parity of esteem for mental health services. The paper also sets out the improvements needed to the information building blocks underpinning the NHS payment system.

Monitor: Improving the costing of NHS services: proposals for 2015 to 2021. This consultation seeks feedback on Monitor's proposals for transforming NHS costing processes over the next 7 years. The proposals highlight the need for the NHS to get better at collecting accurate cost, activity and outcome data at an individual patient level. The consultation is aimed at commissioners, NHS providers and any parties who are interested in the costing of NHS services. The deadline for responses is 16 January 2015.

National Institute for Health Research (NIHR). A mixed-methods evaluation of transformational change in NHS North East. This evaluation study examines the North East Transformation System (NETS), an experiment in adopting large-scale transformational change across a NHS region in England. It found that transformational change in a complex system takes time and demands consistency, constancy of purpose and organisational stability. The NETS was seriously disrupted by the NHS changes announced in July 2010. Progress was sustained at four of the study sites, but slowed or ceased at the other sites. Leadership style was found to be critical to the success of transformational change.

NICE clinical guidance:

- **Postnatal care.** This clinical guideline offers evidence-based advice on the care of women and their babies in the first 6–8 weeks after birth. Recommendations on co-sleeping and sudden infant death syndrome were updated in 2014 and cover the first year of an infant's life.

- **Pneumonia.** This guideline offers evidence-based advice on the care and management of adults with community- and hospital-acquired pneumonia.

- **Colorectal cancer:** The diagnosis and management of colorectal cancer. This clinical guideline updates and replaces NICE technology appraisal 93 (published in August 2005). It offers evidence-based advice on the diagnosis and management of colorectal cancer.

- **Intrapartum care:** care of healthy women and their babies during childbirth – guidance (CG190). This guideline offers evidence-based advice on the care of women and their babies during labour and immediately after the birth. It covers healthy women with uncomplicated pregnancies entering labour at low risk of developing intrapartum complications.

**Risk Management**

Read-back improves information transfer in simulated clinical crises
Matt Boyd, David Cumin, Braam Lombard, Jane Torrie, Nina Civil, Jennifer Weller
BMJ Qual Saf 2014;23:989-993
[Abstract]

The following resources have been used in the production of this bulletin:

- BMC Medical Ethics
- British Journal of Hospital Medicine
- British Medical Journal
- BMJ Quality and Safety
- Clinical Risk (Incorporates Health Care Risk Report)
- Critical Care Medicine
- Department of Health website
Disclaimer
The information published in this bulletin is not intended to be exhaustive, and while Library staff make every effort to link only to reputable and reliable websites, the information contained in this bulletin has not been critically appraised by Library staff and it is therefore the responsibility of the reader to appraise this information for accuracy and relevance.