Health Services Transformation Bulletin

23rd February 2024

Artificial intelligence

Artificial intelligence will transform healthcare: considerations for adoption and scale [Grandal N et al. *British Journal of Healthcare Management*]
[Artificial intelligence has become a major 'buzzword' in healthcare and wider UK society. In this article, Nora Sangvik Grandal and colleagues discuss the current and potential uses of artificial intelligence in the NHS, along with key considerations and recommendations for implementing this technology.]
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Design of care pathways

Supporting High-impAct useRs in Emergency Departments (SHarED) quality improvement: a mixed-method evaluation [Sillero-Rejon C. *BMJ Open Quality*]
[SHarED illustrates the considerable potential for a quality improvement programme to promote more integrated case management by specialist teams across the health and care system for particularly vulnerable individuals and improve working arrangements for hard-pressed staff.]
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Discharge to Assess: an evaluation of three case studies in the southeast of England to inform service improvement [Jeffery S. *BMJ Open Quality*]
[Five recommendations are proposed: 1. Examination of pathways against the 62 enablers and blockers to identify and resolve pathway obstacles; 2. A local operational policy accessible to all providers; 3. Enhance coordination and communication among service providers, patients and carers; 4. Strengthen oversight of service user flow; 5. Develop a consistent Patient Reported Outcomes Measure to facilitate feedback and service enhancements for individuals discharged from urgent care pathways.]
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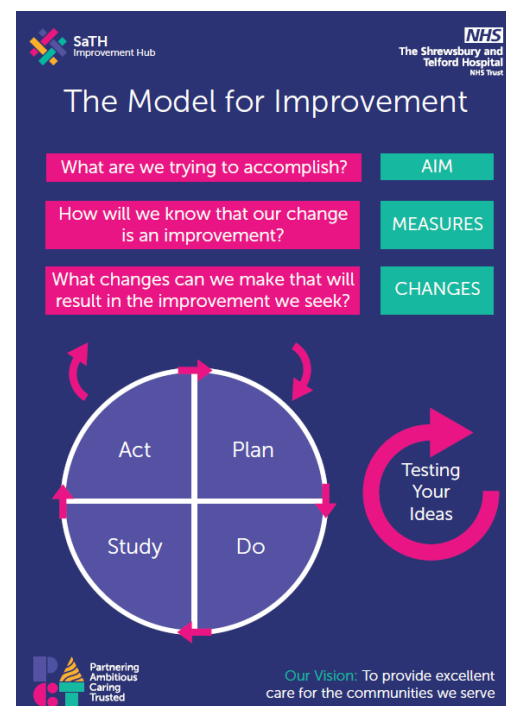
Boosting referrals into urgent community response services to benefit patients [NHS Confederation]
[This briefing from the Community Network, hosted by the NHS Confederation and NHS Providers, explores what can be done to increase further the number of patients who benefit from urgent community response services, including through boosting referrals from key system partners.]
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Hospital discharge and community support guidance [Department of Health and Social Care]
[Sets out how health and care systems should support the safe and timely discharge of people who no longer need to stay in hospital.]
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Digital healthcare

Virtual, augmented, mixed, and extended reality interventions in healthcare: a systematic review of health economic evaluations and cost-effectiveness [Gómez Bergin AD. *BMC Digital Health*]
[Extended reality in healthcare has the potential to offer significant clinical benefits and research has shown it to be promising at delivering cost-savings. We make recommendations based on the findings of our review for future health economic analyses to help ensure that health economic analyses can support decision-makers in procuring these technologies.]
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Using digital technologies to diagnose in the home: recommendations from a Delphi panel [Simon DA. *npj Digital Medicine*]
[The study findings present 29 consensus-based recommendations generated through the Delphi process, providing valuable insights and guidance for stakeholders involved in the implementation and utilization of these novel diagnostic solutions. These recommendations serve as a roadmap for navigating the complexities of integrating digital diagnostics into healthcare practice outside traditional settings like hospitals and clinics.]
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Inclusive digital healthcare: what you need to know [NHS Confederation]
[NHS England's recent framework outlines the importance of digital inclusion throughout the NHS and provides guidance on effective and inclusive health and social care services to help address disparities and discrimination faced by digitally excluded groups.]
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Defining digital nursing [Havard M. *British Journal of Nursing*]
[The use of technology in health care, including nursing, is growing, owing in part to the COVID-19 pandemic and in response to national policy. This study aimed to investigate nurses' perceptions of digital nursing (DN). Nurses had a broad range of perspectives on what DN meant, with four main themes being identified: access; impact on care; technology; and digital future. The positive impacts of DN on ways of working and patient outcomes were supported by answers to closed survey questions.]
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Exploring the effects of learning from excellence: a qualitative study of staff perspectives [Malone C. *British Journal of Healthcare Management*]
[Perspectives on the impact of learning from excellence were generally positive, particularly regarding the benefits for staff morale and motivation. Future studies should consider using an experimental design to compare the impact of the learning from excellence system to that of traditional incident reporting.]
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Health records and data

Electronic patient record systems: recurring themes arising from safety investigations [Health Services Safety Investigations Board]
[Senior Safety Investigator, Helen Jones, blogs about some of the key benefits and risks of electronic patient record (EPR) systems used in healthcare, sharing what has been learnt from safety investigations.]
Available here

Electronic health record time-tracking provides real-time data to measure and benchmark dietitian productivity [Crouse J. *Journal of Human Nutrition and Dietetics*]
[An EHR-based tool that facilitates the documentation of both face-to-face time and patient care coordination time is feasible and enables consistent, continuous measurement of time and productivity. The real-time data from this tool can be used to support adequate dietitian staffing and be used to create a multicentre database to measure the actual time dietitians need to provide care and generate consistent staffing benchmarks.]
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Improvement

Reversing a trend towards overtesting in a department of internal medicine in Denmark [Eberlein TR. *BMJ Open Quality*]
[This study documents the feasability of limiting excess biochemical testing in a diverse internal medicine patient population and sustaining this for a prolonged period through organisational awareness, educating junior physicians in the rational use of biochemical testing and addressing workflow issues related to the ordering of tests.]
Available here

Quality improvement initiative to improve communication domains of patient satisfaction in a regional community hospital with Six Sigma methodology [Carsten BF. *BMJ Open Quality*]
[Overwhelmingly positive patient feedback was achieved, and postintervention employee satisfaction was primarily positive when compared with preintervention satisfaction.]
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Decision-maker roles in healthcare quality improvement projects: a scoping review [Gagnon J. *BMJ Open Quality*]
[Existing literature underscores the crucial role of decision-makers in the success of healthcare quality improvement (QI) projects; however, literature detailing their engagement and contributions is scant. This scoping review provides a comprehensive examination of QI projects involving decision-makers, highlighting their diverse roles and the specific advantages and challenges associated with their involvement.]
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Customised knowledge-sharing platform to foster resident quality improvement activities, tracking and scholarship [Rowe KA. *BMJ Open Quality*]
[A platform to track and share resident QI work and scholarship can be feasibly and acceptably implemented within a residency programme, serving as a novel way to engage residents around QI.]
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Integrated care

Improving health and care at scale: learning from the experience of systems [NHS Confederation]
[NHS England has outlined plans to develop an improvement approach - NHS IMPACT - to support continuous improvement. There are also ambitions for integrated care systems (ICSs) to become 'self-improving systems'. This report reviews the experience of a number of ICSs identified as being at the forefront of this work, focusing on the approaches they have taken and the results achieved.]
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Impact of vertical integration on patients' use of hospital services in England [Saunders C. *BJGP Open*]
[Vertical integration is associated with modest reductions in use of some hospital services and no change in others.]
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Developing a competency framework for integrated care working across healthcare, social care and allied professions [Lewis R et al. *British Journal of Healthcare Management*]
[This is the first UK framework of integrated care competencies to be subjected to empirical testing. Initial testing supports the validity and reliability of the framework, as well as showing the positive outcomes associated with integrated working. This framework could be developed and rolled out on a wider scale to support integrated care working.]
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Patient-centred care

Evaluation of a new patient safety educational programme to reduce adverse events by encouraging staff to speak up: application of the trigger tool methodology [Nakatani K. *BMJ Open Quality*
[Our new educational programmes improved junior doctors and nurses' perceptions of speaking up. We speculated that our intervention may have improved staff communication, which in turn may have led to a reduction in AEs and a sustained increase in incident reports per employee.]
Available here

An evaluation of patient-initiated follow-up (PIFU) outpatient services in the English NHS [Nuffield Trust]
[Millions of people use hospital services as an outpatient, with numbers of appointments rising rapidly over recent years. Patient-initiated follow-up (PIFU) is a relatively new initiative in the English NHS, and the NIHR RSET team has conducted a mixed-methods evaluation as the process develops to understand how it's working and what impact it's having on health care systems and the staff and patients involved.]
Available here

Patient experience

Person-centred quality indicators are associated with unplanned care use following hospital discharge [Kemp K. *BMJ Open Quality*]
[This study demonstrates that patient reports of their in-hospital experiences may have value in predicting future healthcare use. In developing the PC-QIs, patients indicated which elements of their hospital care matter most to them, and our results show agreement between subjective and objective measures of care quality. Future research may explore how current readmission prediction models may be augmented by person-reported experiences.]
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Patient flow

What impact would reducing low-acuity attendance have on emergency department length of stay? A discrete event simulation modelling study [Squires H. *Emergency Medicine Journal*]
[Reducing the proportion of low-acuity attenders at the ED could have an impact on the time in the ED for higher acuity patients due to their use of shared resources, but is insufficient alone to meet current targets. The simulation model could be adapted for further analyses to understand which other changes would be needed to meet current government targets.]
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Reduction of hospital length of stay through the implementation of SAFER patient flow bundle and Red2Green days tool: a pre-post study [Benevides Santos Paiva M. *BMJ Open Quality*]
[The SAFER patient flow bundle and Red2Green days tool implementation were associated with a significant decrease in hospital LOS in a university hospital IMU ward. There is a considerable improvement opportunity for hospital LOS reduction by changing the multidisciplinary team's attitude during patient hospitalisation using these strategies.]
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An occupational therapy delirium pathway reduces hospital re-presentations in older adults with delirium: A before and after observational study [Harper KJ. *British Journal of Occupational Therapy*]
[The hospital environment can exacerbate symptoms of delirium; as such there is a move to promote early supported discharge for patients with delirium. However, the occupational therapy role and impact of intervention is not well known. Our study evaluated an occupational therapy delirium pathway facilitating early assessment, intervention and supported discharge to home compared with hospital-based care.]
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Research and Innovation

Approaches to Spread, Scale-Up, and Sustainability [THIS Institute]
[Few interventions that succeed in improving healthcare locally end up becoming spread and sustained more widely. This indicates that we need to think differently about spreading improvements in practice. Drawing on a focused review of academic and grey literature, the authors outline how spread, scale-up, and sustainability have been defined and operationalised, highlighting areas of ambiguity and contention.]
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Robotic surgery

Innovation through robotic-assisted operations to address health inequities [NHS Confederation]
[Case study. Robotic-assisted surgery is improving access to the best possible care across the Black Country and helping to reduce health inequities.]
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Workforce
Long-service awards for employee retention [NHS Employers]
[How strategically recognising and rewarding staff with long-service awards can increase employee retention. Including key questions to consider and two mini case studies.]
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Recruiting and promoting specialist grade doctors.
NHS Employers; 2024.
[Shrewsbury and Telford NHS Trust had not overly promoted the specialist role in its organisation, as there was a lack of education on the benefits and understanding of the specialist role. The trust recruits doctors as locums, supporting them throughout their fixed-term contract, and then reviewing when it is coming to an end. Doctors showing excellence and working well within are offered the opportunity to apply for a specialist contract if they meet the specialist framework capabilities.]
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A missed opportunity: the NHS Long Term Workforce Plan and the support workforce [Griffin. *British Journal of Healthcare Assistants*]
[The NHS Long Term Workforce Plan was published by NHS England in July 2023. The plan sets out a 15-year strategy to ensure that the NHS has sufficient staffing capacity and capability to meet rising demand for health care. This article critically considers the implications of the plan for the NHS clinical support workforce. Although the plan represents a step forward compared to previous strategies, it does not adequately address the needs of the support workforce and the issues they can face.]
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Supporting healthcare assistants in the workplace [Nazarko. *British Journal of Healthcare Assistants*]
[NHS and social care employers are 'facing the greatest workforce crisis in their history', with staff turnover reported to be 11% in the NHS and 29% in social care. This understaffing affects the quality of patient care. Providing healthcare assistants (HCAs) with appropriate support will reduce staff turnover. This sets off a beneficial cycle of reduced pressure because of improved staffing and increased job satisfaction because of ability to deliver better care.]
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Six simple ways to retain doctors in training in the health service: the ATDC REFORM principles
[Academy of Medical Royal Colleges]
[The Academy Trainee Doctors' Committee (ATDC) represents trainees in postgraduate training. The ATDC's REFORM principles focus on six challenges experienced throughout training and the working environment in the health service, and across the devolved nations. Recognising their importance and taking active steps to address them will, the ATDC believes, improve the recruitment and retention of current and future doctors in training.]
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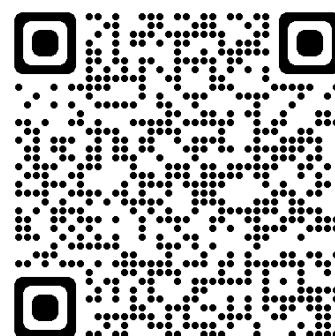
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