

## Reshaping Clinical Care in General Practice - 1st April 2016

[Covering dementia, long term conditions, older people, integrated care, safeguarding]

#### **Dementia**

### Health matters: midlife approaches to reduce dementia risk

22<sup>nd</sup> March 2016 Source: Public Health England

Guidance providing information on approaches to reducing the prevalence and incidence of dementia, including advice to patients on healthy lifestyle.

#### Consultation into dementia and the role of the natural environment

18<sup>th</sup> March 2016 Source: Natural England

Consultation with people living with dementia and their carers about their engagement with nature and the outdoors following on from the 'Greening Dementia' report.

### Virtual reality pilot for people with dementia in Salford

17<sup>th</sup> March 2016 Source:NHS Networks

Salford residents with dementia are taking part in a virtual reality rehabilitation pilot.

### Challenge on dementia 2020: implementation plan

6<sup>th</sup> March 2016 Source: Department of Health

The implementation plan sets out priority actions, and the organisation responsible, across four themes: risk reduction; health and care; awareness; and social action.

### **Long-Term Conditions**

[including Cancer, Diabetes, and general management]

## <u>Multi morbidity : clinical assessment and management draft NICE guidance</u> for consultation

National Institute for Health and Care Excellence (NICE); 2016

Includes advice that GPs should establish the 'treatment burden' of patients with multimorbidity and draw up a tailored approach to their care that takes their preferences and priorities into account.

#### **Medicines optimisation**

National Institute for Health and Care Excellence (NICE); 2016

This quality standard covers the safe and effective use of medicines for all people who take medicines, excluding aspects of managing medicines specific to care home settings.

#### **Healthier You: The NHS Diabetes Prevention Programme**

NHS England; March 2016

First wave starts of 27 areas covering making up to 20,000 places available. GPs will be able to refer at risk patients to personalized diabetes prevention schemes.



# <u>Comorbidity and dementia: a mixed-method study on improving health care</u> <u>for people with dementia (CoDem)</u>

Bunn F. Health Services and Delivery Research 2015;4(8)

Study concluded: future work should focus on the development and evaluation of interventions to improve continuity of care and access to services for dementia patients with comorbidity.

#### **Access to General Practice in England**

House of Commons Public Accounts Committee Report, published March 2016

DH and NHS England recognise the urgent need for action to enable general practice to cope with increase in demand and envisage significant changes over the next few years.

Freely available online

### Older people

# <u>Translating cognitive and everyday activity deficits into cognitive interventions in mild dementia and mild cognitive impairment.</u>

Giebel C. International Journal of Geriatric Psychiatry 2015;30(1):21-31.

The majority of interventions indicated improved everyday activity performance in early dementia and MCI. Daily activities appeared to be an important determinant of success in mild dementia but not in MCI. Few attempts made to develop interventions grounded in evidence-based models.

Available with an NHS OpenAthens password for eligible users

### **Integrated Care**

# <u>Capital, capacity and capability: Independent sector providers helping to develop a strong Sustainability and Transformation Plan(STP).</u>

NHS Confederation; 2016.

Provides detail on how the independent sector smay play a key role in helping individual footprints to meet the stated requirements for STPs and in ensuring the plans are effectively delivered.

# Home-based primary care (HBPC) interventions. Comparative Effectiveness Review No. 164.

Agency for Healthcare Research and Quality; 2016.

Current research provides moderate-strength evidence that HBPC reduces use of inpatient care and low-strength evidence about its positive impact on use of other health services, costs, and patient and caregiver experience.

## Integrating palliative care into primary care for patients with chronic, lifelimiting conditions.

Cleary, Ann Selena The Nurse practitioner, Mar 2016;41(3):42-48

Nurse practitioners can integrate symptom management, early decision-making, and supportive care into primary care settings to improve quality of life and decrease economic and emotional impact at the end of life.

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### **Accountable care organisations explained**

22<sup>nd</sup> March 2016 Source: The King's Fund

New feature on accountable care organisations and how can they deliver benefits for patients.

### **Locally driven change: selected case studies.**

NHS Providers; 2016.

Illustrates change driven by NHS providers to improve services strategically across local health economies

### Bringing together physical and mental health

10<sup>th</sup> March 2016 Source: The King's Fund

New report which looks at bringing together physical and mental health and highlights 10 areas that offer some of the biggest opportunities for improving services for patients and reducing costs.

### Delivering integrated care for older people with frailty – event presentations

24<sup>th</sup> March 2016 Source: The King's Fund
Presentations from the 15<sup>th</sup> March 2016 King's Fund event.

### Safeguarding

### Safeguarding adults - training for managers 13 April SCIE offices, London

22<sup>nd</sup> March 2016 Source: SCIE Bulletin

A one-day course on safeguarding adults to help managers of care and health services to understand their safeguarding duties and responsibilities.

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