Community Children’s Nursing
Evidence Update

June 2017 (Quarterly)
Your Outreach Librarian – Helen Pullen

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### Training Calendar 2017

*All sessions are one hour*

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<th>July (13.00-14.00)</th>
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<td>3rd (Mon) Interpreting Statistics</td>
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<td>21st (Fri) Literature Searching</td>
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<th>August (12.00-13.00)</th>
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<td>4th (Fri) Critical Appraisal</td>
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<td>9th (Wed) Literature Searching</td>
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<td>15th (Tues) Interpreting Statistics</td>
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<td>24th (Thurs) Critical Appraisal</td>
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## Updates

**Vaccine uptake in under 19s (QS145)**

**Attention deficit hyperactivity disorder (update) (GID-CGWAVE0798)** NICE guidelines

**Cerebral palsy in children and young people (GID-QS10044)** Quality standards

**Child abuse and neglect (GID-SCWAVE0708)** NICE guidelines

**Child abuse and neglect (GID-QS10054)** Quality standards

**Children and young people with severe complex needs: social care support (GID-NG10048)**

NICE guidelines

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### Cochrane Library

**Diet, physical activity and behavioural interventions for the treatment of overweight or obese children from the age of 6 to 11 years**

Emma Mead, Tamara Brown, Karen Rees, Liane B Azevedo, Victoria Whittaker, Dan Jones, Joan Olajide, Giulia M Mainardi, Eva Corpeleijn, Claire O'Malley, Elizabeth Beardsmore, Lena Al-Khudairy, Louise Baur, Maria-Inti Metzendorf, Alessandro Demaio, Louisa J Ells

**Diet, physical activity and behavioural interventions for the treatment of overweight or obese adolescents aged 12 to 17 years**

Lena Al-Khudairy, Emma Loveman, Jill L Colquitt, Emma Mead, Rebecca E Johnson, Hannah Fraser, Joan Olajide, Marie Murphy, Rochelle Marian Velho, Claire O'Malley, Liane B Azevedo, Louisa J Ells, Maria-Inti Metzendorf, Karen Rees

**Zinc supplementation for the treatment of measles in children**

Ajibola A Awotiwon, Olabisi Oduwole, Anju Sinha, Charles I Okwundu

**Incentives for preventing smoking in children and adolescents**

Marita Hefler, Selma C Liberato, David P Thomas

**Mass media interventions for preventing smoking in young people**

Kristin V Carson, Faisal Ameer, Kourosh Sayehmiri, Khin Hnin, Joseph EM van Agteren, Fatemeh Sayehmiri, Malcolm P Brinn, Adrian J Esterman, Anne B Chang, Brian J Smith
**NHS Choices: Behind the Headlines**

**Overweight teen boys have increased risk of stroke in later life**

Thursday Jun 29 2017

"Boys who get fat in their teenage years are much more likely to suffer a life-threatening stroke as an adult, experts today warned," The Sun reports. Swedish researchers suspect the association could be down to the effects of...

**Obese mums more likely to give birth to babies with birth defects**

Thursday Jun 15 2017

"Women who are obese when they conceive are more likely to have a baby with serious birth defects," The Guardian reports. Swedish researchers looked at more than a million health records and found a link between excess body mass index (BMI)...

**An egg a day may prevent stunted growth in infants**

Thursday Jun 8 2017

"An egg a day appears to help young children grow taller," BBC News reports. Research involving young children in Ecuador found babies given one egg a day for six months had improved growth compared with...

**Babies put into their own room at six months 'sleep longer'**

Tuesday Jun 6 2017

"Babies moved into their own room at six months sleep better and are lower risk of obesity, poor sleep patterns and tantrums," reports The Sun. This is based on a US study looking at room-sharing...

**TV in bedroom 'risk factor' for child obesity**
Monday Jun 5 2017  Children who have TVs in their bedrooms are more likely to be overweight than those who do not," BBC News reports. A UK study found a link between children having a TV in their room and an increased risk of obesity...

Journal Tables of Contents

Click on the hyperlinked title (+ Ctrl) for contents. If you would like any of the papers in full then please email the library: library@uhbristol.nhs.uk

**British Journal of Community Nursing**
June 2017: Volume 22, Issue 6

**Archives of Disease in Childhood**
June 2017: Volume 102, Issue 6

**Nursing Children and Young people**
May 09 2017: Volume 29, Issue 4
UpToDate is the leading evidence-based clinical decision support system, designed for use at the point of care.

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- Hospital Medicine
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- Nephrology and hypertension
- Neurology
- Obstetrics and gynaecology
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- Paediatrics
- Primary care internal medicine
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Current Awareness Database Articles: Community Paediatric Nursing HDAS Search

If you would like any of the articles in full text, or if you would like a more focused search on your own topic, please contact us: library@bristol.nhs.uk


**Author(s):** Pohl, Carla; Jarvill, Melissa; Akman, Olcay; Clark, Sarah  
**Source:** Nurse educator; vol. 42 (no. 2); p. 105-108  
**Publication Type(s):** Journal Article  
**Abstract:** Consolidation and regionalization in pediatric acute care hospitals have limited clinical opportunities for prelicensure nursing students. The use of schools as primary learning sites offers an opportunity for a combined pediatric and public health clinical experience for nursing students. The purpose of the study was to compare pediatric knowledge and clinical simulation performance between hospital- and community-based pediatric clinical experiences. Study results indicated no difference between groups based on knowledge or simulation scores.  
**Database:** Medline

2. Determinants of Change in Physical Activity in Children 0-6 years of Age: A Systematic Review of Quantitative Literature.

**Author(s):** Hesketh, Kathryn R; O'Malley, Claire; Paes, Veena Mazarello; Moore, Helen; Summerbell, Carolyn; Ong, Ken K; Lakshman, Rajalakshmi; van Sluijs, Esther M F  
**Source:** Sports medicine (Auckland, N.Z.); Jul 2017; vol. 47 (no. 7); p. 1349-1374  
**Publication Date:** Jul 2017  
**Publication Type(s):** Journal Article Review  
**PubMedID:** 27988875  
**Abstract:** BACKGROUND Understanding the determinants of children's health behaviours is important to develop successful behaviour-change interventions. OBJECTIVE We aimed to synthesise the evidence around determinants ('preceding predictors') of change in physical activity (PA) in young children (0-6 years of age). METHODS As part of a suite of reviews, prospective quantitative studies investigating change in physical activity in children aged 0-6 years were identified from eight databases (to October 2015): MEDLINE, Embase, CINAHL, PsycINFO, Web of Knowledge, British Nursing Index, Applied Social Sciences Index and Abstracts, and Sociological Abstracts. Determinants and direction of association were extracted, described and synthesised according to the socio-ecological model (individual, interpersonal, organisational, community, policy). RESULTS Forty-four determinants, predominantly in the interpersonal and organisational domains, were reported across 44 papers (six prospective cohort, 38 interventional); 14 determinants were assessed in four or more papers. Parental monitoring showed a consistent positive association with change in PA; provider training was positively associated with change in children's moderate-to-vigorous PA only. Five (sex, parental goal setting, social support, motor skill training and increased time for PA) showed no clear association. A further seven (child knowledge, parental knowledge, parental motivation, parenting skills, parental self-efficacy, curriculum materials and portable equipment) were consistently not associated with change in children's PA. Maternal role-modelling was positively associated with...
change in PA in all three studies in which it was examined. CONCLUSION A range of studied determinants of change in young children's PA were identified, but only parental monitoring was found to be consistently positively associated. More evidence dealing with community and policy domains from low-/middle-income countries and about lesser-explored modifiable family- and childcare-related determinants is required. INTERNATIONAL PROSPECTIVE REGISTER FOR SYSTEMATIC REVIEWS (PROSPERO) REGISTRATION NUMBER: CRD42012002881.

Database: Medline

11. Using an iPad for Basic Communication Between Spanish-Speaking Families and Nurses in Pediatric Acute Care: A Feasibility Pilot Study.

Author(s): Jackson, Kylie H; Mixer, Sandra J

Source: Computers, informatics, nursing : CIN; Apr 2017

Publication Date: Apr 2017

Publication Type(s): Journal Article

PubMedID: 28445170

Abstract: The growing number of Spanish speakers in the United States poses communication challenges for healthcare providers. Language barriers in pediatric acute care have been associated with an increased risk for adverse events, longer hospital stays, and decreased quality of care. In addition, clinicians’ usage of interpreter services is inconsistent. In fact, nurses often lack interpreter support during daily bedside care. Nursing staff at a pediatric children’s hospital in the southeastern United States identified bedside communication with Spanish-speaking patients and families as a clinical challenge. To address this challenge, a basic communication interface, UTalk version 1.0 (the author is the owner and proprietor), supported by an Apple iPad, was developed by the researcher with input from nursing staff, a certified medical interpreter, and Spanish-speaking community members. A feasibility pilot study of the interface's usability and engagement was conducted on the hospital's pediatric medical-surgical unit through qualitative interviews with nurse-family dyads. Three themes emerged from the data: UTalk-facilitated communication, UTalk needs improvement, and interpreter miscommunication. These findings indicate that a mobile digital device interface is a feasible method for augmenting bedside communication with Spanish-speaking patients and families. These results also may serve as a reference for the development of similar mobile device interfaces. Further research with a larger sample size is needed.

Database: Medline

17. A realist synthesis of social connectivity interventions during transition to parenthood: The value of relationships.

Author(s): Bennett, Claudine T; Buchan, Judy L; Letourneau, Nicole; Shanker, Stuart G; Fenwick, Anne; Smith-Chant, Brenda; Gilmer, Cyndi

Source: Applied nursing research : ANR; Apr 2017; vol. 34 ; p. 12-23

Publication Date: Apr 2017

Publication Type(s): Journal Article

PubMedID: 28342618

Abstract: Background Social connections are important during the transition to parenthood. A wide body of literature suggests that these connections enhance health and contribute to well-being. In the case of parents and families, social connections can influence child development. Nurses and public health agencies are in a unique position to advocate for resources and approaches to enhance social connectivity for parents during this important life transition. Objective The aim of this review was to identify the universal social connectivity interventions that work, and the conditions that foster social connections for parents and enhance child development. The review was undertaken as part of a larger research project to inform the question: What are the population-level interventions
that public health can implement to promote social, emotional and cognitive development from the prenatal period to the end of the first year of life? Social connectivity is one of three domains that were explored in the full study.

**DESIGN**

Realist synthesis.

**DATA SOURCES**

Medline, CINAHL, ERIC, SocAbs, PsycINFO, grey literature.

**REVIEW METHOD**

A literature search was conducted using relevant key words and MeSH headings. Nearly 2000 papers were reviewed by title and sorted based on inclusion and exclusion criteria. Data extraction aided quality appraisal and analysis and informed the development of an explanatory mechanism.

**RESULT**

Twenty-seven papers were included in the synthesis, with findings described in four theme areas: (a) connections in the community, (b) internet connections, (c) prenatal connections, and (d) connections for fathers. The literature available to answer the research question is scant and of varying quality. Community development, family-systems intervention practices, principles of father inclusive practice and group prenatal care models have been demonstrated to foster social connectivity for parents. Online social networking provides valuable informational support.

**CONCLUSIONS**

Changing social structures and technology have influenced the way in which new parents access support. Social connections fostered in the parenting environment have the potential to enhance wellbeing for parents and thus contribute to children’s positive development. Nurses are in a position to advocate for the use of evidence-informed approaches when planning programs and services for parents.

Database: Medline

18. Overweight or obesity in children aged 0 to 6 and the risk of adult metabolic-syndrome: A systematic review and meta-analysis.

**Author(s):** Kim, Jieun; Lee, Insook; Lim, Sungwon

**Source:** Journal of clinical nursing; Mar 2017

**Publication Date:** Mar 2017

**Publication Type(s):** Journal Article Review

**Abstract:**

AIMS AND OBJECTIVESTo identify an association between overweight or obesity in early childhood and metabolic syndrome in adults.

BACKGROUND

Early childhood overweight or obesity is important because it can predict metabolic syndrome in adulthood. A longer period of overweight or obesity leads to the accumulation of more risk factors. However, there are insufficient and inconsistent studies on this issue.

**DESIGN**

A systematic review and meta-analysis.

**METHODS**

We followed the Meta-Analysis of Observational Studies in Epidemiology (MOOSE) guideline, MEDLINE, EMBASE, Cochrane library, and CINAHL electronic databases as well as reference lists of included studies were searched, without published date restriction. We used the Newcastle-Ottawa Scale to assess the quality of the observational studies in the systematic review, and the meta-analysis was performed using random effects models.

**RESULTS**

All of the included studies were published from 2008 to 2014, and the participants of this study were only Asians or Europeans. A total of 12 results from 5 studies were included in the meta-analysis. Overweight or obesity in early childhood was associated with a higher risk of adult metabolic syndrome compared with the controls. When confirmed in each age group (at birth, 0-2, and 2-6 years), there was a statistically significant difference before and after the age of 2 years. As a result of the meta-regression, when the age of the children increased, the effect size of adult metabolic syndrome for overweight or obesity also increased.

**CONCLUSIONS**

The results confirm that the etiology of metabolic syndrome includes long-term impacts from the early stage of life and indicate that early intervention for overweight or obesity is needed.

**RELEVANCE TO CLINICAL PRACTICE**

These findings could help community and
clinical health nurses recognize the risk of overweight or obesity in early life, and provide evidence to develop and implement

**Author(s):** Jane Wood, Elizabeth
**Source:** Nursing children and young people; Mar 2017; vol. 29 (no. 2); p. 26-31
**Publication Date:** Mar 2017
**Publication Type(s):** Journal Article
**Abstract:** A reluctance to diagnose asthma in children under three who have recurrent cough and wheeze causes delays in the commencement of appropriate asthma treatment. Timely inhaled corticosteroid use may reduce asthma exacerbations and unnecessary visits to the emergency department and GPs. To address this delay, an advanced nurse practitioner in one children’s community nursing team set up a respiratory assessment clinic for children under three who had recurrent respiratory difficulties. This article describes the rationale and the evidence base that supports a clinic of this kind and reports on its initial results.
**Database:** Medline

21. Community Palliative Care Nurses’ Challenges and Coping Strategies on Delivering Home-Based Pediatric Palliative Care.
**Author(s):** Chong, LeeAi; Abdullah, Adina
**Source:** The American journal of hospice & palliative care; Mar 2017; vol. 34 (no. 2); p. 125-131
**Publication Date:** Mar 2017
**Publication Type(s):** Journal Article
**Abstract:** The aim of this study was to explore the experience of community palliative care nurses providing home care to children. A qualitative study was conducted at the 3 community palliative care provider organizations in greater Kuala Lumpur from August to October 2014. Data were collected with semistructured interviews with 16 nurses who have provided care to children and was analyzed using thematic analysis. Two categories were identified: (1) challenges nurses faced and (2) coping strategies. The themes identified from the categories are (1) communication challenges, (2) inadequate training and knowledge, (3) personal suffering, (4) challenges of the system, (5) intrapersonal coping skills, (6) interpersonal coping strategies, and (7) systemic supports. CONCLUSIONSThese results reinforce the need for integration of pediatric palliative care teaching and communication skills training into all undergraduate health care programs. Provider organizational support to meet the specific needs of the nurses in the community can help retain them in their role. It will also be important to develop standards for current and new palliative care services to ensure delivery of quality pediatric palliative care.
**Database:** Medline

22. An evaluation of the costs and consequences of Children Community Nursing teams.
**Author(s):** Hinde, Sebastian; Allgar, Victoria; Richardson, Gerry; Spiers, Gemma; Parker, Gillian; Birks, Yvonne
**Source:** Journal of evaluation in clinical practice; Feb 2017
**Publication Date:** Feb 2017
Publication Type(s): Journal Article

Abstract: AIMS Recent years have seen an increasing shift towards providing care in the community, epitomised by the role of Children's Community Nursing (CCN) teams. However, there have been few attempts to use robust evaluative methods to interrogate the impact of such services. This study sought to evaluate whether reduction in secondary care costs, resulting from the introduction of 2 CCN teams, was sufficient to offset the additional cost of commissioning. METHODS Among the potential benefits of the CCN teams is a reduction in the burden placed on secondary care through the delivery of care at home; it is this potential reduction which is evaluated in this study via a 2-part analytical method. Firstly, an interrupted time series analysis used Hospital Episode Statistics data to interrogate any change in total paediatric bed days as a result of the introduction of 2 teams. Secondly, a costing analysis compared the cost savings from any reduction in total bed days with the cost of commissioning the teams. This study used a retrospective longitudinal study design as part of the transforming children's community services trial, which was conducted between June 2012 and June 2015. RESULTS A reduction in hospital activity after introduction of the 2 nursing teams was found, (9634 and 8969 fewer bed days), but this did not reach statistical significance. The resultant cost saving to the National Health Service was less than the cost of employing the teams. CONCLUSION The study represents an important first step in understanding the role of such teams as a means of providing a high quality of paediatric care in an era of limited resource. While the cost saving from released paediatric bed days was not sufficient to demonstrate cost-effectiveness, the analysis does not incorporate wider measures of health care utilisation and nonmonetary benefits resulting from the CCN teams.

Database: Medline


Author(s): Lipman, Terri H

Source: Journal of pediatric nursing; Jan 2017

Publication Date: Jan 2017

Publication Type(s): Journal Article

Database: Medline
Library Opening Times

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