

Safeguarding

Current Awareness Bulletin

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1. Working therapeutically with domestic abuse

Publication Date: 2024

Journal: Healthcare Counselling & Psychotherapy Journal 24(1), pp. 6

2. Co-defining WASH (In)Security challenges among people experiencing homelessness. A qualitative study on the Human Right to Water and Sanitation from Bonn, Germany

Authors: Anthonj, C.; Stanglow, S. N. and Grunwald, N.

Publication Date: 2024

Journal: Social Science & Medicine (1982) 342, pp. 116561

Abstract: Introduction: Access to safe and affordable drinking water, sanitation and hygiene (WASH) for all is needed to safeguard human health, high on societal and political agendas. According to official estimates, populations in high-income countries (HICs) are well served. Vulnerable communities at the margins of rich societies, including people experiencing homelessness, however, are often underserved and overlooked. For them, safe WASH is often a dream rather than reality. To date, no study has been conducted in Germany - one of the countries most affected in Europe.; Methods: We chose a qualitative mixed-method approach to understand WASH (in)security challenges that people experiencing homelessness are facing. Data were collected in Bonn, Germany, from 25 people experiencing homelessness (in-depth interviews, arts-based workshops, group discussions), their service providers (social workers), and (un)available public infrastructure (inspections), in 2023. Data were analyzed following the dimensions of the Human Right to Water and Sanitation (HRTWS): availability; accessibility; affordability; acceptability; quality and safety.; Results: People experiencing homelessness largely lack available, accessible, affordable, acceptable and safe WASH. Open urination and defecation are often the only alternative, resulting in substantial health risks and diseases. Women face particular challenges, especially while menstruating. Extreme weather events complicate existing WASH insecurity further, creating additional hardships for unhoused people and their service providers. The missed realization of the HRTWS has far-reaching consequences, making it harder to transition out of homelessness.; Conclusions: Much remains to be done to serve unhoused people in HICs better with WASH. Their experiences shed light on the underlying complexities, and the implications of different often interconnected challenges, including instability, mobility, preexisting diseases, mental health conditions and substance use disorder. Different insecurities exist among different sub-groups (e.g. women, people with limited mobility). They are valuable key informants for targeted health messaging and interventions. (Copyright © 2024 The Authors. Published by Elsevier Ltd.. All rights reserved.)

3. Cross-Generational Transmission of Intimate Partner Violence: The Role of Direction and Dynamics

Authors: Bailey, Benjamin and Turjeman, Hagit

Publication Date: 2024

Journal: Partner Abuse 15(1), pp. 22-40

Abstract: Studies of the cross-generational transmission of intimate partner violence (IPV) have yielded controversial findings about the centrality of child abuse (CA) and child exposure to parental violence (EIPV) as a risk factor for interpersonal violent relationships in adulthood. This cross-sectional study examines the intergenerational cycle of IPV by differentiating the gender of the parent and the directionality of violence. The purpose of the study was to test (a) the prevalence of the three patterns of IPV as suggested in Straus's (2015) Dyadic Type's typology (e.g., man only, woman only, or both) for both CA and EIPV; (b) the relevance of the Dyadic Type's Typology of IPV on the cross-

generational transmission of IPV; and (c) whether the gender of the violent parent has any differential effect on the cross-generational transmission of IPV. A total of 1,196 Israeli Jewish and Arab students completed a cross-sectional self-report questionnaire, retrospectively addressing CA and EIPV in their childhood family environment and their own IPV experience as adults. Our findings show that among families in which any one of the three violent dyads took place, the involvement of both parents in the violent dyad is the prevalent one and raises the highest risk for cross-generational transmission of IPV in adulthood. Utilizing the Dyadic Type's typology proved insightful in mapping the prevalence of CA, EIPV, and IPV in three ways: (a) it more accurately maps the prevalence of the different IPV dynamics than does the "dichotomous lens," (b) it highlights the interactive violent dynamic as the prevalent one, and (c) it shows that exposure to aggression by both parents seems to be the strongest predictor of cross-generational transmission of IPV. Overall, the present study contributes to the developing understanding of interactions between retrospectively reported experiences of exposure to IPV and one's own current behavior.

4. Safeguarding the "Internet of Things" for Victim-Survivors of Domestic and Family Violence: Anticipating Exploitative Use and Encouraging Safety-by-Design

Authors: Brown, Andi;Harkin, Diarmaid and Tanczer, Leonie Maria

Publication Date: 2024

Journal: Violence Against Women , pp. 10778012231222486

Abstract: Smart, Internet-connected devices-the so-called "Internet of Things" (IoT)-pose significant threats to victim-survivors of domestic and family violence (DFV). IoT systems have been used to abuse, harass, monitor, intimidate, and gaslight victim-survivors. We present findings from an abusability analysis that examined 13 IoT devices and allowed us to make several observations about common vulnerabilities to victim-survivors of DFV. We argue that IoT manufacturers must be encouraged to factor in the implications of DFV in the design of their products. Additionally, technology-facilitated abuse in DFV contexts must feature in industry and government safety-by-design approaches. Our results suggest ways IoT devices can be modified at low cost to alleviate opportunities for misuse, and we endorse IoT manufacturers to consider those risks early in the design stage.; Competing Interests: Declaration of Conflicting InterestsThe authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

5. Child abuse and neglect during the COVID-19 pandemic: An umbrella review

Authors: Carsley, Sarah;Thomas, Sera;Oei, Tiffany;Smith, Brendan;Harrington, Daniel;Pike, Ian;Macpherson, Alison K. and Richmond, Sarah A.

Publication Date: 2024

Journal: Child Abuse & Neglect 149, pp. 106645

Abstract: Background: During the COVID-19 pandemic, multiple child health experts postulated that the stay-at-home orders would negatively impact child abuse and neglect.; Objectives: We aimed to examine the impact of the COVID-19 pandemic on child abuse and neglect in children ages 18 and under; and review author recommendations for future emergency lockdown procedures.; Methods: We completed a systematic search of articles across five databases. Review-level studies were included if they examined any abuse or neglect related outcomes in children and youth (e.g., injuries, case openings), and were published in English. We completed quality appraisals of each included article using the Health Evidence™ tool. We categorized the findings by data source including administrative and survey data, or other data sources. We also narratively summarized reported recommendations.; Results: In total, 11 reviews were included. Two reviews were of strong quality, 7 moderate, and 2 were weak. Overall, studies within reviews that reported from administrative data sources demonstrated decreased child abuse and neglect outcomes compared to before the pandemic. Studies using cross-

sectional data demonstrated increases. Reviews with mixed results often reported increases in emotional, neglect and psychological abuse cases and decreases physical and sexual abuse cases.; Conclusions: This study found consistent results across reviews; depending on the data source and study design, child abuse and neglect outcomes either increased or decreased during the COVID-19 pandemic. Future work should enhance data collection methods for surveillance and intervention of child abuse and neglect during public health emergencies when traditional mechanisms are limited, with an increased focus on the rigor of reporting.; Competing Interests: Declaration of competing interest The authors of this work have no conflicts of interest to declare. (Copyright © 2024. Published by Elsevier Ltd.)

6. Working in safeguarding: the consultant paediatrician

Authors: Dean, Erin

Publication Date: 2024

Journal: BMJ (Clinical Research Ed.) 384, pp. q44

7. COVID-19 adaptations to a training and support programme to improve primary care response to domestic abuse: a mixed methods rapid study

Authors: Downes, Lucy and Barbosa, Estela Capelas

Publication Date: 2024

Journal: BMC Primary Care 25(1), pp. 1-12

Abstract: Background: Increased incidence and/or reporting of domestic abuse (DA) accompanied the COVID-19 pandemic. National lockdowns and enforced social isolation necessitated new ways of supporting victims of DA remotely. Identification and Referral to Improve Safety (IRIS) is a programme to improve the response to domestic abuse in general practice, providing training for general practice teams and support for patients affected by DA, which has previously been proven effective and cost-effective [1–3]. The COVID-19 pandemic required the adaptation of the programme to online training and remote support. Methods: This study is mixed methods rapid research, which aimed to gather evidence around the relevance, desirability and acceptability of IRIS operating remotely. Quantitative IRIS referral data were triangulated with data from four surveys and 15 interviews. Participants were local IRIS teams, IRIS-trained clinicians, and victim-survivors supported by IRIS services. The study was designed using the Lean Impact approach, allowing quick evaluation of innovation and the impact of social interventions. We carried out a framework analysis of the interviews, which is a qualitative methodology widely used in policy and applied research that enables research teams to move from descriptive accounts to a conceptual explanation of findings [4, 5]. Results: We found that the adaptation to online training and support of IRIS was acceptable and desirable. Most clinicians felt confident addressing DA over the phone and online, although most were more confident face-to-face. While referrals to IRIS services initially declined in March 2020, numbers of referrals increased to pre-pandemic levels by July 2020. Patients felt well supported remotely, although patients who had previously experienced face-to-face support preferred it. Technology was the most frequently mentioned barrier to the change from face-to-face training and support to online training and remote support. Conclusions: This study contributes to practice by asserting the desirability and acceptability of training clinicians to be able to identify, ask about DA and refer to the IRIS programme during telephone/online consultations. This is of relevance to health and public health commissioners when making commissioning decisions to improve the general practice response to domestic abuse.

8. Sharenting: hidden pitfalls of a new increasing trend- suggestions on an appropriate use of social media

Authors: Gatto, Antonio;Corsello, Antonio and Ferrara, Pietro

Publication Date: 2024

Journal: Italian Journal of Pediatrics 50(1), pp. 15

Abstract: Background: The term "sharenting", defining the practice of sharing children's photos on social media, has become widespread globally. This phenomenon introduces new risks for children, often overlooked by parents lacking experience or caution in protecting their children from potential harms.; Main Body: Parents share multimedia contents with positive intentions, but the lack of immediate risk perception prevails. An Italian study revealed that a significant percentage of parents (68%) frequently share their children's photos on social platforms, often without considering potential risks. Pediatricians play a crucial role in raising awareness among parents regarding the dangers associated with online sharing and must empower families with defensive strategies to safeguard children's privacy.; Conclusions: The commentary emphasizes the need for increased parental assistance in comprehending the risks of sharenting and using social media prudently. Pediatricians are pivotal in guiding parents, striking a balance between the natural urge to share children's progress and an awareness of associated risks. Immediate action by scientific societies involves training and informing parents through various digital and print resources. A concrete regulation of this phenomenon is needed to protect children's rights, but prioritizing digital awareness and education seems pivotal in mitigating sharenting-related risks. (© 2024. The Author(s).)

9. Recognition, prevention and management of 'digital harm'

Authors: Joustra, Arthur;Quinn, Lauren and Walker, Vicki

Publication Date: 2024

Journal: Archives of Disease in Childhood.Education and Practice Edition

Abstract: The digital world continues to evolve and is apparent in all aspects of daily life. For children and young people, their online life is as real to them as their in-person life. Health professionals urgently need to update their knowledge and awareness of the positive and negative impacts of the myriad of online content and how this is viewed and used by children and young people. Digital harm can contribute to multiple clinical presentations and paediatricians must ask about online life in consultations and be able to provide holistic digital safety advice, while recognising serious digital harm requiring safeguarding input.This article will introduce the main areas of harm and how to include assessment in routine clinical practice. It will equip paediatricians to offer advice and safeguard children and young people and offer resources and links to further learning.; Competing Interests: Competing interests: None declared. (© Author(s) (or their employer(s)) 2024. No commercial re-use. See rights and permissions. Published by BMJ.)

10. Adverse Childhood Experiences and Related Events are Associated with Asthma Symptoms in Children

Authors: Martinez, Adali;Ye, Morgan;Hessler, Danielle;de la Rosa, Rosemarie;Benson, Mindy;Gilgoff, Rachel;Koita, Kadiatou;Bucci, Monica;Harris, Nadine Burke;Long, Dayna and Thakur, Neeta

Publication Date: 2024

Journal: Academic Pediatrics

Abstract: Objective: To examine the association between adverse childhood experiences (ACEs) and

related events and asthma symptom burden in children.; Methods: This is a cross-sectional study of baseline data from 147 participants with asthma from a cohort of children enrolled in the Pediatric ACEs Screening and Resiliency Study. Participants completed the PEdiatric ACEs and Related Life Events Screener (PEARLS) tool, a 17-item questionnaire, capturing 3 domains of childhood adversity-child maltreatment, household challenges, and social context. Asthma symptom burden was assessed using the International Study of Asthma and Allergies in Childhood core questionnaire, which asks participants to identify the presence and frequency of severe wheezing that limits speech, wheezing with exercise, nocturnal wheezing, and nocturnal cough in the last 12 months. Using multivariable logistical regression models, we examined the relationship between reported PEARLS and asthma symptoms.; Results: Of children with asthma, 86% reported at least 1 adversity, with 48% reporting 4 or more. The odds of severe wheeze limiting speech increased by 19% with each additional reported adversity captured by the PEARLS tool (95% confidence intervals (CI) 1.01-1.41). Increasing PEARLS scores were also associated with 16% increased odds of reporting wheeze with exercise (95% CI 1.03-1.31). Wheezing with exercise was associated with the household challenges domain (odds ratio (OR) 1.34; 95% CI 1.05-1.72), while severe wheeze limiting speech was associated with the social context domain (OR 1.75; 95%CI 1.02-3.02).; Conclusions: Childhood adversities are associated with increased asthma symptom burden, suggesting the tool may be helpful in identifying children at risk for poorly controlled asthma.; Competing Interests: Declaration of Competing Interest The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper. (Copyright © 2024. Published by Elsevier Inc.)

11. Congenital depressed skull fracture ("ping-pong" fracture) in newborn infants as a differential diagnosis of physical abuse

Authors: Morikone, Alicia and Mouesca, Juan Pablo

Publication Date: 2024

Journal: Archivos Argentinos De Pediatria , pp. e202310139

Abstract: Depressed skull fractures without a clear explanation as to their origin point to trauma with a blunt object and suspected child abuse. In the case of newborn infants, their young age is a vulnerability factor and requires an exhaustive assessment. When child abuse is suspected, an assessment of the differential diagnoses is required to make the most appropriate intervention possible. Both an excessive intervention and an omission of a necessary intervention should be avoided. Congenital depressed skull fractures, described as "ping-pong fractures", are rare (0.3 to 2/10 000 births). They may appear without any trauma history or in instrumentalized childbirth. Here we describe the case of a newborn infant with a ping-pong fracture as an example of an accidental fracture. (Sociedad Argentina de Pediatría.)

12. Now you see them, now you don't: Professional recognition of specialist professionals working with Deaf British Sign Language parents in child safeguarding

Authors: Oram, Rosemary;Young, Alys and Cartney, Patricia

Publication Date: 2024

Journal: Qualitative Social Work 23(1), pp. 91-107

Abstract: This paper concerns parenting assessments which are integral to child-safeguarding professional processes in England, and which involve Deaf parents whose primary language is British Sign Language (BSL). In an under-researched area of social work, the research aim was to contribute to the existing literature by eliciting the practice wisdom of specialist professionals. Specifically, it draws upon their linguistic and cultural knowledge of the Deaf community when they are involved in parenting assessments with Deaf parents who are subject to safeguarding concerns. Data about these professionals' actual experiences of navigating Deaf cultural-competency in contemporary child

protection practices were collected through seven video-recorded, semi-structured interviews conducted in BSL. Using interpretive phenomenological analysis, data were analysed in their source language (BSL). This article focusses on one key theme, termed 'Professional Recognition', which incorporates a) the identification of specialist roles and b) the impact of referral processes and protocols on assessment outcomes. The findings highlight participants' perspectives on the benefits and disadvantages of their specialist role in this context. Although their brokerage skills, cultural competence, linguistic fluency and specialist knowledge of the Deaf community are highly regarded and valued by some colleagues, there is insufficient recognition of their existence by the majority. Secondly, participants are concerned by the inefficiency and inconsistency of the referral processes and protocols which they consider have adverse effects on assessment outcomes, and consequently the parents involved.

13. The effect of child abuse and neglect prevention program on awareness levels and child abuse potential of pregnant women: A randomized controlled study

Authors: Özçevik Subaşı, Damla and Ferda Ocağcı, Ayşe

Publication Date: 2024

Journal: Children & Youth Services Review 157, pp. N.PAG

Abstract: • The SCT-based CANPP has been shown to be effective in reducing the potential for child abuse among pregnant women. • The SCT-based CANPP has been shown to be effective in raising awareness of child abuse and neglect among pregnant women. • The positive effects of SCT-based CANPP persisted three months after the intervention, demonstrating the lasting impact of the programme on sustained awareness and reduced potential for child abuse. The aim of this study is to determine the effect of the Child Abuse and Neglect Prevention Program (CANPP) based on Social Cognitive Theory (SCT) on the awareness levels and child abuse potential of pregnant women. This randomized controlled study was conducted between July and December 2022 in a family health center of Aydın/Turkey with the participation a total of 30 pregnant women, who were then distributed into two groups as 15 experiment group and 15 control group pregnant women. The participants in the experiment group were applied SCT-based CANPP whereas no intervention was applied to the control group. Research data were collected before the intervention, one month after the intervention, and three months after the intervention using the Pregnant Data Collection Form, Child Neglect and Abuse Awareness Scale for Parents (CNAASP) and Child Abuse Potential Inventory (CAPI). Chi-Square and Fisher exact tests, independent groups t -test and repeated measures ANOVA test were used in the statistical analysis of the research data. The groups were homogeneously distributed in terms of the descriptive characteristics of pregnant women. Post-test and re-test total CNAASP scores of the experiment group increased significantly compared to the pre-test ($p < 0.05$). After the intervention, CNAASP total scores of the experiment group were found to be significantly higher compared to the control group. Furthermore, post-test and re-test CAPI scores of the experiment group increased significantly compared to pre-test ($p < 0.05$). The SCT-based CANPP has been shown to be effective in raising the awareness of pregnant women and reducing their child abuse potential. The application of SCT-based CANPP to pregnancy groups with a similar population can be used with the aim of increasing their awareness and reducing their potential for abuse.

14. Review of children's safeguarding services in a sexual health clinic: Should they be seen alone?

Authors: Raychaudhuri, Malini and Howe, Heather

Publication Date: 2024

Journal: International Journal of STD & AIDS 35(1), pp. 74-75

Abstract: Competing Interests: Declaration of conflicting interestsThe author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

15. Impact of a Parent Education Program Delivered by Nurses and Health Care Providers in Reducing Infant Physical Abuse Hospitalization Rates in British Columbia, Canada

Authors: Sadler, Karen;Rajabali, Fahra;Zheng, Alex;Jain, Nita and Pike, Ian

Publication Date: 2024

Journal: Canadian Journal of Nursing Research 56(1), pp. 109-116

Abstract: Background: The Period of PURPLE Crying Program® (PURPLE) is a universal parent education program that is delivered by nurses and health care providers to all parents/caregivers of newborns in British Columbia (B.C.). The aim of the program is to reduce the incidence of Traumatic Head Injury -Child Maltreatment (THI-CM), a form of child physical abuse. Objective: To determine if the PURPLE program had an impact on the rate of physical abuse hospitalizations for children less than or equal to 24 months of age in B.C. since implementation in 2009. Methods: The analysis measured physical abuse hospitalization rates for the period January 1, 1999 to December 31, 2019 and excluded any cases of confirmed Traumatic Head Injury-Child Maltreatment. Data were divided into pre-implementation period January, 1999 to December, 2008, and post-implementation period January, 2009 to December, 2019. Data were obtained from the Discharge Abstract Database and B.C. THI-CM Surveillance System to capture information on infant child abuse. Poisson regression and ANCOVA was applied to model the change in rates pre and post program implementation. Results: Physical abuse hospitalization rates decreased by 30% post-implementation period (95% CI: -14%, 57%, $p = 0.1561$). The decreasing linear trend in the post-implementation period was significantly different than the increasing linear trend in the pre-implementation period ($F_{1,17} = 4.832$, $p = 0.042$). Conclusions: Nurses' role in engaging parents in conversations about PURPLE messages over multiple timepoints within a structured universal program model resulted in a decrease in physical abuse hospitalization rates since the implementation of PURPLE.

16. Natural Language Processing -- A Surveillance Stepping Stone to Identify Child Abuse

Authors: Shum, May;Hsiao, Allen;Teng, Wei;Asnes, Andrea;Amrhein, Joshua and Tiyyagura, Gunjan

Publication Date: Jan ,2024

Journal: Academic Pediatrics 24(1), pp. 92-96

Abstract: OBJECTIVE: We aimed to refine a natural language processing (NLP) algorithm that identified injuries associated with child abuse and identify areas in which integration into a real-time clinical decision support (CDS) tool may improve clinical care. METHODS: We applied an NLP algorithm in "silent mode" to all emergency department (ED) provider notes between July 2021 and December 2022 ($n = 353$) at 1 pediatric and 8 general EDs. We refined triggers for the NLP, assessed adherence to clinical guidelines, and evaluated disparities in degree of evaluation by examining associations between demographic variables and abuse evaluation or reporting to child protective services. RESULTS: Seventy-three cases falsely triggered the NLP, often due to errors in interpreting linguistic context. We identified common false-positive scenarios and refined the algorithm to improve NLP specificity. Adherence to recommended evaluation standards for injuries defined by nationally accepted clinical guidelines was 63%. There were significant demographic differences in evaluation and reporting based on presenting ED type, insurance status, and race and ethnicity. CONCLUSIONS: Analysis of an NLP algorithm in "silent mode" allowed for refinement of the algorithm and highlighted areas in which real-time CDS may help ED providers identify and pursue appropriate evaluation of injuries associated with child physical abuse.

17. Effectiveness of Parent-Child Interaction Therapy for Maltreated Families: A Meta-Analysis of Randomized Controlled Trials

Authors: Zhang, Huiping; Wang, Weiwei and Li, Zihui

Publication Date: 2024

Journal: Trauma, Violence & Abuse , pp. 15248380231222041

Abstract: This meta-analysis evaluated the effectiveness of Parent-Child Interaction Therapy (PCIT) for maltreated families and examined potential moderators associated with the intervention. Seven English electronic databases (PubMed, PsycINFO, Web of Science, MEDLINE, Scopus, Cochrane Library, and ProQuest Dissertations and Theses Global) were systematically searched to identify randomized controlled trials (RCTs) published before January 20, 2023. Eleven studies involving 1,069 maltreated or high-risk families were included in the meta-analysis. Our results showed that PCIT significantly reduced child externalizing behaviors, improved parenting skills, and decreased parenting stress and child abuse potential in maltreated families. Additionally, families with confirmed maltreatment history reported larger effect sizes across all outcomes than those at high risk of maltreatment; parenting skills outcomes were more effective in adapted PCIT versions, using per-protocol analysis, and American caregivers, whereas none of the outcomes were related to the number of sessions. These findings provide encouraging evidence for the use of PCIT as an intervention for families with a history of maltreatment, although more high-quality RCTs are required to confirm its effects.; **Competing Interests:** Declaration of Conflicting Interests The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

18. Safeguarding adults at risk of abuse

Authors: Duffy, Anita

Publication Date: 2023

Journal: Nursing Standard (Royal College of Nursing (Great Britain) : 1987)

Abstract: Safeguarding adults at risk of abuse presents complex ethical challenges. By knowing what counts as adult abuse, recognising the signs of adult abuse and appropriately addressing suspected adult abuse, nurses contribute to protecting patients' safety, well-being, autonomy and dignity. This article discusses categories and indicators of adult abuse, relevant legislation and standards, the principles of adult safeguarding and the key elements of a nursing assessment of suspected adult abuse. The author highlights that nurses need to approach safeguarding concerns sensitively and strike a balance between acting to safeguard the person and preserving their right to autonomy. There is a need for ongoing education and training to enhance nurses' understanding of safeguarding practices, legislation, policies and standards.; **Competing Interests:** None declared (© 2024 RCN Publishing Company Ltd. All rights reserved. Not to be copied, transmitted or recorded in any way, in whole or part, without prior permission of the publishers.)

Sources Used:

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