

This bulletin is produced weekly by The Information Point
Tel: (01622) 694125,
Freecall: 7000 4125
E-mail: TheInformationPoint@kent.gov.uk
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Health in Kent

Paul Carter has written in the *Local Government Chronicle (LGC)* about the Kent Health Commission and the role local authorities can play in shaping the health and social care landscape.

The interim findings, which have been submitted to the Department of Health, recommend that there should be a move of at least 5% of activity from acute to primary and community health which would release around £59m across Kent for the development of new community services.

If you would like to see a copy of [this article](#) please contact The Information Point.

The Children's Commissioner has produced a report on the findings from an investigation in 2011 about unaccompanied children arriving in Kent.

The report 'Landing at Dover: the immigration process undergone by unaccompanied children arriving in Kent' follows on from the Children's Commissioner's earlier report Landing in Kent and focuses on immigration procedures to which unaccompanied children arriving in Kent are subject between their first encounter with the authorities and the time they are placed in the care of Kent County Council children's social care services.

To read the report, see the [publications](#) page of the Children's Commissioner: website.

See also:

[Lone child migrants returned to France under secret deal](#)

See also:

The Centre for Social Justice has published a response to yesterday's report by the Children's Commissioner: *Landing at Dover*

Gavin Poole, Executive Director of the CSJ, says that while the report has rightly placed child trafficking in the spotlight, it is important that changes also be made to protect adults.

Read: [Every trafficked adult and child should have the chance to tell their story](#)

Department of Health

The Department of Health (DOH) has published the latest monthly statistical data on NHS referral to treatment waiting times.

The [‘Referral to Treatment Waiting Times Statistics’](#) relate to Primary Care Trusts, Strategic Health Authorities and NHS Trusts in England. Key points from the latest release are:-

In total, 326,553 admitted patients and 941,520 non-admitted patients, for whom English commissioners are responsible, completed their RTT pathway during November 2011.

91.0% of admitted patients (measured on an adjusted basis) and 97.0% of non-admitted patients completed their RTT pathway within a maximum of 18 weeks.

The average (median) time waited for patients completing an RTT pathway in November 2011 was 8.1 weeks for admitted patients and 4.0 weeks for non-admitted patients.

For patients still waiting for treatment (incomplete pathways) at the end of November 2011, the median waiting time was 5.7 weeks and the 95th percentile was 22.8 weeks.

See: [Referral to treatment waiting time statistics \(admitted patients, non-admitted patients and incomplete RTT times\) for November 2011](#)

The Department of Health (DOH) has released a policy framework for a new approach to workforce planning and the education and training of the health workforce.

The report [‘Liberating the NHS: developing the healthcare workforce: from design to delivery’](#) puts employers and professionals in the driving seat and gives them the national support they need to identify and anticipate the key workforce challenges, and to be flexible and responsive in planning and developing their workforce.

See: [New approach to education and training published](#)

Government

The Department for Work and Pensions (DWP) has launched a consultation on the second draft of the assessment criteria for the proposed new Personal Independence Payment (PIP) for disabled people.

The consultation [‘Personal Independence Payment: assessment thresholds and Consultation’](#) sets out more information on the second draft of the PIP assessment criteria, particularly on entitlement thresholds, impact modelling and case studies, and includes the consultation on the criteria.

See also: [Personal Independence Payment: assessment thresholds and consultation](#)
Period of consultation: 16th January – 2nd April 2012

The Government has accepted new recommendations from NHS Future Forum
Andrew Lansley, Secretary of State for Health will implement proposals from the NHS Future Forum to try to turn the NHS from a service that treats illness to one that does much more to prevent ill-health and promote healthy habits.

The Minister will oblige NHS staff to ‘make every contact count’ and ask patients about their lifestyles, including smoking, drinking, diet and physical activity.

See: [NHS Future Forum calls on healthcare professionals to lead way on patient-centred care](#)

[Government accepts new recommendations from NHS Future Forum](#)

[Andrew Lansley backs plan for NHS staff to question patients on lifestyles](#)

The Government has responded to the Communities and Local Government Select Committee report on localisation issues in welfare reform.

The report '[Government response to the Communities and Local Government Select Committee's Report: Localisation issues in Welfare Reform](#)' argues that It said that local authorities were in the best position to determine and support the needs of local vulnerable people and to provide services tailored to a locality's requirements.

The Princess Royal Trust for Carers reports that in advance of a proposed White Paper on Social Care, the Government are meeting their Opposition counterparts to discuss how to improve social care in Britain.

The Shadow Health Secretary Andy Burnham argues that 'as a first step' the major Dilnot Commission recommendation of a ceiling on fees paid by individuals should be implemented, whereas the Government are undecided.

The PRTC argue that carers and families from across England should take action to push for these changes.

See: [Government and Opposition meet on social care](#)

Parliament

Grant Shapps, Minister for Housing and Local Government has released a Written Ministerial Statement on 17 January 2012.

In the [Written Ministerial Statement](#), the Minister announces the local authority allocations of the £20 million additional funding for the Disabled Facilities Grant in England.

HOUSE OF COMMONS

Tuesday, 10th January 2012.

Main Chamber

Debates and Oral Answers

[Health](#)

[Hospital volunteers](#)

[Access to drugs](#)

[Paediatric cardiac services](#)

[Cancer drugs fund](#)

Written Ministerial Statement

[NHS Future Forum](#)

Written Answers

[NHS reorganisation cost](#)

[Early access scheme](#)

[Whistleblowing](#)

[Access to drugs](#)

[Excess winter deaths](#)

[Patient data](#)

[A and E departments](#)

[brain cancer](#)

[Care quality commission: recruitment](#)

[carers: finance](#)
[Computer sciences corporation](#)
[Debt collection](#)
[Disability: children](#)
[Doctors: retirement](#)
[drugs: licensing](#)
[Dystonia](#)
[Electro-convulsive therapy](#)
[General practitioners](#)
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[Injuries: dogs](#)
[Medicines and healthcare products regulatory agency: redundancy](#)
[Mental health services](#)
[Muscular dystrophy](#)
[Neurology](#)
[NHS](#)
[NHS: drugs](#)

Wednesday 11th January 2012.
Main Chamber

Debates and Oral Answers

[Breast implants](#)

Written answers

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[Hearing impaired: children](#)

[Meningitis: vaccination](#)

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Thursday, 12th January 2012.

Main Chamber

[Domestic violence](#)

[Dieting](#)

[Violence against disabled people](#)

Written Statements

[Health and Criminal Justice Liaison and Diversion Programme](#)

Written Answers

[Cancer: health services](#)

[General practitioners: pharmacy](#)

[General practitioners: waiting lists](#)

[Health services: children](#)

[Health services: EU countries](#)

[Influenza: vaccination](#)

[Plastic surgery](#)

Monday, 16th January 2012

Main Chamber

[Children in care](#)
[NHS \(private sector\)](#)

Written Answers

[Alcoholic drinks: misuse](#)
[Cardiovascular system: diseases](#)
[Care quality commission: manpower](#)
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[Eyesight: children](#)
[General practitioners: contracts](#)
[Haemolytic uremic syndrome: drugs](#)
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[Heart diseases: young people](#)
[Hospital beds](#)
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[Prescription drugs: prices](#)
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Tuesday 17th January 2012
Main Chamber

Debates and Oral Answers

[Midwife and maternity services](#)
[Sexual offences \(amendment\)](#)

Westminster Hall

[Sexual offences \(amendment\)](#)

Written Answers

[Baby care units: nurses](#)
[Baby care units: standards](#)
[Bone diseases](#)

[Children: health](#)
[Circle health](#)
[employment agencies](#)
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[Family planning: finance](#)
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[Melanoma](#)

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[Alzheimer's disease: drugs](#)
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Thursday, 19th January 2012.
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[Ambulance services: private sector](#)
[Benzodiazepines](#)

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[Prescriptions](#)
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[Third sector](#)

HOUSE OF LORDS

Tuesday, 10th January 2012.

Main Chamber

[Health:Influenza Vaccination](#) – Question

Written Statements

[DisabledPeople: Blue BadgeScheme](#) – Statement

[Health:BreastImplants](#) – Statement

[NHS:FutureForum](#) - Statement

Written Answers

[Abortion](#) – Questions

[Embryology](#) – Questions

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[Healthand Safety:Prosecutions](#) - Question

[HealthProtectionAgency](#) - Question

[Health:AnthraxVaccine](#) - Questions

[Health:Complementary and AlternativeMedicines](#) - Questions

[Health:Costs](#) - Questions

[Health:Creutzfeldt-JacobDisease](#) - Question

[Health:Dermatology](#) - Questions

[Health:Orthopaedics](#) - Question

[Health:StatutoryBodies](#) - Question

Wednesday, 11th January 2012.

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[Welfare Reform Bill](#) - *Report (3rd Day)*

[EU: Healthcare](#) - Question for Short Debate

Thursday, 12th January 2012.

Debates and Oral Answers

[Health: Pathfinders](#) – Question

[Health: Breast Cancer](#) - Question

Written Statements

[Health and Criminal Justice](#) – Statement

[Welfare Reform Bill](#) - Statement

Written Answers

[Antibiotic Resistance Plasmids](#) – Question

[Disabled People: Grants](#) - Question

Monday, 16th January 2012.

Debates and Oral Questions

[Health: End-of-life Care](#) – Question

Written Answers

[NHS: Clinical Commissioning Groups](#) - Question

Tuesday, 17th January 2012.

Debates and Oral Answers

[Welfare Reform Bill](#) - Report (4th Day)

Written Answers

[Employment: Sickness Absence](#) – Questions

[Health: Anthrax Vaccine](#) - Questions

Wednesday, 18th January 2012.

Debates and Oral Questions

[NHS: Transition Risk Register](#) – Question

Written Answers

[Assisted Dying](#) - Question

[Carbon Monoxide Poisoning](#) - Question

Thursday 19 January 2012

Debates and Oral Answers

[Health and Social Care Bill](#) - Question

[Violence against Women](#) - Question

Written Answers

[Smoking](#) - Question

[Health: Gender Reassignment](#) – Question

Care Quality Commission

The Care Quality Commission (CQC) has released a press release that argues that all independent clinics and hospitals that provide cosmetic surgery must be licensed with CQC to provide services.

See: [Cosmetic surgery](#)

Other Health Information

Health and council social care chiefs have admitted that integrating their structures will take longer than planned and that they should focus on 'sharing culture and values' instead.

A joint statement from the [NHS Confederation](#) and the [Association of Directors of Adult Social Services](#) (ADASS) says that "integration should be thought about more in terms of cultures, behaviours and values rather than formal structural integration of organisations."

NHS Confederation deputy policy Jo Webber said: "There is wide consensus that integrating care is a good for patients and offers more efficient care. But people have

been talking about this for a long time. Making this happen on any kind of significant scale across the system has proven more elusive than garnering positive statement of principle." See also: [Health and care integration "proving elusive"](#)

Stonewall has published the Top 100 Employers 2012 list, which showcases Britain's best employers for lesbian, gay and bisexual staff.

In the survey, Ernst & Young tops the list, with the Home Office in second place and Barclays third. See: [Stonewall top 100 employers: work\[place equality index](#)

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A report from the Organisation for Economic Co-operation and Development (OECD) examined future changes in family and household structures in developed (OECD) countries.

The report 'The Future of Families to 2030' identified what appeared to be the main forces shaping the family landscape over the period to 2030.

In addition, the report discusses the longer-term challenges for policy arising from those expected changes and suggests policy options for managing the challenges on a sustainable basis.

See: [The future of families to 2030: summary](#)

The National Development Team for inclusion has released a paper arguing that the development of payment by results could be in contention with the delivery of personalisation in mental health.

The report '[Getting it together for mental health care: Payment by Results, personalisation and whole system working](#)' argues that the paper considers how the two policy initiatives of Payment by Results (PbR) and personalisation need to be developed in tandem with one another, and in the context of whole system.

The Smith Institute has released a report which examines the long-term effectiveness of strategies to reduce poverty and inequality.

The report '[From the Poor Law to Welfare to Work: what have we learned from a century of anti-poverty policies?](#)' argues that the evaluation of anti-poverty policies which the report offers is intended to inform current debate on how to eradicate poverty and reduce inequalities.

See: [Increasing the bargaining power of today's workforce is essential to reducing poverty](#)

Andrew Dilnot has written an article in the *Daily Telegraph* about attitudes to social care.

The article argues that public policy over the last 60 years has failed to create proper and effective systems to deliver care.

See: [Let's take the fear out of paying for elderly care](#)

[State to help elderly downsize as Government tackles housing crisis](#)

A new study argues that computerised exercise games could have more cognitive benefits for older people than traditional exercise.

The study published in the American Journal of Preventive Medicine cites the New York-based research over two years involving 63 adults aged 58-99 years old over two years. The researchers found that participants who used a 'cybercycle' incorporating a virtual reality display had significantly better cognitive function.

See: [Virtual reality exercise games could be better than regular exercise for the brain](#)

Barnardos has marked the first anniversary of the [Cut them free](#) campaign to stop child exploitation.

But Barnardos argue that only a quarter of local safeguarding children boards in England are implementing Government guidance on sexual exploitation appropriately, and a report released by University of Bedfordshire '[What's going on to safeguard children and young people from sexual exploitation](#)' indicates that in many communities around the country, little is happening to protect victims of child sexual exploitation and in some areas budget cuts are leading to the issue being downgraded. See: [Little is happening to protect child sex victims](#)

A study indicates that falls are increased if patients are taking two or more prescription drugs.

The research carried out by Auckland University indicates that the prevalence to fall is not necessarily linked to a person's age, but that the use of multiple prescription medications will put patients at an increased risk of falls.

See: [Double dosage 'can raise risk of falls'](#)

The charity Mind has criticised the Government's proposed eligibility thresholds for the new Personal Independence Payment (PIP) which will replace Disability Living Allowance (DLA).

Mind argues that for patients with mental health issues would not qualify for the mobility component of PIP, and argues that the Government should delay the introduction of the PIP components so that an independent report on the proposals can be carried out before the benefit is introduced, which would accurately assess the suitability of the benefit for people with mental health problems.

[Mind warns that new benefit risks trapping people with mental health problems at home](#)

Two major health unions have now said that they want the Health & Social Care Bill dropped.

The Royal College of Nursing and the Royal College of Midwives had previously been willing to work alongside the Government, but have pulled out as they were not seeing any progress made on the changes they thought should be made. Although it feels that withdrawing the Bill would cause chaos, the RCN feels that going ahead with it would be even worse, and its General Secretary said that it had decided "the

consequences of the bill may be entirely different from the principles which were originally set out". See: [BBC Health News](#)

The Health and Safety Executive (HSE) has released a study which reviews the evidence on the reliability and validity of workers' self-reported work-related ill health.

The report '[Review on the validity and reliability of self-reported work-related illness](#)' argues that little is known on the validity of self-reports used to measure work-related illness, but Self-report is an efficient and accepted means of assessing population characteristics, risk factors, and diseases and is frequently used in occupational health studies. '

The Health and Safety Executive (HSE) has released violence at work statistics taken from the British Crime Survey and Reporting of Injuries, Diseases and Dangerous Occurrences Regulations data for 2010-11.

The release indicates that the number of violent incidents at work shows a downward trend over the last decade, with incidents remaining fairly constant over the last five years.

Findings from the British Crime Survey (BCS) and RIDDOR data show that in 2010/11:

There were an estimated 313 000 threats of violence to British workers during the 12 months prior to the interviews, down 15% from the previous year (BCS).

There were an estimated 341 000 physical assaults to British workers during the 12 months prior to the interviews, up 10% from the previous year (BCS).

An estimated 43% of all people assaulted or threatened at work were repeat victims (BCS).

According to BCS data, the highest risk age group for work related violence for men was 25-34, whereas for women it was 55-59 (BCS).

There were 6 078 reportable injuries to employees caused by violence at work, down 0.4% from the previous year (RIDDOR).

See: [Violence at work](#)

TheInformationPoint@kent.gov.uk

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