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## Health Overview and Scrutiny Committee Bulletin No. 03 / 15 January 2010

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**The Conservative Party has launched its new health Green Paper which proposed decentralising initiatives such as those managing binge drinking, teenage pregnancy, and childhood obesity.**

The party feels that more funding should be devolved to services agreed between local authorities and health service partners, these budgets would be managed by directors of public health who would be obliged to make partnerships with other organisations. Improvements would be rewarded on a payment by results basis.

[‘A Healthier Nation’](#) can be downloaded from the party website.

*(Also see:*

*[Tories plan ‘Payment by Results’ for Council Health Work](#)*

**The Department of Health has issued revised guidance relating to infection control in healthcare settings for pandemic H1N1 influenza.**

[The new guidance](#) contains updated information on transmission characteristics and occupational health guidance on the deployment of high risk employees.

**Ahead of the [adjournment debate on the impact of the media on young women](#), Liberal Democrat MP Jo Swinson argues that the effect of media images on the body image of women and girls has sparked much debate over the past year, both in the media and among the public, and it is impossible to escape media images of impossibly beautiful people, whether on magazine covers, on billboards or in newspapers.** In addition, there is increasing pressure on women and girls in particular to live up to an idealised image of perfection, and the effects of these ubiquitous images on how people feel about and behave toward their own bodies range from low self-esteem to, at the most extreme, serious eating disorders.

In the Parliamentary debate the Minister intends to outline some of the measures she believes are necessary in order to make images used in advertising more honest, and to equip young people to respond to them in a healthy and appropriate way.

**In E-Politix, MP Janet Dean discusses her adjournment debate on support for students who develop serious illness.** She argues that students who develop serious illness, such as cancer, are currently expected to use their student loans to support themselves during their period of illness and treatment, and believes that this is unfair. Such students do not want to abandon their courses completely if they have to take a year off due to illness, because they need the hope of returning to their studies when they recover.

(See:

[Supporting students with medical conditions](#)

**The European Randomised Study of Screening for Prostate Cancer, (ERSSPC) which is being conducted in seven countries has shown that one in eight men screen for the cancer will test positive when they do not have the disease.** Early data from the indicated in March 2009 that deaths could be cut by 20%. But other recent evidence has cast doubt on the long-term benefits of screening, suggesting some men may end up being 'over-treated' for slow-growing disease that would never cause a problem in their lifetime.

(See:

['False positive' concern over prostate cancer test](#)

**As National Dignity Ambassador Sir Michael Parkinson has published his report ['My year as National Dignity Ambassador'](#).** In his report, Sir Michael praises the people who inspired him and highlights small steps that cost nothing but make a real difference to people's lives.

Alongside the report, Health Secretary Andy Burnham has announced a new Dignity Action Day and a £50,000 Bright Ideas Grant (BIG) for innovative projects that encourage dignity in care.

(See also:

[Dignity in care](#)

[Banish stereotypes to give those in care the dignity they deserve, says Sir Michael Parkinson](#)

**As part of a package of improvements in healthcare for service personnel, Health Minister Mike O'Brien and Veterans Minister Kevan Jones have announced that [armed forces personnel with the most serious injuries](#) will have a customised health care plan before they leave the Services that will continue to be tailored to meet their individual needs for the rest of their life.**

The new arrangements, part of the Government's commitment to provide Armed Forces veterans and those preparing to make the transition from service to civilian life with the very highest standards of health care will include:-

- A guarantee that all those seriously injured will receive an early and comprehensive assessment of their long term needs before they leave the Armed Forces.
- High quality care for life for those with continuing healthcare needs based on a regular review of their needs overseen by an NHS case manager.
- Grant funding of £140,000 with Combat Stress (that they are matching) to work directly with mental health trusts to ensure that the services they provide are accessible to and appropriate for military veterans.
- Closer NHS links with a full range of third sector partners and charities with extensive experience of working with veterans, to share advice, knowledge and best practice to improve services for veterans.
- An entitlement for all veterans who have lost a limb whilst serving in the Armed Forces to receive, where clinically appropriate, the same standard of prosthetic limb from the NHS that they received or would receive today from Defence Medical Services as a result of major technological advances.

- Responsible Directors within each Strategic Health Authority, together with Primary Care Trust champions, will be identified to ensure the needs of the armed forces, their families and Veterans are fully reflected in local plans and service provision.
- Improved transfer of medical records to the NHS on retirement from the armed forces, including greater GP awareness of veteran status of new patients to ensure veterans receive their entitlement to priority treatment for any injuries or illness attributable to their time serving in the Armed Forces.

(See:

[\*Improved care for veterans and severely injured service personnel\*](#)

**The report [\*'Overarching report of findings from the Adult Autism Strategy consultation activities'\*](#) is based on the now closed consultation on the future strategy for adults with autistic spectrum conditions (ASC).** Over 1,100 responses were received, including from people with ASC, families and carers, voluntary sector organisations and health and social care bodies. This document is a summary of the findings from the consultation, setting out the approach taken, and the key themes and priority actions identified by respondents.

**Only 1% of primary schoolchildren's packed lunches meet the nutritional standards set for school meals in England, a study suggests.**

[\*Crisps, sweets, and sugary drinks still dominate\*](#) over fruit and veg despite the government's drive to make lunchboxes healthier, the Leeds-based team says. They examined 1,300 schoolchildren's lunchboxes, the Journal of Epidemiology and Community Health reports. Half of UK children eat a packed lunch - equating to 5.5bn lunches a year.

Over a quarter of the children had a packed lunch containing sweets, savoury snacks, and sugary drinks - things banned under rules on healthy prepared meals for local authority schools in England, which came into force in 2006.

**Speaking at the Age Concern / Help the Aged conference, Harriet Harman, Minister for Women and Equality argued that discrimination against older people is a serious problem that must be tackled at the highest levels.**

The Minister argued that the increase in the number of older people demands a change in public policy, and a recognition of the role that well, elderly people play in their families, the economy and society. She argues that the endemic ageism towards women in the media are is an outdated attitude which the Equality Bill, currently entering the Parliamentary committee stage will strengthen the law when it comes to older people and those who look after them'.

(See:

[\*Equality Bill: Lords committee stage\*](#)

[\*Harman pledges Government to banish ageism\*](#)

**The BBC report that a new study published in the International Journal of Obesity suggests that where your body stores fat could play a part in your risk of heart and circulatory health problems.**

Fotini Rozakeas, Cardiac Nurse at the British Heart Foundation, said:

'The review of previous studies suggests that fat stored around the thighs and backside has a protective role in the risk of developing heart and circulatory disease. Fat is a complex substance and how it functions seems to differ depending on where it is stored in the body. This research helps us better to understand how fat acts in the body in order to develop new approaches in reducing heart and circulatory disease.

(See:

[Fat round the middle poses heart health risk](#)  
[Having a big bum, hips and thighs 'is healthy'](#)

**Dutch researchers argue that meticillin-resistant Staphylococcus aureus, (MRSA), a potentially lethal bug which is difficult to combat because it has developed resistance to some antibiotics, is mainly spread by patients moving between hospitals.** The researchers argue that more screening of people who are repeatedly admitted to different hospitals will break this transmission cycle, and eventually help to eradicate MRSA. The study, published in the journal, PloS Medicine aimed to find out more about the distribution of the different strains so as to shed light on how the infection spreads, and Hajo Grundmann from the University Medical Centre in Groningen in the Netherlands, who was the lead author of the report, said: 'we found that MRSA strains were geographically concentrated.' The conclusions were drawn from a large study of the geographical location of different strains of MRSA across 26 European countries.

(See:

[Geographic Distribution of Staphylococcus aureus Causing Invasive Infections in Europe: A Molecular-Epidemiological Analysis: abstract](#)

**The Secretary of State for Children, Schools and Families, (DCSF) Ed Balls has teamed up with comedian Bill Bailey to launch a new national advertising campaign '[Why let drink decide](#)' aiming to raise awareness of how alcohol can make young people vulnerable to problems such as unwanted pregnancies, road traffic accidents and poor marks at school.** In addition, the campaign which is part of the Government's commitment from the Youth Alcohol Action Plan to a national communications campaign where parents and young people together work towards a safe and sensible relationship with alcohol. The 'Why Let Drink Decide?' campaign is launched ahead of the Families and Relationships Green Paper to be published at the end of January. The Green Paper aims to explore new and innovative ways to provide independent help and support on positive parenting with teenagers, as well as information about handling the kinds of issues parents often worry about the most, like teenage drinking.

(See also:

[The impact of alcohol consumption on young people: a systematic review of published reviews](#)  
[Government campaign asks parents and young people, 'Why Let Drink Decide?'](#)

**The House of Lords Delegated Powers and Regulatory Reform Committee Second Report '[Child Poverty Bill](#)' makes provision about the steps to be taken at a national and local level in co-operation between local authorities and other agencies, with a view to tackling and eradicating child poverty.**

**The Personal Care at Home Bill has successfully passed through the Commons and now moves on for debate in the House of Lords after its third reading.**

**The National Audit Office (NAO) has questioned the Government's dementia strategy, saying that, although the strategy is comprehensive and ambitious, it has not been made a national priority in the NHS Operating Framework.**

The NAO's interim report, '[Improving Dementia Services in England](#)', also queries where the government money is being spent and also that many trusts are still identifying the extra services they need.

An [executive summary](#) is also available together with [some surveys and a detailed methodology annex](#).

(Also see:

[NAO raps National Dementia Strategy](#)

### **Only 1% of primary schoolchildren's packed lunches meet the nutritional standards set for school meals in England, a study suggests.**

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### **The Secretary of State for Health, Andy Burnham has announced that tanning salons are to be banned from allowing under 18s to use sunbeds, and the Government will back a Private Member's Bill which will seek to provide legislation to introduce the ban.**

The decision has been made following a Cancer Research UK report, commissioned by the Government and published in November last year, which indicated worrying levels of sunbed use amongst under 18s.

The Department of Health (DOH) argue that the report showed that:-

- Overall, 6.0 per cent of children aged 11-17 years in England said that they had used a sunbed.
- There was significant variation across the regions with the 'North' having 11.0 per cent of children having used a sunbed compared with 4.2 per cent in both the 'Midlands' and in the 'South'
- In a study of six different UK cities, sunbed use was significantly higher in Liverpool at 20.0 per cent and Sunderland at 18.0 per cent than in the other four 'cities' for 11-17 year olds combined

(See:

[Government backs sunbed ban](#)

[More than 250,000 children sizzle on sunbeds risking skin cancer in later life](#)

[Sunbeds moved up to highest cancer risk category](#)

**The think tank Policy Exchange has published a report '[Controlling public spending: the NHS in a period of tight funding](#)' which is based on research which considered some of the options for the NHS in a period of tight funding.** The report argues that in order to protect the NHS into the future, the next Government needs to make decisions on performance related pay, reducing variations in clinical practice, GP fundholding, and decommissioning services.

**The think tank Civitas has published a paper '[Markets in healthcare: the theory behind the policy](#)'** which broadly argues that with the NHS due to enter a period of real-term cuts in funding from 2011, there is a widespread view that the current ways of managing service providers in the NHS needs revising, and that health care in the UK needs to be open to new ideas, new providers and new ways of working.

**The Department of Health (DOH) has announced that Dr Martin Lombard has been appointed the first [National Clinical Director for Liver Disease](#).** Dr Lombard, who is a Consultant Hepatologist at Royal Liverpool University Hospital NHS Trust will take up the role of leading the development of a National Liver Strategy aimed at bringing together NHS services, and building on the Department's commitment to tackle the growing levels of Liver disease. The DOH argues that liver disease is now one of the most common causes of death in England and if action is not taken to combat the disease, it could overtake stroke and coronary heart disease as a cause of death within the next 10-20 years. The growth in liver disease is largely fuelled by lifestyle factors such as excessive drinking, risk taking behaviour leading to transmission of Hepatitis C, and obesity and could easily be prevented.

**In a House of Commons debate on Thursday 14 January, 2010, Minister of State for the Department of Health (DOH) Mike O'Brien, made an oral statement regarding [Thalidomide survivors](#).**

(See also:

[\*Support for Thalidomide Survivors - Mike O'Brien Oral Statement\*](#)

**The Department of Health (DOH) has published ['Diagnostics waiting times & activity data, month ending 30 November 2009'](#) which indicates the progress the NHS has made in tackling the waiting times for diagnostic tests like scans.**

(See:

[\*Diagnostics\*](#)

[\*Diagnostics waiting times & activity data, month ending 30 November 2009\*](#)

**The Department of Health (DOH) have published the response to a Department of Health consultation which sought comments on proposals for three sets of regulations to be made under the amended [Public Health \(Control of Disease\) Act 1984](#), taking forward the modernisation of health protection law.** The regulations cover notification of hazards, safeguards for individuals and updated local authority powers.

The consultation began on 8 July and closed on 30 September 2009, and subject to Parliament, it is planned that the regulations will come into force on 6 April 2010 (except certain provisions in the Notification Regulations which are planned to come into force on 1 October 2010).

(See:

[\*Health Protection Regulations: consultation report\*](#)

[\*Equality impact assessment\*](#)

**The Department of Health (DOH) has published a letter ['Quality accounts: roles of commissioning PCTs, Local Involvement Networks \(LINKs\) and local authority Overview and Scrutiny Committees \(OSCs\)'](#) which sets out the roles of PCTs, LINKs and OSCs in the production of Quality Accounts.**

**The Department for Health (DOH) have produced guidance 'Improving the health and well-being of people with long term conditions ['World class services for people with long term conditions: information tool for commissioners'](#) which aims to help share a common vision of what constitutes a good service for people with LTCs, and to provide some practical suggestions for commissioners to help them achieve that vision.**

**The BBC reports that doctors conducting a study argue that some patients may have to be prescribed [higher doses of antibiotics](#) because of rising rates of obesity, and the fact that the standard 'one-size fits all' dose may not clear infection in larger adults and increases the risk that resistance will develop.**

However, an editorial in the Lancet to accompany the study, argues that more work is needed to guide GPs on how and when to alter doses. GPs also added that it was an interesting theory but may end up being expensive.

Around one in four adults in England is classified as obese - an increase from 15% in 1993.

**A study conducted by University College suggests that patients from deprived areas in England are more likely to have a late cancer diagnosis** and be admitted to hospital as an emergency.

(See:

[\*Poor 'more likely to have late cancer diagnosis'\*](#)

**The Department of Health (DOH) have produced a toolkit and guidance relating to 'Practice-based commissioning budget guidance for 2010/11'** which sets out details on the changes to the recommended methodology for deriving practices' fair shares for 2010/11 and information on how to use the new budget toolkit.

Primary care trusts (PCTs) are responsible for ensuring that practices receive an indicative budget that reflects the needs of their population as accurately as possible. This allows a practice to access a 'fair share' of the resources available to the whole of the PCT for its patients. The Department has updated the toolkit that can be used to determine weighted capitation indicative budgets at practice level. This is part of our ongoing commitment to refine the methodology and improve accuracy.

(See:

[\*Practice-based commissioning budget guidance for 2010/11\*](#)

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