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Health Overview and Scrutiny Committee Bulletin No. 49 / 4 December 2009

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The Department for Health (DOH) has published a consultation on proposals for an [‘Innovation Pass Pilot’](#) which is designed to help make selected innovative medicines available on the NHS for a time-limited period, prior to a NICE appraisal. Funding will be drawn from a new ring-fenced £25m budget, set aside exclusively for the Innovation Pass. The Pass gives earlier access to innovative drugs for patients with the greatest need, and at the same time it will facilitate the collection of further information to support a subsequent NICE appraisal.

This consultation seeks views from the NHS, industry and other stakeholders on the Government’s proposals for an Innovation Pass pilot. These proposals will be revised in light of comments received as part of this consultation and will be used to inform the first set of decisions for the pilot in 2010/1.

(See also:

[A Consultation on proposals for the Innovation Pass pilot](#)
[Impact assessment of proposals to fund new medicines under an ‘Innovation Pass’](#)
[Patients to benefit from innovative new drugs](#)

Launched: 28 November 2009.

Closing date: 8 February 2010.

The Quality Care Commission have launched a consultation on the integration of equality and human rights in all its activities.

[Equality and Human Rights Scheme Consultation document](#) seeks feedback and comments on the

- overall approach to embedding equalities and human rights
- human rights-based approach
- priorities for action
- action plans

The responses will be collated and analysed to feedback on how the consultation informed the development of the Equality and Human Rights Scheme and its action plans.

Launch date: 3 December 2009

Closing date: 25 February 2010

A new report from the organisation Dr. Foster [‘Dr Foster’s 2009 Hospital Guidehow safe is your hospital’](#) puts a focus on patient safety and the current state of hospital care in England.

(See:

[Dr Foster’s 2009 Hospital Guide - Focus on Patient Safety](#)

[Twelve hospital trusts ‘underperforming’, report claims](#)

[‘Toothless’ NHS regulator accused over damning safety report](#)

The National Institute for Clinical Excellence (NICE) have produced a new guide, [‘How to use NICE guidance to commission high quality services’](#) with the aim of explaining how NICE guidance can support the commissioning of high quality services, and describing how the guidance can be used throughout the commissioning cycle.

The guide illustrates the support available from NICE, as well as the benefits for local populations of using NICE guidance and is aimed at all those involved in commissioning health and social care services, as well as public health programmes within the NHS and partner organisations in England.

(See also:

[Watchdog gives examples of how NHS can save £20bn over three years: extract](#)

The NHS Information Centre report that the [Health Needs Assessment tool](#) is now available as part of the National Diabetes Information Service (NDIS), and allows the viewing of any Primary Care Trust (PCTs) performance in diabetes care against a large number of indicators. Most fields specified in the NHS Diabetes commissioning guide are covered within this tool, and it

enables an identification of the strengths and weaknesses in diabetes care which can then be used as a basis for service review and planning. By using the peer group function it is possible to compare PCTs.

The Health Needs Assessment tool is one of the first tools created for the new National Diabetes Information Service (NDIS) and over the coming months, more diabetes data, tools and resources will be added to the portal.

(See:

[Diabetes Health Needs Assessment Data Packs](#)

The NHS Information Centre have published the [National Lung Cancer Audit, 2009](#) which summarise the key finding of the National Lung Cancer Audit for patients diagnosed with lung cancer or mesothelioma who were first seen in 2008.

The NHS Information Centre has published [‘Statistics on drug misuse, England 2009’](#) which presents information on drug abuse amongst both adults and children.

(See :

[Statistics on drug misuse, England 2009](#)

Public report on a paper [‘Is devolution good for health?’](#) which argues that since its formation in 1948, the NHS has undergone many changes but with devolution there has been a significant divergence of policies as various new administrations look

for local solutions to the various challenges. The paper looks at both the similarities and the differences between performance in specific areas of healthcare in the newly-devolved nations.

There is concern about the impact of the recession on councils' abilities to improve health in their local communities, according to a new survey of chief executives and senior officers of local authorities and Primary Care Trusts (PCTs).

The report was commissioned from Ipsos MORI by the [Improvement and Development Agency \(IDeA\)](#) and the Healthy Communities programme.

Key findings from the survey include:

- 51 per cent believe that the economic situation has had a negative impact on the local authority's ability to tackle the health of their community.
- 84 per cent agree that a commitment to tackling health inequalities and improving the health of local communities is embedded within their authority.
- 74 per cent of those from local authorities say that local councillor commitment is good, compared to 49 per cent of those from PCTs.
- 24 per cent of district councils think that health and tackling health inequalities is more a PCT issue.
- 84 per cent of local authorities feel they have a good relationship with their PCT.
- 91 per cent of PCTs feel they have a good relationship with their local authority.

Obesity, smoking and the gap between the wealthiest and poorest still remain the main health issues for both local councils and PCTs, which was also found in last years report. The greatest challenge in the future is thought to be reduced resources, and the majority expect the priority their council gives to health inequalities to increase in the next five years.

See: [Healthy Communities Direction of Travel Survey results 2009](#)

A new report from the Economic and Social Research Council (ESRC) [‘Are storks striking for a contract renewal? Childbirth under changing employment, family and welfare arrangements’](#) studies the interdependence between fertility and labour careers in different institutional contexts with different cultural and family arrangements in Europe.

The project examined the social and employment circumstances that help predict the timing of people entering the labour market and childbirth. This was done at individual and household level, and in particular, it focused on how some unobservable traits, preferences and characteristics that make people different from one another, influenced careers and how employment and fertility choices were jointly determined.

(See also:

[That loving feeling](#)

The Joseph Rowntree Foundation (JRF) and the New Policy Institute (NPI) have released [‘Monitoring poverty and social exclusion 2009’](#) the twelfth annual report indicating the current state of poverty and social exclusion in the United Kingdom. These reports use official government data, and are built around a set of 50 indicators., so that the analysis cover a wide range of issues, ranging from low income, worklessness and debt, to ill-health, poor education and problems in communities. In addition, while the impact of the recession is apparent, the report shows even before the recessions began, several key indicators, monitoring low income, unemployment and debt, were already set for poor results.

(See also:

[Monitoring poverty and social exclusion 2009: press release](#)

[The Poverty Site](#)

NHS dentistry is facing a major challenge coping with the consequences of the ageing population, [reports the BBC](#).

British Dental Association scientific adviser Professor Damien Walmsley said better oral care meant people were increasingly keeping their own teeth.

He said that was good for patients, but would mean more work for dentists.

In particular, he cited a rise in demands for replacement fillings and care for tooth erosion.

Research by the BDA has shown that fewer than a third of over-65s currently have their own teeth, but within 20 years that is likely to increase to about 50%.

The numbers will also be swelled by the ageing population, with the over-65s age group expected to grow by a third and the over-85s doubling in the next two decades.

The warning comes amid continuing problems over access to dental services generally.

The Department of Health (DOH) have published [‘Improving Information for Stakeholders: a report of a PCT and SHA working group to improve community information’](#) which sets out the findings of a joint working group to improve community information. The report provides a framework for commissioners and providers to improve information on community services and include a number of case studies from NHS organisations.

The Department of Health (DOH) have published guidelines for the Strategic Health Authorities (SHA) process for Primary Care Trusts (PCTs) to be listed in the Electronic Prescription Service (EPS) Authorisation Directions 2008 as amended.

The guidance is enclosed in a letter and supporting documents which were issued to set out the process that all SHAs need to follow to request Secretary of State directions, and to enable PCTs to authorise their primary medical services contractors or any practice established by the PCT to use Release 2 of the Electronic Transmission of Prescriptions (ETP) service.

(See:

[SHA process for PCTs to be listed in the Electronic Prescription Service \(EPS\) Authorisation Directions 2008 as amended](#)

The Department of Health have published a letter by Ann Keen and Dawn Primarolo directed at PCT chairs and local authority Directors of Children's Services, to advise them of the powerful contribution the Ministers both believe the Family Nurse Partnership (FNP) programme can offer as a preventive and early intervention service for potentially high need, high cost families local areas.

(See:

[The Family Nurse Partnership Programme](#)

The Social Work Taskforce (SWT) have published their final report [‘Building a safe, confident future: the final report of the Social Work Task Force’](#) which sets out 15 recommendations, developed from recommendations set out in the interim report, which are designed to improve and reform social work. These recommendations were developed from the building blocks for reform first set out in the interim report.

The Social Work Task Force was set up by the Department of Health and the DCSF to undertake a comprehensive review of frontline social work practice and to make recommendations for improvement and reform of the whole profession, across adult and

children's services. In July 2009, the Task Force published its interim report, 'Facing up to the Task', which set out proposals for the kind of comprehensive reform needed, including a series of building blocks for constructing a reform programme.

(See:

[Building a safe, confident future - The final report of the Social Work Task Force](#) – DCSF webpages

[Building a safe, confident future: the final report of the Social Work Task Force](#) – DOH webpages

The Department for Health (DOH) have published the latest annual update on infant mortality rates which contains data updated to 2006-08 ['Mortality target monitoring \(infant mortality, inequalities\) update to include data for 2008'](#). The data will be used to monitor progress against the Department of Health infant mortality inequality PSA target for the gap in infant mortality between the Routine and Manual socio-economic group and the population as a whole, for England and Wales.

The key points from the latest release are:-

- In the period 2006-08 there were 9,866 infant deaths overall in England and Wales, giving an overall rate of 4.8 deaths per 1,000 live births. This was a decrease on 4.9 deaths per 1,000 live births in 2005-07.
- Out of the 8,743 deaths where social class was assigned, 43% of these deaths (3,777) were in the Routine and Manual group.
- and the rate for this group was 16% higher than in the total population in 2006-08, the same as in 2005-07.
- In the most recent time period, the reduction in the infant mortality rate across the whole population has been matched by a reduction in the routine and manual group, the focus of the 2010 health inequalities infant mortality target. The target remains challenging and while the gap has narrowed since 2002-04, it remains unchanged since last year (2005-07)..
- Although not part of the target, the rate for sole registrations, that is, births registered by the mother alone, is also monitored. The rate in the most recent single year, 2008, has increased to 6.9 deaths per 1,000 live births. This is higher than the previous two years where the rate for both years was 6.3 deaths per 1,000 live births.

(See also:

[Mortality target monitoring \(infant mortality, inequalities\) update to include data for 2008](#)

[Statistical press notice: Mortality Target Monitoring \(Infant mortality, inequalities\) - Update to include data for 2008](#)

Health Secretary Andy Burnham has announced an extension of the Government's Change4Life campaign, which helps families 'eat well, move more and live longer' and will support front line staff to deliver the [Healthy Child Programme](#), supporting pregnant women and parents of babies to establish good feeding and activity habits for their babies to help them reduce the risk of becoming obese in later life.

The campaign, which has been developed in consultation with stakeholders and academics, centres around six top tip topics for families, focusing on breastfeeding, active play and introducing of solid foods when the baby is ready.

(See:

[Healthy Child Programme: pregnancy and the first five years of life](#)

Hospital wards across the NHS are breaking recommended noise limits, disturbing patients' sleep, well-being and recovery, experts say.

The [BBC reports](#) that two separate studies found the din of chattering visitors and loud mobile phones pushed noise levels well over recommended limits. The World Health Organization says patients should not be exposed to noise above 35 decibels or a loud whisper, but the researchers at Musgrove Park Hospital, Taunton frequently recorded levels of 60dB to 90dB.

At the Newcastle teaching hospital, nurses recorded levels averaging in the mid-40s and peaking at nearly 100dB - as loud as a lawnmower.

Both research teams looked at whether adopting simple measures could reduce noise levels.

They asked staff to make a number of changes, including:

- wearing soft soled shoes
- switching mobile phones on to vibrate rather than ring
- turning alarms on to "night mode" from the evening until the morning.
- Quiet closing bins were also deployed
- staff were encouraged to restrict visitors to designated times and keep their own noise to a minimum when possible.

These measures in Newcastle reduced peak noise levels by around 20%, bringing them well below the 80dB threshold at which hearing can be damaged over time, the Journal of Clinical Nursing reports.

In Taunton, the time that noise levels breached 60dB at night fell from 75% to 59%.

Data from health regulator the Care Quality Commission show over the past few years nearly 40% of patients have been concerned about noise at night from other patients and around 20% from staff.

The Department of Health (DOH) have published notification of the allocation of funding to support delivery of the Government's objectives on social exclusion.

(See:

[SHA funding - social exclusion](#)

The [Care Quality Commission](#) has published its first major statement on the quality of adult social care. The statement is based on four CQC documents all published on December 3.

Key conclusions are that

- Councils are improving their ratings overall with 95% of local authorities in one of the top two categories - performing either "excellently" or "well" - in the year to March 2009. However there are still concerns that are real and affect people's lives.
- Ratings for care providers have also improved, although one in six providers are still only "poor" or "adequate".
- Councils must help get rid of poor quality care by purchasing from providers more effectively and increase the proportion of care purchased from "good" or "excellent" providers
- Eight councils have been designated as 'Priority for Improvement' councils - Bromley, Cornwall, Peterborough, Poole, Solihull, South Tyneside, Southwark, and Surrey
- CQC will be vigilant about spotting the impact of the economic downturn on people's access to social care
- Council performance against the agreed rating system shows significant improvement and CQC believes it is time to set a higher standard of performance

There is a separate [CQC press release for the south-east region](#) where the performance of council social care services is broadly positive. Kent is rated as delivering its outcomes "well" – that is providing "a service that consistently delivers above minimum requirements for people is cost-effective and makes contributions to wider outcomes for the community."

Kent has 7 zero star rated care homes out of a total of 78 in the region.

There are two reports relating specifically to Kent –

[Kent: Annual performance assessment 2008-09](#)

[Kent: Independence, wellbeing and choice inspection report](#)

The Care Quality Commission has also published its [response to the government Green paper on social care](#).

See also

[Nearly 4,000 adult social services criticized over level of care provided](#) (Guardian)

[Adult social care warning for eight areas of England](#)

[New care ratings show improvement](#)

[Southwark demands review of “adequate” adult care rating](#)

[Call to drive out rogue care home operators](#)

A new report from the NHS Information Centre [‘Mental Health Bulletin 2008/09: Third report from Mental Health Minimum Dataset \(MHMDS\) annual returns, 2004-2009’](#) presents new analyses, and indicates the effect that age, gender, marital status and ethnicity have on rates of access to mental health services in England. The report also looks at service use in different parts of England, and one of the aims of the report is to help NHS trusts accurately identify local need and allocate resources effectively.

(See also:

[Mental Health Bulletin - Third report from Mental Health Minimum Dataset \(MHMDS\) annual returns, 2004-2009: press release](#)

[Women, the elderly and black people among those most likely to use specialist mental health services, says new report](#)

Ofsted has published a report - [Children’s care monitor 2009](#) – which details the first hand experiences of children in care.

Over nine out of ten children (92%) feel safe in the home they live in and 90% thought their care was good. However, over three quarters of children in care (76%) have been separated from brothers and sisters who live in different care placements and one in five (20%) continue to be bullied for being in care.

See [Full Report](#)

Dr Chakladar, a trainee in anaesthesia at Worthing Hospital in West Sussex, argues in the British Medical Journal (BMJ) that birth partners or doulas who are paid to support women through pregnancy and birth are undermining the work of the NHS and at risk of complicating patient care. Dr Chakladar also added that he was ‘disappointed by the real or perceived need for doulas’ and argued that it was the duty of doctors, nurses and midwives to support mothers and families ‘through a very special but potentially frightening experience’, and in addition, the ‘doula business’ could be exploiting women’s fears about the quality of NHS care and the ‘seemingly limitless market for birth-related products and services’.

The Royal College of Midwives added that there was ‘no doubt’ that some doulas were performing a role that should be carried out by midwives.

(See:

[Encounter with a doula: is the system failing new mothers: extract](#)

[Rise in doula birth partners 'undermines NHS staff'](#)

[Doulas: holding hands or stepping on toes?](#)

The Department of Health (DOH) have published the final report of the NHS Constitution State of Readiness Group (SORG) ['The NHS State of Readiness Group: final report, November 2009'](#) which offers recommendations and examples of good practice so that all levels of the system can have regard for the NHS Constitution in all their decisions and actions. In order to translate information locally, the SORG report contains recommendations and examples of good practice designed to help the process.

The National Institute for Health and Clinical Excellence (NICE) report the launch of a new database that will help with the identification and prioritisation of future cancer research across Europe.

The Database of Cancer Uncertainties (DoCU) has been developed through the Coordination of Cancer Clinical Practice Guidelines in Europe (CoCanCPG) initiative. CoCanCPG is a consortium of 16 institutional partners from 11 countries and is funded by the European Commission.

The cancer uncertainties database is designed to provide a tool to bring uncertainties around the evidence base used in guideline development together and then link into other initiatives such as the UK's Database of Uncertainties about the Effects of Treatments – DUETs. The uncertainties will be prioritised with input from clinicians, patients, funders and researchers. The prioritised uncertainties can then be promoted to research funders and researchers across the EU. Tracking mechanisms will be developed to avoid duplication of effort and highlight relevant clinical trials that patients can participate in. The co-ordination will help to ensure that the available research funds are spent against identified priorities.

(See:

[NICE announces launch of a new database to inform the prioritisation of European cancer research](#)

[NICE announces launch of a new database to inform the prioritisation of European cancer research: press release](#)

E.Politix.com have highlighted to MPS the research report 'Off the Radar' the charity Railway Children have released. The report is a landmark study into the vulnerable lives, situations and experiences of street children in the UK, and the three-year study involved first-hand interviews with 103 children and young people, each with experience of being detached from parents or carers under the age of sixteen for long periods of time. The charity argues that the research offers incredible insight into the hard-to-reach world of some of Britain's most excluded children and young people.

See:

[Off the Radar: summary](#)

[Runaway children 'fall off the radar'](#)

The NHS in England must get better at diagnosing cancers at an earlier stage if it is to continue to improve survival rates, the cancer tsar says.

Prof Mike Richards wants [more focus on one-year survival rates](#), an indication cancer is spotted at a treatable stage. His report found huge disparity, with lung cancer sufferers in Kensington and Chelsea three times more likely to live a year than those in Herefordshire. To date, the health service has used figures based on five-year survival.

To date, the health service has used figures based on five-year survival. One-year survival - that is surviving a year after cancer is first spotted - is key in regard to measuring early diagnosis because death before the one-year mark is likely to be due to the disease only being identified at a late stage.

Read the full report: [Cancer Reform Strategy](#)

Epolitix.com carry an article on the issues facing [dementia carers](#) from Lord Harries of Pentregarth ahead of his oral question in the House of Lords on dementia. Lord Harries argues that currently 700,000 people in the UK have dementia and this is likely to

increase to 1.7 million over the next 40 years. For people over 85 the risk is particularly high, with one in five people suffering from it.

(See:

[Support needed for dementia carers](#)

The think tank Reform has published a paper ['The end of entitlement'](#) which argues that the middle class are the beneficiaries from Britain's welfare system, the cost of which amounts annually to £32 billion. The paper argues that, faced with the alternative of high tax rises, middle class welfare must be cut back to help restore the public finances and put welfare on a more sustainable footing.

(See:

[The End of Entitlement: press release](#)

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