
From: TheInformationPoint@kent.gov.uk [mailto:TheInformationPoint@kent.gov.uk]
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Health Overview and Scrutiny Committee Bulletin No. 2 / 14th January 2011.

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Health Overview and Scrutiny Committee Information

Date of next HOSC meeting: Friday, 4th February, 2011 at 10.00 am
Location: Council Chamber, Sessions House, County Hall, Maidstone
Main Agenda Items: 1) The Future Shape of Community Service Provision.

Health in Kent

An urgent review of cases involving children potentially at risk is one of the steps Kent County Council has taken following a critical Ofsted report that labelled child protection services for looked after and vulnerable children, inadequate in virtually every area.

7,000 cases have been scrutinised and audited to ensure that the review has been conducted properly, and in addition, KCC is also re-examining reviews and assessments of children that are in care and on the child protection register.

The review has resulted in KCC putting management plans in place for 541 cases out of 5,976 reviewed so far, and ensures that children who have been referred to social services are being properly safeguarded where they need to be.

See:

['Concern' over 540 child cases in Kent](#)

The William Harvey Hospital, Ashford has reported that four people have died of flu, including two of the swine flu strain, over a five-day period.

A spokeswoman for East Kent Hospitals NHS Foundation Trust, said flu deaths were not unusual in the winter and the situation was "consistent with what's happening across the country".

Last week, NHS South East Coast said a total of 51 people were in critical care beds with confirmed or suspected flu in Kent, Sussex and Surrey.

On Thursday, the Health Protection Agency (HPA) said the number of people who have died of flu in the UK since October had risen to 112.

See:

[Kent's William Harvey Hospital reports four flu deaths](#)

Department of Health

The Department of Health (DOH) have released for consultation a draft version of the Brain and Central Nervous System (CNS) measures for inclusion in the Manual for Cancer Services.

It is the intention to add the Brain and CNS Measures to the ['Manual for Cancer Services, 2008: Brain and CSN'](#) which supports the quality assurance of cancer services and acts as a driver for quality improvement in the commissioning and delivery of cancer services

For all the relevant documents please

See:

[Draft brain and CNS measures for consultation](#)

Period of consultation: 7th January 2011 – 31st March 2011.

The Department of Health (DOH) has released a draft version of the ['Teenagers and Young Adults Cancer Measures'](#) for inclusion in the Manual for Cancer Services.

The consultation is being undertaken to ensure that the new 'Teenagers and Young Adults Cancer Measures' are clear and comprehensive.

See:

[Draft teenagers and young adults' cancer measures for the Manual for Cancer Services: consultation](#)

Period of consultation: 11th January 2011 – 5th April 2011.

In a letter from David Flory, Deputy NHS Chief Executive, PCT commissioners are updated on the Coalition Government's position on the provision of infertility treatment.

See:

[Commissioning of NHS IVF services](#)

The Department of Health (DOH) has released a good practice compendium to support local delivery of the national dementia strategy and improve outcomes for people with dementia and their carers

The compendium 'Living well with dementia: a National Dementia Strategy Good Practice Compendium – an assets approach' is compiled from across the regions of England to support the local delivery of the National Dementia Strategy and to help improve outcomes for people living with dementia and their carers.

Government

Secretary of State for Health Andrew Lansley has announced detailed plans to transform cancer care in England.

The strategy 'Improving outcomes: a strategy for cancer' sets out a range of actions which identify how the Government, NHS and public can improve the quality and efficiency of cancer services, including:

- diagnosing cancer earlier.
- helping people to live healthier lives to reduce preventable cancers.
- screening more people.
- introducing new screening programmes.
- making sure that all patients have access to the best possible treatment, care and support.

See:

[Written Ministerial Statement: Strategy for Cancer](#)

[Improving outcomes: a strategy for cancer](#)

[Improving outcomes: a strategy for cancer: press release](#)

[Cancer strategy could save 5,000 lives a year](#)

Following a three month review of financial and other support available to patients who contracted hepatitis C from NHS contaminated blood in the late 1970s and 1980s, Andrew Lansley, Secretary of State for Health has announced that such patients will receive substantially increased support.

The recently published review 'Review of the support available to individuals infected with Hepatitis C and / or HIV by NHS supplied blood transfusions or blood products and their dependants' examined the clinical evidence for further support for these individuals, and considered how best to provide it for the families of those affected.

See:

[New payment scheme announced for people with hepatitis C from contaminated blood](#)

[Review of the support available to individuals infected with Hepatitis C and/or HIV by NHS supplied blood transfusions or blood products and their dependants](#)

Parliament

HOUSE OF COMMONS

Monday 10th January, 2011.

Debates and Oral Answers

[Disabled jobseekers](#)

Helping disabled jobseekers into work.

[Severe Weather \(Vulnerable People\)](#)

Assistance to vulnerable people during the recent spell of severe weather.

Swine Flu

Government's preparations for and response to the current flu outbreak.

Contaminated Blood

A statement by the Secretary of State for Health on hepatitis C and HIV-infected blood.

See also:

[Statement on contaminated blood](#)

Please also see the entry under 'Government'

'Following a three month review of financial and other support available to patients who contracted hepatitis C from NHS contaminated blood in the late 1970s and 1980s, Andrew Lansley, Secretary of State for Health has announced that such patients will receive substantially increased support'.

Written Ministerial Statement

Seasonal Influenza Update

A statement by the Secretary of State for Health, Andrew Lansley to update Parliament following developments in the seasonal flu outbreak during recess.

Tuesday 11th January 2011.

Debates and Oral Answers

Mental Health Care (Offenders)

The provision of mental health care for offenders

Wednesday 12th January 2011.

Debates and Oral Answers.

Fertility and Reproductive Health

What recent discussions there have been with international counterparts on the work of the UN Commission on Population and Development on fertility, reproductive health and development in 2011.

Written Ministerial Statement

Strategy for Cancer

Mr. Andrew Lansley, the Secretary of State for Health has formally launched 'Improving Outcomes: a Strategy for Cancer', which outlines the coalition Government's plans to deliver health outcomes for cancer patients that are among the best in the world in a reformed national health service.

Please also see the entry under 'Government'.

Secretary of State for Health Andrew Lansley has announced detailed plans to transform cancer care in England.

HOUSE OF LORDS

Monday 10th January 2011.

Debates and Oral Questions.

Parkinson's Disease

Question asked By Baroness Gale: To ask Her Majesty's Government what is their response to the recommendations of the report of the All-Party Parliamentary Group for Parkinson's Disease, [Please Mind the Gap: Parkinson's Disease Services Today](#).

Written Statements

Armed Forces: Medical Services

Statement: Minister for Defence Personnel, Welfare and Veterans (Andrew Robathan) has made the following Written Ministerial Statement regarding the Midlands Medical Accommodation (MMA) project

Wednesday 12th January 2011.

Written Answers

Children: Poverty

Question asked by Lord Taylor of Warwick: To ask Her Majesty's Government how many children live in poverty in working households.

Disabled People: Children's Mobility Needs

Question asked by Baroness Thomas of Winchester: To ask Her Majesty's Government, further to the answer by Lord Freud on 13 December (Official Report, col. 394), what requirement there is for children's homes and educational establishments to meet children's mobility needs during the school holidays.

Care Quality Commission

The Care Quality Commission (CQC) has released a major review on stroke care which indicates significant variations in the after care support stroke patients.

The CQC report highlights areas where people were not always getting access to services they needed when they needed them, including early supported discharge, community based speech and language therapy and local rehabilitation services.

In addition, the report argues that while most carers were given access to information and advice, in around a third of areas not all carers could access peer support, such as carer support groups or befriending schemes. Further, the information support for patients also varied, with most people receiving good general information on stroke, but fewer got clear information on local services or support to help them access services, sort out problems, or personalise services to meet their needs and preferences.

The report also indicates that available services were not always adapting well to meet people's needs. The communications needs of people with aphasia or the needs of people with English as a second language were often not met, and while 87% of areas provided a helpline, only 26% were available outside office hours and 38% did not train helpline staff to deal with people who have aphasia. In addition, while three-quarters of social services could direct people to community-based services to help them with their physical disabilities, but less than half could signpost similar services for people with aphasia.

The report also argued that reviews after transfer home should provide a key opportunity to ensure people get the support they need, but in reality, while most areas have systems for reviews after six weeks, systems for reviews after this are in place in less than a quarter of areas and only a third of areas carry out joint assessments, looking across both health and social care needs.

For all the relevant documents:-

See:

[Review of services for people who have had a stroke and their carers: overview](#)

Also See:

[CQC review of stroke care finds large variation in support for people after stroke across England](#)
[Stroke services inconsistent throughout England](#)

Other Health Information

Professor Monty Duggal, head of paediatric dentistry at the NHS Leeds Dental Institute has argued in the faculty journal, that serious tooth decay in children as young as two is being either ignored or badly treated as a result of a system of 'poor care' and 'supervised neglect' which advocates leaving tooth decay untreated.

The professor criticises dentists and parents who believe that problematic milk teeth should be left to drop out naturally, and argues that the mistaken belief that baby teeth should not be filled, results in NHS dental hospitals performing either emergency removals of children's teeth, or performing a 'full clearance' in which every tooth is extracted.

See:

[Dentists routinely failing children with serious tooth decay](#)

In an article in LGC, Sharon Shoesmith, former director of Children's Services in Haringey, has argued that funding cuts will result in the death of more vulnerable children.

Ms Shoesmith was addressing the North of England Education Conference, and suggested that all the 'good developments' in social care that have been put in place since the death of baby Peter, will be undone by a 'dreadful' financial situation.

If you would like a copy of the article, please contact The Information Point (01622) 696438.

The Government has recently undertaken an evaluation of the 2009/10 quality accounts, the key mechanism through which health care organisations can demonstrate their focus on improving the quality of their service.

The King's Fund has produced a paper with an independent analysis of a sample of quality accounts produced by a range of providers, including acute trusts, mental health trusts and independent providers, focusing their analysis on three particular aspects of the quality accounts:

- the choice of quality measures used to review performance, their reliability and presentation.
- the quality of the data and how far providers have participated in national clinical audits and confidential enquiries.
- how providers have reported patient and public feedback and involvement of local stakeholders and what external comments have focused on.

See:

[How do quality accounts measure up?: findings from the first year](#)

The Health and Safety Executive (HSE) has developed a demonstration online risk assessment tool for use by employers working in small low risk shops.

The tool will allow those working in this type of workplace to produce a tailored risk assessment by selecting relevant hazards and thinking about how they are controlled.

The questionnaire seeks views on the functionality and usability of the tool and views as to how it compares to HSE's other guidance on risk assessment.

See:

[Shop risk assessment](#)

Responses should be sent by 8 March 2011.

A new series of accessible information for people with mental health problems and learning disabilities have been made available on the the Royal College of Psychiatrists' Faculty of the Psychiatry of Learning Disability webpage.

The information is available through the joint partnership of the Royal College of Psychiatrists' Faculty of the Psychiatry of Learning Disability and the materials have all been tested by patients and carers.

See:

[Information for people with learning disability and their carers](#)

A study carried out by a team from University College, London and published in *The British Medical Journal* supersedes current advice that weaning should start at 6 months, and suggests it could happen at four months.

The research team, led by Dr Mary Fewtrell a paediatrician from the University of London Institute of Child Health, said it supported the recommendation for developing countries, where access to clean water and safe weaning foods is limited, and there is a high risk of infant death and illness.

See:

[Weaning before six months 'may help breastfed babies'](#)

Documents seen by the BBC reveal that senior doctors frequently earn about £600 for four extra hours of work, on top of their salary and bonuses. Basic pay for consultants in England stands at almost £90,000 a year on average, paying for 10 four-hour blocks (full-time) a week.

Those consultants who do private work are also obliged to do an extra four-hour session paid at their basic rate if their NHS trust needs them, but any extra work beyond that attracts a higher rate, with many trusts paying between £500 and £700 for four-hour sessions, the documents show.

The rates are set by individual health trusts so there is no national picture of how much overtime is costing. Most NHS overtime is carried out by consultants working in surgery, such as ear, nose and throat, hip and knees, and anaesthesia.

See:

[Lucrative NHS overtime for consultants questioned](#)

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