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Health Overview and Scrutiny Committee Bulletin No. 33 / 13 August 2010

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Index

[Care Quality Commission](#)
[Department of Health](#)
[Government](#)
[Health in Kent](#)
[Health Overview and Scrutiny Committee Information](#)
[Other Health Information](#)
[Parliament](#)

Health Overview and Scrutiny Committee Information

Date of next HOSC meeting: Friday 3 September 2010, 9.30 am.
Location: Council Chamber, Sessions House.

Main Agenda Items:

- 1) Update on SECamb's Make Ready Depot Programme.
- 2) The Future of PCT Provider Services and the Use of Community Hospitals

Internal Meetings:

HOSC Agenda Planning Meeting: Wednesday 1 September 2010, 10:00 - 12:00
Location: Darent Room, Sessions House.

The pre-meeting for the HOSC Meeting on Friday 3 September will take place prior to the above Agenda Planning Meeting: Wednesday 1 September 2010, 9:00 - 10:00, Darent Room, Sessions House.

Visits:

HOSC Members' Visit to Disablement Service Centre, Gillingham: 20 October 9.30 - 12.00.

Health in Kent

BBC Radio Kent report a rise in the use of antidepressants in the county for the first five months of 2010

BBC Radio Kent reports that access to statistics covering the first five months of 2010, indicate that Kent has seen a big rise in the use of anti-depressant drugs, with a recorded half a million prescriptions given to patients.

Health professionals argue that the rise in use of antidepressants is thought to be through stress caused by the recession and less stigma around mental health issues are responsible for the rise, and this is backed up by the Mental Health charity MIND, who argue that 1 in 10 workers have sought support for mental health problems.

See:

[Kent's rise in anti depressants prescriptions](#)

Department of Health

Review of Dr. Foster Intelligence

Following the recent White Paper 'Equity and Excellence' the Department of Health (DH) has announced that future of Dr Foster Intelligence, which was launched in 2006 as one of the UK's main providers of information, analysis and targeted communications to health and social care organisations, is under review.

.The review will allow the DH to explore strategic options for the future of Dr Foster Intelligence based on the Government's commitment to the introduction of an NHS information revolution, providing patients with quality information and data on all aspects of healthcare. Combined with the right support, the aim is to increase the use of healthcare informatics to create better care, outcomes and reduced costs, and the review will ensure that Dr Foster Intelligence is best placed to meet this challenge.

See:

[Review of future of Dr Foster Intelligence](#)

To contribute to the review, please e-mail DFI@dh.gsi.gov.uk.

Malaria

Public Health Minister Anne Milton has issued a warning about Malaria to all travellers, and added the message 'know before you go' because malaria is often not heeded by people who routinely visit countries where malaria is endemic.

The Minister argues 81 % of malaria cases in UK residents are from visiting friends and family abroad, and contrary to popular belief, malaria is not just about tourists or superstars. The main sufferers are British travellers of African descent who are not protecting themselves when they travel to visit friends and family abroad.

Statistics show that more than eight out of ten cases in UK residents last year were in people visiting relatives (81 per cent of cases, where a reason for travel was stated).

Health Protection Agency statistics of 2009 cases show that:

- 81 per cent (584 cases out of 722 reported cases in travellers from the UK) occurred in people visiting friends and family abroad.
- Tourists from the UK accounted for only eight per cent of cases (57 out of 722 reported cases in travellers from the UK).
- Where listed, 1,036 out of 1,495 cases were in people who had travelled to or arrived from African countries.
- 155 out of 1,495 cases were in people who had travelled to or arrived from Asia, Far East, and South East Asia.

[Malaria: it's not all in the stars](#)

Dental Commissioning statistics

The Department of Health (DH) has released the following statistics on Dental Commissioning for the quarter ending June 2010.

The data shows the number of Units of Dental Activity (UDAs) commissioned as at 30th June 2010.

Key findings this quarter:

- All 151 Commissioners (PCTs and Care Trusts) returned data.
- 87.9 million UDAs have been commissioned as at 30th June 2010.
- This represents a decrease of 0.5 million (1%) on the UDAs commissioned as at 31st March 2010.

See:

[Dental contracts and commissioning](#)

Continuing care for veterans

The Department of Health (DH) has issued a note '[Continuing care for veterans](#)' which reminds those involved in the care of veterans, of the commitments given around priority healthcare and prostheses provision for veterans.

The Department of Health will ensure that this note will be shared with the Veteran Agency, veteran organisations and prosthetic limb centre service providers and managers.

See:

[Continuing care for veterans](#)

Government

NHS Confederation study on trauma systems

A study published by the NHS Confederation '[Implementing trauma systems: key issues for the NHS](#)' argues that the care of patients who have suffered serious injury or accidents is best commissioned at a regional level.

The report argues that international best practice shows the commissioning and arrangement of trauma services must be done in networks on a regional level if it is to provide the right mix of specialised care, generic treatment and rehabilitation.

But the report also concedes that there is no 'one size fits all' model for arranging services as evidence shows concentration into larger volume centres for trauma care does not necessarily produce better results.

See:

[Implementing trauma systems: key issues for the NHS](#)

[NHS Confederation trauma report makes case for regional commissioning of trauma care](#)

[Back to top](#)

Provisional figures from NHS Information Centre indicate an increase in asthma hospital admissions among children aged 16 and under.

The NHS Information Centre has released provisional statistics which indicate that hospital admissions for asthma among children aged 16 and under were 58 % higher in September 2009 than the monthly average for the year.

The figures indicate that the same pattern occurred in September 2008 when there was a 102 % increase compared to the monthly average for between May 2008 and April 2009 caused by a sharp rise in admissions of children aged five and under.

Between May 2009 and April 2010, the provisional monthly average for all asthma admissions was 5,660, while the provisional monthly average for the 16 and under age group was 2,320 (accounting for 41 % of all admissions).

But in September 2009 there were 6,900 admissions for asthma, 3,670 of which (53 %) were for children aged 16 and under and 2,090 of which (30 %) were for children aged five and under.

See:

[Peak in asthma hospital admissions among young children in September, provisional figures show](#)

Social Care and Mental Health indicators

The NHS Information office has released the set of national indicators 'Social Care and Mental Health indicators from the National Indicator Set - 2009-10 Provisional, England' for English local authorities and local authority partnerships underpins the performance framework for local government.

Key facts from the indicators include:-

- 50.1 % of adults with mental health problems aged 18-69 in contact with secondary mental health services were known to be in settled accommodation at the time of their assessment or latest review (NI 149).
- 6.7 per cent of adults with mental health problems aged 18-69 in contact with secondary mental health services were known to be in paid employment at the time of their assessment or latest review (NI 150).
- 61.0 per cent of adults with learning disabilities aged 18-64 and known to Councils with Adult Social Services Responsibilities (CASSRs) were in settled accommodation at the time of their assessment or latest review (NI 145). This compares to 64.5 per cent in 2008-09.
- 6.4 per cent of adults with learning disabilities aged 18-64 and known to Councils with Adult Social Services Responsibilities (CASSRs) were in paid employment at the time of their assessment or latest review (NI 146). This compares to 6.8% in 2008-09.
- 13.0 per cent of all adults and carers received services via self directed support (NI 130).
- 3,118 adults per 100,000 population were assisted directly through social services funded support to live independently an decrease since the 2008-09 figure of 3,202 adults per 100,000 population. This includes those supported through services provided by grant funded organisations (NI 136).

A further more detailed report is expected to be published in September, which will contain provisional social care data. But the Mental Health Indicators will be taken from the annual MHMDS data and will be final.

See:

[Social Care and Mental Health indicators from the National Indicator Set - 2009-10 Provisional, England](#)

The NHS INFORMATION Service has published 'Provisional monthly patient reported outcome measures (PROMs) in England: April 2009 to March 2010. Pre operative data: Experimental Statistics.'

These monthly NHS Information Centre publication of experimental statistics outline information collected for the Patient Reported Outcome Measures (PROMs) programme. This updates provider, commissioner and participation tables of key statistics on patients' self-reported health status before undergoing four common elective surgical procedures; groin hernias, hip replacements, knee replacements and varicose veins. It covers the period from April 2009 to March 2010 and includes analysis of questionnaires that all hospitals treating NHS patients have been asked to collect from patients who wish to participate.

Key facts from these statistics include

- There were 236,859 eligible HES episodes and 142,248 pre-operative questionnaires were returned - a headline participation rate of 60.1 %

- Participation in PROMs has increased over time - from 5,535 in April 2009 to a peak of 15,074 questionnaires returned in March 2010.
- Of the 142,248 questionnaires, 94,530 have been successfully linked to HES to date - a linkage rate of 66.5 %
- Participation and linkage rates vary by procedure - knee replacements had the highest participation rate at 68.8 % varicose vein procedures the lowest at 42.0 %.

See:

[Provisional Monthly Patient Reported Outcome Measures \(PROMs\) in England - April 2009 to March 2010.](#)
[Pre operative data: Experimental Statistics](#)

The NHS Information Centre has published 'Provisional monthly hospital episode statistics for admitted patient care, outpatient and accident & emergency data, April 2010'

Key facts include:

Monthly HES data for Inpatients:

In the year from May 2009 to April 2010 there were:

16.8 million finished consultant episodes (FCEs), 58 per cent of which included at least one procedure or intervention, and of these 5.5 million were day cases.

14.5 million finished admission episodes (FAEs), of which 5.2 million were emergency admissions.

Monthly HES – Inpatient Clinical coding coverage

The shortfall between the most recent month's data is more pronounced when considering clinical (procedures and diagnoses) coverage. 3.9 per cent more procedures and 6.4 per cent more diagnoses were coded in the HES data submitted to SUS by 23 June 2010 (Month 2) - extract used for this publication, compared to the HES data submitted to SUS by 24 May 2010 (Month 1), extract unpublished. We accordingly recommend extra caution using clinical codes for the most recent months data.

As expected the largest improvement between the two most recent months' data is for the month of April 2010.

Monthly HES for Outpatients

In the year from May 2009 to April 2010 there were:

84.1 million outpatient appointments made, with 67.3 million (80.0 per cent) of these attended by the patient.

6.7 million outpatient appointments not attended by the patient, representing 7.9 per cent of all appointments.

Provisional Monthly HES data for Accident and Emergency (Experimental Data)

In the year from May 2009 to April 2010 there were:

15.5 million A&E attendances recorded in A&E HES. Of these 3.4 million (22 per cent) resulted in admission to hospital for inpatient treatment, 2.9 million (19 per cent) resulted in a GP follow up, and 6.1 million (39 per cent) were discharged with no follow up.

Provisional Monthly HES topic of interest:

Assaults

In the current year from May 2009 to April 2010 there were 41,844 finished admission episodes for assault (all age groups), of these 26,000 (62.1 per cent) were from Tackling Knives Action Programme (TKAP phase II) local authorities and 15,844 from non-TKAP areas.

In the previous year from May 2008 to April 2009 there were 43,194 finished admission episodes for assault (all age groups), of these 26,909 (62.3 per cent) were from Tackling Knives Action Programme (TKAP phase II) local authorities and 16,285 from non-TKAP areas.

Between these periods admission episodes for assault decreased by 3.1% in England with an decrease of 3.4 per cent in TKAP phase II areas and an decrease of 2.7 per cent in Non-TKAP areas.

There were 10,398 finished admission episodes recorded in the year May 2009 to April 2010 for people aged between 13-24 within TKAP phase II areas, representing a decrease of 482 (4.4 per cent) from the previous year (May 2008 to April 2009).

There were 6,224 finished admission episodes recorded in the year May 2009 to April 2010 for people aged between 13-24 within non-TKAP areas, representing a decrease of 137 (2.2 per cent) from the previous year (May 2008 to April 2009).

Provisional Monthly HES topic of interest:

Asthma

In the period from May 2009 to April 2010:

There were 67,970 finished admission episodes (FAEs) with a primary diagnosis of asthma, compared to 71,036 between May 2008 and April 2009, representing a 4.3 per cent decrease.

Females accounted for 56.2 per cent of episodes (38,176), while males accounted for 43.8 per cent (29,792) FAEs.

Those aged 16 and under were the most likely to be treated for asthma

See:

[Provisional monthly HES data for inpatients](#)

[Provisional Monthly Hospital Episode Statistics for Admitted patient care, outpatient and Accident & Emergency data, April 2010](#)

Parliament

House of Lords

Summer Recess 2010: Written Answers and Statements.

Monday 2nd August 2010

Abortion: questions asked by Lord Alton of Liverpool

Embryology: questions asked by Lord Alton of Liverpool

Health: costs: question asked by Lord Laird

Health: orthopaedics: questions asked by Lord Cotter

Health: pregnancy: question asked by Lord Alton of Liverpool

Monday 9th August 2010

Children: nutrition : question asked by Lord Avebury

Children: obesity : question asked by Lord Taylor of Warwick

Embryology : questions asked by Lord Alton of Liverpool

Fluoridation: question asked by Earl Baldwin of Bewdley

Health food stores: question asked by Lord Pearson of Rannoch

Health: allergic disease: questions asked by Baroness Finlay of Llandaff

Health: alternative medicine: question asked by Lord Pearson of Rannoch

Health: asthma: questions asked by Baroness Masham of Ilton

Health: costs: question asked by Lord Laird

Health: drugs: question asked by The Earl of Sandwich

Health: paediatric continence services: question asked by Baroness Wilkins

Health: physical activity: question asked by Lord Pendry

Care Quality Commission

Letter highlighting the recommendations in CQC report on safer management of controlled drugs

The Department of Health (DH) has published a letter from Dr Keith Ridge highlighting the recommendations in the recently published annual report by the Care Quality Commission, on the safer management of controlled drugs.

See:

[Care Quality Commission \(CQC\): The Safer Management of Controlled Drugs Annual Report 2009.](#)

[Health and social care services are monitoring controlled drugs more effectively, says CQC](#)

[Report shows improvement in safe management of controlled drugs](#)

[Back to top](#)

Other Health Information

Health Professions Council (HPC) consultation on generic standards of proficiency

Following a lengthy review, the Health Professions Council (HPC) has launched a consultation '[Generic standards of proficiency](#)' inviting stakeholders for their views on the review of the generic standards of proficiency.

During the review process the HPC set up a group of HPC Council members to review the generic standards and recommend whether any changes need to be made to ensure that the generic standards are applicable to all the professions the HPC regulates, and to give these standards more user friendly terminology and bring them in line with the HPC standards of proficiency for individual professions.

See:

[Consultation on proposed changes to the generic standards of proficiency](#)

The consultation will run until 20 October 2010.

Health Professions Council have launched an online referrers campaign

Following research which indicated that just 30% of GPs and 34% of practice nurses were aware of the Health Professions Council (HPC), a joint online referrers campaign aimed at GPs and practice nurses and designed to increase their awareness of the HPC and highlight the importance of referring patients onto registered professionals, has been launched.

The research also found the most common referrals were to chiropodists/podiatrists, physiotherapists, counselling and clinical psychologists, and as part of this campaign the HPC is working with the Royal College of General Practitioners, the Nursing and Midwifery Council and the Royal College of Nursing to create an HPC microsite which will run for six months for their members to view and access information about the HPC

See:

[HPC launches its first online campaign aimed at GPs and practice nurses](#)

Newsletter HPC in focus

The Health Professions Council (HPC) has issued [HPC In Focus - Issue 30, August 2010.](#)

Ofsted report argues that secure placements for young people are too far away for adequate family support

An Ofsted report 'Admission and discharge from secure accommodation' argues that Some children and young people in secure care are being placed too far from their families, thus damaging their chances of receiving coordinated support.

The report argues that while young people generally receive good emotional support within secure establishments, the limited number and range of secure establishments undermines efforts to support those in secure placement, and in addition, many young people are placed a long distance from

home, depriving them of valuable family support and making it more difficult for agencies to plan and assist them as they prepare to return to life in the community.

See:

[Admission and discharge from secure accommodation](#)

[Young people in secure accommodation losing out on chances of rehabilitation](#)

Barnardos has revealed new data indicating that children are being damaged due to unprecedented delay in the courts in England and Wales.

The children's charity Barnardo's argue that a five year long pattern of deterioration has led to family courts taking up to 65 weeks to rule if it is safe for children to stay with their parents. They argue that county courts are impelling vulnerable children to wait on average more than a year (57 weeks) in unstable family homes or emergency foster placements before a county court decides if they will be taken into care. In addition, in the family proceedings (magistrates) court the average time is 45 weeks – more than 10 months.

Barnardo's argue that court data shows that at the end of 2009 there were 50 % more unresolved care proceedings cases than at the end of 2008. According to The Children and Family Court Advisory and Support Service (Cafcass), indicated that new applications in England account for less than half of this increase, indicating that the courts are taking longer to close a significant number of cases.

See:

[Vulnerable children trapped in unnecessary limbo says Barnardo's](#)

Breast cancer mortality rates have fallen in the UK

Research from the International Prevention Research Institute has found that the mortality rate for breast cancer in the UK has fallen over the past 20 years by 30 per cent between 1980 and 2006.

Overall, the rates were found to have fallen by at least 20 per cent in 15 countries.

Hilary Tovey, UK policy manager at Cancer Research, commented: "The UK has seen greater decreases in the number of women dying from breast cancer than many other European countries over this period, though this is partly because death rates were relatively high in the 1980s.

See:

[Breast cancer deaths fall in UK](#)

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