Brunswicks’ Healthcare Review

refreshingly modern, reassuringly traditional
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| There is no article this week | | | | | | | | | | | | | | | | | | | |

### Editorial

We have witnessed a number of Ministers and others overtly support whistleblowers both in the NHS and within the private health and care sectors. Some, including Jeremy Hunt, have gone so far as to say that dismissing whistleblowers and then effectively gagging them by including a non-disclosure provision in a settlement agreement is ‘outlawed’ and ‘prohibited’.

As we have seen, this appears to be an assertion routinely ignored by many, if not all, NHS bodies. Even now.

The person who in recent times unintentionally drew attention to such treatment was Margaret Haywood—a nurse struck off the Nurses Register for having covertly filmed the most appalling treatment of older people in an NHS hospital, Royal Sussex County Hospital, Brighton.

It took her four years to be reinstated and then she was lauded by fellow professionals and given awards for her actions.

Of course, none of that paid the bills in the four years it took for her to clear her name and be restored to the Register.

A poll of nurses by the RCN in May 2009 showed 63% of nurses would report matters if they had concerns, however, on 29% said that their employer took any immediate action. I would be prepared to bet that the figure of 63% has not improved in the intervening years.

More recently, the former chief executive of United Lincolnshire Hospitals, Gary Walker, having settled his claim against his former employer for wrongful and unfair dismissal and banked the settlement cheque from his former employer, he then went to war with the hospital.

In breach of the confidentiality terms which he had accepted as part of the settlement, he raised a hue and cry about patient safety—which was the issue which he said was behind his dismissal.

He was threatened by lawyers representing the NHS Trust that he would be sued for a return of all of the settlement monies. If that happened, and if he had been saddled with the legal costs of such action (which he would have been had he lost), he would have been financially ruined and the lives of his family and himself seriously damaged.

The gagging of NHS and other people who draw attention to wrongdoing must stop. Reporting such matters is a civic duty, surely.

The new head of NHS England, together with the Ministers, should make it unlawful for any NHS body to act in the way these two individuals (and hundreds of others like them). There should be a corporate and personal liability for such conduct which runs completely counter to the interests of NHS patients.

Simon Stevens—please step up to the mark.

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We use twitter to bring up-to-minute care sector news—to keep abreast of developments in the sector follow us on Twitter here.

If you currently get this Brunswicks' Healthcare Review from someone else and would prefer to get your own copy, sent directly at no cost - please email us with a request. Our contact details are on the last page of this issue. Thank you.
We are on the move!

PLEASE NOTE OUR CHANGE OF ADDRESS FROM 12 JUNE 2014. WE ARE NOW LOCATED AT:

24 Hamilton Square, Birkenhead CH41 6AY

Switchboard: 08455 190 690

Crisis Intervention Line—Available 24 hours, 365 days: 07855 855 588
Abuse/Dignity

1. Surveillance uncovered...
28 May 2014—CQC
CQC held a round table discussion on the hotly debated topic – covert surveillance and its role in exposing poor care. Andrea Sutcliffe, Chief Inspector of Adult Social Care, said:

"There wasn’t consensus on all points, but most certainly felt that the use of covert surveillance by CQC should be a last resort."

Read more...

2. SCIE seeks info
29 May 2014—SCIE
As you are no doubt aware, the Department of Health commissioned SCIE to produce a legal guide for practitioners on existing legal powers to gain access to an individual thought to be at risk of abuse or neglect, where a third party is preventing that access. SCIE obtained the services of Michael Mandelstom to write the guide.

The Minister of Care and Support Services, Norman Lamb, made the commitment to produce a legal guide in response to the strength of feeling voiced in both House in relation to this issue. The Minister asked SCIE explicitly to ensure that you had early involvement in the production of the guide.

SCIE is arranging 3 workshop sessions to have facilitated discussions to review and refine the guide.

The dates of the 3 workshops are as follows:

04.06.2014: 2.00pm – 4.30pm
09.06.2014: 4.00pm – 6.30pm
11.06.2014: 5.00pm – 7.30pm

These will all be held at SCIE’s offices. SCIE will circulate a draft of the guide in advance of the workshops.

Contact Jane Francis, jane.francis@scie.org.uk, to indicate which workshop you will be able to attend.

Business News

3. Pfizer drops AstraZeneca takeover bid
26 May 2014 — BBC News
US drugs giant Pfizer has withdrawn its £55 a share, £69bn takeover bid for UK pharmaceutical firm AstraZeneca after its rejection.

It rejected a final offer from Pfizer earlier this month, saying the proposal undervalued the company and its “attractive prospects”.

Nevertheless, in recent weeks some AstraZeneca shareholders had said they wanted the firm to engage with Pfizer.

http://www.bbc.co.uk/news/business-27572986

4. Is this hospital a miracle cure for the NHS?
28 May 2014—Daily Mail
Full page about the day David Jones spent at Hinchinbrooke Hospital, Cambs, and his views of this hospital, its working practices and the effect for patients – the hospital is, of course, an NHS hospital but run by Circle the private company which has introduced new working practices drawn from manufacturing and commercial businesses and which gives its workforce a direct equity stake in the success of the operation and clinicians sit on the management board.

5. Slimming firms set to make big profits on NHS
29 May 2014—The Times
Report says that it is believed that the NHS has spent large sums of money on businesses like Weight Watchers in a bid to address the growing levels of obesity in the UK.

6. Glaxo chief seeks cure for bribery scandal headache
01 June 2014—The Sunday Times
Report that Sir Andrew Witty is seeking to control the corruption allegations and the bribery investigation against GlaxoSmithKlein following the dramatic revelations in China, Poland and elsewhere GSK personnel were bribing doctors to prescribe GSK products. More than £1bn has been wiped off the value of shares in GSK.

The Editor holds shares in GSK.

Care Homes

7. Care home criticised for failing national standards says it is now ‘fully compliant’
27 May 2014 — Essex County Standard
A care home previously criticised for failing to meet national standards has said it has tackled issues raised by inspectors.

Elmcroft Care Home, in Brickhouse Road, Tolleshunt Major, Maldon, was issued a formal warning by CQC
for failing to ensure people were protected against the risks of inappropriate or unsafe care or treatment.

The home was also told to take action in relation to assessing and monitoring the quality of the service, following the unannounced inspection in February.

http://www.essexcountystandard.co.uk/news/local-news/11235068.Care_home_criticised_for_failing_national_standards_says_it_is_now_fully_compliant/?ref=var_0

8. National Care Home Open Day - a golden marketing opportunity
28 May 2014 - Caring Times editor, Geoff Hodgson
Friday, 20th June is National Care Home Open Day. This event has the potential to showcase to the public the hugely positive contribution which care homes make to their communities, the excellent care and residents’ wellbeing. The day may go some way to counter the negative image of care homes so often portrayed in the general media. Through the open doors may come future residents and their families, and future members of staff. But I do fear that in many cases it will be an opportunity missed.

This year’s event will be the second such (the first was held in June last year). Several care homes near where I live in Dorset participated in the event, but none of them appeared to have done much in the way of promotion. I may have missed notices in the local papers but I did note the absence of any effective signage outside the homes.

I contrast this with a farm just a few miles away from where I live. At the farm gate there is not one, but two big banners (facing both streams of traffic) proclaiming Open Farm Sunday on 8th June. These banners have been there since mid-April. I’ll visit that farm on the day.

Considering the cost of advertising, whether in local papers, radio or by leaflet, it seems a no-brainer that for the price of a couple of banners which could be used year on year, care homes around the country could really maximise the benefits they may derive from being part of National Care Homes Open Day.

The website – www.nationalcarehomeopenday.org.uk – does have a Resources section to help care homes promote the day to their communities.

The CT Blog is written in a personal capacity – comments and opinions expressed are not necessarily endorsed or supported by Caring Times.

9. Gainsborough Care and Nursing Home in Swanage re-inspected after warning notice
28 May 2014 – Bournemouth Echo
A CARE home in Swanage ordered to improve by CQC is now meeting national standards.

As reported in the Echo on May 15, Gainsborough Care and Nursing Home, Ulwell Road, was given a warning notice for mismanagement of medication by the regulator following an inspection in February.

The report said that the home’s management had a "major impact" on residents.
http://www.bournemouthecho.co.uk/news/11238062.Care_home_ordered_to_improve_now_meets_national_standards/?ref=var_0

10. Hertfordshire woman 'may have been dead three days' in care home
30 May 2014 – BBC News
A family has claimed that a Hertfordshire woman may have been dead for three days before being discovered at her warden-controlled home.

Sylvia Jay was found in her room at the Beane River View Care Home in Hertford on 23.05.2014.

 Relatives said a warden from home operator's Sanctuary Supported Living was supposed to check on her every day.

A spokeswoman said it was "looking into the circumstances" surrounding Ms Jay’s death.
http://www.bbc.co.uk/news/uk-england-beds-bucks-herts-27633629

Case Reports
Law Reports
Nothing to report
Disciplinary cases

11. Suspension for dentist after hearing
25 May 2014 – Hartlepool Mail
A dentist whose conduct was deemed to be 'unprofessional and financially motivated' was struck off by the General Dental Council.

The allegations against Frank Michael Booth, were heard by the GDC’s Professional Conduct Committee (PCC).

The charges relate to a period of work between June 2003 and November 2011.

During those times Mr Booth worked at The Walkers Court Dental Practice in Garstang, near Preston, The Grange Dental in Grange-Over-Sands in Cumbria and at Total Dental Care in Ambleside.
The charges he faced related to the treatment he provided to 'Patient A' who was aged between 83 and 91 years old over the period of time. [Link to Hartlepool Mail article](http://www.hartlepoolmail.co.uk/news/suspension-for-dentist-after-hearing-1-6636504)

**12. Doctor in FGM case found guilty of misconduct**

**28 May 2014**—The Times

Ali Mao-Aweys has been found guilty of offering to assist in arranging female genital mutilation by the GMC fitness to practise panel.

**13. Laura Jane Jones - Social worker suspended for drugs conviction**

**28 May 2014**—HCPC

Social worker Laura Jane Jones has been suspended from the HCPC Register for a drugs conviction received at Stafford Crown Court.

A panel of the HCPC Conduct and Competence Committee heard that Laura Jane Jones pleaded guilty and was convicted of two offences of possessing with intent to supply Class B drugs. She was sentenced to two concurrent community sentences for twelve months.

The panel further heard that Laura Jane Jones was subjected to extreme emotional pressure at the time she committed the offences. She has no previous convictions.

The panel decided the most appropriate action was to suspend Laura Jane Jones from the Register for a period of twelve months with an Interim Suspension Order in place to cover the appeal period.

Laura Jane Jones was present at the hearing.

**14. Simon M Jacklin - Physiotherapist struck off following conviction**

**30 May 2014**—HCPC

Physiotherapist Simon M Jacklin has been struck off the HCPC Register for assaulting a Doctor and for being convicted of assault at Walsall Magistrates Court.

A panel of the HCPC Conduct and Competence Committee heard that Simon M Jacklin attended a surgery shortly after nine o'clock in an agitated state. The alarm was raised and the Police were called. Before the Police arrived, the registrant assaulted Doctor A by kneeling him in the groin and punching him in the side of the head.

The panel further heard that Simon M Jacklin was convicted of assaulting his wife, pleading guilty at Walsall Magistrates Court. Simon M Jacklin received a twelve month Community Order with a supervision requirement and a costs order.

The panel decided the most appropriate action was to strike Simon M Jacklin from the Register with an Interim Suspension Order in place to cover the appeal period.

Simon M Jacklin was not present or represented at the hearing.

Raza Laskar was charged after computers and other items were seized by police during a raid on a house in the town on 02.05.2014.

The charges relate to a 15-year-old boy.

Dr Laskar was remanded in custody at Manchester Minshull Street Crown Court and is due to face a further hearing at the court on 19.09.2014.

A spokesman for NHS England said the organisation was working with police and assisting with their enquiries. [Link](http://www.bbc.co.uk/news/uk-england-manchester-27640087)

**16. FGM doctor struck off**

**31 May 2014**—The Times

Ali Mao-Aweys (see in this issue of BHCR, item 12) has been struck of the Medical Register.

**17. High Court makes adoption call for baby with no name**

**25 May 2014**—BBC News

A baby with no name will be placed for adoption after a High Court judge highlighted concerns about his father's hostility to social workers.

Mrs Justice Parker heard the father of the five-month-old boy had assaulted one social worker and threatened to kill another.

She said she was worried about the baby's mother who has a learning difficulty and she was "troubled" by the decision not to name the child.

The judge said that the father who appeared to have become frustrated by what he saw as an "invasive"
approach by Hertfordshire County Council social services, could be "dangerous".

She also said she thought it "emotionally harmful" not to give a child a name.

http://www.bbc.co.uk/news/uk-england-beds-bucks-herts-27566085

18. Dudley hospitals: Police investigate patient restraint claims
27 May 2014 – BBC News
A police force has confirmed it is investigating claims of unlawful patient restraint at a hospital trust.

The allegations concern the Dudley Group of Hospitals NHS Foundation Trust, and were made by two former staff members who have now lost their jobs.

John Marchant, the trust’s former head of security, said patients were restrained for "weeks and weeks".

West Midlands Police said they were making inquiries. The Dudley Group said the investigation was "a precaution".

http://www.bbc.co.uk/news/uk-england-birmingham-27585324

19. Carers failed to spot man dead for six days
28 May 2014—The Times
An inquest into the death of Sean Cruise, 52, lay dead in his accommodation and care workers went in to open curtains and the like but failed to spot his body lying on the floor. Sue Grantham, care co-ordinator with Southern Health NHS Foundation Trust said that she went to the property and she too failed to spot the body.

The investigation found that:

Carers expected the man to manage his household money by using two tins, into which money was paid into or taken out of and the information recorded in ledgers. But the investigation found that some of that data from the ledgers was missing, meaning the system was open to abuse.

- Because carers failed to help him budget effectively, he was able to open two personal bank accounts, incurring an overdraft on one.
- One of his flats where he lived for more than two years had no bathing facilities for six months.
- There were also tensions between him and the landlord who was also his carer, which as the care company commissioned to look after him later acknowledged, was unacceptable.

The man was discharged from a psychiatric unit under the Mental Health Act in 2004. The law states that health authorities and local social services departments should provide aftercare services for a person discharged from detention under the Mental Health Act for as long as that person needs them.

It also states that the aftercare plan should be reviewed every six months. But the investigation only found three section 117 reviews for the entire five-year period from 2004 to 2009.

Local Government Ombudsman Dr Jane Martin said:

- The man was forced to spend weekends with his parents to get respite from the poor standard of accommodation and the unacceptable situation with his carers.

Parliamentary and Health Service Ombudsman Julie Mellor said:

"This vulnerable man was left suffering and was out of pocket by thousands of pounds because no one took responsibility for coordinating his care properly.

"The NHS has a duty to care for people with a mental health problem which doesn’t stop when that person leaves a psychiatric unit or when a service is outsourced. This case demonstrates the shocking consequences when that duty of care is ignored.

"Opportunities to put things right were repeatedly denied because he had woefully insufficient aftercare plan reviews. He only had three in five years, when the Mental Health Act Code of Practice states that he should have had ten."

The man was discharged from a psychiatric unit under the Mental Health Act in 2004. The law states that health authorities and local social services departments should provide aftercare services for a person discharged from detention under the Mental Health Act for as long as that person needs them.

It also states that the aftercare plan should be reviewed every six months. But the investigation only found three section 117 reviews for the entire five-year period from 2004 to 2009.

Local Government Ombudsman Dr Jane Martin said:
"The complaint offered both the Trust and the council the opportunity to review the care given to the man and to address the concerns that were raised.

"Neither authority took that opportunity and did not give the complaints the attention they deserved.

"Addressing a complaint locally is often the most effective way of resolving the issues and of ensuring that the lessons learnt help drive service improvements. In this case, the handling of the complaints by the Trust and the council simply compounded the frustration that the man experienced."

Plymouth Council and NHS Plymouth Primary Care Trust (now Northern, Eastern and Western Devon Clinical Commissioning Group), which were both responsible for his care, have been asked to pay him £12,000, split equally between them.

The ombudsmen have also called on both the Council and the Clinical Commissioning Group (CCG) to write to the man to acknowledge the service failure and maladministration and to apologise for the injustice he suffered as a result.

They have also been tasked with drawing up action plans to ensure that they have learnt from the failings and to outline what steps they will take to stop it from happening again.

21. Sacked heart surgeon: More data 'irregularities' found
29 May 2014 – BBC News

More "irregularities" have been found in a sacked Birmingham heart surgeon's medical data.

Ian Wilson was dismissed amid suggestions he was under-reporting the time patients spent on a heart-lung bypass machine, and now, in a further apparent abnormality, records suggest four and not 81 patients were treated with intravenous glycerol trinitrate (GTN).

Mr Wilson's legal team said his performance had been exemplary.

Fifteen of Ian Wilson's patients at Queen Elizabeth Hospital died following surgery over a period of 14 months.

http://www.bbc.co.uk/news/uk-england-birmingham-27625306

22. Three more nurses suspended in ABMU records inquiry
29 May 2014 – BBC News

A total of 13 nurses are now suspended as part of an inquiry into the alleged falsification of patient records at south Wales hospitals.

It comes after seven nurses were suspended from the Princess of Wales Hospital over the last year.

Three other nurses were arrested as part of the investigation last year.

http://www.bbc.co.uk/news/uk-wales-south-east-wales-27623422

23. Shocking photos of mother lying in agony on hospital floor days before she died
29 May 2014 – Telegraph

Medics were accused of "abandoning" a mother-of-four who died days after she was photographed by her daughter doubled up in pain on a hospital floor.

Her family say that Margaret Lamberty was forced to crawl down the hospital corridor on hands and knees to beg nurses for painkillers.

Three days later she died of multiple organ failure triggered by blood clots in her bowel.


24. University Hospital of Wales nurse jailed for sex attacks
30 May 2014 – BBC News

A male nurse who sexually attacked two female patients on the same night while he carried out his hospital rounds has now been jailed for 18 months.

Benedyct Czajkowski left the women terrified at the University Hospital of Wales Cardiff.

He groped one woman and then pulled down the underwear of another after she had pressed a buzzer.

He was found guilty of two sexual assaults and one physical assault.

The court heard the women were surrounded by privacy curtains when Czajkowski attacked them both on the same night.

http://www.bbc.co.uk/news/uk-wales-27631798

25. Hamdon surgery’s Helen Woodhead faked prescriptions
30 May 2014 – BBC News

The deputy manager of a doctors’ surgery who faked prescriptions to get painkillers for herself was given a suspended prison sentence.

Helen Woodhead used the passwords of colleagues at Hamdon Medical Centre in Somerset to access patient records and make out Codeine prescriptions.
She admitted one charge of fraud at Taunton Crown Court.
http://www.bbc.co.uk/news/uk-england-somerset-27638316

26. Devon health boss Dr Paula Vasco-Knight resigns
30 May 2014 – BBC News
A suspended hospital chief executive previously criticised at an employment tribunal for her treatment of two whistle-blowers has resigned.

Paula Vasco-Knight was suspended in February after being accused of nepotism for recruiting her daughter's boyfriend to a job at Torbay Hospital on full pay.

Dr Vasco-Knight had decided to relocate to the north-west of England for "family reasons", said South Devon Healthcare NHS Foundation Trust.

The tribunal in January found Claire Sardari and Penny Gates had been victimised as a result of whistle-blowing about their concerns.
http://www.bbc.co.uk/news/uk-england-devon-27636112

27. The thieving carer caught on camera
31 May 2014 — Lancashire Evening Post
Front page item about Carol Oldfield, 46, of Cameron Croft, Chorley, who was sentenced to 12 weeks in jail, suspended for two years, after pleading guilty in Preston Crown Court to stealing from an 88-yr-old woman which was 'caught' on a covert camera installed by the woman's family after they became suspicious.

Children

28. Cornwall child mental health services criticised
28 May 2014 — BBC News
For full report see Mental Health—item 94

29. New rules to overhaul adoption
29 May 2014 — Gov.uk
New rules to speed up the adoption system and ensure more children get a stable, loving home without delay will come into force in July.

30. Children’s home to be shutdown
30 May 2014 — Lancashire Evening Post
‘I saw one of carers being punched by one of the kids’

30 May 2014—Lancashire Evening Post
Front page item – Ofsted has taken the decision to close a children’s home run by Aurora Care (NW) Ltd in Bamber Bridge after a string of complaints about anti-social behaviour by those being cared for.

31. Debate over what’s best grows as council-run homes close
30 May 2014—Lancashire Evening Post
Lancashire County Council operates 15 care facilities for children, offering 90 places, Unison wrote to LCC in 2002 about the reductions in care places which LCC attributed to “transforming the service...not savings” concerns have not been satisfied.

32. NSPCC refers more child emotional abuse case referrals
30 May 2014 — BBC News
The NSPCC says that the number of child emotional abuse cases referred to police and children's services has risen by 47% in a year.

Its helpline received about 8,000 calls in 2013-14 about such non-physical cruelty, and 5,354 were thought serious enough to merit further inquiries.

Ministers are seeking to update laws on emotional abuse in England and Wales.
http://www.bbc.co.uk/news/uk-27625958

Conferences & Events

33. Dementia Friends Champion training courses
Join the 4,000 plus Dementia Friends Champions volunteering to make their communities more dementia friendly. Dementia Friends Champions are trained volunteers who encourage others to learn a little bit about dementia, and inspire them to help people with dementia live well.

There are lots more venues and dates listed on the website.

34. DF Wales Update
Dementia Friends was launched in Wales last month and since then Dementia Friends Champion, Amy Kitcher, has made 67 new Dementia Friends. Thank you Amy and welcome to all the new Dementia Friends in Wales!

If you are in Wales and would like to train as a Dementia Friends Champion to deliver Information Sessions like Amy then you can sign up to attend one of the upcoming training dates:

Gwent - 18 June

For future dates visit the Dementia Friends website.
35. 'If it all goes wrong' Workshop & HR Surgery for Employers
05 June 2014 Lancaster, White Cross Business Park. 09:30 to 11:30hrs
Sickness absence costs employers over £600 per employee per year on average, more in many cases. CIPD. Average compensation award for unfair dismissal £10,000* – also dwarfed by legal costs opportunity costs (Employment Tribunals Service Quarterly Statistics Apr-Jun 2013)

How you will benefit
Poor performance, careless behaviour and intermittent absence can creep up on employers. In this workshop experienced consultants Malcolm Martin and Fiona Whiting help you realise how easily these matters can be tackled safely so you can confidently:

- set expectations when these need spelling out
- investigate potential disciplinary matters
- hold a fair hearing
- keep the right records
- tackle intermittent absence
- develop an action plan to deal with longer term absence

Book Now
Read More

36. State Regulation and Inspection - 2014 and beyond
05 June 2014 – Brentwood
10 June 2014 – Birmingham
12 June 2014 – Elstree
17 June 2014 – Ashford (Kent)
19 June 2014 – Northampton
24 June 2014 – Eastleigh
26 June 2014 – Ipswich

A Seminar for Providers and Managers of Services regulated under the Health and Social Care Act 2008

You are cordially invited to book places for this seminar on Regulation and Inspection of health and social care services by the Care Quality Commission.

This Seminar will be of interest to Providers, Registered Managers and Practice Managers of services regulated by the CQC - care homes, domiciliary care agencies, dental and GP practices

The agenda for the seminar may be subject to minor change in the light of developments in the relevant fields

The morning session will examine the current ‘rules’ of regulation and inspection under the Health and Social Care Act 2008, the Registration Regulations and the Regulated Activities Regulations. It will explore the legal ‘definition’ of compliance - and how it underpins the methodology of inspections; and explain the so-called “relevant requirements”. We will look at the options for enforcement where there is a finding of non-compliance - and some problem areas for providers and managers.

- Health and Social Care Act 2008 and other relevant legislation
- The Registration Regulations - the ‘no excuses’ requirements
- The Regulated Activities Regulations - a risk-based system of regulation and inspection
- Offences under the Act and Regulations, and the legal ‘definition’ of compliance - the key to your inspection report
- Assessing and monitoring the quality of service provision - and the management of regulatory risk
- Warning notices, fixed penalty notices and conditions of registration
- The difficulties of notifications - striking the balance between over-reporting and a £1,250 fixed penalty notice
- The vacant registered manager post - what is the “reasonable excuse”? 
- Fit person interviews - an hour under the microscope
- Criminal records checks - getting it right

The afternoon session will explore the wide-ranging changes in legislation and regulations currently taking shape, and their effect on regulation and inspection. What is the “regulatory risk” of these changes for the majority of providers? What measures could or should the provider and manager put into place to ensure compliance?

Note The detail of this session may be subject to amendment, depending on the content of consultations or published documents anticipated from April.

- The new regulations - from “essential standards” to “fundamental standards” - clear, or vague and arbitrary?
- What will change? What will not change?
- New statutory guidance - the power to make regulations?
- New offences and new powers - prosecution without notice
- The new duty of candour - what will this cover?
- The proposed new criminal offence of ill-treatment or wilful neglect - overlap with fundamental standards?
- The new inspection methodology - change of style or substance?
The new statutory service performance ratings
Representations and appeals - will they be effective?
Statutory underpinning of training requirements
The new NICE social care quality standards
‘Managing’ compliance - regulatory risk management

- What are the objectives of this seminar?
- To set out the rules of regulation and inspection, and to explain the legal basis for them;
- To explore the current and new challenges for providers in maintaining compliance;
- To set out the changes being made to the system of regulation and inspection - what is to change, and what will remain the same;
- To provide an update on the proposals in consultations, and analysis of any final documents available;
- To provide a backdrop for the manager to assess what changes may be needed in order to maintain compliance with the new requirements - and achieve the best outcome from the new rating system.

Booking your places on the seminar
- Most delegates will wish to attend the whole day. However, if you have attended one of the “CQC” seminars in the past you would find some of the morning session a repetition of the previous one.
- If you wish to attend only the afternoon session then you could either come at 1.00pm for lunch and the afternoon session, or just come for the afternoon session (tea/coffee available from 1.30pm).
- Please note that there will not be time to cover any of the topics from the morning session in the afternoon session, and you could find some aspects of the background to compliance difficult to follow if you come for the afternoon session only and if you are also new to these seminars!

Seminar fees
Whole day £96.00 per delegate
Lunch and afternoon session £60.00 per delegate
Afternoon session only £40.00 per delegate

Regulation and Inspection - 2014 and beyond
Booking form - click on link for Word .pdf forms, or to check venues http://www.hsc-prof.com/index4.html

37. Back to Bradford
Last year Care Roadshows came to Leeds Bradford and received a great response from the regions care professionals who welcomed this informative and inspirational show. On May 13th, the show is back at Cedar Court Hotel Bradford with another great line up of educational seminars, interactive workshops and a wide variety of exhibitors with the latest products and services especially for the care sector.

Seminars at the event will once again be hosted by experts at forefront of the industry who will be updating visitors with the very latest ideas and discussing the issues that are currently on the minds of those working within this challenging profession. Highlights from the programme include annual updates from Deborah Westhead, the CQC's Deputy Chief Inspector for Adult Social Care. There will also be a Dementia focused seminar from the Dementia Services Development Centre that will look at meaningful activities for people with Dementia and understanding the impact of the illness on each individual.

Care home nutrition experts apetito will be at the exhibition leading a seminar that deals with how to create nutritious, appealing meals for those with swallowing difficulties. After their presentation ‘Dining with Dignity’, see and taste some of the products on the market to help with this common issue amongst care homes.

With a wide variety of different products and services at the show ranging from care management systems, HR support and laundry equipment to domiciliary opticians and commercial carpet suppliers there is something for every care provider to discover.

2014 Care Roadshow Event Details:
24 June 2014 – Derbyshire County Cricket Club, Derby
21 October 2014 – Ashton Gate Stadium, Bristol
18 November 2014 – Brighton Racecourse, Brighton

For more information about Care Roadshows and to register for your ticket to this free event, please visit www.careroadshows.co.uk or call Broadway Events on 01425 838393.

All shows are open from 9.30am – 3pm Entry, seminars and workshops are all free. For more information and to register for free, visit: www.careroadshows.co.uk

38. Learning Disability Awareness Training
06 June 2014 London
Mental Health Foundation’s first Learning Disability Awareness (LDA) training day is being held at its London office.

LDA training is for anyone who wants to know more about people with learning disabilities and would be particularly useful for anyone in a customer facing job. MHFs experienced trainers, including people with learning disabilities, have been delivering learn-
This timely seminar will be an opportunity to discuss challenges and opportunities facing the health and social care workforce.

It includes keynote contributions from: Professor Wendy Reid, Medical Director, Health Education England; Andrea Sutcliffe, Chief Inspector of Adult Social Care, Care Quality Commission; Dr Glen Mason, Director of People, Communities and Local Government, Department of Health; Jan Sobieraj, Managing Director, NHS Leadership Academy; Dr Peter Carter, Chief Executive and General Secretary, RCN and Christina McAnea, National Secretary for Health, UNISON.

Following the publication of Health Education England’s (HEET) national workforce plan, delegates will consider progress and next steps for HEE and Local Education and Training Boards in ensuring that the workforce has the right skills, behaviours and training - and this is available in the right numbers to support the delivery of integrated care and to drive improvements.

Further sessions will focus on standards and regulation, following the Francis and Berwick reports and with the planned introduction of revalidation for nurses, as well as improving patient experience and developing leaders at a time of financial restraint.

Topics for discussion include:

- Meeting the workforce needs of integrated health and social care;
- Revalidation, staffing levels and culture post-Francis;
- Regulating workforce standards;
- Developing leadership in the NHS;
- Education, training and development; and
- Implementing the national workforce strategy.

The draft agenda is available to download [here](#).

**Speakers**

We are delighted to be able to include in this seminar keynote addresses from: Professor Wendy Reid, Medical Director, Health Education England; Andrea Sutcliffe, Chief Inspector of Adult Social Care, Care Quality Commission; Dr Glen Mason, Director of People, Communities and Local Government, Department of Health; Jan Sobieraj, Managing Director, NHS Leadership Academy; Dr Peter Carter, Chief Executive and General Secretary, RCN and Christina McAnea, National Secretary for Health, UNISON.

Further confirmed speakers include: Paul Buckley, Director, Strategy and Communications, General Medical Council; Professor Stuart Carney, Clinical Lead, Shape of Training Review and Dean of Medical Education, King’s College London; Maria Mills, Chief Executive Officer, SCA Group; Thea Stein, Chief Executive, Carers Trust and Stephen Welfare, Managing Director, Health Education East of England.

**Booking arrangements**

To book places, please use the [online booking form](#).

**40. Westminster Health Forum Keynote Seminar**

Clinical Commissioning Groups, NHS England and next steps for commissioning policy

12 June 2014 – Central London

with

Dr Chaand Nagpaul, Chair, GP Committee, BMA; Helen Hirst, Director of CCG Development, NHS Eng-

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**39. Westminster Health Forum Keynote Seminar**

The health and social care workforce: next steps for integration, staffing levels and training

11 June 2014 – Central London

with

Professor Wendy Reid, Medical Director, Health Education England; Andrea Sutcliffe, Chief Inspector of Adult Social Care, Care Quality Commission; Dr Glen Mason, Director of People, Communities and Local Government, Department of Health; Jan Sobieraj, Managing Director, NHS Leadership Academy; Dr Peter Carter, Chief Executive and General Secretary, RCN and Christina McAnea, National Secretary for Health, UNISON.

This event is [CPD certified](#).

[Website](#) | [Book Online](#) | [Live Agenda](#)
This seminar will be a timely opportunity to discuss progress and next steps for Clinical Commissioning Groups (CCGs) and NHS England in commissioning services and improving outcomes.

Delegates will discuss how effectively CCGs and NHS England are working with each other and with other key partners; the challenges of engaging clinicians; and the impact of changing funding allocation for CCGs.

Further sessions will focus on the delivery of integrated care, the role of the third and independent sector in the commissioning process and as providers, and next steps for commissioning support.

Topics for discussion include:
- Challenges and opportunities for commissioners;
- Progress and priorities for CCGs, and the delivery of five year strategies;
- Delivering commissioning support and providing value for money;
- CCGs and the developing role of the GP;
- Integrating services and reducing inequalities; and
- The future for primary care.

The draft agenda is available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: Dr Michael Dixon, Chair, NHS Alliance and President, NHS Clinical Commissioners; Helen Hirst, Director of CCG Development, NHS England; Andrew Kenworthy, Director of CSU Transition Programme, NHS England; Andrew Kenworthy, Director of CSU Transition Programme, NHS England; Dr Chaand Nagpaul, Chair, GP Committee, BMA and David Pearson, Vice President, ADASS (Association of Directors of Adult Social Services).

At this early stage, further speakers include: Andy Bell, Deputy Chief Executive, Centre for Mental Health; Dr Tim Dalton, Wigan Borough Clinical Commissioning Group and Wendy Meredith, NHS Bolton Clinical Commissioning Group.

Barbara Keeley MP, Member, Health Select Committee and Chair, All-Party Parliamentary Group on Social Care; Chair’s opening remarks and Chair’s opening remarks have kindly agreed to chair this seminar.

Booking arrangements
To book places, please use the online booking form.

41. Retirement Income: Risks and Opportunities
An ILC-UK debate supported by Prudential
16 June 2014 – M&G, Governor’s House, Laurence Pountney Hill, London, EC4R 0HH
Speaking in the 2014 Budget, the Chancellor of the Exchequer, George Osborne MP announced plans to “legislate to remove all remaining tax restrictions on how pensioners have access to their pension pots”. He said that “Pensioners will have complete freedom to draw down as much or as little of their pension pot as they want, anytime they want. No caps. No drawdown limits”.

The economic environment, combined with the reforms to the retirement income market, will significantly impact consumer behaviour at the point of retirement. On the one hand, in the prevailing low interest rate environment, consumers will be more susceptible to taking large risks by searching for higher yielding investments. Alternatively it may be the case that the reforms will allow individuals to better adapt to current and anticipated economic circumstances but this will clearly require skilled financial advice. Where does this come from and who pays for it?

In the Chancellor’s Budget Statement he outlined plans to “introduce a new guarantee, enforced by law, that everyone who retires on these defined contribution pensions will be offered free, impartial, face-to-face advice on how to get the most from the choices they will now have.” Since the Budget, “advice” has become “guidance”, but the commitment to a better informed consumer remains.
Over the next year, ILC-UK plans to undertake a range of activities to explore the impact of the changes announced by the Chancellor. Through research and a series of events, we will explore the risks inherent in the announcement made and highlight the opportunities. We will explore and model potential future scenarios and look to seek solutions which mitigate risks to the consumer whilst maximising the opportunities.

ILC-UK will begin our work in this area by launching, with the support of Prudential, a discussion paper outlining the Government’s proposals to reform the market and highlighting the types of choices that people will face and the support that might be available. Our analysis will consider the possible implications of the reforms by looking at the take up of different products across different countries (including the US, Denmark and Australia). We will also incorporate a discussion of the vast array of literature on the so-called “annuities puzzle” – the puzzle of why people fail to annuitise even if it represents the best option.

Our paper will consider how people currently use the lump sum option in the UK and how this differs by socioeconomic characteristics. Such analysis of how people use the lump sum could act as a rough proxy for how they will react under the proposed reforms, though the reality may prove different. Our paper will also highlight how we think people could react in the face of the new reforms and make some recommendations about what policy measures need to be developed to address the downside risks.

At this event, Ben Franklin (ILC-UK Research Fellow), will summarise the planned reforms and set out the findings of our discussion paper. Dean Mirfin (Key Retirement Solutions), Tim Fassam (Prudential) and Tom Boardman will give short perspectives on challenges and opportunities. Representatives of Government have been invited to respond to the issues raised. Following a discussion, Josephine Cumbo (FT) and Jane Vass (Age UK) will conclude the event with their perspective on the debate.

The event will provide an opportunity to discuss industry and consumer responses to the HM Treasury consultation on freedom and choice in pensions.

During the debate, the critical questions we want to address are:

- How might the Government’s reforms impact people’s behaviours at the point of retirement?
- What sorts of risks and opportunities for consumers will this present?
- What might this mean for the retirement income market?


43. The Future of Private Healthcare Summit 2014
23 June 2014 – The Royal Society of Medicine in London

Can an app based solution deliver affordable private healthcare?

Come and join the debate on the Future of Private Healthcare.

Here’s what some of the speakers and companies attending the forthcoming [Future of Private Healthcare: SUMMIT 2014](http://www.kingsfund.org.uk/events/innovations-delivery-care-older-people?utm_medium=email&utm_source=The+King’s+Fund+newsletters&utm_campaign=4136995_The+Weekly+Update%3a+16+May+2014&utm_content=olderpeople&dm_i=21A8,2GO4J,FLXC9D,8YJX7,1) (RSM, London, June 23rd) had to say when the final ruling of the Competition & Markets Authority was announced:

- BMI Healthcare: “The Commission has engaged openly with us and with our arguments and evidence, to reach a sensible, measured and fair conclusion.”
- Bupa Health Funding: “The sale of key HCA London hospitals will help to increase competition and will have a positive impact on customers in central London.”
- HCA International: “In failing to consider our investment, the mix of patients we treat and the complex procedures we carry, the CMA has drawn inaccurate conclusions about HCA International’s pricing – something which we strongly refute and will of course be challenging… The CMA’s main allegation appears to be that HCA is too successful, too efficient, too innovative.”
- Aviva: “… all patients and GPs in the UK will be able to make more informed decisions on medical treatment through the publication of cost and performance data.”
Housden Group: “The long term opportunity for delivering increased competition in the sector lies with the continued renaissance of NHS private patient units”

AIHO: “welcomes the moves to guarantee objectivity and transparency that inform choice and quality for patients”

Come and join the discussion about how private hospitals and the healthcare sector in general will respond to the CMA rulings, to changes in demand and in patient expectations and to the challenge of the rising cost of healthcare provision.

View the programme for “The Future of Private Healthcare: SUMMIT 2014” or view the speaker list on the event web site.

Where and when?
The event is supported by the Association of Independent Healthcare Organisations (AIHO) and takes place on 23 June at the Royal Society of Medicine in London. With seven weeks to go, we have already attracted 75 attendees. Space is limited…. So book now to secure your place.

Sponsor this influential Book now to take advantage of our earlybird offer – only 25 places available

We have extended our earlybird offer to the next 25 bookings only. These advance tickets are available with a saving of 10% but once they’re gone, they’re gone! Special rates are available for members of AIHO, NHS delegates and non-profit organisations. Register NOW to secure the EARLY BOOKING RATE.

Sponsor this influential
We are seeking a lead sponsor and partner for the event… benefit from a high profile amongst the leading participants in the UK private healthcare sector. Our sponsorship package includes a platform presentation, promotion to our email list of 22,000 industry participants, exhibition stand space and coverage in the post event video. Call me now to secure exclusive sponsorship.

44. 5th Eden Alternative UK Conference
24 June 2014 – Holiday Inn, Heathrow
Taking Eden to the Next Level
Programmes - Eden in the Community - Innovation and Music

Learn, share, be inspired and inspiring and come to the 5th Eden Alternative UK & Ireland Conference on the 24 June 2014.

Early bird rates available until the end of May. This is the best value conference of the year.

For programme and booking form call June or visit the website below.

June Burgess
Eden Alternative Regional Coordinator
T: 01225 309 238
Web: www.eden-alternative.co.uk

45. Adult Safeguarding And Elder Abuse Course
Action On Elder Abuse
26 June 2014
08 September 2014
24 October 2014

What are they?
These are indepth half day courses, designed to equip you with an understanding of the nature of elder abuse: what it is, why it happens, prevalence, risk factors, and how best to respond. The session additionally covers confidentiality and disclosure, whistleblowing, and both workforce and adult safeguarding legislation.

Course Outline

- What is elder abuse
- How do we know it happens
- Why does it happen, risk factors
- How extensive is the problem
- Confidentiality, Disclosure and Whistleblowing
- How to respond
- Legislation covering a workforce
- The Safeguarding clauses of the Care and Support Bill, and the inherent challenges
- The perspectives of safeguarding
- How best to empower people
- Concepts of Safeguarding

By the end of the session participants will have an understanding of elder abuse and how to respond to it, the nature of such abuse, including victims and perpetrators, and the latest developments around safeguarding legislation, including guiding principles and concepts. Participants will have a greater potential to engage in the safeguarding of older people and other adults at risk.
On completion of the seminar a certificate of attendance will be awarded to each delegate.

Course Tutor
Gary FitzGerald, CEO of Action on Elder Abuse

Course Duration
This is a half day seminar.

Where are they held?
In a venue close to Euston station in London.

Cost:
Members of AEA: £60 plus VAT
Non-Members: £70 plus VAT

Dates:
To book:
Email Maggie Evans at MaggieEvans@elderabuse.org.uk or ring her on 020 8835 9280.

46. Northern Care Business Conference
Leeds 2014
26 June – The Queens Hotel, LS1 1PJ
The Northern Care Business Conference from Laing-Buisson will again focus on the issues surrounding the long term care sector in the North of England.

With attendees made up of local authority care providers and commissioners, and the owners and operators of regional groups (among many others), this event will be a great networking and insight to the challenges this sector faces in the northern part of the UK.

PRICE
Delegate £150.00 +vat
Exhibition Stand (includes 2 delegates) £400.00 +vat
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47. Westminster Health Forum Keynote Seminar
Next steps for cancer care: commissioning, integration, research and improving outcomes
01 July 2014 – Central London
with
John Baron MP, Chair, All-Party Parliamentary Group on Cancer; Professor Peter Clark, Chair, National Cancer Drugs Fund; Ciarán Devane, Chief Executive, Macmillan Cancer Support and Non-Executive Director, NHS England; Professor Adrian Newland, Chair, Diagnostic Assessment Programme, NICE and Clinical Director for Pathology, Barts Health NHS Trust; Professor Karol Sikora, Chief Medical Officer, Cancer Partners UK and Sarah Woolnough, Executive Director of Policy and Information, Cancer Research UK and Eric Low, Myeloma UK and Dr Jem Rashbass, Public Health England

Chaired by:
Baroness Morgan of Drefelin, Chief Executive, Breast Cancer Campaign

Seminar supported by Celgene

This seminar will provide a timely opportunity to discuss the commissioning and delivery of cancer care in the reformed NHS.

Discussion will focus on the improvement of cancer services across each of the NHS domains; progress and priorities for NHS England, Clinical Commissioning Groups and Clinical Senates in commissioning cancer care; and what opportunities exist for improving public health and awareness.

With the Cancer Drugs Fund to be extended until 2016, attendees will also consider key issues surrounding provision of and access to treatments; the impact of increased funding for research; and next steps for value-based assessments and personalised medicine.

Topics for discussion include:

- Assessing priorities for cancer care and commissioning specialised services;
- Integration, early diagnosis and reducing inequalities;
- Research, funding and developing clinical pathways;
- Opportunities for the independent sector;
- The Cancer Drugs Fund, and making value-based assessments; and
- Next steps for delivering personalised treatment.

The draft agenda is available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: John Baron MP, Chair, All-Party Parliamentary Group on Cancer; Professor Pe-
Baroness Morgan of Drefelin, Chief Executive, Breast Cancer Campaign has kindly agreed to chair part of this seminar.

Booking arrangements
To book places, please use the online booking form.

48. Westminster Health Forum Keynote Seminar
Dentistry 2014: commissioning, regulation and the dental contract
02 July 2014 – Central London
with
Dr Barry Cockcroft, Chief Dental Officer, NHS England; Dr John Milne, Chair, General Dental Practice Committee, BDA and Professor Callum Youngson, Professor of Restorative Dentistry and Head of School, School of Dentistry, University of Liverpool and Justin Ash, Oasis Healthcare and Julie Rosse, British Society of Dental Hygiene and Therapy

Chaired by:
Lord Colwyn, Vice Chair, All-Party Parliamentary Group on Dentistry

Seminar sponsored by Oasis Healthcare
This event is CPD certified

Website | Book Online | Live Agenda

Delegates at this timely seminar will examine the delivery of dental services, one year on from the authorisation of NHS England; and next steps towards implementing a revised contract.

Topics for discussion include:

- Commissioning services and tackling challenges in resource allocation;
- Engaging health professionals in delivering effective public health outcomes for patients;
- Maintaining and developing an efficient system of regulation;
- Education and supporting professional development;
- Assessing outcomes from the dental contract pilot scheme in delivering effective services and sustainable funding models; and
- Next steps towards implementing a revised dental contract.

The draft agenda is available to download here. The seminar is supported by Oasis Dental Care, and organised on the basis of strict impartiality by the Westminster Health Forum.

Speakers
We are delighted to be able to include in this seminar keynote addresses from Dr Barry Cockcroft, Chief Dental Officer, NHS England; Dr John Milne, Chair, General Dental Practice Committee, BDA and Professor Callum Youngson, Professor of Restorative Dentistry and Head of School, School of Dentistry, University of Liverpool.

Justin Ash, Chief Executive, Oasis Healthcare and Julie Rosse, President, British Society of Dental Hygiene and Therapy have also kindly agreed to speak at this seminar.

Lord Colwyn, Vice Chair, All-Party Parliamentary Group on Dentistry has kindly agreed to chair part of this seminar.

Booking arrangements
To book places, please use the online booking form.

49. Data information sharing event
08 July 2014—Birmingham
The importance of improving information sharing while maintaining patient confidentiality across the health service will be the focus of discussions at a one day conference taking place at the Colmore Gate Conference Centre in Birmingham on 08.07.2014.

The conference will be chaired by Christopher Fincken Chair of the UK Council of Caldicott Guardians who will discuss the Government’s response to the Caldicott review. The response accepted all of the report’s recommendations on the sharing of patient information across the health service.

ICO Senior Policy Officer for Public Services, David Evans, will be presenting on the role of the ICO and the management of data breaches during the afternoon session.
50. Westminster Health Forum Keynote Seminar
Diabetes care - next steps for commissioning services and improving patient outcomes
09 July 2014 – Central London

Details of how you can register to attend can be found on the conference website.

Further sessions will consider the role of Clinical Commissioning Groups (CCGs) and NHS England in commissioning services, one year on from the introduction of the Health and Social Care Act, and how effective they are in delivering personalised care for both Type 1 and Type 2 diabetic patients.

Delegates will also assess what more can be done to educate and equip the workforce to improve patient outcomes, with the initial release of data from the 2013 National Diabetes Audit comparing patient experience in hospitals.

Overall, areas for discussion include:

- Challenges and opportunities for commissioners in developing appropriate care;
- Raising awareness, educating patients and the workforce, and the impact of early interventions;
- Integrating services and funding challenges across primary and secondary care;
- Supporting patients in accessing appropriate treatments; and
- Utilising technology and effective medicine management to support and develop self-care.

The agenda is available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: Professor Jonathan Valabhji, National Clinical Director for Obesity and Diabetes NHS England and Dr Bob Young, Consultant Diabetologist, Salford Royal Foundation Trust and Clinical Lead, National Diabetes Audit.

Further confirmed speakers include: Keith Booles, Senior Nurse Lecturer, Staffordshire University and Member, RCN Diabetes Nursing Forum; Dr Adrian Scott, Clinical Director for Endocrinology and Diabetes, Sheffield Teaching Hospitals NHS Foundation Trust; Dr Garry Tan, Diabetologist, Oxford Centre for Diabetes, Endocrinology and Metabolism and Dr Sheridan Waldron, Member, West Midlands Clinical Senate Network.

Booking arrangements
To book places, please use the online booking form.

51. Emerging Leaders Programme – now recruiting for Cohort 5 (summer 2014)
National Skills Academy for Social Care

"Everyone working in a social care setting will recognise the challenges that local authorities, health services and providers face on a daily basis, juggling budgets against a backdrop of striving for continuous improvement for the people supported.

I feel that the Emerging Leaders programme is highly relevant in this context and I can definitely say that it has had a positive impact on my performance and would have no hesitation in recommending this to colleagues."

Gill Bruton, Regional Director - Community Integrated Care

We are pleased to announce that, following the continued success of the Emerging Leaders programme, we are running two further cohorts in 2014/15. The first of these cohorts (number 4 in the series) is already fully booked and we are now inviting applications to Cohort 5.
The core dates for the programme are scheduled as follows:

- Residential 1 – Leading self: 10 and 11 July
- Residential 2 – Leading with others: 30 September and 1 October
- Residential 3 – Leading to achieve: 9 and 10 December
- Residential 4 – Leadership challenge: 3 and 4 March 2015

The Emerging Leaders Programme is for operational managers, senior managers and Heads of Service who want to become more effective leaders as well as for those who wish to be the senior managers, directors or Chief Executives of tomorrow.

The programme will help learners rise to the challenges facing leaders in adult social care: doing more and meeting more complex needs for less; and introducing more flexible and innovative approaches, so that service users can have meaningful choice and control in their lives.

The content of each Emerging Leaders programme balances breadth and depth. Key topical aspects of leadership are covered in depth and other aspects introduced with further learning resources signposted.

Throughout we build on current thinking about leadership in social care, introducing a range of theories, models and ideas.

Places are limited and applications are reviewed with places allocated on a first come, first served basis. Email queries or register your interest in the programme by emailing leadership@nsasocialcare.co.uk

To find out more and download an application form visit our website

52. Conference: Older Care Home Residents and Sexuality/Intimacy
14 July 2014 - Manchester – Free of charge
The Older People’s Understandings of Sexuality (OPuS) research group, (Manchester and Bradford Universities), is organizing a FREE half-day conference on older care home residents and sexuality/intimacy. The event will take place 2pm - 5pm, Monday 14 July 2014, conference room G.036B, Jean Macfarlane building, University of Manchester. Lunch will be available from 1pm.

The event will share results of consultative research by interviews with residents and care home staff (in the Northwest and Yorkshire). It will focus on the significance of doing any such research, how it should be done and good practice in consulting on a sensitive issue with a seldom heard group of people. We will also consult with conference participants on how to carry our ideas forward in any future national research. The event will involve speakers from OPuS and care homes. It is open to anyone but should interest residents, relatives, care home staff and private providers, nursing and social work practitioners, academics and statutory and voluntary sector organizations and staff.

To enquire/book a FREE place, contact: Paul Simpson, Sociology, University of Manchester 0161 306 6881 or e-mail: paul.simpson2@manchester.ac.uk.

N.B. there is a limit of 50 places - first-come-first-served. The deadline for registration is 1 July 2014.

53. Westminster Health Forum Keynote Seminar
Improving autism care and delivering the revised national strategy
15 July 2014 – Central London

with
Linda Burgess, Commissioning Officer and Autism Strategy Lead Officer, Adult Services, Hampshire County Council; Nigel Fulton, Team Leader, Special Educational Needs and Disability Division, Department for Education; Mark Lever, Chief Executive, The National Autistic Society Senior academic; Zandrea Stewart, Autism National Lead, ADASS and Michael Swaffield, Autism Policy Lead, Mental Health and Disability Division, Department of Health and Sue Hahn, Brookdale Care and a representative from the Social Care Institute for Excellence (SCIE)

Chaired by:
Rt Hon Cheryl Gillan MP, Member, All-Party Parliamentary Group on Autism

This event is CPD certified

Website | Book Online | Live Agenda

Delegates at this seminar will discuss next steps for delivering autism care.

The conference is timed to follow the publication of the refreshed adult autism strategy, by the Department of Health - due this spring - which builds upon the 2010 strategy to raise awareness, improve outcomes and further support those with autism.
Topics for discussion include:

- The impact of localised commissioning on autism care and whether services are providing value for money;
- Commissioning services to best reflect individual need, following recent guidance produced by the Local Government Association and NHS England;
- Engaging and supporting those with autism access appropriate services in the transition from childhood to adulthood;
- Next steps to help and support those with autism into work; and
- Implementing the revised strategy.

The agenda has been structured following consultation with officials at the DH. The agenda is available to download here.

**Speakers**
There will be keynote addresses from: Linda Burgess, Commissioning Officer and Autism Strategy Lead Officer, Adult Services, Hampshire County Council; Nigel Fulton, Team Leader, Special Educational Needs and Disability Division, Department for Education; Sue Hahn, Head of Training and Diagnostic Services, Brookdale Care; Mark Lever, Chief Executive, The National Autistic Society Senior academic; Zandrea Stewart, Autism National Lead, ADASS; Michael Swaffield, Autism Policy Lead, Mental Health and Disability Division, Department of Health, and a representative from the Social Care Institute for Excellence (SCIE).

Rt Hon Cheryl Gillan MP, Member, All-Party Parliamentary Group on Autism has kindly agreed to chair part of this seminar.

**Booking arrangements**
To book places, please use the online booking form.

### 54. Dementia Awareness
This one day interactive workshop includes an ageing simulation experience and is suitable for all people who come into contact with people with dementia. Whether you are new to dementia care or someone who comes into contact with people with dementia in your everyday activities, this workshop will increase your knowledge, skills and confidence in supporting people to live well with dementia.

- **17 July 2014** - Conference Park, Birmingham
- **29 July 2014** - DSDC, Stirling

**Cost:** £95

[Find out more and book online](#)

### 55. Best Practice in Dementia Care
This nationally recognised programme is designed for all staff working in dementia care settings. DSDC trains one of your staff members as a facilitator to deliver this programme to eight staff members in your workplace using a cascade approach.

- **22-23 July 2014** - DSDC, University of Stirling
- **29-30 July 2014** - Conference Park, Birmingham

**Cost:** £1500

SPECIAL OFFER - Book before 31st July 2014 and save 10%

For further information, or to book a place, please contact Lynsey Manson on lynsey.manson@stir.ac.uk

### 56. Understanding Behaviour in Dementia Care
We should always assume the behaviour of a person has meaning; even when we find it difficult to understand. This one day interactive workshop will help you learn that behaviour which may initially be regarded as inappropriate or an exaggerated response to stress, may in fact be an understandable expression of emotion and thoughts.

- **31 July 2014** - Conference Park, Birmingham
- **31 July 2014** - DSDC, Stirling

**Cost:** £95

[Find out more and book online](#)

### 57. 21st Anniversary—Adult Safeguarding Conference 2014 - Taking Stock
AUGUST 2014 – DATE TO BE CONFIRMED

2014 is the 21st anniversary of the charity Action on Elder Abuse. This is the perfect time for us to take stock of the current situation we face in adult safeguarding, as well as to look at whether older people are any safer now than they were twenty-one years ago, and what lessons we can learn from this going forwards.

AEA CONFERENCES ARE NOTED FOR THEIR GOOD VALUE AND UP TO DATE INFORMATION, YOU WILL NOT FIND A MORE COST-EFFECTIVE ADULT SAFEGUARDING CONFERENCE ANYWHERE!

PLEASE EMAIL EMMA ALDRIDGE TO REGISTER YOUR INTEREST: EMMAALDRIDGE@ELDERABUSE.ORG.UK
Key events at the Conference:

Gary FitzGerald, Chief Executive of AEA – After 21 years, are older people and other potential victims of abuse any safer?
Gary became Chief Executive of AEA in 2002. He has given evidence to multiple Parliamentary inquiries, triggered the Prevalence Study into elder abuse in 2005 (which caused the review of No Secrets and In Safe Hands), and for several years was the sole Third Sector representative on the DH Safeguarding Advisory Group. He is a trustee of The Silver Line, and sits on advisory panels for the Metropolitan Police and the Church of England. More recently, he coordinated an Alliance of groups seeking to achieve safeguarding amendments to the Care Bill in England.

Belinda Schwer, owner of Care and Health Law (Invited) – A legal critique of the safeguarding clauses in the English Care Bill.
Belinda has particular expertise in community care law. In her previous guise as a lawyer, she advised many public authorities and private sector organisations on a range of social services issues, and her particular interest at the moment is the Care Bill – she observes that, now that it’s had Dilnot provisions squished into it, it is hardly the straightforward simplification of the existing legal framework that the Law Commission intended it to be!

District Judge Marilyn Mornington (Invited) – The realities of domestic violence, and what the law can do.
Marilyn is a District Judge as well as a lecturer and writer on Family Law and in particular, domestic violence and elder abuse. Both nationally and internationally, she has worked on multiple publications in these areas. She has been involved in various advisory and consultative capacities with the BBC, the Foreign Office, the Pakistani Government and Police force, the British Council and the Home Office, among many others.

The role of the CQC in improving hospital care (Speaker TBA) – CQC is bringing in radical changes to the way they inspect hospitals.
The inspection teams are bigger and include a senior NHS clinician or executive, professional and clinical staff, Experts by Experience, patients, carers and other experts. Inspections are supported by an improved method for identifying risks and with much more information direct from patients and their families, and hospital staff.

Other speakers at the Conference:
Imogen Parry, Independent Safeguarding Adults Consultant, Researcher and Trainer for the Housing Sector (Invited) on Adult Safeguarding and Housing

Baroness Ilora Finlay, Crossbench Member of the House of Lords (Invited) on Assisted Dying – What does this really mean for people?

Dave Roberts, Safeguarding Lead at the Royal Liverpool Broadgreen University Hospitals NHS Trust (Invited) on Adult safeguarding of older patients in hospital. Is it real?

A representative of the Welsh Assembley (Speaker TBA) on The Social Service and Well Being (Wales) Bill

Dr Beth Cross, Senior Lecturer in Youth and Community Work, University of the West of Scotland (Invited) on A Project To Support More Effective Involvement Of Service Users in Adult Support and Protection Activity

(Speaker TBA) Respect and Protect Report – Practical steps to prevent the abuse and mistreatment of older patients and residents.

Dr Mary Pat Sullivan, Senior Lecturer in the School of Health Sciences and Social Care, Brunel University (Invited) on the need for specialist social work with older people.

Sarah Hollinshead-Bland, County Commissioner Adult Safeguarding at Staffordshire County Council (Invited) on whether multi agency safeguarding hubs are the way forward.

Why should you attend?
You won’t find a more cost-effective conference anywhere. Even if you are not a member and don’t take our special offer, you can still save money in comparison with other conferences - and you get even more on the day!

You won’t find a conference with more options for learning, with key topics that actually matter to safeguarding practice.

What did people say about our last conference?
“Always feel as if this is the only conference worth going to… good speakers and value for money…,”
“Very up to date – what I exactly came for. To hear where we are at present – a conference like this would be hard to beat… “It was an eye opener in various areas regarding safeguarding.”

Well, we’re doing it again. Giving you more for less. Isn’t that the sort of deal that you need…!

Please email Emma Aldridge to register your interest: emmaaldridge@elderabuse.org.uk
58. Westminster Health Forum Keynote Seminar
Improving eye care in England: commissioning, standards and service delivery
04 September 2014 – Central London
with
Dr David Geddes, Head of Primary Care Commissioning, NHS England; Samantha Peters, Chief Executive and Registrar, General Optical Council; Katrina Venerus, Managing Director, Local Optical Committee Support Unit and Member, Clinical Council for Eye Health Commissioning; Lesley-Anne Alexander, Chief Executive, RNIB (Royal National Institute of Blind People) and Chair, UK Vision Strategy; Cheryl Donnelly, Chief Executive Officer, British Contact Lens Association and David Parkins, President, College of Optometrists together with a speaker confirmed from Optometry Scotland.
Further confirmed speakers include: Peter Black, President, ABDO (Association of British Dispensing Opticians); Catey Bunce, Principal Statistician, Moorfields Eye Hospital NHS Foundation Trust and Dr Deacon Harle, Chairman, NHS Kent and Medway Local Eye Health Network.

Anne Alexander, Chief Executive, RNIB (Royal National Institute of Blind People) and Chair, UK Vision Strategy; Cheryl Donnelly, Chief Executive Officer, British Contact Lens Association and David Parkins, President, College of Optometrists, together with a speaker confirmed from Optometry Scotland.

Topics for discussion include:
- The role of Local Eye Health Networks and Clinical Commissioning Groups in commissioning and delivering services;
- Opportunities and challenges for redesigning services to meet local need;
- Developing clinical standards, and the role of the General Optical Council in regulating the sector;
- Delivering integrated, patient-centred eye care; and
- Priorities for NHS England and the General Ophthalmic contract.

The agenda includes keynote addresses from Dr David Geddes, Head of Primary Care Commissioning, NHS England; Samantha Peters, Chief Executive and Registrar, General Optical Council; Katrina Venerus, Managing Director, Local Optical Committee Support Unit and Member, Clinical Council for Eye Health Commissioning; Lesley-Anne Alexander, Chief Executive, RNIB (Royal National Institute of Blind People) and Chair, UK Vision Strategy; Cheryl Donnelly, Chief Executive Officer, British Contact Lens Association and David Parkins, President, College of Optometrists.

Further confirmed speakers include: Peter Black, President, ABDO (Association of British Dispensing Opticians); Catey Bunce, Principal Statistician, Moorfields Eye Hospital NHS Foundation Trust and Dr Deacon Harle, Chairman, NHS Kent and Medway Local Eye Health Network.

Booking arrangements
To book places, please use the online booking form.

59. Westminster Health Forum Keynote Seminar
Next steps for commissioning support: autonomy, competition and standards
09 September 2014 – Central London
with
Bob Ricketts, Director of Commissioning Support Services and Market Development, NHS England; Tim Decamp, Head of Mutuals Programme, Cabinet Office; Beth Capper, Commissioning Support Programme Lead, Macmillan Cancer Support and Dr Etheldreda Kong, Chair, Brent Clinical Commissioning Group and
Dr Pauline Allen, London School of Hygiene and Tropical Medicine; Christopher Exeter, UnitedHealth Group; Dr Leigh Griffin, NHS Greater Manchester Commissioning Support Unit; Kenny Lee, Liaison Financial Services and David Smith, Kingston Council and Kingston Clinical Commissioning Group
This event is CPD certified
Website | Book Online | Live Agenda

This timely seminar focuses on next steps for commissioning support policy.

It is being scheduled as an early opportunity to discuss the next stage of the NHS England strategy, due in July, for guiding Commissioning Support Units (CSUs) towards operational autonomy by 2016, and the key challenges surrounding competition, financial sustainability, and meeting standards.

The conference includes presentations from Bob Ricketts, Director of Commissioning Support Services and Market Development, NHS England and Tim Decamp, Head of Mutuals Programme, Cabinet Office.

Delegates will also consider how effectively Clinical Commissioning Groups (CCGs) are being supported, the future of primary and integrated care commissioning, and the role of third and private sector organisations in the delivery of commissioning support services.

Overall, topics for discussion include:

- Supporting CSUs to become autonomous bodies and challenges in meeting targets set out in the Lead Provider Framework;
- Funding issues and ensuring value for money from CSUs;
- NHS England’s market approach to commissioning services;
- The developing role of service integration, and the impact upon commissioning support services;
- Involving CCGs, the third sector and mutuals in developing sustainable business models for commissioning support services; and
- Next steps towards meeting the 2016 target of operational autonomy.

The draft agenda is available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: Bob Ricketts, Director of Commissioning Support Services and Market Development, NHS England; Tim Decamp, Head of Mutuals Programme, Cabinet Office; Beth Capper, Commissioning Support Programme Lead, Macmillan Cancer Support and Dr Etheldreda Kong, Chair, Brent Clinical Commissioning Group.

Further confirmed speakers include: Dr Pauline Allen, Policy Research Unit in Commissioning and Healthcare System (PRUComm) and Reader, Health Services Organisation, London School of Hygiene and Tropical Medicine; Christopher Exeter, Director of Corporate Strategy, UnitedHealth Group; Dr Leigh Griffin, Managing Director, NHS Greater Manchester Commissioning Support Unit; Kenny Lee, Head of Tax Services, Liaison Financial Services and David Smith, Director, Health and Adult Services, Kingston Clinical Commissioning Group. Additional senior participants are being approached.

Booking arrangements
To book places, please use our online booking form.

60. New Dates: Emerging Leaders Programme – Cohort 5
The Emerging Leaders Programme is for operational managers, senior managers and Heads of Service who want to become more effective leaders as well as for those with relevant experience who wish to be the senior managers, directors or Chief Executives of tomorrow.

With Cohort 4 fully booked and underway we have now moved the start date for Cohort 5 to September 2014 and we are currently inviting applications until Friday 1 August 2014.

The course is shaped by the participants through a process of shared learning, with your existing knowledge and skills being central to both how the programme content evolves, and to its success.

The programme will help learners rise to the challenges facing leaders in adult social care: doing more and meeting more complex needs for less; and introducing more flexible and innovative approaches, so that service users can have meaningful choice and control in their lives.

The content of each Emerging Leaders programme balances breadth and depth. Key topical aspects of leadership are covered in depth and other aspects introduced with further learning resources signposted.

Throughout we build on current thinking about leadership in social care, introducing a range of theories, models and ideas.

The core dates for the programme are scheduled as follows:

- Residential 1 – Leading self: 30 September and 1 October
- Residential 2 – Leading with others: 9 and 10 December
- Residential 3 – Leading to achieve: 3 and 4 March 2015
Residential 4 – Leadership challenge: 19 and 20 May 2015

Costs
£2500 + VAT, member rate
£2750 + VAT, non-members

The new deadline for applications is 1 August 2014. Places are limited and allocated on a first come, first served basis once applications have been reviewed and accepted.

To find out more and download an application form visit our website

Email queries or register your interest in the programme by contacting leadership@nsasocialcare.co.uk or call 020 3011 5270

National Skills Academy for Social Care
Floor 9, One Euston Square, 40 Melton Street, London, NW1 2FD

61. Westminster Health Forum Keynote Seminar
Next steps for integrating health and social care, and implementing the Better Care Fund
14 October 2014 – Central London
with
Ivan Ellul, Director of Partnerships, NHS England; Carolyn Downs, Chief Executive, Local Government Association; Professor John Young, National Clinical Director for Integration and Frail Elderly, NHS England; Catherine Pollard, Director of Pricing Strategy and Integrated Care, Monitor; Chris Hopson, Chief Executive, Foundation Trust Network and Jeremy Taylor, Chief Executive, National Voices and

Dr Paul Husselbee, NHS Southend Clinical Commissioning Group and Imelda Redmond, Marie Curie

This event is CPD certified
Website | Book Online | Live Agenda

This seminar will be a timely opportunity to consider next steps for integrating health and social care.

The agenda includes keynote presentations from Carolyn Downs, Chief Executive, Local Government Association; Ivan Ellul, Director of Partnerships, NHS England; Chris Hopson, Chief Executive, Foundation Trust Network; Catherine Pollard, Director of Pricing Strategy and Integrated Care, Monitor; Jeremy Taylor, Chief Executive, National Voices and Professor John Young, National Clinical Director for Integration and Frail Elderly, NHS England.

Delegates will discuss challenges and opportunities in implementing the Better Care Fund, and will consider what early lessons can be taken from the Integrated Care Pioneers.

With the Care Bill going through Parliament, further sessions will focus on progress and priorities for NHS England, Health and Wellbeing Boards, local authorities and other key stakeholders in working together to improve outcomes, quality of care and efficiency.

The agenda also looks at the potential for seven-day services, as well as challenges for improving data sharing, taking a joint approach to assessments, and training and supporting an integrated workforce.

The draft agenda is available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: Carolyn Downs, Chief Executive, Local Government Association; Ivan Ellul, Director of Partnerships, NHS England; Chris Hopson, Chief Executive, Foundation Trust Network; Catherine Pollard, Director of Pricing Strategy and Integrated Care, Monitor; Jeremy Taylor, Chief Executive, National Voices and Professor John Young, National Clinical Director for Integration and Frail Elderly, NHS England.

Further confirmed speakers include: Dr Paul Husselbee, Clinical Chief Officer, NHS Southend Clinical Commissioning Group and Imelda Redmond, Director of Policy and Public Affairs, Marie Curie.

Booking arrangements
To book places, please use our online booking form.

62. Westminster Health Forum Keynote Seminar
The future of the NHS: financial challenges, integrating care and policy priorities
21 October 2014 – Central London
with
Rt Hon Paul Burstow MP, former Minister of State for Care Services; Rt Hon Stephen Dorrell MP, Chair, Health Select Committee; Dr Mark Britnell, Head of Healthcare, UK and Europe and Chairman of Global Health Practice, KPMG; Anita Charlesworth, Chief Economist, The Health Foundation; Professor David Colin-Thomé, Chairman, Primary Care Commissioning and Claire Murdoch, Chief Executive, Central and North West London NHS Foundation Trust

This event is CPD certified
Website | Book Online | Live Agenda
This seminar will be a timely opportunity to discuss the future of the NHS, and challenges facing the delivery of health and social care, as policymakers consider the priorities for the next Parliament.

The agenda includes keynote presentations from Rt Hon Paul Burstow MP, former Minister of State for Care Services; Rt Hon Stephen Dorrell MP, Chair, Health Select Committee; Dr Mark Britnell, Head of Healthcare, UK and Europe and Chairman of Global Health Practice, KPMG; Anita Charlesworth, Chief Economist, The Health Foundation; Professor David Colin-Thomé, Chairman, Primary Care Commissioning and Claire Murdoch, Chief Executive, Central and North West London NHS Foundation Trust.

Sessions will focus on opportunities for Clinical Commissioning Groups, Health and Wellbeing Boards, Public Health England and NHS England, and progress on meeting the aims of the NHS England mandate. Delegates will also consider lessons to date for service integration, implementation of the Care Act, and next steps for improving quality of care, regulation and patient safety.

The draft agenda is available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: Dr Mark Britnell, Head of Healthcare, UK and Europe and Chairman of Global Health Practice, KPMG; Rt Hon Paul Burstow MP, former Minister of State for Care Services; Anita Charlesworth, Chief Economist, The Health Foundation; Professor David Colin-Thomé, Chairman, Primary Care Commissioning; Rt Hon Stephen Dorrell MP, Chair, Health Select Committee and Claire Murdoch, Chief Executive, Central and North West London NHS Foundation Trust.

Booking arrangements
To book places, please use our online booking form.

63. Westminster Health Forum Keynote Seminar
Next steps for improving patient experience and safety in health and care
10 November 2014 – Central London
with
Anna Bradley, Chair, Healthwatch England; Dr Mike Durkin, National Director of Patient Safety, NHS England; Jocelyn Cornwell, Director, The Point of Care Foundation and Senior Fellow, The King’s Fund and Jackie Smith, Chief Executive and Registrar, Nursing and Midwifery Council
and
Dr Alison Austin, NHS England; Kate Denham, Healthwatch Croydon; Dame Philippa Russell, Standing Commission on Carers and Dr Patricia Wilkie, National Association for Patient Participation

This event is CPD certified

Website | Book Online | Live Agenda

This timely conference will assess developments in policy aimed at improving patient safety and experience in health and care.

Delegates will consider the impact of initiatives set out in the Government’s response to the Francis report - including measures for named, responsible consultants and nurses for every hospital patient, and a new care certificate for healthcare assistants - alongside the potential impact of the Care Bill on the funding and provision of care.

They will also discuss the impact of the new rating systems at the CQC; the development of Healthwatch England as the national patient voice; the role of NHS England and NHS Improving Quality in improving patient safety and experience; and key issues surrounding regulation, culture and staffing levels.

The agenda includes keynote contributions from Anna Bradley, Chair, Healthwatch England and Dr Mike Durkin, National Director of Patient Safety, NHS England, as well as from Jocelyn Cornwell, Director, The Point of Care Foundation and Senior Fellow, The King’s Fund and Jackie Smith, Chief Executive and Registrar, Nursing and Midwifery Council.

Overall, areas for discussion include:

- Engaging patients in shared decision-making and care delivery at a national and local level;
- Improving experience through personalisation and integrating care;
- The future for regulation, and the planned introduction of revalidation for nurses;
- Priorities for developing and supporting the workforce, and challenges for ensuring safe staffing levels; and
- Next steps for ensuring patient safety;

The draft agenda is regularly updated and available to download here.

Speakers
We are delighted to be able to include in this seminar keynote addresses from: Anna Bradley, Chair, Healthwatch England; Dr Mike Durkin, National Director of Patient Safety, NHS England; Jocelyn Cornwell, Director, The Point of Care Foundation and Senior
Fellow, The King’s Fund and Jackie Smith, Chief Executive and Registrar, Nursing and Midwifery Council.

Further confirmed speakers include: Dr Alison Austin, Lead, Personalisation and Control, NHS England; Kate Denham, Vice Chair, Healthwatch Croydon; Dame Philippa Russell, Chair, Standing Commission on Carers and Dr Patricia Wilkie, President, National Association for Patient Participation.

Booking arrangements
To book places, please use our online booking form.

Consultations

64. Research launched into how healthcare providers structure their management
30 May 2014 - Monitor
Consultation/survey ends 06 June 2014
Seeking healthcare providers’ views on how we can improve engagement with clinicians on business decisions.

Monitor is running a survey on how different healthcare providers engage with clinicians, with a specific focus on service line management (SLM) and how this is organised. If you aren’t using SLM Monitor would still be really interested to hear what else is being used instead.

As well as improving Monitor’s understanding of how the healthcare sector is organising itself and supporting clinical engagement with decision-making, Monitor will use the results to create new learning and support programmes.

Monitor will publish the results of this work in a report so that you can compare your position with those of others, including how common challenges have been addressed and the benefits realised from the chosen approaches.

Start the survey now

It shouldn’t take more than 20 minutes to complete the survey. The deadline for responses is 06.06.2014.

If you have any questions, please contact Mark Redhead at mark.redhead@monitor.gov.uk.

Care Quality Commission, CSSIW, Social Care and Social Work Improvement Scotland & Healthcare Improvement Scotland

65. Updates from the CQC board
28 May 2014—CQC
Watch CQCs May board meeting and catch up with its latest news. In this meeting, CQC updates people on its performance over the last four months, plus there are updates from David Behan (Chief Executive) and CQCs Chief Inspectors, Andrea Sutcliffe, Professor Steve Field and Professor Sir Mike Richards.
Watch the video...

66. Balfour Hospital
Healthcare Environment Inspectorate (HEI) unannounced inspection
Inspection dates: 4-5 March 2014
The Healthcare Environment Inspectorate (HEI) previously inspected Balfour Hospital in February 2013. That inspection resulted in four requirements and one recommendation.

The regulator carried out an unannounced inspection to Balfour Hospital on 04.03.2014 and 05.03.2014.

This report highlights areas of strength and weakness as well as areas for further improvement, including requirements and recommendations.

Dementia

67. Jeremy Hunt: message to NHS staff about dementia
28 May 2014 – Gov.uk
In Dementia Awareness Week, the Secretary of State for Health speaks about what is being done to tackle dementia.

68. Sport and Dementia
29 May 2014 – Gov.uk
Tony Jameson-Allen, director of Sporting Memories Network blogs about how sporting memories can help people dementia and raising awareness of dementia through sport.
http://dementiachallenge.dh.gov.uk/2014/05/29/sport-and-dementia/

69. Cynicism linked to increased risk for dementia
29 May 2014 – Fox News
The Medical Daily has reported that cynical people may have an increased risk of dementia.

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[In a new study published in the journal Neurology, researchers surveyed 1,449 people who were approximately 71 years old at the beginning of the research period. Each participant underwent a dementia test and answered questions to determine their level of cynicism.

Cynicism was defined as having distrust or believing that others are mainly motivated by selfish concerns.

Overall, the researchers found that a high degree of cynicism tripled the risk of dementia among participants. Out of the 164 people with high levels of cynicism, 14 developed dementia—compared to nine people among the 212 people categorized as having a low level of cynicism.](http://www.foxnews.com/health/2014/05/29/cynicism-linked-to-increased-risk-for-dementia/)

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### Ireland, Scotland & Wales

#### Ireland

**72. Historical Abuse Inquiry: Children’s homes ‘saved state money’**

28 May 2014 – BBC News

Northern Ireland’s Historical Abuse Inquiry has heard that a Stormont minister believed the two care homes run by nuns in Londonderry saved the state money.

The inquiry has been examining 1960s letters between state bodies and the Sisters of Nazareth, who ran the homes at Bishop Street and Termonbacca.

It was shown a 1964 memo by Home Affairs Minister Bill Craig. He said children would otherwise “have to be accommodated at much greater expense by welfare authorities.”


#### 73. 73% of patients happy with GP access in Northern Ireland

29 May 2014 – Pulse Today

New figures from Northern Ireland’s Patient and Client Council show that nearly three quarters of patients remain satisfied with their ability to access a GP.

Just 26.5% of patients expressed any dissatisfaction with access, but the RCGP Northern Ireland (RCGPNI) has warned this will grow unless vital funding is made available to general practice to enable GPs to meet ‘unparalleled’ demand.

[http://www.pulsetoday.co.uk/your-practice/practice-topics/access/73-of-patients-happy-with-gp-access-in-northern-ireland/20006848.article#.U4dx02dOXs0](http://www.pulsetoday.co.uk/your-practice/practice-topics/access/73-of-patients-happy-with-gp-access-in-northern-ireland/20006848.article#.U4dx02dOXs0)

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### Scotland

**76. NHS board defends hospitals’ maternity complaint record**

25 May 2014 – BBC News

NHS Highland has defended the record of its hospitals’ maternity units after a series of complaints were highlighted in a newspaper report. Nearly 50 allegations made in the last five years which were released under a freedom of information request.
They cover Raigmore Hospital, Oban’s Lorn and Islands, Caithness General and the Belford Hospital.

77. Investing in NHS capacity
27 May 2014 – Scotland.gov
NHS Scotland is already investing more than £22 million to deliver sustainable improvements in the time it takes to see patients.

The announcement comes as latest ISD statistics show that the vast majority of boards continue to meet the 18 weeks referral to treatment target.

78. Glasgow changes practices after baby ashes scandal
27 May 2014 – BBC News
Scotland’s largest council has changed its infant cremation practices following the baby ashes scandal.

Glasgow City Council apologised last year for dispersing the remains of dead infants without their parents’ consent after the practice was revealed at Mortonhall crematorium in Edinburgh.

The authority now says it will return any ash left when parents request it.

79. NHS staffing levels
27 May 2014 – Scotland.gov
Qualified nurses and midwives and consultants are at record levels in Scotland, according to the latest statistics.

Figures published by ISD Scotland show that the number of whole-time-equivalent (WTE) qualified nursing and midwife staff has increased by 1,654.4 since September 2006 – an increase of 4%. There are now 42,680.6 WTE qualified nurses and midwives working in NHS Scotland, making it the largest group of staff.

80. A&E waiting times
27 May 2014 – Scotland.gov
Patients in Scotland’s A&E Departments were treated faster this winter due to improved planning and additional investment.

Figures released from Information Services Division (ISD) show a dramatic cut of 65% in patients waiting over 12 hours this winter (between October and March) than the same period last year.

This winter also saw 2,713 fewer patients waiting more than eight hours – accounting for less than 1% of all visits.

81. More NHS patients miss 18-week waiting time target
27 May 2014 – BBC News
Fewer patients are being treated by the NHS within the Scottish Government’s target of 18 weeks after they’ve been referred by their GP.

For the first time since the system was introduced, the proportion has fallen below 90% with the worst-performing health board being Forth Valley. It has only 80.8% of patients starting their treatment within the target period.

Across Scotland as a whole, the figure for March is 89.6%, compared to 90.8% in December 2013.

82. Social care ‘failings’ over drowned baby
Aaron Egan
28 May 2014 – BBC News
A report has found that a baby who died whilst in the care of his drug addicted parents may have lived if social workers had taken him into care from birth.

Five-month-old Aaron Egan drowned in the bath in Kilmarnock on 17.07.2010.

Parents Thomas Egan and Chrystine Templeton were originally charged over his death but the case was dropped.

The review found that Aaron’s death could not have been anticipated but there were missed opportunities to intervene by East Ayrshire Council and others.

83. Most service users feel they are treated with respect, finds Scottish survey
28 May 2014 – Community Care
Scottish users of adult social care consider they are treated respectfully but one in five say health and social care are not well coordinated, according to a national survey.

The Health and Care Experience Survey 2013/14 asked 112,970 people registered with GPs in Scotland for their views on health and social care services. Of those surveyed, 21% said they needed help with everyday living.

The survey found that 93% of social care service users felt they were treated with respect while 89% said they were treated with compassion and understanding, but one in five service users and carers felt that health and social care services were not well coordinated.
Overall, 84% of service users felt they received a good or excellent service.

84. Government urged to review 'on the cheap' elderly home care
29 May 2014 – BBC News
The head of Scottish Care, which represents care firms and charities, says many elderly people are receiving "care on the cheap" and has called for a Government taskforce to review their support.

The Scottish Government said it was committed to providing quality care.

85. Rural pharmacy rules strengthened
30 May 2014 – BBC News
A number of villages have unsuccessfully campaigned against the opening of pharmacies in recent years.

They have claimed local GP surgeries lose income from having their own dispensary if a pharmacy moves into the area.

The Scottish Government said the new processes would give local communities a stronger voice.

86. Overall standard of home care improving, report says
30 May 2014 – BBC News
A new report by the Care Inspectorate says that the standard of care delivered by home carers in Scotland has seen an overall improvement.

The report looked at the results of three years of inspections of "home helps" and other homecare services and says 80% of these were found to be of a good standard, and an increasing proportion got top marks.

However, the body warned that the number of services judged to be performing badly has nearly doubled.

Wales

87. Police investigate Carmarthenshire nursery 'assault'
28 May 2014 – BBC News
Police are investigating claims that a child at a Carmarthenshire nursery was assaulted by a member of staff.

Dyfed-Powys Police were called over an allegation at the Welsh-medium Clych Meithrin Cefnathin a Gorslas and officers were "working closely with members of the Local Safeguarding Children Board and the Care and Social Services Inspectorate Wales".

88. Missed ambulance target 'disappointing'
28 May 2014 – BBC News
New statistics show that just under 57% of Welsh ambulances reached life-threatening incidents in eight minutes in April, short of their 65% target. Ministers called the statistics, up on the 55% March figure, "disappointing".

The Welsh government said it expected NHS services to "work closely" together to improve patient care.

Learning Disabilities

89. Vulnerable man left without bathing facilities for six months due to series of care failings
28 May 2014 - National Ombudsmen
A vulnerable young man was wrongly charged more than £8,000 for accommodation, left without bathing facilities for six months and put at risk of financial exploitation, because those tasked with looking after him failed to monitor his care properly.

To read more go to item 20 in this issue of BHCR under the heading 'Cases in the news'.

Legislation Update

90. Care Act 2014 is now published
To read it go to Care Act 2014 c.23

91. The National Health Service (Pharmaceutical Services) (Scotland) (Miscellaneous Amendments) Regulations 2014
30 May 2014 – OPSI

Mental Capacity

92. Power of Attorney
31 May 2014 - BBC Radio 4, Moneybox
Someone to whom powers have been granted by a Power of Attorney to look after the finances of an elderly person ought to be able to operate that person’s bank accounts as if they were their own. However, some banks still impose restrictions and are poor in their administration of the whole process, even though it is now 12 months on since new guidance
was supposed to sort that out. Paul Lewis asks the Ombudsman - which gets 300 to 400 complaints a year - what goes wrong and the British Bankers' Association why it seems to be so difficult for the banks to get right.

To listen to the programme go to:
http://www.bbc.co.uk/programmes/b0456qsg

Mental Health

93. Vulnerable man left without bathing facilities for six months due to series of care failings
28 May 2014 - National Ombudsmen
A vulnerable young man was wrongly charged more than £8,000 for accommodation, left without bathing facilities for six months and put at risk of financial exploitation, because those tasked with looking after him failed to monitor his care properly.

To read more go to item 20 in this issue of BHCR under the heading “Cases in the news”.

94. Cornwall child mental health services criticised
28 May 2014 – BBC News
Mental health services for children and young people in Cornwall were criticised in a report by a council scrutiny committee.

Hospitals do not have enough beds while staff do not have enough knowledge about whether patients are getting better or not, according to the Child and Adolescent Mental Health Service (CAMHS) which is run by the Cornwall Partnership NHS Foundation Trust.

The trust blamed budget and staff constraints.
http://www.bbc.co.uk/news/uk-england-cornwall-27595635

95. Bristol’s mental health care providers announced
28 May 2014 – BBC News
The winning bidders to take on the care of mentally ill people across Bristol are Mental Health Bristol, a partnership of 10 organisations. They will take over from the Avon and Wiltshire Mental Health Partnership.

The services were put out to tender after complaints about poor service.

Contracts were also awarded to Bristol Dementia Partnership, Richmond Fellowship and St Mungo’s Broadway to take over parts of the service.
http://www.bbc.co.uk/news/uk-england-bristol-27609082

96. Winterbourne View scandal: Family’s plea over ex-resident’s care
30 May 2014 – BBC News
The family of a former resident of a care home that was shut down after an abuse scandal want him to be treated closer to home.

Richmond Bush was a patient at Winterbourne View, near Bristol, but is now being treated in Hampshire.

The home was closed following a BBC Panorama investigation in 2011 and six out of 11 staff were eventually jailed.
http://www.bbc.co.uk/news/uk-england-bristol-27625284

97. Government misses mental health care deadline
30 May 2014 – BBC News
A key commitment made by the Government after abuse of the mentally ill in care homes in England was exposed by the BBC, will be missed.

Health officials promised that people with learning disabilities living in units sometimes hundreds of miles from home should be moved back to their local communities, where abuse would be more likely to be picked up on.
http://www.bbc.co.uk/news/health-27645718

98. Govt accused of ‘appalling failure’ over care promises
31 May 2014 – ITV.com
Families of Winterbourne View Hospital abuse victims have accused the Government, NHS and local authorities of an "appalling failure" over the rehousing of vulnerable people with disabilities.

They said there has been a "betrayal" of people at risk of abuse and neglect after ministers claimed the care of around 3,000 people with learning disabilities and autism should be reviewed in light of the Winterbourne View scandal three years ago.

Miscellaneous

99. Humanity Is Now Officially Ready For Suspended Animation
26 May 2014 – Io9.com
Surgeons from the UPMC Presbyterian Hospital in Pittsburgh, Pennsylvania, will begin suspended animation trials by dramatically cooling down trauma victims in an effort to keep them alive during critical operations.

Twenty years ago, Peter Safar and Ron Bellamy proposed that the rapid induction of hypothermia could “buy time” for a trauma surgical team to control bleeding. Now, due to the work of Peter Rhee and Samuel Tisherman, this idea is officially ready.
100. Leeds Surgeon Invents a Polyester Patch That’s Transforming the Treatment of Shoulder Injuries
27 May 2014 - Spire
Leeds surgeon and former Olympian runner Roger Hackney has invented a fabric patch, the 'Leeds-Kuff Patch™', which is being used to treat one of the most common causes of chronic pain.

Made of drip-dry shirt material, the woven fabric implant is transforming the way in which torn shoulder tendons are repaired. It is used to repair large and massive tears of the rotator cuff. The 40-minute operation, which has been successfully carried out on around 50 patients during clinical trials at the Leeds Musculoskeletal Biomedical Research Unit, has been approved for use in UK and Europe.

Mr. Hackney, a consultant orthopaedic surgeon at Spire Leeds Hospital, came up with the idea for the patch after becoming increasingly frustrated with not being able to offer patients an effective treatment for the repair of tears of the rotator cuff of the shoulder.

"I was concerned I could not offer any further treatment to a number of my patients. The special joint replacement for someone without a rotator cuff is only generally recommended for a patient over 70. For younger patients, the thought they would have to suffer a life of pain and restricted movement, often resulting in them not being able to work seemed unacceptable."

There were patches on the market but these were either made from animal products, human skin or were not easy to use. These were expensive and not as strong as the one Mr. Hackney subsequently developed.

"One of the advantages of the patch is that it can be used where no other repair can be achieved and the alternative treatments might give a poor outcome, so the patch is a great advance for this condition," he said.

Mr. Hackney took the idea to Leeds-based Neoligaments, part of medical device company, Xiros. Working together for three years they developed prototypes and the first patient was treated in January 2013.

A key design feature is that its structure encourages growth of the patient's own tissue into the patch material. The patch is stitched in place over the rotator cuff – the muscle that enables the arm to raise. Once inserted, it holds repaired tendons in place, alleviating pain and restoring movement and also helps to prevent more tears.

101. Vindication for a whistleblower
27 May 2014 - Daily Mail
David Ore, 58, former security manager at Dudley Group NHS Foundation Trust, who was sacked for disclosing that elderly patients and children were locked up for as long as 12 hours without food or water, has been sacked by the Trust. Police are now investigating his allegations.

Ed. This is a chance for the new chief exec of NHS England, Simon Stevens, to show his colours and ensure that Mr Ore is properly treated by the Trust. The Health Secretary should busy himself about this matter. If NHS culture is truly to be changed, here is an opportunity.

102. These overpaid doctors must stop whinging
28 May 2014 - The Times
Alice Thompson says that while GPs profess to put patients first, they need to modernise and adapt to the increasing demands upon them, not just lobby for more money.

103. Weight watchers free on the NHS
28 May 2014 - Daily Mail
Front page item about NICE recommending GPs to consider the possibility that a patient who is ‘overweight’ as well as those who are ‘obese’ might be better served by sending them to Weight Watchers.

104. Is this hospital a miracle cure for the NHS?
28 May 2014 - Daily Mail
To read more detail go to item 4 in ‘Business’ ante.

105. Insurers spying on medical history of 100s of thousands
28 May 2014 - Daily Mail
Item saying that the large insurers are demanding unnecessary medical information from the GPs of those customers applying for life cover.

The Information Commissioner has announced that his office is to investigate the practice.

Ed. If you think that this is a problem wait until you make a claim!

106. Carole got cancer. Then she has to wait a year for help with the cost
28 May 2014 - Daily Mail
Item about the poor administration by the DWP of its new benefit Personal Independence Payments to those with terminal and serious illness – some people
are having to wait a year for their claims to be determined – the payment is worth between £21.55 and £138 per week. It also speaks of the health assessment carried out by either Atos or Capita.

Ed. I have some experience of the PIP scheme – someone I know who is paraplegic had the PIP claim form completed on his behalf by an employee of the Department of Work and Pensions in May 2013 - so one is entitled to assume that the form, which was new for PIP claims, which is long and complicated, was correctly completed. He was instructed to attend medical review in September 2013 - which was conducted on behalf of ATOS, the agent for DWP. By December no decision had been made as to whether the claimant would be entitled to any PIP payment. Only after sending an email to the Chair of the Select Committee, Dame Ann Begg, the Minister, Mike Penning, and a number of other MPs was there any progress from DWP.

The first explanation/excuse was that DWP hadn’t been informed that the person had been discharged from hospital (PIP is not payable to hospital in-patients); nonsense.

Eventually, a payment (including back-dated monies) was paid in February 2014, a full nine months to determine the claim, it shouldn’t have been too difficult a decision bearing in mind the person was (and is) paraplegic – and the expenses incurred in attending the medical assessment were paid only in April 2014, seven months after they had been incurred!

Systems and procedures need to be slick; unfortunately, for people with terminal illnesses, many are dying before their claim is determined. Shameful.

Mike Penning, the Minister in the firing line is clearly concerned and has introduced an ‘express’ procedure for those with terminal illness.

107. Realistic weight loss goals better than quick fixes
28 May 2014 - NICE
Losing even a small amount of weight can help to improve the health of people who are overweight or obese and lower their risk of developing type 2 diabetes, heart disease and cancer, says NICE.

The number of people who are overweight or obese in England continues to rise with more than a quarter of adults now classified as obese and a further 42% of men and a third of women classed are overweight. The long-term consequences of obesity place a huge strain on the NHS costing around £5.1 billion each year.

While there are a number of lifestyle weight management programmes already on offer across England, the effectiveness of the programmes can vary.

This latest guidance sets out the key components that need to be included in lifestyle weight management programmes in order for them to be effective, and highlights that there is no “magic bullet” to tackling obesity.

People attending a lifestyle weight management programme should look to make gradual, long-term changes to dietary habits and physical activity levels and aim to lose around 3% of their body weight.

The programmes should, however, explain that the more weight lost, the greater the health benefits particularly if someone loses more than 5% of their body weight and maintains this for life.

Gill Fine, independent public health nutritionist and Chair of the group which developed the NICE guidance, said:

“Obesity is one of the biggest health issues facing the UK. It’s a complex problem with no single solution, but programmes which aim to help people manage their weight can make a difference. What we have done in this new guidance is to identify the key components that need to be included in these programmes for them to be effective.

“These include setting realistic weight loss and weight maintenance goals, ensuring the programme is at least 12 weeks long and making sure the people running the programme are properly trained. We hope that these practical recommendations will help people make life-long lifestyle changes so they lose weight and most importantly help prevent those pounds from coming back.”

Professor Kate Jolly, professor of public health at the University of Birmingham and NICE guidance developer, said:

“By losing even a small amount of weight and keeping it off, overweight and obese people can improve their health.

“We all know that eating less and being more active will help us lose weight, but it can be quite hard to put it into action especially in the long-term, which is why some people need additional support. Lifestyle weight management programmes can help people to identify
strategies which suit them to help maintain these changes in the future.”

Professor Mike Kelly, Director of the Centre for Public Health at NICE, added:

“Lifestyle programmes are one part of the solution. An environment that makes it easier for people to be active and eat well is also crucial, as are services for people with other issues that affect their health and wellbeing. The guidance isn’t about quick fixes. There is no ‘magic bullet’. It is about ensuring effective services are there to support people in the long term.”

Elsewhere, the guidance calls for health professionals and providers to be aware of the effort needed to lose weight and the stigma adults who are overweight or obese may feel or experience.

Carol Weir, head of service for nutrition and dietetics at Leeds Community Healthcare NHS Trust and NICE guidance developer, said:

“We found that a lot of overweight or obese people were put off seeking help because they felt that they were being blamed for being unable to lose weight and the position they have found themselves in. Therefore the guidance also recommends that doctors and other health professionals should ensure the tone they use when communicating with people who need help with their weight is respectful and non-judgemental.”

NICE has a suite of guidance available on obesity including advice on working in local communities, lifestyle weight management services for overweight and obese children and young people, and preventing cardiovascular disease.

Ed. For most of us eating less and exercising more will do the trick – I’m ‘guilty-as-charged’!

108. Unicondylar sled knee prosthesis manufactured by Waldemar Link GmbH & Co. KG – liable to wear
28 May 2014 - MHRA
This Medical Device Alert Has been issued as there is a risk of early wear of this device. Medical Device Alert: Unicondylar sled knee prosthesis manufactured by Waldemar Link GmbH & Co. KG (MDA/2014/018)

109. Dr Sally Norton Comments on New NICE Guidelines of Obesity
28 May 2014 - Vavista
Dr Sally Norton, NHS Weight Loss surgeon, expert and consultant said:

“I welcome the NICE recommendations on obesity which are so in-tune with my research and experiences in dealing with misguided weight-loss advice and solutions. Current approaches are clearly not working and quick fix diets are just adding to a growing list of long-term obesity and health issues - the fall-out of which is placing bigger and bigger demands on the NHS. However, the NICE analysis showed that an average of less than 1.5kg of weight was lost by participants of weight loss programmes at 2 years. It’s important, therefore, that the NHS does not simply leap into a scheme to offer a solution but instead works with companies to test and evaluate offerings which genuinely can make a difference to our approach to weight-loss in order to successfully relieve the growing time and financial pressures on the NHS.”

110. World MS Day: Novartis Launches 7-Day Challenge to ‘Live Like You’ Enabling People With MS to Better Understand Their Lives With MS
28 May 2014 - Novartis
In support of World MS Day, Novartis announced the launch of the 7-Day Challenge to ‘Live Like You’ for people with MS. The 7-Day Challenge to Live Like You, one of the first integrations of emerging technological trends by a pharmaceutical company, is simple: using wearable technology or accessing personal online systems that people use on a daily basis, including calendars, social media channels and fitness trackers, people with MS are invited to track their activities for seven days and gain valuable insights into what works best for their lifestyle. The 7-Day Challenge to Live Like You, which can be accessed via http://7daychallenge.tictrac.com, addresses the growing desire amongst the MS community to gather personalized information that will allow them to make decisions on how they can manage their lives with MS.

World MS Day was created by the Multiple Sclerosis International Foundation (MSIF) in 2009 to raise global awareness of MS and its impact on approximately 2.3 million people with MS[1] around the world. This year’s World MS Day campaign focuses on ‘access’. Importantly, the topic of access spans beyond access to treatment in MS. Increasingly, there is a need for access to relevant and personalized online information that allows people to utilize available tools in order to make adjustments that can help them to manage their MS in a way that best suits their lifestyle.
111. Trust your doctor, not Wikipedia, say scientists
28 May 2014 – BBC News
A study by scientists in the US have said that Wikipedia, the online encyclopaedia, contains errors in nine out of 10 of its health entries, and should be treated with caution.

Entries about conditions such as heart disease, lung cancer, depression and diabetes were reviewed along with peer-reviewed medical research.
http://www.bbc.co.uk/news/health-27586356

112. Cambridge University-developed MS drug approved by watchdog
28 May 2014 – BBC News
A new drug for treating multiple sclerosis, developed by Cambridge University research, has now been approved for use by the National Institute for Health and Care Excellence (NICE).

The drug Lemtrada can reduce the effects of the disease and can, in certain cases, enable some recovery.

The decision to allow its use was welcomed by the MS Society.
http://www.bbc.co.uk/news/uk-england-cambridgeshire-27594138

113. Court eyes ‘streamlined’ deprivation of liberty process to cope with surge in cases
28 May 2014 – Community Care
A Court of Protection hearing is to consider best response to rise in demand triggered by landmark Supreme Court judgement.

The Court will consider how a “streamlined” system for authorising and reviewing deprivation of liberty cases could comply with European human rights law at a hearing to be held at the Royal Courts of Justice on 05.06.2014. Options to be discussed include processing ‘bulk’ applications, allowing court officials to sign-off decisions rather than a judge, and processing more applications without an oral hearing.

The Court will also consider whether it can extend the timescales for completing Deprivation of Liberty Safeguard (Dols) assessments for urgent authorisations without the need for an oral hearing. The current system requires the majority of assessments to be completed within 7 days, but allows 14 days in exceptional circumstances.

There are concerns that changes to the system could weaken safeguards for vulnerable adults deprived of their liberty and see the court “rubber stamping” local authority decisions.
http://www.communitycare.co.uk/2014/05/28/court-eyes-streamlined-deprivation-liberty-process-cope-surge-cases/

114. Do we need a new settlement for health and social care?
29 May 2014 - The King’s Fund
The Commission on the Future of Health and Social Care in England is asking whether the post-war settlement, which established separate systems for health and social care, is still fit for purpose. The Fund speaks to stakeholders and members of the Commission’s expert by experience group to hear their views.

Watch the Interviews:

Read Interim Report:

115. Research on out-of-hospital care
29 May 2014 - The King’s Fund
A new project by the King’s Fund will look at six case studies in which consultants are working with GPs, nurses and other health and social care professionals to provide specialist input into care delivered in GP surgeries, community clinics and patients’ homes.

Find out more:

116. Cost of drugs for treating alcohol dependence tops £3 million for the first time
29 May 2014 - HSCIC
A new report from the Health and Social Care Information Centre (HSCIC) shows the Net Ingredient Cost (NIC) cost of alcohol dependence drugs in England increased by almost £200,000 to £3.13 million in 2013, a rise of 6.7% on 2012 (£2.93 million).

In total almost 184,000 prescription items were dispensed in primary care and NHS hospitals in 2013. This is a rise of 3.1% (178,000) on the previous year and a 78.9% rise on ten years ago (103,000).

Statistics on Alcohol – England, 2014 uses a number of data sources, some previously published, to provide a detailed insight into patterns of use, behaviours and attitudes towards drinking alcohol among adults.
and children. New analyses of prescribing data and limited new analyses of alcohol-related hospital admissions are published today. Further hospital admission analysis will be published in June.

The report shows:

- In 2012-13 there were over one million alcohol-related hospital admissions based on primary and secondary diagnoses and almost two in three of these were male (65%).
- North East Region recorded the highest rate of alcohol-related admissions (2,500 per 100,000 population) and the South East Region recorded the lowest (1,500 admissions per 100,000 population).
- In 2012 there were 6,490 alcohol-related deaths, a fall of 4.2% on 2011 (6,770) and of these almost two thirds were caused by alcoholic liver disease (4,080)

Information from the HSCIC’s Health Survey for England (HSE) suggests that the percentage of people in Great Britain who regularly drink is falling. Between 2005 and 2012 the percentage of men who drank alcohol in the week before being interviewed fell from 72 to 64, and from 57 to 52 in women.

117. Recall of Catapres Tablets 100 micrograms - Boehringer Ingelheim
29 May 2014 - MHRA
Boehringer Ingelheim Limited is recalling specific batches of Catapres Tablets 100 micrograms to wholesaler level, due to traces of oxazepam having been found in them.

118. Medical Device Alert: Paradigm ambulatory insulin infusion pumps manufactured by Medtronic
29 May 2014 - MHRA
This MDA is being issued due to risk of hypoglycaemia due to incorrect selection and delivery of bolus amount.

Medical Device Alert: Paradigm ambulatory insulin infusion pumps manufactured by Medtronic (MDA/2014/019)

119. Doctors would rather die than endure aggressive treatment
29 May 2014 - The Times
Research carried out by Stanford University School of Medicine, USA, of 1,000 doctors said that if they had a terminal illness 88.3% of them would ask to be left to die rather than endure aggressive treatments.

120. Merger dropped as NCA back smaller providers
29 May 2014 - NCA
The Board of National Care Association announced that the proposed merger with ECCA, announced last year, has not been concluded.

Nadra Ahmed OBE said

"Both National Care Association and ECCA, through the Transitional Board, were committed to the principles of a merger which would have brought about a strong and coherent voice for the sector at a time when providers are facing considerable challenges. However we now believe that the interests of all providers will not be best served through a merger of the two organisations at this time."

Mrs Ahmed continued

“To avoid any misunderstanding and as a point of clarity, Care England does not incorporate the membership of National Care Association in any way and as such does not represent the membership or the express views of the National Care Association. Care England was to have been the name of the merged organisation, which ECCA has adopted without reference to National Care Association; therefore as the merger has not taken place it cannot be representative of the vision of a unified voice. National Care Association will continue to work with all representative organisations in the best interest of its membership.”

Ed. This announcement will strike many readers as ‘odd’; the new branding took effect from January 2014. This new announcement is not an overtly a jointly agreed position on behalf of ECCA and NCA, nor has it been accompanied by any similar announcement from ECCA.

121. As happy pill prescriptions top 50million, even GP admits: We hand out too many
29 May 2014 - Daily Mail
Since 1998 to now prescriptions for antidepressants increased from 15million to 50million – but there is large variation when looking at different areas; Brent issues 71 items per 1,000 patients, in Blackpool it is 331 items per 1,000.

122. Five deaths every day as euthanasia surges in Belgium
29 May 2014 - Daily Mail
Item reporting that doctors in Belgium are killing an average of five people a day (including children – it became legal to do so months ago), an increase of 26.8% in a year, raising question, are there too many?
123. GPs, highly paid but having to work too hard
30 May 2014 - The Times, Letters to the Editor
Five correspondents contribute to the debate; one letter says “If general practice is such an easy ride for overpaid GPs, what are older doctors retiring early in droves and why are young doctors shunning it in favour of working in hospitals or going abroad?”

124. MHRA position on statins
30 May 2014 - MHRA
The Medicines and Healthcare products Regulatory Agency (MHRA) today confirmed that people should continue to take their statins as prescribed. Press release: MHRA position on statins

125. Patients Association is the “only game in town”
30 May 2014 - The Patients Association
The President of the Patients Association, Robert Francis QC, has spoken for the first time since his appointment and says when it comes to speaking up for patients, the Patients Association is the “only game in town”.

Robert Francis QC became president of the Patients Association November 2013. It is a role that had not been filled since the death of Claire Rayner four years previously, as it was determined to find the right person. Since taking the position, Mr Francis says he has become increasingly concerned by the failure of the NHS to deal fairly and compassionately with those who complain of poor care, adding:

“The charity is deluged by correspondence from those whose complaints have fallen on deaf ears, thousands of patients and bereaved relatives make contact”

In an exclusive interview with the Telegraph, Robert Francis QC has spoken out about his deep concerns that lessons have still not been learnt from the Mid Staffordshire NHS Foundation Trust inquiry. He warns that NHS complacency is killing patients, and hails a “refreshing” candour from ministers about failings in patient care.

For more than three years, as the chairman of the public inquiry into the greatest scandal in the NHS’s history, Robert Francis heard devastating testimonies about basic failings in care given to the most vulnerable. He heard about elderly patients left starving, thirsty and in soiled bedclothes; of cries for help that were ignored; decisions about who to treat being left to receptionists and a culture of bullying which oppressed the doctors and nurses who tried to speak out. There were more than one million pages of evidence from 290 witnesses about failings by Mid Staffordshire NHS Foundation Trust, and the lessons for the wider NHS.

It has now been 15 months since his report was published in February 2013. The inquiry looked at the role of commissioning, supervisory and regulatory bodies and why serious problems at the trust were not identified and acted on sooner.

“The system as a whole failed in its most essential duty – to protect patients from unacceptable risks of harm and from unacceptable, and in some cases inhumane, treatment that should never be tolerated in any hospital.”

Robert Francis QC

The 290 recommendations that were made by the Francis inquiry set out a clear blueprint for the creation of a care system which ensures that the safety, dignity and well-being of patients is paramount at all times. The Patients Association made it very clear at the time that it was vital that the recommendations were implemented swiftly and comprehensively; indeed, it is the only organisation that has been consistent in our arguments that the recommendations made by the Francis Inquiry should be implemented in full.

In response to the Francis inquiry, the Government set about implementing a series of further reviews which covered three key areas of concern:

Patient safety - The Prime Minister David Cameron asked Professor Don Berwick, a leading expert in patient safety, to look at what needs to be done “to make zero harm a reality in our NHS”. The Berwick report was published in August 2013. The Keogh Report, published in July 2013, looked at hospital mortality rates.

Patient Experience - The Cavendish Report, also published in July 2013, was an independent review into healthcare assistants and support workers in the NHS and social care settings. The Clwyd-Hart Report, published in October 2013, followed a review into how complaints are handled by NHS hospitals. It came as part of a response to the Francis report, which highlighted that complaints are a warning sign of problems in a hospital.

Regulation - Professor Sir Mike Richards was appointed as the Chief Inspector of Hospitals by the Care Quality Commission in May 2013 to focus on proper regulation.

In his first major interview since the Government responded to his inquiry, Robert Francis said that he is encouraged by most of the actions by the Government, which have included an overhaul of NHS regu-
lation, future ratings for hospitals and improvements to training and recruitment of staff.

However, Mr Francis expresses his disappointment that ministers chose not to introduce his recommendation for a legal duty of candour to be placed on health professionals, which would have obliged staff to speak up about patient risks:

“We do need to protect individuals by making sure they feel safe to report things to their employers. I felt a statutory duty would have assisted that — too often those who raise concerns about things that go wrong become unpopular with colleagues and they need some form of protection.”

He is also concerned about complacency in the health service, with too great a tolerance of errors and failings in care which can prove catastrophic. “The vast majority of those receiving care in an NHS hospital get perfectly acceptable care,” Mr Francis said.

“The trouble is it’s no use being satisfied or complacent — if we ran our airline industry on the same basis planes would be falling out of the sky all the time.”

Mr Francis believes that the culture of the NHS is changing, with a greater atmosphere of openness and candour.

He credits Jeremy Hunt, the Health Secretary, for a “refreshing change” of approach in standing up for patients, suggesting that his predecessors — from both parties — tended instead to act “as a spokesman for the NHS”. Mr Francis suggests that deference to medical professionals — “allowing them a God-like status” — and pride in the NHS have stifled political debate about its failings.

The President says he comes from a different mould to his predecessor Claire Rayner, but wants to play a part in changing the culture of the NHS, to put the patient’s voice centre stage.

He said:

“I am not here to implement the changes that I recommended, but when it comes to speaking up for patients, the Patients Association is the only game in town. If I can help to make some of the changes a practical reality, then I would like to do what I can.”

You can read the full interview with Robert Francis QC (including a video of his interview) by clicking here

The Patients Association would like to hear your views

Do you think we allow doctors to have a “God-like” status?

Email your thoughts: mailbox@patients-association.com

126. Shocking moment dying gran crawled on hospital floor in agony as nurses ignored her
30 May 2014 - Daily Mail
Story of Margaret Lamberty, 45, who died of a blood clot in her bowel. She was taken to A&E at University Hospital of North Staffordshire – the staff were told Ms Lamberty had a history of blood clots, there were also records to that effect in her medical file. She was not given a CT scan until it was too late to save her life. She was given inadequate pain relief.

127. ‘Keep taking statins’ says drug body
30 May 2014 – BBC News
Fresh advice from the UK’s drug safety body says that people should continue to take statins because the benefits do outweigh the risks.

The Medicines and Healthcare products Regulatory Agency (MHRA) has intervened due to the ongoing debate around the harms of taking statins.

The MHRA said statins prevented 450 heart attacks, strokes, or deaths for every 10,000 patients taking the drugs over five years.
http://www.bbc.co.uk/news/health-27634000

128. Meet Agnes, the ageing empathy suit at MIT
30 May 2014 – BBC News
The AgeLab at the Massachusetts Institute of Technology has developed a suit that they say simulates the ageing process to give younger people a better idea of the physical challenges that older people face.

Dr Joseph Coughlin, director of the AgeLab, says the goal of the suit - called Agnes, for Age Gain Now Em-pathy System - is to make the world more accessible to the elderly and life better for people as they age.
http://www.bbc.co.uk/news/world-us-canada-27524741

129. Left to die like an animal
31 May 2014 - Daily Mail
Two-page follow-up article about the death of Margaret Lamberty who received inadequate care and treatment at University Hospital of North Staffordshire, where she crawled along the floor in desperation for pain relief and where there appeared to be plenty of staff who could have helped but instead, clustered around a computer, drinking tea and laughing and joking.
130. Cancer targets missed as NHS feels the strain
31 May 2014 - The Times
Hospitals miss cancer care targets for first time in 5 years
31 May 2014 - Daily Mail
NHS guidelines say that people with cancer should have to wait no longer than 62 days from when a GP makes and urgent referral to first treatment for 85% of patients; for the first three months of 2014 the figure reached was 84.4%.

131. GP funding
31 May 2014 - The Times, Letters to the Editor
Maureen Baker of the Royal College of GPs and Dr Patricia Wilkie of National Association of Patient Participation say that there organisations are not pressing for "higher GP pay. We are asking for an increase in the proportion of NHS funding for general practice so that more GPs and practice nurses can be employed."

132. If you need to see a GP, steer clear of Bradford and Slough
01 June 2014 The Sunday Times
Report of research undertaken by the Royal College of GPs – which says that 22% of patients are unable to see their GP, while in Bath the figure is just 5%. 

NHS

133. NHS England shakes up top team as junior directors leave
23 May 2014 – HSJ
The NHS England top team will be shaken up amid a string of departures of less senior directors from the organisation.

Under a raft of changes, Director of Policy Post, which Bill McCarthy is leaving in coming weeks, will be replaced by a Director of Commissioning Strategy. The post holder will report directly to chief executive Simon Stevens.

The commissioning development directorate, of which Rosamond Roughton is interim director, will be abolished, with most of its functions being transferred to the operations directorate and the post renamed director of commissioning operations.

Dame Barbara Hakin, currently the interim Director of Operations will become its permanent director. The remaining functions from the commissioning development directorate will be transferred to the commissioning strategy directorate.

Ms Roughton will join the operations directorate and remain part of the NHS England national director team.

A new post of director of specialised commissioning will be created, which some hope will appeal to a senior leader working in hospitals.

http://m.hsj.co.uk/5071189.article

134. GPs call on patient support in bid to reverse funding cuts
25 May 2014 – Guardian
GPs are mounting a hard-hitting poster campaign and calling on patients to back demands for the Government to reverse swinging funding cuts for general practice, which they say have left services struggling to survive.

The poster shows long queues of people outside a GP practice in an echo of the Tories’ "Labour Isn't Working" poster during the 1979 election – are being sent to every UK surgery for doctors to put up in waiting rooms. Hundreds of thousands of patients will be asked to sign a petition calling for the government to save general practice.


135. Hospitals where 1 in 3 patients have got diabetes
26 May 2014 - Daily Mail
Bishop Auckland Hospital and Hammersmith Hospital, London each have about a third of patients who occupy hospital beds also have diabetes. The cost of such patients to the NHS is expected to reach £17bn in the next 20 yrs.

136. Moving NHS beds apart ‘beats superbugs’
26 May 2014 - Daily Mail
Following the announcement by the World Health Organisation that there is now a high threat people may soon die from cuts and grazes as a result of the overuse of antibiotics. Scientists have recommended that as part of the steps to counter superbugs hospital beds should be moved further apart and there should be fewer patients in wards.

137. Health chief joins calls to save NHS
26 May 2014 – Halifax Courier
The chair of Calderdale NHS’s Clinical Commissioning Group (CCG) Matthew Walsh says that the Foundation Trust’s “preferred option” of closing Calderdale Royal Hospital’s A&E department is not his preferred option.

Dr Walsh explained that he was upset that the public see the CCG as uncaring.

http://www.halifaxcourier.co.uk/news/calderdale/health-chief-joins-calls-to-save-nhs-1-6632762
138. A&E Waiting Times
27 May 2014 - Scottish Government
65% drop in long waits
Patients in Scotland’s A&E Departments were treated faster this winter due to improved planning and additional investment.

Figures released from Information Services Division (ISD) show a dramatic cut of 65% in patients waiting more than 12 hours this winter (between October and March) than the same period last year.

This winter also saw 2,713 fewer patients waiting more than eight hours – accounting for less than 1% of all visits.

The number of patients waiting more than four hours has fallen by 16% compared to the same period last year.

Health Secretary Alex Neil said:
"We know that our health service faces added pressure in the winter months and NHS boards must be ready to manage potential increases in demand.

"Today’s statistics show that, across Scotland’s NHS, improved planning and investment have resulted in shorter waiting times for patients at A&E.

"I am particularly pleased to see the dramatic drop in the number of patients facing long waits, which shows that improvement work is delivering substantial results.

"These improvements in A&E performance are a direct result both of the dedication and hard work of staff and our three-year unscheduled care action plan, which has seen £30 million investment, from both central and local Health Board funding, in the first year alone.

"Of course, we want to see more improvements, which is why the Scottish Government will continue to work with those health boards that need to deliver further improvement.

"There is no question that our NHS is making sustainable progress towards delivery of the September milestone target of 95% of patients waiting no longer than four hours. In March this year, despite demand in A&E increasing by 6% - or 8,000 - compared to last March, the proportion of patients treated within 4 hours increased from 91.9% to 93.3%.”

A total of five health boards achieved 98 per cent during the quarter ending March 2014, with another five boards achieving at least 95 per cent.

139. NHS review 'could close hospitals' in Somerset
27 May 2014 – BBC News
The NHS has unveiled plans that could lead to the closure of community hospitals in Somerset.

A Somerset Clinical Commissioning Group (CCG) audit found 74% of beds in the 13 hospitals in the county were in use. The interim report also stated that 45% of patients would be better cared for at home or in a residential facility.

The report is part of five year strategy looking into the way care will be provided in the county in future.

http://www.bbc.co.uk/news/uk-england-somerset-27387791

140. Exclusive: Dalton unveils plans for hospital reform
27 May 2014 – HSJ
The hospital chief heading a major Government review spoke about the reforms he thinks will be needed to accelerate the spread of new organisational forms across the provider landscape.

Salford Royal Foundation Trust chief executive Sir David Dalton has been tasked by health secretary Jeremy Hunt with finding ways to encourage the best NHS providers to take charge of the most challenged.
http://m.hsj.co.uk/5071236.article

141. Dalton downplays talk of 'superheads'
27 May 2014 – HSJ
Sir David Dalton has rejected the idea that his review is about extending the concept of "superheads" from education to the health service.

When the Department of Health launched the Dalton Review earlier this year, it said Sir David would look into "how the NHS can make better use of its best existing leaders, so called 'superheads'."

Sir David Dalton said the heroic leadership model was "too simple"
http://m.hsj.co.uk/5071256.article

142. Ashby District Hospital 'not fit for purpose' and will close
27 May 2014 – BBC News
A Leicestershire hospital branded "not fit for purpose" will close soon.

Ashby District Hospital, on Leicester Road, in Ashby-De-La-Zouch, was created in 1897 and currently provides 16 respite care beds and outpatient clinics.
A clinical commissioning group said the Victorian building needed £900,000 of essential repairs and was underused, with services declining over the years.

A public consultation also found that 52% of people agreed with the closure.

http://www.bbc.co.uk/news/uk-england-leicestershire-27537731

143. Stroke Care at Musgrove Park Hospital Amongst Top 5% in UK
28 May 2014 - NHS Musgrove Park Hospital
Latest data published by the Sentinel Stroke National Audit programme (SSNAP) has shown that Musgrove Park Hospital is one of the best performing hospitals in the country for providing stroke care.

The most recent quarterly performance information from SSNAP shows that Musgrove Park Hospital's performance was amongst the top 5% of the 160 stroke units in the UK who are routinely admitting stroke patients.

It also shows that for the past six months Musgrove's overall performance in SSNAP has been the highest across the South-West region, based on the overall SSNAP score. SSNAP provides information to inform the public about how well their local hospital is performing at diagnosing and treating stroke patients.

It looks at the whole hospital stroke pathway, and generates an overall SSNAP score from performance in 10 categories of care, including:

• How quickly a patient received a brain scan;
• How quickly the patient arrived on the stroke unit;
• How long patients were cared for on the stroke unit;
• Whether they received clot-busting treatment and how quickly this was given;
• Whether they needed therapy, if that therapy was provided, and for how long.

Welcoming the news, Chief Executive, Jo Cubbon, said:

“These results are excellent news for all patients in Somerset who are cared for by the stroke team at Musgrove. We know that if you suffer from a stroke, patients need to know they are receiving the very best care from the very best staff and I am confident we have both.”

Dr Rob Whiting, consultant stroke specialist at Musgrove Park Hospital, said:

“SSNAP gives us the opportunity to benchmark our own performance against all other stroke services in the UK. It is great to see the latest data shows our performance to be amongst the best stroke units in the UK.

“Nevertheless, we know that there are still areas in which we can improve further, and we will continue to work hard to deliver high standards of stroke care for our patients.”

Time is crucial for people who have suffered a stroke and therefore it is important that people in Somerset know that no matter what time of day they might have a stroke, they have access to the best possible facilities and the very best staff to provide them with the greatest chance of recovery.

144. Two CCG leaders step aside amid NHS England probe
28 May 2014 – HSJ
The chair and accountable officer of Wirral Clinical Commissioning Group have temporarily "stepped away" from their posts during NHS England's probe into the group's leadership.

Phil Jennings, Wirral CCG chair, and Abhi Mantgani, its accountable officer, have moved aside. NHS England’s regional operations director in the North, Jon Develing, is to step in as interim accountable officer of the commissioning group.

http://m.hsj.co.uk/5071347.article

145. Health and Care Experience Survey 2013/14
27 May 2014 – Scotland.gov
A survey of over 100,00 people has found that the majority of GP patients and social care users report a positive experience of their care, but an overarching finding was that respondents were slightly less positive about GP and out of hours services than in the previous survey in 2011/12.

Results of the 2013/14 Health and Care Experience Survey were released by Scotland’s Chief Statistician. The survey asked respondents to feed back their experiences of their GP practices and out of hours care. The survey also asked about experiences of social care services and asked specific questions of those with caring responsibilities.

Care and Treatment

146. NICE: 'Obese should be prescribed slimming clubs'
28 May 2014 – NHS UK
Weight loss: NHS backs 'lose a little, keep it off' plans
28 May 2014 – BBC News
New guidelines from the National Institute for Health and Care Excellence (NICE) that aims to encourage
sustainable weight loss in the obese; “lose a little, and keep it off” in the form of £100 slimming courses.

The guidance is mainly aimed at commissioners (who plan and agree which services will be provided in the NHS and monitor them), health professionals and groups who provide lifestyle weight management programmes.

http://www.nhs.uk/news/2014/05May/Pages/NICE-Obese-should-be-prescribed-slimming-clubs.aspx

http://www.bbc.co.uk/news/health-27586149

147. GP prescribing of antidepressants increased with financial crisis
28 May 2014 – Pulse Today
A new study has found that the rates of GP prescribing of antidepressants increased during the financial crisis at a faster rate than at any other point in the past 16 years.

The report from the Nuffield Trust and the Health Foundation compared the number of items dispensed across England in 1998 to the number dispensed in 2014, noting a 165% rise from 15 million to 40 million.

Despite spanning a 16-year period, almost half of the overall increase in antidepressant prescribing occurred in the four years between the 2008 financial crisis and 2012.

http://www.pulsetoday.co.uk/clinical/therapy-areas/mental-health/gp-prescribing-of-antidepressants-increased-with-financial-crisis/20006819.article#.U4Y7PWdOXs0

148. Response to new research revealing a significant increase in anti-depressant prescriptions
28 May 2014 – Mental Health Foundation
The Mental Health Foundation has welcomed new research published by the Nuffield Trust and the Health Foundation, revealing that GP prescriptions of anti-depressants, have risen even more quickly since the recession started in 2008 than before, to stand at 40 million items in 2012;

Jenny Edwards CBE, Chief Executive of the Mental Health Foundation said:

“This report provides evidence that more of us are taking anti-depressants to cope with the uncertain times that we find ourselves in. We have known for a long time that inequality and social status is linked with mental health problems[1] and that the gap between the poorest in our society and those who are doing well is widening[2]. Changes to social welfare mean that to be unemployed or to rely on other forms of social welfare brings with it an increasing level of stigma. In our recent report into anxiety 45% of people told us that they felt anxious about work issues such as long hours or becoming unemployed[3].”

Isabella Goldie of the Foundation added:

“However, it is also not surprising that we have seen an increase in anti-depressant prescribing that outweighs the increase in the diagnosis of depression [4]. Depression, along with other mental health problems still carries a stigma that can mean people are reluctant to present to their GP with concerns about their mental health. It can be more acceptable to ask for help in relation to specific symptoms like insomnia or to cope with a difficult time of transition such as bereavement, losing a job or childbirth.

“GP’s that work in areas where there are the highest and most complex needs, including many patients with a combination of poor physical and mental health, have a major challenge on their hands in being able to spend the time required to work with patients to identify underlying issues and to offer treatment choices. In the brief time allocated for appointments, medication can seem like the only realistic option[5].

“Although we are very supportive of the progress made to increase access to psychological therapies, for those patients who are living increasingly difficult lives, it can be challenging to find the energy to engage with a programme of therapy, particularly as for some this may have little impact on the external stresses and uncertainty that they are living with day to day.”

Jenny Edwards went on to say:

“Addressing the stigma attached to mental health problems needs to remain a government priority, making it more possible for people openly to ask for support. However, we also need to address the wider issues facing our society. We urgently need to see a greater focus on addressing the growing inequality gap and to ensure that GPs have the time, resources and practical options they need to deal with the complex needs of communities facing the most intense pressures.”


151. Burst bowel mistaken for stomach bug
28 May 2014 – BBC News
A man whose bowel burst says he almost died because doctors and NHS staff repeatedly mistook his symptoms for a stomach bug.

Stuart Pashley was advised to take painkillers, and told not to go to A&E, in spite of being in "excruciating pain".

He eventually had an operation to remove part of his bowel six days later.

NHS England said it was looking into Mr Pashley's complaint.
http://www.bbc.co.uk/news/uk-england-derbyshire-27599992

152. Hospital infections still 'significant threat' to patients
28 May 2014 – BBC News

A report by Health Protection Scotland (HPS) has warned that, while levels of bugs like C.diff have been falling, improvements have levelled off since 2012.

The report recommended changes are made in strategy to make care safer.

A national scheme to monitor how often medical staff washed their hands was scrapped last year.
http://www.bbc.co.uk/news/uk-scotland-27804878

153. Second judicial review bid over Stafford Hospital downgrade
28 May 2014 – BBC News

A second bid was lodged for a judicial review into plans to downgrade services at Stafford Hospital.

The Support Stafford Hospital (SSH) campaign said it was made by a person linked with the group who wishes to remain anonymous.

SSH said it was not behind the action itself, but two of its founding members were supporting the individual.
http://www.bbc.co.uk/news/uk-england-stoke-staffordshire-27609981

28 May 2014 – Gov.uk

PHE has published the NHS Health Check data update for January to March 2014.

155. NHS Health Check up by 9.5% in 2013 to 2014
28 May 2014 – Gov.uk

Public Health England's latest figures show that more people than ever are accepting the offer of an NHS Health Check.

156. Wirral health chiefs 'step aside' while inquiry takes place into how services are run
29 May 2014 – Wirral Globe

Two Wirral health chiefs have “stepped away” from their posts whilst England conducts a probe into how local NHS services are run.
Chairman Dr Phil Jennings and the chief clinical officer of Wirral Clinical Commissioning Group (CCG), Dr Abhi Mantgani, voluntarily moved aside while the inquiry takes place into the authority, which is responsible for commissioning local NHS services for patients.

http://www.wirralglobe.co.uk/news/11243061.Wirral_health_chiefs_step_aside_while_inquiry_takes_place_into_how_services_are_run/

157. Investigation into Friarage hospital patient care
29 May 2014 – BBC News
GP's have started an inquiry into the care of patients whose conditions get worse while in a North Yorkshire hospital.

Information received by doctors has prompted the investigation at the Friarage hospital in Northallerton.

The Hambleton, Richmondshire and Whitby Clinical Commissioning Group declined to give further details due to patient confidentiality.

The Trust that runs the hospital said it would be "inappropriate" to comment.

http://www.bbc.co.uk/news/uk-england-york-north-yorkshire-27603354

158. NHS foundation trusts hire more staff to improve patient care
29 May 2014 – Gov.uk
A new report from Monitor shows NHS foundation trusts are acting to tackle the failures of care highlighted by the Francis report and Keogh review, now with an added podcast featuring Jason Dorsett, Monitor's director of financial reporting and risk.


159. Investigation into Friarage hospital patient care
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http://www.bbc.co.uk/news/uk-england-york-north-yorkshire-27603354

160. Wiltshire CCG warns of £60m overspend in seven years' time
29 May 2014 – BBC News
Wiltshire’s health bosses have warned of a £60m budget overspend by 2021 unless local NHS services change.

Wiltshire Clinical Commissioning Group (CCG) oversees primary care, such as GP surgeries, minor injury units and community services in the county.

Dr Rowlands claimed the budget overspend was due to increasing costs in looking after the ageing population whose healthcare needs grow as they get older.

http://www.bbc.co.uk/news/uk-england-wiltshire-27616496

161. Oxford's Slade House NHS treatment unit 'improving'
29 May 2014 – BBC News
An NHS assessment and treatment unit ordered to take action after a teenager drowned in a bath has now improved its services, according to CQC.

Connor Sparrowhawk died at Slade House in Headington, Oxford, in July.

Southern Health NHS Foundation Trust said it was "pleased" with the new conclusions.

But the regulator said there were concerns people were still not being respected following a blanket ban on bathing.

http://www.bbc.co.uk/news/uk-england-oxfordshire-27616868

162. Patients Association is the “only game in town”
30 May 2014 - The Patients Association
The President of the Patients Association, Robert Francis QC, has spoken for the first time since his appointment and says when it comes to speaking up for patients, the Patients Association is the “only game in town”.

To read the full text, go to item 125 in ‘Miscellaneous’ ante.

163. Shocking moment dying gran crawled on hospital floor in agony as nurses ignored her
30 May 2014 - Daily Mail
Story of Margaret Lamberty, 45, to read more go to item 126 in ‘Misc’ ante.

164. New NHS chief Simon Stevens backs more local hospitals
30 May 2014 – BBC News
Simon Stevens, the new head of the NHS in England says that smaller community hospitals should play a bigger role especially in the care of older patients.

He signalled a marked change in policy by calling for a shift away from big centralised hospitals and said
there needed to be new models of care built around smaller local hospitals.

The NHS said he was not suggesting the return of 50s-style cottage hospitals.

165. Independent report: Interviews by the Morecambe Bay Investigation
30 May 2014 – Gov.uk
Interview protocol for the Morecambe Bay Investigation, a list of interviewees and brief summaries of interviews that have been completed, now updated with interview schedules for week commencing 02.06.2014. Completed interviews and summaries of interviews have been added.


166. Transparency data: DH departmental spending over £25,000: 2014
30 May 2014 – Gov.uk
Information on Department of Health spending over £25,000, now with April 2014 figures.

167. Colchester Hospital report delayed by legal issues
30 May 2014 – BBC News
An independent report into a hospital that allegedly put patients' lives at risk has now been delayed.

CQC said staff at Colchester Hospital's cancer unit told inspectors they were “bullied” into falsifying patient data and a report into what happened was expected to have been published earlier this year, but the delay means it could be months until it is made public.

Health regulator Monitor declined to specify what caused the delay.
http://www.bbc.co.uk/news/health-27639989

168. Cancer waiting time targets slip
30 May 2014 – BBC News
A key Government target for treating people diagnosed with suspected cancer has been breached for the first time since it was introduced in 2009.

NHS England guidelines say that 85% of patients should wait a maximum of 62 days to begin their first treatment following referral from their GP, but figures show this slipped to 84.4% from January to March this year.

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Charities Cancer Research UK and Macmillan Cancer Support both said it was worrying.
http://www.bbc.co.uk/news/health-27642745

169. NHS dentists: Nearly half of adults have not been seen
30 May 2014 – BBC News
The latest Welsh Government statistics reveal that nearly half of adults in Wales have not seen a dentist in the past two years.

Opposition parties say more should be done to increase access to NHS dentists, but the Welsh Government insists there have been real improvements in recent years.

It said 34,000 more patients were seeing a dentist at the end of last year compared to two years previously.
http://www.bbc.co.uk/news/uk-wales-27626199

170. Bowel cancer patients treated as 'second-class tumour citizens'
30 May 2014 – TVNZ
A new report shows less than half of suspected bowel cancer patients were seen within the two-week timeframe set by the Government.

Figures released to ONE News show all the district health boards failed to meet the target.

171. Cornwall hospital trust board member resigns
30 May 2014 – BBC News
A board member of the Royal Cornwall Hospitals Trust (RCHT) has resigned "on principle" over the decision to contract out hotel services at the hospital.

Rik Evans confirmed his resignation after more than six years was in protest about the move.

Cleaning, catering and housekeeping are included in the contract.
http://www.bbc.co.uk/news/uk-england-cornwall-27629359

172. St Mary’s Hospital A&E at 'maximum' capacity
30 May 2014 – BBC News
A report has revealed that a north west London hospital set to accept additional emergency patients is already operating at "maximum utilisation".

St Mary's Hospital will take Hammersmith Hospital's patients when it's A&E department closes in September.
The NHS report said additional space could not be found before the change and the plans carried a financial risk.

http://www.bbc.co.uk/news/uk-england-london-27639139

173. 1,737 waiting longer than 18 weeks for an operation
30 May 2014 – Tewkesbury ADmag
The number of people in Worcestershire waiting longer than 18 weeks for operations has hit 1,737.

Figures presented at a meeting of the board of Worcestershire Acute Hospitals NHS Trust on 28.05.2014 showed a steady increase in the number of people waiting longer than the NHS-mandated amount of time for a non-urgent operation.

The backlog was slightly lower than it was in February, but it is still higher than it was this time last year, when 1,633 people were waiting.

http://www.tewkesburyadmag.co.uk/news/11247284.1_737_waiting_longer_than_18_weeks_for_a_n_operation/

174. Left to die like an animal
31 May 2014 - Daily Mail
Two-page follow-up article about the death of Margaret Lamberty - to read more go to item 129 in 'Misc' ante.

175. NHS pays for barman’s nose, but it won’t fund cancer care for a five-year-old girl
31 May 2014 - Daily Mail
Item about NHS Birmingham Cross City Clinical Commissioning Group which approved payment of £5,000 for the ‘nose-job’ of a man who wants to look the ‘perfect man’; the same CCG has refused further funding to treat Kelli Smith, 5, who has neuroblastoma after she has had three tumours removed.

176. NHS chief: We must revive local hospitals
31 May 2014 - Daily Mail
New CEO of NHS England, Simon Stevens, wants to see a return to the cottage hospital model of care delivery.

177. Boost for hospitals in East Lancashire
31 May 2014 – This is Lancashire
Health campaigners in East Lancashire were given a boost after the new boss of NHS England said ‘local services’ should be expanded.

Chief executive Simon Stevens, who began the role last month, said the health service must end ‘mass centralisation’ and treat more people in their own communities instead.

This is different from the view of his predecessor, Sir David Nicholson, who recently called for a radical reorganisation of the NHS with services centralised on a smaller number of hospital sites.


178. Stafford Hospital: Trust fined for missing infection targets
31 May 2014 – BBC News
The trust in charge of scandal-hit Stafford Hospital apologised after it was fined almost £700,000 for missing infection targets.

Mid Staffordshire NHS Trust incurred the penalty over C. diff infection control standards.

It was also fined £14,000 after 14 in-patients spent the night in A&E due to a bed shortage in February.

http://www.bbc.co.uk/news/uk-england-stoke-staffordshire-27649372

179. Condemned to death – by NHS beds shortage
01 June 2014 The Mail on Sunday
Heather Crisp, 62, was diagnosed with bladder cancer and told she could expect to make a full recovery. However, due to a lack of hospital beds she had to wait 10 weeks – now she is told that she is terminally ill. She was, it is said, waiting for a bed at Wexham Park Hospital, Slough.

180. Troubled hospital criticised over poor care
01 June 2014 – Telegraph
A hospital where half a dozen patients died after controversial keyhole cancer surgery was found to be unsafe in a damning report by CQC.

An inspection of Maidstone Hospital by the regulator raised serious concerns over standards of care and patient safety at the NHS trust, which serves more than half a million people across Kent.

Maidstone and Tunbridge Wells NHS Trust came under the spotlight earlier this month after the Royal College of Surgeons (RCS) instructed it to ban three surgeons from carrying out keyhole surgery for stomach cancer, amid concerns over their standards and behaviour following the death of five of their patients.

http://www.telegraph.co.uk/health/healthnews/10852899/Troubled-hospital-criticised-over-poor-care.html

Nursing
Nothing to report
Older People

181. Avoid rivalry to enjoy old age, says Bakewell
26 May 2014 - The Times
Old age is wonderful says Joan Bakewell, 81
26 May 2014 - Daily Mail
Dame Joan Bakewell has said that older people should give up ambition and rivalry in order to live a happy life in old age.

Ed. Yes, but that begs the question of when ‘old age’ begins. My maternal grandfather was about my age when I began to get to know him, my first boss, Bill Harper, was about my age when I got to know him. With my grandfather, he seemed to be an ‘old man’ when I first got to know him – I don’t recall rolling on the floor with him, play-fighting; interestingly, I didn’t do that with my first boss either! But they did seem to me to be old. Am I viewed that way by people in their mid-late teens? I don’t know.

What I do know is that I don’t feel old. I have energy and a desire to rise to meet new challenges.

182. Healthy elderly people offered assisted suicide
26 May 2014 – Telegraph
A Swiss organisation that normally assists people in ending their own lives has voted to widen its services to elderly people who are not terminally ill.

Exit chose to add “suicide due to old age” to its statutes at an annual general meeting to allow people suffering from psychological or physical ailments linked to old age the choice to end their life.

Assisted dying is legal in Switzerland and in theory even a healthy young person could use such services. However, internal rules vary from group to group.
http://www.telegraph.co.uk/news/worldnews/europe/switzerland/10857132/Healthy-elderly-people-offered-assisted-suicide.html

183. Elderly shmelderly
27 May 2014 - The Times, Letters to the Editor
Dr Alastair Lack, in response to the item about Dame Joan Bakewell’s comments, says:

“Loneliness is an avoidable condition, best prevented by taking an interest in the welfare of society, not oneself.”

184. ‘Encourage older people to discover life online’
27 May 2014 - The Independent
A report from the Policy Exchange says that four in ten people over 65 yrs do not use the internet; suggests that for a cost of £140 per person all older people could be on line by 2020. The suggestion is that it will counter the feelings of social isolation experienced by many older people.

Ed. I’m sure that it would be possible. However, will all older people want to be bothered? Come to think of it, how many people of working age are looking forward to ‘dumping’ email, Facebook and all the rest of it? However, in another 10 years computers will have inveigled themselves so deeply within society we won’t be able to shack them off, no matter how much we may want to!

185. Internet training would cut pensioner loneliness, says think tank
27 May 2014 – BBC News
A think tank has suggested that loneliness among the over-65s could be tackled by training more older people to use the internet.

Policy Exchange has called for every person in the UK to be taught basic digital skills, including how to send emails and use social networking sites.

Training 6.2 million people without basic digital skills would cost £875m by 2020, or £141 per person, it said but that training would help pensioners stay connected with friends and family.
http://www.bbc.co.uk/news/uk-27577143

186. Complaints over standards of care for elderly more than double in five years
28 May 2014 - The Times
The Local Government Ombudsman, Jane Martin, says complaints about the care of elderly people at home and in residential care settings has risen by 1.3 times (she says 130% - I still object to such expressions of increased in terms of more than 100%) since 2009. Interestingly, 86% of the complaints were about local authority care and 9% involving private care providers.

187. ‘Thousands’ sign up to community care schemes
28 May 2014 – BBC News
Thousands of people look after a vulnerable stranger or an elderly person in their own home, and local authorities would like to see more people signing up.

The Local Government Association says that community care schemes not only save money but allow people to keep their independence.
http://www.bbc.co.uk/news/health-27680274
188. Power of Attorney
31 May 2014 - BBC Radio 4, Moneybox
To read this item go to 92 in ‘Mental capacity’ ante.

189. DH plans tougher tests for better care fund
19 May 2014 – HSJ
The Department of Health and the Cabinet Office has met with health and local government representatives to draw up a tougher set of tests for the better care fund.

The stricter assurance programme expected to come out of what will be a series of meetings could allow for direct Whitehall intervention in areas where plans are deemed not to have been properly developed.
http://m.hsj.co.uk/5071003.article

190. Doncaster council’s adult care report rap
28 May 2014 – Thorne Gazette
A new report has ranked Doncaster Council as one of the worst authorities in the country for complaints about its adult social care services.

The new report by the Local Government Ombudsman revealed the eighth highest amount of complaints referred to the Ombudsman about adult social health care provided by a local authority were made about Doncaster Council - a total of 25.

The local authorities were ranked based on the total number of complaints made as well as the number per 100,000 people in that location, and Doncaster received 8.27 complaints per 100,000 people.

191. Rise in adult social care complaints as ombudsman warns of assessment failings
28 May 2014 – Community Care
A report by a local government ombudsman reveals that adult social care complaints rose 13% in 2013.

Complaints about the quality of adult social care being provided by councils and private providers rose 13% last year, a total of 2,456 complaints and enquiries, an increase of 13.8% on the previous year.

192. Complaints statistics on all adult social care providers published for first time
29 May 2014 – CQC
For the first time the Local Government Ombudsman (LGO) has published its complaints statistics for local authorities and private social care providers in a report issued on Wednesday 28 May.

The report highlights the impact that people feel when care services let them down, and the individual stories published remind us that behind the statistics are the real experiences of people who are relying upon care providers to deliver the support they need.

Andrea Sutcliffe, its Chief Inspector of Adult Social Care, said:

“I welcome the report which demonstrates how important it is for adult social care services to respond positively to the concerns that may be raised by people using these services or their family and friends.”

When we look at whether services are safe, caring, effective, responsive and well led we will be considering how well complaints are handled and acted upon. This will help to inform our judgement of whether services are outstanding, good, require improvement or inadequate.”
http://www.cqc.org.uk/content/complaints-statistics-all-adult-social-care-providers-published-first-time

Workforce

Nothing to report
Warnings

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