

July 2017

PSNC Briefing 050/17: Update on the Health and Care Landscape

This briefing is part of a series issued regularly by PSNC to inform pharmacy contractors and LPCs of developments in the wider health and care landscape beyond community pharmacy. It builds on the Health & Care Review articles which are published on the PSNC website every week.

People with learning disabilities: making reasonable adjustments

Public Health England (PHE) has published a number of [guides](#) aimed at health and social care professionals who are providing or planning services that may be used by people with learning disabilities.

The guides include information on why reasonable adjustments must be made to services and what adjustments help people with learning difficulties. The following guides are available:

- reasonable adjustments: a legal duty;
- cancer screening;
- constipation;
- dysphagia;
- health checks;
- pharmacy and people with learning disabilities: making reasonable adjustments to services; and
- substance misuse.

Some of the guides are also available in easy read versions.

Cancer survival in England

The Office for National Statistics (ONS) has published a [statistical bulletin](#) covering cancer survival rates in England for specific cancer sites by age, sex and stage at diagnosis.

The data has been collected and calculated by the National Cancer Registration and Analysis Service within PHE.

The main points in the bulletin include:

- among the 25 cancers forming the national statistics, one-year survival was highest for melanoma of the skin in both men (97.1%) and women (98.5%) and five-year survival was highest for testicular cancer in men (95.9%) and melanoma of the skin in women (93.9%);
- pancreatic cancer had the lowest one-year survival for men (22.9%) and women (24.7%) and five-year survival was the lowest for mesothelioma for men (5.5%) and women (3.4%); and
- adults diagnosed with melanoma of the skin, prostate and breast cancer (women only) in the earliest stage (stage 1) now have a one-year survival that is comparable to the general population of the same age who have not been diagnosed with cancer.

Migrant health guide: countries A to Z

PHE has published [advice and guidance](#) on the health needs of migrant patients, aimed at healthcare practitioners.

There is an A-Z list of countries, with a profile for each country that covers the main health messages, information on infectious diseases, women's health, nutritional and metabolic concerns as well as a general country profile.

There is also a [guide](#) that covers NHS entitlements of migrants which provides a summary of key points that healthcare professionals may find useful when explaining the English healthcare system to migrants.

An overview of lifestyles and wider characteristics linked to Healthy Life Expectancy in England: June 2017

The ONS has published a [statistical bulletin](#) which provides an overview of lifestyles and wider characteristics that determine high or low healthy life expectancy.

Key facts include:

- more than a third of people aged 25-64 in the lowest healthy life expectancy (HLE) areas were economically inactive because they are long-term sick or disabled in 2015;
- more than one in eight in the lowest HLE areas grew overweight between entering primary school and starting secondary school;
- the majority of adults in the lowest HLE areas were not meeting the 'five-a-day' healthy eating guidance; and
- nearly twice as many people die from causes considered preventable in the lowest HLE areas compared with the highest.

Sharing learning from new care models

NHS Clinical Commissioners (NHSCC) has published an [article](#) containing a list of resources to help spread the learning about the [new model of care vanguards](#) and showcase best practice throughout the health and care sector.

This is part of an ongoing joint project that NHSCC is carrying out in collaboration with NHS Confederation, the Local Government Association (LGA) and NHS Providers.

The resources included in the article include links to blogs, case studies, podcasts and further resources.

Prescriptions Dispensed in the Community, Statistics for England – 2006-2016

NHS Digital has published a [bulletin](#) featuring a summary of prescription items dispensed in the community and highlights the main trends between 2006 and 2016.

Key facts included in the bulletin are:

- the total number of items dispensed in 2016 was 1,104.1 million, an increase of 1.9% (20.5 million) on the number of items dispensed in 2015;
- the total net ingredient cost of prescription items dispensed in 2016 was £9,204.9 million, a decrease of 0.7% (£61.8 million) on the cost in 2015; and
- the total number of items dispensed in 2016 for antidepressants showed the greatest numeric rise since 2015; they increased by 3.7 million items (6%).

Infographic: what makes us healthy?

The Health Foundation has published an [infographic](#) which shows the extent the wider determinants of health shapes a person's health, outside of the direct influence of health and care. It looks at differences in health expectancy in areas of different levels of deprivation and how these are affected by factors such as work, education, housing or social connections.

The infographic highlights that as little as 10% of a population's health and wellbeing is linked to access to health care. The healthy life expectancy gap between the most and least deprived areas.

This is the first infographic in a series launched by the Health Foundation to describe and explain the social determinants of health in an accessible and engaging way.

NHS England announces new sites to redesign mental health services and cut out of area placements

NHS England has announced the launch of [11 new sites](#) to test new approaches to delivering mental health services to serve patients in their local area. The sites will serve as pilots made up of NHS mental health trusts, independent sector and charitable organisations working together and sharing a local budget to reduce the number of people receiving inpatient hospital treatment and bring services closer to home.

The launch comes as it has been reported in recent years that patients are being sent many miles away from their homes to receive mental health care inpatient services which makes visiting very difficult for the individual, their families and local clinicians.

Six sites were chosen to take part in the first wave of this project which went live on 1st April 2017. The first phase of wave two will go live on 1st October 2017, with nine sites covering inpatient services for children and young people, adult secure care, and adult eating disorder services.

The total budget of the programme across both waves is around £640 million.

NHS England kicks off international search for ground-breaking patient-care innovations

NHS England is [calling](#) for the best healthcare innovations as part of the next round of the NHS Innovation Accelerator (NIA) programme to improve frontline patient care by fast-tracking the uptake of pioneering ideas, equipment and technology. This year, the NIA's priorities are those outlined in the [Next Steps on the NHS Five Year Forward View](#) document and include mental health, primary care and urgent and emergency care.

The aim is to provide innovators with a package of tailored support – including access to a 2017 bursary fund totalling £240,000 and mentoring from a team of experts – in order to help their ideas gain uptake across the NHS.

GP Patient Survey 2017

NHS England has published the results from the [GP Patient Survey](#) which contains data from January to March 2017 and provides information on patients' views on primary care services and how they access them.

Key facts identified from the survey include:

- the majority of individuals (84.8%) rate their overall experience of their GP practice as 'good', with 42.9% rating their experience as 'very good';
- 7% of patients rate their overall experience of making an appointment as 'good', with 33% saying it was 'very good';
- 68% of patients say it is easy to get through to their GP practice on the phone; and

- 8% of patients say their GP practice is open at times that are convenient for them.

Over 150,000 annual deaths from lung cancer, lung and heart disease

PHE has launched a national '[Be Clear on Cancer](#)' awareness campaign focussing on the symptoms of cancer. The campaign is calling for people to see their GP if they experience specific symptoms that may be suggestive of cancer such as coughing for three weeks or more. It is aimed at people over the age of 50 who are most at risk of lung cancer, chronic obstructive pulmonary disease and heart disease and is urging them to encourage others to do the same.

This call comes as a new PHE survey found that adults over 50 are more likely to encourage others to see the doctor than go themselves.

The survey found that:

- a third of people would wait for a month or longer before visiting the GP if they experienced breathlessness doing everyday things; and
- over half of people would wait over a month before speaking to their GP if they had a persistent cough.

Pregnancy and birth profiles: 2017 update

PHE has published updated [child and maternal health data](#) for 2017 relating to conception, pregnancy and delivery, including breastfeeding profiles. It includes information on maternity, teenage conceptions and breastfeeding.

The profiles provide information to help improve decision making when planning local services for pregnant women or to support new mothers and their children.

2017 Health Profiles

PHE has published [2017 Health Profiles](#) which provide a snapshot of health and wellbeing for each local authority (LA) in England. Health Profiles are intended as 'conversation starters' to highlight local issues and priorities for members, and for discussion at Health and Wellbeing Boards (HWBs).

Each area profile provides a general health summary, summary of health inequalities, child health, adult health and local priorities. It then provides visual representations of deprivation, life expectancy, health inequalities and a health summary compared to national benchmarks.

Spike in summer hay fever cases, show RCGP figures

The Royal College of General Practitioners' (RCGP) Research and Surveillance Centre has [reported](#) that hay fever cases in England have reached their highest level so far this year and are just under 50% higher compared to this time in 2016.

Since the start of June, there have been 37,568 family doctor visits relating to hay fever, a 230% increase from what is normally encountered.

NHS bill for paracetamol in England tops £70 million

The Pharmaceutical Journal has published an [article](#) which highlights that the NHS spent £70 million on prescriptions for paracetamol in England in the past financial year.

Around 21 million items for paracetamol were dispensed between 2016/17 at a net ingredient cost of £3.23, compared to 22 million items dispensed in 2015/16 with a net ingredient cost of £3.74.

STPs: What, why and where next?

The Institute for Public Policy Research has published a [report](#) which focusses on [Sustainability and Transformation Plans](#) (STPs) – which are now being referred to as Sustainability and Transformation Partnerships – by looking at what solutions they offer and sets out a range of challenges that may prevent them from happening.

Key facts in the report include:

- STPs face a deficiency in leadership, especially at the national level, which means that the public is either unaware of the reform plans or is misinformed about them, leading to unnecessary opposition;
- STPs risk getting engulfed by the funding pressures on the service, with much of the existing funding being channelled into maintaining existing ways of working or filling in deficits, rather than enabling the reform agenda; and
- STPs have no statutory powers with which to deliver their reform agendas, with the fragmentation created by 2012 Health and Social Care Act retained – making STPs a workaround – rather than addressed directly.

The report also makes policy recommendations relating to leadership, funding and power.

The state of adult social care services 2014 to 2017 report published

The Care Quality Commission (CQC) has published a national report, [The state of adult social care services 2014 to 2017](#), in which they present the findings of adult social care inspections programme.

Between October 2014 and February 2017, CQC completed over 33,000 inspections of around 24,000 adult social care locations. The main findings include the following:

- almost four out of five adult social care services in England were rated as ‘good’ or ‘outstanding’ overall, and nearly a fifth of services were rated as ‘requires improvement’;
- there were differences observed in performance from region to region, with the East of England showing almost 10% more locations rates as ‘good’ or ‘outstanding’ than the North West; and
- generally, smaller services that are designed to care for fewer people were rated better than larger services.

CQC to conduct 12 local system reviews of health and social care

The CQC has [announced](#) that it been asked by the Secretaries of State for Health and for Communities and Local Government to review commissioning across the interface of health and social care and assess the governance in place for resource management.

The CQC will look at how people move between health and social care and delayed transfers of care with a focus on people over the age of 65. Findings of the review will be shared by each LA’s HWB.

David Behan, Chief Executive of the CQC, said “People should be able to expect good, safe care when they need it, regardless of how this care is delivered. And yet we know there is wide variation in how health and social care systems work together, with some local systems working together effectively to ensure people get the right care, while others struggle to do so – these reviews will seek to examine why these levels of variation exist.”

Cardiovascular disease primary care intelligence packs

PHE has published [cardiovascular disease primary care intelligence packs](#) for each Clinical Commissioning Group (CCG). They are intended for healthcare professionals to use to check the prevalence, variation and treatment of cardiovascular conditions in their local area to help with planning, commissioning and improving local service.

The packs cover the following conditions:

- high cardiovascular risk and hypertension;
- stroke and atrial fibrillation;
- diabetes;
- kidney disease; and
- coronary heart disease and heart failure.

Each of the above conditions are listed as separate chapters and there is also data that shows the variation between local practices and similar CCG areas as well as a narrative that explains the case for prevention and suggested actions.

Big cuts planned to public health budgets

The King's Fund has published a new [analysis](#), based on data from the Department of Communities and Local Government, highlighting how central Government cuts have forced councils to reduce planned spending on vital public health services.

The analysis estimates that planned public health spending in 2017/18 will be reduced by more than 5% in comparison to 2013/14. Figures also show that councils are planning to spend more on some services such as promoting physical activity and some children's services, however, most services are planned to be cut.

Services which are estimated to have reduced spending include:

- sexual health services – spending is to be reduced by £30 million compared to last year, a 5% cut;
- tackling drug misuse in adults – spending is to be reduced by more than £22 million, a 5.5% cut; and
- stop smoking services – spending is to be reduced by almost £16 million, a 15% cut.

David Buck, Senior Fellow in Public Health and Inequalities at The King's Fund, said: 'These planned cuts in services are the result of central Government funding cuts that are increasingly forcing councils to make difficult choices about which services they fund.'

Reducing spending on public health is short-sighted at the best of times. But at a time when the rate of syphilis is at its highest level for 70 years, to cut spending on sexual health services is the falsest of false economies and is storing up problems for the future.

The Government must reverse these cuts and ensure councils get adequate resources to fund vital public health services.'

Drug strategy 2017

The Home Office has published [Drug strategy 2017](#), which sets out clear expectations for action from a wide range of partners, such as those in education, health, safeguarding, housing and employment to tackle drug misuse and the harm it causes.

The document outlines the action that needs to be taken at a national level to support local areas to ensure everyone plays their role in reducing demand, restricting supply, building recovery and driving action on a global scale.

Health profile for England

PHE has published a landmark report, [Health Profile for England](#), which compiles PHE's wealth of population data to provide an overall snapshot of health in England.

The report comprises [seven chapters](#), which can be read alone or as a series. These are:

1. life expectancy and healthy life expectancy;
2. major causes of death and how they have changed;
3. trends in morbidity and behavioural risk factors;
4. European comparisons;
5. inequality in health;
6. social determinants of health and
7. current and emerging health protection issues.

Key facts identified in the report include:

- life expectancy has increased more than years in good health and therefore the number of years lived in poor health has also increased;
- diabetes makes the top 10 causes of ill-health and disability (morbidity) for the first time;
- the two biggest risk factors behind levels of ill health are excess weight and high blood sugar;
- lower back and neck pain are the biggest causes of ill health;
- while deaths from heart disease and stroke have halved since 2001, it's still the biggest killer of men; and
- the biggest killers for women are Alzheimer's disease and dementia.

Health equity in England

PHE has published a [report](#) which features an analysis and commentary on inequalities for 18 indicators from the Public Health Outcomes Framework, which are used to monitor health inequalities in England.

Key facts identified in the report include:

- there has been little change in the gap in male life expectancy, male and female healthy life expectancy and premature cancer mortality;
- for female life expectancy, there has been a small widening of the gap between the most and least deprived areas;
- for premature cardiovascular disease mortality, considerable inequality by deprivation remains, with mortality rates in the most deprived tenth of areas almost 3.5 times higher than those in the least deprived tenth of areas between 2012 and 14; and
- although we have seen a general improvement across indicators reflecting PHE priority areas, for example, falling smoking prevalence, tuberculosis (TB) incidence and percentage of people reporting low life satisfaction, the most recent data show wide inequalities across all indicators related to child health, mental health, smoking, alcohol misuse, and TB, and no trend indicating a clear narrowing of these inequalities.

Adult Social Care: Quality Matters

The Department of Health (DH) and the CQC have published [Adult Social Care: Quality Matters](#), a resource which sets out a single view of quality and a commitment to improvement in relation to adult social care.

The list of priorities identified in the action plan are:

1. acting on feedback, concerns and compliments;
2. measuring, collecting and using data more effectively;
3. commissioning for better outcomes;
4. better support for improvement;
5. shared focus areas for improvement; and
6. improving the profile of adult social care.

More than a quarter of women missing smear tests are unaware they exist

Cancer research UK has published an [article](#) highlighting that more than a quarter (28%) of women who are overdue for a smear test are unaware of the national cervical screening programme. This lack of awareness was higher among women with English as a second language from minority ethnic groups and women from lower income families.

A survey commissioned by Cancer Research UK also showed that around half of those overdue for the test said they intended to go in the future and these were more likely to be younger women aged 25-34. However, 15% of those overdue said they had decided not to attend at all and these were more likely to be older women, aged 55-64.

Lack of confidence in STPs, councils warn

The LGA has published the [findings](#) of a survey it conducted on councillors on their perceptions of STPs.

Key findings from the survey are:

- while more than 90% of responding councillors knew about STPs, just 21% said they had felt sufficiently engaged in their STPs;
- under 25% of responding councillors are confident that their STP will deliver on its objectives or bring benefits to their local communities; and
- not a single respondent had reported that their full council had been 'very engaged' in their STP.

The LGA is calling for the NHS to involve councillors as equal partners in STPs.

NHS England announces new ambulance standards

NHS England has announced it will be implementing new [ambulance standards](#) across the country to update a system which has been in place for decades. The change focusses on enduring the best, high quality, most appropriate response is provided for each patient first time.

The change will introduce four categories of calls:

1. calls from people with life-threatening illnesses or injuries;
2. emergency calls;
3. urgent calls; and
4. less urgent calls.

NHS England has published four short animations which explain each of the categories in more detail.

State of Caring 2017

Carers UK has published the annual [State of Caring](#) report, based on a survey of over 7,000 responses from carers sharing their experiences – the largest number of responses to date.

Key facts identified in the report include:

- 69% of carers said they find it difficult to get a good night's sleep because of their caring role;
- 68% said that their GP knows they are a carer but that they don't do anything different as a result;
- 40% said they hadn't had a day off from caring for more than a year, and for 25% this was the case for more than five years; and
- in order to make ends meet, carers had been forced to use either their savings (30%), credit cards (26%) or bank overdrafts (23%).

The report features a series of recommendations for measures relating to carers' finances, careers, breaks and building a 'Carer Friendly NHS'.

Annual diabetes checks reduce mortality risk for people with diabetes

NHS Digital has published an [article](#) highlighting that according to the National Diabetes Audit 2015/16, people with diabetes who have had annual – diabetes checks regularly in the preceding seven years have a mortality rate half of those who haven't.

Key facts highlighted from the audit include:

- for people with Type 1 diabetes, the additional risk of death was 127.8% higher than the wider population and for Type 2 diabetes it was 28.4% higher;
- 2% of all emergency and non-emergency hospital admissions for cardiovascular conditions were for people with diabetes; and
- vascular outcomes accounted for a higher proportion of deaths among people with diabetes.

Children's Commissioner's report on vulnerability

The Children's Commissioner for England has published a new [analysis](#) which brings together a range of information held by various government departments and agencies on child vulnerability.

Key facts in the report include:

- at the end of March 2016, there were 394,400 children in need;
- at the end of 2016, 121,000 young people aged 16-18 years old were not in education, employment or training;
- in 2016, there were 36,000 teenage mothers aged 19 years and under living with their children;
- in 2016, 11,624 children under 18 years old were living with adults in drug treatment;
- at the end of December 2016, 118,960 children were homeless or were in temporary accommodation; and
- in 2015 there were 171,024 young children aged 5 to 17 years old who were unpaid carers.

Towards a smoke-free generation: tobacco control plan for England

DH has published a [tobacco control plan](#) for England which sets out national ambitions, to be achieved by the end of 2022, to help create a smoke-free generation.

The national ambitions set out in the plan are to:

- reduce the number of 15-year olds who regularly smoke from 8% to 3% or less;
- reduce smoking among adults in England from 15.5% to 12% or less;
- reduce the inequality gap in smoking prevalence, between those in routine and manual occupations and the general population; and
- reduce the prevalence of smoking in pregnancy from 10.5% to 6% or less.

The plan also focusses on prevention, supporting quitting, eliminating variation in smoking rates and effective enforcement.

STPs: 5 key questions for planners

The Centre for Health and the Public Interest has published an [analysis](#) which identifies five key questions for planners to ask of each of England's 44 STPs.

The analysis aims to set out a framework for scrutinising the impacts of STPs as they have been produced under extreme time pressure and in the absence of a legal basis for joint planning between different stakeholder organisations.

The five key questions are:

1. Will there be enough staff with the right skills?
2. Will there be enough beds?
3. Will there be good access to non-emergency (elective) care?
4. Will NHS care still be good quality care?
5. Will NHS care be effectively complemented by social care and public health measures?

Marmot Indicators 2017

The Institute of Health Equity (IHE) has published a [briefing](#) which provides an update on inequalities in health and progress on social determinants within England since the [Marmot review](#) in 2010. The Marmot review set out six clear policy recommendations to help improve health and reduce inequalities.

Key facts identified in the briefing include:

- between 2002 and 2015, there was around 175% increase in dementia as contributing to the cause of death in women aged 85 and over and a 250% increase for men;
- life expectancy for men varied from 74 in Blackpool to 83 in Kensington and Chelsea – a nine-year gap. Among women it varied from 79 in Manchester to 86 in Kensington and Chelsea – a seven-year gap; and
- in 2012/13 only half of children reached a good level of development, and a third of children eligible for free school meals reached a good level of development. In 2015/16, just under 70% reached a good level of development and over half of children on free school meals reached this level. The gap has reduced slightly but not significantly.

£86 million funding announced for new medicine and technology

DH and the Department for Business, Energy & Industrial Strategy have [announced](#) a new funding package to allow small and medium sized enterprises (SMEs) to develop and test new technologies. Access to this funding, which is worth up to £86 million, could help develop new medicines and speed up access to new technology.

The funding is split into four packages including:

- £39 million of funding to the Academic Health Science Networks enabling them to assess the benefits of new technologies;
- £35 million Digital Health Technology Catalyst for innovators to match-fund the development of digital technologies;
- Up to £6 million over the next three years to help SMEs with innovative medicines and devices get the evidence they need; and
- £6 million Pathway Transformation Fund which will help NHS organisations integrate new technologies into everyday practices.

Winter pressure in A&E: response to Health Select Committee

DH has published the Government's [response](#) to the House of Commons Health Select Committee's [report](#) on Winter Pressure in A&E departments published in October 2016.

The Government report responds to each of the 27 conclusions and recommendations in the Committee's report, and highlights how the NHS prepares for winter.

Number of children getting enough physical activity drops by 40%

PHE has [launched](#) its '10 Minute Shake Up' campaign in collaboration with Disney and Sport England. PHE and Disney also conducted a survey looking at the effects of physical activity on children's emotional wellbeing; some of the findings include:

- being active made the majority of 5 to 11-year olds feel happier (79%), more confident (72%), and more sociable (74%), according to their parents;
- the main motivations for kids to be more active was having friends to join in (53%) and having more activities they liked to choose from (48%); and
- children's overall happiness declines with age; 64% of 5 and 6-year olds said they always feel happy, compared to just 48% of 11-year olds.

PHE also highlights that the number of children meeting the recommended amount of physical activity (60 minutes per day) drops by 40% as they move through primary school.

£325 million invested in NHS transformation projects

Health Secretary Jeremy Hunt and NHS England Chief Executive Simon Stevens have [announced](#) capital investment for local projects that will help the NHS to modernise and transform care for patients.

The package, worth £325 million will help local schemes in 15 areas of the country modernise the NHS and transform care for patients.

The projects receiving funding include the following:

- in Greater Manchester, up to £50 million will be made available to help hospitals deliver significant improvements in urgent and emergency care by concentrating services in four hub sites across the city, expected to save around 300 lives each year in general surgery alone;
- in Cumbria, between £30 and £50 million will be used to improve access to chemotherapy and radiotherapy by establishing a brand new cancer centre, complete with new equipment at Cumberland Infirmary in Carlisle; and
- in Derbyshire, up to £30 million will be invested to create an 'Urgent Care Village' at the Royal Derby with GP services, a frailty clinic and mental health services to ensure patients receive the right care in the right place, first time, and avoid going to A&E unnecessarily.

This initial funding has been targeted at the strongest and most advanced schemes in the STP categories based on an assessment of leadership and service performance.

Local alcohol consumption: national survey results

PHE has published the [findings](#) of a survey it commissioned Ipsos MORI to conduct to collect data on alcohol consumption from 25 upper tier LAs.

Data was collected for 9,683 individuals, an average of 387 responses per authority between 29th February and 25th April 2016 using a postal survey methodology and face-to-face interviews for two LAs.

Key findings from the survey include:

- those with parental responsibility for children in their household were less likely to be drinking at increasing and higher risk;
- average AUDIT scores reduced with increasing age;
- adults in the highest AUDIT group (who show signs of possible alcohol dependence) drank on average 59 units of alcohol a week and were more likely to drink strong beer or cider. They were also more likely to drink most of their alcohol at home; and
- 10% of respondents had participated in a campaign to reduce alcohol consumption with Dry January the most frequently cited campaign.

The state of care in mental health services 2014 to 2017

The CQC has published the [findings](#) of its programme of inspections of specialist mental health services. It combines evidence from inspections and their role in monitoring use of the Mental Health Act as well as data from other sources.

Key facts identified in the report include:

- 68% of core services provided by NHS trusts were found to be good, with 6% rated as outstanding. Among independent services, 76% were rated as good or outstanding (72% good and 4% outstanding);
- some services performed particularly well, especially community services for people with a learning disability or autism and community services for older people;
- services that needed to improve have made real progress when they have taken on board CQC's findings and committed to tackle problems proactively and learn from others;
- 39% of NHS trusts were rated as requires improvement as at 31st May 2017, as did 23% of independent services; and
- a very small number were rated as inadequate: one NHS trust and three independent services.

The report identifies several areas of concern:

- concerns about 'locked rehabilitation wards';
- great variation between wards in how frequently staff use restrictive practices and physical restraint to deescalate challenging behaviour;
- the impact of staffing shortages;
- poor quality clinical information systems; and
- commissioning of crisis care services.

Quality improvement in mental health

The King's Fund has published a [report](#) which describes the progress in quality improvement made by three mental health organisations (two in England, one in Singapore), which provides insights and lessons for others.

The report covers why quality improvement matters, leading and sustaining quality improvement and challenges and opportunities. Key lessons are included at the end of the report for other organisations embarking on a similar journey.

NHS England: assessment of performance 2016 to 2017

DH has published an [annual assessment](#) of NHS England against its 2016/17 mandate to show the extent to which NHS England has met its objectives and fulfilled its duties to improve the quality of services, reduce inequalities and secure public involvement.

The Health Secretary has considered how NHS England has achieved each objective or requirement and has highlighted the areas where there has been notable progress made or where more work is to be done.

Public health interventions may offer society a return on investment of £14 for each £1 spent

The National Institute for Health Research (NIHR) has published a [systematic review](#) which estimates the return that public health interventions deliver to the wider health and social care economy. The review looked at 52 studies and found that for each £1 spent, the return for interventions ranged from -£21.30 to £221.

It found that:

- legislative interventions such as sugar taxes, and health protection interventions such as vaccination programmes, gave the highest returns on investment;
- interventions such as anti-stigma campaigns, blood pressure monitoring, provided smaller (but still favourable) returns;
- national campaigns offered greater returns than local campaigns; and
- falls prevention provided the quickest return, within 18 months.

Revealed: First ratings of all 44 STPs

The Health Service Journal has published an [article](#) which shows the public ratings of STPs. They have also included a map which shows the areas rated as Outstanding, Advanced, Making progress or Needs most improvement.

It shows that:

- 20 have been rated as 'Advanced';
- 14 have been rated as 'Making progress';
- 5 have been rated as 'Outstanding'; and
- 5 have been rated as 'Needs most improvement'.

Please note, a HSI log-in is required to view the article.

NHS England has published the [STP Progress Dashboard](#) where this information is taken from. The Dashboard gives an initial baseline view of STPs and tracks the combined achievements of local services.

The safer management of Controlled Drugs

The CQC has published an [annual report](#) on to CQC's activity relating to their Controlled Drug (CD) responsibilities.

The report outlines key changes to legislation, prescribing data and prescribing trends for CDs across England in the primary care sector. It also makes recommendations to strengthen existing arrangements.

People with co-occurring conditions: commission and provide services

PHE has published a [guidance document](#) intended for commissioners and providers of mental health and alcohol and drug treatment services. The guide should be used to inform the commissioning and provision of services for people with co-occurring mental health as well as alcohol and drug use problems.

PHE is encouraging commissioners and service providers to work together to improve access to services which can:

- reduce harm;
- improve health;

- enhance recovery;
- enable services to respond effectively and flexibly; and
- prevent exclusion.

Hepatitis C in England and the UK

PHE has published a report, slide sets and infographics to highlight the [latest data](#) relating to hepatitis C virus (HCV) in the UK.

Key facts highlighted in the documents include:

- 214,000 people estimated to be living with chronic HCV in the UK;
- provisional estimates suggest 12,060 people accessed treatment in 2016/17; up by 46% on the previous year and up by 90% on earlier years;
- only around half of people who inject drugs sampled in UK surveys were aware of their HCV antibody positive status, and this figure has remained relatively stable over the last six years; and
- needle/syringe provision was found to be suboptimal, with only around one half of those surveyed reporting adequate provision for their needs.

PHE is [urging](#) people to get free testing for HCV as a result of the above findings.

Mental Health Services Monthly Statistics: Final April, Provisional May 2017

NHS Digital has published [statistical information](#) relating to mental health services, learning disability and autism services for all ages. The data covers the time period between February and May 2017.

Key facts include:

- at the end of April, there were 1,219,839 people in contact with services; the majority of these (1,012,498) were in adult mental health services. There were 155,738 people in contact with children and young people's mental health services and 78,904 in learning disabilities and autism services;
- between 1st February and 30th April, 1,838 new referrals for people aged under 19 with eating disorder issues were received;
- there were 3,425 people with learning disabilities and/or autistic spectrum disorders in hospital at the end of April, of which 1,550 were in a secure setting; and
- of those people with learning disabilities and/or autistic spectrum disorders in hospital at the end of April, 1,095 (32%) had been in hospital for over two years.

What wellbeing data do LAs need to make better decisions?

A new set of [Local Wellbeing Indicators](#) have been developed by the What Works Centre for Wellbeing which LAs can use to obtain data on what matters to their local communities.

The indicators use existing data and research to paint an accurate picture of local residents' lives and community wellbeing. The indicators look at personal relationships, economics, education, childhood equality and health and offer a more sophisticated picture of what affects communities as opposed to traditional metrics used by LAs.

More people will be able to give blood following scientific review

DH has [announced](#) changes to blood donation rules following a review by the Advisory Committee on the Safety of Blood, Tissues and Organs.

The change in rules will apply to specific groups of people, such as commercial sex workers or a man who has had oral or anal sex with another man. The deferral period for people who engaged in some sexual behaviours was previously set at 12 months; however, this has now been reduced to three months following the latest scientific evidence and medical advances.

The Government will now work with NHS Blood and Transplant to implement the changes from early 2018.

Safe and compassionate care for patients depends on staff being listened to and supported

The Point of Care Foundation has published a new briefing, [Behind Closed Doors](#), which highlights the current pressures on NHS staff as the service is under chronic strain.

Key facts highlighted in the report include:

- from 2004 to 2016, the number of attendances at A&E increased by 18%, from 12.7 million to 15 million;
- only one in two staff feel their NHS employer values them and their work; and
- 2% of health and social care staff suffer work-related stress anxiety and depression in the NHS compared to around 1.2% of the overall British workforce.

The Foundation is calling for focus on support for bottom-up initiatives that acknowledge the intrinsic motivations that staff feel to care for patients, and for actions at every level of the NHS to enable staff to perform their best.

The recommendations made in the briefing are:

- frontline staff should prioritise their own wellbeing, communicate their concerns and use their own and patients' knowledge to take action to improve care and to feel motivated in their work;
- organisations providing staff with greater access to psychosocial support and forums for reflective practice; and
- national agencies and regulators should be applauded for efforts to simplify and reduce duplication, volume, frequency and confusion over the reports they require from providers.

New report finds that unmet needs in social care among older people are widespread

A [research report](#) has been published which highlights the unmet care needs of older people living in their own homes. The research was conducted by Ipsos MORI and partners, and funded by the NIHR School for Social Care Research.

Key facts identified in the report include:

- over half of older people with care needs have unmet needs;
- unmet need affects people eligible for LA support as well as those who are responsible for funding their own care and support;
- unmet needs can be hidden where older people look to cope with their care needs but doing this is too time and energy consuming; and
- there is considerable unmet need for social contact and involvement in interests and activities, related to the difficulties of managing day-to-day life or a lack of mobility.

The report concludes that meeting and maintaining needs is about more than providing care services; access to suitable transport, housing and adaptations as well as social and community networks can assist people in meeting and maintaining needs.

‘Burden of cancer’ increasing as UK trails behind Europe in cancer care

The Association of the British Pharmaceutical Industry has published a new [report](#) that shows the performance of the UK in the treatment of cancer in comparison to the rest of Europe.

Key findings in the report include:

- UK cancer survival rates lag behind the European average in 90% of cancers;
- the UK has the lowest survival outcomes across Europe for ovarian cancer;
- if the UK achieved the cancer survival rates of Germany, over 35,000 more people would be alive five years after diagnosis; and
- if the UK had the mortality rates of France, more than 100,000 women’s deaths could be prevented over the next ten years.

Sexual and reproductive health must not become the ‘Cinderella’ service of the NHS

The RCGP has published a report, [Time to Act](#), which highlights the views of GP members on sexual and reproductive services and makes recommendations on how services could be improved.

The report finds that GPs are concerned that the rates of teenage pregnancy and transmission of sexually transmitted diseases will rise due to the exclusion of vulnerable patients and widening health inequalities. Additionally, in rural areas, it was found that many patients struggle in accessing sexual and reproductive health services.

The RCGP has highlighted that the commissioning of sexual and reproductive health services is currently too fragmented leaving many healthcare professionals and patients confused about how to navigate and access services.

Type 2 diabetes is becoming more common in children

The NIHR has published a [research study](#) which shows that the number of children being diagnosed with Type 1 and Type 2 diabetes is rising, with Type 2 diabetes cases rising five-fold over a five year period.

The retrospective cohort study looked at health records from 375 GP practices in England of children aged 2-15 years with a body mass index (BMI) recorded between 1994 and 2013.

Key facts identified in the study include:

- about a third of cases of diabetes in the cohort were Type 2 diabetes;
- the incidence of both Type 1 and Type 2 diabetes in children under 15 increased between 1994 and 2013; and
- obese children were about four times more likely to have Type 2 diabetes than those with a normal BMI.

The study also confirms the strong link between obesity and Type 2 diabetes in children. The researchers conclude that it highlights the need to find ways of promoting healthy lifestyles and habits in childhood alongside education initiatives for families, to minimise the risk of developing Type 2 diabetes.

If you have queries on this PSNC Briefing or you require more information please contact [Zainab Al-Kharsan, Service Development Pharmacist](#).