

News story: The AAIB is sending a team to Warwickshire

[unable to retrieve full-text content]The AAIB is sending a team to a light aircraft accident near Coventry.

News story: Brokenshire: utterly repugnant to force families from their homes

Earlier this evening Mr Brokenshire commented:

It is hugely disturbing that the families should feel they had no option but to leave their homes. No-one should be forced out of their property because of threats and intimidation.

This sort of situation is utterly repugnant and has rightly been condemned across the community. It underlines the importance of work by Government departments, law enforcement agencies, community and voluntary sector partners to tackle intimidation in communities.

Press release: M23 smart motorway plans to go on show this weekend

Drivers, business owners and local residents are invited to find out more about the plans, which will add an extra lane in each direction to the M23 near Gatwick Airport, between junction 8 for Merstham and junction 10 at Copthorne, to upgrade it to an all lane running smart motorway. New technology will help to manage traffic to reduce delays and give drivers up to date information about conditions on the road ahead.

Public information events are being held this weekend (Friday 29 and Saturday 30 September, and again next weekend (Friday 6 October and Saturday 7 October), where people can find out more about the plans and put any questions directly to the project team. Highways England project manager Miguel Machado said:

This new stretch of smart motorway will tackle congestion and improve journey times not only for the tens of thousands of drivers who use the M23 every day, but also for business travellers and holiday makers using Gatwick Airport, as well as residents and businesses based in the area.

Smart motorways are central to our ambitious plans for modernising the motorway network and will add 120 miles of new lanes to motorways in the South East by 2020. They add vital extra capacity, improve journey times and maintain high levels of safety. Drivers will also see better information about conditions through new smart motorway technology which helps us to manage incidents, smooth traffic flow and make journeys more reliable. I encourage anyone interested in the upgrade of the M23 to a smart motorway to come to meet the project team at one of the information events to find out more.

The M23 is a key strategic road which connects Crawley and Gatwick Airport to the M25 motorway, routes into London and the rest of the UK.

This stretch of the M23 is heavily used by traffic travelling to and from Gatwick Airport and between Brighton and London, especially during UK holiday periods. The upgrade to a smart motorway will add a third extra capacity on this section, and will improve safety, ease congestion make journey times more reliable. Junction 9 on the M23 is also the main access for traffic travelling to and from Gatwick Airport, and currently experiences heavy congestion on a daily basis.

Under the plans, the hard shoulder will be permanently converted into a live running lane between junctions 8 and 10 in both directions. New signs and signals will be used to vary the speed limit to reduce congestion at busy times, and to control traffic if there is an obstruction on the road ahead.

Work is scheduled to start in March 2018, with the smart motorway being fully operational in early 2020.

Anyone interested in the scheme can visit the [Highways England's project page](#).

General enquiries

Members of the public should contact the Highways England customer contact centre on 0300 123 5000.

Media enquiries

Journalists should contact the Highways England press office on 0844 693 1448 and use the menu to speak to the most appropriate press officer.

Speech: Learning from post-accident investigations to ensure patient safety

Last week we published the draft [Health Service Safety Investigations Bill](#), which represents a landmark moment for safety and transparency in the NHS, and a victory for the many campaigners who in the wake of the Mid Staffs and Morecambe Bay scandals have called for major change.

Among many others, I particularly credit [Martin Bromiley](#), the airline pilot who lost his wife, Elaine, in a terrible and wholly avoidable tragedy. He has spent a huge amount of his time since then helping the NHS to understand how we can learn from the way airlines have used human factors research to improve safety.

The Health Service Safety Investigations Bill aims to take Martin's insights on post-accident investigations in the transport industry and apply them to healthcare. It will establish, for the first time, a fully independent investigations body responsible for finding answers and embedding new practices across the NHS in the wake of a healthcare error.

It will not replace the individual investigations that have to happen following any tragedy. But it will use a no-blame approach to try to understand patterns of harm and how they can be avoided by replicating the 'safe space' that bodies such as the Air Accident Investigation Bureau benefit from when investigating airline crashes. They are able to get to the truth quickly because all participants in investigations can share information freely in the knowledge that it will not be disclosed without a court order.

This is the 'black box thinking' that author Matthew Syed has been championing as a way to improve standards of safety and care in the NHS – and Matthew also deserves a lot of credit for challenging the medical profession over the supposed inevitability of avoidable harm.

So an important step forward. But overall how well is the NHS doing on patient safety?

There are clear signs of progress. MRSA and C. Difficile infection rates have continued to fall – in fact, [rates for 2016 to 2017](#) have been cut to almost

half those of 2009 to 2010. Avoidable harm in hospitals is down 8% over the last 3 years, with estimates suggesting that 86,000 more patients would have experienced some form of avoidable harm in hospital had rates stayed as they were in 2013. That means 200 fewer patients being harmed every single day.

And the public's view of how safe their NHS care is has never been higher – nearly [4 in 5 people say that they would feel safe](#) if they were seriously ill in an NHS hospital, compared to just over half of people a decade ago.

But perhaps the biggest impact has been the new CQC inspection regime, which makes safety one of the [5 key domains](#) and has focused the minds of hospital boards on safety in a way that simply never happened before. Professor Sir Mike Richards, who recently stepped down as our first ever Chief Inspector of Hospitals, deserves enormous credit for this change alongside his fellow chief inspectors.

What shocked him – and all of us – was the extraordinary variation in standards across the NHS. That is now changing, with 35 hospitals put in special measures – and of the 20 that have come out, no fewer than 8 moved straight to a 'good' rating.

Internationally this progress has been recognised. The Commonwealth Fund said the NHS "excels in safety" and was the safest (as well as the best overall) of 11 major healthcare systems.

But... we still have 150 deaths every week where there is a 50% or higher chance they were preventable according to the [Hogan and Black analysis](#).

'Never events' are not really falling – more than 1,000 in the last 4 years. Indeed in the last year of reporting we transfused the wrong type of blood into one patient, removed someone's ovary by accident and left a surgical needle inside someone else by mistake.

And every week [4 claims are made for babies born with brain injuries](#) following potentially preventable mistakes – leading to unbelievable human hardship for the families involved.

This says to me that we are at a crossroads. We can either say that we had our 'Mid Staffs moment' and successfully reset the dial to focus more on patient safety, but that now it's back to other priorities. Or we can say that even after sustained efforts, our levels of avoidable harm are still way too high.

A Johns Hopkins University study says [medical error costs 250,000 lives in the United States every year](#) – the biggest killer after cancer and heart disease – so this issue is by no means unique to the NHS.

What could be unique to the NHS is solving the problem once and for all and blazing a trail across the world by showing how standards of safety really can be transformed in modern healthcare.

Speech: DFID Ghana Health Adviser's speech at the launch of Family Planning week in Accra

Health Adviser of Department for International Development Ghana delivered a speech at the launch of Family Planning week in Accra

It's great to be here at the launch of Family Planning week – thanks for invitation to speak.

I would like to start by saying a few words about the UK's commitment to supporting voluntary family planning across the world. Providing women and girls access to contraception is transformational – it enables women and girls to make decisions about their health and their future, to complete their education, create or seize better economic opportunities and fulfil their potential. Investing in the health and wellbeing of women and girls makes countries stronger, more stable and more successful. That's why it's a top priority for the UK's Department for International Dev – DFID.

It was great that Ghana was represented at the London FP Summit in July, hosted by the DFID, with UNFPA and the Gates Foundation, by the Deputy Minister, Honourable Tina Mensah, and the Second Lady Samira Bawumia, who has been a great champion for the health of young people.

And it was great to hear such transformational commitments from Ghana – to increase the number of women using modern contraception from 1.4 million to 1.9 million in 2020 – that's 500,000 extra women and girls each year who will access services that can change their lives. Ghana is also looking to ahead to greater self-financing of family planning commodities, which to date have been primarily supported by donors. DFID believes that Ghana is ready to take on more of the financing needs of its health sector, including for FP commodities, although we will continue to support Ghana to meet its FP 2020 commitments in other ways.

One of the themes at this year's Summit was adolescents. Adolescence is a formative period – a crucial opportunity to set young people on a path to a healthy future. When countries prioritise youth-friendly reproductive health services, young people are far more likely to reach their full potential. Over the past 3 years, DFID has been working with GHS to increase access to information and services for young people, through the Ghana Adolescent Reproductive Health programme in Brong Ahafo and Ashanti, with Palladium, Ghana Health Services, the National Population Council, Planned Parenthood Association of Ghana, Hope for Future Generation, and district assemblies.

The programme has reached 190,000 adolescents, developed 54 new youth corners

which have created a safe and supportive environment. 2.2 million viewers were reached by the TV show 'You Only Live Once' – YOLO. We've worked with GHS to develop innovative technologies – mobile app for adolescents and service providers, a new Resource Book for teachers, and a revised Adolescent Health Policy and Strategy that will pave the way for the future.

The programme has seen doubling in contraceptive use in BAR and there has been a decline in the percent of adolescent girls who become pregnant each year. I'm confident that the regional health teams will carry on this important work.

Over the next few years, Ghana's success in Family Planning will be measured by how we have reached adolescents and other vulnerable people – this will be a deciding factor in the future prosperity for the country. We all have a responsibility to ensure that all adolescents have the tools and information they need to protect their health and plan their futures.

Thank you.