

Time Commenced – 6.00pm
Adjourned – 8.08pm
Reconvened – 8.15pm
Time finished – 8.50pm

Adults and Health Scrutiny Review Board
30 January 2024

Present: Councillor Roulstone (Chair)
Councillors Kus, Ashby, Nawaz, Lonsdale and Repton

In Attendance: Robyn Dewis – Director of Public Health
Beth Fletcher – Involvement Manager - NHS Derby and Derbyshire
Integrated Care Board
Tadiwanashe Mabeza – F2 Doctor
Rami Khatib - General Practice Dentist
Rose-Marie Lynch - Senior Commissioning Manager
Clive Newman - Director of Primary Care
Jennifer Stothard - Deputy Director Mental Health, Children & Young
People, Learning Disabilities and Autism Services
Allan Reid - Consultant in Public Health
Kate Brown - Director of Joint Commissioning and Community
Development

16/23 Apologies for Absence

Apologies were received for Councillor Pearce and Councillor Martin.

17/23 Late items introduced by the Chair

There were none.

18/23 Declarations of Interest

There were none.

19/23 Minutes of the meeting held on 3 October 2023

The minutes of the meeting held on 3 October 2023 were agreed as an accurate record.

20/23 Dentistry Update

The Board received a presentation on Dentistry in Derby. This was presented by the Senior Commissioning Manager.

It was noted that a governance structure had been agreed that enabled the ICB to set the annual plan and strategic direction of the Dental function and make localised decisions where possible, whilst the current dental commissioning team (who were hosted by Nottingham and Nottinghamshire ICB on behalf of the 5 ICBs in the East Midlands) were enabled to deliver day to day contracting and commissioning functions. It was noted that the process had been designed to ensure minimal disruption and smooth transition to support both services and patients.

The Board noted that challenges with access to NHS dental services were well documented, with dental access being a key priority for all Integrated Care Boards. It was reported that the lack of new registrations to NHS dentists was a common challenge across all Regions, with the most critical issue being gaining access to NHS Dentistry, as people were reporting that no dentists were taking on patients.

It was noted that national challenges included:

- Challenges for NHS Dentistry existed prior to the pandemic.
- Workforce/Recruitment of Dentists and wider clinical dental team.
- Access issues.
- Profession discontent with current contract.

It was reported that the Secretary of State had taken the decision in January 2020 to centralise water fluoridation functions through the Health and Care Bill which received Royal Assent on 28th April 2022. It was noted that The Act removed all Local Authority responsibilities for water fluoridation, maintained a duty to consult, and transfers funding responsibilities (for operational costs) to central Government (capital costs remain central Government responsibility).

The Board noted that it was estimated that across the Midlands that around 631,000 appointments had been lost in primary care dentistry since the start of the pandemic. The effects had been similar in community and hospital care due to restricted capacity from staff absences or re-deployment to support COVID-19 activities.

It was reported that Derby and Derbyshire ICB/JUCD were working closely with the Local Dental Network Chair for Derbyshire to understand challenges at place level where there had been no Expressions of Interest received for Dental Access Initiatives. It was reported that in order to manage the current challenging financial position, Derby and Derbyshire ICB/JUCD were committed to continuing with 2023/24 investment schemes that had already commenced to support with improving access to NHS dental services. In addition, any availability of underspend funding would be reviewed for commissioning of additional NHS dental activity.

A councillor commented that existing resources for dentistry weren't sufficient and suggested that £111m was needed nationally to improve the standard of dentistry in the UK.

The Board noted that the UDA for root canal treatment was now 7. It was noted that this was still too low as it covered the whole treatment received by patients.

A councillor commented that a National Health Service dentist in Derby had informed a resident that they needed to go private if they wanted to be seen by a dentist. The Senior Commissioning Manager informed the Board that this was unacceptable and encouraged people to report dentists who made similar comments to the ICB.

The Board agreed that the Cabinet Member for Integrated Adult Care and Health would be asked to work with the Council's Communications Team to inform residents how they could complain to the ICB. The Board also agreed that the Cabinet Member for Integrated Adult Care and Health would be asked to work with the Council's Communications Team to inform residents that they no longer needed to be registered at a dentist practice to be seen there.

A councillor commented that there were 269 dentists in the East Midlands that were not accepting new patients. The councillor put forward a recommendation that Council Cabinet fully supports the call for major reform and investment in Dentistry in this area and throughout the country. That Council Cabinet support the aspiration to achieve 700,000 more urgent appointments and that incentives are put in place for new dentists to work in areas with the greatest need. That Council Cabinet support supervised toothbrushing in schools for three-five year-olds, targeted at areas with the most childhood tooth decay. Council Cabinet support reform of the dental contract to rebuild the service in Derby and throughout the rest of the country so that NHS dentistry is available for all throughout Derby and the country.

The recommendation was put to a vote and was carried.

The Senior Commissioning Manager informed the Board that an oral health needs assessment was being developed and that a report on this would be brought to a future meeting.

The Board resolved:

- 1. to note the update.**
- 2. to recommend that Council Cabinet fully supports the call for major reform and investment in Dentistry in this area and throughout the country. That Council Cabinet support the aspiration to achieve 700,000 more urgent appointments and that incentives are put in place for new dentists to work in areas with the greatest need. Council Cabinet support supervised toothbrushing in schools for three to five year-olds, targeted at areas with the most childhood tooth decay. Council Cabinet support reform of the dental contract to rebuild the service in**

Derby and throughout the rest of the country so that NHS dentistry is available for all throughout Derby and the country.

21/23 Primary Care Access and Recovery Plan update

The Board received a presentation on the Primary Care Access and Recovery Plan update. This was presented by the Director of Primary Care.

The Board noted that the plan was a 'work in progress'. It was noted that the plan was not intended as a definitive final statement but was the summary of discussions to date and the starting point for further discussion with General Practice and other providers. The focus was on the immediate actions up to 31st March 2024, though work would continue beyond that.

It was reported that planning assumptions and outcomes had been aligned to and were interdependent with:

- Fuller Report
- Derby & Derbyshire ICB Joint Forward Plan
- Derby & Derbyshire ICB Integrated Care Strategy
- Derby & Derbyshire ICB Operational Plan 23/24
- Recovery Plan for Urgent & Emergency Care
- Recovery Plan for Planned Care

The Board noted that the primary interdependency was with the Primary Care Clinical Model for Derby & Derbyshire which was being developed by the GP Provider Board (GPPB).

It was reported that in November 2023 Derbyshire GP appointments had recovered 104% compared with 2019 (corrected for working days).

It was noted that the Primary Care team had been working with practices who regularly showed lower levels of recovery to first of all establish if firstly it was a data issue, and if not, support was offered through talking through any issues, and what support could be offered.

It was noted that targeted support was offered through the Accelerate programme and the newly released General Practice Improvement Programme which offered varying levels of support to practices to help improve access to patients.

Councillors commented that for many residents it felt like it was now much harder to get a GP appointment than it was before the pandemic. The Board noted that figures showed that the number of appointments available was now 9% higher than pre-pandemic.

A councillor asked whether GPs could limit the number of patients that they accepted. It was noted that GPs could limit the number of patients at their practice. It was noted that GPs received around £150 per-patient per-year and that this was given to them on an estimation that patients visited their practice three times per-year.

A councillor commented that it was important to focus on the recruitment, retention and training of receptionists. The Board noted that this was an area of focus and that care navigation training was in place for receptionists.

The Board resolved to note the update.

22/23 Men's Mental health in Derby

The Board received a presentation on the Men's Mental health in Derby. This was presented by the Deputy Director for Mental Health, Children & Young People, Learning Disabilities and Autism Services and the Consultant in Public Health.

The Board noted that over three quarters of people who kill themselves are men and that men were less likely to access psychological therapies than women. It was reported that men were nearly three times more likely than women to become alcohol dependent and use drugs and that 73% of adults who went missing were men. It was noted that 87% of rough sleepers were men and that men made up 95% of the prison population. It was reported that men were nearly 50% more likely than women to be detained and treated compulsorily as psychiatric inpatients.

It was reported that the suicide rate in Derby was similar to the England average and that between 2019-2021 there were 49 male deaths in the city. It was noted that men made up almost 85% of deaths by suicide in this period in Derby and that most people in the UK (73%-2009-2019) who died by suicide were not in contact with mental health service in the 12 months before their death. The Board noted that effective suicide prevention required a whole system approach.

The Board noted that support for men in Derby suffering with mental health issues included:

- Derby wellbeing services
- Voluntary and community services for men's mental health in Derby
- Derby County Community Trust
- Derby City Life Links
- NHS Talking Therapies, for anxiety and depression
- Community Mental Health Framework

A councillor asked whether work was being done to support the LGBT community. It was noted that the NHS had targeted support for this group and worked with local charities.

It was noted that a recent deep-dive into the deaf community and the black community had revealed that different sections of society required different types of intervention. It was noted that Derby had a high level of men with autism and that work was taking place to ensure that mental health services in Derby were more accessible for men with autism.

The Deputy Director for Mental Health, Children & Young People, Learning Disabilities and Autism Services agreed to bring a report to a future meeting on suicide prevention in Derby.

It was agreed that the Board would ask the Cabinet Member for Integrated Adult Care and Health to highlight the work taking place in the public health arena on mental health services in Derby.

The Board resolved to note the update.

23/23 Florence Nightingale Hospital Beds update

The Board received a report on the Florence Nightingale Hospital Beds. This was presented by the Director of Joint Commissioning and Community Development.

It was noted that there were 56 beds open on the FNCH site, across three wards comprising of a Neurological Rehabilitation Unit (Ward 3 known as Kings Lodge with 19 beds) a non-specialist palliative care ward (14 beds) and a ward for medically fit patients waiting to be discharged home after receiving care and treatment at RDH (23 beds). It was reported that beds on the site over the last two-three years had been opened in response to pressures and the Trust used the facility flexibly according to need; as such within the last week a further ward had re-opened to provide a 21-bed stroke rehabilitation ward. It was noted that pre-covid, UHDB had five wards in-situ at FNCH.

It was reported that delayed discharges were a significant challenge to the system in terms of utilising acute bed capacity beyond the point that an individual needed it and preventing access for patients with more acute health needs.

It was noted that 92% of people were discharged from University Hospitals Derby & Burton to their usual residence with no additional needs (data from most recent 12 weeks). Of those who had additional needs identified, 4% needed a package of home care, 2% short-term bedded care without 24hr nursing needs, 1% with short-term bedded care with 24hr nursing needs and 1% permanent nursing care.

It was reported that the number of Derby City patients requiring community hospital provision with 24hr nursing was approximately 13 per month. The Board noted that ensuring sufficient available capacity across all discharge pathways was challenging, especially at the current time with additional seasonal pressures and potentially reduced capacity due to sickness absence and infection control measures (which meant clinical areas where there had been incidences of certain conditions such as Covid-19 or norovirus may be closed for a period to reduce infection risks).

It was reported that there were many factors that contributed to delayed discharges (both internal and external to the hospital). In terms of capacity the greatest need was identified to be for home care support, not bedded nursing care, and despite how pressured it was for the system, performance measures for Derby & Derbyshire system as a whole remained in the upper quartile (ie top 25% best performing) systems across the country.

A councillor asked for a report to be brought to a future meeting on care packages in Derby. It was agreed that a report would be brought on this.

The Board resolved to note that:

- 1. there continues to be bedded care at Florence Nightingale Community Hospital (FNCH) and no permanent changes have been made**
- 2. organisations within the health and care system are working together to improve the ability to ensure patients who have care needs after an episode of acute health care have their needs met as quickly as possible and in the right setting**
- 3. any significant or permanent changes will be governed appropriately in terms of engagement or notification requirements.**

24/23 Work Programme 2023/24

The Board considered a report setting out the Terms of Reference and Remit of the Board.

The report provided Members of the Board with the opportunity to consider its terms of reference and remit for the forthcoming municipal year, its work programme for 2023/24 and any topic reviews.

The Board resolved:

- 1. to note the information provided within the report.**
- 2. to note that the following items had been added to the work programme:**
Oral health needs assessment

**Suicide prevention in Derby
Care Packages in Derby**

Minutes End.