

Time commenced – 18.02

Time finished – 20:31

ADULTS AND HEALTH SCRUTINY REVIEW BOARD

5 July 2022

Present: Councillor Martin, (Chair)
Councillors J Khan, Froggatt, Pattison, Lonsdale (Vice Chair)

In Attendance: Rose-Marie Lynch, Senior Commissioning Manager
Pharmacy, Optometry, Dental Services -
Midlands (East)
Adam Morby, Regional Chief Dentist – NHS England, Midlands
Rami Khatib, Local Dental Network Chair – NHS England,
Midlands
Clive Newman, Director of GP Development, Derby and
Derbyshire CCG
Julie Pickering, Specialist Rehabilitation - Florence Nightingale
Community Hospital
Xia Lin, Rehabilitation Consultant - University Hospitals of
Derby and Burton NHS Foundation Trust
Grace Pearn, Deputy General Manager at Derby Teaching
Hospitals NHS Foundation Trust
Sean Thornton, Assistant Director NHS Derby and Derbyshire
Clinical Commissioning Group
Andrew Dale, Derby City Local Dental Committee
Robyn Dewis, Director of Public Health, DCC

01/22 Apologies for Absence

Apologies were received from Councillor A Holmes.

02/22 Late Items

The Chair introduced a late item on Topic Review Protecting Care Home Residents and Staff. It was noted that information contained in this report was not available on the date that the agenda was published. It was noted that it was important for the Board to consider the Topic Review at this meeting as the next Adults and Health Scrutiny Review Board meeting would not take place until October 2022.

03/22 Declarations of Interest

There were no declarations of interest

04/22 Minutes of the meeting held on 21 March 2022

The minutes of the meeting held on 21 March 2022 were agreed as a correct record.

05/22 Minutes of the meeting held on 19 April 2022

The minutes of the meeting held on 19 April 2022 were agreed as a correct record.

06/22 Late Item - Topic Review Protecting Care Home Residents and Staff

The Chair introduced a report on Topic Review Protecting Care Home Residents and Staff.

It was reported that The Adults and Health Scrutiny Review Board had agreed to undertake a Topic Review on Protecting Care Home Residents and Staff at its meeting on 15 June 2021. It was noted that the Board agreed to the recommendations contained within the report at its meeting of 19 April 2022 and delegated authority to the Chair to finalise the content of the report.

The Board resolved to recommend the report to the proper officer, to share with Council Cabinet for their consideration.

07/22 Covid-19 Update

The Board received a report from the Director of Public Health which provided an update on the current progress of the pandemic. The Board noted that on 1st April 2019 the national approach to Covid-19 was updated and access to universal testing was removed.

It was noted that ONS survey data was now used to monitor case numbers in Derby and that for the week ending 24 June 2022, around 1 in 30 people in Derby had Covid-19. It was noted that hospital admissions nationally and locally, with Covid-19 had been increasing over recent weeks. It was reported that there were high levels of Omicron variants BA.4 and BA.5 in the community. It was noted that vaccinations were still protecting against serious illness and that the vaccination programme was still being rolled out.

It was reported that a further wave of infection in Autumn/Winter was expected.

A councillor questioned whether a plan was in place for new variants. It was noted that levels of PCR testing were now low which meant that new variants would not be picked up as quickly. It was noted that there were limits on what Derby could do locally other than closely monitoring case numbers.

A councillor asked whether any variants of concern were spreading internationally. The Director of Public Health informed the Board that there

was a huge level of uncertainty but that they weren't aware of any specific variants of concern.

The Chair informed the Board that Covid-19 Update would remain as a standing item on the Board's work programme.

The Board resolved to note the report.

08/22 Provision for people with chronic conditions such as ME, Chronic Fatigue Syndrome (CFS)

The Board received a report regarding provision for people with chronic conditions such as ME, Chronic Fatigue Syndrome (CFS).

Officers from the NHS reported that ME/CFS was a complex, multi-system, chronic medical condition that had considerable personal, social and economic consequences and a significant impact on a person's quality of life, including their psychological, emotional and social wellbeing. It was noted that people with ME required targeted service provision, including health and social care. It was reported that research by 2020 health had shown that, when lost taxes, welfare benefits, and health and social care costs were considered, the total cost to the UK economy of ME in 2014/15 was at least £3.3 billion.

The Board noted that recent data from the UK Biobank suggested that there were over 250,000 people in England and Wales with ME/CFS, with about 2.4 times as many women affected as men. It was reported that ME/CFS could affect people of all ages.

The Board noted that the service in Derby was established 2004 for adults aged 16 and over and was based in Specialist Rehabilitation at Florence Nightingale Community Hospital. It was reported that referrals could be received from any area. It was noted that advice and guidance was available to GPs and that the service provided training to other disciplines.

It was reported that ME/CFS took a Person Centred approach providing self-management strategies to help the person to self-manage their condition, aiming to reduce severity of symptoms, improve symptom management, and improve quality of life, including support with engagement in social, leisure, education and employment. It was noted that this followed NICE Guidance 206 2021 for ME/CFS.

The Board noted that outcomes were measured through the following methods:

- Questionnaires at initial appointment and 12 months:
- Epworth Sleepiness Score
- VAS (pain) scale
- CORE (Anxiety and depression)
- SF36 (Physical function)
- Self Efficacy
- Chalder Fatigue

It was reported that a minimum of 80% of respondents to CFS/ME Service evaluation questionnaire reported being more confident in self-managing their condition.

A councillor asked what the waiting times for a referral and to see a consultant were. It was noted that the waiting times for a referral was currently 6 months and to see a consultant was usually within 1 month.

A councillor asked whether GPs in Derby were trained to identify ME. It was noted training for GPs had been held previously and that the network co-ordinator could arrange further training.

The Chair asked whether people in Derby could be referred to private clinics in Derby for forms of treatment not currently offered by the NHS such as dietary treatments. It was noted that the NHS in Derby had not referred any patients for this treatment at private clinics.

The Chair suggested that local NHS services take evidence from private clinics operating nutritional therapy as a treatment for CFS/ME patients with regard to the nature and effectiveness of those treatments. This was agreed by the Board.

A councillor suggested that a training and awareness programme is set up for GPs for better identification of ME symptoms in order to improve initial referrals and to reduce waiting times. This was agreed by the Board.

A councillor asked for the Board to be provided with information on how many GPs took up the training and awareness programme.

The Board resolved:

- 1. to recommend that local NHS services take evidence from private clinics operating nutritional therapy as a treatment for CFS/ME patients with regard to the nature and effectiveness of those treatments.**
- 2. to recommend that a training and awareness programme is set up for GPs for better identification of ME symptoms in order to improve initial referrals and to reduce waiting times.**

09/22 NHS Dental Services

The Board received a report and presentation from the Senior Commissioning Manager Pharmacy, Optometry, Dental Services - Midlands (East) on NHS Dental Services.

It was noted that NHS England and NHS Improvement (NHS E/I) was currently responsible for the commissioning of all NHS dental services, but local responsibility would be delegated to NHS Derby and Derbyshire Integrated Care Board on 1 April 2023.

It was noted that dentistry in Derby faced the following challenges:

- Deprivation
- Homelessness
- Access to services
- People experiencing Severe Multiple Disadvantage

It was noted that the location of NHS dental services in Derby City were accessible:

- by car within 10 minutes in rush hour (all)
- by public transport within 30 minutes (most)
- by most residents who are able to walk to their nearest dental practice within 1.6km
- by all residents who are able to cycle to their nearest dental practice within 20 minutes

It was reported that water fluoridation was an effective and safe public health measure to reduce the frequency and severity of dental decay, and narrow oral health inequalities. It was noted that fluoridated water was currently supplied to ten percent of the population in England and this includes some parts of Derbyshire. It was reported that there were no water fluoridation schemes benefitting residents of Derby City.

It was noted that a strategic review of dental access was planned for 2022/23 and NHS E/I anticipate having access shortly to a mapping tool which would help to identify local areas which may have specific issues in order to assist with a more targeted approach in tackling them.

A councillor commented that population levels in deprived areas of the city were increasing but the number of dentists had not increased in line with this. The Board noted that an oral health needs assessment was required to determine where dentistry services were needed in the city to best meet demand.

The Chair commented that many of the most deprived areas of the city had no dentistry services at all. The Chair commented that some people in these areas did not have the ability to travel by car to dentists. It was reported that it was important for the government to be lobbied for further funding in order for practices to be set up in these areas.

The Chair raised concerns over NHS practices dropping patients. It was noted that NHS practices were dropping patients as a result of issues with the NHS dentistry contract. It was reported that other practices were picking up these patients where possible. It was noted that Covid-19 had led to a significant reduction in patient numbers and that restrictions were still in place.

The Board noted that activity levels were now at 80-85% as dentists and nurses were still catching Covid-19 and needing to isolate. It was noted that patients on average were needing more treatment as a result of missing appointments because of Covid-19. It was noted that this increased pressures on practices servicing their existing patients.

A councillor questioned whether Derby had lost dentists as a result of Brexit and Covid-19. It was noted that Brexit and Covid-19 had both led to a reduction in dentistry staff and had also made recruitment more difficult. It was noted that the Golden Hello scheme had been brought in to address this.

A councillor questioned whether urgent dental care was available in Derby. It was noted that there was an extended or out of hours 8-8 NHS dental contract within Derby City. It was reported that the 8-8 NHS dental service provided access to patients from 8am to 8pm every single day of the year (365 days) and delivered both routine and urgent dental care.

A councillor commented that dentist profiles on the NHS website had not been kept up to date. It was noted that this was being revamped and would be kept up to date from September onwards, however it is not a contractual requirement of dental practices, but the revamp of the NHS website is to make the dental practice profiles more user friendly.

The Derby City Local Dental Committee representative commented that the NHS dental contract was fundamentally broken and that this was creating huge issues with recruiting and retaining staff. It was noted that this contract made NHS work non-viable. It was noted that the main issue with the dental contract was the UDA which was becoming increasingly hard to meet. It was noted that dentists were penalised financially if they didn't meet their target of 96%.

A councillor questioned whether dentists and nurses could be recruited from abroad in order to fill vacancies. It was noted that international recruitment was very important, and that Health Education England was looking into this.

The Chair put forward a recommendation that the Integrated Care System gives greater recognition to dentists and NHS dentistry and works towards improving NHS dentistry access and delivery as rapidly as possible. This was agreed by the Board.

The Board resolved to recommend that NHSE/I (responsible commissioners until April 2023) and the Integrated Care Board (taking responsibility from April 2023) give greater recognition to dentists and NHS dentistry and work towards improving NHS dentistry access and delivery as rapidly as possible.

10/22 Fluoridation of water in Derby

The Board received a report and presentation from the Director of Public Health on Fluoridation of water in Derby.

The Board noted that fluoride could be found naturally in drinking water, or could be added through the supply. It was noted that nationally levels of 1mg/litre were recommended to improve oral health. It was reported that the WHO advised that levels below 1.5mg/litre were safe over a lifetime of consumption. The Board noted that around 1:10 people nationally had fluoride added to their water and that 70% of people have concentrations of less than 0.2mg/litre.

It was reported that fluoride in water had been seen to significantly reduce oral health inequalities and that tooth decay and poor oral health were strongly associated with deprivation. It was noted that 5yr olds with fluoridated water had 25% less dental decay than those without and that children with fluoridated water were half as likely to be admitted to hospital for tooth extraction.

The Board noted that the Health and Care Bill 2022 gave the Secretary of State the power to directly introduce, vary or terminate water fluoridation schemes.

It was noted that for every £1 invested in water fluoridisation £12 was saved in dental treatment charges.

It was suggested that the British Fluoridation Society should be invited to attend a future meeting to speak on this. It was also suggested that local MPs should be lobbied to encourage the Secretary of State to act on this.

A councillor questioned whether the Council were in discussions with other local authorities on introducing water fluoridation. It was noted that discussions had taken place, but that responsibility now sat with the Secretary of State.

The Board resolved to note the contents of the report.

11/22 People and Communities Strategic Approach to Engagement 2022-23

The Board received a report and presentation from the Assistant Director NHS Derby and Derbyshire Clinical Commissioning Group on People and Communities Strategic Approach to Engagement 2022-23.

It was noted that the framework would be deployed as the integrated care strategy was developed. It was noted that an update on the engagement side of this strategy would be brought to the Board's next meeting.

A councillor asked who would be leading this strategy. It was noted that the integrated care partnership would lead on this.

A councillor commented that information from the voluntary sector would be invaluable in helping to shape this strategy.

The Board resolved to request that an update is brought to the Board's next meeting.

12/22 Work Programme and Topic Review

The Board considered a report of the Strategic Director of Corporate Resources presenting the proposed work programme of the Board for the remainder of the 2022/23 municipal year.

The Board discussed and suggested items to be included on the Work Programme for 2022/23. It was agreed that the following items would be added to the Board's work programme:

- Health inequalities
- A and E and discharge waiting times
- Services for people with learning difficulties
- GP services update
- Mental Health – inequality
- Voluntary sector contribution to health

The Board agreed to undertake a Topic review on obesity. It was agreed that the scope of this topic review would be discussed prior to the Board's next meeting.

The Board resolved:

- 1. to add the suggested items to the work programme 2022/23**
- 2. to undertake a topic review on obesity**

13/22 Item for Information - Primary Care Enhanced Access Report

The Board received a report from the Assistant Director NHS Derby and Derbyshire Clinical Commissioning Group. The report provided an update on Primary Care Enhanced Access. The report was for information.

The Board resolved to note the contents of the report.

MINUTES END