
SOUTHAMPTON CITY COUNCIL
HEALTH OVERVIEW AND SCRUTINY PANEL
MINUTES OF THE MEETING HELD ON 1 NOVEMBER 2018

Present: Councillors Bogle (Chair), White (Vice-Chair), Bell, Houghton, Noon, Payne and Savage

10. **MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)**

RESOLVED: that the minutes for the Panel meeting on 30 August 2018 be approved and signed as a correct record.

It was noted that the Panel raised concerns about figures within the Adult Social Care Performance report, in particular the number of assessments untaken by the Council. However, the Panel's concerns were responded to by the Service Director, Adults Housing and Communities who stated that assessments had been thorough and that the numbers indicated within the report were correct.

11. **SEXUAL HEALTH SERVICES**

The Panel considered the report of the Director of Public Health requesting that the Panel consider and challenge outcomes relating to sexual health in Southampton.

Dr Jason Horsley (Director of Public Health) and Tim Davis (Senior Commissioner - Healthy Lives) were in attendance and, with the consent of the Chair, addressed the meeting.

The Panel received two presentations setting out the background to the sexual health services within the City. The briefings outlined the structure and responsibilities of each of the providers of sexual health services and a brief assessment of the sexual health of the City.

Following the presentation the Panel sought insight on a number of issues including:

- An understanding of how Southampton compared statistically to other areas. The Panel learnt that a meaningful assessment of sexual health was complicated but were informed that the levels were not dissimilar to other large university cities;
- The aims of the new strategy, focussing on the need to improve the City's sexual health, were explained;
- The links between deprivation and sexual health and how certain demographical groups were likely to be affected. It was further explained that sexual health and in particular the rate of teenage pregnancy could be affected by religious beliefs and origin;
- The support given to parents and the schools to deliver advice on good sexual health. It was explained that the City's performance continued to be effected by changes in life styles such as: the use of social media to find partners; the numbers of residents originating from areas where diseases like HIV are prevalent; or the reduction in teenage drinking and drug use;

- The effects of the reduction of the service budgets over the years. The Panel noted that whilst the service had been impacted by the budget reductions this had been mitigated to some extent by the introduction of innovative practices. As an example it was explained that self-test kits were now being issued. The Panel noted that the process of issuing kits was monitored and that there is a follow up scheme; and
- The Panel also recognised that provision should be built into the plan in order for it to be regularly assessed.

RESOLVED that the Panel:

- (i) Welcomed the development of the new sexual health improvement plan. The Panel hoped that as the plan developed it would seek to resolve the fragmented nature of the service and stress the importance of working with education providers; and
- (ii) Requested that the action plan be brought to a future meeting of the Panel.

12. **TRANSFORMING HEALTH AND CARE FOR THE PEOPLE OF SOUTHAMPTON**

The Panel considered the report of the Chief Executive Officer, NHS Southampton Clinical Commissioning Group, requesting that the Panel consider, and provide feedback on, the current high level draft Southampton Health and Care strategy.

John Richards (Chief Executive Southampton Clinical Commissioning Group) was in attendance and, with the consent of the Chair, addressed the meeting.

It was explained that the Panel had received a high level analysis of the City's current and future health care challenges. The analysis had drawn together a number of sources of information including population growth, current health inequalities, disease prevalence, adult social care forecasting and urgent care hospital usage in order to develop a strategy to cope with the future needs of health care provision in the City.

It was further explained that the analysis undertaken was being used to target resources across the City more effectively. It was noted that the analysis had the benefit of having better quality data than that previously used to inform the current CCG plan.

It was noted that the draft plan seemed to have a far starker outlook on health issues than the current plan. The Panel questioned how the CCG had arrived at this position.

The Panel were informed that the data indicated that the level of deprivation was a big factor in indicating the health within an area. It was explained that the data had shown that there was a significant difference in the life expectancy of those from different ends of the social deprivation spectrum. It also questioned the use of the national comparison figure within the document.

The Panel stated that the paper circulated did not acknowledge the importance of child health and services linked to education. The Panel were keen to stress the importance of this and in particular the interaction with parents and children within the first 1000 days of a child's life.

It was questioned whether the potential additional usage of the City's hospital from other areas like the Isle of Wight would have a negative effect on the services offered to the City. The Panel also reflected upon potential measures to reduce the numbers of patients being admitted to hospital by ambulance including the use of paramedics.

The Panel were advised of the opportunity to attend an engagement event hosted by the CCG on 20th November 2018.

RESOLVED that the Panel

- (i) noted the draft of the 5 year strategic plan;
- (ii) questioned why the plan did not include an emphasis on child health; and
- (iii) requested that the supporting data be made available to Panel Members.