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# SOUTHAMPTON CITY COUNCIL HEALTH OVERVIEW AND SCRUTINY PANEL

#### MINUTES OF THE MEETING HELD ON 7 NOVEMBER 2024

Present: Councillors W Payne (Chair), Houghton, Kenny, Noon, Gravatt and

Greenhalgh

<u>Apologies:</u> Councillor Renyard

#### 13. APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)

The apologies of Councillor Renyard were noted.

#### 14. <u>DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS</u>

Councillor Kenny declared that she was an Elected Governor for University Hospital Southampton NHS Foundation Trust and a former Member of Southern Health NHS Foundation Trust.

Councillor Noon declared that he worked in Adult Social Care.

The Panel noted the declarations of interest and considered that it did not present a conflict of interest in the items on the agenda.

**RESOLVED** that Councillor Kenny, and Councillor Noon would be involved the discussion of the items on the agenda.

#### 15. MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)

**RESOLVED**: that the minutes for the Panel meeting on 5 September 2024 be approved and signed as a correct record.

#### 16. **RENEWING OUR AMBITION**

The Panel considered the report of NHS Hampshire and Isle of Wight (HIOW) which summarised the NHS plan for the future across Hampshire and the Isle of Wight.

James House, Managing Director, Southampton Place, NHS Hampshire & Isle of Wight; and Joe Hannigan, former Mental Health Professional and member of the Trade Union Council and the Care and Health Integration Panel; were in attendance and, with the consent of the Chair, addressed the meeting.

The Panel noted that NHS HIOW had recently published Our Renewed Ambition which was a statutory document that the organisation was required to produce. The document consolidated several strategies into one comprehensive plan which set out how NHS partners intended to exercise their functions in the next five years. The plan had been shared with partners throughout its development and had been presented to the Health and Wellbeing Board for Southampton. The strategic commitments are:

- To make a shift towards more proactive and preventative care
- To deliver person-centred care led by the needs of the whole person and underpinned by a community-centred approach to wellbeing
- To develop and maximise pathways of care based on clinical outcomes, evidence and data
- To maximise the use of resources in the system building on models of collaboration, partnership and integration.
- To be a learning system using improvement methods, research and innovation to continuously improve.

In discussion the Panel noted the following:

- In the past funds had been directed towards addressing problems rather than solutions. To reduce demand for acute services the emphasis in the plan was on delivering proactive and preventative care, which was recognised as more cost effective and efficient.
- A modelling tool had been developed to pull together data from the various healthcare services, which used algorithms to identify the patients likely to need acute care within six months and the interventions that could be provided now to prevent those patients needing acute care. This has helped to find and utilise quick wins to free up resources from the acute sector to be invested in more preventative care.
- The move toward Integrated Neighbourhood Teams Locality based health and care practitioners, including doctors, nurses, social workers, working in a coordinated way to support the needs of the community.
- It was highlighted that good partnership working already existed in the city.
- The approach to hospital discharge had been revised after the Covid-19 pandemic. The revised approach supported staff in making discharge decisions and optimizing care pathways.
- The financial challenges faced by both the NHS and the Council were acknowledged. These challenges underpinned the need to deliver the objectives outlined in the Hampshire and Isle of Wight NHS strategy.
- The strategy was NHS focussed but had been formed with input from partners who were encouraged to use the plan to hold the NHS to account.

**RESOLVED** that, reflecting the increased focus on neighbourhood working outlined in the strategy, a discussion on Integrated Neighbourhood Teams would be scheduled for a future meeting of the HOSP.

#### 17. **DENTISTRY IN SOUTHAMPTON**

The Panel considered the report of NHS Hampshire and Isle of Wight which provided an update and overview of dentistry and dental services across Southampton.

James Roach, Director of Primary Care, NHS Hampshire & Isle of Wight; Joe Hannigan, member of the Trade Union Council, and the Care and Health Integration Panel; Dr Debbie Chase, Director of Public Health at Southampton City Council and Councillor Finn, Cabinet Member for Adults and Health were in attendance and, with the consent of the Chair, addressed the meeting.

It was noted that the report provided context on how the national dental contract had been organised and delivered in the Southampton area since management of the contract transferred from NHS England to NHS Hampshire and Isle of Wight. It had been widely acknowledged that the national dental contract needed reform.

In discussion the Panel noted the following:

- A financial report had been submitted for a new contract that would increase the Unit of Dental Activity (UDA) rate and aimed to provide more robust data collection requirements.
- Flexible contracting by NHS Hampshire & Isle of Wight proved beneficial when a dental practice ceased operating and replacement services were established within four weeks.
- The improvements made in the collection of local dental data enabled identification of services gaps and evidenced that instead of decline there had been a slight increase in the number of appointments. It had been found that dental need was closely linked to levels of deprivation.
- Getting reliable data on unmet need with regards to dental health in Southampton was challenging.
- The mobile dental unit in Hampshire, provided by the charity Dental Aid, had facilitated 10,000 additional consultations and focussed on people who had long standing dental needs in deprived communities. The mobile dental unit played a crucial role in reducing dental health care inequalities.
- Efforts to improve collaboration with dental service providers faced challenges due to their private independent business nature and discussions with providers had focussed on how collaboration could support their business development goals.
- The provision of a 'golden hello' had helped to address some workforce issues. Other workforce initiatives included the promotion of careers in dentistry.
- A workforce summit had been planned for the Isle of Wight to support closer working, career opportunities and information sharing. The Panel welcomed and supported the proposal for a workforce summit in Southampton on dentistry, akin to the event planned for the Isle of Wight.
- Dental practices had expressed a desire to engage in more prevention work, however their capacity to engage in prevention work was limited by the demand for delivery appointments and dental treatment.
- Oral health promotion activity had engaged 31 early years providers and around 1,300 children in supervised toothbrushing activities
- Oral education in schools had focussed on teaching good brushing techniques and feedback from teachers indicated the need for reinforcement at home which was more challenging to achieve.
- It was acknowledged that it was important to make the most of the full dental team, which included dental nurses and hygienists.

#### **RESOLVED**

- 1) That the Panel would be provided with data for Southampton which identified the percentage of patients attending NHS dental practices in the previous two years.
- 2) That an estimate would be provided to the Panel of the level of unmet dental care need in Southampton.
- 3) That, whilst the Panel welcomed the work to improve oral health targeted at under 5's in Southampton, to improve oral health outcomes for children in the

city, the NHS and Council would commit to continue to prioritise support to children in the most disadvantaged areas of the city.

# 18. <u>HAMPSHIRE AND ISLE OF WIGHT HEALTHCARE NHS FOUNDATION TRUST - UPDATE</u>

The Panel considered the report which provided an update on the newly formed Hampshire and Isle of Wight (HIOW) Healthcare NHS Foundation Trust.

Dr Lesley Stevens, Chief Quality and Engagement Officer at Hampshire and Isle of Wight Healthcare NHS Foundation Trust; Joe Hannigan, member of the Trade Union Council and the Care and Health Integration Panel; and Councillor Finn, Cabinet Member for Adults and Health were in attendance and, with the consent of the Chair, addressed the meeting.

It was noted that the formal establishment of the HIOW Healthcare NHS Foundation Trust took place on 1<sup>st</sup> October 2024 following the approval of NHS England and the Secretary of State for Health and Social Care. The new Trust provided the majority of NHS community, mental health and learning disability services for people of all ages across HIOW. The Trusts geography was co-terminus with that of the Integrated Care System and covered multiple local authority areas. With the new organisation formed the focus was now on realising the benefits of the transaction through:

- the provision of full wrap around care
- integration, collaboration and sharing best practice between services and areas
- scaling up services that benefit from a larger footprint
- and making sure residents can access services as close to their home as possible.

The Panel discussed a number of points including:

- Services in Southampton were now delivered by one organisation not two separate bodies which provided a unified pathway to access health services.
- The mental health investment standards had helped to grow and improve service provision strategically, however residential care placements, waiting lists and workforce issues remained a challenge. The newly formed Trust planned to develop communities of practice and new models of care delivery across the whole family of services, with a focus on community support rather than residential care which would help to address these challenges.
- The future of the Highpoint Centre in Southampton was questioned due to the reduction of staff in administrative support functions in the new Trust. The site was still being used by the Trust and no decision had been taken with regards to the future location of the Trust's headquarters at the moment.
- The Trust's consideration and implementation of the recommendations included within the review by the Care Quality Commission of Nottinghamshire Healthcare NHS Foundation Trust following the killings in Nottingham by Valdo Calocane.

The Panel were informed of the engagement session scheduled for 26 November to help shape the Trust's strategy. Panel Members were encouraged to attend if possible.

**RESOLVED** that the Panel would be informed of the Trust's plans for the Highpoint Centre when they became clear.

### 19. MONITORING SCRUTINY RECOMMENDATIONS

The Panel received and noted the report of the Scrutiny Manager which enabled the Health Overview and Scrutiny Panel to monitor and track progress on recommendations made at previous meetings. A response from South Central Ambulance Service was being sought for the 5 December meeting of the Panel.

