

MINUTES OF THE MEETING of the Health Overview & Scrutiny Panel held on Thursday, 17 March 2022 at 1.30 pm as a Virtual Remote Meeting

**Present**

Councillor Ian Holder (Chair)  
Councillor Lee Mason (Vice Chair)  
Councillor Judith Smyth  
Councillor Rob Wood  
Councillor Arthur Agate, East Hampshire District Council  
Councillor Ann Briggs, Hampshire County Council  
Councillor Lynn Hook, Gosport Borough Council

**8. Welcome and Apologies for Absence (AI 1)**

Apologies for absence had been received from Councillors Trevor Cartwright and Rosy Raines.

**9. Declarations of Members' Interests (AI 2)**

Councillor Mason declared a personal interest in agenda item 6, Portsmouth CCG and Health & Care Portsmouth update, as he is a patient at the University of Portsmouth's Dental Academy.

**10. Minutes of the Previous Meeting (AI 3)**

**RESOLVED that the minutes of the meeting held on 20 January 2022 be agreed as a correct record.**

**11. South Central Ambulance update (AI 4)**

The panel noted that Tracy Redman, Head of Operations South East, had sent apologies as she was unable to attend due to significant operational pressures.

**RESOLVED that the report be noted.**

**12. Solent NHS Trust update (AI 5)**

Suzannah Rosenberg, Chief Operating Officer, introduced the report.

In response to questions the following matters were clarified:

No staff had left as a result of the requirement, later rescinded, to be vaccinated against Covid. The Trust had been very careful not to proceed with formal action against staff.

There is a high level of vacancies, particularly for registered nurses and allied professionals such as physiotherapists and occupational therapists. International recruitment for nurses, particularly from Africa and India, continues to be successful and is on its fourth cohort. However, the situation in the Ukraine means these initiatives might not be able to be pursued at the moment. The Trust is constantly recruiting as are Portsmouth Hospitals University Trust and Southern Health.

The HOSP thanked Ms Rosenberg for her report.

**RESOLVED that the report be noted.**

### **13. Portsmouth CCG and Health & Care Portsmouth (AI 6)**

Jo York, Managing Director of Health & Care Portsmouth (HCP), introduced the report, which also covered the agenda items for the Hampshire, Southampton and Isle of Wight Clinical Commissioning Group Partnership, and the Integrated Care System.

In response to questions the following points were clarified:

The Director of Public Health is better placed to say if Covid will have a yearly cycle of infection like flu. The CCG and HCP understand an annual cycle is expected but with an unknown intensity. Currently there are rising hospital admissions though fewer deaths and patients in intensive care. Some admissions are not necessarily because of Covid but where patients are admitted because of something else but have Covid. QA Hospital still has strict infection controls so treating patients with Covid is complex.

Covid modelling is continuing nationally and throughout Hampshire and the Isle of Wight (HIOW) to understand the impact of demand on services. There is a likely to be a peak for the next few weeks. Previously there had been restrictions so modelling has to continue to develop to take into account changing circumstances. Vaccination is an "evergreen" offer so is always available. The vaccination programme can be scaled up or down. There is about 80% coverage in Portsmouth though some residents are hard to reach. Health is working with communities to see how they can access these residents; barriers are not always a case of how near a vaccination centre is.

With regard to concerns over access to NHS dentists and issues with contracts, Ms York said that responsibility for commissioning dentistry, along with optometry and pharmacy, will move to the Integrated Care System (ICS) with effect from 1 July 2022 though the national contractual position will remain. Dentistry is currently commissioned by NHS England and managed regionally. It will be a phased transition which will enable more local ownership and understanding. However, it will take time and the impact may not be seen until April 2023. Local MPs and councillors have been vocal about the issues with dentistry. Ms York has met with Penny Mordaunt MP and the Minister of Health on the need to make changes to contracts. Work on contractual issues had stalled during Covid but is now up and running. Infection control and prevention (ICP) restrictions for dentistry, for example,

cleaning the surgery after each patient, meant a loss of capacity of about 60%. Consideration of ICP was discussed at the meeting with the Minister and is being re-examined.

Locally there are a number of issues. In Portsmouth there is a lower number of commissioned dental services than other services. The national contract has perverse incentives so that it is harder for NHS dentistry to be sustainable in more deprived areas than more affluent ones. There are issues with the workforce. For example, there are enough commissioned services on the Isle of Wight but not the dentists. Ms York has met NHS England to raise concerns. NHS England will help fund a joint post for a Dental Transformation Programme Manager for two years to support ideas to improve access to dentistry. The post is being advertised now. The aim is for the postholder to work with the University of Portsmouth's Dental Academy which offers training for dental nurses and hygienists as well as postgraduate courses. However, it is not a dental school. The nearest dental school is in Kent and as professionals often work for a few years near where they trained this is a disadvantage.

Initiatives include strengthening the Dental Academy so perhaps nurse practitioners could carry out more procedures. NHS Solent have community dentistry services so the CCG are looking at how they can work more closely with providers. Practices learnt from Covid vaccination could be used, for example, pop-up health clinics, especially for looked after children. The post mentioned above will look at how local provision can be strengthened and work with providers where there are quality issues. A new practice is due to open which will need to be supported during the changes.

Ms York acknowledged members' concerns about the lack of dentists and agreed dental care is important as dentists check for other conditions such as mouth cancer. Looked after children have priority. Penny Mordaunt MP has raised the matter with the Minister of Health and there is a lot of work taking place with the national contract. The Dental Academy could become a dental school to enable a long-term plan to resolve workforce challenges. Ms York could not comment on records of which dental practices were closed or open during lockdowns as they are the responsibility of NHS England. It will be easier under the ICS as there will be greater understanding and relationships across HIOW.

Members said the Dental Academy had a longstanding collaboration with the King's College London Dental Institute whereby students spent one week in four in Portsmouth. Ms York said Public Health work closely with the University so the arrangement could be a seed for the University; perhaps the arrangement could be for two weeks out of four.

Discharges are a multi-faceted problem. There is a 14-point plan with three sections across all partners in Portsmouth and South East Hampshire. One section focuses on avoiding admissions by encouraging use of alternative services such as the Urgent Treatment Centres, community response and primary care clinical assessment services. The approach had reduced

admissions but in the light of rising Covid infections partners continue to strengthen the alternatives and embed pathways.

Another section focuses on improving the admissions process and flow. Since November 2021 spaces in the ED have increased from 30 to 50. The "front door" has been re-engineered so patients can go straight to a speciality assessment. Other initiatives are same day emergency care and a new medical village. There was some improvement before Covid infections increased.

There are a number of discharge pathways so some patients can go straight home but there are more patients with increased acuity. There are step down facilities run by Hampshire County Council, Portsmouth City Council and Solent NHS Trust but their effectiveness is variable. The high level of integration in Portsmouth as shown by Jubilee House or the Southsea Unit is fortunate as it means patients can go home more quickly. Hampshire are struggling. There are more complexities with complex care so a small number of patients are staying longer in hospital than is desirable. Discharges are under considerable scrutiny but the Trust is getting support. It looks daily at how to move people through the system quickly. Rising Covid admissions do not help as they affect a broader range of beds.

Ambulance queues are partly because of discharge problems but also because of how and who arrives at QA. The appropriateness of admissions and more use of the range of community alternatives need examining. It is hoped the new ED will solve matters but they need to be solved before then to get the right outcomes for patients.

With regard to the Urgent Treatment Centres (UTC), of which there are three (Gosport, Petersfield, Portsmouth), staff vacancies and absences have been significant because of Covid, particularly as UTCs have small teams. Work is taking place on how the UTCs can support each other and take more conveyances from ambulances. The aim is to restore the opening hours at the St Mary's UTC but this depends on staffing. The CCG is seeing how the UTCs and Primary Care Networks can support each other and a pilot is due to start in the Petersfield area. The long-term model is being examined as if the UTCs are not being used effectively they need to be revisited. Petersfield UTC (run by Southern Health) is relatively new and getting up to capacity. Members commented that when it was not at capacity people had had more time to be listened to. There has been good feedback about it and the other UTCs.

In response to comments that local people may not be aware of the UTCs and what they do, Ms York said that the CCG is working on the UTCs and communications. When St Mary's changed its opening hours usage increased. Raising awareness of the UTCs needs to be pursued, also with SCAS so ambulances know they can take people there. Members suggested information about the UTCs could be displayed in schools, colleges and churches. Another suggestion was having a big sign at the entrance of QA to re-direct people to the UTCs. Ms York said the wait list app was successful so perhaps something similar could be tried. There used to be a plethora of

minor injuries centres but the CCG could work with local authorities to simplify the landscape.

The HOSP thanked Ms York for her report.

**Action points**

- Check if QA have a sign at the entrance re-directing people to the UTC
- Check if the Petersfield UTC offers the same range of services as the other two UTCs
- Include in the next report information on the effectiveness of communications and engagement for the UTCs
- Include in the next report an update on dental provision

**RESOLVED that the update be noted.**

**14. Hampshire, Southampton and Isle of Wight CCG Partnership (AI 7)**

The update was included in agenda item 6.

**15. Integrated Care System (AI 8)**

The update was included in agenda item 6.

The meeting ended at 2.27 pm.

---

Councillor Ian Holder  
Chair