

BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL
HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE

Minutes of the Meeting held on 27 November 2023 at 6.00 pm

Present:-

Cllr P Canavan – Chair

Present: Cllr H Allen, Cllr L Dedman, Cllr S Carr-Brown, Cllr M Gillett,
Cllr C Matthews, Cllr P Slade and Cllr C Adams

Also in attendance: Louise Bates, Healtwatch

28. Apologies

Apologies had been received from Cllrs Jackie Edwards, Judy Richardson and Duane Farr. Cllr Joe Salmon attended remotely thereby being unable to vote on any matters arising.

29. Substitute Members

Cllr Cameron Adams substituted for Cllr Duane Farr on this occasion.

30. Declarations of Interests

Cllr Sharon Carr-Brown declared a personal interest as her husband was a non-executive director on Integrated Care Board for the Dorset area and as a support worker for an autistic man who was in receipt of direct payments from BCP Council, Cllr Joe Salmon declared a personal interest as an employee of Dorset Healthcare and a member of Unison and Cllr Hazel Allen declared a personal interest as an employee of University Hospitals Dorset NHS Foundation Trust.

31. Minutes

The minutes of the meeting held on 25 September 2023 were confirmed as an accurate record and signed by the Chair.

32. Action Sheet

The Committee had no comments on the action sheet.

33. Public Issues

There were no public issues received on this occasion.

34. Dorset and Bournemouth, Christchurch & Poole (BCP) Safeguarding Adults Boards Annual Report 2022-2023

The Independent Chair of the Dorset and BCP Safeguarding Adults Board presented a report and presentation, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'A' to these Minutes in the Minute Book.

It was a statutory requirement for the DBCP Safeguarding Adults Boards (SAB) to publish an Annual Report each year and to present that report to the Council's Health & Wellbeing Board. Many Councils also requested that the report was presented to Scrutiny, as the report enabled a discussion on the work of the Safeguarding Adults Board.

The attached report was for the year April 2022 to March 2023. The report was agreed at the September meeting of the Safeguarding Adults Boards (SABs). The DBCP Boards had successfully worked together with joint meetings over the year. One Annual Report for both Dorset and BCP SABs had been published. Throughout this year the Board had delivered against all its priorities which were set out in the annual work plan; this Annual Report summarised what the Board has achieved.

The Committee discussed the report and presentation, and comments were made, including:

- In response to a query regarding the differences in data being collected by BCP and Dorset, the Committee was advised of that it was difficult to compare local authorities data and the reasons for this were outlined including, the different arrangements at the front doors of the services. It was also highlighted that Dorset and BCP had very different demographics which meant benchmarking them against each other was not beneficial
- The Committee was advised of the process used by the service once it received a safeguarding concern and the breakdown of primary support reasons provided during the last quarter.
- The Committee was advised of the importance of transitional safeguarding, what that entailed and how it was managed when a safeguarding concern was referred.
- In response to a concern that the BCP data did not include a self category, the Committee was advised it was included under the neglect data and the work being done in that area was highlighted.
- The Chair of the SAB advised that next year she would ensure the data for self neglect would be separately accounted for. **ACTION.**
- Following another query regarding the differences in the data provided, the Committee was advised that the SAB did not have its own data analysts and used data provided from Dorset and BCP Council.
- The Chair of the SAB welcomed any further consideration from the Committee about how they would like to see the data presented and broken down in the next Annual Report. **ACTION.**

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- Following further concern about the differences in data, the Chair of the SAB stressed that what was important was the Boards worked with local analysts to make sure it scrutinised the data through its Quality Assurance Subgroup and identified areas where more in-depth auditing was required to understand what was going on locally.
- In response to a query, the Committee was advised there had been an increase in safeguarding concerns and referrals and the reasons for that were detailed including increases in statutory safeguarding, adult review referrals and the undertaking and commissioning of those, and that people were more aware of adult safeguarding.
- Some further clarification over the terminology used was provided to the Committee.
- The Chair of the Committee concluded the item by thanking the Chair of the SAB for her presentation and requested that the action regarding the data breakdown be considered for the next report.

RESOLVED that the Committee note the report which informed about how the SAB had carried out its responsibilities to prevent abuse, harm and neglect of adults with care and support needs during 2022-2023.

35. Annual Adult Social Care Complaints report

The Head of Transformation and Integration presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'B' to these Minutes in the Minute Book.

Adult Social Care had a statutory responsibility to produce an annual report on complaints received, issues that had been raised and any action that had been taken to improve services.

The report provided a summary of complaints and compliments, including learning, for BCP Council Adult Social Care from 1st April 2022 to 31st March 2023.

The Committee discussed the report and comments were made, including:

- In response to a query from the Chair regarding the Executive Performance and Quality Improvement Board and the data considered, the Committee was advised of the data set used
- A Committee Member congratulated the team and felt that the majority of complaints came from a misunderstanding about what an individual may or may not be entitled to and that an increase in communication around that, may reduce complaints.
- The Director of Adult Social Care advised that the core data used could be shared with the Committee, but it needed to be confidential. **ACTION.**

RESOLVED that the Committee:

- i) consider and scrutinise the information contained in this report.**
- ii) consider any actions or issues for inclusion in the forward plan.**

36. Update on NHS Dentistry Provision in BCP area

The Deputy Director Strategic Commissioning, NHS Dorset presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'C' to these Minutes in the Minute Book.

Over recent years there had been a steady fall in the number of patients in Dorset who had been able to access an NHS dentist. The total number of adults seeing an NHS dentist in Dorset has decreased from 265,915 (42.0% of the population) in June 2021 to 231,948 (36.6% of the population) in June 2022. This was a drop of 33,967 patients (5.4%) over this period.

As at July 2023 there were 109 High Street Dental Contracts - these were in practices in Dorset who provided general dental services. In 2022/23, NHS England (NHSE) commissioned 1,224,386 Units of Dental Activity (UDAs) from providers. This figure had reduced from the previous year as a result of a number of recurrent and non-recurrent reductions which were made to contracts at the request of providers, due largely to the number of vacancies for dentists in practices across the county.

A key factor affecting access to NHS dentistry was workforce. The lack of dentists in the area undermined the ability of High Street practices to meet their contracts.

The South West Dental Reform Programme was established in 2020 to improve access to oral health services, develop workforce initiatives to improve recruitment and retention of the dental workforce, and improve the oral health of the population. The programme was run by NHSE and Health Education England, alongside the Integrated Care Partnerships and Local Authority Public Health leads to bring together the NHSE Dental Commissioning Team and Transformation Team with key stakeholders with responsibility for oral health in the region (Public Health England, Health Education England, Local Dental Committees, the Local Dental Network, and Integrated Care System (ICS) representatives) as well as public and patient voice partners. The purpose of the programme was to inform a roadmap/plan for the future of NHS dental services and oral health improvement in the South West.

Access to NHS dentistry in Dorset remained challenging. Dorset ICB was working with local and regional Clinical and professional Dental leads to try and improve the situation for residents; engaging local dental clinicians, their representatives and partners, as well as Healthwatch, as part of the

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wider South West Dental Reform programme, to offer practical support to enable dental practices to take on more NHS dentistry in the area.

The Manager of Healthwatch Dorset gave a short presentation which detailed the work they had undertaken regarding the lack of access to NHS dentistry in Dorset.

The Committee discussed the report and comments were made, including:

- In response to a query, the Committee was advised that dentists across Dorset were passionate about providing dental care on the NHS and were very concerned about the challenge in meeting the local populations dentistry needs. It was also highlighted that the Government was in discussions with dentists about dental reform and the dental contracts which were not currently fit for purpose.
- The Committee was advised that the Government had recently introduced flexible commissioning which was explained to the Committee, including how the funding was provided and the challenges faced in providing a sustainable and targeted model.
- In response to a query regarding how many people locally wanted an NHS dentist and in turn, how many of those were accessing emergency care because of the lack of dental care, the Committee was advised how the data was collected through NHS dentistry and that NHS Dorset was unable to access data about levels of people accessing private dental provision.
- The Committee was advised of the plan to progress patient participation groups around NHS dentistry to ensure the patients and public's voice was heard.
- In response to a query regarding the underperformance and under investment, the Committee was advised of the ongoing work to redirect the funding including child friendly dental practices, the supervised toothbrushing schemes, stabilisation pathways, creating additional theatre space for children who required anaesthetic and work around inequalities and increasing accessibility for the homeless to access provision. The Committee was reassured that the Integrated Care Board would ensure all funding was utilised, however it was highlighted that it was early days in taking responsibility for dentistry provision.
- In response to a query regarding partnership working to improve services, the Committee was advised there were two key areas, one focusing on oral health which NHS Dorset was already working on with public health colleagues and the other was how partners could work together to attract more dentists to want to come and work in the BCP area, including the possibility of a Dorset Dentist School and other schemes to attract and retain dentists.
- In response to a query, the Committee was advised of the need to change practices of dentists and patients by increasing the length of time a patient would need between routine check ups, which would free up appointments for those with a more acute need.

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- The Committee was advised accessibility was a very complex area of work, but NHS Dorset was trying to work through some of the issues and think about how the provision can work differently and to particularly target population needs in our most deprived or unequal access of care.
- The Committee was advised that investment had been made increasing sessions in the urgent care service and the route to access that was now via the 111 helpline.
- A new model of working was highlighted, which was being trialled in Essex and Suffolk to help increase provision and if successful, then the learning could be applied across the BCP area.
- In response to a query, the Committee was advised of the good community service for dentistry in BCP for people with additional needs.
- There was some further discussion around partnership working to make BCP an attractive offer for NHS dentists although the limitations of the national contract were highlighted, and it was acknowledged that none of the proposed solutions were short term fixes.
- In response to a query about dentists having capacity to take on patients privately but not with the NHS, the Committee was advised of the complexities and were struggling for NHS provision to be financially viable and how a sustainable NHS business model was urgently needed.
- The Healthwatch Manager concluded by advising that they would feedback any changes to the Committee and if constituents needed any assistance, please direct them to Healthwatch.

RECOMMENDED that the Committee acknowledge the difficulties for dentistry as detailed in the report, in particular; access; returning to full contractual activity following the pandemic and workforce issues. Also, to acknowledge progress of the Dental Reform Strategy bringing together key stakeholders with responsibility for oral health in the region as well as public and patient voice partners. This programme is key for the future of NHS dental services and oral health improvement in the South West.

The Committee were also asked to note that improving access to primary care for people in Dorset would benefit from consideration on how the Council working in partnership can market Dorset to healthcare professionals.

37. Portfolio Holder Update

The Portfolio Holder for Health and Wellbeing provided a verbal update of what he had been doing since the last meeting, which included:

- Attending the Integrated Care Partnership Board considering the health priorities across Dorset and BCP

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- A lot of time spent on budget meetings to try and balance the gap in the budget and highlighted some of the difficulties and challenges faced
- The ongoing work for the Day Opportunities Strategy and the current consultation around that
- Will be attending the National Children's and Adult Social Services Conference at the BIC, organised by the LGA and that some of BCP Officers would be giving a presentation regarding preparing young people and families for adulthood.

The Chair advised that the presentation to the Conference would be coming to the Committee in the new year.

38. Task and Finish Group

The Chair advised the Committee of the proposed date for the task and finish group to consider data and requested nominations be emailed to him copying in Democratic Services.

39. Forward Plan

There was no discussion regarding the Forward Plan.

40. Dates of future meetings

The dates of the future meetings were noted.

The meeting ended at 8.35 pm

CHAIR