

HEALTH OVERVIEW & SCRUTINY COMMITTEE

Minutes of the meeting of the Health Overview & Scrutiny Committee held at Shire Hall, Gloucester on Tuesday 28 November 2023.

Present: Cllr Andrew Gravells MBE (Chair) Cllr Adrian Bamford
Cllr David Brown Cllr Helen Fenton
Cllr Linda Cohen Cllr Dr Collette Finnegan (Remote)
Cllr Dr David Drew (Vice-Chair) Cllr Julia Gooch
Cllr Terry Hale Cllr Gemma Madle
Cllr Paul Hodgkinson Cllr Dilys Neill
Cllr Alan Preest
Cllr Susan Williams

1. APOLOGIES

1.1 Apologies for absence were received from Cllr Stephen Hirst (Gloucestershire County Council). No substitutions were made at the meeting.

1.2 To view/listen to a recording of the meeting, please visit the Gloucestershire County Council website at the link [here](#)

2. DECLARATIONS OF INTEREST

2.1 Cllr Julia Gooch (Forest of Dean District Council) declared a non-prejudicial (personal) interest in item 6 of the agenda. A family member is a Support Officer with the Proud to Care Team at Gloucestershire County Council.

2.1 Cllr Gooch also advised of a non-prejudicial (personal) interest in relation to a family members' employment as a Biomedical Scientist with NHS Gloucestershire.

3. MINUTES

3.1 The minutes of the meeting held on 10 October 2023 were confirmed and agreed as a correct record of that meeting.

3.2 Comments raised in relation to outstanding actions from this and from earlier meetings included: -

1. Improving Access to Psychological Therapies (IAPT) Access. Acknowledging the responses to questions submitted at the HOSC meeting in July, Cllr Helen Fenton stated that the recovery rates quoted in the response reflected a much longer recovery period than had been anticipated and enquired what was being done to address this? Chief Executive of the Gloucestershire Health and Care FT agreed the recovery rates were longer than would have been liked, but that, in response to the huge increase in demand for services, investment had been made to support an intense recruitment programme, which would hopefully help to improve the position.

2. Members noted an update on an action relating to a request to the Adult Social Care and Communities Scrutiny Committee (ASCC) to consider a scrutiny item on Acute Psychiatric Inpatient Discharges. Members were informed that, at the ASCC meeting on 14 November 2023, the committee had agreed to consider the request as part of a Health and Adult Social Care Market Position Statement Report/Presentation to ASCC in July 2024. The matter to be considered as a broader 'in-house provision' topic, with officers from the in-house provision team invited to the meeting to contribute to the presentation. During the discussion, it was suggested that a site visit might be useful for members to visit one of the council's in-house locations, and this was agreed. Cllr David Drew enquired if HOSC members would be invited to attend the site visit, and it was confirmed that HOSC members would be welcome to attend. **Action by – Democratic Services**

4. PUBLIC REPRESENTATIONS

No public representations were made at this meeting.

5. PRIMARY CARE UPDATES

5.1 Presenting Officers Jo White and Helen Edwards from NHS Gloucestershire gave a detailed presentation on the delivery of GP Medical, Community Pharmacy, Optometry and Dentistry (POD) Services in Gloucestershire.

5.2 To view the presentation, please refer to the link [here](#)

5.3 In spite of the challenges of recruitment and retention, General Practice Data reported the majority of patients (59%) in Gloucestershire as satisfied with the general practice appointment they had received against 57% reported nationally.

5.4 Key information reported at the meeting included: -

5.5 General Practice Access: -

1. A total of 27% (80,000) more appointments had been offered in General Practice in Gloucestershire in September 2023 compared to September 2019.
2. Over the past 6 months, the average increase in the number of appointments offered in Gloucestershire had been 23.5% compared to the same period in 2019, an increase of over 67,000 appointments a month.
3. Gloucestershire General Practices were seeing more patients as face-to-face appointments than in the early part of 2019, (above the national average during and since the Covid-19 Pandemic).
4. Comparisons made between the six-month period during April to September 2019 and the same period in 2023 reflected an average monthly increase of over 5,500 GP face to face appointments in Gloucestershire.

5.6 Primary Dental Services

1. NHS Dental access for adults in Gloucestershire in 2021/22, (recorded as a percentage), was 29%. This was against an average of 35.5% for the South West.

2. Measures taken to improve access to dental appointments included: - seeking expressions of interest from General Dental Practitioners (GDPs) to offer out of hours urgent appointments on Saturday mornings and in early evenings; commissioning in hours urgent appointments at the start and end of existing sessions; flexible commissioning to retain primary care providers in core areas; re-directing new referrals for Intermediate Minor Oral Surgery (IMOS) Service from Secondary Care to the Community Dental Service (CDS), where clinically appropriate.
3. Plans were also in place to establish a Primary Care Dental Centre of Excellence, increasing access and enabling dental workforce development.
4. In terms of workforce activities, several appointments had been made, or in the process of being made, including a Dental Strategy Clinical Lead, two new Dental Advisor posts.
5. Plans were also underway to develop and extend local apprenticeship and trainee offers in conjunction with local providers, including the University of Gloucestershire, Gloucester College, South Gloucestershire and Stroud College.
6. Work was ongoing to promote the NHS England work experience programme in local schools and building a relationship with Local Dental Committee.
7. Dentistry had been included in the NHS ICB workforce planning campaign.
8. Work in conjunction with Gloucestershire County Council (GCC) Public Health colleagues included; the commissioning of a dedicated Oral Health Training Team; offering oral health training to staff working in residential/nursing homes and other vulnerable groups; developing a service model for enhanced dental health in care; supporting the implementation of a supervised teeth-brushing campaign for the county, and implementation of 'First Dental Steps', with training for Health Visitors.

5.7 Community Pharmacy

1. Work by the Department of Health and Social Care (DHSC) and NHS England was underway to expand Community Pharmacy Clinical Services.
2. Local innovations included integrated trainee placements; Patient Group Direction (PGD) activities; Teach and Treat Programme; and work within the PATHFINDER and Community Pharmacy Primary Care Network (PCN) to build key relationships across neighbourhood pharmacy and practice teams.

5.8 Optometry: developments undertaken as part of the Eye Health Clinical Programme had been reported to the committee previously and therefore excluded from the update.

5.9 The following questions and comments were raised at the meeting: -

1. In terms of access to appointments, a member enquired about the increase in the number of face-to-face appointments in Gloucestershire in comparison the rest of England. It was agreed this information would be a useful comparator and that a breakdown would be provided after the meeting.

Action by – NHS Gloucestershire

2. A member enquired about the activities in place to ensure children and young people had access to dental treatment, and questioned whether treatment in schools could be a preventative measure to avoid vulnerable children losing teeth. It was reported that, whilst some work was being undertaken, it would take time for the work to stabilise. It was noted that, at this present time, there was insufficient capacity to expand the work.
3. Referencing the budget underspend in dental care reported to the committee earlier in the year, it was confirmed that the underspend for the current year was lower, and that work was ongoing with dentists to increase capacity and address spending issues.
4. A member emphasised the importance of retaining community pharmacies, including work with local authorities to plan for new pharmacies in order to meet the needs of increased populations and new housing developments. The comment was noted for consideration as part of the Gloucestershire Pharmaceutical Needs Assessment process with a report back to the committee at a future meeting. **Action by – GCC Public Health Team**
5. Several additional concerns were raised about the increasing shortage of community pharmacies and the need to increase the number of new pharmacists to the county. It was noted that there was only one school of pharmacy in the South-West of England and the subsequent pressure on the system this created. The request for an update on the number of areas currently without a permanent pharmacy was noted. **Action by - NHS Gloucestershire**
6. A local member expressed concern about access to dentistry in the Forest of Dean and enquired when an improvement in the position might be anticipated. It was reported that, given the limited capacity, and pending early developments commencing in November, it may be some time before improvements were made. It was suggested that an update on the position be provided in November 2024, and this was agreed. **Action by – Democratic Services/NHS Gloucestershire**
7. Other concerns noted at the meeting included GP recruitment; Out of Hours Service; and the need for premises improvement works to GP surgeries to meet the needs of an expanding and aging population.
8. Cllr Helen Fenton referred to the responses to questions asked at the July meeting in relation to Attention Deficit Hyperactivity Disorder (ADHD) Assessment waiting times and asked that a further update be provided to the committee in 6 to 9 months times. The request was noted for inclusion in the regular update reports to the committee. **Action by – NHS Gloucestershire**
9. Referencing the increase in demand for Primary Care face to face appointments, (an increase of 27%), Cllr Fenton requested further information on the scope of research to be commissioned/underway to address the demand, with a follow-on action that the committee consider the outcomes of the research at a future meeting. The request was noted for

inclusion in the regular update reports to the committee. **Action by – NHS Gloucestershire**

10. Committee Chair, Cllr Andrew Gravells, drew members attention to Council Motion 910: Tackling the crisis in NHS Dentistry agreed at the Council meeting on 9 November 2022, (proposed and seconded by HOSC members, Cllr Linda Cohen and Cllr Paul Hodgkinson). Referencing any comments made at this meeting in connection to the Motion, Cllr Gravells suggested he relay relevant comments to the Corporate Scrutiny Committee for the committee to consider whether further work was required in the form of a Scrutiny Task and Finish Group, and this was agreed. Key concerns included children at risk of not being able to access dental treatment, resulting in tooth decay and loss of teeth, supplemented by a request for the return to offering dental treatment in schools; and considerations to improve access to dentistry/increase the number of NHS Dentists across the county. **Action by – Cllr Andrew Gravells**

The report was noted.

6. NHS GLOUCESTERSHIRE HEALTH AND CARE WORKFORCE PLAN 2023

6.1 Tracey Cox, Director of People, Culture and Engagement for NHS Gloucestershire, presented an overview of the workforce challenges faced by the health and care sector for Gloucestershire.

6.2 To view the information presented at the meeting, please refer to the agenda published on the Gloucestershire County Council website at the link [here](#).

6.3 Members attention was drawn to the NHS Long Term Workforce Plan published on 30 June 2023, outlining ambitions set out in a 15-year plan from which to address predicted workforce shortages the NHS is likely to experience if no action is taken. To view the plan, please refer to the link [here](#).

6.4 Running in parallel is the Skills for Care Plan announced in October 2023, focussing on workforce shortages within the Adult Social Care Sector, and the Integrated Care System (ICS) One Gloucestershire People Strategy, setting out proposals from which the ICS aim to attract and retain more staff to work in Gloucestershire. To view the strategy, please refer to the link [here](#).

6.5 Other initiatives referred to at the meeting included Health and Wellbeing Support for Staff: Recruitment initiatives, including international recruitment activity and engagement work with schools on considering careers in health and care.

6.6 Outlining current national and local data, members were informed that Primary Care was a particular area of challenge. In response, specific focus by the Integrated Care Board's Primary Care Training Hub aimed at supporting GP Practices and Primary Care Networks across Gloucestershire. It was noted that workforce challenges continued to be impacted by the recovery from the Covid Pandemic, low employee satisfaction and an ageing staff profile in some service

areas, including Primary Care and Social Care. A particular challenge in 2023 had been the impact of industrial action.

6.7 Questions and comments made at the meeting included:

1. Several members raised concerns about pay and high staff vacancy rates;
2. Whilst pay is considered a factor in the recruitment and retention of staff, it is not the biggest factor;
3. There is huge potential for the retention of staff resulting from access to good quality training;
4. Accommodation and housing provision to be included as considerations for retaining and attracting NHS staff to Gloucestershire;
5. It was suggested NHS officers engage with District Authorities/Housing Teams to consider what support might be available to address housing and accommodation issues for NHS staff;
6. A member requested a breakdown of the schools and students involved in the 'We Want You – WWY' Project. Targeting pupils in years 8 and 9 of 19 selected schools, the purpose of the project is to promote 'NHS One Gloucestershire' as a key employer young people from across the county might consider working for, and to increase the uptake and awareness of higher education programmes at the University of Gloucestershire. **Action by – NHS Gloucestershire**
7. Several members stressed the importance of better signposting and raising awareness with patients on where to seek treatment and in which service area in order to avoid placing increased pressures on Primary Care.

The report was noted with consensus that more evaluation work was required.

7. GLOUCESTERSHIRE INTEGRATED CARE SYSTEM (GICS) PERFORMANCE REPORT

7.1 The committee noted the Gloucestershire Integrated Care System, (ICS), Performance Report relating to the performance of services commissioned by the NHS Gloucestershire Integrated Care Board. The report included information on performance, quality and workforce. The report was taken as read at the meeting.

7.2 To view the contents of the report please refer to the link on the Gloucestershire County Council website at the link [here](#)

7.3 Key messages highlighted at the meeting included: -

1. Additional funding had been awarded to the Integrated Care Board (ICB), including £40k towards the NHS Family Care Leavers Covenant Programme,

a nationally sponsored initiative aimed at increasing the number of care experienced people employed by the NHS;

2. Other bids included funding aimed at reducing Health and Care Support Worker vacancies and funding for Mental Health Training;
3. Overall, performance targets for Gloucestershire were reported as stable in comparison to a decline in the national position;
4. Ambulance Category 2 response time performance in October was reported at 70.9 minutes (a deterioration from the September performance target of 46.7 minutes);
5. Average Ambulance Category 1 response times in October was reported at 11.0 minutes, ranging from 14.1 minutes in the Cotswolds to 7.8 minutes in the Gloucester localities; 5582 hours had been lost in handover delays during October, (an average 186 hours per day). It was noted that, since October, Category 1 and 2 performance response times had improved. Work was ongoing between the ICB and SWASFT to address current issues. Members requested an update from the NHS South-West Ambulance Service Foundation Trust in the New Year, and this was noted; **Action by – SWASFT.**
6. In September 2023, performance against the 2 week wait and 28 day Faster Diagnosis standards were missed for the first time in 2023/24. It was explained that the deterioration was a result of staffing issues and turnaround times for diagnosis tests. Recovery plans had been put in place.

7.4 Questions and comments raised at the meeting included: -

1. Responding to concerns about Category 1 and 2 ambulance response times, it was suggested that, pending an update to the committee in the New Year, a Teams meeting with a senior representative from SWASFT be arranged with lead members. **Action by NHS Gloucestershire/Democratic Services**
2. A member enquired about recent concerns regarding the standards of care at Berkeley House. Members were advised that the concerns were being addressed and that details of the outcomes from an inspection of the facility would be shared with the committee, when published. **Action by – Gloucestershire Health and Care Foundation Trust.**
3. A member referenced the demand for repeat prescriptions via the Out of Hours Service and was pleased that work was underway to support Primary Care with this issue.

The report was noted.

8. NHS GLOUCESTERSHIRE INTEGRATED CARE BOARD (ICB) REPORT

8.1 The NHS Gloucestershire Integrated Care Board, (ICB), report was taken as read at the meeting. The report included updates from Integrated Care System (ICS) Partners with responsibility for overseeing the day-to-day commissioning and provision of NHS services in Gloucestershire.

8.2 To view the contents of the report please refer to the link published on the Gloucestershire County Council website at the link [here](#).

8.3 Key messages highlighted at the meeting included: -

8.4 Members attention was drawn to the Gloucestershire Integrated Care Board Annual Assessment High-Level Summary for 2022-23 at Appendix 1 of the report. Conclusions from the report confirmed that the Gloucestershire ICB was working in compliance within its statutory duties.

8.5 The assessment demonstrated that the ICB remained in a strong position in terms of system leadership and had improved its approach to prevention and patient care. However, another outcome from the assessment was that the system was underachieving on its efficiency target, for which progress would be necessary in 2024. Progress was also required to improve dementia diagnosis rates in line with the 2023-24 operational plan.

8.6 At Appendix 2 of the report, members were asked to consider a Memorandum of Understanding, (MOU), relating to a proposed service variation to the Medical Day Unit Service, a nurse led service previously provided at Gloucestershire Royal Hospital and at Cheltenham General Hospital. In response to the Covid Pandemic, the service had been moved to Cheltenham General Hospital as a temporary service change.

8.7 The MOU proposed that the Medical Day Unit remain at Cheltenham General Hospital and that the temporary arrangement be extended for a further 6 to 9 months. The committee supported the proposal, and it was agreed to extend the temporary arrangement for a period of up to 9 months only, before moving to a permanent location in Quarter 2 of 2024-25.

8.8 Members welcomed the announcement of the opening of a new £15m Gloucestershire Community Diagnostic Centre at Quayside House, Gloucester in 2024 and the support the centre will provide to reduce the number of diagnostic appointments at Gloucestershire Royal and Cheltenham General Hospitals. Members supported a proposal from the Chair of the Committee, Cllr Andrew Gravells, that members undertake a visit to the centre in the Spring. **Action by - GHCFT/Democratic Services**

The report was noted.

9. WORK PLAN

Members noted and agreed the combined work plan for the meetings of the Health Overview and Scrutiny Committee and the Adult Social Care and Communities Scrutiny Committee.

Items suggested for inclusion on the work plan included: -

1. Update on the delivery of Maternity Services
2. Update on the Practice Plus Group Out of Hours GP Service
3. Gloucestershire Pharmaceutical Needs Assessment Update

The date of the next meeting is 11 January 2024.

Members were reminded that this meeting would be a joint meeting of the Health Overview and Scrutiny Committee and the Adult Social Care and Communities Scrutiny Committee. In addition to HOSC performance and update reports, the following items to be considered at the meeting: -

1. **Gloucestershire Health and Wellbeing Strategy Update** (incorporating actions in response to 'Gloucestershire County Council Motion 881 - Tackling Inequalities, Poverty and Deprivation' and the request for regular updates to HOSC on Health and Wellbeing Board Strategic Priorities). **Obesity and Action on Adverse Childhood Experiences (ACEs)** to form part of the presentation.
2. Review of outcomes from the Gloucestershire **Build Back Better Conference and Levelling Up Grant Reports** announced in the Autumn.
3. **Work Plan** (the combined work plan for both committees to be circulated in advance of the meeting, with an invitation to members to submit any suggestions/proposals/comments via email to jo.moore@gloucestershire.gov.uk for noting at the meeting).

The request for information on the 'general physical activity programme' (all ages) to be considered under the Gloucestershire Health and Wellbeing Strategy Update.

The request for an item on 'falls and slips prevention' to be presented as a briefing note circulated to HOSC/ASCC members in advance of the March scrutiny meetings.

Dates of future meetings: -

12 March 2024
21 May 2024
16 July 2024
15 October 2024
26 November 2024

Minutes subject to their acceptance as a correct record at the next meeting

CHAIRPERSON

Meeting concluded at Midday