

Decisions of the Health Overview and Scrutiny Committee

8 December 2022

Members Present:-

Councillor Philip Cohen (Chair)
Councillor Anne Hutton (Vice-Chair)

Councillor Caroline Stock	Councillor Giulia Innocenti
Councillor Matthew Perlberg	Councillor Shuey Gordon
Councillor Rishikesh Chakraborty	Councillor Alison Cornelius

Apologies for Absence

Councillor Zakia Zubairi

1. Minutes

The Chair announced that Item 10 (NHS Estates update) would be deferred to the next meeting as the speaker could not attend.

Cllr Cornelius noted that she had spotted some typos. The Chair asked that she send these to the Governance Officer following the meeting.

Action: Cllr Cornelius

RESOLVED that the minutes of the meeting held on 19th October 2022 were agreed as a correct record.

2. Absence of Members

Apologies were received from Cllr Zakia Zubairi, who was unwell. The Chair requested that the Governance Officer wish her well.

Action: Governance Officer

3. Declaration of Members' Interests

None.

4. Report of the Monitoring Officer

None.

5. Public Question Time (If Any)

None.

6. Members' Items (If Any)

None.

7. Minutes of the North Central Sector London Joint Health Overview and Scrutiny Committee

The Committee received the minutes of the JHOSC, 30th September 2022.

The Chair noted that there had been an interesting discussion on workforce and the difficulty in recruiting nurses.

RESOLVED that the JHOSC minutes were noted.

8. Children and Young People's Oral Health Needs Assessment

The Chair invited Dr Maeve Gill, Public Health Specialty Registrar, and Dr Emma Waters, Public Health Consultant, to present their report.

Dr Gill reported that the implementation of the forthcoming Barnet Oral Health Action Plan would be overseen by the Health and Wellbeing Board. The Committee is asked to note the Children and Young People's Oral Health Needs Assessment.

Dr Gill reported that the National Dental Epidemiology Programme Oral Health Survey 2019 estimated that just under a quarter of children under 5 have tooth decay. The HOSC had requested more information so the Public Health team is developing the needs assessment and some recommendations for Barnet. This has focused on 0-19 year olds, looked after children as a known vulnerable group, looked at the national context and at national guidance on effective preventative interventions. Barnet commissioned the Oral Health Promotion Service on 1st April 2022.

Dr Gill added that the team conducted a focus group with parents of 3-4-year-old children in a nursery setting, in a deprived Ward in the borough. Further to this some recommendations had been made.

Dr Gill reported that oral health remains a problem nationally; preventable tooth decay is the leading cause of hospital admissions for 5-9-year-olds. There is good evidence on effective interventions based on prevention.

In Barnet there has been a reduction in access to dental services since the pandemic and there is evidence of inequality by deprivation, which echoes the London-wide picture. Enhanced sampling has been undertaken in some Wards and it was found that in Burnt Oak 4/10 children experienced tooth decay. London-wide there was evidence of differences by ethnic group. Looked-after children are a known vulnerable group and pilots had been put in place to try to enhance access to dental services for looked after children. Also the community dentistry service had emphasised that children with Special Educational Needs (SEN) and children living in poverty were more at risk.

Dr Gill added that knowledge was found to be necessary but not sufficient. Parents reported knowing the key health messages but in practice not having sufficient time or not carrying

out intended actions for other reasons. Also sugar preferences of children are partly shaped by the environment, and there is national evidence about the need to focus on shaping the environment children are in. Training needs in early years, social care and foster care staff were identified.

Dr Gill reported that the pandemic had impacted on partnerships, and the new oral health provider is currently settling in.

The main recommendations could be met with the current resources, and focused on:

- developing the Barnet Oral Health Partnership to renew relationships
- implementing the co-produced Barnet Oral Health Action Plan and focusing on how to maximise the impact of the oral health promotion service
- training for health, education and social care workforces as part of the Healthy Child Programme
- Quality assuring the supervised toothbrushing pilot.
- Ensuring the toothbrushing pilot targets areas of deprivation.
- Reviewing the provision of toothbrush and toothpaste in response to cost of living pressures.
- Considering how to commission in order to improve intelligence – additional resource would be needed for this – for example gathering Ward-level data
- Targeted fluoride varnishing programmes and improving dental access for looked-after children who are placed outside London.

The Chair enquired whether the number of dental checks had improved since the end of the pandemic. Dr Gill said data could be brought back in the future when more data is available.

Dr Djuretic noted that overall dentists are short-staffed, have a huge backlog and are struggling to maintain practices which were unsustainable under NHS contracts. NHS England, which commissions community dentistry, attended JHOSC recently to discuss recovery post-pandemic. Paediatric dentistry is most affected. London Public Health Directors had asked requested additional resources, particularly for paediatric dental health care.

The Chair asked how toothbrush and toothpaste are provided. Dr Waters responded that this can be coordinated through suppliers of dental health products. Health packs were supplied prior to the pandemic via health visitors, and the team is looking at also using food banks. Cllr Stock noted that involving manufacturers worked well in the United States. Also she noted that it can be cost effective to employ a dentist to visit areas of deprivation, and visit schools, picking up problems early.

Dr Djuretic noted that NHS England would need to agree to employ a dedicated dentist to visit schools and at the moment resources were limited. Public Health Directors currently work with manufacturers of dental care products and this could be taken to the Association of Directors of Public Health to take forward at a national level.

Cllr Hutton suggested writing to the Secretary of State for Health about the concern on the shortage of dentists. Dr Djuretic noted that this could also be escalated via the JHOSC who could invite NHSE back to speak to the Committee. The Chair suggested that this be put on the JHOSC agenda.

Action: Chair

Cllr Chakraborty raised concerns about the amount of tooth decay in his Ward, West Hendon as well as Childs Hill and Burnt Oak. West Hendon appears in the report as not so income deprived and for obesity as some Wards so he wondered why, and how the team could be sure that the recommendations are applicable across the Borough if reasons are not clear in the data.

Dr Gill responded that enhanced sampling was carried out in 2019 with five Wards selected for this on the basis of deprivation. This was a small sample of 280 children and it was not possible to know how significant the data is due to how it was gathered. However nationally there is a relationship between deprivation and tooth decay. There is additionally London-wide evidence of a relationship between oral health outcomes and ethnicity.

Cllr Chakraborty commented that West Hendon was not included in the pilot for Young Brushers (Page 35 of the report). Dr Gill responded that West Hendon Ward was not excluded – initially nurseries in more deprived areas were contacted and asked to be involved in the programme and now the programme is taken forward beyond this so West Hendon Wards I included.

Cllr Chakraborty asked whether Members could be involved, working with community and faith groups to highlight the importance of toothbrushing. Dr Waters responded that this help would be well received, as well as help getting eligible nurseries involved in the scheme.

Action: Dr Waters

Cllr Gordon noted that he would be happy to help with contacting manufacturers. Dr Waters would look initially into conflicts of interest but thanked Cllr Gordon for offering his assistance. Cllr Stock offered to make contact with an individual already involved in this for more information.

Action: Dr Waters, Cllr Stock

The Chair asked whether Oral Health Champions, referred to in the report are the aspiration. Dr Gill responded that this is one of the performance indicators within the Healthy Child Programme.

Cllr Innocenti enquired about translation services given that some areas in Barnet have residents who speak little English. Dr Gill responded that this is available and would be noted in the Action Plan.

Action: Dr Gill

Cllr Hutton enquired whether the statistics would take into account the fact that anecdotally some dentists report receiving payment for NHS dental care from parents whilst offering to check their child's teeth free of charge. Dr Waters responded that the team did not have data on this but is aware that it happens in Barnet.

Cllr Innocenti enquired about waiting lists, for example could a dentist refer to another area. Dr Gill reported that there was a government announcement in November introducing a new duty on dental practices to be part of 'find my dentist' to help people to search for a dentist. Dentists must state if they are accepting new NHS patients and must do so regularly.

The Chair thanked the officers for the report and their presentation.

RESOLVED that the Committee note the Children and Young People’s Oral Health Needs Assessment, including the recommendations, and note that the forthcoming Barnet Oral Health Action Plan, will be presented to the Health and Wellbeing Board who will oversee its implementation.

9. Post Covid Services

The Chair reported that speakers were unable to attend so would be invited to the next meeting in February.

Dr Djuretic presented her slides providing information on post Covid cases up to March 2022 and care provided.

She reported that in Barnet Dr Kola Akinlabi, Clinical Lead for Post Covid Syndrome at the Royal Free London NHS Trust works collaboratively with Dr Patrick Mallia at Barnet Hospital and Dr Martin Harris in Primary Care. Dr Malia also leads a multi-disciplinary team.

Most patients with Post Covid in Barnet are between 20-65 years old, of white ethnicity and from less deprived areas, and Barnet has the highest recorded number of Post Covid cases in London. Barnet has effective referral pathways and is well known which may be part of the reason for the higher number of cases. A lot of training had been provided to help primary care clinicians to recognise the signs and symptoms of post Covid syndrome.

Cllr Chakraborty asked whether it would be worth writing to the Secretary of State for Health to ask for support for Post Covid services in Barnet. The Chair responded that some specialist services are already provided.

Dr Djuretic stated that it could be that more funding is needed. Clinicians report a 4-6 week waiting list for Post Covid services in Barnet but this is higher in many other Boroughs. The HOSC could enquire directly with clinicians when they attend a future meeting. The Governance Officer would follow up and invite clinicians to the February meeting.

Action: Governance Officer

RESOLVED that the Committee noted the verbal update and slides.

10. NHS Estates Update

The Chair reported that he and Cllr Hutton had attended the meeting of JHOSC held in November, where an item on Estates was discussed.

The Chair added that there is a local Estates Forum for each NCL Borough. Section 106 CIL money is used for Boroughs to jointly plan Primary Care Estates delivery, and Barnet has an allocation of £6million for various healthcare projects. He noted that NHS colleagues are keen to work closely with local authorities to find affordable and creative ways to bring Primary Care into housing schemes.

On the Local Estates Forum Barnet is represented by a Section 106 Planning Officer – the Chair suggested that a health representative should also attend. He would be raising this with the speaker on Estates at the next HOSC.

RESOLVED that the Committee noted the verbal update.

11. Mid-year Quality Accounts

The Chair reported that representatives from the three Trusts would attend the May meeting of the HOSC to present the end-of-year quality accounts.

The Chair asked the Committee for their comments on the mid-year quality accounts:

Royal Free London NHS Foundation Trust

The following comments were noted and would be fed back to the Trust:

- Infections overall were rising and this was a concern
- Establish a world-class dementia care service – could there be joined-up thinking with partners on this?
- Is there liaison follow-up between the Trust and community when dementia patients are discharged?
- Healthy living - Task and finish groups in Barnet to integrate pathways – what does this mean – do GPs know what the hospital is doing? Can we have more information on this – page 2.
- Cllr Cornelius A&E in May 2022 report 75% meeting targets. Fourth worst in London. What is the situation currently?
- What are ambulance waiting times at both A&E's, Barnet Hospital and the RFL?
- What number of people are catching Covid whilst in hospital, at Barnet and the RFL?

Central London Community Healthcare NHS Trust

- The mobile phones that were provided for homeless people during the pandemic was an excellent idea. Could the HOSC please have an update from the Trust Equalities Group on how mobile phones can be provided for homeless people, since Tesco has stopped providing these?
- Could the Freedom to Speak Up programme be adopted by other Trusts?

North London Hospice

- Are the recruitment issues affecting delivery of care?

RESOLVED that the comments were noted.

The Governance Officer would send the comments and queries to the organisations.

Action: Governance Officer

12. Health Overview and Scrutiny Forward Work Programme

The Chair introduced the Forward Plan. The Governance Officer would speak to the Barnet Assistant Director for Sustainability about attendance at the February meeting. Ms Zoe Garbett was already scheduled to attend to speak about NHS Sustainability.

Mr Ian Sabini would attend to speak about NHS Estates.

Cllr Hutton noted that it was proposed that young people from all five Boroughs be invited to the next JHOSC on 6th February, to speak about their experiences on mental health services. Cllr Hutton noted that she has been in contact with Barnet officers to try to arrange this.

It was noted that Dr Akinlabi had been invited to attend the February meeting to provide an update on post covid services.

13. Any Other Items that the Chairman Decides are Urgent

None.

The meeting finished at 21:10 hrs