Coventry City Council
Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 11.00 am on Wednesday, 22 January 2025

Present:

Members:	Councillor C Miks (Chair) Councillor S Agboola Councillor K Caan Councillor S Gray Councillor L Harvard Councillor G Hayre Councillor A Hopkins Councillor J Innes Councillor K Maton Councillor B Mosterman
Other Members:	Councillor K Caan, (Cabinet Member for Public Health, Sport and Wellbeing) Councillor G Hayre, (Deputy Cabinet Member for Public Health, Sport and Wellbeing)
Apologies:	Councillor M Lapsa
Employees (by Directorate)	
Law and Governance	E Jones, C Taylor
Others Present:	Dr A Brady, A Cartwright, A Dhanani and T Sacks - ICB

Public Business

32. **Declarations of Interest**

There were no Declarations of Interest.

33. **To agree the minutes of the meeting held on 11th December 2024**

The minutes of the meeting held on 11th December 2024 were agreed and signed as a true record.

There were no matters arising.

34. **Update to changes to the Prescription on Demand (POD) Service**

The Board considered a Briefing Note of the Chief Medical Officer and Head of Communications and Public Affairs, NHS Coventry & Warwickshire ICB, regarding an update to the changes to the Prescription on Demand (POD) Service.

In December 2023, after consideration and engagement, the ICB recommended decommissioning of the POD service on the grounds of lack of value for money. Deteriorating performance and operational difficulties were also noted.
The report highlighted the following:

- The POD closed on 28th March 2024 as planned and the prescription ordering responsibility for 67,000 patients was transferred to GP practices.
- 55 staff were made redundant however, the vast majority had found alternative employment. A full package of employee support was made available to support staff.
- The constant presence of management staff in the POD from December to March was successful in addressing staff concerns and providing reassurance.
- Between January and March, all patients that called the POD were coached by call handlers about the changes and directed towards alternative methods of prescription ordering.
- Patients identified as vulnerable and who felt they would have difficulty changing to the new system were identified by POD staff. The practices would then provide additional support.
- Use of the NHS App in Coventry and Warwickshire tripled over the first 3 months of 2024.
- £250,000 was distributed on a Memorandum of Understanding basis to affected GP practices to provide support in repatriating prescription ordering from POD and to make the necessary communication with patients.
- The ICB Medicines Optimisations team ran 7 training sessions with more than 120 practice staff covering prescription ordering, medicines wastage and use of online methods for ordering.
- An assurance exercise in March confirmed 97% of practices that responded were confident they were able to safely take over prescription ordering. 6 practices were offered additional support in making the transition.
- The number of calls to the POD phone line after closure continued to be monitored.
- No formal complaints had been received by the ICB via the contactus inbox, the complaints inbox or reports of patients being unable to order their prescriptions.
- Affected GP practices initially noted increased call volumes and workload through the first few weeks of April however, this did not become unmanageable.
- The Medicines Optimisation Team developed a repeat prescribing toolkit for primary care use to improve repeat prescribing processes, patient care and reduce medicines waste in primary care.

The Cabinet Member for Public Health, Sport and Wellbeing Councillor Caan, welcomed the positive steps and support put in place to enable the successful transition from POD to the dispensing of prescriptions at GP practices.

Members of the Scrutiny Board, having considered the verbal report asked questions and received information from officers on the following matters:

- Partnership working to engage residents to access and use the NHS App for repeat ordering

- Overall usage of the NHS app rising from 53% to 67% of the population (not Coventry specific) including booking secondary care
- The NHS App being a national App which the ICB had no involvement in it's design
- Feedback on the NHS App was provided at national level through the App store and by the national team however, local engagement would be useful
- The impact of medicines optimisation was monitored by the ICB for cost savings, quality, volume of prescriptions and green work

The Board requested:

- The number of patients using the NHS App month by month including a demographic breakdown if available.

- How to raise awareness of the NHS App including linking with the Council's Digital Inclusion Team.

- Data relating to impact of POD's closure, volume of prescriptions and cost savings to be circulated to the Board when available.

RESOLVED that the Health and Social Care Scrutiny Board (5):

1) Note the contents of the report about the closure of the NHS POD Service.

35. **Access to Dentistry**

The Board considered a report and of the Chief Integration Officer and Head of Public Affairs of the Coventry & Warwickshire ICB regarding access to dentistry.

Dental Services were provided by a range of providers and in a number of settings to meet the dental needs of the population, including:

- Primary Care Dental Services
- Community Dental Services
- Secondary Care Dental Services

The Cabinet Member for Public Health, Sport and Wellbeing expressed concerns regarding access to dentistry, in particular, early intervention in the deprived and ethnic communities in the city, why dentistry could not be provided within GP hubs, access to urgent dental care, promotion of NHS dentistry and how patients, especially those from deprived areas, knew which dentists were taking on new clients and what strategies could be employed to address these concerns.

Members of the Scrutiny Board, having considered the verbal report asked questions and received information from officers on the following matters:

- Dentists were not required to provide NHS services. They could provide private services, NHS only, or both. Should an NHS dentist wish to become private, they were only required to provide a short notice period to the ICB
- Dental fees differed greatly between NHS and private dentists

- Dentists were not required to inform the ICB if they decided to close their register to new patients.
- £2m had recently been reallocated for NHS dentistry from Warwickshire dental practices which had chosen not to deliver NHS services. This additional recurrent funding would be allocated to the 6 main areas of deprivation in the city which would enable NHS dentists to see more patients and undertake more treatments with existing patients
- Many newly qualified dentists were moving abroad to practice.
- The ICB were working closely with Coventry University Dental School on the training and development of hygienists and dental nurses
- Complaints about NHS dentists were reviewed individually by clinical specialists and the learning taken back to the practice
- The current national NHS dentistry budget only covered 55% of the population, meaning there would always be some patients who could not access NHS dentistry.
- Patients were travelling abroad for cosmetic and non-cosmetic dentistry
- Within the deprived areas of Coventry, there was a significant amount of tooth decay
- Dental records did not follow the patient like GP records. Dentists started from scratch with x-rays of the patient each time.
- Patients could register with any NHS dentist if their register was open; the practice was not required to be near to their home
- The ICB was aware of the number of NHS dentists.
- All dentists were required to be qualified and regulated
- Public Health officers worked with health visitors, school nurses and communities eg migrant communities, to promote dental health, particularly for children
- Customer satisfaction regarding NHS dentistry was captured via the GP annual survey and via the Office of National Statistics monthly survey
- Public Health officers working with colleagues on promotion of NHS dentistry

The Board requested:

- Officer liaison with the dental public health consultant at regional level regarding access to NHS dentistry.

- The NHS 10-year plan consultation to be circulated to the Board.

The Cabinet Member for Public Health, Sport and Wellbeing stressed the importance of ensuring promotion and awareness of NHS dentistry in the most deprived areas and communities in the city through partnership working.

RESOLVED that the Health and Social Care Scrutiny Board (5):

1) **Note the contents of the report.**

2) **Public Health to work collaboratively with the ICB on the following:**
    - **dental promotion**
    - **promotion of dental hygiene in school settings**
    - **appointment availability across the city**

- **dental availability and awareness in areas of inequality and deprivation across the city.**

36. **Work Programme and Outstanding Issues**

The Health and Social Care Scrutiny Board (5) noted the work programme.

RESOLVED that the Health and Social Care Scrutiny Board (5):

1) **Notes the Work Programme 2024-2025.**

2) **Receives an update on CV Life to a future meeting.**

37. **Any other items of Public Business**

There were no other items of public business.

(Meeting closed at 1.00 pm)