# 1 Procedural Business

- 1.1 (a) Substitutions. There were none.
  - (b) Declarations of Interest. There were none.
  - (c) Exclusion of the Press & Public. Resolved that the press & public be not excluded from the meeting

#### 2 Minutes

2.1 Resolved – that the minutes of the 24 February meeting be agreed as an accurate record.

#### 3 Chair's Comms

# 4 Public Questions

4.1 There were none.

## 5 Member Questions

5.1 There were none

## 6 Dental Services and Covid

- 6.1 This item was presented by Mark Ridgeway, NHS England Dental Commissioner.
- 6.2 Mr Ridgeway explained that NHSE commissions NHS primary and acute dental services. Where dental practices are commissioned to undertake NHS dentistry, they do so via a contract for a specified level of activity. This is negotiated with each individual practice.
- 6.3 The Covid crisis impacted access to dental services, with practices closed between March and June 2020. Practices were still able to offer general and analgesic advice and to prescribe ant-biotics in this period. Urgent dental care hubs were established, as were services for the most clinically vulnerable.
- 6.4 Practices re-opened in June 2020, but with significantly reduced capacity due to additional hygiene requirements (particularly with regard to aerosol

- procedures) and the difficulty of sourcing some specialist PPE. In consequence, practices focused on urgent needs.
- 6.5 NHSE has offered additional funding for Sussex dental practices to undertake additional NHS hours, but take-up of this offer has been relatively low, with practices citing safety and staffing issues.
- 6.6 Not all practices who undertake NHS dentistry have met their activity requirements in the past year due to the impact of closures and reduced capacity. However, practices have been paid the full amount they were entitled to under their NHS contracts in order to help them remain financially sustainable. Practices are required to meet at least 60% of their contracted NHS activity this year.
- 6.7 In response to a question from Cllr Deane on in-reach into care homes, Mr Ridgway responded that there had been some in-reach for urgent needs, although only limited services could be delivered in this way.
- 6.8 In answer to a question from the Chair on community dental services, Mr Ridgeway confirmed that Sussex Community NHS Foundation Trust holds the contract for Brighton & Hove.
- 6.9 In response to a question from Fran McCabe on when services could be expected to return to normal, Mr Ridgeway responded that this was dependent on national guidance. Currently, the local requirement is that practices deliver at least 60% of their contracted NHS capacity this year.
- 6.10 In answer to a question from Fran McCabe on how people can get help with urgent dental problems if they cannot contact their dental practice, Mr Ridgeway stated that all dental practices should be contactable and able to offer advice. NHSE will follow-up if they become aware that any practice is not meeting its contractual responsibilities to NHS patients.
- 6.11 In response to a question from Cllr McNair on recruitment in Brighton & Hove, Mr Ridgeway told members that there should not be any particular recruitment problems associated with the city.
- 6.12 In answer to a question from the Chair on whether the local dentist/patient ratio was improving, Mr Ridgeway responded that it was, in part due to the launch of a new dental service in Moulescoomb. Mr Ridgeway also agreed to follow-up on a query from the Chair as to whether the new service currently has any dentists operating.
- 6.13 The Chair noted that there was a perception that practices are prioritising their private work over NHS dentistry. Mr Ridgeway responded that NHSE has no means of auditing private dental work as this is not within its jurisdiction, but that it is working with practices to ensure that they meet their current targets for NHS activity.
- 6.14 Fran McCabe noted that Healthwatch are getting a number of reports of people being told that there are no NHS appointments available for them, but that private appointments would be available. Mr Ridgeway responded that this is something that NHSE are looking into. There are financial penalties if practices fail to meet their NHS activity targets (i.e. currently 60% of their contracted NHS activity).

6.15 The Chair suggested that the HOSC should schedule an update report within the next 12 months and should look specifically at community and children's dentistry in the next 6 months.

# 7 Covid Update

- 7.1 This item was presented by Rob Persey, BHCC Executive Director, Health & Adult Social Care; and by Ash Scarff, Deputy Managing Director, Brighton & Hove CCG. Mr Persey and Mr Scarff outlined the current local position in terms of Covid infections, vaccination take-up etc.
- 7.2 In response to a question from Cllr McNair on why city take-up of second jabs was relatively low, Mr Scarff responded that this is partly due to demographic factors: the city's atypically young population profile means that fewer people are currently eligible for second jabs than the national average, hence the data shows lower percentage take-up.
- 7.3 The Chair noted that the fact that Brighton & Hove is a university city has been cited as a reason for high local infection rates. However, if this is the explanation, why are rates in Brighton & Hove higher than in some other university cities? Mr Persey responded that there are other factors in play also, including the generally young demographic of Brighton & Hove (even if university students are excluded) and the fact that the city has a large hospitality sector.
- 7.4 In response to a question from Fan McCabe on why vaccination rates in the 80+ age group were not yet at 100%, Mr Persey responded that this is something health and care partners are closely examining. However, some of the shortfall may simply be due to personal choice.
- 7.5 Cllr McNair asked what level local infection rates would have to reach before people were asked not to visit. Mr Persey replied that this would be dependent on national guidance, but that the likely trigger would be a dramatic impact on local NHS services.
- 7.6 In response to a question from the Chair about winter planning, Mr Scarff confirmed that planning for winter is ongoing and that a report on system winter plans will be referred to the HOSC in autumn 2020.
- 7.7 In response to a question from the Chair on long Covid, Mr Scarff told members that Sussex Community NHS Foundation Trust has established a Post-Covid Assessment Service, and an enhanced local GP service will be launched. National data suggests that we may have to do even more in coming months.
- 7.8 In answer to a query from Cllr McNair about volunteers, Mr Scarff told the committee that volunteer numbers are currently robust. However, there is an awareness that it is essentially the same people volunteering all the time and that eventually fatigue may set in.