
REPORT TO:	HOUSING AND COMMUNITY SERVICES COMMITTEE	AGENDA ITEM: 6
DATE OF MEETING:	5TH FEBRUARY 2009	CATEGORY: DELEGATED
REPORT FROM:	DIRECTOR OF CORPORATE SERVICES	OPEN PARAGRAPH NO: N/A
MEMBERS' CONTACT POINT:	JAYNE JONES (5800)	DOC: s:\cent_serv\committee reports\overview and scrutiny\10 dec 2008\review of the provision of nhs denistry and out of hours services in the district.doc REF: PJJ/PDS
SUBJECT:	REVIEW OF THE PROVISION OF NHS DENTISTRY AND OUT OF HOURS SERVICES IN THE DISTRICT	
WARD(S) AFFECTED:	ALL	TERMS OF REFERENCE: G

1.0 Recommendations

- 1.1 That the Committee receives the report of the Overview and Scrutiny Committee following its recent review of the provision of NHS Dentistry and Out of Hours Services.

2.0 Purpose of Report

- 2.1 To consider the Overview and Scrutiny Committee review of NHS Dentistry and Out of Hours Services.

3.0 Detail

Introduction

- 3.1 Julia Jessell, Head of Urgent Care and Keith Mann, Head of Dental and Eye Care Commissioning at the Derbyshire County Primary Care Trust (PCT) were invited to give presentations on the general role of the PCT, Out of Hours Service and NHS Dentistry.
- 3.2 A list of questions had been circulated prior to the meeting and these were referred to during their presentations.
- 3.3 Julia Jessell gave a general overview on the role of the PCT which is summarised as follows:

Derbyshire County PCT – overview

- Strategic Goals

The PCT has six Strategic Goals.

- Tackling the major causes of health inequalities
 - Improving local stroke services
 - Commissioning a primary care mental health service
 - Improving mental health services for older people
 - Ensuring a co-ordinated end of life service that respects patient's wishes
 - Commissioning more support for carers
- Three main functions
 - Engaging with local population to improve health and reduce health inequalities.
 - Commissioning services to meet the health needs of the local population
 - Directly providing some community services
 - PCT will spend just over £1 billion on healthcare in Derbyshire in 2008/09
 - Include £121m on services we provide from
 - 12 community hospitals (inc St Oswalds)
 - 25 health centres (inc Repton etc)
 - Health visitors, district nurses and other community staff
 - Includes £134m on primary care (GP, dentists etc)
 - Includes £513m on other NHS services eg secondary care
 - Includes £34m on operational costs inc salaries and estates
 - Includes £
 - Expenditure by condition:

	Total Spend £m	Spend per Head of Population £
Cancer and Tumours	56	83.75
Mental Health Disorders	87	130.15
Problems of Learning Disability	24	36.25
Problems of Circulation	94	140.17
Problems of Musculo-skeletal System	77	115.02
Problems due to Trauma and Injuries	48	71.48
Conditions of Neonates	8	11.25
Healthy Individuals	9	13.81

Health in South Derbyshire (Health Profile 2008)

- Generally better than national average health
- There are health inequalities within South Derbyshire by gender, level of deprivation and ethnicity. For example Church Gresley, Woodville, Newhall and Stanton are relatively deprived; and men in the most deprived group have 3 years shorter life expectancy than those in the least deprived group.
- Above average life expectancy for males and females.
- Below average levels of smoking, drug misuse and alcohol-related admissions
- Smoking still kills at average of 120 people/year in South Derbyshire

- Below average deaths linked to smoking and deaths from heart disease, stroke and cancer
- Slightly above average for diabetes
- Below average for falls
- Below average for obesity

Out of Hours Services

- 3.4 Julia Jessell outlined the services currently available at the Swadlincote Health Centre, attached at Appendix B (amended version, with telephone numbers)
- 3.5 It was also noted that the PCT was in negotiation with the Queens Hospital in Burton on Trent, with a view to the Health Centre providing additional services. It had already been agreed that a facility for breast screening would be provided from December 2008 and it was hoped to accommodate an ambulance stand-by service in the near future. It was intended to undertake a leaflet drop to approximately 10,000 properties in the local area, to publicise the Centre and its services.
- 3.6 A number of issues were raised about the new Health Centre, including its appearance; the car parking facilities; the cost of the replacement entrance doorway; the future vision for the Centre and the provision of mental health care for primary school children. The “15 year rule” of health service buildings being “fit for purpose” was also discussed.
- 3.7 It was generally accepted that Out of Hours services had recently improved with the opening of the Swadlincote Urgent Care Centre.
- 3.8 The Committee made suggestions, which were accepted, to assist the PCT to improve communication with residents as follows:
- Link on the Council's website to enable residents to find local GP's and those providing out of hours services
<http://www.nhs.uk/servicedirector/Pages/ServiceSearch.aspx?ServiceType=GP>
 - The use of the helpdesk at the District-wide Area Forums
 - “Tenants Extra” housing publication
 - Council Offices’ reception area

It was also suggested that the Health Centre’s contact telephone number be included on the leaflets.

NHS Dental Provision

- 3.9 Keith Mann responded at the meeting to the various questions that had been circulated (attached at Appendix B) and provided responses to additional questions during the course of the meeting.
- 3.10 It was noted that at the new Woodville Surgery, patients were being seen within a 5 week timescale and an additional dentist had been appointed that day. It was intended to improve the opportunity for patients to see a dentist within 24 hours, where emergency treatment was required. With regard to the Swadlincote Health Centre, current staff shortages were being addressed. It was hoped to appoint a therapist who could provide advice on the improvement of oral health, which was one of the PCT’s main priorities.

- 3.11 It was suggested by the Committee and agreed at the time that the Council would be provided with an updated list of NHS dental practices, which could then be sent to all Councillors for information and publicised via the Council's website. (List attached at Appendix C)
<http://www.nhs.uk/servicedirectories/Pages/ServiceSearch.aspx?ServiceType=Dentist>
- 3.12 Other issues discussed were the provision of additional graduate training practices and the redirection of PCT funding away from underperforming dental practices.
- 3.13 The Committee appreciated the difficulties for recruiting and retaining NHS dentists, however, it was accepted that concerns remained as to the small number of NHS dentists that were accepting new patients.

4.0 Proposals

- 4.1 Both the representatives from the PCT and the Committee agreed that the main issue arising from this review was the lack of awareness and general publicity of services for residents.
- 4.2 The Committee agreed that it would use the Council's web site and other communication channels to assist with the publicity wherever possible and practical.
- 4.3 It was also agreed to include an article in the Council's 'Team Brief', to raise awareness for our staff on the NHS Dentist aspects of the Review. The article was included in the 17th December issue of Team Brief, particularly publicising the three NHS dentists in South Derbyshire that are accepting new patients.

5.0 Financial Implications

- 5.1 There are no financial implications arising from this report.

6.0 Corporate Implications

- 6.1 The review links to our priorities of Safer and Healthier Communities and Stronger in the Region.

7.0 Community Implications

- 7.1 This review is in direct response to concerns raised by our residents. We will endeavour to work with the PCT to help highlight the services available.

8.0 Conclusions

- 8.1 Following the presentations the Committee considered they were now more aware of the services currently available and had a better understanding of the aims and plans of the PCT
- 8.2 The main conclusions drawn from this review are:
- The lack of publicity and access to information for residents on NHS services, and
 - the lack of current NHS dentists in the District who are accepting new patients.

9.0 Background Papers

9.1 None.