# **Health and Wellbeing Board**

# Wednesday 24 July 2024

#### PRESENT:

Councillor Aspinall, in the Chair. Councillor Ms Watkin, Vice Chair. Councillors Dann (Substitute for Councillor Laing), and P.Nicholson.

Co-opted Representatives: Tony Gravett (Healthwatch), Ruth Harrell (Director of Public Health), Mark Collings (Strategic Commissioning Manager - Substitute for Gary Walbridge), Nicola Jones (NHS Devon ICB – Substitute for Chris Morley), Amanda Nash (UHP) – Substitute for Mark Hackett), Temilola Salimon (Service Director CYPFS – Substitute for David Haley), and Geoff Baines (Livewell SW – Substitute for Michelle Thomas).

Apologies for absence: Councillor Laing, Gary Walbridge (Interim Strategic Director for Adults, Health and Communities), Chris Morley (NHS Devon ICB), Mark Hackett (UHP), David Haley (Director of Children's Services), Matt Garrett (Service Director, Community Connections), Michelle Thomas (Livewell SW), Robert Fern (UoP), and Rob Smith (Improving Lives, Plymouth).

Also in attendance: Vivek Soni (Deputy Chief Pharmacist, UHP), Kandarp Thakkar (Chief Pharmacist, UHP), Kamal Patel (Consultant, Public Health), Julie Frier (Consultant, Public Health), Dave Schwartz (Consultant, Public Health), Matt Bell (VCSE Rep.), Karen Button (NHS Devon ICB), Terri Beer (Councillor), and Elliot Wearne-Gould (Democratic Advisor).

The meeting started at 2.03 pm and finished at 4.25 pm.

Note: At a future meeting, the committee will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.

#### 1. **Declarations of Interest**

There were no declarations of interest made by Board members.

### 2. Chairs Urgent Business

The Chair, Councillor Mary Aspinall, welcomed new Board members and substitutes to the meeting, and congratulated Councillor Kathy Watkin on her appointment to Vice-Chair.

#### 3. **Minutes**

The Board <u>agreed</u> the minutes of 07 March 2024 as a correct record.

# 4. University Hospitals Plymouth (UHP) Pharmacy Update

(Councillor Nicholson arrived for the start of this item)

Vivek Soni (Deputy Chief Pharmacist, UHP) and Kandarp Thakkar (Chief Pharmacist, UHP) presented the UHP Pharmacy Update to the Board and discussed:

- a) The change of outpatient pharmacy service at University Hospitals Plymouth (UHP) from Lloyds to Boots pharmacy;
- b) Challenges faced by the previous provider in meeting the changing needs of patients and the organisation;
- c) The limited capacity of the pharmacy's previous location, and challenges meeting demand;
- d) The decision to re-tender the pharmacy contract upon expiry of the existing contract:
- e) Benefits of the newly commissioned service including a new, larger location, ability to collect non-urgent prescriptions from community Boots pharmacies, a courier service, an electronic encrypted prescription system, an enhanced retail offering, and expanded hours of opening including a Saturday service;
- f) Mitigating measures to ensure accessibility including priority parking spaces at the front door, disabled parking within the multi-storey car park, a mobility shuttle, more seating and a larger waiting-area, prescription tracking software and displays, and a text messaging service;
- g) Recognition of a challenging start to the new contract, and a poor resulting experience for customers;
- h) Issues at the beginning of the new contract had included the changeover of some staff, unfulfilled prescriptions, critical IT and network failures at the Trust, medication stock shortages, issues with the text service, and issues with effectively communicating new systems of practise to medical professionals and the public;
- i) Cooperative work conducted between Boots and the Trust to overcome these start-up challenges had resulted in improved signage, the re-design of the waiting area, additional staff appointments, temporary re-allocation of staff expertise, the addition of extra community stores for collection, and improvements to the electronic prescription service;
- j) Current performance of the outpatient pharmacy was good, and the majority of teething problems had been resolved. Prescription fulfilment had increased, waiting times had reduced, and no patient complaints had been received in June 2024;

k) A patient experience survey would be launched at the end of the first quarter.

In response to questions, the Board discussed:

- National medication shortages and supply chain fragility requiring informed forward planning;
- m) Hours of opening would be reviewed based on demand;
- n) Healthwatch patient experience feedback had improved, with no complaints received since April 2024;
- o) Recognition of challenges faced by community pharmacy across the country;
- p) Around 50% of prescriptions were collected close to home. There was no evidence that community pharmacies received an unworkable burden from the devolution of these prescriptions and there were systems in place to track and monitor demand:
- q) A positive trend in pharmacy performance and patient experience since the commencement of the new contract.

#### The Committee agreed:

- To request further information from NHS Devon to clarify if community pharmacy performance was shared with the UHP Outpatient Pharmacy, to monitor the impact of devolving prescriptions;
- 2. To thank Vivek Soni and Kandarp Thakkar for their attendance today and for the work undertaken to improve UHP Outpatient Pharmacy performance;
- 3. To note the report.

### 5. NHS Devon Update

Nicola Jones (NHS Devon ICB) delivered the NHS Devon ICB Update to the Board, and discussed:

- a) Changes to Key Officer Posts including the retirement of Dr Nigel Acheson as Chief Medical Officer (NHS Devon ICB) and upcoming appointment of Dr Peter Collins to the role;
- b) Performance of the III service;
- c) Covid-19, including a new vaccination campaign;
- d) The commencement of a Devon Perinatal Pelvic Health Service;
- e) The extension of the Falls Management Exercise Programme;

- f) Re-procurement of Hospital Discharge Support Service;
- g) Continuing multi-agency efforts to improve access to dentistry, and upcoming revalidation of the waiting list;
- h) General Practice availability and accessibility;
- i) UHP's One Plan to improve urgent and emergency care;
- j) Digital inclusion and accessibility;
- k) The UHP Newsletter and communications.

### The Board agreed to:

- I. Request that NHS Devon provide further clarification regarding the recommencement of NHS Dentistry check-ups post Covid;
- 2. Request further information regarding the NHS Devon financial position;
- 3. Request further information regarding admissions to ED due to challenges accessing GP services;
- 4. Note the report.
- 6. Annual Health Protection Assurance Report for the Health and Wellbeing Boards of Cornwall and the Isles of Scilly Councils, Devon County Council, Plymouth City Council, and Torbay Council 2022-23

Julie Frier (Consultant, Public Health) delivered the DCIOS Annual Health Protection and Assurance Report 2022-23 to the board and discussed:

- a) Good practise and learning opportunities from the Covid Pandemic, including community outreach work, screening and immunisation programmes and infection prevention control activity;
- b) The benefits of the Devon Joint Forward Plan containing a section on Health Protection, which was not standard across other Integrated Care Systems;
- c) Ongoing assurance activities including preparation for winter planning;
- d) The role of the Community Infection Management Service, and its ongoing benefits post Covid;
- e) Vaccination and immunisation uptake promotion programmes.

In response to questions, the Board discussed:

- f) Targeted vaccination campaigns, outreach and support within Care Homes and vulnerable groups such as Looked After Children;
- g) The value and effectiveness of preventative action and the Public Health Agenda in minimising long term health conditions and acuity of illness.

The Board <u>agreed</u> to note the report.

# 7. Plymouth Drugs Strategy Partnership Annual Report 2024

Kamal Patel (Consultant, Public Health) delivered the Plymouth Drugs Strategy Partnership Annual Report 2024 to the Board, and discussed:

- a) Common risk factors and lived experiences of those engaging with drug and alcohol services:
- b) The role of the national drugs strategy 'From Harm to Hope';
- c) Funding and programme delivery through the Plymouth Complex Lives Alliance;
- d) The interconnected benefits and cost efficiency of drug and alcohol services for homelessness, employment, crime, drug supply, antisocial behaviour, equalities, and other factors;
- e) Unique drug use patterns and demographics for Plymouth;
- f) A significant increase in the demand for these services during 2023;
- g) Drug related deaths and national comparators;
- h) Workforce training and recruitment, including the introduction of the Rapid Access to Prescribing Team and Overdose Response Team;
- i) The optimisation of Opiate substitution doses;
- j) Increased capacity enabled through grant funding, which was now expected to remain stable following three yearly incremental increases;
- k) The development of the Local Drug Information System to facilitate reporting and intelligence dissemination of contaminated / dangerously higher potency drug batches;
- I) The establishment of a partnership with Bath University to rapidly test drug samples;
- m) The improvement of Naloxone distribution around the city, which was vital in the event of drug overdoses;

- n) The development of the 'Avoidable Deaths Approach' to facilitate learning and improvements from drug and alcohol related deaths;
- o) Improvements to the referral process for drug and alcohol services.

In response to questions, the Board discussed:

- p) Links between city-wide work to reduce inequalities, the 'trauma informed approach', mental health support, early support and intervention, and prevention of drug use;
- q) Generational drug use and Plymouth's demographics;
- r) Grant funding for Drug and Alcohol services, and risks regarding long-term sustainability;

The Board agreed to note the report.

# 8. Vaping Working Group, Update

(Councillor Terri Beer joined the meeting at this time as a guest (non-voting), having referred the motion 'Impact of Vaping on Young People' to City Council on 18 September 2023.)

Dave Schwartz (Consultant, Public Health) delivered the Vaping Working Group Update Report to the Board and discussed:

- a) The origins of the Vaping Working Group, and concerns around the increasing prevalence of vaping amongst Children and Young People (CYP);
- b) The attendance and contribution of a wide range of City partners, which was held on 23 May 2024;
- c) Recognition of significant and varied partnership activity and support for vaping prevention and responses;
- d) A survey conducted of secondary schools in Plymouth had been received following the Vaping Working Group, with feedback valuing the advice and support provided around vaping issues;
- e) Confirmation in the Kings Speech, that the Tobacco and Vapes Bill would be an early priority for the new Government, regulating the flavours, packaging, displaying and content of vaping products. Additional funding would also be provided to enforcement agencies to tackle underage sales and enhance online age verification.

In response to questions, the Board discussed:

f) The environmental impact of disposable vapes;

- g) Partnership engagement with all secondary schools in Plymouth, which would be ongoing;
- h) The importance of a holistic approach to CYP vaping and support across the city;
- i) Additional funding which had enabled the provision of two full time youth workers in the city, primarily focussed on CYP vaping;
- j) The importance of early education, prevention messaging and support around vaping and substances controlled by the Misuse of Drugs Act;
- k) The unknown long-term effects of vaping and need for further studies and monitoring.

### The Board <u>agreed</u> to:

- I. Note the outcomes of the Vaping Working Group;
- 2. Endorse the actions as set out in appendix E of the report;
- 3. Support ongoing city-wide partnership working to prevent uptake, minimise harm, and respond supportively to the issue of CYP vaping;
- 4. Record their appreciation and thanks for the work of the Vaping Working Group and all partners who had contributed.

### 9. Tracking Decisions

The Board <u>agreed</u> to note the progress of the Tracking Decisions Log.

### 10. Work Programme

The Board <u>agreed</u> to add the following items to the work programme:

- I. Oral Health Improvement Update;
- 2. Health watch Annual Report.