



**HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE
17 MAY 2023**

PRESENT: COUNCILLOR C S MACEY (CHAIRMAN)

Lincolnshire County Council

Councillors L Wootten (Vice-Chairman), M G Allan, T J N Smith, R Wootten and Mrs M J Overton MBE.

Lincolnshire District Councils

Councillors C Watt (City of Lincoln Council).

Healthwatch Lincolnshire

Liz Ball.

Also in attendance

Katrina Cope (Senior Democratic Services Officer) and Simon Evans (Health Scrutiny Officer).

Councillor S P Roe, (Executive Support Councillor Children's Services, Community Safety and Procurement) attended the meeting as an observer.

Sarah Connery (Chief Executive, Lincolnshire Partnership NHS Foundation Trust), Simon Hallion (Managing Director Family Health), Christopher Higgins (Director of Operations, Lincolnshire Partnership NHS Foundation Trust), Suganthi Joachim (Divisional Clinical Director - Family Health, United Lincolnshire Hospitals NHS Trust), Andrew Morgan (Chief Executive, United Lincolnshire Hospitals NHS Trust), Anna Richards (Associate Director of Communications and Engagement) and Andy Rix (Chief Operating Officer, NHS Lincolnshire Integrated Care Board).

County Councillor C Matthews (Executive Support Councillor NHS Liaison, Community Engagement, Registration and Coroners) attended the meeting as an observer, via Teams.

63 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors R J Cleaver, S R Parkin and E Wood (City of Lincoln Council).

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It was reported that, under Regulation 13 of the Local Government (Committee and Political Groups) Regulations 1990, Councillor Mrs M J Overton MBE, had been appointed as a replacement member for Councillor R J Cleaver, for this meeting only.

The Committee noted that Councillor C Watt (City of Lincoln Council) had replaced Councillor E Wood (City of Lincoln Council) for this meeting only.

An apology for absence was also received from Councillor S Woolley (Executive Councillor NHS Liaison, Community Engagement, Registration and Coroners).

64 DECLARATIONS OF MEMBERS' INTEREST

None were declared.

65 MINUTES OF THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE MEETING
HELD ON 19 APRIL 2023

RESOLVED

That the minutes of the Health Scrutiny Committee for Lincolnshire meeting held on 19 April 2023 be agreed and signed by the Chairman as a correct record.

66 CHAIRMAN'S ANNOUNCEMENTS

Further to the announcements circulated with the agenda, the Chairman brought to the Committee's attention the supplementary announcements circulated on 16 May 2023.

The supplementary announcements referred to: Membership of the Committee; Government Support for General Practice; Better Health-Every Mind Matters Campaign; Announcement of new Community Diagnostic Centres; and Covid-19 Vaccinations – End of Offer of First and Second Doses.

During consideration of this item, some members expressed concern relating to the government support totalling £240 million to enable GP practices in England to improve their technology. It was felt that the most important resource required currently was for more staff to be recruited into the NHS, as this would then ensure that services could be provided.

RESOLVED

That the supplementary announcements circulated on 16 May 2023 and the Chairman's announcements as detailed on page 9 of the report pack be noted.

67 UPDATE ON PILGRIM HOSPITAL, BOSTON, PAEDIATRIC SERVICE

Consideration was given to a report from United Lincolnshire Hospitals NHS Trust, which advised the Committee of a planned twelve-week consultation on the future of the paediatric service at Pilgrim Hospital, Boston, which had since August 2018 been operating as a twelve-hour Paediatric Assessment Unit.

The Chairman invited the following representatives from United Lincolnshire Hospitals NHS Trust to present the item remotely, to the Committee: Andrew Morgan, Chief Executive, Simon Hallion, Managing Director of Family Health, Anna Richards, Associate Director of Communications and Dr Suganthi Joachim, Divisional Clinical Director Family Health.

Attached at Appendix A to the report was a copy of a presentation relating to the Pilgrim Hospital Paediatric Service for the Committee's consideration.

It was noted that since 2018, the paediatric model of care had developed into one that enabled almost every child and young person to receive all their care at Pilgrim Hospital, Boston, without the need to transfer to other hospitals. It was noted further that now a stabilised system was in place, it was hoped to make the current model a permanent arrangement, which would then provide certainty around the long-term future of the service, help with recruitment and retention, and ensure on-going support for Boston-area children and their families. Appendix A provided the Committee with a summary of the current service model.

In conclusion, the Committee was advised that subject to approval by the ULHT Board in June 2023, it was proposed to commence a twelve-week consultation from June to August 2023 to make the current service model a permanent arrangement.

During discussion, the following comments were noted:

- It was reported that vacancy levels within the Trust had come down from 15% (pre-Covid-19) to a current level of 6%. The Committee noted that the Trust now employed a thousand more staff and was now in a better position. The Trust was now performing differently, making services more attractive and providing treatment in a more modern way, and that was demonstrated in the proposed service model for paediatric services at Pilgrim Hospital, Boston;
- Members welcomed the continued recruitment success. It was noted that retention in the NHS was variable and that vacancy rates did vary in certain areas, but the overall vacancy rate for the Trust was 6%. Representatives from ULHT agreed to provide breakdown information relating to current vacancy levels and their location to the Health Scrutiny Officer for circulation to members of the Committee after the meeting;
- Confirmation was given that Pilgrim Hospital, Boston saw all children that attended the hospital. It was noted that if a child was found to be critically unwell and required intensive care, they would be transferred to Nottingham;
- Confirmation was given that all paediatric consultants were on NHS contracts;
- The Committee was advised that the number of harms incidents had not increased;
- Assistance from Healthwatch was welcomed by ULHT in promoting the consultation;

- The Committee noted that the use of private ambulances had ceased two years previously. Currently, if a child or young person needed to be transferred to another hospital, they would be taken by the East Midlands Ambulance Service (EMAS); and
- That feedback information received from families that had led to improvements or services changes would be shared with the Committee, at a future meeting.

The Chairman on behalf of the Committee extended his thanks to the presenters.

RESOLVED

1. That the progress made in developing a proposed future service model for the paediatric service at Pilgrim Hospital, Boston be noted.
2. That the launch of a twelve-week consultation seeking the views of the public on a proposal to make the current service model a permanent arrangement be supported.
3. That the Committee be invited to contribute to the consultation as a respondent once the consultation is launched in June 2023 and to receive an update on the process.

68 HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE - WORK PROGRAMME

The Chairman invited Simon Evans, Health Scrutiny Officer, to present the report which invited the Committee to consider and comment on its work programme, as detailed on pages 46 to 48 of the report pack.

Attached at Appendix A to the report was a schedule of items covered by the Committee since the beginning of the current Council term, May 2021, as well as details of planned work for the coming months.

During discussion, the following suggestions were put forward for additions to the Committee's work programme:

- An update on Urgent Treatment Centres (UTCs), including Grantham and District Hospital UTC; and
- The inclusion of mental health rehabilitation and to the lack of available beds in the community. The Committee noted that this request could be included in the item 'Outcomes of Consultation on the Community Rehabilitation Services for Adults' scheduled to be considered by the Committee at its 19 July 2023 meeting.

RESOLVED

That the work programme presented on pages 46 to 48 of the report pack be agreed, subject to the inclusion of the suggestions put forward by the Committee.

69 MANTHORPE UNIT, GRANTHAM AND DISTRICT HOSPITAL - EXTENDED TEMPORARY CLOSURE FOR ENHANCED DEMENTIA HOME TREATMENT PILOT

The Committee considered a report from Lincolnshire Partnership NHS Foundation Trust (LPFT), which asked the Committee to note the work being done to increase staffing across Lincolnshire's adult mental health wards and future timelines for reopening the Hartsholme Centre in Lincoln.

The Chairman invited the following representatives to present the item remotely, to the Committee: Sarah Connery, Chief Executive, LPFT, Chris Higgins, Director of Operations, LPFT and Andy Rix, NHS Lincolnshire Integrated Care Board.

Detailed at Appendix A to the report was a timeline for the temporary closure to date; Appendix B provided details of the engagement undertaken to date; and Appendix C provided patient admission data relating to wards for the Committee to consider.

The Committee was advised that due to the positive outcomes seen from the introduction of a dementia home treatment service, it was the Trust's intention to further enhance the service model, and to continue the pilot for a further twelve-month period to fully evaluate the service.

It was noted that an independent review would also be completed by the East Midlands Clinical Senate before formulating proposals for the future care delivery of urgent and acute dementia care, including the future of Manthorpe Ward and any continuation of the dementia home treatment model.

It was noted further that engagement with patients, carers, staff, and organisations that supported people with dementia would also continue to ensure that there were no unintended consequences from the continued temporary closure and that this information would then help inform the next steps.

During consideration thereon, the following points were noted:

- Clarification was given to the use of the word 'temporary'. It was highlighted that any change remained temporary until it had been fully tested and reviewed, and would then be subject to consultation before becoming permanent. Paragraph three on page 27 of the report highlighted several themes highlighted by engagement activity. It was highlighted that since the temporary close of the Manthorpe ward, there had been no complaints or concerns expressed about the impact of the temporary closure. Due to previous associations with the use of word 'temporary' and its association with other service provision, a request was made for the NHS to look at using better terminology;
- Reassurance was given that consideration would be given to whether increasing demand in the elderly population would be met if the Manthorpe Ward closed and whether this would be included as part of the formal decision making. It was

highlighted that the work on the transformation of Dementia Services in Lincolnshire review would ensure that there was robust support going forward and that in-patient provision would be available if needed;

- Clarification was provided that the transformation of Dementia Services in Lincolnshire was a system wide piece of work and that details of the study would be made available in due course; and that evaluation from the pilot would also feed into the review work;
- Some concern was expressed regarding the rurality of Lincolnshire and to the poor transport links. The Committee was advised that if the family of an inpatient were struggling to visit, their circumstances would be looked at on a case-by-case basis to see what help could be provided to assist them with visiting. It was also noted that the use of modern technology such as Teams or Zoom in certain circumstances would help families keep in contact with their loved one. There was recognition however, that this was not a replacement for a face-to-face visit. It was highlighted that questions relating to transport would be included as part of the pilot;
- Confirmation was given that there had been no evidence as a result of the pilot, of patients being admitted to residential care homes;
- That the extension of the pilot would enable further information to be gathered, which would then help formulate what provision would be needed going forward;
- The Committee was advised that the home treatment service was provided between the hours of 8.00am and 10.00pm, seven days a week, and that each patient had access to extended crisis support if required;
- That the dementia home treatment case load was between 18 and 25 people; and that the case load was working and was closely monitored;
- The Committee was advised that the purpose of the Dementia Transformation Board was as a system to identify any gaps in the dementia pathway and to put in support where gaps had been highlighted;
- It was reported that expanding the services in the pilot would not have an impact on the resources needed for the Langworth Ward; and
- It was noted that once clear recommendations had been received from the engagement, it was hoped that evaluation by the East Midlands Clinical Senate would commence from July 2023 onwards.

The Chairman on behalf of the Committee extended his thanks to the presenters.

RESOLVED

1. That the report on the continued pilot of dementia home treatment and the extended closure of the Manthorpe Ward at Grantham and District Hospital be noted.
2. That taking into account the continuous public engagement and involvement carried out on the service to date, that the continued engagement approach for the period of the extended pilot to help inform next steps be endorsed.

3. That the involvement of the East Midlands Clinical Senate in evaluating the pilot be welcomed and that once available, a copy of the East Midlands Clinical Senate report be presented to a future meeting of the Committee.

70 TEMPORARY CLOSURE OF LINCOLNSHIRE'S MALE PSYCHIATRIC INTENSIVE CARE UNIT (PICU) - THE HARTSHOLME CENTRE

Consideration was given to a report from Lincolnshire Partnership Foundation NHS Trust, which provided the Committee with an update on the work to date to increase staffing across Lincolnshire's adult mental health wards, and to consider the future projected timelines for reopening the Male Psychiatric Intensive Care Unit (PICU) – The Hartsholme Centre, Lincoln.

The Chairman invited the following presenters to remotely, present the item to the Committee: Sarah Connery, Chief Executive, LPFT, Chris Higgins, Director of Operations, LPFT and Andy Rix, NHS Lincolnshire Integrated Care Board.

The Committee were reminded that in October 2022, the Trust had taken a difficult decision to temporarily close the Hartsholme Centre in Lincoln, because of ongoing significant staffing pressures, which had affected the Trust's ability to safely staff adult mental health wards across the County. The temporary closure of the PICU had been identified as the preferred option as it was the smallest of Lincolnshire's inpatients wards, and quite often did not reach its maximum capacity of ten beds.

It was reported that whilst the Trust had seen a positive increase in the number of staff available and a reduction in staff turnover and sickness, it was felt that the Trust would not be able to reopen the PICU currently. The Committee was advised that it was proposed that a phased re-opening of the service was proposed, in-line with a targeted recruitment process taking place over the next few months. Details of the targeted recruitment was shown on page 41 of the report pack.

It was noted that the Trust had agreed with commissioners that four PICU beds would be re-opened for November 2023, this would allow prior to admission of patients, time for the team to undertake a training needs analysis and provide a robust induction programme for new staff. The unit would then fully open in March 2024.

In conclusion, the Committee was advised that the Trust was committed to providing a male PICU service in Lincolnshire, and that following engagement with staff, patients, and stakeholders the Trust was also now exploring options available to extend the scope to include a female provision in the future.

During consideration thereon, the following points were noted:

- It was confirmed that the Trust was confident with the action it was taking and that positions would be filled. It was highlighted that a stock take of the situation would be undertaken in September on whether to re-open four beds in November;
- Some support was extended to the confidence expressed regarding recruitment and to the excellent engagement undertaken so far;
- Some concern was expressed for the need to ensure that enough beds were available if required;
- In relation to a female unit, the Committee noted that the Trust was working with others to develop all options. It was noted that PICU gender numbers fluctuated; and that any proposal needed to be flexible to meet the demand;
- It was reported that out of County placements were made in Sussex and that the length of stay varied and was dependent on the individual's needs;
- Confirmation was given that exit interviews were offered to staff in the Trust, and that new initiatives were and had been introduced to encourage staff to remain with the Trust; and
- The Committee noted that the PICU was not a secure unit, as it was not a forensic unit, but it offered a high level of support and security to patients

The Chairman on behalf of the Committee extended his thanks to the presenters.

RESOLVED

1. That the work to date to increase staffing across Lincolnshire's adult mental health wards and future projected timelines for reopening the Hartsholme Centre, Lincoln be supported.
2. That the Lincolnshire Partnership NHS Foundation Trust be requested to advise the Committee of any further developments, including any changes to the proposed timelines.

The meeting closed at 12.43 pm