		<b>THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b>	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

## INITIAL RESPONSE OF THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE ON THE LINCOLNSHIRE SUSTAINABILITY AND TRANSFORMATION PLAN

### CONTEXT FOR THE COMMITTEE'S INITIAL RESPONSE

#### Role of the Health Scrutiny Committee for Lincolnshire

The Health Scrutiny Committee would like to emphasise its role reviewing and scrutinising the NHS, in terms of the health services available to and accessed by the Lincolnshire population. The Committee can seek to influence the decision making within the NHS, but decisions on the provision of NHS services rest with the local NHS, NHS England, and ultimately the Secretary of State for Health.

### CHANGES TO SERVICE PROVISION

#### Accident and Emergency and Urgent Care Centres

The Health Scrutiny Committee notes that the STP refers to a proposal for five urgent care centres<sup>1</sup> in Lincolnshire 'alongside proactive care services, which will divert 244,063 A&E attendances by 2021 (equivalent to 235 per day)'. The STP also states an aspiration that urgent care centres will deliver a two hour target for treating patients. The Health Scrutiny Committee would like to explore and seek clarification of the definition of an urgent care centre, together with the definition of an A&E department. Any proposals to change the nature of services currently provided would constitute a substantial variation in the provision of services and the Committee would reserve its right to respond to this proposal as a statutory consultee. The Health Scrutiny Committee has previously considered the 'temporary' overnight closure of Grantham Accident and Emergency Department, and referred this closure to the Secretary of State for Health. The Committee's position remains that it would like to see Accident and Emergency Services restored at Grantham Hospital to the way they operated prior to 17 August 2016, when the 'temporary' closure began.

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<sup>1</sup> Pages 10, 19, 21 and 60 of the Lincolnshire Sustainability and Transformation Plan

## Maternity Services

The Royal College of Obstetrics and Gynaecology is cited in the STP as *suggesting* that at least 6,000 births per year are required on a single urban site for clinical safety<sup>2</sup>. With 7,000 births per annum to Lincolnshire mothers, of which 5,500 are taking place at Lincoln County Hospital or Pilgrim Hospital, Boston, the STP draws attention to staff not getting the right level of clinical experience with more demanding rotas presenting challenges for recruitment. The STP also refers to national shortages of paediatricians and paediatric nurses. The Committee notes that three options are proposed for maternity services.<sup>3</sup> The Committee's preference at this initial stage is for the continuation of consultant-led obstetric services at both the Lincoln County Hospital and Pilgrim Hospital sites. The Committee has received details on the numbers of births to Lincolnshire mothers at Lincoln County Hospital and Pilgrim Hospital, as well as at neighbouring hospitals and believes this information will be crucial to the Committee's future consideration of this topic.

## Travelling to Access Services

Page 103 of the STP refers to travel times and modes of transport. Average travel times by car of 10-21 minutes for five hospital sites are cited, and with average travel times of between 38-77 minutes cited for public transport. The Committee would like the travel time assumptions to be reconsidered, as there are parts of Lincolnshire, which are poorly served by public transport and average travel times will not reflect the difficult journeys which some residents will face in trying to access services. The Committee notes that the STP's 'Transport Enabler Group' will be considering these issues, and would like travel times to be given a high priority in a rural county such as Lincolnshire.

The Committee also notes the intentions within the STP for appropriate services to be provided as locally as possible, with patients and families only travelling to access specialist services. However, the public transport infrastructure in Lincolnshire is something that would need to be considered as part of any developments.

The Committee would like consideration to be given to the balance between increased specialisation and the provision of services locally; increased specialisation may mean the discontinuation of services in certain localities, which further makes access to services difficult.

## Workforce

A key element of the STP is the proposal for changes to the overall workforce. The Health Scrutiny Committee has sought clarification on the planned staffing reductions, which equate to 549 full time equivalent posts. Whilst the Committee has been advised that there are already vacancies of around 500 posts, there will need to be emphasis on ensuring the recruitment and training of staff to ensure the appropriate roles are filled, which include new roles such as associate nurses.

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<sup>2</sup> Page 36 of the Lincolnshire Sustainability and Transformation Plan

<sup>3</sup> Page 84 of the Lincolnshire Sustainability and Transformation Plan

Initiatives to recruit and retain staff are supported by the Committee, such as the *Attraction Strategy*, which is being taken forward by the Lincolnshire Workforce Advisory Board.

### Promoting Self Care and Prevention

Many of the proposals in the STP such as the developments that promote self-care and develop prevention services neighbourhood teams, and measures to improve preventative health care are welcome. The Committee would support initiatives to educate the public on using simple available remedies for minor ailments and simple injuries, so that NHS services are not used unnecessarily.

### Community Pharmacies

Encouraging patients to use community pharmacies for advice and the treatment of minor ailments, instead of using GP appointments or attending A&E, is strongly supported. However, the Health Scrutiny Committee is aware that the Government's changes to the funding of community pharmacies as a result of *Community Pharmacy in 2016/17 and Beyond* could lead to Lincolnshire losing a number of community pharmacies. This is a concern and could undermine efforts to encourage communities to use pharmacies as their first point of contact for most minor ailments.

### Consultation

As stated above, the Health Scrutiny Committee will be responding to any consultation on service reconfigurations, which is a key part of its remit. The Committee would like to see all consultation options supported by a robust evidence base and clearly referenced to the sustainability criteria of quality, accessibility, deliverability and affordability. The Committee believes that the views of the residents of Lincolnshire are of paramount importance in influencing the future direction of health care provision in the county and call on all local NHS organisations to conduct a full and meaningful consultation with local residents. The Committee also urges local NHS organisations to fully consider and act upon the views which emerge from the public consultation.

## **CHANGES TO PUBLIC ATTITUDES**

The Health Scrutiny Committee strongly supports the NHS, but acknowledges that many members of the public use the wrong NHS services or access those services unnecessarily. There needs to be a campaign which encourages the public to use the NHS only as required.

### Promoting the NHS in Lincolnshire

The Health Scrutiny Committee supports patient choice and acknowledges that for many Lincolnshire residents their preferred and nearest acute hospital is outside the county. For example, most residents in the south of the county look to Peterborough City Hospital, while many in the Louth and surrounding area look to Diana Princess of Wales Hospital in Grimsby. This geographical preference is likely to continue for

many residents. However, there are many patients whose nearest acute hospital is in Lincolnshire who currently prefer to travel outside the county for their elective care. The Committee would like to stress the importance of promoting the quality of services provided at the Lincolnshire acute hospitals. The Committee notes that the STP refers to a financial impact of £12 million, if more patients were to use the County's hospitals instead of going out of county.<sup>4</sup> The Committee will be seeking clarification whether this sum represents an improvement in the income of United Lincolnshire Hospitals NHS Trust, rather than an overall saving to the Lincolnshire health and care system.

## **FINANCE**

### Revenue Funding

The Health Scrutiny Committee notes that there would be a deficit of £182 million by 2020/21, if nothing changes<sup>5</sup>. The Health Scrutiny Committee accepts that this level of deficit is not sustainable and on several occasions the Committee was assured that the STP was not solely financially driven, but affordability was one of the four criteria used to evaluate services. The Health Scrutiny Committee will be seeking further assurance from the NHS on the financial elements of the STP. The financial impact of seasonal demands on health services also remains a concern for the Committee.

The level of funding for all public services in Lincolnshire, including health services, remains a concern, and the Committee would support any activity to ensure more resources were provided to improve services in Lincolnshire.

### Capital Expenditure

A sum of £205 million is required to support the 'critical infrastructure changes to support clinical redesign', and the STP states that access to capital funding is critical to the delivery of this redesign<sup>6</sup>. The STP also acknowledges<sup>7</sup> that funding is limited and that 'other sources of capital including third party developers, Public Private Partnership (project Phoenix), County Council funding will be explored'. The Committee was advised that the requirement for £205 million is a modest sum, in the context of what other STP areas are seeking and the level of NHS revenue funding in the county. The power of the foundation trusts to borrow funds was cited as an additional source of capital. However, NHS England's statement that funding for capital investment is 'tight over the next few years'<sup>8</sup> remains a concern for the Committee. Further details of how the capital funding is going to be secured would be welcome, together with further details on the specific projects<sup>9</sup>.

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<sup>4</sup> Page 74 of the Lincolnshire Sustainability and Transformation Plan

<sup>5</sup> Page 25 of the Lincolnshire Sustainability and Transformation Plan

<sup>6</sup> Page 27 of the Lincolnshire Sustainability and Transformation Plan

<sup>7</sup> Page 85 of the Lincolnshire Sustainability and Transformation Plan

<sup>8</sup> Paragraph 13 of NHS England Board Paper 15 December 2016 (Item 6) "Sustainability and Transformation Plans"

<sup>9</sup> Pages 83-84 of Lincolnshire Sustainability and Transformation Plan detail capital projects.

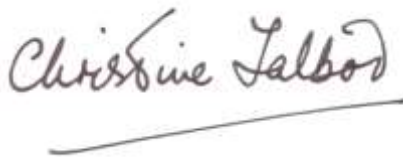
## **OUT OF COUNTY SERVICES AND NEIGHBOURING STPs**

As stated above, a significant number of Lincolnshire residents look to hospitals outside the county, as their nearest and preferred acute hospital. The Committee will be seeking to gauge the impact of neighbouring STPs on Lincolnshire residents. One example of this is the Louth and the surrounding area, where any loss of services at Diana Princess of Wales Hospital in Grimsby would have a detrimental effect on residents, as a result of the Humber, Vale and Coast STP. The Committee will be seeking to respond to the appropriate consultations on changes to services, which derive from neighbouring STPs.

## **CONCLUSION**

In accordance with the decision of the County Council on 16 December 2016, the Health Scrutiny Committee for Lincolnshire cannot support the Lincolnshire STP in its current form. However, the Committee supports the position that the County Council is prepared to work with all local NHS organisations to encourage them to adhere to and act upon the views, which emerge from the public consultation. The Committee believes that the case for change has been partially demonstrated within the STP, but the Committee reserves its right to consider and respond to proposals for substantial change as part of forthcoming consultations, where the Committee's focus will be on the impact of any service changes on residents throughout Lincolnshire.

The Health Scrutiny Committee for Lincolnshire in particular would wish to highlight its role as a statutory consultee in accordance with the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 in relation to substantial variations or substantial developments in health services and will be responding to consultations on changes to services from May 2017 onwards.

A handwritten signature in cursive script that reads "Christine Talbot". The signature is written in dark ink and is positioned above a horizontal line that serves as a separator.

**Councillor Mrs Christine Talbot**  
**Chairman of the Health Scrutiny Committee for Lincolnshire**

18 January 2017

### Note on the Health Scrutiny Committee for Lincolnshire

Lincolnshire County Council has delegated its health scrutiny functions, as set out in section 244 of the National Health Act 2006 and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, to the Health Scrutiny Committee for Lincolnshire.

There are 16 members of the Health Scrutiny Committee for Lincolnshire. Eight of these are Lincolnshire County Councillors. Seven are Lincolnshire District Councillors, representing each of the seven district council areas in Lincolnshire. One member of the Committee represents the Lincolnshire Local Involvement Network.