

Agenda Item 4

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
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

Report to	Health Scrutiny Committee for Lincolnshire
Date:	17 October 2018
Subject:	Chairman's Announcements

1. Northern Lincolnshire and Goole NHS Foundation Trust – Care Quality Commission Inspection

On 12 September 2018, the Care Quality Commission (CQC) published its inspection report on Northern Lincolnshire and Goole NHS Foundation Trust (NLAG), which manages Diana Princess of Wales Hospital, Grimsby, and Scunthorpe General Hospital, as well as Goole and District Hospital. The hospitals in Grimsby and Scunthorpe are used by a significant number of patients in Lincolnshire, in particular the Lincolnshire East CCG area.

This CQC report outlines in detail the findings of the inspection team which visited the Trust in spring this year. The full report is available at: <https://www.cqc.org.uk/provider/RJL>

NLAG's overall rating has improved from 'inadequate' to 'requires improvement' and the Trust has been rated as 'safe' across all its services. The rating in the CQC's 'well-led' domain remains as 'inadequate'. The CQC has decided to keep the Trust in Quality Special Measures which the Trust believes is the right thing to do as it means access to extra resources whether that is people, specialist expertise or extra funds.

Scunthorpe General Hospital has improved its rating from 'inadequate' to 'requires improvement' and Diana Princess of Wales Hospital stays at 'requires improvement'.

The CQC report highlights improvements in surgery and staff morale, as well as areas where more improvement is required, such as staffing levels; and the length of waiting lists. NLAG has stated that is pleased with the improvements and it plans to become a Trust rated 'good' across the board.

2. Lincolnshire Community Health Services NHS Trust – Care Quality Commission Inspection

On 27 September 2018, the Care Quality Commission (CQC) published its inspection report on Lincolnshire Community Health Services NHS Trust (LCHS). The CQC has rated the Trust ‘outstanding’. The rating follows visits from inspectors in June and July of this year, who undertook the new-style ‘Well Led’ inspection and further core service inspections for adult community services, children and young people’s services, community inpatient services and urgent care services.

The full report is available on the CQC’s website:

<https://www.cqc.org.uk/provider/RY5>

LCHS has stated that its teams were able to demonstrate numerous examples of outstanding practice embedded into their care delivery and these are set out in the report. The inspection report also outlines a small number of areas where LCHS can make improvements and we will be addressing these without delay.

The following table provides a summary of our ratings.

Ratings for community health services

	Safe	Effective	Caring	Responsive	Well-led	Overall
Community health services for adults	Good ↑ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018
Community health services for children and young people	Good ↑ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018	Good ↑ Sept 2018	Good ↑ Sept 2018	Good ↑ Sept 2018
Community health inpatient services	Good ↑ Sept 2018	Good →↔ Sept 2018	Outstanding ↑ Sept 2018	Outstanding ↑ Sept 2018	Outstanding ↑ Sept 2018	Outstanding ↑ Sept 2018
Community end of life care	Good Dec 2014	Good Dec 2014	Good Dec 2014	Good Dec 2014	Good Dec 2014	Good Dec 2014
Urgent care	Good →↔ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018	Outstanding ↑ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018
GP out of hours services	Good ↑ Sept 2018	Good Nov 2017	Good Nov 2017	Good Nov 2017	Good Nov 2017	Good Nov 2017
Overall*	Good ↑ Sept 2018	Good →↔ Sept 2018	Good →↔ Sept 2018	Outstanding ↑ Sept 2018	Outstanding ↑ Sept 2018	Outstanding ↑ Sept 2018

*Overall ratings for community health services are from combining ratings for services. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

3. Non-Emergency Patient Transport – Monthly Performance

The latest available performance by Thames Ambulance Service Ltd, the provider of non-emergency patient transport services against the contractual key performance indicators is set out in Appendix A to these announcements.

4. Grantham and District Hospital Developments

Planned Orthopaedic Operations

Since mid-September, United Lincolnshire Hospitals NHS Trust (ULHT) has not been running planned orthopaedic lists on Sunday at Grantham and District Hospital. ULHT has stated that these appointments were not being taken up on Sundays and as such were not needed, but the situation would be kept under constant review.

ULHT has also stated that recent changes at Grantham have seen a significant increase in the amount of theatre lists that it is delivering which is resulting in many more patients having their operation than previously and ULHT's plans for Grantham are to expand even further how many elective operations the Trust is able to undertake there. On 28 September the ULHT Board received an update on the Trauma and Orthopaedic Trial, which showed that prior to the implementation of the trial on 20 August, nine patients per week received their operations at Grantham. In the first four weeks of the trial since 20 August between 21 and 33 patients received planned orthopaedic operations at Grantham. The Board paper also identified capacity in the theatres and wards to increase the number of operations further.

Cardiology

The Trust is currently experiencing some workforce challenges in relation to Grantham cardiology and is working to address these. There are still cardiologists at Grantham and District Hospital and the care for patients with cardiac problems continues.

5. Routine GP Appointments - Evenings and Weekends

With effect from 1 October 2018, routine bookable GP appointments are available at evenings and weekends across Lincolnshire. These have been implemented as part of the initiatives in NHS England's *General Practice Forward View* document. These appointments represent an extension of the usual GP services and these routine booked appointments are for patients registered with a local GP practice. In the first instance patients should seek these extended hour appointments via their own GP practice.

For urgent matters at evenings and weekends, patients will continue to access the GP Out of Hours Services via NHS 111.

Lincolnshire East CCG Area

Appointments will be available at one of three hubs in the Lincolnshire East CCG area: Boston, Ingoldmells and Louth.

Lincolnshire West CCG Area

Patients will need to check with their own practice when the evening and weekend appointments are available as this may differ slightly between practices.

South Lincolnshire CCG Area

Appointments will be available at one of four hubs in the South Lincolnshire CCG area: Bourne, Market Deeping, Spalding and Stamford.

South West Lincolnshire CCG Area

Appointments will be available at one of two hub in the South West Lincolnshire CCG area: Grantham and Sleaford.

6. Healthwatch Lincolnshire Annual General Meeting – Report by Vice Chairman

On 6 September 2018, the Vice Chairman, Councillor Chris Brewis, attended the Healthwatch Lincolnshire Annual General Meeting in Stamford. The Vice Chairman's report is set out below: -

Introduction

The Chairman, John Bains, opened his remarks by saying that after re-tendering, the Healthwatch grant from Lincolnshire County Council had been secured for the next six years, and sincere thanks were offered, together with applause from those present. There had been much encouraging improvements in involvement of volunteers in Healthwatch activities.

Imelda Redmond, CBE, National Director of Healthwatch England, gave the address. What will strike a chord with us is her comment that Healthwatch occasionally have to tread a very fine line between 'what is best for the public' and 'public perception of what could be construed as a service loss'.

Surveys had been undertaken and the principal areas of public concern were: (i) appointments at GP surgeries, and (ii) waiting times both at, and for appointments, at accident and emergency departments.

Healthwatch Role

Healthwatch have an advantage in that they can look 'across the board' from a 'user' perspective, rather than from a particular, individual service perspective. Responses did come through, and Healthwatch remained interactive with most relevant public and voluntary organisations.

In their first five years Healthwatch Lincolnshire had engaged with over 69,000 people, and had 'signposted' over 6,000 people in an 'appropriate' direction.

Mental Health

It was also considered that poor access to mental health services in general was a nation-wide concern. Mental Health remains a huge issue – no two sets of circumstances are alike, and most do not 'fit' into convenient 'boxes'. Over the next ten years there needed to be more focus on young person's mental health issues, as the corresponding advantages of early intervention were enormous.

Local Authority Partnerships

There had been improvements across England in commissioning and partnership building. Local authorities, both commissioners and elected members, had in many areas improved, with a particular mention of the strengthening of specific charity involvement. A Government Green Paper on the *Future Funding of Adult Social Care* was due to be published. This caused concern, since it was simply neither appropriate nor proper to treat social care and health care as separate issues. There clearly needed to be more 'joined up thinking' to the obvious advantage of service users. With the issue of local authorities either entering or bearing close to bankruptcy, this meant that 'jam' was needed today, and not for ever 'tomorrow'.

Long term plans were often in danger of being 'compromised', by the Government needing responses within weeks rather than months, a position which was just simply 'not on'.

Missed NHS Appointments

Missed appointments were a problem – texting reminders might be a good nationwide initiative. The cost of missed appointments was at least £6,000,000 per annum. The appropriate use of other personnel in pharmacies and elsewhere had not yet been adequately 'got across' to people.

Demographic Challenges

Lincolnshire Observatory data of the increasing age profile of the population meant that 85+ year olds would double in coming years. There was also a problem, as we know only too well, of ageing health professionals. There was a huge problem of impending retirements coming 'down the line', which we have known about for over ten years. Does the Government have their 'fingers crossed' that some sort of 'wonder solution' will appear miraculously?

There remained a very complex picture of clinical and lifestyle priorities which needed to be addressed.

Other Points Raised

- Triage nurses were proving excellent, in 'steering' people in appropriate directions.
- Dermatology services needed some urgent attention.
- Parish Councils might be encouraged to publicise opportunities for their residents.
- A public Board meeting would be held on 19 October.
- Accounts were agreed, and some outside work had been done to increase income.

I felt the meeting was well worth attending, and anyone wanting further information, please get in touch.