



**HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE
15 MARCH 2023**

PRESENT: COUNCILLOR C S MACEY (CHAIRMAN)

Lincolnshire County Council

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

Lincolnshire District Councils

Councillors J Loffhagen (City of Lincoln Council), Mrs S Harrison (East Lindsey District Council), P Robins (South Kesteven District Council), Mrs A White (West Lindsey District Council), S Woodliffe (Boston Borough Council) and T Brand (North Kesteven District Council).

Healthwatch Lincolnshire

Dean Odell.

Also in attendance

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

The following representatives joined the meeting remotely, via Teams:

Saumya Hebbar (Associate Director of People, Lincolnshire Integrated Care System), Ceri Lennon (Senior Responsible Officer for the People Board), Clair Raybould (Director for System Delivery, Lincolnshire Integrated Care Board) and Wendy Cundy (Primary Care Workforce Lead, NHS Lincolnshire).

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

47 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Liz Ball (Healthwatch Lincolnshire), Councillors K Chalmers (Boston Borough Council), Mrs L Hagues (North Kesteven District Council), S R Parkin, G P Scalese (South Holland District Council) and Dr M E Thompson.

It was noted that Councillors A Brand (North Kesteven District Council), S Woodliffe (Boston Borough Council) and Dean Odell (Healthwatch Lincolnshire) had replaced respectively

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Councillors Mrs L Hagues (North Kesteven District Council), (K Chalmers (Boston Borough Council) and Liz Ball (Healthwatch Lincolnshire) for this meeting only.

The Committee noted further that an apology for absence had also been received from Councillor Mrs S Woolley (Executive Councillor NHS Liaison, Community Engagement, Registration and Coroners).

48 DECLARATIONS OF MEMBERS' INTEREST

No declarations of members' interest were received at this stage of the proceedings.

49 MINUTES OF THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE MEETING HELD ON 15 FEBRUARY 2023

RESOLVED

That the minutes of the Health Scrutiny Committee for Lincolnshire meeting held on 15 February 2023 be agreed and signed by the Chairman as a correct record.

50 CHAIRMAN'S ANNOUNCEMENTS

Further to the announcements circulated with the agenda, the Chairman brought to the Committee's attention the supplementary announcements circulated on 14 March 2023.

The supplementary announcements referred to: the Pre-Election Period for Elections on 4 May 2023; information requested at previous meetings concerning United Lincolnshire Hospitals use of the Independent Sector and Lincolnshire's Second Diagnostic Centre. The Committee was advised that information regarding the latter two topics would be circulated once it had been made available; and the temporary closure of Hartsholme Centre – Male Psychiatric Intensive Care Unit – Engagement Feedback, it was noted that there was an intention for Lincolnshire Partnership Foundation Trust to attend the 17 May 2023 meeting to update the Committee.

RESOLVED

That the supplementary announcements circulated on 14 March 2023 and the Chairman's announcements as detailed on pages 13 to 16 of the report pack be noted.

51 URGENT AND EMERGENCY CARE UPDATE

Consideration was given to a report from the NHS Lincolnshire Integrated Care Board, (ICB) which updated the Committee on the overall arrangements for emergency and urgent care.

The Chairman invited Clair Raybould, Director for System Delivery, NHS Lincolnshire Integrated Care Board, to remotely present the item to the Committee.

In guiding the Committee through the report reference was made to:

- The Lincolnshire Winter Plan 2022/23, details of the key ambitions of the plan were outlined on page 18 of the report pack; system coordination, it was reported that a national initiative had introduced a uniformed approach to system coordination and this key development had gone live on 1 December 2022. The Committee noted that the Lincolnshire had seen its busiest winter ever, as a result of the number of Covid-19, Influenza, Strep A, Noro Virus, Scarlet Fever cases, and ongoing industrial action;
- The Director extended her thanks to all health and care partners across Lincolnshire, and members of the public for all their support;
- Pre-Hospital Care - This included virtual wards, urgent community response, Urgent Treatment Centres (UTCS), and the Lincoln Mental Health Urgent Assessment Centre. Reference was also made to the Stamford minor injury unit (MIU) provided by North West Anglia NHS Foundation Trust (NWAFT). The Committee noted that due to the clear national criteria that UTCs needed to meet, as detailed in paragraph 4.3 of the report, the minor injury unit at Stamford was unable to be classified as a UTC. It was noted further that the Integrated Care Board was working closely with NWAFT regarding this matter, to ensure that local needs of the population were met;
- Ambulance handovers – It was highlighted that there had been significant improvement across the system in over 60 minute delays since January 2023, which had resulted in ambulance crews being released to respond to other patients in need. Page 24 of the report pack provided details of the improvement initiatives delivered by the system as a whole, which included implementation of ‘Breaking the Cycle’, and improvements within the discharge and flow pathways;
- The launch of ‘Breaking the Cycle 2’ (early in December 2022) and the impact of the initiative on flow within hospital. Other improvements were listed on page 25 of the report;
- The National Recovery Plan and Local Response – It was noted that on 30 January 2023, the NHS had published a Delivery Plan for recovering urgent and emergency care services over the next two years which would improve both patients waiting times and patient experience. Key areas that would be contributing to the required improvements and two ambitions of the plan were show on page 26 of the report.

In conclusion, it was reported that a considerable amount of work and progress had been achieved and that this winter had demonstrated that by working collectively with a clinical risk-based focus, ambitions were being realised to deliver a recovery plan for Lincolnshire which had transformed and improved safety and experience across urgent and emergency care services for the people of Lincolnshire. There was, however, recognition that there was still more to be done.

During consideration of this item, the following comments were noted:

- That data was available relating to the flow of patients through a UTC. It was highlighted actions were taken based on the data received;

- That more still needed to be done to make the general public aware of the pathways available to them to access primary care;
- That 29% of patients were not being seen within the four hours. Page 27 highlighted that Lincolnshire had achieved 71.18% of patients being seen within four hours. The Committee noted that the recovery plan's two ambitions as stated on page 26 of the report were being monitored. It was noted further that the ambition to treat and discharge or admit 76% of patients was a new target from 1 April 2023, which recognised the recovery that was required on the current 95% target which was in place. It was highlighted that discharge data was available and could be shared with members of the Committee;
- The legacy of Covid-19 and that its impact would take a couple of years to resolve. It was noted that a copy of the plan, once published would be made available to members of the Committee;
- Confirmation was given that the 111 service was monitored and audited, and that Lincolnshire also had its Clinical Assessment Service, which helped residents understand pathways into primary care;
- The Committee was advised that discussions were ongoing with the ICB and NWAFT regarding the classification of the MIU at Stamford, and that once information was received regarding this matter, this would be shared with the Committee;
- Confirmation was given that Urgent Community Response worked across the county as part of the Integrated Care Service, and that there was no specific base for this service;
- That data was available relating to patients who accessed urgent and emergency care services, and that this information was used to plan the workforce to ensure skills were maintained;
- Recognition was given that more needed to be done regarding prevention and access to services;
- It was hoped that a further Mental Health Urgent Assessment Centre would be located in Boston, but as yet no decision had been made;
- That the Winter Preparedness Plan had worked well this year with the collaboration of all partners across the system;
- That despite the lack of additional funding for 2022/23, prioritisation and planning was in place to ensure that services were maintained; and
- Industrial action had impacted accident and emergency care and that plans were in place to manage emerging pressures.

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

RESOLVED

1. That the Winter Preparedness Plan for 2022/23 be noted, and that the Committee welcomes all the initiatives improving urgent and emergency care for patients, including the new resuscitation department at Lincoln County Hospital; the improvements in ambulance handover times since early January 2023; and the improvements in discharge and flow of patients.

2. That it be put on record that the Committee would wish to see NHS Lincolnshire Integrated Care Board consulting with the Committee on the future of the minor injuries unit at Stamford and Rutland Hospital as the matter progresses.

52 THE LINCOLNSHIRE PEOPLE BOARD STRATEGY FOR RECRUITING AND RETAINING TALENT

The Committee considered a report from the Lincolnshire People Board, which provided an update on the effort and initiatives planned and implemented by the People teams across the Lincolnshire Health and Care system, including individual provider organisations.

The Chairman invited Ceri Lennon, Senior Responsible Officer for Lincolnshire NHS People Board (Director of People and Innovation, Lincolnshire Community Health Services NHS Trust), Saumya Hebbar, Associate Director of People, Lincolnshire Integrated Care System and Wendy Cundy, Primary Care Workforce Lead, NHS Lincolnshire, to remotely, present the item to the Committee.

Attached to the report presented at Appendix A, was an extract from the Lincolnshire Integrated Care Partnership Strategy – January 2023 (Priority Enabler 2 – Workforce and Skills), and Appendix B provided a copy of the Lincolnshire People Plan 2022/23 for the Committee to consider.

The Committee noted that following a focus on recruitment, the impact on vacancy rates across provider trusts were beginning to improve, this was illustrated in graphs on pages 62 and 63 of the report pack. Reference was made to the recruitment and retention initiatives and the strategic workforce planning tool and the Rural & Coastal Transformation Programme.

In conclusion, it was highlighted that the workforce challenges in the health sector in Lincolnshire were well documented and understood. It was highlighted that the solution was working in collaboration, and in a creative way with partners to deliver on the People Plan in Lincolnshire.

Note Councillor T Brand left the meeting at 11.20am.

During consideration of this item, the following comments were noted:

- There was recognition of the frustration, regarding what was happening in the NHS overall, compared to what was happening in Lincolnshire. It was however highlighted that Lincolnshire had to develop its own plans as into how health and care services were delivered in Lincolnshire, as part of the Lincolnshire Integrated Care Partnership Strategy;
- Confirmation was received that Lincolnshire worked with ten other Integrated Care Systems, sharing data and intelligence;

- That there was still a continued focus on international recruitment of nurses and pastoral care for new recruits to ensure high retention rates in the county. Pages 64 of the report provided more details with regard to international recruitment;
- Confirmation was given that exit interviews were carried out and, that these would be conducted either virtually, or face to face. It was highlighted that a survey was also completed. The Committee noted that the pension issue was also a factor as to why staff were leaving their profession. It was hoped that proposed changes in April 2023 might help alleviate some of these issues;
- The success of the Retention Plan, further details were provided on page 65 of the report pack;
- That to help retain GPs, more flexibility was being created for GPs, with the help of other professionals and having different ways of working;
- Recruitment challenges experienced by health and social care. It was noted that by working in a more joined up and innovative way would help inspire young people to work and train in social care, and also creating routes into nursing via social care;
- That childcare for working parents was not being looked at as a system issue;
- Confirmation was given that experience and knowledge was shared with others regarding international recruitment;
- Confirmation was given that ‘reservists’ mentioned in the People Plan did not relate to Armed Forces personnel. The term referred to people who had signed up to be called on in times of pressure on the NHS;
- There was recognition that more needed to be done regarding recruitment and retention of staff;
- It was noted that in the event of an influx of potential candidates, clinical needs would be consulted first to identify the most fragile areas, and then everything that could be done would be done to support new recruits into those areas.

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

RESOLVED

That the progress with the Lincolnshire People Strategy be noted and that the Committee looks forward to receiving further progress reports in the coming year, with an update being received in one year’s time.

53 ARRANGEMENTS FOR THE QUALITY ACCOUNTS 2022 - 2023

The Chairman invited Simon Evans, Health Scrutiny Officer, to present the item, which invited the Committee to consider its approach to the *Quality Accounts for 2022/23*, and to identify its preferred option for responding to the draft *Quality Accounts*, which would be shared with the Committee, by local providers of NHS-funded services.

Paragraph seven provided details of the arrangements for making statements in response to draft quality accounts for 2023, for the Committee to consider.

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The Committee was invited to consider the arrangements for the *Quality Accounts* process for 2022/23, which included making a decision on which quality accounts it wished to review and to also consider whether to set up a working group.

It was noted that several of the ratings of the Care Quality Commission (CQC) pre-dated the pandemic. It was agreed that information on how the CQC planned its inspections would be provided to the Committee.

RESOLVED

1. That the draft Quality Accounts for 2022/23, the Committee would wish to make a statement on from the local providers of NHS-funded services be determined as the following:
 - East Midlands Ambulance Service NHS Trust
 - Lincolnshire Community Health Services NHS Trust
 - Northern Lincolnshire and Goole NHS Foundation Trust
 - United Lincolnshire Hospitals NHS Trust

2. That a working group be set up comprising of the following members: Councillors C S Macey, L Wootten, R Wootten, M G Allan, R J Cleaver, J Loffhagen and Mrs S Harrison.

54 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 85 to 87 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 further consideration by the Committee:

- Lakeside Healthcare, Stamford;
- Whether a reduction in the use of Opioids had been achieved; and
- Nuclear Medicine.

RESOLVED

That the work programme presented on pages 85 to 87 of the report be received, subject to inclusion of the suggestions put forward, and the additional item from minute number 52.

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The meeting closed at 12.19 pm