



**HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE
14 JUNE 2017**

Lincolnshire County Council

Councillors Mrs K Cook, M T Fido, R J Kendrick, C S Macey, R A Renshaw, Dr M E Thompson, M A Whittington and R H Woolley.

Lincolnshire District Councils

Councillors P Gleeson (Boston Borough Council), Mrs P F Watson (East Lindsey District Council), J Kirk (City of Lincoln Council), T Boston (North Kesteven District Council), C J T H Brewis (South Holland District Council) and P Howitt-Cowan (West Lindsey District Council).

Healthwatch Lincolnshire

Dr B Wookey.

Also in attendance

Liz Ball (Executive Nurse, South Lincolnshire CCG), Dr Kakoli Choudhury (Consultant in Public Health Medicine), Alison Christie (Programme Manager, Health and Wellbeing Board), Katrina Cope (Senior Democratic Services Officer), Simon Evans (Health Scrutiny Officer), Gary James (Accountable Officer, Lincolnshire East CCG), Jan Sobieraj and Chris Weston (Consultant in Public Health (Wider Determinants)).

Councillors W Gray, C E H Marfleet, Mrs P Whittaker and Mrs S Woolley (Executive Councillor NHS Liaison and Community Engagement) attended the meeting as observers.

1 ELECTION OF CHAIRMAN

RESOLVED

That Councillor C S Macey be elected as Chairman of the Health Scrutiny Committee for Lincolnshire for 2017/18.

COUNCILLOR C S MACEY IN THE CHAIR

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2 ELECTION OF VICE-CHAIRMAN

RESOLVED

That Councillor C J T H Brewis be elected as Vice-Chairman of the Health Scrutiny Committee for Lincolnshire for 2017/18.

3 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

An apology for absence was received from Councillor Mrs R Kaberry-Brown (South Kesteven District Council representative).

4 DECLARATIONS OF MEMBERS' INTERESTS

Councillor Mrs P F Watson advised the Committee that she was currently a patient of United Lincolnshire Hospitals NHS Trust.

Councillor M T Fido advised the Committee that his partner was employed by East Midlands Ambulance Service as an Emergency Dispatcher for 999 calls.

**5 MINUTES OF THE MEETING OF THE HEALTH SCRUTINY COMMITTEE
FOR LINCOLNSHIRE HELD ON 15 MARCH 2017**

RESOLVED

That the minutes of the Health Scrutiny Committee for Lincolnshire held on 15 March 2017 be approved and signed by the Chairman as a correct record.

6 CHAIRMAN'S ANNOUNCEMENTS

The Chairman extended thanks to the previous Committee and its Chairman for their excellent work in challenging and questioning senior health leaders in the County.

The Chairman advised that he was looking forward to building on the previous achievements as there would be some significant health proposals and decisions to be scrutinised, in particular the progress of the Lincolnshire Sustainability and Transformation Plan; and the previous Committee's referral about the overnight closure of Grantham Hospital's A & E.

The Committee agreed that a letter of thanks should be sent to the previous Chairman, Councillor Mrs C A Talbot.

**7 THE ROLE OF THE HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE - AN INTRODUCTION**

The Committee gave consideration to a report from Simon Evans (Health Scrutiny Officer), which described the key roles of the Health Scrutiny Committee for Lincolnshire.

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The Committee noted that Lincolnshire County Council had delegated all its health scrutiny functions to the Health Scrutiny Committee for Lincolnshire. It was noted further that the Adults and Community Wellbeing Scrutiny Committee was responsible for the scrutiny of the County Council's public health function; and similarly the Children and Young People Scrutiny Committee would continue to have an overview of children's health services child and adolescent mental health, school nursing and health visiting services.

Some members highlighted that issues affecting more than one scrutiny committee might need to be considered, and one method would be a joint working group of more than one scrutiny committee. An example of this might be delayed transfers of care and it was agreed that this matter would be discussed further at agenda item 10 'Health Scrutiny Committee for Lincolnshire – Work Programme and Quality Account Arrangements.'

RESOLVED

That the role of the Health Scrutiny Committee for Lincolnshire as explained in the report presented be noted.

8 JOINT STRATEGIC NEEDS ASSESSMENT/JOINT HEALTH AND WELLBEING STRATEGY UPDATE

Consideration was given to a joint report from Alison Christie (Programme Manager – Health and Wellbeing) and Chris Weston (Consultant – Wider Determinants of Health), which provided the Committee with an update on the Lincolnshire's refreshed Joint Strategic Needs Assessment (JSNA), which had been made publically available on the Lincolnshire Research Observatory from 9 June 2017.

It was highlighted that a report concerning the development of the Joint Health and Wellbeing Strategy (JHWS), including the Engagement Plan had been considered by the Committee at its 15 March meeting. The Committee noted that the issue raised by the Committee at the above said meeting concerning neurological conditions had been taken on board and was being actively pursued.

In guiding the Committee through the report presented, the Consultant – Wider Determinants of Health advised that Local Authorities and Clinical Commissioning Groups (CCGs) had an equal and joint duty under the Health and Care Act 2012 to prepare a JSNA and JHWS through the Lincolnshire Health and Wellbeing Board (HWB).

In March 2016, the HWB had agreed proposals for a fundamental review of Lincolnshire's JSNA, and that the 35 topics in the 2011 JSNA formed the basis of the review. As a result of a multi-agency Steering Group made up of representatives from each of the four CCGs, Adult Care, Children's Services, Public Health, Healthwatch Lincolnshire, District Councils and the voluntary sector had been established to oversee the review programme. The said review had begun in April 2016 and had concluded in April 2017.

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It was highlighted that in response to feedback from stakeholders, four topics from the 2011 JSNA had been removed, these were Personalisation; Residential and Nursing Care; Life Expectancy and Youth Work. The Committee noted that the Childhood & Weight problems topic had been merged the Adult Obesity to form an All Age Obesity topic. In addition, the Committee was advised that five additional topics had been added and these were Autism; Dementia; Domestic Abuse; Financial Inclusion and Mental Health and Emotional Wellbeing of Children and Young People.

The Committee were provided with a short presentation, which allowed the Committee to view the online web resource which was available on the Lincolnshire Research Observatory. It was highlighted that a one page summary document ('topic on a page') had been produced for each topic using infographics and graphs to provide key fact and messages in an accessible and user friendly format.

In conclusion, the Committee was reminded that the HWB had a statutory responsibility to produce and publish a JSNA for Lincolnshire and to use the evidence to inform the priority setting for the JHWS. The Committee was also invited to establish a working group to meet in early July to gather the views of the Committee as part of the prioritisation process for the development of the next JHWS for Lincolnshire which was due to be published in April 2018 and cover the period 2018/2023.

During discussion, the following points were raised:-

- One member enquired as to why mental health & emotional wellbeing of children and young people and domestic abuse had been included as individual topics. Officers advised that the JSNA covered wellbeing as well as health related issues. The Committee was advised further that the suggestions had come from the Community Safety Partnership. It was further highlighted that there was lots of cross referencing to mental health issues in other topics. A further point raised was that children and young people should have support available to them to help them cope with increasing pressures;
- One member enquired as to the extent of district council involvement on the HWB, particular reference was made to the involvement of Boston Borough Council. The Committee noted that there was a District Council representative on the HWB, as well as county councillors who were also district councillors. Officers also confirmed that seven Joint Health and Wellbeing Strategy Public Engagement Events had been arranged across the County, the nearest event to Boston would be in Spilsby. Officers confirmed if there was demand for an event in Boston, then one would be arranged. The Committee noted further that there was a survey open to all available on the website;
- Some concern was expressed as to whether there was adequate care for those with neurological conditions and that there needed to be improvements in this area;
- The need to support early intervention, as this approach saved money and provided better quality of life. One member highlighted that over the last twelve months funding had been reduced/ceased to some organisations providing preventative support. Particular reference was made to the lack of

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support for dyspraxia and to individuals who had gone through long term domestic abuse;

- The need for the JSNA to be accessible. Officers advised that there was to be a newsletter available to everyone; and that this could be accessed from a subscription box located on the front page of the JSNA web-page. Officers also confirmed that over a 1,000 people had attended various stakeholder events. It was further highlighted that information had been circulated through the CCGs to GPs; and to core members of the HWB to circulate further;
- A lack of knowledge amongst clinicians with regard to mental health issues; and
- One member enquired as to what the outcomes had been relating to the 2011 JSNA, and the impact this had when commissioning health services. It was highlighted that all commissioning plans were considered by the HWB. It was highlighted further that the County Council and Clinical Commissioning Groups had a statutory duty to have regard to the JSNA when making commissioning decisions. The County Council's Executive and Scrutiny report templates include a section requiring the report owner to evidence how the JSNA has been taken into account.

The Health Scrutiny Officer agreed to circulate a copy of Joint Strategic Needs Assessment presentation, plus Hyperlinks to relevant webpages, plus a copy of the Joint Strategic Needs Assessment Summary Report to all members of Committee.

RESOLVED

1. That the updated Joint Strategic Needs Assessment for Lincolnshire be received.
2. That agreement be given to the establishment of a working group to meet in early July 2017 to gather the Committee's views as part of the prioritisation process for the development of the next Joint Health and Wellbeing Strategy for Lincolnshire due to be published in April 2018 and cover the period 2018-2023.
3. That Councillors Mrs P F Watson, J Kirk, Mrs K Cook, M A Whittington and C J T H Brewis be nominated members of the above said working group.

9 INTRODUCTION TO UNITED LINCOLNSHIRE HOSPITAL NHS TRUST

The Committee received a presentation from Jan Sobieraj, Chief Executive, United Lincolnshire Hospitals NHS Trust, which provided an introduction to the United Lincolnshire Hospital Trust.

The presentation provided the Committee with information relating to:-

- The background behind the Trust;
- How the Trust was run and funded;
- How money was spent;
- Breakdown figures relating to the Trusts deficit;

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- The Trust's successes;
- The challenges faced by the Trust; and
- The Trust's vision for the future by 2021 and its five biggest priorities.

During discussion, members of the Committee raised the following issues:-

- The workings of the sustainability and Transformation Fund. The Committee noted that the amount drawn down was based on performance. If all the activity set out was not achieved then a lesser amount would be drawn down;
- The need to attract more patients to generate the Trust's income and help reduce the deficit. Reference was made to the 'Choose and Book System' and the impact of it on the amount of work carried out at the Trust. The Committee noted that the Trust was promoting itself through the 'Choose and Book System' for elective treatment, for example by developing centres of excellence in Lincoln rather than outside the County. It was highlighted that part of the Five Year Plan would be that services would be provided locally through Neighbourhood Teams whenever possible; and that wherever possible services would be centralised onto fewer sites, which would allow for more elective work;
- Explanation of the deficit breakdown. The Committee noted that approximately £30 million of the Trust's deficit related to the duplication of services across several sites. That reducing reliance on agency staff would help save £13m. Increasing the amount of elective care from CCGs would support the direction of travel and increase income, which would then reduce the current deficit of £13m; and reducing the ULHT inefficiencies of £13m as part of the five year improvement plan. It was noted that a national initiative led by Lord Carter of Coles was looking into NHS productivity, cost efficiency and was also providing direction for improvement;
- The Committee was advised that United Lincolnshire Hospitals NHS Trust would be presenting its response to the CQC report at the next meeting of the Committee on 19 July 2017;
- Progress of the CT scanner appeal in Louth. Reference was made to the appeal, which had originally been for a CT scanner in Louth;
- Funding Formula for Lincolnshire – The Committee was advised that the funding formula was set nationally. A question was asked as to whether funding that was agreed was weighted demographically and whether those weightings were significant. It was confirmed that CCGs commissioned services from providers and that they were paid for via contract and tariff arrangements. Officers advised that there was a formula, which was weighted by population growth, morbidity and rurality. A suggestion was made for a Lincolnshire voice to promote the needs of Lincolnshire as a rural County;
- Recruitment – It was reported that recruitment was an issue in Lincolnshire; and confirmation was given that it was not the intention to recruit internationally again at the moment. It was noted that work was being done to look at existing staff, their skill levels and job roles to see if delivery could be done better. The Committee noted that there had been a growth in Pharmacy qualifications; and the Trust was very supportive of the Medical School University;

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- One member suggested that the Trust needed to promote its successes more;
- Staff engagement in quality – It was reported that the culture of the organisation was tracked by the means of a staff survey. It was noted that last time it was conducted there had been a 39% participation rate. It was highlighted that safety of the patient was the number one priority;
- One member enquired as to whether Lincolnshire procured on its own equipment or whether it was part of a national procurement scheme. The Committee was advised that at the moment Lincolnshire did a mixture of both, but more could be done on what was being purchased. It was reported that work was underway to standardise purchasing more internally;
- Confirmation was given that outside expert advice was sought and was received when required;
- The importance of voluntary organisations such as LIVES. Working in conjunction LIVES was an extremely important partnership in rural communities;
- The importance of growing our own nurses within Lincolnshire. The Committee was advised that the Trust had a very good relationship with the University of Lincoln. A question was asked as to why the hospital had not set up a nursing qualification. It was reported that the Trust was unable to set up a programme as they were not an Accredited Body; and
- The Sustainability and Transformation Plan and the potential effect for rural communities. It was felt that moving services to specialised hospitals would not always be the nearest hospital, and as a result the cost of travel would be moved to the more vulnerable people within the community. These impacts would be considered when formal proposals were put forward as part of the Sustainability and Transformation Plan.

The Chairman on behalf of the Committee extended thanks to the Chief Executive, United Lincolnshire Hospitals NHS Trust for his presentation.

The Committee was advised that a hard copy of the presentation was available for them to have; and that an electronic copy would be emailed to them after the meeting.

RESOLVED

That the presentation on United Lincolnshire Hospitals NHS Trust be noted.

**10 HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE - WORK
PROGRAMME AND QUALITY ACCOUNT ARRANGEMENTS**

Consideration was given to a report from Simon Evans (Health Scrutiny Officer), which enabled the Committee to consider and comment on the content of its work programme to ensure that scrutiny activity was focussed where it could be of greatest benefit. Appendix A to the report provided the Committees work programme from 2017 to April 2018.

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The Committee was advised that at the 15 March 2017 meeting, arrangements had been agreed for the 2017 Quality Account process. The Health Scrutiny Officer advised that there were three Quality Accounts requiring statements, which were:-

- Lincolnshire Community Health Services NHS Trust (joint statement with Healthwatch Lincolnshire)
- St Barnabas Hospice;
- United Lincolnshire Hospitals NHS Trust (joint statement with Healthwatch Lincolnshire)

The Committee was advised further that the working group comprising of Councillors C J T H Brewis, J Kirk, P Gleeson and Mrs P A Watson would be meeting on 20 June 2017 to consider the ULHT Quality Account.

An invitation was extended to members of the Committee to participate in a working group to formulate a response to the Lincoln Walk-in Centre Public Consultation document. Councillors Mrs K Cook, J Kirk, R A Renshaw, T Boston and C S Macey expressed an interest at the meeting. The representative from Healthwatch requested a precis of the working group's deliberations.

The Committee agreed that a date for the working group should be arranged which should involve a presentation from the Lincolnshire West CCG to help members of the working group formulate their response to the consultation document. The response of the working group to then be presented to the next meeting of the Committee scheduled to be held on 19 July 2017.

The Chairman invited members of the Committee to suggest future items for inclusion on the work programme. The items put forward for inclusion were as follows:-

- The Lincolnshire Sustainability Transformation Plan (STP) – The Committee agreed that an update report should be included for the October meeting. The Health Scrutiny Officer agreed to circulate to members of the Committee a copy of an update report being considered by the Health and Wellbeing Board on the 20 June 2017 relating to the STP;
- Dental Procurement item for a future meeting; and
- Long Leys Court to a future meeting.

RESOLVED

1. That the items as detailed above be included as future items for consideration in the work programme.
2. That the Quality Accounts Working Group meet on 20 June 2017 to consider the draft Quality Accounts of United Lincolnshire Hospitals NHS Trust; and St Barnabas Hospice.

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3. That a working group be established to respond to the Lincoln Walk-in Centre Public Consultation document comprising of the following Councillors Mrs K Cook, J Kirk, R A Renshaw, T Boston and C S Macey.

The meeting closed at 12.50 p.m.