



**HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE
16 DECEMBER 2020**

PRESENT: COUNCILLOR C S MACEY (CHAIRMAN)

Lincolnshire County Council

Councillors C J T H Brewis (Vice-Chairman), M T Fido, R J Kendrick, C Matthews, R A Renshaw, M A Whittington and R Wootten.

Lincolnshire District Councils

Councillors S Woodliffe (Boston Borough Council), B Bilton (City of Lincoln Council), Mrs S Harrison (East Lindsey District Council), Mrs R Kaberry-Brown (South Kesteven District Council - joined the meeting during consideration of agenda item 5), Mrs A White (West Lindsey District Council) and Mrs L Hagues (North Kesteven District Council).

Healthwatch Lincolnshire

Dr B Wookey.

Also in attendance

Dr Kakoli Choudhury (Consultant in Public Health Medicine), Katrina Cope (Senior Democratic Services Officer), Simon Evans (Health Scrutiny Officer), Simon Evans (Chief Operating Officer, United Lincolnshire Hospitals NHS Trust), Andrew Morgan (Chief Executive, United Lincolnshire Hospitals NHS Trust) and Professor Derek Ward (Director of Public Health).

County Councillor Dr M E Thompson (Executive Support Councillor for NHS Liaison and Community Engagement) attended the meeting as an observer.

43 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors S Barker-Milan (North Kesteven District Council), Mrs R Kaberry-Brown (South Kesteven District Council) and G P Scalese (South Holland District Council).

The Committee noted that Councillor Mrs L Hagues (North Kesteven District Council) had replaced Councillor S Barker-Milan (North Kesteven District Council) for this meeting only.

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

**HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE
16 DECEMBER 2020**

Note: (Councillor Mrs R Kayberry-Brown (South Kesteven District Council) joined the meeting during consideration of agenda item 5).

44 DECLARATIONS OF MEMBERS' INTEREST

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

**45 MINUTES OF THE HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE MEETING HELD ON 11 NOVEMBER 2020****RESOLVED**

That the minutes of the Health Scrutiny Committee for Lincolnshire meeting held on 11 November 2020 be agreed and signed by the Chairman as a correct record.

46 CHAIRMAN'S ANNOUNCEMENTS

Further to the Chairman's announcements circulated with the agenda, the Chairman, brought to the Committee's attention the two supplementary announcements circulated prior to the meeting.

The first supplementary announcement circulated on the 11 December 2020, had provided the Committee with a briefing paper from the East Midlands Ambulance Service. The second supplementary announcement provided information on the following:

- Vaccination Programme in Lincolnshire;
- United Lincolnshire Hospitals NHS Trust – the success of the installation of imaging equipment for the treatment of cancer and vascular disease at Pilgrim Hospital, Boston;
- The announcement by the government on 10 December 2020 of the allocation of £600 million of capital to help address the maintenance backlog in NHS Hospitals in England;
- Additional information requested by the Committee at its 11 November 2020 meeting (*Minute 39 refers*) concerning primary care services;
- Healthwatch Lincolnshire had started recruiting for an online citizens' panel to help guide NHS services in Lincolnshire; and
- The Judicial Review of Decisions on Grantham and District Hospital.

The Chairman advised that discussion on the two supplementary announcements would be considered further as part of the work programme item.

RESOLVED

That the Supplementary Chairman's announcements circulated and the Chairman's announcements as detailed on pages 15 to 23 of the report pack be noted.

47 HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE - WORK PROGRAMME

The Chairman advised that as presenters for the next item of business had stated that they would be attending the meeting later, the next item to be considered would be agenda item 7 - the Committee work programme.

The Chairman invited Simon Evans, Health Scrutiny Officer, to present the report (pages 41 - 48 of the report pack).

Consideration was given to the work programme as shown on pages 42 and 43 of the report pack, and the Committee were invited to highlight any additional scrutiny activity which could be included for consideration in the work programme.

The Committee were also invited to forward any questions they wished to ask the East Midlands Ambulance Service on to Simon Evans, Health Scrutiny Officer. A briefing paper had previously been circulated, as a supplement to the Chairman's announcements.

During discussion, the following potential items were highlighted:

- Access to Primary Care Services, as there appeared to be inconsistencies across the service;
- Lakeside Healthcare at Stamford Update;
- Vale Medical Group (proposed closure of its branch practice in Woolsthorpe) Update; and
- Dental Services Update.

RESOLVED

1. That the work programme presented be received subject to the inclusion of the potential items highlighted above.
2. That any questions the Committee may wish to ask the East Midlands Ambulance Service NHS Trust be forwarded onto Simon Evans, Health Scrutiny Officer.
3. That the scheduled meeting date of 24 March 2020 be changed to the 16 March 2021 at 2.00pm.

Note: The meeting adjourned from 10.20am to 10.30am. A further roll call was taken to ascertain those members present.

48 UNITED LINCOLNSHIRE HOSPITALS NHS TRUST - COVID-19 UPDATE

The Chairman invited Andrew Morgan, Chief Executive of United Lincolnshire Hospitals NHS Trust and Simon Evans, Chief Operating Officer, United Lincolnshire Hospitals NHS Trust, to present the report which provided the Committee with a Covid-19 update.

Detailed at Appendix A to the report was a copy of the Report to United Lincolnshire Hospitals NHS Trust Board of Directors (1 December 2020) – Report of the Chief Executive.

The Chief Executive of United Lincolnshire Hospitals NHS Trust advised the Committee that as of 15 December 2020, the Trust was treating a total of 204 Covid-19 in-patients, 126 in-patients at Lincoln County Hospital and 78 in-patients at Pilgrim Hospital, Boston.

The Committee was advised further that the increase in the number of Covid-19 in-patient cases and reduced staffing levels had resulted in the Trust having to declare and manage an internal critical incident.

It was reported that currently there were 1,140 staff absent, as a result of having Covid-19, or having to self-isolate. It was noted that this represented approximately 14% of the workforce. The Trust was therefore under significant pressure to manage the service. The Committee noted that the Trust was doing all it could to keep its staff healthy and well, with the recent introduction of Covid-19 lateral flow tests for front line staff; and the commencement of the vaccination programme for staff at high risk across the system.

It was reported that United Lincolnshire Hospitals NHS Trust had been selected as one of the 50 national hub hospitals to administer the Pfizer/BioNTech vaccine, and that this was focussed on the Lincoln County Hospital site. The Committee noted that the vaccination programme had started at the hospital on 8 December 2020. The Committee was advised that NHS England/NHS Improvement, together with the Department for Health and Social Care was talking responsibility for providing information on the number of vaccines provided. The Committee was advised further that two Primary Care Networks had also started vaccinations at Louth and Grantham Hospitals, and that further clinics would be opening shortly.

The Committee noted that the Trust was managing to continue elective surgery and provide support to cancer patients at the Grantham Hospital 'Green Site', however, as the number of Covid-19 in-patients has increased, Lincoln County and Pilgrim Hospital, Boston had paused some cancer activity at their sites.

During discussion, the Committee raised the following comments:

- The vaccination programme – The Committee was advised that the programme's initial priority was to vaccinate the over 80's and front line staff in care homes, and those providing care in the community; and NHS staff. It

HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE
16 DECEMBER 2020

was noted that there was an aspiration for all NHS staff to have received their two vaccinations by the end of March 2021;

- Thanks were extended to health services staff for the professional service being provided in the most difficult times. Particular praise was given to staff providing support at Grantham Hospital;
- Percentage of beds taken by Covid-19 in-patients. The Committee was advised that at its peak 30% of in-patient beds had been taken by Covid-19 in-patients; and that a further 30% of patients were query Covid-19, in effect awaiting test results;
- How the service was coping with the increased demand. The Committee was advised hospitals were being reconfigured to meet demand, particularly with regard to self-isolating. It was noted that reduced staffing levels was having an impact; as the Trust was not able to offer extra capacity at the moment, and that this matter was being carefully managed. The Committee noted that the Trust was working with all agencies, to ensure that plans were in place should a further wave occur;
- A question was asked as to how much notice would be needed to extend the temporary arrangements currently operating at the Grantham Hospital site. The Committee was advised that it was not the Board's intention to extend the period beyond 31 March 2021, and that the arrangements would be reviewed by the Board in February 2021;
- Use of bank or agency staff to help back fill some of the absences. The Committee noted that providing cover was proving more difficult than it used to be, as some people were not prepared to put themselves at risk. It was noted further that other organisations were also seeking staff, which had also had an effect on the availability of agency staff;
- Clarification was sought with regard to the reference to the triggers set for the return to pre-Covid-19 reconfiguration having not been met in the last month (page 30 of the report). The Committee was advised that there were a number of indicators and that these were reviewed against a number of scenario's, for example, a major incident, or a surge in critical care. The Committee was advised that all indicators were looked at on a daily basis. Reassurance was given that there had not been a time when these had been met. If this was to occur, then the service would be reverted back to the previous model, and that this process could take up to 12 weeks to complete;
- Reference was made to a statement in the press that 30% Covid-19 cases were reported to have contracted Covid-19 in hospital. The Committee noted that across the county, hospital Covid-19 rates tended to correlate with community rates of infection. Confirmation was given that currently infection rates were reducing. Reassurance was given that the Trust was applying NHS best practice and Care Quality Commission guidance as effectively as it could;
- Some concern was expressed regarding the effectiveness of lateral flow testing. The Committee was reassured that the lateral flow test was not the only measure relied on by staff. It was reported that staff had a suite of measures available to them, and that care home staff were applying a similar approach;

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- System Financial Position for a planned year-end deficit of £4m. Clarification was given that responsibility for the deficit with the Lincolnshire system, was overseen by the Clinical Commissioning Group;
- The percentage of Covid-19 in-patients having underlying conditions; and how this compared with a bad flu season. The Committee noted that 90% of Covid-19 in-patients had underlying conditions; and that the number of in-patients was higher than the Trust would experience in a flu season;
- Whether residents from the East Lindsey District Council area who had Covid-19 and were being taken to the Diana, Princess of Wales Hospital, Grimsby were included in the Lincolnshire figures. Confirmation was given that in the instance of in-patients Covid-19 cases, these would be included in the figures for Northern Lincolnshire and Goole NHS Trust; and that these figures could be obtained from that Trust if the Committee wished to see them;
- Outcome of the Acute Services Review National Panel review (page 24, bullet point 4). The Committee was advised that some questions had been received from NHS England and NHS Improvement, which were currently being considered. Confirmation was given that no date had been received for the next National Panel review meeting.

The Chairman on behalf of the Committee extended his thanks to all staff at United Lincolnshire Hospitals NHS Trust; and to the presenters for attending the meeting.

RESOLVED

1. That the Committee's support and thanks to all staff at United Lincolnshire Hospitals NHS Trust for their efforts in maintaining NHS services in Lincolnshire be recorded.
2. That a further update be received at the 17 February 2021 meeting.

49 COVID-19 UPDATE

The Chairman invited Derek Ward, Director of Public Health, to provide the Committee with an update relating to Covid-19.

Pages 35 to 38 of the report provided the Committee with a summary of the Covid-19 Winter Plan, which had been issued by the government on 23 November 2020. Appendix A to the report provided the Committee with a summary of the measures under each Tier in England for the Committee's consideration.

The Committee was advised that in mid-November, Lincolnshire had seen a peak in the number of people testing positive Covid-19. Currently the rate for Lincolnshire was at 250 cases per 100,000 population, which was above the England average, which was currently 184 cases per 100,000. It was highlighted that there was some

HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE
16 DECEMBER 2020

inconsistency across the county, with the areas of Boston and the City of Lincoln continuing to have high infection rates. It was noted that the increase had been as a result of outbreaks in specific settings.

The Committee noted that there was a national testing programme, which involved booking a Covid-19 test via the government website. It was noted further there was also a local testing approach which covered four main areas, which were: to target specific communities; to target high consequences settings; to target significant outbreaks; and to help domiciliary care providers with lateral flow testing.

During discussion, the Committee raised the following points:

- The effect of the Christmas arrangements. The Committee was advised that it was anticipated that there would be an increase in infection rates following the planned relaxation of restrictions for the Christmas period;
- The Lincolnshire situation . The Committee was advised that generally Lincolnshire had adhered to the government's requirements. The need for reinforcement of the Hands, Face, Space message was reinforced;
- The impact of long Covid-19 on some patients;
- The need to ensure that vulnerable people were protected with more lateral flow testing being made available; and stricter controls in place with regard to track and trace;
- The policy change relating to the wearing of face masks. The Committee noted that face masks must be worn when in a public enclosed space; and
- The need for children to be reminded of social distancing rules. The Committee was advised that schools were reinforcing the rules of Hands, Face, and Space. It was also highlighted that children and young people were less likely to have Covid-19; and in most cases if a child or young person caught Covid-19, their symptoms were likely to be less severe.

The Chairman extended thanks on behalf of the Committee to the Director of Public Health for his update.

RESOLVED

That the Covid-19 update be received; and that a further update be received at a future meeting.

The meeting closed at 12.20 pm