

# Agenda Item 4

		<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

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>13 September 2017</b>
Subject:	<b>Chairman's Announcements</b>

**1. Decision by Secretary of State for Health on Grantham Accident and Emergency Department**

On 2 August 2017, the Secretary of State for Health issued his decision on the referral by the Committee of the overnight closure of Grantham Accident and Emergency Department. This is the subject of a full report on this agenda.

**2. Lincoln Walk-in-Centre – Consultation on Future Arrangements**

Following consideration by the Committee on 19 July and a further meeting of the Committee's working group on 1 August, the response of the Health Scrutiny Committee for Lincolnshire to the consultation on the future of the Lincoln Walk-in-Centre was submitted to Lincolnshire West Clinical Commissioning Group on 17 August 2017.

It is understood that Lincolnshire West Clinical Commissioning Group will be making a decision on the consultation at its governing body meeting on 27 September. This decision will be reported to the Health Scrutiny Committee on 11 October 2017. A meeting of the Committee's working group has been programmed for Thursday 5 October 2017.

**3. GP Mergers – Louth and Surrounding Area - Consultation**

On 19 July 2017, the Health Scrutiny Committee was advised of consultations on several proposed mergers of GP surgeries throughout Lincolnshire. In relation to two of the proposals, the Committee expressed an interest in submitting a response to the consultations and agreed to form a working group to do so. The first of these consultations relates to the proposed merger of New Coningsby Surgery, Coningsby; Newmarket Medical Practice, Louth; and the Wolds Practice,

Tetford. The second consultation relates to the proposed merger of James Street Family Practice, Louth; and the Kidgate Surgery, Louth.

On 19 July, one member of the Committee expressed an interest in joining the working group and for this reason a working group has not progressed. If the Committee wishes to confirm that it would like to make a response to these two consultations, an option is for the Chairman to do so on the Committee's behalf. Members of the Committee could provide their suggestions to the Chairman prior to the response.

The first consultation closes on 25 September and the second closes on 9 October 2017.

#### **4. Northern Lincolnshire and Goole NHS Foundation Trust – Urology and Ear, Nose and Throat Service**

On 25 July 2017, Northern Lincolnshire and Goole NHS Foundation Trust (NLAG) Board made a decision on two services, which affect a small number of Lincolnshire patients: Urology and ENT (ear, nose and throat). It was reported to the NLAG Board that both of these services were facing critical workforce challenges. Despite repeated and continual focused efforts to recruit to vacant consultant posts in these services the Trust has been unsuccessful.

In relation to Urology, to deliver care safely on a 24/7 basis NLAG needs six consultants to provide emergency and planned care at Both Scunthorpe and Grimsby. The service has seen a significant turnover in consultants and has been reliant on long term locums who have now moved on. Safe emergency care could not be maintained across two hospital sites on a 24/7 basis with just three consultants. The NLAG Board decided that a 24-hour, seven day a week emergency urology service will now be provided at Scunthorpe General Hospital only.

In relation to ENT, to deliver care safely 24/7 the Trust needs five consultants. The service is operating safely with extra capacity provided by another Trust. Due to the capacity issues the service is already alternating on-call cover between the two main hospital sites resulting in patients being transferred between sites out of hours. From September, all inpatient ENT services have been provided from Grimsby hospital (adult and paediatric, elective and non-elective).

#### **5. NHS England Consultation on "Wasteful and Ineffective" Drug Treatments**

On 21 July 2017, NHS England published detailed plans to cut out prescriptions for 'ineffective, over-priced and low value' treatments. A formal public consultation is being launched on new national guidelines which state that 18 treatments - including homeopathy and herbal treatments - which together cost taxpayers £141 million a year should generally not be prescribed.

In addition the consultation also covers a further 3,200 prescription items, many of which are readily available and sold 'over the counter' in pharmacies, supermarkets, petrol stations, corner shops and other retailers, often at a

significantly lower price than the cost to the NHS.

The consultation proposes initial action to limit prescribing of products for minor self-limiting conditions which currently cost taxpayers £50-£100 million a year. The products include cough mixture and cold treatments, eye drops, laxatives and sun cream lotions.

NHS England has stated that the consultation is being nationally co-ordinated but also encompasses a local element, is addressed to all CCGs, the public and patients, and any relevant interest group or body. It will be open for three months from 21 July until 21 October 2017.

## 6. Annual General Meetings / Annual Public Meetings

Set out below is a table showing the annual general meetings / annual public meetings of the Lincolnshire-based NHS organisations:

<b>Date / Time</b>	<b>Venue</b>	<b>Organisation</b>
Thu 14 Sept 1.30 – 4 pm	Learning and Development Centre, Unit 3, The Reservation, East Road, Sleaford NG34 7BY	Lincolnshire Partnership NHS Foundation Trust
Tues 19 Sept 5 pm	Jubilee Church Life Centre, 1-5 London Road, Grantham, NG31 6EY	South West Lincolnshire CCG
Tues 19 Sept 4.00 – 6.00 pm	Maple Seminar Room, Beech House, Witham Park, Waterside South, Lincoln, LN5 7JH	Lincolnshire Community Health Services NHS Trust
Fri 22 Sept 3pm – 5pm	Travis Perkins Suite, Lincoln City Football Club, Sincil Bank, Lincoln, LN5 8LD	United Lincolnshire Hospitals NHS Trust
Thu 28 Sept 2.00 – 4.30 pm	The Dower House Hotel, Woodhall Spa, LN10 6PY.	Lincolnshire East CCG
Thu 28 Sept 5pm	Springfield Events Centre, Camelgate, Spalding PE12 6ET.	South Lincolnshire CCG
Wed 25 Oct 3.30 pm	Showroom, Tritton Road, Lincoln, LN6 7QY	Lincolnshire West CCG

## **7. Expansion of the International GP Recruitment Programme**

The *General Practice Forward View*, published by NHS England in April 2016, included a commitment for 5,000 more doctors and 5,000 other health professionals like clinical pharmacists, nurses, and physician associates in general practice by 2020.

On 22 August 2017, NHS England announced that while GP training places are increasing year-on-year and many GPs are returning to practice, many practices continue to face recruitment issues, and newly qualified GPs often prefer to work as a locum rather than joining a practice as a permanent GP. As a result of this, NHS England is working with partners to increase targeted international recruitment to a total of 2,000 overseas doctors over the next three years.

NHS England has stated that it will follow the World Health Organisation Global Code of Practice on the International Recruitment of Health Personnel and all doctors will need to meet the highest standards of practice and speak good English. NHS England will be seeking look to attract UK-trained doctors back to the UK wherever possible and target those countries where there is likely to be the best chance of affordable supply.

## **8. Expansion of Undergraduate Medical Education**

On 9 August 2017, the Department of Health announced the outcome of its consultation on the *Expansion of Undergraduate Medical Education*, which had taken place between 14 March and 2 June 2017. In the consultation document, the Department for Health had set out the case for increasing the number of domestic students entering medical schools in England, with plans for an immediate increase of approximately 500 undergraduate places across existing medical schools; and an increase of a further approximately 1,000 places via a competitive bidding process. The focus of the consultation was the process for allocating the additional 1,000 places.

The Department for Health received over 3,500 responses to its consultation. This included a response from Councillor Sue Woolley, the County Council's Executive Councillor for NHS Liaison and Community Engagement.

In its response, the Department of Health has stated that it is committed to expanding undergraduate medical places by 1,500, as announced in October 2016. The intention is that in the academic year 2018-19 the number of places available at established providers will increase by approximately 500. The remaining 1,000 places will be allocated through a competitive process with the expectation for delivery in 2019-20. There will be some flexibility to consider phased starts in 2018-19 or 2020-21 where bids that are best able to meet the Government's policy objectives provide strong evidence of the need to provide places to a different timescale.

Details of the competitive bidding process for the allocation of the further 1,000 places will be set out later in 2017. The bidding criteria will be determined jointly by the Higher Education Funding Council for England and Health Education England, and will be prioritised to address the following:

- widening participation and improving access so that the medical workforce is more representative of the population it serves;
- aligning expansion to local NHS workforce need with an emphasis on priority geographical areas, including rural and coastal areas;
- supporting general practice and other shortage specialties so that the NHS can deliver services required to meet patient need;
- ensuring sufficient provision of high quality training and clinical placements (with funding provided to Higher Education Funding Council for England for the additional teaching costs and funding to Health Education England to support additional high quality placements); and
- encouraging innovation and market liberalisation.

One of the issues in the consultation was whether the taxpayer should have a return on the investment made, for example, by seeking a minimum number of years of service in the NHS from doctors who have been trained. The Department of Health has stated that there was some agreement on the principle of ensuring that the significant taxpayer investment in medical education is maximised, but no general consensus on the mechanism to achieve this. The Government has asked Health Education England to consider this matter further.

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