Lincolnsh Working	for a better future	THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE			
Boston Borough	East Lindsey District	City of Lincoln	Lincolnshire County		
Council	Council	Council	Council		
North Kesteven	South Holland	South Kesteven	West Lindsey District		
District Council	District Council	District Council	Council		

Report to	Health Scrutiny Committee for Lincolnshire				
Date:	22 January 2020				
Subject:	Chairman's Announcements				

1. First Meeting of the Committee Since 16 October 2019

This is the first meeting of the Health Scrutiny Committee since 16 October 2019. The general election guidance from NHS England and NHS Improvement became effective on 6 November 2019 and continued until 13 December 2019; and applied to NHS foundation trusts, NHS trusts and clinical commissioning groups. The guidance is available at the following link:

https://www.england.nhs.uk/wp-content/uploads/2019/11/general-election-guidance-letter-001254.pdf

As a result of this guidance the meetings for the Committee scheduled for 13 November and 18 December 2019 were cancelled. In the case of the December meeting, I would like to clarify that the meeting was cancelled owing to the fact that the agenda and papers would have been issued during the pre-election period; and the guidance would have applied in the case of any delay forming a government.

The business from these two meetings has been re-allocated to the January, February and March meetings.

2. County Council Funding for a Falls Service

In December 2018, the County Council pledged funds totalling £400,000 to develop a falls and urgent response service, which helps Lincolnshire residents who suffer a fall and, in turn, eases pressure on acute hospitals. Since December 2018, the service has helped over 700 people. Following its success, the County Council has decided to increase the funding, taking the total up to £700,000 to support the falls and urgent response service into 2020. The service is delivered through a partnership, which includes the East Midlands Ambulance Service NHS Trust (EMAS), LIVES, Lincolnshire County Council, Lincolnshire Community Health Services NHS Trust and Wellbeing Lincs.

A key benefit of the service is that it enables EMAS to prioritise the most life-threatening emergency calls. This provides benefit to the whole health and care system, with the result that unnecessary hospital admissions have been avoided, as fewer patients who ask for help because of a fall need to go to hospital and instead they can be helped in their own home. People who suffer a fall at home usually need care either at home or in the community, via their local medical practice.

3. National Funding for CT and MRI Scanners for Cancer Diagnosis

On 30 October 2019, it was announced that United Lincolnshire Hospitals NHS Trust would be one of 78 NHS trusts to receive a share of a national allocation of £200 million for new cancer screening machines.

The list also included other the following NHS trusts used by Lincolnshire residents:

- North West Anglia NHS Foundation Trust
- Nottingham University Hospitals NHS Trust

Each trust has been allocated funding for new machines based on an assessment of local infrastructure and local population need. The funding will be released over two years to replace, refurbish and upgrade:

- CT and MRI scanners, including ones with lower radiation levels; and
- breast screening imaging and assessment equipment.

The new machines will be easier to use; provide quicker scan and images; and should reduce the need to re-scan. This new equipment also brings new capability, with many machines enabled for artificial intelligence. As reported to the Committee on 16 October, the NHS Long Term Plan includes the aim of catching three-quarters of all cancers earlier when they are easier to treat. The new equipment will support this aim.

4. Non-Emergency Patient Transport - Northamptonshire

On 25 October 2019, it was announced that the East Midlands Ambulance Service NHS Trust (EMAS) would be providing the non-emergency patient service in Northamptonshire, with an anticipated start date of 1 December 2019. EMAS will be taking over from the existing provider, Thames Ambulance Service Ltd (TASL), and will fulfil the remainder of the contract term until 2022, which like the current contract in Lincolnshire, began on 1 July 2017. During this time, the Northamptonshire clinical commissioning groups will review the options for the future of the service. EMAS is already the provider of non-emergency patient transport in Derbyshire.

Once TASL cease as the provider in Northamptonshire, it will remain responsible for seven non-emergency patient contracts, including Lincolnshire. The other contracts are in Hull; Leicester, Leicestershire and Rutland; and North East Lincolnshire, as well as three further contracts in the south east of England (Basildon; Mid-Essex; and Sussex).

5. Lincolnshire Clinical Commissioning Groups – In-Principle Approval of Merger

On 18 October 2019, the four Lincolnshire CCGs advised their partners that NHS England had agreed in principle to the proposed merger of Lincolnshire West, Lincolnshire East, South Lincolnshire and South West Lincolnshire Clinical Commissioning Groups (CCGs). The new Lincolnshire CCG would be established with effect from 1 April 2020.

The CCGs have advised that they had received a strong level of support for their application to merge and create a new CCG from their member practices and partners across Lincolnshire. The outline structure is likely to include four localities, largely reflecting existing CCG boundaries.

For the avoidance of doubt, I stress that this merger relates to the commissioning and other functions undertaken by clinical commissioning groups, and does not affect the direct provision of NHS-funded services by NHS trusts or other providers.

6. Renal Dialysis Services – Boston

On 14 November 2019, it was announced by University Hospitals of Leicester NHS Trust that a new Renal Dialysis unit for patients in Boston and the surrounding area would be located in Fishtoft Road, Boston. This followed a procurement exercise, which had led to the award of the seven year contract to Renal Services Ltd.

The previous unit in Boston had been too small for the demand for spaces and had resulted in some Boston patients having to go to Skegness for dialysis. The increased size will also enable the unit to offer more daytime slots for those who wish to dialyse in the daytime, although evening dialysis sessions are still available on Monday, Wednesday and Friday.

7. Crossroads Medical Practice, North Hykeham

Interim Service

Since 15 November 2019, Lincolnshire Community Health Services NHS Trust (LCHS) has been providing primary care services on an interim basis at the Crossroads Medical Practice in North Hykeham, which has over 6,000 patients registered. Lincolnshire West Clinical Commissioning Group (LWCCG) has stated that patients at Crossroads are continuing to access their primary care services as normal.

The previous GP partners left the practice on 14 November 2019 following a notice of termination of their registration by the Care Quality Commission (CQC). The practice had been in 'special measures' for most of the last three years.

Long Term Plans

LWCCG has been in discussions with Richmond Medical Centre, also in North Hykeham, about the possibility of their taking over the management of Crossroads patients as a permanent solution. Richmond Medical Centre is a well-established and experienced provider of health services and rated 'good' by the CQC.

As part of the move, Richmond will employ all Crossroads staff and continue to use the current premises. Richmond is located approximately one mile away from Crossroads and covers a similar area. Richmond is working through a plan with the CCG and LCHS to enable the smooth transition of Crossroads patients to Richmond Medical Centre on 1 April 2020.

The Richmond Medical Centre will maintain the Crossroads site as a branch surgery which would mean that patients could access services on both sites. Patients registered with Crossroads Medical Practice received letters in the week of 16 December 2019 informing them of the changes and informing them that they can register with another practice if they do not wish to be registered at Richmond Medical Centre. Patients who are happy to be with Richmond Medical Centre do not need to do anything as they will automatically transfer on the 1 April. LWCCG has arranged a number of patient drop-in sessions during January where people can come and talk to staff from the CCG, LCHS or Richmond Medical Centre about any concerns or questions they may have. Details of the drop-in sessions are as follows:

- 2.00pm 4.00pm, Tuesday 21 January 2020, The Ark, 141 Moor Lane, North Hykeham, Lincoln LN6 9AA
- 12.00pm 2.00pm, Thursday 23 January 2020, The Ark, 141 Moor Lane, North Hykeham, Lincoln LN6 9AA
- 5.00pm 7.00pm, Thursday 23 January 2020, The Ark, 141 Moor Lane, North Hykeham, Lincoln LN6 9AA

In the meantime patients registered with Crossroads Medical Practice are advised to continue accessing services as normal.

8. St Barnabas Hospice – Specialist Palliative Care Centre

On 7 November 2019, the Care Quality Commission (CQC) published its report on the St Barnabas Hospice Specialist Palliative Care Centre, following its inspection on 8 August 2019. The overall CQC rating for the hospice is 'outstanding'.

St Barnabas Hospice is a Specialist Palliative Care Unit which provides a wide range of services for adults who have advanced progressive illnesses and where the focus is on palliative and end of life care. The services are provided within four settings: an eleven-bed in-patient unit in Lincoln; day therapy centres; hospice at home services; and a palliative care co-ordination centre.

The CQC identified the following areas of outstanding practice:

- Staff cared for patients with compassion, empathy and respect. Feedback from all patients confirmed that staff treated them exceptionally well and with kindness and told us that staff went over and above what was expected of them. People were truly respected and valued as individuals and empowered as partners in their care, practically and emotionally, by an exceptional and distinctive service.
- The trust responded to people's individual needs and preferences which
 were central to the delivery of tailored services. There were innovative
 approaches to providing integrated person-centred pathways of care that
 involved other service providers, particularly for people with multiple and
 complex needs. The services were flexible, provided informed choice and
 ensured continuity of care.
- There was an embedded and extensive team of volunteers who helped support the service. There was a separate volunteer induction and training programme. Volunteers were valued members of the service who were provided with support and who felt part of the hospice team.

In addition to the above, the CQC found a further five areas of good practice.

9. United Lincolnshire Hospitals NHS Trust – Smoke Free Policy

On 6 January 2020, United Lincolnshire Hospitals NHS Trust (ULHT) implemented smoke-free policy. The move is part of the Trust's drive to provide a safer environment that promotes health and reduces harm from exposure to second-hand smoke. Smoking had been permitted within designated areas of sites at Lincoln, Boston, Grantham and Louth.

Patients are being supported to abstain from smoking during treatment by being offered nicotine replacement therapy (NRT) in the form of patches and inhalators and are offered a referral for support.

Those who insist on leaving the ward areas to smoke will not be obstructed, but will be advised of the smoke-free policy and asked not to smoke within the hospital grounds. E-cigarettes and vaping are still permitted in outdoor areas of the Trust as long as it is not done in close proximity to others.

10. North West Anglia NHS Foundation Trust – Care Quality Commission Inspection

On 20 December 2019, the Care Quality Commission published its inspection report on North West Anglia NHS Foundation Trust (NWAFT), following inspections between 30 July and 4 September 2019. NWAFT runs Peterborough City Hospital and Stamford and Rutland Hospital, as well as Hinchingbrooke Hospital in Huntingdon.

The overall rating for NWAFT is 'requires improvement', which is the same as the previous rating in 2018. As for individual hospitals, Peterborough City Hospital is now rated as 'requires improvement', compared to its 'good' rating in 2018. Stamford and Rutland Hospital retains its 'good' rating.

NWAFT has stated that while the outcome of this report is disappointing, it will use the report as a source of information to continually improve. NWAFT has also stated that its staff continue to work incredibly hard under a huge amount of pressure to maintain a high standard of care for its patients and this is reflected in the areas rated as 'good' and 'outstanding' ratings for particular services. For example: medical care; surgery; services for children and young people; end of life care; outpatients; and diagnostic imaging at Peterborough City Hospital are all rated as 'good'.

A challenge for NWAFT is urgent and emergency care, where the CQC concluded:

"People could not always access the service when they needed it and did not always receive the right care promptly. Waiting times from referral to treatment and arrangements to admit, treat and discharge patients were not in line with national standards."

11. Grantham A&E Overnight Closure – Impact on Other A&Es

At the Committee's meeting on 16 October 2019, consideration was given to information from North West Anglia NHS Foundation Trust (NWAFT) on the impact of the overnight closure of Grantham A&E, in effect the number of attendances from NG31, NG32 and NG33 postcodes. Further information was requested from two other non-Lincolnshire trusts:

- University Hospitals of Leicester NHS Trust (UHL)
- Nottingham University Hospitals NHS Trust (NUH)

University Hospitals of Leicester NHS Trust

The table below is based on the figures provided by University Hospitals of Leicester NHS Trust (UHL) and these figures relate to the <u>full 24 hour period</u>.

	University Hospitals of Leicester NHS Trust								
	2015/16		2016/17		2017/18		2018/19		
Mode of Arrival	NG31 NG32 NG33	ALL	NG31 NG32 NG33	ALL	NG31 NG32 NG33	ALL	NG31 NG32 NG33	ALL	
Ambulance	13	55,339	13	49,242	11	36,795	23	61,190	
Walk In/Other	47	197,303	46	190,184	62	196,145	82	190,100	
Total	60	252,642	59	239,426	73	232,940	105	251,290	

In its response, UHL stresses that the Leicester Royal Infirmary A&E (one of the busiest A&Es in England) sees as many as 250,000 patient attendances a year, and has stated that the numbers coming from the Grantham area are 'not material'. For example, 105 attendances from Grantham in 2018/19 represent 0.04% of the 251,290 attendances at Leicester during last year.

Nottingham University Hospitals NHS Trust

The table below is based on figures provided by Nottingham University Hospitals NHS Trust. The figures for NG31, NG32 and NG33 postcodes provided by Nottingham University Hospitals NHS Trust relate to A&E attendances between 6pm and 8am by patients defined as 'minor' by the relevant triage categories. The figures in each of the three right hand columns relate to the full 24 hour period.

	Nottingham University Hospitals NHS Trust							
_	2015/16		2016/17		2017/18		2018/19	
Mode of Arrival	NG31 NG32 NG33	ALL	NG31 NG32 NG33	ALL	NG31 NG32 NG33	ALL	NG31 NG32 NG33	ALL
Ambulance	6	59,078	6	59,257	10	60,210	17	62,105
Walk In/Other	20	141,186	52	143,593	49	142,510	110	148,255
Total	26	200,264	58	202,850	59	202,720	127	210,360

In its response, Nottingham University Hospitals NHS Trust makes reference to the number of patients increasing, but the overall number of patients is still very small in the context of around 200,000 A&E attendances each year. The increase during 2018-19 was likely to be as a result of urgent and emergency care process changes, following the redesign of pathways as NUH's A&E expanded. The vast majority of Grantham postcode arrivals attend NUH's 'majors' department and are likely to be covered under the 'exclusion protocol' and should not be attending Grantham A&E in any event.

North West Anglia NHS Foundation Trust

The table below is based on the figures reported to the Committee on 16 October 2019 and in all cases cover the <u>full 24 hour period</u>.

	North West Anglia NHS Foundation Trust							
	2015/16 (*)		2016/17 (*)		2017/18		2018/19	
Mode of Arrival	NG31 NG32 NG33	All	NG31 NG32 NG33	All	NG31 NG32 NG33	All	NG31 NG32 NG33	All
Ambulance	247	46,301	323	47,023	385	46,390	475	48,100
Walk In/Other	(#)	99,171	(#)	103,982	832	103,790	906	112,815
Total	(#)	145,472	(#)	151,005	1,217	150,180	1,381	160,915

^(*) For 2015/16 and 2016/17, the trust-wide figures reported in the table are an aggregate of Peterborough and Stamford Hospitals NHS Foundation Trust and Hinchingbrooke Hospital NHS Trust, which merged with effect from 1 April 2017.

Conclusion

I propose that this information will be used by the Committee when it considers its response to the consultation on the future of Grantham A&E, which is expected in 2020.

^(#) Information on the number of walk in / other attendances at the two former trusts for 2015/16 and 2016/17 has been requested, but has not yet been provided.