		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
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

<p>Open Report on behalf of Andrew Crookham Executive Director - Resources</p>
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Report to	Health Scrutiny Committee for Lincolnshire
Date:	22 July 2020
Subject:	Correspondence and Other Developments

Summary

At the last meeting of the Committee, following consideration of plans for the restoration of NHS services in Lincolnshire, it was agreed that a letter would be sent by the Chairman to the Secretary of State for Health and Social Care. This letter was despatched on 23 June 2020 and is attached at Appendix A to this report.

This report advises the Committee of the two resolutions passed by Lincolnshire County Council and South Kesteven District Council, which relate to the plans for NHS services in Lincolnshire, in particular the impact on services at Grantham and District Hospital. The letters arising from the Lincolnshire County Council resolution are attached at Appendices B and C to this report.

The Committee is requested to consider how the issues raised by the above resolutions and correspondence will be addressed in its future work programme.

Actions Required

- (1) To note that following the Committee's decision on 17 June 2020, a letter was sent to the Secretary of State for Health and Social Care on 23 June 2020 (Appendix A).
- (2) To note the resolutions passed by Lincolnshire County Council (26 June 2020) and South Kesteven District Council (1 July 2020) on NHS services in Lincolnshire, in particular those services at Grantham and District Hospital.
- (3) To note that United Lincolnshire Hospitals NHS Trust is due to provide an update to the Committee on 16 September 2020 on progress with its restoration plan.

- (4) To note that Lincolnshire Clinical Commissioning Group has been requested to report on the *Healthy Conversation 2019* engagement exercise and an update on the Lincolnshire Long Term Plan to the Committee on 16 September 2020.

1. Background

Restoration of NHS Services

On 29 April 2020, Sir Simon Stevens, NHS Chief Executive, and Amanda Pritchard, NHS Chief Operating Officer, wrote to all local NHS Chief Executives, setting out the second phase of the response to covid-19, where the focus was on restoring NHS services. The letter emphasised urgent action so that cancer treatment; routine and urgent surgery; the treatment of cardiovascular disease, heart attacks and stroke; maternity services; community health services; primary care; and mental health, learning disability and autism services could all be stepped up, to address the issues of patients not being able to, or not wishing to, access these services during the peak of the pandemic. On 11 June 2020, in accordance with NHS guidance, United Lincolnshire Hospitals NHS Trust (ULHT) approved its restoration plan, with a number of changes to the places where services would normally be accessed.

The restoration phase is expected to continue until August 2020 and will be followed by the recovery phase, which is expected to continue until 31 March 2021.

Healthy Conversation 2019 Engagement Exercise

Between March and October 2019, the *Healthy Conversation 2019* engagement exercise took place, with the Committee making initial comments on a range of services, in advance of the expected public consultation.

2. Health Scrutiny Committee Consideration – 17 June 2020

This Committee considered the plan from United Lincolnshire Hospitals NHS Trust for restoring NHS services on 17 June 2020 and unanimously agreed to:

1. ***welcome the return of 24/7 access to care at Grantham, along with the elective and planned treatment, but to also put on record the Committee's concerns that the restoration plan will have a significant impact on patients throughout Lincolnshire in terms of travel from their local to other sites, and the downgrading of Grantham A&E;***
2. ***seek regular updates on the progress of the restoration plan for United Lincolnshire Hospitals NHS Trust, including the impacts on patients travelling to different sites; and***

3. ***record the Committee's view that full public consultation on the Lincolnshire Acute Services Review options should take place as soon as possible and to write to the Rt Hon Matt Hancock MP, Secretary of State for Health and Social Care, expressing the Committee's concerns, which have been raised today, as an indication of the Committee's position for any action in the future.***

The letter arising from the above was despatched on 23 June 2020 to the Secretary of State for Health and Social Care (Appendix A) and any response will be reported.

4. Local Authority Resolutions

In addition, Lincolnshire County Council and South Kesteven District Council have passed resolutions on NHS services.

Lincolnshire County Council Resolution – 26 June 2020

On 26 June 2020, Lincolnshire County Council passed the following motion:

"It is now nearly four years since Grantham Hospital A&E was closed overnight as a temporary measure. Councillors, campaign groups and residents across Lincolnshire have marched on several rallies, delivered petitions to Downing Street and, have attended board meetings to call on ULHT and the South West Lincolnshire CCG to re-open Grantham Hospital 24/7 for emergency treatment.

"On Thursday 11th June the Trust board of the United Lincolnshire Hospitals NHS Trust (ULHT) approved a plan to turn the A&E department into a 24 hour walk in urgent treatment centre from June 22 as a temporary measure in order to create a "green site" that is Covid-19 free to deal with elective cases. Whilst this Council understands the potential operational and infection prevention control benefits of attempting to provide a clean 'green' site for the care of patients without coronavirus, we have significant concerns about a potential future downgrading of the site and stopping all unplanned admissions meaning that residents of Grantham and the surrounding area will have to travel to access in patient care.

"In addition, in August 2019, Pilgrim Hospital received news of a funding boost of £21.5 million by the Prime Minister Boris Johnson to upgrade Accident and Emergency and improve the Urgent treatment facilities This funding was intended to improve patient wait times and the flow of patients in and out of the department, allowing patients needing emergency treatment to be seen and treated quicker. This investment is welcomed and whilst we recognise the challenges facing the Trust due to Covid-19, Council would oppose any downgrading of emergency and urgent facilities at Pilgrim Hospital in light of this investment.

"This Council therefore calls on the Leader of Lincolnshire County Council, Councillor Martin Hill, OBE, to write to John Turner, Accountable Officer Lincolnshire CCG and Andrew Morgan, Chief Executive, United Lincolnshire Hospital Trust to:

- 1. express disappointment that residents of Grantham and the surrounding area will need to travel excessive distances to access unplanned in patient care and asks for written assurance on what transport support will be available for patients and their families;***
- 2. seek written assurance that the closure of the medical beds is a temporary change and asks when the medical inpatient beds will be re-instated with the required medical cover as is currently provided;***
- 3. seek written assurance that the investment at Pilgrim Hospital will not result in any down grading of facilities for emergency or urgent care; and***
- 4. seek written assurance that consultation to achieve substantial changes in line with the Healthy Conversation is undertaken as soon as possible."***

The letters arising from this resolution were despatched by the Leader of Lincolnshire County Council on 6 July 2020, and any responses will be reported to the Committee.

South Kesteven District Council Resolution – 1 July 2020

On 1 July 2020, South Kesteven District Council passed the following motion:

***"Preamble:* Without a fully functioning local district and general hospital with an accident and emergency department; the cost is not only financial the risk to people's lives is increased; their pain, suffering and anxiety extended.**

"Following this Emergency Full Council meeting, this Council calls on the Leader of the Council, Councillor Kelham Cooke, to:

- 1. Write to Andrew Morgan, Chief Executive of United Lincolnshire Hospitals NHS Trust, John Turner, Chief Officer of NHS Lincolnshire CCG, and Sir Simon Stevens, Chief Executive of NHS England, to express this Council's grave concerns that the temporary closure of Grantham Hospital A&E and loss of medical beds at Grantham Hospital may become permanent from 31 March 2021.***
- 2. Write to Councillor Carl Macey, the Chairman of the Lincolnshire Health Scrutiny Committee, to inform him of this Council's grave concerns that the temporary closure of Grantham Hospital A&E and loss of medical beds at Grantham Hospital may become permanent from 31 March 2021.***

3. ***We call for the full restoration of Grantham and District Hospital with a full Grade 1 accident and emergency unit providing full resuscitation and patient stabilisation.***
4. ***We also write to the Rt Hon Matt Hancock, Secretary of State for Health and Social Care, to reverse the changes to downgrade Grantham Hospital.***
5. ***We also call for the Secretary of State for Health and Social Care to amend the Health Care Act, so in future local authorities have fair representation on the decision-making bodies affecting the health services in their communities.***
6. ***To call on the United Lincolnshire Hospitals NHS Trust to ensure onsite facilities to enable people from all communities to access video facilities to support remote consultation."***

Any correspondence arising from the above resolution, which becomes available, will be shared with the Committee.

5. Future Committee Activity

Impacts of United Lincolnshire Hospitals NHS Trust Restoration Plan

The Committee is requested to note that a progress report from United Lincolnshire Hospitals NHS Trust on its restoration plan is for consideration by the Committee on 16 September 2020.

Healthy Conversation / NHS Lincolnshire Long Term Plan

The *Healthy Conversation 2019* engagement exercise was launched in March 2019, as a forerunner to full public consultation. The Committee responded to each element of *Healthy Conversation 2019*. Progress with the next steps has been delayed because of covid-19. The Lincolnshire Clinical Commissioning Group has been requested to report on the *Healthy Conversation 2019* engagement exercise and also provide an update on the Lincolnshire Long Term Plan to the Committee on 16 September 2020. This could include plans for consultation on four elements of the Lincolnshire acute services review, subject to the appropriate approvals from NHS England / NHS Improvement. The four elements are: -

- Urgent and Emergency Care
- Medical Services / Acute Medicine (Grantham)
- Stroke Services
- Trauma and Orthopaedics

6. Consultation

This is not a direct consultation item. However, full public consultation is expected at a future date on elements of the Lincolnshire Acute Services Review.

7. Conclusion

The Committee is requested to note correspondence arising from the various resolutions, together with the items proposed for the next meeting of the Committee on 16 September 2020 and consider any further action at this stage.

8. Appendices

The following documents are appended to this report.

Appendix A	Letter from Councillor Carl Macey, Chairman of the Health Scrutiny Committee for Lincolnshire, to Matt Hancock, MP, the Secretary of State for Health and Social Care – 23 June 2020
Appendix B	Letter from Councillor Martin Hill OBE, Leader of Lincolnshire County Council to Andrew Morgan, Chief Executive, United Lincolnshire Hospitals NHS Trust – 6 July 2020
Appendix C	Letter from Councillor Martin Hill OBE, Leader of Lincolnshire County Council to John Turner, Chief Executive, NHS Lincolnshire Clinical Commissioning Group – 6 July 2020

Background Papers - No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Simon Evans, Health Scrutiny Officer, who can be contacted on 07717 868930 or by e-mail at Simon.Evans@lincolnshire.gov.uk

County Offices, Newland,
Lincoln, LN1 1YL
www.lincolnshire.gov.uk



The Rt Hon Matt Hancock, MP
The Secretary of State for Health and Social Care
Department of Health
39 Victoria Street
London
SW1H 0EU

County Offices
Newland
Lincoln
LN1 1YL

23 June 2020

Dear Secretary of State

**HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE
RESTORATION OF NHS SERVICES**

The Health Scrutiny Committee for Lincolnshire has considered plans from Lincolnshire CCG and its main acute hospital provider, United Lincolnshire Hospitals NHS Trust (ULHT), for the restoration of NHS services in line with the letter issued by Sir Simon Stevens and Amanda Pritchard on 29 April 2020. A summary of the plans, based on a ULHT Board paper from 11 June 2020, is attached to this letter.

ULHT will be using one of its three main hospitals sites, Grantham and District Hospital, mainly as a 'green' site, to treat more elective and cancer patients, who will be 'screened' to ensure they are free from covid-19. The additional patients will be diverted from ULHT's other two main hospitals in Boston and Lincoln. However, as a result of the plans, Grantham A&E (a type 3 A&E) has converted to an urgent treatment centre, which is open on a 24/7 walk-in basis for 'unscreened' patients. This means for residents in Grantham and the surrounding area the nearest A&E is in Lincoln, which can be as much as two hours from Grantham when using public transport.

In addition to the impact on people in Grantham and the surrounding area, patients from other parts of Lincolnshire, a large rural county, will be expected to travel to Grantham for their planned treatment. Using public transport for these journeys will be particularly challenging for patients in some parts of Lincolnshire. For example, patients from Mablethorpe, on the east coast of Lincolnshire, would need approximately four hours for a one way journey to Grantham Hospital on public transport. This clearly underlines the importance of the local non-emergency patient transport service.

The Committee welcomes the return of 24/7 walk-in access to care at Grantham, along with the elective and planned treatments. However, the Committee wishes to put on record its concerns that the restoration plan will require patients throughout Lincolnshire to travel to and from other hospitals, instead of their local one. The Committee also views the conversion of Grantham A&E to an urgent treatment centre as a downgrading of services.

The Committee will be seeking regular updates on the progress of the restoration plan from the local NHS, including the impact on patients of travelling from all parts of Lincolnshire to hospitals other than their local one. The Committee is also committed to continuing a dialogue with both Lincolnshire CCG and ULHT.

The Committee has been advised that the changes in the restoration plan are temporary and full consultation will take place on any proposals for permanent change, as part of the Lincolnshire acute services review. However, Grantham's A&E has been closed between 6pm and 8am since August 2016. This closure has notionally been on a temporary basis, but a closure of four years cannot be construed as temporary and has caused significant unease and disruption for the residents of Grantham and the surrounding area.

The Committee has put on record its gratitude for the efforts of the NHS in Lincolnshire, other key workers and volunteers, and accepts that the challenges of the pandemic for the NHS and society as a whole will continue for some time yet. However, on the Lincolnshire restoration plan, I would therefore ask you to support the Committee's view that full public consultation on the Lincolnshire acute services review options should take place as soon as possible. I would also ask that you urge NHS England / Improvement to facilitate the NHS in Lincolnshire to undertake the consultation as soon as possible.

Yours sincerely,



Councillor Carl Macey
Chairman of the Health Scrutiny Committee for Lincolnshire
(Email: CllrC.Macey@lincolnshire.gov.uk)

EXTRACTS FROM UNITED LINCOLNSHIRE HOSPITALS NHS TRUST BOARD

11 JUNE 2020

Set out below are extracts from the paper submitted to the United Lincolnshire Hospitals NHS Trust (ULHT) Board on 11 June 2020, which summarise the main changes from ULHT's restoration plan.

Trust Service Configuration

This temporary service change is part of the Trust's broader response to covid-19 and part of a holistic approach to Restore and Recovery phases.

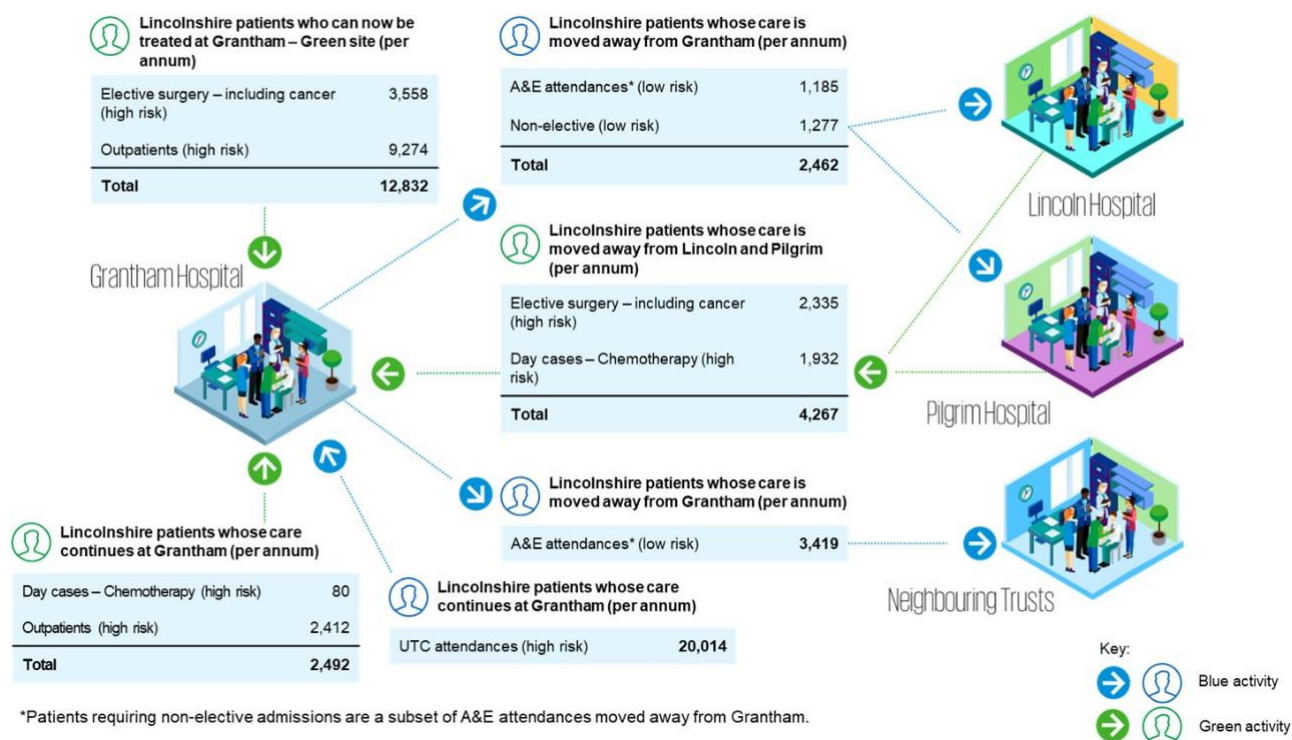
A summary of re-configuration required by site is provided below:

Site	High level summary	Changes required from the existing reconfiguration
Lincoln	Blue site with Green pathway for Critical Care Surgery, Radiotherapy and Cardiac Surgery Only	Cease operating on all other cases other than critical care surgery.
Pilgrim	Blue site with Green pathway for Critical Care Surgery Only	Cease operating on all other cases other than critical care surgery.
Grantham	Substantially Green site with all services being devoted to elective/cancer care. Increase capacity. Isolated Blue UTC service.	Increase elective care beds and theatre capacity for cancer. Remove medical admissions and transfer to blue sites. Convert A&E to Urgent Treatment Centre ('UTC') and make physical estate changes to isolate from the rest of site. UTC isolation can be done in a way that removes staff/patient movement between Blue and Green areas Level 1 unit although does not offer critical care can accommodate more surgical capacity than no other Green site has.
Louth	Green site once work has completed with NHS property services	Restart all ULHT services once physical changes have been made to support safe restart.
BMI Lincoln Hospital	Green site limited to elective services. Ophthalmology initially then orthopaedics.	Reopen as currently closed to support staffing at other sites
Boston Ramsay Hospital	Green site limited to elective services. TBC	Reopen as currently closed to support staffing at other sites

Green Site Model – Likely Patient Impact

A summary of the patient impact of the Green site model is provided below:

Green site model – Patient Impact



The numbers described in the above infographic are representative of known modelling assumptions at the point of production of this report. Throughout Covid-19 pandemic both emergency and planned demand for services have changed much more than normal seasonal variation and as such whilst this has been considered it does reduce the accuracy of future forecasts.

Green site – Elective and diagnostic activity – Likely patient impact

Overall, the Green site at Grantham will positively impact the population of Lincolnshire. The case for change evidenced the requirement to temporarily reconfigure services to address the impact on patients as a result of the covid-19 surge.

The following details how the drivers for change are addressed:

Cancer Performance

The volume of patients treated with cancer surgery pre-covid-19 was 35 per week.

For a short period during the latter two weeks of April 2020, cancer surgery was stopped whilst the necessary preparation was undertaken to create discrete green and blue pathways. Since the beginning of May, with the introduction of green and blue pathways cancer surgery has increased from nil to 22 per week, however, further increases are restricted due to green pathway capacity at Lincoln and Pilgrim.

The introduction of the green site at Grantham, this will give ULHT the capacity– in addition to the existing green pathways – to exceed the previous pre-covid-19 level and deliver cancer surgery for all of Lincolnshire – reducing waiting times and improving patient outcomes.

The Green site at Grantham will support delivery of all cancer surgical activity for patients across Lincolnshire that require Level 1 post-operative critical care. Within 2-3 weeks there will be no waiting list for cancer surgery.

That would be the case for the majority of patients needing surgery for breast, gynaecology, ENT/OMF and urology malignancies.

Patients needing high dependency and critical care post-operatively will continue to be operated on at Lincoln and Pilgrim through their Green pathways, as they are at present.

Chemotherapy will continue at Grantham and, as such, 80 haematology patients and oncology patients will receive treatment. Chemotherapy will also include patients from Lincoln and Pilgrim. As such, 1,932 haematology patients and oncology patients will move from Lincoln and Pilgrim to safely receive treatment at Grantham.

Planned Elective

Planned elective surgery has ceased, resulting in significantly increased waiting times. The introduction of a Green site at Grantham will enable planned elective surgery to resume in the Restore phase and maintain the waiting list level ensuring that there is no further deterioration of waiting times.

The number of patients receiving elective surgery for the following specialities at Grantham; colorectal, urology, gynaecology, and cancer minor OPD procedures in dermatology and ENT/ oral Maxillofacial, will increase by over 3,500 patients per annum with Grantham as a Green site.

In addition, the number of patients receiving outpatients care can increase by over 9,000 patients per annum with Grantham as a Green site.

The proposal provides a benefit to all patient groups in an innovative way through providing the ability to continue with elective care in a controlled environment, to stabilise, and avoid the patient waiting list for elective treatments growing whilst we manage the covid-19 situation.

To mitigate the impact of the extra travel requirement on patients, particularly those on the East Coast, ULHT is working with its partners to provide effective transport solutions. This is not expected to be a constraint on the deliverability of the model given recent experience in the Manage phase of response to covid-19 pandemic.

Theatre capacity – The theatre capacity available in the Restore phase will only support cancer surgery and limited non-cancer elective surgery. The limited non-cancer surgery capacity will be sufficient to prevent further increase in waiting lists. More theatre capacity will be required to significantly reduce waiting lists.

Urgent Diagnostics

The introduction of a Green site model at Grantham will enable urgent diagnostics to increase in a low risk environment where all patients including those who may be vulnerable or susceptible to infection can receive the necessary tests. The capacity will ensure that patients will receive diagnostics in a timely manner, preventing further deterioration of waiting times and reducing the risk of delay in diagnosis.

The Green site model will support the majority of diagnostics required for cancer patients and urgent elective patients, whilst adhering to the Infection Prevention and Control design principles.

Endoscopy – Endoscopy procedures are aerosol generating and current guidance is impacting on service capacity due to IPC controls and cleaning time required between patients. Current endoscopy capacity is reduced by 70% of normal activity and is focused on cancer and urgent work.

The demand management pathways for upper GI and lower GI introduced during the Manage phase are proving successful. Patients are currently scheduled for barium/CT CAP scans in the first instance and results are reviewed by a senior clinician to determine whether patients still require an endoscopy procedure. This will continue in the Restore phase.

Modelling indicates that the Green site will support endoscopy procedures for all cancer patients, whilst adhering to the IPC design principles, based on twelve-hour sessions running seven days a week.

Additional capacity is likely to be required, as due to IPC considerations the number of endoscopies performed cannot rapidly return to the pre-covid-19 level. As such, in the recovery phase, Louth will be operationalised as a Green endoscopy pathway. It is also possible that the Independent sector capacity can be utilised as needed.

Grantham – Blue – Urgent Treatment Centre – Likely Patient impact

The conversion from an A&E to a UTC at Grantham will impact the population of Lincolnshire.

Lincolnshire patients whose care is moved away from Grantham (per annum)

The majority of patients (over 20,000 attendances per annum who attended the A&E) will be able to attend the UTC and will benefit from the increase in opening hours from 8pm to 6.30pm to a 24/7 walk-in service.

Nevertheless, 4,603 patients (12 per day) who attend Grantham A&E (19% of total attendances) will be treated at other hospitals as a result of the reduction of NEWS score – of these, 1,184 patients (3 per day), will be treated at Lincoln and Pilgrim and 3,419 patients (9 per day) will be treated at other neighbouring Trusts.

In addition, 1,560 patients (4 per day) of the 4,603 patients who will be treated at other sites will require admission at these other sites. Of these 401 patients (1 per day) will be admitted and treated at Lincoln and Pilgrim and 1,159 patients (3 per day) will be admitted and treated at other neighbouring Trusts.

Transfers from Grantham as a result of A&E to UTC conversion and withdrawal of medical beds at Grantham

Some patients who attend the UTC will require admission and will be transferred to a different site, as the UTC would not support direct emergency admission to Grantham hospital. Due to the provision of the Ambulatory Care Unit, fewer patients will require transfer to another hospital site than without.

In total, 874 patients (3 per day) will be required to transfer to other sites, the majority of whom will be transferred to other ULHT sites. This represents an additional 20 patient transfers, as 854 patients were already transferred to other ULHT sites in April 2019 to March 2020 under existing protocols.

Re-routed admission from multiple non-A&E routes as a result of a withdrawal of medical beds at Grantham

A total of 1,198 admissions (3 a day) were made to medical beds at Grantham from multiple non-A&E routes between April 2019 and March 2020.

As medical beds will be withdrawn at Grantham, 476 patients will be treated at the Ambulatory Care Unit (largely GP referrals) and 772 patients will be re-routed and admitted at Lincoln. As previously described in this report, these volumes describe previous years' referral models pre-covid-19 and as such may be overstated.

Equality impact assessment and quality impact assessment have been completed and support this configuration.

Addressing the Case for Change

There will be no medical bed admissions at Grantham to adhere to IPC principles, and as such it would not be possible to have an A&E in the proposed configuration. Nevertheless, converting the A&E to a UTC maintains urgent care for the Grantham population which allows for colocation of a green site and urgent care.

Out of hours (OOH) services at Grantham hospital will continue to operate as part of the Blue – UTC footprint, and therefore patient pathways that involve accessing the existing OOH will be unaffected by changes.

County Offices, Newland,
Lincoln, LN1 1YL
www.lincolnshire.gov.uk



(Sent via email)

Mr Andrew Morgan
Chief Executive
United Lincolnshire Hospitals NHS Trust

Andrew.morgan@ulh.nhs.uk

Cllr Martin Hill OBE
Leader
Lincolnshire County Council
cllrm.hill@lincolnshire.gov.uk

6 July 2020

Dear Andrew

Emergency and Urgent Care in Lincolnshire

You will recall that I wrote to you in February of this year, following the County Council's approval of a motion on the future of emergency and urgent care at Grantham and District Hospital. The recent decision of the NHS in Lincolnshire to convert Grantham into a 'green' site; to discontinue medical beds at Grantham; and to convert Grantham A&E into an urgent treatment centre has again led to a motion being passed by the County Council on emergency and urgent care in Lincolnshire. I am thus writing to you to set out the contents of the County Council's motion.

The Council has serious concerns on the NHS's decision to turn Grantham A&E into an urgent treatment centre on a 'temporary' basis, although I acknowledge that the 24/7 walk-in arrangement represents a small amount of progress. I hope you appreciate that people in Grantham are sceptical when the term 'temporary' is used, as it is now nearly four years since Grantham A&E was closed overnight as a 'temporary' measure. Since August 2016, there have been continuous campaigns to re-open Grantham Hospital 24/7 for emergency treatment, with the closure raised at a national level by local Members of Parliament, senior members of the County Council, and the Council's Health Scrutiny Committee.

The operational and infection prevention and control benefits of a 'green' site at Grantham for the care of patients across Lincolnshire without covid-19 are understood. However, six patients per day have been admitted to the medical beds at Grantham and the Council has serious concerns that the withdrawal of all these beds represents a further downgrading of services. Furthermore, the Council is not convinced that all the medical beds at Grantham have to be closed, particularly as both Lincoln and Pilgrim will be operating as part 'green' and part 'blue' sites. The Council would like

confirmation when these medical beds (either partially or in full) will be re-instated with the required medical cover.

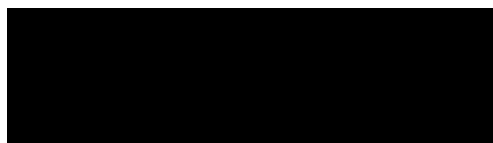
Whilst the Grantham patients requiring a medical admission will have to be admitted to either Lincoln or Pilgrim, a significant number of patients from other parts of Lincolnshire will be travelling to Grantham for their elective treatment. The Council is concerned that Lincolnshire residents will need to travel excessive distances to access their health care. I would like to see a written assurance on what transport support will be available for patients and their families.

In addition, in August 2019, ULHT was allocated capital funding of £21.5 million by the Prime Minister to upgrade accident, emergency and urgent treatment facilities at Pilgrim Hospital. This funding, which is intended to improve patient flow in and out of the emergency department, is of course welcomed. Whilst the Council recognises the challenges facing ULHT owing to covid-19, the County Council would oppose any downgrading of emergency and urgent facilities at Pilgrim Hospital in the light of this investment. Accordingly, the Council would like to see detailed plans for the use of the £21.5 million investment at Pilgrim and to receive a written assurance that this investment will not result in any downgrading of facilities for emergency or urgent care on that site.

As you know, the *Healthy Conversation 2019* engagement exercise concluded in October 2019 and a report on it was published in March 2020. I understand that the next stage is that full public consultation should take place as part of the Lincolnshire's Lincolnshire NHS Long Term Plan, including the acute services review. The Council would like to receive an assurance that consultation to achieve substantial changes in line with the *Healthy Conversation 2019* is undertaken as soon as possible.

I share the disappointment expressed by many members of the County Council over the way these plans have been brought forward, with very short notice given to the people of Grantham, as well as the rest of Lincolnshire, and the apparent lack of consultation with the affected staff.

Yours sincerely



Councillor Martin Hill, OBE
Leader, Lincolnshire County Council

CC - Mr John Turner, Chief Executive, NHS Lincolnshire Clinical Commissioning Group

County Offices, Newland,
Lincoln, LN1 1YL
www.lincolnshire.gov.uk



(Sent via email)

Mr John Turner
Chief Executive
NHS Lincolnshire Clinical Commissioning
Group

Johnturner19@nhs.net

Cllr Martin Hill OBE
Leader

Lincolnshire County Council
cllrm.hill@lincolnshire.gov.uk

6 July 2020

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The Council has serious concerns on the NHS's decision to turn Grantham A&E into an urgent treatment centre on a 'temporary' basis, although I acknowledge that the 24/7 walk-in arrangement represents a small amount of progress. I hope you appreciate that people in Grantham are sceptical when the term 'temporary' is used, as it is now nearly four years since Grantham A&E was closed overnight as a 'temporary' measure. Since August 2016, there have been continuous campaigns to re-open Grantham Hospital 24/7 for emergency treatment, with the closure raised at a national level by local Members of Parliament, senior members of the County Council, and the Council's Health Scrutiny Committee.

The operational and infection prevention and control benefits of a 'green' site at Grantham for the care of patients across Lincolnshire without covid-19 are understood. However, six patients per day have been admitted to the medical beds at Grantham and the Council has serious concerns that the withdrawal of all these beds represents a further downgrading of services. Furthermore, the Council is not convinced that all the medical beds at Grantham have to be closed, particularly as both Lincoln and Pilgrim

will be operating as part 'green' and part 'blue' sites. The Council would like confirmation when these medical beds (either partially or in full) will be re-instated with the required medical cover.

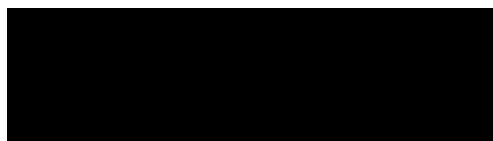
Whilst the Grantham patients requiring a medical admission will have to be admitted to either Lincoln or Pilgrim, a significant number of patients from other parts of Lincolnshire will be travelling to Grantham for their elective treatment. The Council is concerned that Lincolnshire residents will need to travel excessive distances to access their health care. I would like to see a written assurance on what transport support will be available for patients and their families.

In addition, in August 2019, ULHT was allocated capital funding of £21.5 million by the Prime Minister to upgrade accident, emergency and urgent treatment facilities at Pilgrim Hospital. This funding, which is intended to improve patient flow in and out of the emergency department, is of course welcomed. Whilst the Council recognises the challenges facing ULHT owing to covid-19, the County Council would oppose any downgrading of emergency and urgent facilities at Pilgrim Hospital in the light of this investment. Accordingly, the Council would like to see detailed plans for the use of the £21.5 million investment at Pilgrim and to receive a written assurance that this investment will not result in any downgrading of facilities for emergency or urgent care on that site.

As you know, the *Healthy Conversation 2019* engagement exercise concluded in October 2019 and a report on it was published in March 2020. I understand that the next stage is that full public consultation should take place as part of the Lincolnshire's Lincolnshire NHS Long Term Plan, including the acute services review. The Council would like to receive an assurance that consultation to achieve substantial changes in line with the *Healthy Conversation 2019* is undertaken as soon as possible.

I share the disappointment expressed by many members of the County Council over the way these plans have been brought forward, with very short notice given to the people of Grantham, as well as the rest of Lincolnshire, and the apparent lack of consultation with the affected staff.

Yours sincerely



Councillor Martin Hill, OBE
Leader, Lincolnshire County Council

CC - Mr Andrew Morgan, Chief Executive, United Lincolnshire Hospitals NHS Trust

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