

# Agenda Item 6

		<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

Open Report on behalf of Andrew Crookham  
Executive Director - Resources

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>16 September 2020</b>
Subject:	<b><i>Healthy Conversation 2019 and Next Steps</i></b>

## Summary

This item enables the Health Scrutiny Committee for Lincolnshire to consider the final report on the *Healthy Conversation 2019* engagement exercise and the next steps for the local NHS, for example, the development of plans for public consultation on elements of the Lincolnshire Acute Services Review.

This report includes a summary of the responses of the Committee to the *Healthy Conversation 2019* engagement exercise between May and October 2019. The Committee made comments on:

- all eight strands of the Lincolnshire Acute Services Review;
- two further topics: mental health, learning disabilities and autism and integrated community care; and
- the overall engagement exercise, and the availability of capital funding.

The report on the *Healthy Conversation 2019* engagement exercise is also attached to this report. Senior representatives from Lincolnshire Clinical Commissioning Group will be present to answer questions on both this and the next steps.

## Actions Required

- (1) To consider the Health Scrutiny Committee's own responses to the *Healthy Conversation 2019* engagement exercise, as background to the Committee's consideration final engagement report.
- (2) To consider how the Committee engages in the next steps by the local NHS, as pre-consultation business cases and draft consultation documentation are developed.

## 1. Healthy Conversation Engagement Exercise

The *Healthy Conversation 2019* engagement exercise took place between March and October 2019. The exercise sought the views of people in Lincolnshire on the eight strands of the Lincolnshire Acute services Review, as well as other topics such as integrated community care and mental health, learning disability and autism.

As stated in the *Healthy Conversation* engagement report summary the key messages are that the people of Lincolnshire:

- have respect and admiration for staff in the NHS
- believe that prevention is better than cure
- would like more education on healthier lifestyles and prevention
- want support to manage their own health conditions pro-actively
- want help to look after themselves better
- recognise that NHS staff and skills are precious and we should use them sensibly
- acknowledge that seeing a doctor is not always the best option
- are enthusiastic about engaging with us through digital means as much as possible
- want joined up care
- are genuinely concerned about how the NHS can help people living in deprived areas

The Final Report for *Healthy Conversation 2019* is attached as Appendix B to this report, together with five further supporting appendices: -

- B1 - Purpose and Activities
- B2 - Engagement Feedback:
- B3 - Workshop Frequently Asked Questions
- B4 - Acute Services Review Survey Report
- B5 - The People's Partnership Acute Services Review - Engagement with Hidden and Hard to Reach Communities (Executive Summary).

## 2. Health Scrutiny Committee Activity on Healthy Conversation 2019

From May to October 2019, the Committee considered one or more *Healthy Conversation* items at each meeting during this period. In most instances, clinicians were present to support the information presented to the Committee. Following each meeting the Chairman wrote to the Lincolnshire Sustainability and Transformation Partnership, setting out the Committee's views.

The following table lists the dates the items were considered, together with the date the letter was sent on behalf of the Committee.

<b>Committee Date</b>	<b>Item</b> (* ) = <i>Acute Services Review Item</i>	<b>Date Feedback Letter Sent to Local NHS</b>
15 May 19	Urgent and Emergency Care (*)	23 May 19
12 June 19	Stroke Services (*) Breast Services (*) Women's and Children's Services (*)	4 July 19
10 July 19	Mental Health, Learning Disability and Autism Services	19 July 19
18 Sept 19	Healthy Conversation / Estates / Capital Update	26 Sept 19
	General Surgery (*) Trauma and Orthopaedics (*) Grantham Acute Medicine (*)	24 Oct 19
16 Oct 19	Haematology and Oncology (*) Integrated Community Care	24 Oct 19

The Committee's responses to the specific *Healthy Conversation* topics are summarised in Appendix A to this report. The response to the general update, dated 26 September 2019, is summarised below.

#### Committee's General Comments on Engagement - Summary

On 18 September 2019, the Committee considered a general update on the *Healthy Conversation 2019* engagement exercise. Following the meeting, the following points were raised by the Chairman:

- Reach of Engagement Activity – There were concerns over the level of engagement, given the Lincolnshire population of 700,000 people. There was an expectation for a leaflet to be sent to every household for the full consultation proposals, which will lead to better rate of response.
- Workshops in Boston and Grantham – There were concerns recorded over the workshops in Boston and Grantham in June and October 2019.
- Use of Shopping Centres, Supermarkets and Markets – There should have been more advance publicity for this.
- Estates and Capital Expenditure – There was a confirmation made at the Committee meeting on 18 September 2019 that if capital funding was not available for any particular acute services review item, consultation on that item might be deferred. Consultation on other acute services review items with either identified capital funding or no requirement for capital funding would proceed, in line with NHS England rules and guidance.

Concerns were also recorded on the backlog in the repairs and maintenance of buildings, although it was understood that the NHS had prioritised direct services to patients over the fabric of the buildings.

- Transport – The Committee identified the performance of the non-emergency patient contract as key to supporting patient access to services.

### 3. Consultation

This report includes a summary of the Committee's responses to the *Healthy Conversation* engagement exercise in 2019. It is understood that consultation on the following four elements of the acute services review (not requiring significant capital funding) will take place first:

- Medical Services / Acute Medicine (Grantham and District Hospital)
- Stroke Services
- Trauma and Orthopaedic Services
- Urgent and Emergency Care Services

The following elements of the acute services require significant capital funding and subject to this, consultation will take place when this is available:

- Breast Services
- General Surgery Services
- Haematology and Oncology Services
- Women's and Children's Services

### 4. Conclusion

The Health Scrutiny Committee is requested to consider its own responses to the *Healthy Conversation 2019* engagement exercise, as background to the Committee's consideration final engagement report. The Committee is also requested to consider how the Committee engages in the next steps for the local NHS, as pre-consultation business cases and draft consultation documentation are developed.

### 5. Appendices

These are listed below and set out at the end of this report.

Appendix A	Health Scrutiny Committee for Lincolnshire - Responses to Specific Topics in the <i>Healthy Conversation 2019</i> Engagement Exercise
Appendix B	Final Report for <i>Healthy Conversation 2019</i>
Appendix B1	<i>Healthy Conversation 2019</i> - Purpose and Activities

Appendix B2	Engagement Feedback: <ul style="list-style-type: none"> <li>• Nine open engagement events</li> <li>• Paper and online forms and queries</li> <li>• Workshops 1 &amp; 2</li> <li>• Market days</li> <li>• Community group meetings</li> <li>• Stamford Freshers' Fayre</li> </ul>
Appendix B3	Workshop Frequently Asked Questions
Appendix B4	Acute Services Review Survey Report
Appendix B5	The People's Partnership Acute Services Review - Engagement with Hidden and Hard to Reach Communities (Executive Summary only) Full report available at: <a href="https://www.lincolnshire.nhs.uk/healthy-conversation/healthy-conversations-2019-report">https://www.lincolnshire.nhs.uk/healthy-conversation/healthy-conversations-2019-report</a>

## 6. Background Papers

The following background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

<b>Letters from Councillor Carl Macey, the Chairman of the Health Scrutiny Committee for Lincolnshire, to John Turner, Senior Responsible Officer, Lincolnshire Sustainability and Transformation Partnership.</b>	
<b>Date of Letter</b>	<b>Items Covered in Letter</b>
23 May 2019	Urgent and Emergency Care Information Available to the Public
4 July 2019	Women's and Children's Services Breast Services Stroke Services Transport Provision Information Available to the Public
19 July 2019	Mental Health, Learning Disability and Autism Services
26 September 2019	Reach of Engagement Activity Workshops in Boston and Grantham Estates and Capital Expenditure
24 October 2019	Haematology and Oncology
24 October 2019	Grantham Medical Beds Trauma and Orthopaedics General Surgery
24 October 2019	Integrated Community Care

This report was written by Simon Evans, Health Scrutiny Officer, who can be contacted on 01522 553607 or by e-mail at [Simon.Evans@lincolnshire.gov.uk](mailto:Simon.Evans@lincolnshire.gov.uk)

## HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE

### RESPONSES TO SPECIFIC TOPICS IN *HEALTHY CONVERSATION 2019* ENGAGEMENT EXERCISE

ACUTE SERVICES REVIEW ITEMS			
The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Breast Services</u></p> <p>First outpatient appointments and all surgery would be provided at a centre of excellence, either at Lincoln Hospital or Grantham Hospital, with the current preferred emerging option as Lincoln, as it requires the least amount of capital funding.</p> <p>All follow-up outpatient appointments (where most patients receive their care) and routine breast mammography screening services would continue to be available across the county as now.</p>	12 June 19	4 July 19	<ul style="list-style-type: none"> <li>• Recognition that national clinical guidelines would change the current model of care at ULHT.</li> <li>• Strong support for maintaining local services for mammography, follow-up outpatients and community support services.</li> <li>• Concerns on the finances required (estimated at £4.7m) to expand the breast unit at Lincoln County Hospital as a major risk, owing to a lack of identified funding.</li> <li>• Need for clarification on the 1,151 patients per annum (22.7%) being displaced from current ULHT Breast Services.</li> <li>• Early consultation recommended.</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>General Surgery Services</u></p> <p>Most elective care would be at Grantham Hospital as a 'centre of excellence for elective short stay and day case general surgery'. Lincoln and Pilgrim Hospitals will provide some day case/elective care for patients needing complex surgery. Outpatients will remain at all three hospitals.</p>	18 Sept 19	24 Oct 19	<ul style="list-style-type: none"> <li>• Strong support for reduced cancellation rates, as an outcome of the emerging option.</li> <li>• Support for increasing day-case general surgery.</li> <li>• Support for new surgical facilities at Grantham Hospital, with a fifth theatre to increase activity.</li> <li>• Assurance received that plans for winter resilience would not impact significantly on the number of planned operations, taking place in January and February.</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Haematology and Oncology Services</u></p> <ul style="list-style-type: none"> <li>• All haematology and oncology inpatient services would be at Lincoln.</li> <li>• All other services stay the same:               <ul style="list-style-type: none"> <li>➤ haematology and oncology outpatients and day cases to continue at all three hospitals.</li> <li>➤ chemotherapy and radiotherapy to continue at Lincoln Hospital.</li> <li>➤ chemotherapy day cases to continue at Pilgrim and Grantham Hospitals.</li> </ul> </li> </ul>	16 Oct 19	24 Oct 2019	<ul style="list-style-type: none"> <li>• Concern that the public would see this as a loss of service for Boston and the surrounding area</li> <li>• Reassurance sought that the emerging option would ease pressure on Lincoln and deliver the Lincolnshire Cancer Strategy.</li> <li>• Concerns over transport and travel from Boston to Lincoln, particularly for haematology and oncology patients.</li> <li>• Support for reduced reliance on locums and agency staff.</li> <li>• Concerns over availability of capital funding to increase the number of beds at Lincoln from 32 to 49, to support the transfer of inpatients from Pilgrim.</li> <li>• Emphasis on earlier diagnosis would lead to great demands on diagnostic services.</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Medical Services</u></p> <p>There are two emerging options:</p> <p>(1) Inpatient medical services at Grantham Hospital would be retained as part of a model where hospital doctors and services are part of an integrated service with GP services, community health and other services. This model would also deliver more ambulatory care. A small number of patients currently treated in Grantham would be admitted to hospitals with more specialist services. This is the NHS's preferred emerging option.</p> <p>(2) There would be no medical inpatient services at Grantham Hospital. Diagnostics and outpatients would continue.</p>	18 Sept 19	24 Oct 19	<ul style="list-style-type: none"> <li>• Initial preference for Option (1), as a means of stabilising Grantham Hospital.</li> <li>• Welcome for the involvement of local clinicians in the development of options.</li> <li>• Different ways of working by all staff involved.</li> <li>• Concern on the availability of funding for Option (1), should it be required.</li> <li>• Medical admissions to Grantham Hospital should continue on a 24/7 basis.</li> <li>• Plans for staff to be integrated, supporting both medical beds and urgent care noted.</li> <li>• Expectation for greater scope for children with more acute needs to be seen at Grantham.</li> <li>• More detail requested on how option (1) would work in practice</li> <li>• Option (2) not supported, as this would remove services from Grantham Hospital.</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Stroke Services</u></p> <p>Two emerging options:</p> <p>(1) This option would provide a centre of excellence, providing acute stroke care from the Lincoln Hospital site. This is the NHS's preferred emerging option because it will provide the best model to meet national care standards for patients, and to recruit and retain staff.</p> <p>(2) This option would retain the current service at Lincoln and Pilgrim Hospitals but with an out of hours combined on-call rota being based at Lincoln.</p> <p>In both options, the NHS's intention is to enhance rehabilitation in the community, to reduce the length of stay in hospital from 14 days to 7 days in line with national best practice.</p>	12 June 19	4 July 19	<ul style="list-style-type: none"> <li>• Acceptance that the preferred option had been developed in line with national clinical guidelines.</li> <li>• Acknowledgement of significant workforce gaps to meet the clinical guidelines for staffing levels.</li> <li>• Recruitment to a centre of excellence for Stroke Services aimed to recruit and retain staff.</li> <li>• Welcome for the proposal for an enhanced community stroke rehabilitation service as part of the emerging option.</li> <li>• Acceptance of the benefit of a centre of excellence, but concern recorded on the travelling times to the Lincoln County Hospital site for patients across the county.</li> <li>• Concern that patients from Pilgrim Hospital would be displaced to North West Anglia NHS Foundation Trust.</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Trauma and Orthopaedic Services</u></p> <ul style="list-style-type: none"> <li>• Grantham Hospital as a centre of excellence for planned and day case orthopaedic surgery.</li> <li>• Lincoln and Pilgrim Hospitals to provide some day case surgery and planned care for patients with complex needs.</li> <li>• Outpatient services unchanged.</li> </ul>	18 Sept 19	24 Oct 19	<ul style="list-style-type: none"> <li>• Support for the emerging option for the trauma and orthopaedic service, as the trauma and orthopaedic service pilot has seen a reduction in the waiting list and cancelled operations.</li> <li>• Welcome for the fact that ULHT has been highlighted as an example of good practice.</li> <li>• Concerns from the staff as to the future of the orthopaedic service at Louth County Hospital need to be addressed.</li> <li>• Risks associated with the pilot are being monitored and managed as part of the routine management process at ULHT.</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Urgent and Emergency Care Services</u></p> <p>(a) A&amp;E services at both Lincoln and Pilgrim Hospitals, with urgent treatment centres at each site;</p> <p>(b) Urgent treatment centre at Grantham Hospital to provide 24 hour, seven day a week access to urgent care services, with NHS111 as the entry point to the urgent treatment centre overnight; urgent treatment to receive patients by ambulance, with refinements to the current access criteria; and</p> <p>(c) Develop urgent treatment centre services at Louth, Stamford and Skegness Hospitals; and</p> <p>(d) Exploring options for urgent treatment centres in Spalding and Gainsborough.</p>	15 May 19	23 May 19	<ul style="list-style-type: none"> <li>• Acceptance that the introduction of urgent treatment centres (by autumn of 2020) is a national initiative, so no major concerns on (a) and (c), other than the need for 24/7 walk in access.</li> <li>• Concerns over continued absence of A&amp;E facilities in the Grantham and surrounding area overnight.</li> <li>• The proposal in (b) should be on a 24/7 walk-in basis.</li> <li>• Need for a list of the services undertaken currently at Grantham A&amp;E and those services proposed for Grantham urgent treatment centre.</li> <li>• Support for (d).</li> </ul>

## ACUTE SERVICES REVIEW ITEMS

The Lincolnshire NHS's Emerging Option (Summary)	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Initial Comments
<p><u>Women's and Children's Services</u> - There are two emerging options. (1) is preferred by the Lincolnshire NHS.</p> <p>(1) <u>Pilgrim Hospital</u></p> <ul style="list-style-type: none"> <li>• consultant led obstetrics and co-located midwife-led unit</li> <li>• Special care unit for babies from 32 weeks.</li> <li>• paediatric assessment ward for up to 23 hours low acuity paediatric in-patient beds overnight</li> <li>• paediatric day case surgery.</li> <li>• gynaecology</li> </ul> <p><u>Lincoln Hospital</u></p> <ul style="list-style-type: none"> <li>• consultant-led obstetrics and co-located midwife-led unit</li> <li>• neonatal unit for babies born from 27 weeks</li> <li>• short stay paediatric assessment ward</li> <li>• paediatric in-patient beds</li> <li>• paediatric day case and planned surgery.</li> <li>• gynaecology</li> </ul> <p>(2) The second emerging option is to have consultant obstetric, neonatal and paediatric services at Lincoln Hospital and a midwife-led unit and short stay paediatric assessment ward at Pilgrim Hospital.</p>	12 June 19	4 July 19	<ul style="list-style-type: none"> <li>• Work to ensure women across Lincolnshire receive continuity of care to improve outcomes and safety, and offer a more positive and personal experience.</li> <li>• Support for improvements to personalised care and choice through the development of community hubs, which have enabled women and families to access care closer to home.</li> <li>• Support for two additional hubs, and continued collaboration with the local authority to identify appropriate locations for these new sites.</li> <li>• Focus on mental health services, including the development of a multi-professional service for women with high perinatal mental health needs welcomed.</li> <li>• Promotion of more public awareness of the <i>Healthy Conversation</i> process for women's and children's services supported.</li> <li>• The Committee also would like to highlight the need for on-going connection and engagement with groups in Boston, to better seek the views of the local community on the emerging options and changes to paediatric services.</li> </ul>

## OTHER HEALTHY CONVERSATION TOPICS

Summary of Healthy Conversation	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Comments
<p><u>Mental Health, Learning Disability and Autism Services</u></p> <ul style="list-style-type: none"> <li>• Need improve all services in a way which is affordable and linked with wellbeing services, particularly how they are delivered and accessed within our local communities.</li> <li>• Work being undertaken with service users and partners to make it easier for patients in crisis to access support first time.</li> <li>• Parity of esteem with physical health, so that people with mental health problems benefiting from:               <ul style="list-style-type: none"> <li>➢ equal access to the most effective and safest care and treatment</li> <li>➢ equal efforts to improve the quality of care</li> <li>➢ the allocation of time, effort and resources on a basis commensurate with need</li> <li>➢ equal status within healthcare education and practice</li> <li>➢ equally high aspirations for service users</li> <li>➢ equal status in the measurement of health outcomes</li> </ul> </li> </ul>	12 July 2019	19 July 2019	<ul style="list-style-type: none"> <li>• Important to ensure information is made widely available on the services provided, so that patients know where to go to get help and how to access it. To this end, the development of an 'app' for use on mobile phones and directories of services were supported.</li> <li>• Need for a continued focus on reducing waiting times, as this was key in preventing further deterioration of an individual's mental wellbeing before they can access support.</li> <li>• Value of support provided through the Managed Care Network and through other independent local schemes.</li> <li>• Support for the expansion of perinatal mental health services.</li> </ul>

## OTHER HEALTHY CONVERSATION TOPICS

Summary of Healthy Conversation	Health Scrutiny Committee		
	Date Considered	Date Initial Comments Submitted	Summary of Comments
<p><u>Integrated Community Care</u></p> <p>Four key programme areas were identified:</p> <ul style="list-style-type: none"> <li>• Neighbourhood Working / Neighbourhood Teams</li> <li>• Introduction of Primary Care Networks</li> <li>• Use of Technology</li> <li>• Development of Specialist Community Services.</li> </ul>	16 Oct 2019	24 Oct 2019	<ul style="list-style-type: none"> <li>• As the implementation of neighbourhood teams and primary care networks was a work in progress, no formal comments made at this stage.</li> </ul>

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