

Agenda Item 4

		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

Report to	Health Scrutiny Committee for Lincolnshire
Date:	16 December 2020
Subject:	Chairman's Announcements

1. The UK Government's Covid-19 Winter Plan

On 23 November 2020, the Government published its *Covid-19 Winter Plan*, which confirmed that from 2 December 2020 England would return to the three-tier approach in response to Covid-19. The *Covid-19 Winter Plan* detailed all the restrictions for each tier and is available on the Government website:

<https://www.gov.uk/government/publications/covid-19-winter-plan>

The Government has stated that decisions on which tier would apply to an area would be primarily based on five epidemiological indicators:

- case detection rates in all age groups;
- case detection rates in the over-60s;
- the rate at which cases are rising or falling;
- positivity rate (the number of positive cases detected as a percentage of tests taken); and
- pressure on the NHS, including current and projected occupancy.

On 26 November 2020, the Government announced that Lincolnshire would be in tier 3 (very high alert) for the following reason:

"There has been an overall improvement, but case rates remain high throughout the county, at 307 per 100,000 and in the over 60s it is 281 per 100,000. NHS pressures in Lincolnshire remain high and show signs of increasing, particularly for the units treating the more serious cases."

The Humber (including North East Lincolnshire, North Lincolnshire), Leicestershire and Nottinghamshire have also been placed in tier 3. Cambridgeshire (including Peterborough), Norfolk, Northamptonshire and Rutland have been placed in tier 2 (high alert).

On 30 November 2020, the Government published *Analysis of the Health, Economic and Social Effects of Covid-19 and the Approach to Tiering*. The tiers allocated to each area are due to be reviewed by the Government on 16 December 2020, with any changes implemented from 19 December 2020.

2. Vaccine Arrangements for Covid-19

Approval of Pfizer / BioNTech Vaccine

On 2 December 2020, the Government announced that it had accepted the recommendation from the Medicines and Healthcare Products Regulatory Agency (MHRA) to approve the Pfizer / BioNTech Covid-19 vaccine. This followed clinical trials and an analysis of the data by the MHRA, who concluded that the vaccine met its standards for safety, quality and effectiveness.

This vaccine is given in two doses, three weeks apart, and data from clinical trials showed the vaccine is 94% effective, with trials suggesting it works equally well in people of all ages, races and ethnicities. The MHRA has reported no serious safety concerns in the trials.

Vaccine Priority Groups

Also on 2 December, the Joint Committee on Vaccinations and Immunisations (JCVI) published its final advice for the priority groups to receive the vaccine, which the Government accepted. The priority groups for Phase 1 are:

1. residents in a care home for older adults and their carers
2. all those 80 years of age and over and frontline health and social care workers
3. all those 75 years of age and over
4. all those 70 years of age and over and clinically extremely vulnerable individuals (essentially those in the 'shielding' group)
5. all those 65 years of age and over
6. all individuals aged 16 years to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality
7. all those 60 years of age and over
8. all those 55 years of age and over
9. all those 50 years of age and over

The JCVI also advised that implementation of the Covid-19 vaccine programme should aim to achieve high vaccine uptake and an age-based programme would likely result in faster delivery and better uptake in those at the highest risk. The JCVI added that deployment at a local level should be flexible, with due attention to:

- mitigating health inequalities, such as might occur in relation to access to healthcare and ethnicity;
- vaccine product storage, transport and administration constraints;
- exceptional individualised circumstances; and
- availability of suitable approved vaccines, for example for specific age cohorts.

Delivery of the Vaccine Programme

On 20 November 2020, in preparation for any approved vaccine, NHS England and NHS Improvement, had written to all NHS chief executives, on the deployment arrangements for Covid-19 vaccines. United Lincolnshire Hospitals NHS Trust was selected as one of the 53 hospital trusts in England to act as hubs for the distribution of the vaccine. Any further information on the deployment of the vaccine in Lincolnshire will be reported to the Committee.

3. Louth and Skegness Urgent Treatment Centres – Patient Survey

On 11 November 2020, the Committee approved its response to the patient survey on the temporary closure of Louth and Skegness Urgent Treatment centres each night between 10 pm and 8 am, which was introduced in March 2020 in response to the Covid-19 pandemic.

This patient survey was undertaken by Lincolnshire Community Health Services NHS Trust (LCHS), and the results are due to be considered by the next LCHS Trust Board on 12 January 2021, when they will be published.

4. Lakeside Healthcare at Stamford

On 11 November 2020, Lincolnshire CCG's Primary Care Commissioning Committee (PCCC) considered a proposal from Lakeside Healthcare to close the St Mary's Medical Centre in Stamford, and consolidate all its primary care services at the Sheepmarket Surgery, on the Stamford and Rutland Hospital campus. Following the PCCC's decision, discussions are continuing between the CCG and Lakeside Healthcare, and any update will be reported at the meeting.

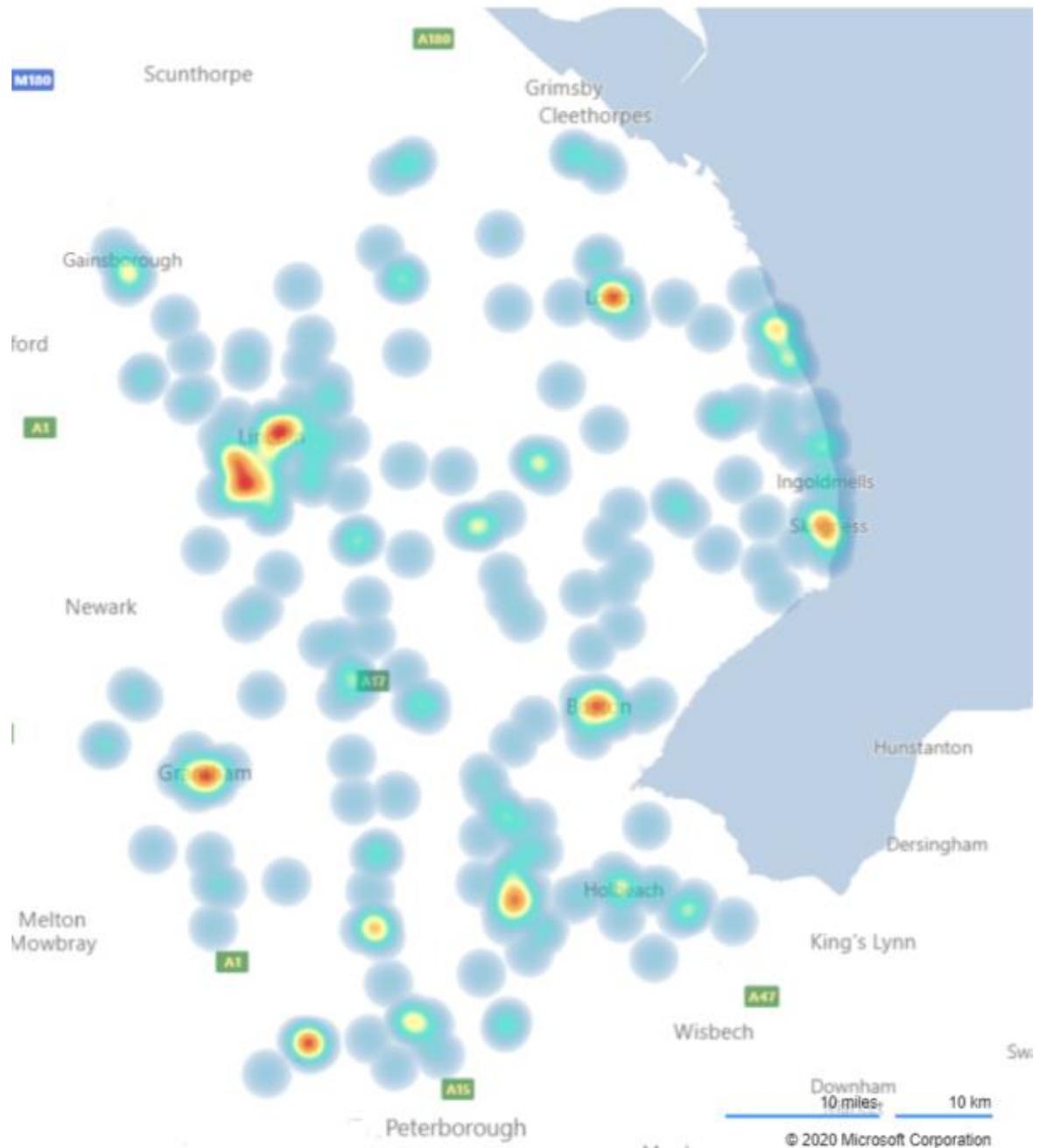
5. Woolsthorpe Branch GP Surgery

A proposal from the Vale Medical Group to close the Woolsthorpe Branch Surgery was considered by this Committee on 14 October 2020, and the Committee agreed to respond to the patient survey exercise. This proposal is due to be considered by the Lincolnshire CCG's Primary Care Commissioning Committee (PCCC) at a forthcoming meeting.

6. Lincolnshire Community Health Services - Hubs

On 11 November 2020, the Committee as part of its consideration of a report from Lincolnshire Community Health Services NHS Trust (LCHS) on urgent care requested additional information on home visiting hubs.

LCHS has advised that home visiting hubs are located in Gainsborough, Grantham, Lincoln and Spalding. Staff based in these hubs undertake visits across the county, which is shown by the heat-map below:



Unregistered Patients

Patients who do not have a regular dentist or have not recently accessed NHS dental care, are advised to contact NHS 111. Patients will then be directed to a dental practice, who can assess patients by phone and if needed face to face care at a practice or one of the seven urgent dental centres in Lincolnshire will be offered.

Christmas / New Year Holiday Arrangements

Dental practices will continue to provide services over the Christmas and New Year period, although opening hours for individual practices may vary. Any dental practices operating reduced hours during the festive period or opting to close on 'contracted' days, remain responsible for their patients and must ensure that suitable alternative arrangements are in place for anyone needing access to urgent dental care. NHS England / NHS Improvement has written to all Lincolnshire NHS dental practices to remind them that if they intend to operate other than their usual hours they must arrange suitable local NHS provision with a "buddy" practice and have a dedicated telephone number to enable their patients to access the alternative local service.

During normal contracted hours a practice should not divert patients to NHS111, out of hours providers or local urgent dental centres. Normal local out of hours arrangements will be in place to provide urgent dental care cover on the public holidays.

8. National Rehabilitation Centre

On 16 September 2020, the Committee approved its response to the consultation on the proposed NHS Rehabilitation Centre at the Stanford Hall Rehabilitation Estate, near Loughborough.

Over 760 survey consultation responses were received and, and as reported to Nottingham and Nottinghamshire CCG Governing Body, they showed:

- 77% strongly support the proposal to create a NHS Rehabilitation Centre at the Stanford Hall Estate. A further 9% slightly support it.
- 52% strongly support the proposal to transfer the service currently provided at Linden Lodge in Nottingham to the NHS Rehabilitation Centre. A further 15% slightly support this.
- 65% feel it is appropriate for NHS patients to be treated on the same site as military personnel. A further 22% perceive that it is to some extent.
- 33% feel that it would be very easy for them to access the NHS Rehabilitation Centre at the Stanford Hall Estate, whilst 19% perceive it will be easy. In contrast, 24% stated it would be difficult or very difficult and 24% neither easy nor difficult.
- 60% feel that the provision of three rooms for families to stay, free parking and superfast broadband would help to reduce the impact of increased travel time that some might face. A further 26% perceive that it would to some extent.

- 73% feel that the care that patients would receive at the NHS Rehabilitation Centre will be excellent. A further 17% perceive it will be very good.
- 66% feel the range of health and social care professionals that patients would have access to is excellent. A further 21% perceive it is very good.
- 72% feel confident that patients' mental health is being taken into account. In contrast, 22% feel that although patients' mental health is being taken into account more could be done and 7% that more needs to be done.

The Decision Making Business Case for the National Rehabilitation Centre was approved by the CCG governing body on 2 December 2020. There are several further steps in the development of the rehabilitation centre, including an outline business case being prepared by Nottingham University Hospitals NHS Trust, which is the lead provider for services at the centre. The timetable reported to the CCG stated that construction of the centre was expected to begin in July 2022 and be completed by 2024.

9. Influenza Vaccination Programme

This season's influenza vaccine has been offered free of charge to 30 million people in England. From 1 December 2020, the programme has been extended to people aged between 50 and 64 years, in order to minimise the impact of influenza on the NHS during the Covid-19 pandemic. Before this date the programme had focused on the following priority groups:

- all children aged two to eleven;
- people aged 65 years or over;
- those aged from six months to less than 65 years of age, in a clinical risk group;
- all pregnant women;
- household contacts of those on the NHS Shielded Patient List, or of immune compromised individuals;
- people living in long-stay residential care homes or other long-stay care facilities;
- those in receipt of a carer's allowance, or who are the main carer of an older or disabled person whose welfare may be at risk if the carer falls ill; and
- all health and social care staff.

NHS Lincolnshire CCG is reminding people in this age group to book in for their vaccination at either their GP practice or their local community pharmacy.

10. Integrating Care - Next Steps to Building Strong and Effective Integrated Care Systems Across England

On 24 November 2020, NHS England and NHS Improvement published *Integrating Care - Next Steps to Building Strong and Effective Integrated Care Systems Across England*, which is available at the following link:

<https://www.england.nhs.uk/integratedcare/integrated-care-systems/>

The document explains the requirements on local health systems to develop collaborative ways of working with partners. From April 2021 this will require all parts of England's health and care system to work together as Integrated Care Systems (ICSs), involving:

- stronger partnerships between the NHS, local government and others;
- provider organisations working in formal collaborative arrangements that allow them to operate at scale; and
- developing strategic commissioning with a focus on population health outcomes; and
- the use of digital and data to drive system working.

The document also proposes two options for making ICSs statutory entities, which would require legislation:

Option 1 – a statutory ICS Board/ Joint Committee with an accountable officer. This would establish a mandatory, rather than voluntary, statutory ICS Board through the mechanism of a joint committee and enable NHS commissioners, providers and local authorities to take decisions collectively.

Option 2 – a statutory ICS body. ICSs would be established as NHS bodies, partly by “repurposing” CCGs and would take on the commissioning functions of CCGs. CCG governing bodies would be replaced by a board consisting of representatives from the system partners.

NHS England and NHS Improvement are inviting views on these four questions by Friday 8 January 2021:

- (1) Do you agree that giving ICSs a statutory footing from 2022, alongside other legislative proposals, provides the right foundation for the NHS over the next decade?
- (2) Do you agree that option 2 offers a model that provides greater incentive for collaboration alongside clarity of accountability across systems, to Parliament and most importantly, to patients?
- (3) Do you agree that, other than mandatory participation of NHS bodies and Local Authorities, membership should be sufficiently permissive to allow systems to shape their own governance arrangements to best suit their populations needs?
- (4) Do you agree, subject to appropriate safeguards and where appropriate, that services currently commissioned by NHSE should be either transferred or delegated to ICS bodies?

Prior to the issue of *Next Steps to Building Strong and Effective Integrated Care Systems Across England*, the Lincolnshire Health and Wellbeing Board had initiated a review of its own working arrangements, with a view to it functioning as the ICS Partnership Board. On 2 December 2020, the Health and Wellbeing Board supported a proposal to align its functions of the anticipated Lincolnshire Partnership Board.

11. Retirement of Chief Executive of Lincolnshire Partnership NHS Foundation Trust

Brendan Hayes, the Chief Executive of Lincolnshire Partnership NHS Foundation Trust (LPFT) has announced that he is retiring.

LPFT has appointed Sarah Connery, Director of Finance and Information, as its Acting Chief Executive, and the recruitment for Brendan's replacement will commence over the next few weeks.

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