

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 March 2021
Subject:	Chairman's Announcements

1. **Covid-19 Vaccination Programme**

An update on the vaccination programme is set out at Appendix A.

2. **Lincolnshire Acute Services Review Update**

An update submitted on behalf of the NHS Lincolnshire Clinical Commissioning Group on the Lincolnshire Acute Services Review is set out at Appendix B.

3. **Lincolnshire Integrated Care System**

A report submitted on behalf of the NHS Lincolnshire Clinical Commissioning Group on the Lincolnshire Integrated Care System is set out at Appendix C.

4. **Woolsthorpe Branch Surgery**

As reported during the last meeting of the Committee, the application from Vale Medical Group for the closure of the Woolsthorpe Branch Surgery will now be re-considered by the CCG's Primary Care Commissioning Committee (PCCC). This will allow the PCCC to consider a petition, which was not considered at the PCCC's previous meeting.

5. Care Quality Commission Review of Do Not Attempt Cardiopulmonary Resuscitation Decisions during the Covid-19 Pandemic

The Committee has included of an item on its work programme on *Do Not Attempt Cardiopulmonary Resuscitation Decisions*. Relevant to the consideration of this item will be the publication of the final review report by the Care Quality Commission (CQC), which was expected in February 2021. As of 5 March 2021, the final review report had not been published by the CQC.

6. Opening of Ash Villa as an Adult Acute Mental Health Treatment Ward

Lincolnshire Partnership NHS Foundation Trust (LPFT) has opened Ash Villa as a new adult acute mental health treatment ward in Greylees, near Sleaford, from 1 March 2021.

The 15-bed acute treatment ward will be supporting women who are experiencing a severe, short term episode of mental ill health and who cannot be safely cared for by community based services. This supports the local NHS's commitment to eliminating the inappropriate use of out of area hospital placements for acute patients by the end of March 2021.

LPFT states that this marks the final phase in its in-patient capacity plans and follows the re-purposing of the Wolds Ward at Discovery House into a new re-ablement service as part of the wider acute care pathway, as well as significant investment into community services.

The new ward at Ash Villa will complement existing adult acute mental health wards in Boston and Lincoln, where patients will receive their initial assessment. Following a thorough initial assessment of people's needs at these other two units, female patients can then be transferred to the treatment ward at Ash Villa to receive their on-going support before discharge.

LPFT has also stated that work continues to recruit to the final few vacancies in the team. However in the interim the service will be supported by staff redeployed from Ashley House in Grantham, which has been temporarily closed as part of contingency plans to support safe staffing during the pandemic.

7. The Old Hospital Building Grantham

As the Committee is aware, its focus is on the provision of NHS-funded health services, and the treatment and care of NHS patients. However, I have received a request from Councillor Ray Wootten for the circulation to the Committee of a letter dated 26 February 2021 from Gareth Davies MP, on the old hospital building, which is located at the front of the Grantham Hospital site.

"Dear Councillor Wootten

"I wanted to provide you with a short update following our discussions regarding the Old Hospital building in Grantham, a site I have visited and know well.

"This afternoon, I met with the Chief Operating Officer, Simon Evans, and the Director of Finance, Paul Matthew, of the United Lincolnshire Hospitals NHS Trust (ULHT) to discuss the building. I understand that the site has been disused since 2006 and has fallen into disrepair after the building became too costly to maintain and spending on healthcare services was made the top priority by the Trust.

"In the meeting today, ULHT agreed to my request that they consider all the options available to them regarding the future of the Old Hospital Building and I did stress that there are alternative paths to the total demolition of this historic structure.

"This issue has been brought to my attention by the strength of local campaigns to preserve Grantham's architectural heritage. I therefore requested that ULHT representative engage with local community representatives to begin a dialogue on the future of the Old Hospital, and I am pleased to report they have agreed to do so.

"They have assured me there are no imminent plans for the site, particularly as the focus is still obviously dealing with the ongoing pandemic crisis.

"I hope this update is helpful to you and your residents."

As stated in the letter, the building, which was constructed in the 1870s, has not been used for patient care since 2006 and ULHT has committed to engagement with the local community on its future use.

COVID-19 VACCINATION PROGRAMME IN LINCOLNSHIRE

Weekly Report

On 4 March 2021, NHS England and NHS Improvement (NHSE/I) issued a further weekly report, which set out the numbers of vaccinations for the period 8 December 2020 to 28 February 2021 by STP area. The weekly reports now include data at district council level, as well as 'middle layer super output area'.

Lincolnshire

In the two tables below, information is provided for the Lincolnshire STP area. **It should be noted that the percentage figures are based on a calculation using the ONS mid-year 2019 population estimates and are thus indicative only. This is because the ONS 2019 estimates do not represent the actual number of patients registered with Lincolnshire GP practices in any particular age group.**

First Doses (8 Dec 20 – 28 Feb 21)						
	80+	75-79	70-74	65-69	Under 65	Total
Lincolnshire Number	45,809	36,025	47,597	40,530	96,362	266,323
Lincolnshire Percentage	98.5%	103.2%	94.8%	84.1%	21.4%	42.3%

Second Doses (8 Dec 20 – 28 Feb 21)						
	80+	75-79	70-74	65-69	Under 65	Total
Lincolnshire Number	2,680	67	67	112	2,355	5,281
Lincolnshire Percentage	5.8%	0.2%	0.1%	0.2%	0.5%	0.8%

As of 28 February 2021, 266,323 people registered at GPs in Lincolnshire had received their first dose, representing 42.3% of the adult population. In addition 5,281 second doses had been administered. Between 21 February and 28 February, a total of 34,577 vaccinations were given.

Number of Vaccinations by District Council Area

The table below shows the number of people vaccinated with at least one dose by Lincolnshire's district council areas for the period up to 28 February 2021.

District Council	Number of People Vaccinated with at least One Dose (8 December 2020 – 28 February 2021)					
	Under 65	65-69	70-74	75-79	80+	Total
Boston	8,482	3,387	3,614	2,759	3,824	22,066
East Lindsey	16,940	8,960	11,626	8,862	10,409	56,797
Lincoln	13,708	3,678	3,801	2,716	3,974	27,877
North Kesteven	17,514	6,040	7,358	5,687	7,312	43,911
South Holland	9,558	5,093	5,966	4,424	6,119	31,160
South Kesteven	16,214	7,648	8,776	6,655	8,373	47,666
West Lindsey	13,946	5,724	6,456	4,922	5,798	36,846
Total	96,362	40,530	47,597	36,025	45,809	266,323

Expansion of Shielding List


On 16 February 2021, the Government announced that as a result of the use of a new predictive risk model, a further 800,000 had been identified as high risk from Covid-19 and had been added to the shielding list. This group of adults had been given priority for vaccination. As a result of the new model, in Lincolnshire a further 8,000 people had been added to the 30,000 people already on the shielding list.

Phase 2 of National Vaccination Programme

On 26 February 2021, the Department of Health and Social Care announced its response to the interim advice of Joint Committee on Vaccination and Immunisation (JCVI) on the prioritising of groups for Phase 2 of the national vaccination programme. The JCVI has advised that the offer of vaccinations during phase 2 should be aged based, starting with the oldest adults first and proceeding in the following order:

- all those aged 40 to 49 years
- all those aged 30 to 39 years
- all those aged 18 to 29 years

The Department of Health and Social Care has accepted the interim conclusion of the JCVI on prioritisation based on age. The final advice from the JCVI will be published in due course.

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Open Report on behalf of Lincolnshire Clinical Commissioning Group

Report to	Health Scrutiny Committee for Lincolnshire
Date:	16 March 2021
Subject:	Acute Services Review Update

Summary:

On the 12 November 2020, the NHS England and NHS Improvement (NHSEI) regional assurance panel took place to discuss the Lincolnshire Acute Services Review (ASR) Pre-Consultation Business Case (PCBC).

On the 7 December 2020, the Lincolnshire health system received a letter and formal report from the Chair of the NHSEI regional assurance panel asking the Lincolnshire health system to provide additional information to the panel in seven areas for the scheme to be recommended for national approval.

The production of the additional information has been completed and the revised PCBC with the additional information was submitted by 16 February 2021.

A review panel meeting is taking place on the 4 March 2021 with NHSEI to carry out an assessment of the revised PCBC which will be undertaken by exception, covering the recommendations. Areas that were fully assured will not be reassessed.

It is anticipated that NHSEI regional team will be provided with the assurance to progress the PCBC to proceed through to the national assurance process. This is a two-step process which involves:

- Round table review by the National Directors
- Formal approval by the NHS England and Improvement Board – in private

The timescales associated with the national process are dependent on the scale of queries coming back through the assurance process. Therefore a definitive timeline cannot be provided, but it is anticipated this would be completed during Q1 of 2021/22.

1. Introduction

The key milestone for the Acute Services Review (ASR) in 2020/21 was to achieve NHS England and NHS Improvement (NHSEI) approval to allow the CCG to proceed with a public consultation on the proposed service changes.

The United Lincolnshire Hospitals NHS Trust (ULHT) and Lincolnshire Community Health Services Trust (LCHS) Boards supported the ASR Pre-Consultation Business Case (PCBC) to be submitted into the NHSEI Assurance Process in July 2020.

The CCG Board, as the responsible organisation for the PCBC, approved for the PCBC to be submitted into the NHSEI Assurance Process in July 2020.

The assurance process requires the Midlands NHSEI Regional Team to hold an assurance panel to review the PCBC and determine if it meets the five key tests for service changes.

Due to the complexities of PCBCs, the regional NHSEI team review cases and seek clarifications and further information prior to confirming a panel.

2. NHSEI Regional Assurance Panel – 12 November 2021

This work was completed in October 2021 and the regional NHSEI Panel was held on 12 November 2020. Colleagues representing Lincolnshire included the Chief Executives from ULHT, LCHS and the CCG. They were supported by the clinical directors from the services on which consultation would be proposed, along with executive colleagues from across the Lincolnshire System covering operations, finance, nursing and quality, communication, workforce, strategy and transformation.

The panel meeting lasted three hours and provided the Lincolnshire NHS the opportunity for the system to present the proposals in full and address the key test for service change.

The case was received well and the initial feedback provided was positive, both in the approach taken by colleagues across Lincolnshire, but also the content and quality of the PCBC.

The conclusion to the panel was there is a strong case to proceed to public consultation, however there were a number additions required before the region would approve the case to proceed into the national approval process.

3. Outcome of NHSEI Regional Assurance Panel

On 7 December 2020 the Lincolnshire health system received a letter and formal report from the Chair of the NHSEI regional assurance panel asking the Lincolnshire health system to provide additional information to the Panel in seven areas for the scheme to be recommended for national approval.

The production of the additional information has been completed and the revised PCBC with the additional information is submitted by 16 February 2021.

A review panel meeting is taking place on the 4 March 2021, with NHSEI to carry out an assessment of the revised PCBC which will be undertaken by exception, covering the recommendations.

4. Consultation

The Healthy Conversation 2019 engagement exercise focused on each of the eight strands of the Lincolnshire Acute Services Review, where an emerging option for the future delivery of services was set out.


Following the approval of the PCBC by NHSEI the next step will involve the CCG Board being presented with a Decision Making Business Case. If supported this would set in motion plans for formal public consultation on the proposed changes related to four of the services in the acute services review.

5. Next Steps

Before the CCG can proceed to public consultation, the PCBC requires national approval. It is anticipated that NHSEI regional team will be provided with the assurance to progress the PCBC to proceed through to the national assurance process. This is a two-step process which involves:

- Round table review by the National Directors
- Formal approval by the NHS England and Improvement Board – in private

The timescales associated with the national process are dependent on the scale of queries coming back through the assurance process. Therefore a definitive timeline cannot be provided but it is anticipated this would be completed during Q1 of 2021/22. Once ratification of the PCBC is received from NHSEI, the next step is for the Lincolnshire NHS CCG to agree it is going to start a public consultation.

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Open Report on behalf of NHS Lincolnshire Clinical Commissioning Group

Report to	Health Scrutiny Committee for Lincolnshire
Date:	16 March 2021
Subject:	Lincolnshire Integrated Care System Designation Application

Summary:

The NHS Long Term Plan published in 2019 set out an ambition for greater collaboration between partners in health and care systems to help accelerate progress in meeting the most critical health and care challenges – through the establishment of Integrated Care Systems (ICSs).

The NHS Long Term Plan set the target that by April 2021 ICSs will cover the whole country, growing out of the current network of sustainability and transformation partnerships (STPs). This is still the expectation even though the focus of all health systems has been and still is on managing and responding to the coronavirus pandemic.

Since November 2020 the Lincolnshire STP has completed three rounds of designation application feedback with the NHS England and NHS Improvement (NHSEI) regional team, including a focused discussion at the NHSEI December System Quality Review Meeting (SQRM) with the Lincolnshire Chief Executives.

The initial focus of NHSEI in their feedback was on the proposed Lincolnshire ICS governance and partnership board arrangements; appointment of an independent chair; and place-based arrangements. Latterly, the focus of NHSEI has been on how becoming an ICS will support the Lincolnshire system to tackle its systemic challenges (finance and workforce in particular) and move out of special measures.

The final submission of the Lincolnshire ICS designation application to the NHSEI regional team was made on the 15 February 2021, ahead of a submission nationally. It is anticipated Lincolnshire will receive ICS designation by April 2021.

1. Introduction

Since 2016, health and care organisations have been working together in every part of England in sustainability and transformation partnerships (STPs). When these were established they were described as a pragmatic way to join up planning and service delivery across historical divides: primary and specialist care, physical and mental health, health and social care. They were also identified as being able to help prioritise self-care and prevention so that people can live healthier and more independent daily lives.

2. The NHS Long Term Plan

In 2018 there was an evolution of STPs, when 14 Integrated Care Systems (ICSs) were agreed to accelerate the work started by STPs. The NHS Long Term Plan published in 2019 confirmed that all STPs would be expected to mature, so that every part of England is covered by an integrated care system by 2021.

The NHS Long Term Plan described ICSs as being central to its delivery, as they would bring together local organisations to redesign care and improve population health, creating shared leadership and action. To support this process NHSEI developed a set of 'consistent operating arrangements for ICSs' that would be used to assess system maturity. These are set around the following three areas:

- System Functions;
- System Planning; and
- System Leadership and Governance

3. Lincolnshire Application for Designation as an ICS

At the start of 2020 the NHS in England faced, as did all health systems across the world, the greatest challenge it had ever done so in the coronavirus pandemic. As part of its response the NHS suspended business as usual activities and went into Emergency Preparedness, Resilience and Response (EPRR) mode.

Towards the end of 2020 some 'business as usual' activities started to return, and as part of this the Lincolnshire STP was asked to submit a first draft of its ICS designation application in November 2020.

Since this first submission the Lincolnshire STP has completed three rounds of ICS designation application feedback with the NHSEI regional team, including a focused discussion at the NHSEI December System Quality Review Meeting (SQRM) meeting with the Lincolnshire Chief Executives, including the Lincolnshire County Council Chief Executive was also in attendance).

The initial focus of NHSEI on the Lincolnshire ICS application was on the proposed governance arrangements, specifically:

- The Proposed Partnership Board Arrangements – The proposal is that the partnership board arrangements for the Lincolnshire ICS would be aligned with the Lincolnshire Health and Wellbeing Board and NHSEI focused on how this would work in practice.
- Appointment of an Independent Chair – There were some concerns that Lincolnshire was not looking to recruit a new independent chair into the system.
- Place-based Arrangements – The proposal is that there would be one 'place' in Lincolnshire that would be coterminous in its boundary with the definition of the Lincolnshire Integrated Care System.

Having had a number of discussions with the NHSEI regional team on the proposed Lincolnshire ICS governance arrangements, including at NHS and local authority Chief Executive level, a shared understanding and acceptance has emerged.

4. Current Position

A shared understanding has been reached with NHSEI on the proposed governance arrangements for the Lincolnshire ICS. This includes the recognition that once the future of putting ICSs on a statutory footing (as highlighted in the recent consultation document) has been confirmed in 2021/22, the governance arrangements will need to be reconsidered. The Lincolnshire ICS designation will reflect the work happening in the system to ensure a solid foundation for system working and recovery in the longer term.

The final submission of the Lincolnshire ICS designation application was made on the 15 February 2021, it is anticipated designation will be received by April 2021.

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