

# Agenda Item 4

 <b>Lincolnshire</b> COUNTY COUNCIL <i>Working for a better future</i>		<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

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>15 February 2023</b>
Subject:	<b>Chairman's Announcements</b>

## 1. Membership of the Committee

South Kesteven District Council has appointed Councillor Penny Robins as its representative on the Health Scrutiny Committee for Lincolnshire, with Councillor Kaffy Rice-Oxley appointed as the named replacement member for Councillor Robins.

## 2. Information Requested at Previous Meetings

- (a) Definition of an NHS Critical Incident – The Committee has requested information on the definition of a critical incident when declared by an NHS organisation. The *NHS Emergency Preparedness Resilience and Response Framework (July 2022)* contains the following definition:

*“Critical Incident – any localised incident where the level of disruption results in an organisation temporarily or permanently losing its ability to deliver critical services; or where patients and staff may be at risk of harm. It could also be down to the environment potentially being unsafe, requiring special measures and support from other agencies, to restore normal operating functions. A Critical Incident is principally an internal escalation response to increased system pressures/disruption to services.”*

Section 12.4 of the above document provides some more information on the processes to be followed by the NHS when such an incident is declared.

- (b) North West Anglia NHS Foundation Trust Recovery Plan – on 18 January 2023, the Committee requested the recovery plan of North West Anglia NHS Foundation Trust, which will be circulated when it is available.

### 3. Norton Lea, London Road, Boston - Opportunity to See Plans

Lincolnshire Partnership NHS Foundation Trust (LPFT) has announced that it is seeking views on its proposals to transform Norton Lea in Boston into a new 19-bed mixed gender inpatient ward to replace the existing outdated accommodation at Pilgrim Hospital. LPFT is hosting three information events:

- 16 February (Midday to 2pm) at Greyfriars GP Surgery
- 22 February (10am – Midday) at Boston Library
- 24 February (10am – Midday) at Skegness Library

At these events, there is an opportunity to find out more information about the development, see the plans and meet the project team. LPFT is planning to create a 19-bed mixed gender inpatient facility for working age adults, which will serve those living to the east and south of Lincolnshire. This project aims replace the dormitory style accommodation at Pilgrim Hospital and replace with a modern purpose-built facility. Improving the patient's dignity and experience will be achieved by including en-suite facilities in each room.

For those unable to attend the events, a survey may be completed at the following: <https://www.surveymonkey.co.uk/r/YK8MZZ9> and more information is available at: [www.lpft.nhs.uk/newacutewards](http://www.lpft.nhs.uk/newacutewards)

### 4. Spalding GP Surgery

NHS Lincolnshire Integrated Care Board (ICB) has announced that the transfer of patients from Spalding GP Surgery to one of three other surgeries would begin on 1 February 2023:

Gosberton Medical Centre – This transfer would take place between 1 and 14 February 2023. Patients would be contacted by the practice once their registration has been completed.

Beechfield Medical Centre – This transfer would take place automatically from 4.30 pm on 7 February 2023, with patients able to access services at Beechfield Medical Centre from 8.00 am on 8 February 2023.

Munro Medical Centre - The transfer would take place automatically from 4.30 pm on the 8 February 2023, with patients able to access services at Munro Medical Centre from 8.00 am on 9 February 2023.

#### Disruption to Services

On the days of the patient transfers, there would be no access to services at Beechfield and Munro Medical Centres, or Spalding GP Surgery from 4.00 pm, in order to update the clinical systems. There was advice to use alternatives at these times, such as the nearest community pharmacy, NHS 111, or the Urgent Treatment Centre at the Johnson Community Hospital.

## 5. Delivery Plan for Recovering Urgent and Emergency Care – January 2023

On 30 January 2023, the Department of Health & Social Care and NHS England published *Delivery Plan for Recovering Urgent and Emergency Care*. This document includes the following 14 commitments, which are reproduced below:

- A) Increase capacity, to help deal with increasing pressures on hospitals which see 19 in 20 beds currently occupied.
1. Dedicated funding of £1 billion will pay for additional capacity, including 5,000 new beds as part of the permanent bed base for next winter.
  2. Over 800 new ambulances, including 100 specialist mental health ambulances, the majority of which will be on the road by next winter.
  3. ‘Same day’ emergency care services will be in place across every hospital with a major emergency department, so patients avoid unnecessary overnight stays.
- B) Grow the workforce, as increasing capacity requires more staff who feel supported.
4. More clinicians will be available for 111 online and urgent call services to offer support, advice, diagnosis and, if necessary, referral. From this April we will launch a new targeted campaign to encourage retired clinicians, and those nearing retirement, to work in 111 rather than leaving the NHS altogether.
  5. We will grow the workforce with more flexible ways of working and increase the number of Emergency Medical Technicians next year to respond to incidents and support paramedics.
- C) Speed up discharge from hospitals, to help reduce the numbers of beds occupied by patients ready to be discharged.
6. Over the next two years, and as part of the up to £14.1 billion extra for health and social care, £1.6 billion will be focused squarely on discharge.
  7. ‘Care transfer hubs’ in every hospital ahead of next winter will mean faster discharge to the right setting, so that people do not stay in hospital longer than necessary.
  8. This year, new approaches to step-down care will start to be implemented so, for example, people who need physiotherapy can access care as they are being discharged from hospital before they need to be assessed by their local authority for long-term care needs.
  9. New discharge information will be published, with new data collected from this April.

D) Expand new services in the community, as up to 20% of emergency admissions can be avoided with the right care in place.

10. Ahead of next winter we will offer more joined-up care for older people living with frailty, including scaling urgent community response, frailty and falls services across the whole country – meaning the right people help you get the care you need, without needing an admission to hospital if it's not necessary.

11. Greater use of 'virtual wards', which allow people to be safely monitored from the comfort of their own home, will be achieved by an extra 3,000 beds to provide over 10,000 in total by this autumn, allowing staff to care for up to 50,000 patients a month this way over the longer term

E) Help people access the right care first time, as 111 should be the first port of call and reduce the need for people to go to A&E.

12. By April 2024, urgent mental health support through NHS 111 will be universally available.

13. From this April, new data will allow the public to easily see and compare the performance of their local services.

We will also tackle unwarranted variation in performance in the most challenged local systems.

14. This April, a new clinically-led programme to reduce unwarranted variation will launch, alongside intensive support for those areas struggling the most

The full document is available at: [B2034-delivery-plan-for-recovering-urgent-and-emergency-care-services.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/wp-content/uploads/2023/01/b2034-delivery-plan-for-recovering-urgent-and-emergency-care-services.pdf)

## 6. **East Midlands Ambulance Service – Bracebridge Heath Visit**

On 26 January 2023, I visited the Bracebridge Heath offices of the East Midlands Ambulance Service (EMAS). I met Richard Henderson, the EMAS Chief Executive, and Sue Cousland, Lincolnshire's Divisional Director for EMAS. As part of the visit, I was given a tour of the control room, where 999 calls are taken and ambulances are despatched in response to these calls.

In addition to being advised that EMAS has one of the quickest 999 call pick-up times of all ambulance trusts, I also learned that:

- Where NHS 111 calls are unanswered in thirty minutes, they automatically convert to 999 calls.
- EMAS operates a system of 'cohorting' for ambulance crews, so that when their shift is due to end and they are waiting with a patient at an A&E department, they are relieved by another crew at the hospital.

- EMAS is looking forward to taking on the role of non-emergency patient transport provider for Lincolnshire from 1 July 2023, when the existing contract expires.

More details on the above can be provided on 14 June 2023, when EMAS is due to attend the Committee. In the interim, EMAS has issued an invitation to members of the Committee, in groups of two or three, to visit the control room in Bracebridge Heath. If anyone is interested in a visit, please contact [Simon.Evans@lincolnshire.gov.uk](mailto:Simon.Evans@lincolnshire.gov.uk) who can make the arrangements.

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