



**HEALTH SCRUTINY COMMITTEE FOR
LINCOLNSHIRE
14 JUNE 2023**

PRESENT:

Lincolnshire County Council

Councillors L Wootten (Vice-Chairman), M G Allan, R J Cleaver, R J Kendrick, C S Macey, S R Parkin, T J N Smith and R Wootten.

Lincolnshire District Councils

Councillors J Arayambath (Boston Borough Council), E Wood (City of Lincoln Council), J Makinson-Sanders (East Lindsey District Council), Mrs L Hagues (North Kesteven District Council), M Geaney (South Holland District Council), C Morgan (South Kesteven District Council) and D Rodgers (West Lindsey District Council).

Healthwatch Lincolnshire

Tim Staniland.

Also in attendance

Katrina Cope (Senior Democratic Services Officer), Simon Evans (Health Scrutiny Officer) and Sarah-Jane Mills (Director for Primary Care and Community and Social Value).

Remote attendees via Microsoft Teams:

Dr Reid Baker (Medical Director of the Lincolnshire Local Medical Committee), Peter Burnett (Director of Strategic Planning, Integration and Partnerships, NHS Integrated Care Board), Sue Cousland (Divisional Director, East Midlands Ambulance Trust), Andrew Morgan (Chief Executive, United Lincolnshire Hospitals NHS Trust), Anna Richards (Associate Director of Communications and Engagement), Neil Scott (Service Development Manager, East Midlands Ambulance Trust) and Nick Blake (Acting Programme Director – Integrated Primary Care and Communities).

County Councillor C Matthews (Executive Support Councillor NHS Liaison, Integrated Care System, Registration and Coroners) attended the meeting as an observer, via Teams.

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HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE
14 JUNE 2023

1 ELECTION OF CHAIRMAN

RESOLVED

That Councillor C S Macey be elected as the Chairman of the Health Scrutiny Committee for Lincolnshire for 2023/24.

2 ELECTION OF VICE-CHAIRMAN

RESOLVED

That Councillor L Wootten be elected as the Vice-Chairman of the Health Scrutiny Committee for Lincolnshire for 2023/24.

3 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

An apology for absence was received from Liz Ball (Healthwatch Lincolnshire).

The Committee noted that Tim Staniland (Healthwatch Lincolnshire) had replaced Liz Ball (Healthwatch Lincolnshire) for this meeting only.

An apology for absence was also received from Councillor S Woolley (Executive Councillor NHS Liaison, Integrated Care System, Registration and Coroners).

4 DECLARATIONS OF MEMBERS' INTEREST

Councillor R J Kendrick wished it to be noted that he was one of the Council's representatives on the Lincolnshire Partnership NHS Foundation Trust – Council of Governors Stakeholder Group.

Councillor C Morgan advised that she was a member of United Lincolnshire Hospitals NHS Trust Patient Panel and Chairman of SOS Grantham Hospital.

Councillor Jyothi Arayambath wished it to be noted that her husband worked for United Lincolnshire Hospitals NHS Trust as a urologist.

5 MINUTES OF THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE MEETING HELD ON 17 MAY 2023

RSOLVED

That the minutes of the Health Scrutiny Committee for Lincolnshire meeting held on 17 May 2023 be agreed and signed by the Chairman as a correct record.

6 CHAIRMAN'S ANNOUNCEMENTS

Further to the announcements circulated with the agenda, the Chairman brought to the Committee's attention the supplementary announcements circulated on 14 June 2023.

The Chairman advised that in response to item 2 of the Supplementary Chairman's Announcements, he was proposing to send a letter of support to United Lincolnshire Hospitals NHS Trust, in the next step in their application to become a University Teaching Hospital status.

During consideration of this item, the following comments were raised: the inclusion of Acute Service Review Implementation in the work programme for 19 July 2023 meeting; the need for further consideration of Stamford Minor Injuries Unit; and one member from personal experience encouraged other members of the Committee to attend the open day at the Peter Hodgkinson Centre at Lincoln County Hospital.

RESOLVED

1. That the supplementary announcements circulated on 14 June 2023 and the Chairman's announcements as detailed on pages 11 and 12 of the report pack be noted.
2. That support be given for the Chairman to send a letter of support to United Lincolnshire Hospitals NHS Trust, in the next step in their application to become a University Teaching Hospital.

7 CONSULTATION ON PAEDIATRIC SERVICES AT PILGRIM HOSPITAL, BOSTON

Consideration was given to a report from Simon Evans, Health Scrutiny Officer, which invited the Committee to make arrangements for responding to the consultation by United Lincolnshire Hospitals NHS Trust (ULHT) on Paediatric Services at Pilgrim Hospital, Boston.

The Chairman invited the following representatives from ULHT to remotely, present the item to the Committee: Andrew Morgan, Chief Executive, Simon Hallion, Managing Director of Family Health and Anna Richards, Associate Director of Communications.

During consideration of this item, the following comments were noted:

- The Committee noted that the model had been developed into one that enabled almost every child or young person to receive all their care at Pilgrim Hospital, Boston. It was noted further that very few children, usually those with complex or specialist needs were transferred to other hospitals for their treatment, which had always been the case prior to 2018. It was reported that the Paediatric Assessment Unit offered a rapid assessment and discharge profile and also allowed for a number of patients to remain longer on the ward, when clinically necessary. Appendix A of Appendix 1, provided the Committee with a summary of the current service model;

- That better clarification of the new model needed to be provided in the consultation document and that the new unit needed to be promoted better to highlight the differences and all the good work and development that had happened since 2018;
- Support was extended to the new model and the service it provided to children and families in Boston and the surrounding area;
- Recognition was expressed that stabilising the service had assisted the Trust in its recruitment and retention of staff; and
- Confirmation was given that neighbouring health systems had been engaged in the proposals.

The Chairman on behalf of the Committee extended his thanks to the presenters.

RESOLVED

That a response be drafted to the consultation by United Lincolnshire Hospitals NHS Trust on Paediatric Services at Pilgrim, Hospital, Boston, based on comments made at the 14 June and 17 May 2023 meetings, and be submitted to the next meeting of the Committee on the 19 July 2023 for approval.

8 HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE - WORK PROGRAMME

The Chairman invited Simon Evans, Health Scrutiny Officer, to present the report which invited the Committee to consider and comment on its work programme, as detailed on pages 80 to 82 of the report pack.

Attached at Appendix A to the report was a schedule of items covered by the Committee since the beginning of the current Council term, May 2021, as well as details of planned works for the coming months.

During discussion, the following comments/suggestions were put forward:

- Lincolnshire Dental Strategy – a request was made for the report to include further information concerning the closure and lack of NHS dentist provision generally, and lack of dental provision along the coastal strip;
- A further update on GP Services;
- Integrated Care Strategy and the implications for Lincolnshire as a whole;
- A future update on the Acute Services Review;
- Pressures on services at Lincoln County Hospital;
- The impact the proposals for RAF Scampton will have on local health services; and
- Growth plans across the County and how they will impact on health services, to include plans being proactively put in place to deal with an increasing population.

RESOLVED

That the work programme presented on pages 80 to 82 of the report pack be agreed, subject to the inclusion of the suggestions put forward by the Committee.

9 EAST MIDLANDS AMBULANCE SERVICE NHS TRUST - PERFORMANCE

Consideration was given to a report from the East Midlands Ambulance Service NHS Trust (EMAS), which provided an update on current EMAS performance in the Lincolnshire Division since October 2022.

The Chairman invited the following representatives from EMAS to remotely, present the item to the Committee: Sue Cousland, Regional Director and Neil Scott, Service Development Manager.

The report highlighted local and national performance trends over the last six months as well as work being undertaken to mitigate some of the unique challenges faced by the Lincolnshire Division. It also contained details relating to quality initiatives; recruitment and retention; staff engagement; and future plans and investment through 2023/24.

During consideration of this item, the following comments were noted:

- Thanks were extended to all EMAS staff for the service they provided;
- It was noted that the improved performance during April 2023 was as a result of a combination of increased resources, decreased sickness/absences and a reduction in pre hospital handover times, and an increase in private ambulance provision. It was noted further that private ambulance resource was being utilised whilst the workforce was being developed and trained and the use of private ambulances would cease over the next two years. The extra resource had given the service the opportunity to improve; Reassurance was given that the skills set on the private ambulances was monitored;
- It was reported that plans and initiatives were in place to help deal with winter pressures;
- That more communication needed to be done to advise members of the general public of the services available to them, instead of just calling an ambulance;
- The Clinical Operating Model of the Trust and the aspiration to implement a fully streamlined career escalator for staff at all levels. It was noted that this would support the enhancement of recruitment/retention opportunities;
- That further information would be sought concerning the how effective the winter vaccination programme had been;
- The role of the Clinical Navigator. It was noted that clinical navigators were jointly appointed by EMAS and United Lincolnshire Hospitals NHS Trust (ULHT), and their role was to liaise with ED colleagues and other departments; and to identify opportunities for new pathways for patients. It was noted further that the role would be evolving and would be looking at the quality of outcomes for patients;

- It was reported that ‘Chatty Cafes’ enabled senior managers to attend emergency departments once a quarter in each locality and listen to concerns and ideas from frontline staff. It was noted that they were proving very popular with staff;
- The Category 2 – Thirty Minute National Target 2023/24. Figure 12 on page 29 of the report pack provided data in this regard;
- The organisational plan aimed to bring the ambulance response time to Category 2 calls down to 30 minutes by the end of the 2023/24;
- Information would be sought regarding whether the incidence of flu was far worse than Covid-19 during the increase activity in December 2022;
- Confirmation was given that the service had seen the impact of the cost of living crisis;
- Confirmation was given that there were no definitive national targets for the rates of emergency ambulance conveyance, ‘see and treat’ or ‘hear and treat’; and
- It was reported that response times for category 2 of 30 minutes or 18 minutes was achievable at times when all factors in the process were aligned.

RESOLVED

1. That thanks be extended to the presenters from the East Midlands Ambulance Service and that the Committee welcomes:
 - a. The improvements in ambulance response times since the peaks of December 2022; and
 - b. The clinical navigator initiative at Lincoln Count Hospital and Pilgrim Hospital, Boston.
2. That the Trust-wide investment of £23 million during 2023/24 leading to further improvements, particularly category two calls be noted, and that a further update be received in six months.
3. That the Committee’s thanks to all the staff who work for East Midlands Ambulance Service for their dedication and efforts in often challenging circumstances be noted.

10 NHS JOINT FORWARD PLAN

Consideration was given to a report and presentation by the NHS Lincolnshire Integrated Care Board (ICB), which outlined the process for developing the Joint Forward Plan (JFP).

The Chairman invited Pete Burnett, Director of Strategic Planning, Integration and Partnerships, NHS Lincolnshire Integrated Care Board to remotely, present the item.

The presentation referred to the background and requirements of the Health and Care Act 2022 for ICB’s to develop a JFP; and an overview of the approach taken by Lincolnshire to developing a Lincolnshire NHS JFP.

Pages 37 and 38 of the report pack provided details of the five core priorities which were:

Priority 1	A new partnership with the public;
Priority 2	Living well and staying well;
Priority 3	Access;
Priority 4	Integration community care; and
Priority 5	People.

The presentation provided an overview of the draft document, prior to the final version being published by 30 June 2023.

During consideration of this item, the following comments were noted:

- That improvements resulting from the JFP would be dependent on how all partners and stakeholder worked together. Some expected improvements included improved access and resources;
- That the developed priorities document would be completed in the Autumn of 2023 and would be shared with the Committee;
- Key to the success of the JFP was the relationship the public, and identifying what really mattered to them; and
- That care in the community was about patients receiving care in the appropriate setting. There was recognition that there was more publicity to do in this regard.

The Chairman on behalf of the Committee extended his thanks to the presenter.

RESOLVED

1. That the process and the steps taken to develop the Joint Forward Plan be noted.
2. That the requirements for the NHS to develop a Joint Forward Plan be noted.
3. That the National Health Service Act 2006 (as amended by the Health and Care Act 2022) requiring ICBs and their partner trusts to prepare a Joint Forward Plan before the start of each financial year be noted.
4. That support be given to the five priorities to be included in the NHS Joint Forward Plan and that the Committee looks forward to details of their implementation.
5. That further reports, be received when required.

11 GP PROVISION IN LINCOLNSHIRE

Consideration was given to reports from the Lincolnshire Local Medical Committee and the Lincolnshire Integrated Care Board, which provided an update on general practice provision.

The Chairman invited Dr Reid Baker, the Local Medical Committee's Director, Sarah-Jane Mills, Director of Primary Care, Community and Social Value and Nick Blake, Acting Programme Director Integrated Primary Care and Communities, to present their reports to the Committee.

It was reported that general practice was under ongoing pressure due to multiple factors including inflationary, and cost of living pressures. Despite this, GPs continued to work hard to meet the needs of patients, providing new services and more appointments. It was highlighted that there had been a 43% increase in appointments in general practice since August 2019. It was reported that in the last year the number of appointments provided by GPs had increased by 14.5%, and that in the last year GPs in Lincolnshire had provided 4,954,959 appointments.

It was noted that GP provision in the County was good, with appointment availability being above the national average. It was reported that there were 81 practices across Lincolnshire, and that these practices worked together as Primary Care Networks (15 in Lincolnshire) to provide a range of services for their local population.

It was reported that the key elements of the NHS delivery plan for recovering access to primary care reflected the challenges faced across Lincolnshire and provided a framework for expediting the development of modern primary care provision.

It was highlighted that there would be challenges, but the Primary Care Networks (PCNs) would provide the vehicle for further strengthening the partnership working across GP surgeries and with other agencies.

In conclusion, the Committee noted that the ICB was committed to working in partnership with people living in Lincolnshire to ensure that the further development of service provision met the needs of the local community.

Note: Councillor Mrs L Hagues left the meeting at 12.43pm.

During consideration of this item, some of the following comments were noted:

- Personal experiences of some members using 'Ask my GP' and accessing the practices by telephone. The Committee noted that when there was increasing demand and there was insufficient capacity to meet that demand, to ensure that clinical safety was maintained, access through this application was on occasions switched off, to ensure that urgent requests were not lost. It was noted that as part of the recovery plan there was additional support for practices to improve their internal processes with reference being made to the 8.00am appointment rush. In

Lincolnshire it was noted that several practices had been working on such issues, prior to the government directive. It was noted further that general practice was a national contract and therefore GPs were nationally governed. Reassurance was given that once the digital system was turned off, a receptionist would take down details of any urgent requests and these would be put on the system for a GP to look at and allocate;

- The need for better access to primary care for residents and for better publicity/communication explaining how primary care could be expected to be accessed. There was recognition that there was a message to be delivered to residents in this regard;
- Some concern was expressed to four Care Quality Commission (CQC) reports from October 2022 last year, which had identified one practice as being good, two needing further improvements and one being deemed as being inadequate. Reassurance was given that the ICB Quality Team did visit and work with practices where issues had been identified. In all instances mentioned, the Quality Team had already been working with the practices, prior to the CQC inspection. The Committee noted that other than the four practices highlighted, the ICB was currently working closely with two further practices;

Note Cllr R J Cleaver left the meeting 1.00pm.

- It was noted that practices were proactive in assisting vulnerable groups, from information gathered on the local population;

Note: Cllr S R Parkin left the meeting at 13.02pm.

- From members personal experience, there were suggestions that the current system was not working as well as it could do. It was noted that there was a need to educate patients that the GP model had changed, and that multi-disciplinary teams were now available to help take off the pressure off GPs, to allow them to be able to see the more vulnerable patients with complex needs. There was recognition that more work still needed to be done to understand the concerns and views of the service user;
- The Committee noted that increased costs were having an impact on practices and that the ICB were supporting practices in this regard, i.e. making sure that they were in receipt of funding where appropriate, and adopting more efficient practices etc; and
- That information relating to the number of face-to-face appointments conducted by GPs, as opposed to other healthcare staff in 2019 would be made available in the next report to the Committee on this topic.

RESOLVED

1. That thanks be extended to representatives from the Lincolnshire Local Medical Committee and the NHS Lincolnshire Integrated Care Board for their presentations.

2. That the increase of 43 percent in the number of appointments in GP practice between 2019 and 2023 be welcomed and that support be given to support further measures to enhance access to GP services, such as improved recruitment and retention, and access to funding for additional roles in GP practices.
3. That a further update be received in six months' time.

The meeting closed at 1.42 pm