

Questions received from Members of the Public – 25th July 2023 Board Meeting

Member of the Public One Questions and Responses

1)

Hello, my husband is considered vulnerable as he is currently attending haematology dept at Lincoln for cancer. In order to avoid him catching Covid we wear masks when in enclosed public settings and, when people visit our home, they are required to take a Covid test. I would like to know why he is entitled to a COVID booster, but I am not. (I am 68 years old and obese and would have to care for him if he became ill). And if I can't have a free booster at the same time as he gets one, why can't I buy a booster, so that we are hopefully both keeping well and preventing extra demand on the NHS?

The Spring 2023 COVID-19 vaccination programme ended on 30 June 2023 and only allowed a booster dose be given to:

- adults aged 75 years and over
- residents in a care home for older adults, and
- individuals aged 5 years and over who are immunosuppressed

If people develop a new health condition or start treatment that severely weakens their immune system (including stem cell therapy), a specialist may recommend that the individual needs additional protection or to restart vaccinations before autumn 2023. The vaccination team have a referral process in place for people who need additional protection and are in this category.

During the spring and inter-seasonal period there was/is no legal mechanism to allow carers to have a COVID-19 inter-seasonal vaccine. Unlike the flu vaccine, COVID-19 vaccines are not available for sale, even through a pharmacy.

The ICB is still awaiting guidance on which groups of people will be offered an autumn COVID-19 booster. However, the Joint Committee on Vaccination and Immunisation (JCVI) propose that in autumn 2023, persons at higher risk of severe COVID-19 could be offered a booster vaccine dose in preparation for winter 2023 to 2024.

2)

My sister, aged 64, is severely learning disabled, she is non-verbal and has no capacity. She was recently kept overnight due to low SAT's in Grantham Hospital. What arrangements are in place to safeguard patients in such as my sister in hospital (she has one to one care provided by Voyage Care in the supported living flat she rents). Staff use a hoist to move her. She cannot feed herself safely, toilet, dress herself, talk or walk safely. She has no sense of danger.

The All About Me (AAM) booklet which is attached/enclosed was co designed and developed by United Lincolnshire Hospitals NHS Trust (ULHT) with patients, their carers' and health and social care colleagues. The original concept was focused on people with dementia but as it grew it was clear it would benefit any patient who may have difficulty communicating their needs and preferences and so it is able to be used with many different people. It is designed to be 'patient held' in that it is kept at the bedside to inform and direct staff in terms of care and should not get tucked away in the medical notes where it can't be seen or used. One of the good things about AAM is that it is used in the community as well as here in the hospitals.

We know a number of care homes have picked up boxes of them to use with residents and across the community our learning disabilities staff encourage its use too.

However, ULHT do recognise that the AAM is not always used as well as it should be and appreciate how frustrating it is for families and patients if they have gone to all the trouble of completing it and then staff ignore it or don't appreciate its value or if the patient and their family were not even aware of it. Our dementia and learning disability lead nurses have been raising awareness and we are also promoting it now through our refresh and relaunch of Caring for Carers and supporting carers as expert partners.

In addition to All about Me, the ULHT Safeguarding and Vulnerabilities team can also offer support with writing a reasonable adjustment care plan to ensure specific care and communication needs are highlighted and recognised by staff on admission and throughout hospital stay. This care plan can be kept with the patient and a copy can be kept with by the hospital which can be accessed by all site duty managers if out of hours along with our team. This can be shared as soon as patient comes into A&E or even for OPA / scans etc. An alert for communication and reasonable adjustments in hospital to patient records as patient/family agreed which will highlight needs on admission and direct staff to access the care plan.

I am sorry that it sounds this did not happen in the way that it should have done for your sister but if you would like to be put in contact with the safeguarding and vulnerabilities team at ULHT to discuss how things could be improved should there be further admissions then please feel free to contact us and we will be able to pass your details on to the ULHT Specialist Learning Disability Safeguarding Nurse.

I trust this information responds to your questions but if you have any further queries then please do contact us.

Member of the Public Two Questions and Responses

1. Does your Joint Forward Plan for Lincolnshire set out the steps you propose to take to address the particular needs of victims and survivors of abuse?

Lincolnshire's JFP has now been published and is available on the ICB website [Joint Forward Plan - Lincolnshire ICB](#). In the JFP document Allocation of Duties and Responsibilities (p. 68), Lincolnshire ICBs proposals to address the needs of victims and survivors of abuse are presented.

Lincolnshire ICB has participated in work undertaken in Lincolnshire 2022/2023 to develop and commission an outreach service model to support victims of domestic abuse which includes:

- A universal digital based support offer to all victims of DA in Lincolnshire.
- A Support Hub, including a helpline, effective triage function and strength-based assessment provision.
- Partnership, Outreach and Engagement Team.
- Community- based Adult Support Interventions including complex needs pathway.
- Community- based Children and Young People support interventions.
- Recovery support.
- An IDVA (Independent Domestic Violence Advisors) service.

The contract for the new service was awarded from April 2023 to LDASS (Lincolnshire Domestic Abuse Specialist Service). Processes are in place to monitor the uptake and impact of the new model as the service develops.

[Lincolnshire Domestic Abuse Specialist Service \(ldass.org.uk\)](http://ldass.org.uk)

2. You currently don't yet have the evidence based IRIS/ADVISE programme in your area. How will your proposed steps to address the particular needs of victims of abuse in healthcare settings translate into commissioning services across your ICB footprint?

From a health perspective, there are a range of support and care pathways that have been commissioned and provide assessment and support to victims. Whilst some specialist elements are commissioned by NHSE, such as the Sexual Assault Referral Centre (SARC) delivered by Spring Lodge in partnership with Lincolnshire Partnership NHS Foundation Trust, there are also services commissioned locally through health, either as specific services to support victims or that incorporate meeting the health needs of victims through wider service scopes.

Through the Lincolnshire Domestic Abuse Partnership arrangements health partners, we will continue to engage in the focus on victim support and consider how referral and signposting to the outreach service can be strengthened by increasing knowledge and awareness of health professionals and practitioners. Work through the Partnership, Outreach and Engagement Team (within the outreach service model) has already commenced.

Other initiatives include a pilot project to increase GP referrals into EDAN Lincs Domestic Abuse Service (LDASS) [LDASS - EDAN Lincs Domestic Abuse Service](#) LDASS are also developing a network of Domestic Abuse (DA) Champions across agencies which will include health.

3. Steve Russell, Chief Delivery Officer at NHSE, recently wrote to you asking you to name an executive and working lead for Domestic Abuse and Sexual Violence. Who are your leads?

The ICB Domestic Abuse and Violence Lead is Mr Martin Fahy, Director of Nursing. This information is detailed on the ICB website.

**Member of the Public Three
Question/query and Response**

I had an accident in Feb 2023 at work where I fell and hit my teeth on a concrete floor. This caused my top 2 teeth to be pushed back and twisted 2 other teeth. I went to Lincoln Hospital and they put a brace on my upper 6 teeth to keep them in place until a dentist could fix them. The brace is only meant to be in for 2 weeks. I have had it on for 5 months.

I have not got an NHS dentist and a private dentist wants at least £10,000 to fix them.

I am a minimum wage worker who can't work as I'm in pain constantly with my teeth. I have also lost 3 stone and had other health issues due to my accident.

I have tried everywhere to get help, and no one wants to know. I feel like I have been pushed to the side by every NHS professional that I have spoken to apart from my doctor who has also tried to get me help.

Something needs to be done to help people in my situation. There should be help for people who have accidental dentist damage but cannot afford the ridiculous private dentist prices to fix.

Thank you for your contact to the Lincolnshire ICB Board. I am Dr Sunil Hindocha the Medical Director. I have made enquires on your behalf and your need for dental treatment. I am sorry that you haven't had the treatment to date.

Having discussed this a number of colleagues, the way to do this is an initial appointment with the dental centre, there is one in Lincoln. You will need an assessment and possibly an X-ray.

If following that, you may be eligible for referral to the community dental team, and the person assessing you will be able to discuss that with you.

I hope that helps and you can now receive the dental care you asked about.

Member of the Public Four
Question/query and Response

Submitted a query related to funding of orthotic items for patients in Lincolnshire. This relates to the individual having been left with a nerve injury during an operation in one of our hospitals. Other health authorities are funding this but not Lincolnshire. The ICB was requested to look into this.

Response:

This was investigated by the Director for System Delivery and her team, and the individual contacted directly. A satisfactory resolution was reached with the individual receiving the equipment required.

Member of the Public Five
Question/query and Response

Do you have plans to support Voluntary sector organisations who provide preventative services, thus alleviating the inevitable winter pressures?

Response: SSAFA, the Armed Forces charity, are members of LVET already, although this was through a different contact that we had, we have now updated our details so that to ensure the appropriate contact is looped in with all things LVET and our work with the wider system. Our team also have a meeting booked in with the SSAFA contact so that we can make sure SSAFA are informed, and have opportunities, to engage with 'winter warmth' planning/ projects.

In addition to that I can confirm that we also support the Veteran Support Service CIC(VSSCIC), Tonic Health, who also have a Veteran chat morning, Project Dignity, and we sit on the forum run by Jon Mansfield supporting Serving personnel, Veterans and their families.

Last week the Alzheimer's Society, got in touch looking for connections and funding support for a new project they are starting for Veterans with early onset dementia. The connections from this conversation have gone extremely well and Sarah from SSAFA and Jon have been in touch with Alzheimer's Society to continue their conversation around working together on this.

We also have supported Project Dignity recently in accessing £300,000 of funding, by connecting them to work in partnership with Jon, and Vicky at Everyone and Tonic to be able to access funding, which they would otherwise not have been eligible for. The project will provide homes and work opportunities for homeless veterans if their application is successful.

While I appreciate this is not related directly to the original question it does demonstrate some of the support we are offering the veteran community in Lincolnshire.