



**LEICESTER, LEICESTERSHIRE AND RUTLAND JOINT
HEALTH SCRUTINY COMMITTEE –
MONDAY 18 DECEMBER 2023**

**QUESTIONS SUBMITTED UNDER STANDING ORDER 7(3) and
(5)**

The following questions are to be put to the Chairman of the Joint Health Scrutiny Committee.

1. **Question by Mr. Phil King CC:**

Hospital Parking and Blue Badge Holders

Over the past year or so, for a variety of reasons I have had to visit all three main hospital sites in Leicester with a family member who is a blue badge holder.

There appears to be a disparity regarding the treatment of Blue Badge parking.

Glenfield- free

General- free

But at the LRI site, there are signs up every where stating that Blue Badge parking has to be paid for.

However, some weeks ago, by chance I over heard another visitor to the LRI site being informed that Blue Badge parking was now free, contrary to the public signage, so long as you get your badge validated at the parking office.

Upon querying this at the parking office, I was told that yes the policy had been changed by the government and blue badge parking now was free at the LRI hospital car-parks.

When I was last at the site in late November, there's still no amended signage, no information in any patient communication, and numerous blue-badge holders paying in error at the parking payment machines.

But there is a new webpage with the correct information.

I would like UHL NHS Trust to confirm:-

When did these new arrangements start from?

When are you going to start publicising this change?

When will all the signage and machines be correctly updated by?

When will the pre-appointment information sent to patients be changed?

And for those who have paid charges during this 'free' period, does UHL have any plans to re-imburse those who have made such payments?

Reply by the Chairman:

I have sought a response from UHL to the issues raised in the question and they have provided the following statement:

“UHL recognises the importance of appropriate accessible parking to the many patients, staff and visitors that have access needs. Parking is therefore free of charge for patients, staff and visitors with a blue badge at all our sites. Different technologies are used, such as pay and display or ANPR parking at different sites, and this requires a different approach at each site. At the LRI, blue badge holders are asked to either take their badge to the car park office or to buzz the exit terminal when leaving the car park.

A recent review has found no signage instructing blue badge holders to pay for parking. However, we recognise that more can be done - on site, on our digital channels, and via patient letters to improve awareness of free parking to eligible groups, including people with accessibility needs, and to ensure compliance so the facilities are not abused.

We have no plans to reimburse those who have paid charges since the changes were rolled out in December 2021.”

2. Question by Mr. Phil King CC:

Leicester General Hospital and the Hydrotherapy Pool

During the pandemic in 2020 the Hydrotherapy Pool at LGH was closed as a consequence of the Covid19 regulations and has remained closed ever since.

Earlier this year, in response to my question on the 18th January, 2023:-

UHL stated that

A repair was required which would cost £153000, plus VAT, but that this

... is subject to availability of capital funding in 2023/24. A detailed proposal for capital expenditure in 2023/24 financial year will be brought to the Trust Board in the Spring of 2023 for review and approval, and the hydrotherapy pool will be considered in this process

To the best of my knowledge this has not happened.

Can UHL now confirm what their plan is for this pool facility?

When is it going to be repaired, and most importantly reopened for the patients of LLR?

Reply by the Chairman:

UHL have provided me with the following information in response to the question:

“A proposal was submitted during the 2023/4 planning round to fund the approximately £500,000 identified by a feasibility study to meet the costs of repairing the hydrotherapy pool and bringing it up to current standards.

Funds for capital expenditure are very limited and other projects identified as having greater clinical risk were identified and prioritised. The proposal will be re-considered in the 2024/25 planning round.

In the meantime, we are committed to support patients to find alternative community-based provision, where practical.”

3. Question by Cllr. Ramsay Ross:

There has been a report of ambulances being used at LRI for holding patients prior to admission (BBC – 10th December 2023) – can we have an explanation from UHL, why this situation has arisen and what remedial steps are in hand, given that this event has occurred in early December.

Reply by the Chairman:

I have sought a response from UHL regarding the issue and they have provided the following statement:

“We have made significant progress this year in reducing ambulance handover times, with an 80% reduction in the number of lost hours when compared to 2022 for much of the year. However, demand for urgent and emergency care services is currently exceptionally high, with a significant rise in emergency admissions when compared to the same period last year, driven by the onset of winter and higher patient acuity, particularly with flu and other

viruses, respiratory issues, and frailty. We apologise to anyone who experiences a delay in their care.

Patient safety remains our first priority, and we are doing all we can to ensure people are treated as quickly and safely as possible. In the event that anyone had to wait in an ambulance upon arrival, we ensure they are cared for safely, with regular observations and clinical reviews. We will continue to do all we can to bring handover times down, in line with the UHL urgent and emergency care plan we published in March 2023. This includes increasing our capacity, improving patient flow through our hospitals and working closely with our partners in the ambulance service and the wider health and care system to improve.

We are asking people to only attend the Emergency Department if they have a life-threatening injury or illness or to call 111 or use the 111 online service to get advice on the best course of action.”

4. Question by Cllr. Ramsay Ross:

At the Joint Health Scrutiny Meeting on 18th September 2023 under Agenda Item 8: ‘Delivery Plan for recovering access to Primary Care - LLR System Level Access’ Members emphasised the importance of clearly communicating to the public any changes to the way GP Practices operated. In particular Members felt it needed to be made clear to patients in advance whether their appointment was with a GP, a nurse or a pharmacist. In response it was explained that the ICB’s Engagement Team was carrying out work in this regard. The current absence of such a communication plan was also raised by the ICB at the Rutland Scrutiny Committee of 23rd November 2023. When will a communication plan be actioned to define the changed roles within our primary care sector?

Reply by the Chairman:

I have sought a response from the ICB and they have provided the following statement:

“The ICB has been promoting the changes taking place in primary care over the last 12 months and the development of new roles in GP practices has been a key part of our campaign. More recently, the focus on primary care recovery by reducing pressures on GPs and improving access for patients means there is renewed focus on the role of alternative health professionals in GP practices.

The campaign on alternatives to GPs should be seen as an integral part of a broader campaign to explain the changes taking place in GP practices.

The ICB's **Getting in the Know** campaign aims to raise awareness and support patients to access the right care for their condition by helping them to understand the services available to them. The campaign covers Urgent and Emergency Care, Mental Health and Primary Care. The Primary Care campaign supports patient to access the right care by explaining the options to them and helping them to determine what be the most appropriate service and care for their needs. Full details of the campaign are at:

<https://leicesterleicestershireandrutland.icb.nhs.uk/your-health/get-in-the-know/>

The specific primary care campaign is at:

<https://leicesterleicestershireandrutland.icb.nhs.uk/your-health/find-the-right-service/your-gp-practice/>

The primary care campaign covers:

- Access to GP practices
- Minor ailments and self-care
- Role of community pharmacist
- Appointment options
- Self - referral services
- Online services (e.g., NHS App)
- Practice teams including alternatives to seeing a GP.

Information on alternatives to GPs is available at:

<https://leicesterleicestershireandrutland.icb.nhs.uk/your-health/find-the-right-service/your-gp-practice/the-practice-team/>

A national campaign commenced in October to raise awareness of the of the different health professionals in GP teams. The campaign highlights the important role of reception teams in using information provided by patients to help identify which health professional or local service is best placed to help them, such as a community pharmacy.

The campaign is delivered through multi – cultural assets and is targeted at those more likely to need a GP appointment: working age adults, parents , olde people and those with long term conditions. There is also a focus on black and southeast Asian communities.

In the new year, the ICB will be working with practices to enhance the local campaign by:

- Ensuring information is available on practice websites. In particular making the information clearly visible and high profile including how referrals to other health professionals works at the practice.
- Creation of local materials to promote the different roles.

- *Social media and media campaign to raise awareness of the different roles and explain the support they can provide to patients. This will include examples of when a patient might be referred for an appointment with a different health professional as an alternative to a GP.*

The campaign will aim to create patient confidence in alternatives to GPs and support the local system level access and improvement plan.

To keep in touch with the campaigns it is suggested signing-up for 5 on Friday, the weekly stakeholder bulletin. Information on campaigns is included in the bulletin along with a partner toolkit to help local authorities and other organisations promote our activities on their social media channels. To sign – up, please email llricb-llr.corporatecomms@nhs.net

You can also follow us on X @NHS_LLRLR or Facebook <https://www.facebook.com/NHSLLR/>