

# Greater Lincolnshire LEP Health & Care Enterprise Board

*Tillots Pharma, The Larbourne Suite, 8 The Stables, Wellingore Hall, Wellingore, Lincolnshire, LN5 0HX and via Microsoft Teams*

**Date: Monday 7<sup>th</sup> February 2022**

**Time: 1-3pm**

***Draft Minutes***

## Draft Minutes

**Attendees:** Dean Fathers, Nikki Cooke, Jeremy Thorpe, Dan Hayes, Emma Tatlow, Frank Tanser, Melanie Weatherley, Jo Wright, Nicola Corrigan, Jacqui Bunce, Katy Thomas, Helen Shaw, Darren Clarke, Karen Seal, Nicole McGlennon (substitute for Martin Hindle) Navaz Sutton (*Centre for Ageing Better - Presenter*) Natalie Turner (*Centre for Ageing Better - Presenter*) Tom Blount (*Lincoln Science and Innovation Park Limited - Presenter*)

**Apologies:** Rachel Linstead, Nury Moreira, Caroline Illingworth, James Brindle, Peter Northrop, Chris Wheway, Martin Hindle

**Officers:** Ruth Carver, James Baty, Halina Davies (*Presenter*) Amy O'Sullivan (*Note taker*)

### Welcome and Formal Introductions

Hybrid meeting commenced at Tillots Pharma and Chair welcomed Board members at the venue as well as online via Microsoft Teams.

- Declarations of Interest
- Minutes and matters arising

**Previous minutes to be amended regarding the following agenda point from 29/11/21 meeting:**  
**Report: Public inquiry into the informational needs in health and social care in Greater Lincolnshire**

Board members were in agreement of the below amendments

- Board members discussed what conversations had taken place with local health and care colleagues during the research and subsequently there didn't appear to be any held and that was a gap that the group felt was important.
- The report makes recommendations that have not taken account of what is already happening. The report failed to recognise that this is an area already undergoing major transformation, in Lincolnshire through the Long-Term Plan, our own Population Health Management programme and our ICS digital and data strategies, peer to peer through regional and national ICS partnership delivery groups and nationally through largescale support programmes delivered by NHSEI and a range of strategic partners. Although well-intentioned, as none of this appears to have been given consideration in the scope, any resulting findings and recommendations do not take account of that context and risk distracting from the transformation journey that Lincolnshire is already on.
- The report did not refer to the standards, policies, or practices that both the Council and the NHS have to follow up and no details were presented regarding the demographic mix of those who were part of those focus groups.
- The report should recognise the delay between the creation and presentation of the research
- Term Public Enquiry has been discussed with researcher Katya Bozukova and has now been amended
- All feedback regarding the report has been discussed with Katya Bozukova to which appropriate action has taken place to reflect the Boards comments and observations

Minutes from previous meeting will be amended and re-published to reflect the above comments

All Board members agreed that all actions have been completed and/or are in progress

### COVID-19 Intelligence gathering

Round table discussion led by James Baty, Greater Lincolnshire LEP, utilising local intelligence from organisations on the long- and short-term impacts of COVID-19, which can be gathered and fed back to Government. Interested in understanding the impact on business, performance, productivity, investment and

gather a broader picture. What is the current biggest impact to business, is it COVID-19, energy price increases etc?

### Comments

Wider Impacts of Covid Intelligence Tool shared to feed into intelligence returns. This covers all 3 OHID regions that cover the GLLEP footprint <https://fingertips.phe.org.uk/profile/covid19>

Areas where OHID can possibly offer support

- Children and young people mental health
- Vaccination hesitancy
- Care Home Guidance communications

Financing is now a bigger issue than COVID, although due to regular policy changes, service users are often questioning the use of masks in the working environment.

Issues with staff shortages and staff tiredness, increase in national insurance and energy price hikes. With a commissioned business, prices cannot be increased which is a worry for SME's who are working with local authorities or the NHS, negotiations have to be made over the next 12 months

Staffing challenges and commissioners wanting to address the increase in costs but there is uncertainty as to their settlement received from central government

Post COVID Recruitment challenges, limiting growth and unable to obtain quality staff - decrease in applicants to administration roles, applicants lacking in softer skills and adaptability to the workplace.

Challenges surrounding restarting fundraising having had to stop for 2 years

Investment is needed to regularise the new digital hybrid way of working, having to look outside of the county for specific expertise.

Education - students having low resilience and many mental health issues post COVID, a lot of work has been done to build confidence and self-esteem to encourage them into placements. Issues with the student population surrounding vaccination hesitancy and research being undertaken with Boston College and Professor Sir Jonathan Van-Tam organisation to investigate this. JW happy to share findings once completed.

NC - kindly offered Office of Health Improvement and Disparities resources and support should any board members seek this regarding young people's mental health and vaccination hesitancy

Digital Skills - applicants preferring to work remotely are applying for roles outside of the county, with salaries which coincide with the area

Struggling to recruit entry level salary roles within the sport and leisure sectors. Swimming memberships are increasing but gym memberships are on the decline after being closed due to COVID.

Furlough having negative repercussions on staff not wanting to return to work, struggling to motivate staff and would not accept offer again should furlough be suggested as an option. Unable to fill vacancies of high-level salaries

Maintained pharmaceutical supply chain flourishing with increased stock holding to deal with anxieties of availability of medicines and working very hard to ensure continuity of supply to Northern Ireland. PPRS rate has increased from 5.2% to 15% leading to a significant amount of tax being paid back to the government, other which some companies will not survive this pay out. This has led to cutting costs and discounts out of the supply chain. Delays in new and innovative medicines coming to market.

Questions raised around the clarity of the requirements of vaccination passports and paperwork, particularly surrounding servicing machinery and the onus of responsibilities for industry protocols around entering certain working environments.

Launching programmes in line with NHS England, focus on blood pressure optimisation within cardiovascular disease. Supporting programs with early identification of children with ADHD, and early diagnosis of eating disorders in 16 - 25 year olds - national waiting lists for eating disorders has increased by 43%.

Finding opportunities and understanding what types of jobs can be done differently - Are there reasons why businesses in Greater Lincolnshire are less likely to take up those opportunities or are more likely to return to previous ways of working?

Could these positive benefits, help us get to the next step? Can we extend this to cover other types of jobs that are hard to fill and to bring in other elements of the population into the labour market.

### **ACTIONS**

**Should any Board members wish to feedback any other comments please do so directly to James Baty**

### **Centre for Ageing Better**

*Navaz Sutton - Partnership Manager & Natalie Turner - Head of Localities - Centre for Ageing Better - Lincolnshire*

The Centre for Ageing Better - a charitable foundation, funded by The National Lottery Community Fund, and part of the government's What Works Network; tackling ageism and taking action to reduce the inequalities people experience as they grow older.

Ageing population - 1 in 3 rural authorities are reflecting the average we expect to see nationally in 2080 (44% aged 50+)

Lincolnshire Older Workers (50 - 64 age group) 43.4% of Lincolnshire population is 50+

- 68.5% in employment
- 70.5% economically active
- 29.5% economically inactive

£74.50 average weekly cost of over 50s unemployment in Lincolnshire (proxy for 'cost of unemployment').

How do we ensure that Lincolnshire is an age friendly county? Particularly with employment, are we ensuring that the language and methods used during recruitment do not become a barrier for applicants?

### **Successes**

Age Friendly Movement - Age Friendly Communities - East Lindsey becoming part of the national network  
Homes - Homes for Independence, Good Homes Inquiry - House, Health and Care delivery group, systems and service mapping and assessed the user journey. Lincolnshire is now a test site for national recommendations  
Employment - Age Friendly Employer, Test and learn project - potential to engage with more partners

Presentation slides were circulated after meeting had taken place.

### **Key comments**

Coastal housing - Older populations on the coast often living in caravans, could better living alternatives be found? 15% of Walnut Care current work force are living in conditions with little heating, wifi etc which has detrimental effects to their health and ability to work. Due to site rules, residents often have to move.

Skills - how can we reskill those people who may wish to retire in order to become those workers who we need in Lincolnshire to cover skills gaps? Could it be the physical activity sector in order to be representative and advocative of those who want to stay active and healthy in the community? And how can we keep the existing workforce fit and healthy, in order to keep them in work beyond the average age of retirement? The voluntary sector would really benefit from an ageing workforce who wish to give back to their community

Promoting upsides to the quality of life in Lincolnshire - rural environments are becoming more attractive

places to buy property

Could there be a development within FE to get the ageing population back into training to upskill?  
Majority of volunteers within LIVES are over 40 - are there work streams available for a productive route into retirement?

Lack of part time opportunities, with more focus on recent graduates creating building blocks for long standing careers within businesses. Test and Learn projects to work with businesses in order to switch up model appeal to local audience. Business need is to be addressed and look into how offers and contracts are framed etc

Forecast for retirement age to increase - transition of targeting those with ideal transferable skills who are already working to build in different habits and lifestyle choices in order to prolong employment

### **ACTIONS**

**NS to provide progress updates and continue to engage with the Board**

**Aseptic pharmaceutical suite update for ULHT at Lincoln Science and Innovation Park**

*Tom Blount -Director - Lincoln Science and Innovation Park Limited*

Phase 1 - 2 months off completion of the Aseptic pharmaceutical suite for ULHT, 22 NHS pharmacists soon to be working on site. Creating development opportunities for collaboration between the pharmacists, the University of Lincoln School of Pharmacy and the pharma related businesses currently located on the Lincoln Science and Innovation Park. Working in personalised medicine, blood analysis and blood markers etc, this is creating capacity and small regional opportunities.

*DfH Report into the Future of Aseptic Pharmaceuticals - "I am proposing the transformation of the aseptic services production model across England. It will need considerable investment but will yield significant returns in quality and cost. A national network of regional hubs with the capacity to produce high volume products on an industrialised scale using automated systems in off hospital sites will free up nursing staff for the business of care, enable care closer to home and allow space for the aseptic facilities in hospitals to deliver the more complex, individualised medicines much closer to the patient."*

Phase 2 - Utilising the pre-built consortium of partners in the pilot to work with DfH to support building a regional hub in Lincolnshire. Creating a cluster and creating jobs.  
With funding and expertise secured, how do we get the government engaged, to see that this is part of the levelling agenda and regeneration of Lincolnshire?

### **Key comments**

Are there connections with Midlands Health Engine that could drive support for the Lincolnshire specific agenda?

Any additional capability and facilities in the region are a good and positive opportunity. Medilink Midlands are eager to offer promotional support and see what other opportunities can be developed from this. However, how and where does this fit in as part of a local facilities strategy? Does it just serve Greater Lincolnshire and can it going further?

Speed of response with customer service focus - commercial interest and who is that for?

Theme development of 'good for Lincolnshire, good for cluster development' needs to take place before finding the roots to market

### **ACTIONS**

- **Volunteer group to be created, to explore what other opportunities can come from this?**

- Genomics partner interest for the group
- Opportunity to visit site - share interest with Tom
- JT and TB to follow up conversation offline - JT to share Ethical Medicine Industry Group contact

## Humber Freeport

*Halina Davies - Partnerships and Programmes Executive Manager - Greater Lincolnshire LEP*

- Health technologies and what could the potentials be?

Why has Government Supported Establishment of Freeports? National hubs for trade and investment, Regeneration and levelling up and Create hotbed for innovation

## Innovation links to Health & Care

- Proposed R&D centre in Hull under consideration supporting MedTech clustering
- Lincoln University Development of a new Research Centre for Digital and Sustainable Transformation - likely to be a virtual Hub initially
- Establishing a Freeport Innovation Liaison Group (FILG)

## Considerations for the Health & Care Enterprise Board

- Freeport Operational Spring - sites developed 2022 to 2025
- Retention of pooled business rates in freeport company - 4 authorities
- Significant inward investment opportunities - potentially game changing
- A skilled workforce will be required - circa new 7000 jobs forecast
- Impact on increased housing, increased community facilities and infrastructure requirements
- Supply chain opportunities for Lincolnshire Businesses
- Innovation potential, Research, and development opportunities - knowledge transfer and collaboration between business and academia - three universities already involved

## Health & Care Connections

- Freeport Innovation Strategy - health is one of three key sectors for university and business collaboration
- Establishing a new Freeport Liaison Group and Innovation Hub - Spring 2022 - potential to access pooled business rates within the Freeport 2023/24
- Companies such as Smith & Nephew leading on MedTech and are already investing within the Freeport area
- University links to Lincoln Medical School, Centre for Innovation in Rural Health, National Centre for Rural Health and Care and LSIP
- The North already has a strong MedTech cluster - from medical devices to digital health and service provision. Chaired by the Northern Health Science Alliance (the NHSA)
- GLLEP will sit on Freeport Company Board and the LEP Health & Enterprise Board - enabling synergy and opportunity

Creating a new hub that will look at logistics, thinking about the future of logistics, how this work can be collaborative with the University. Feeding into the National Infrastructure Commission, responding through the Midlands Connect team and through Midlands Engine as well in terms of some of the key issues in regards to freights and how this might be improved.

## Key comments

Medilinks Midlands keen to be involved and open up conversation regarding collaborative Freeport opportunities

Pharmaceutical Pre-wholesaling company depot based in Doncaster, Mawdsley-Brooks would be of interest to connect with the Freeport Liaison Group

How do we improve the transport network? And what does the cluster asset look like?

### **ACTIONS**

- Volunteers to share interest with Halina for joining Freeport Liaison Group
- JT to share Mawdsley-Brooks contact with Halina
- Identify where the baseline Health & Care investment opportunities may be and submit for consideration to both the liaison group and the Freeport Company

### **Levelling Up White Paper Update**

*Ruth Carver - Chief Executive - Greater Lincolnshire LEP*

Brief overview of 330-page Levelling up White Paper, containing huge narrative on many agendas. Currently stands as a general direction of travel with no action plans or fiscal findings attached to it, apart from [UKSPF](#) (interim guidance notes) which highlights the next European programme. The programme will go to districts, continuing the Towns Fund approach - 2.4 billion over a 3 year period - Year 1 Pride of Place, Year 2 and 3 focusing on employment and skills, supporting business and innovation. Full guidance notes on funding allocations to be released in the spring

Main paper announcements include new missions (Jobs, Research, Transport, Technology/Connectivity, Education, Skills, Health, Wellbeing, Local Pride, Housing, Crime & Safety, Devolution) and transformation of means to measure levelling up

LEP futures are confirmed and will remain in place, with ongoing role; either in or outside of devolved structures

Six factors identified to drive levelling up “capitals”:

- Physical capital - infrastructure, machines and housing.
- Human capital - the skills, health and experience of the workforce.
- Intangible capital- innovation, ideas and patents.
- Financial capital - resources supporting the financing of companies.
- Social capital - the strength of communities, relationships and trust.

### **Next Steps**

- Roles of LEPs and next steps to be confirmed with Ministers in coming weeks, with wider process of engagement and informal consultation to inform levelling up delivery and future policy making.
- UK Government will create a new regime to oversee its levelling up missions, establishing a statutory duty to publish an annual report analysing progress and a new external Levelling Up Advisory Council.
- New devolution framework to be set out
- Over time, the UK Government will introduce a statutory obligation to report annually on progress towards meeting the Levelling Up missions for devolved administrations.

### **GLLEP officers to:**

- Continue to analyse White Paper and brief strategic Boards
- Consider scope of paper in relation to existing strategies
- Assess Greater Lincolnshire Levelling Up ‘metrics’

NS - narrative of the ageing population was not highlighted in the paper. There are only pockets of it being mentioned around healthy life expectancy, has been pulled forward in terms of reducing the gap from 2035 to 2030

Board members commented on the usefulness of the summary and presentation slides were circulated after meeting had taken place.

### **Review of the year - *Dean Fathers***

Committee effectiveness review survey to be created and circulated between now and the next meeting in May. Feedback will be utilised to look over past performance, what has worked and what needs to be improved. This will be connected and reflected in the Health & Care Enterprise Boards Terms of Reference, which will be brought to the Board once a year to make recommendations.

### **ACTIONS**

**AO to create survey in partnership with Chair and circulate to Board members, qualitative and quantitative data to be collated for next meeting**

### **AOB**

Board members and Chair congratulated Dan Hayes (The Order of St John Care Trust) for receiving an OBE and thanked Dan for the offer to host the next Board meeting. Chair thanked presenters, attendees for their contributions and host, Tillots Pharma before closing the meeting.

**Next meeting date - 9<sup>th</sup> May 2022 - The Orders of St John Care Trust, Eyre Court, Whisby Way, Lincoln, LN6 3LQ (1-3pm) and virtual. Please allow for travel time in your diary.**

**Meeting Closed**