



Report To:	South Holland District Council
Date:	Wednesday, 13 May 2026
Subject:	Health Scrutiny for Lincolnshire Report
Purpose:	To provide South Holland District Council with an update following the latest meeting of the health Scrutiny for Lincolnshire Committee
Key Decision:	N
Portfolio Holder:	Portfolio Holder for Health & Wellbeing, Conservation & Heritage
Report Of:	Councillor Glynis Scalese
Report Author:	Samantha Bradley, Democratic and Electoral Services Support Officer
Ward(s) Affected:	N/A
Exempt Report:	N

Summary

This report is provided in accordance with Standing Order 5 of Part 4A (Procedural Standing Orders) of the Council's Constitution which states that written reports will be received from Councillors who represent the Council on outside bodies. Reports will normally be for information only, however, members may recommend that a matter be considered or investigated by officers and that the investigating officers be asked to submit a further detailed report. Councillor Scalese is SHDC's representative to the Health Scrutiny Committee for Lincolnshire. This report is provided for information purposes only, and members are requested to note it.

Recommendations

That the report be noted

Reasons for Recommendations

To provide members with an update following the latest meeting of the Health Scrutiny Committee for Lincolnshire, in line with the requirements of the Council's Constitution.

Other Options Considered

- Not to note the report; or
- To note the report and request that a matter be considered or investigated by officers, and that the investigating officer submit a further detailed report.

1. Health Scrutiny for Lincolnshire Report

East Ambulance Service – Lincolnshire Division Response

The East Ambulance Service outlined its graduated response model, which is designed to reflect the urgency and clinical severity of each incident.

- Immediate responses are reserved for life-threatening emergencies, including cardiac or respiratory arrest.
- Serious conditions, such as strokes or presentations involving chest pain, receive a rapid response to enable prompt clinical assessment and, where appropriate, urgent conveyance.
- Urgent cases, for example uncomplicated diabetic presentations, are supported through timely intervention and transfer to an acute care setting.
- Non-urgent cases involving stable clinical conditions are managed through planned transportation to a hospital ward or outpatient clinic.

Clinical Strategy

The service's clinical strategy is underpinned by a commitment to providing safe, effective, and compassionate care. A key principle is ensuring patients receive the right care, in the right place, delivered by the right person. Emphasis is placed on coordinated working across services to improve patient outcomes. The strategy also seeks to strengthen preventative healthcare, address health inequalities, improve ambulance response times, and reduce the number of inappropriate ambulance dispatches, thereby supporting more efficient use of resources.

Clinical Priorities

Through the 999-triage process, the service aims to rapidly identify patients experiencing critical cardiac events.

- Appropriate clinical resources are deployed to provide prompt specialist care and, where required, timely conveyance.
- Hospitals are pre-alerted to support swift intervention on arrival, with a clear focus on ensuring patients are conveyed to the most appropriate setting first time.

- Frontline staff have access to senior clinical advice 24 hours a day to support decision-making and risk management.
- Ongoing training ensures clinical teams are equipped to recognise and treat a range of cardiac conditions.

In addition, the service highlighted the importance of community education initiatives, including improving public awareness and confidence in the use of cardiopulmonary resuscitation (CPR) and automated external defibrillators (AEDs).

Pharmacy Services in Lincolnshire

- The National Pharmacy Association, which represents independent pharmacies across the country, has published a report calling for the expansion of pharmacy services that support patients to use their medicines effectively.
- The report states that these services have the potential to save the National Health Service billions of pounds.
- It also warns that up to sixty-three per cent of pharmacies nationally could close within the next year.
- Approximately four in ten pharmacies are reported to be unable to fully meet the cost of prescription medicines for patients without additional financial support.
- In Lincolnshire, around one third of pharmacies are independent contractors.
- Many of these independent pharmacies are located in rural areas and operate as the only pharmacy within several miles.
- Closure of these pharmacies would have a serious and detrimental impact on patients across Lincolnshire, particularly those in rural communities.

Community Pharmacy Contractual Framework

- The Community Pharmacy Contractual Framework sets out three levels of pharmacy services:
 - Essential services
 - Advanced services
 - Enhanced or locally commissioned services.

Essential Services

- Essential services are negotiated nationally and commissioned by National Health Service England.
- They are provided by all community pharmacies.
- These services include:
 - Dispensing of medicines
 - Repeat dispensing.
 - Public health activity, including the promotion of healthy lifestyles.
 - Signposting to other services
 - Support for self-care.

Advanced Services

- Advanced services are negotiated nationally and commissioned by National Health Service England.
- These services are provided by pharmacies that choose to offer them.
- Advanced services include:
 - Vaccinations
 - Pharmacy First
 - Hypertension case-finding
 - Pharmacy contraception service

Enhanced or Locally Commissioned Services

- Enhanced services are negotiated locally and commissioned by local authorities, the National Health Service Lincolnshire Integrated Care Board, or National Health Service England.
- These services are designed to meet specific local health needs.
- Provision depends on local commissioning arrangements and is not available from all pharmacies.
- Examples of enhanced services include substance misuse services.

Advanced Service: Pharmacy First

- As of 31 January 2026, all community pharmacies in Lincolnshire were providing the Pharmacy First service.
- The Pharmacy First service was introduced on 31 January 2024.
- A key element of the service is the provision of advice and National Health Service funded treatment, where clinically appropriate.
- The service is available for seven common conditions, subject to age restrictions:
 - Sinusitis
 - Sore throat
 - Acute otitis media
 - Infected insect bites
 - Impetigo
 - Shingles
 - Uncomplicated urinary tract infections

Appendices

None

Background Papers

No background papers as defined in Section 100D of the Local Government Act 1972 were used in the production of this report.

Chronological History of this Report

A report on this item has not been previously considered by a Council body.

Report Approval

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Signed off by: N/A

Approved for publication: N/A