

IN Partnership

The stakeholder bulletin for



**Leicester, Leicestershire
and Rutland**
Health and Wellbeing Partnership



September 2022

WELCOME TO IN PARTNERSHIP

Welcome to this latest edition of In Partnership, providing details of how the Integrated Care System (ICS) in Leicester, Leicestershire and Rutland (LLR) is taking shape.

Our ICS is a partnership of local health and care organisations, including the three upper tier local authorities, that have come together to plan and deliver joined up services and to improve the health and wellbeing of people who live and work in the area. In Partnership brings you news, views and updates on partner organisations working together to better integrate care in LLR.

INCLUDED IN THIS ISSUE:

Health and care community responds to CQC visit

Focusing our minds on the cost of living

Her Majesty The Queen awards George Cross to the NHS

Conference celebrates our health and care heroes

Technology partner appointed for virtual ward service

Carers urged to have their say

HEALTH AND CARE COMMUNITY RESPONDS TO CQC VISIT

An action plan is in place to ensure urgent and emergency care services are as good as they can be, following a visit from the Care Quality Commission (CQC) which took place earlier this year.

Against a backdrop of recovery from Covid-19 and sustained pressures on services, the CQC visited Leicester, Leicestershire and Rutland (LLR) during April 2022 and toured a range of hospital, community, primary and social care services.

As expected, there was plenty of positive feedback and acknowledgement of how hard staff have been working during very difficult circumstances, and there were also areas for improvement identified.

Feedback included:

- Staff reported that they had seen an increase in people coming to their services for care and/or treatment
- Some people reported difficulties when trying to see or speak to their GP
- Poor patient flow across health and social care has increased the significant pressure in the emergency department, resulting in long delays in care and treatment
- High number of patients remain in hospital who are medically fit enough to leave
- Long delays in ambulance handovers leading to further pressure on the emergency department.



The CQC issued a warning notice about aspects of care at the Leicester Royal Infirmary emergency department – feedback which is being picked up directly by University Hospitals of Leicester NHS Trust, with ongoing liaison between the hospital trust and the CQC.

On behalf of health and care services in LLR, Andy Williams, Chief Executive of the Leicester, Leicestershire and Rutland Integrated Care Board (LLR ICB), said:

"The report acknowledges the challenges we face and recognises the hard work of health and care staff and those in care homes and other services in response to significantly increased levels of demand faced by urgent and emergency care services. Importantly, it emphasises the need for a system response with all organisations involved in urgent and emergency needing to play their part to make the necessary improvements."

"We have an action plan in place which focuses on reducing unnecessary attendances; improving patient flow across the system; and enabling patients to be seen in the right place, first time, which we have further strengthened to address the recommendations in the CQC report."

"Patients rightly expect high standards and quality of care and we, as a system, are fully aware of the need to drive the necessary improvements for patients. Our priority is that local people should be confident that their journey through the services should be as smooth as possible from the moment they access them."

Specific actions being taken in LLR to improve urgent and emergency care services include:

- Opening Urgent Treatment Centres across the area, some with walk-in access. These centres are GP-led, open at least 12 hours-a-day, every day, offer appointments that can be booked through 111 or through a GP referral, and are equipped to diagnose and deal with many of the most common ailments that people might otherwise attend the emergency department for
- Developing initiatives to reduce, where medically appropriate, ambulances needing to take people to the emergency department. A team in the 999 control room, consisting of nurses, mental health professionals and paramedics, conduct clinical assessments of patients over the phone to help identify the best place for them to receive medical help, avoiding the need for an ambulance
- Providing an Integrated Care Response service every day of the year which responds to frail and older people who have suffered a fall at home, helping reduce the need for admissions into hospital
- Focusing on our hospital discharge processes to ensure all support is in place to enable safe and timely discharge for patients. This includes bringing together people from different services to plan and manage the discharge of individual patients
- Providing 'same day emergency care' for emergency patients who would otherwise be admitted to hospital. Patients presenting at hospital with relevant conditions are rapidly assessed, diagnosed and treated without being admitted to a ward, and if clinically safe to do so, will go home the same day their care is provided.

OUR OPPORTUNITY TO TACKLE HEALTH INEQUALITIES

Progress has been made over a number of years in bringing together health and care services for the benefit of local people. This work is now going to take a step forward, both nationally and locally, with the need for communities to develop integrated care strategies.

The requirements for an integrated care strategy have been set out in new guidance from the Department for Health and Social Care and work is already taking place in LLR to see how we can make best use of this new strategic approach.

The Department states: "The integrated care strategy should set the direction

of the system... setting out how commissioners in the NHS and local authorities, working with providers and other partners, can deliver more joined-up, preventative, and person-centred care for their whole population, across the course of their life. The integrated care strategy presents an opportunity to do things differently to before, such as reaching beyond 'traditional' health and social care services to consider the wider determinants of health or joining-up health, social care and wider services."

Locally, the LLR Health and Wellbeing Partnership will be key to developing our integrated care strategy and selecting the priority areas on which we need to focus. A workshop was held in June 2022 which brought together the three local Health and Wellbeing Boards and the LLR Integrated Care Board.

The workshop established a shortlist of three priorities:

1. Responding to the cost of living crisis
2. Improving access to services, including ensuring people are aware of all the different local services available
3. Making sure local organisations are doing their best to contribute to the local economy, environment and society.

Their next workshop in the autumn will focus on the cost of living and examine what organisations are doing for their staff and local population on this issue.

NHS AWARDED THE GEORGE CROSS

The Late Her Royal Highness The Queen, who so sadly passed away earlier this month, accompanied by His Royal Highness The Prince of Wales, now King Charles III, awarded the George Cross to the NHS in July.

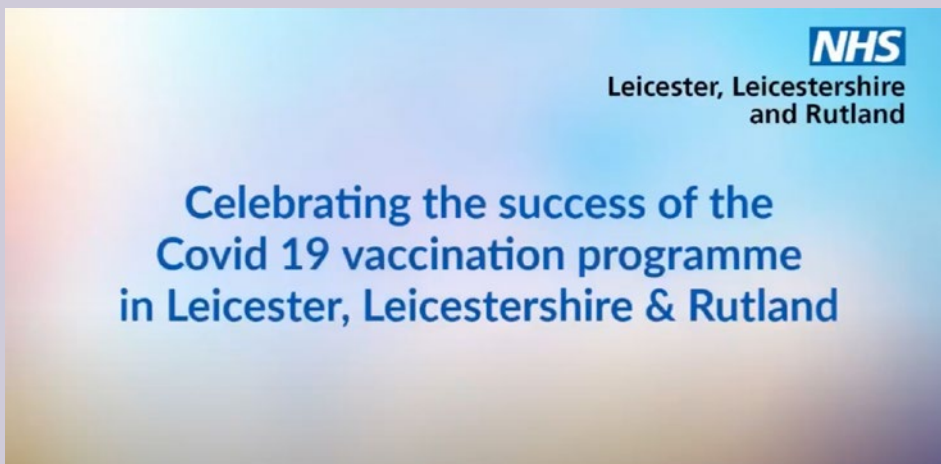
Amanda Pritchard, NHS Chief Executive and May Parsons, the nurse who delivered the world's first Covid-19 vaccination outside a clinical trial, received the George Cross on behalf of our incredible 1.5 million NHS colleagues in England.

The George Cross, awarded to the four National Health Services of the UK, is in recognition of more than 74 years of service including the exceptional efforts of NHS staff across the country during the Covid-19 pandemic. The presentation came exactly one week after the NHS' birthday.

The award, created in 1940, sits at the top of the UK honours system joint with the military Victoria Cross and is the highest civilian gallantry award. It is given for acts of the greatest heroism or of the most conspicuous courage in circumstances of extreme danger.



CONFERENCE CELEBRATES OUR HEALTH AND CARE HEROES



A conference to thank everyone involved in the LLR Covid-19 vaccination programme took place in August 2022 at Leicester's King Power Stadium.

The conference, organised by the Workforce Bureau, hosted by Leicestershire Partnership NHS Trust, heard from programme leaders, celebrated the programme's achievements and provided an opportunity to share good practice.

Since the start of this huge programme in 2020, nearly 3,500 applicants have been recruited across a range of roles including administrators, healthcare assistants, vaccinators, clinical supervisors and pharmacists.

At any one time, there were approximately 680 people ready to deploy to sites across LLR.



The vaccination programme attracted people from across the community, as paid staff and volunteers, many of whom had never worked for the NHS before. The hope is that some of these individuals will be inspired to seek further opportunities within the sector.

In a YouTube video, Dr Caroline Trevithick, Chief Nursing Officer, LLR Lead Covid-19 vaccination programme, LLR ICB, said:

"I want to thank everybody who volunteered through the Workforce Bureau to come forward to be vaccinators, support staff and volunteers. I honestly can't thank you enough – without you, we would not have been able to deliver the million vaccines that we have done so far."

TECHNOLOGY PARTNER APPOINTED FOR VIRTUAL WARD SERVICE

The local NHS has appointed Spirit Health to be its technology partner to support the introduction of 'virtual wards' for patients in LLR. A virtual ward is a team of professionals working to manage a group of patients in the community. The service will increase hospital bed capacity and enable more patients to receive the timely treatment they need.

Virtual wards allow patients to get the care they need at home, safely and conveniently, rather than being in hospital. Using a combination of remote monitoring by healthcare professionals and home visits, virtual wards can help prevent hospital admissions or allow for an earlier, supported discharge from hospital.

The remote monitoring platform, CliniTouch Vie, provided by Spirit Health, allows patients to manage their condition at home with support from clinical teams who can act swiftly if the patient's health deteriorates.

The virtual ward service has been arranged by NHS Leicester, Leicestershire and Rutland and will be provided by a collaborative of local organisations, including University Hospitals of Leicester NHS Trust, Leicestershire Partnership NHS Trust and LOROS.

People tend to make a better recovery in their own surroundings, and staying in hospital longer than necessary can have a detrimental effect on their condition and their independence. A key strategy for the local NHS, known as home first, means that before a patient is admitted to hospital or transfers to the next phase in their treatment, care providers should always consider whether the patient can



be treated at home rather than in hospital. Virtual wards represent one way of making that possible.

By winter, it is hoped that about 287 patients will be able to be looked after across nine virtual wards including frailty, cardiology, acute respiratory and diabetes.

CARERS URGED TO HAVE THEIR SAY



Carers UK has launched its State of Caring 2022 survey and is encouraging carers everywhere to take part. The survey's aim is to understand carers' priorities for the future and what support is needed to help recovery from the pandemic. Important issues addressed in the survey include cost of living, access to healthcare and hospital discharge. Find out more and have your say via this [Survey Monkey weblink](#).



Do you have an item that you would like including in the next issue of *In Partnership*, or a case study of integration in practice that could be highlighted?

Please send your thoughts and ideas, as well as any feedback, to:
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