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Welcome from Dr. Andy Ker

In this edition we focus on the targets set for delayed transfers of care plus the new Children and Families Partnership brings us up to date on their work to oversee the delivery of the priorities for Children and Young People in Leicestershire's Joint Health and Wellbeing Strategy. Following on from an independent Gateway Review of the IPOA programme in September a refreshed Business Case was presented to the Programme Board on 17 November 2017.

The Unified Prevention Board's programme of work for 2017 and into 2018 has been agreed. The group will oversee the development and delivery of prevention activities underpinning the health and wellbeing strategy and ensure the prevention objectives of the Sustainability and Transformation Partnership (STP) are jointly delivered across Leicestershire. A current piece of work is the self-care campaign, which is encouraging a healthier lifestyle to combat diabetes. Plus an update on two Local Government Association (LGA) projects.

So far, over 62,000 patients across Leicester, Leicestershire and Rutland (LLR) have signed up to share more information about their health and care through the Enhanced Summary Care Record. There is now a revised form which includes the key Read Codes, which will allow practices to process completed forms more quickly. I would ask everyone to encourage patients, staff, family and friends to complete the form to help hospital staff treat individuals quickly and effectively.

Further information about our Integration Programme, including the Better Care Fund is available at the Integration Programme main page: <http://www.healthandcareleicestershire.co.uk/health-and-care-integration/>

Our new presentation highlighting our achievements over the past two years is available at: <https://prezi.com/view/4S3DihUulx4Oo860Mrfu/>

For previous editions of this bulletin please follow this link:

www.healthandcareleicestershire.co.uk/health-and-care-integration/health-and-care-integration-newsletters/

Delayed Transfers of Care (DTC)

As reported in the November newsletter, Health and Care partners across LLR are working hard to deliver improvements to transfers out of hospital and reduce delayed transfers of care (DTC).

A patient is defined as ready for transfer when:

- A clinical decision has been made that patient is ready to transfer;
- A multi-disciplinary team (MDT) decision has been made that patient is ready for transfer;
- The patient is safe to discharge/transfer.

DTC data is captured in three categories:

- Patients who are delayed due to NHS reasons;
- Patients who are delayed due to Local Authority reasons;

- Patients whose delays are jointly attributable.

NHS England has set challenging targets for each local area to achieve by November 2017. In Leicestershire, we need to achieve a rate of no more than 6.84 delayed bed days per 100,000 population. It should be noted that November DTOC data is released nationally in January, so our final performance for November will not be known until then. The table below shows our performance in August and September, compared to the November Target.

	NHS Delays	LA Delays	Joint Delays	Total
Performance at August	6.76	1.26	1.49	9.51
Performance at Sept	6.21	0.79	1.73	8.73
Target for November	3.78	1.33	1.73	6.84

In September there were 1,431 days delayed. This is 8.73 average days delayed per day per 100,000 population. This therefore needs to drop to 6.84 by November 2017 if we are to achieve the target.

Further information on September's performance is detailed below:

- Adult Social Care (ASC) days delayed remains very low, 129 – down from 214 in August.
- Joint days delayed were 284 – up from 252 in August, but still within target
- NHS days delayed were 1018 – down from 1145 in August but still some distance from target.
- University Hospitals of Leicester (UHL) had more days delayed in September (500) than August (427)
- Leicestershire Partnership Trust (LPT) had fewer days delayed in September (680) than August (916)
- There were fewer ASC delays across LPT and UHL in September (82) than in August (160)
- Out of County providers (e.g. hospitals on our borders, such as Kettering, Burton or George Eliot in Nuneaton) collectively had 251 days delayed in September, compared with 268 in August
- ASC delays in out of county providers were 47 in September, down from 54 in August.

The main area of focus is resolving remaining delays in non-acute hospital sites (such as community hospitals, mental health and learning disability units) across Leicester, Leicestershire and Rutland. A detailed site by site review has been completed to assess a number of complex delayed patients. Partners have worked jointly to ensure these have a clear plan for discharge and find solutions to some difficult barriers.

As a result of this, further improvements have been made during October and November, and although Leicestershire is highly unlikely to achieve the national target by the end of November, we aim to do so as soon as possible thereafter.

For more information contact Jude.Emberson@leics.co.uk, Health and Care Integration Manager on 0116 305 0326.

Children and Families Partnership

In November 2016 the Health and Wellbeing Board approved the creation of a sub-group to oversee the delivery of Leicestershire's Joint Health and Wellbeing Strategy priorities which relate to children.

The new Children and Families Partnership is tasked with developing and overseeing the Children and Young People's Plan for Leicestershire for 2018-2023 that will deliver on the vision "Children and young people in Leicestershire are safe and living in families where they can achieve their full potential". The Partnership also has the expanded remit of overseeing the Supporting Leicestershire Families Programme.

Councillor Ivan Ould, Lead Member for Children and Families and Chair of the Partnership said “When partners work together, children and families benefit from their co-ordinated activities. The Partnership will ensure that the overriding targets are met, and in the most effective, cost-efficient way. I am looking forward to the establishment of a vibrant, pro-active partnership that delivers the target areas set out.”

Over the summer the Partnership brought together representatives including county and district councils, public health, LPT, UHL, police, schools and the voluntary sector to identify the key outcomes and focus areas to support the delivery of the vision.

The five key outcomes have been agreed as:

- Ensure the best start in life
- Safe and free from harm
- Support families to be self-sufficient and resilient
- Ensure vulnerable families receive personalised care and support
- Enable children to have good physical and mental health

Outcome Leads are currently working with a range of partners to map existing activity that contributes towards these outcomes and to develop a SMART performance framework.

It is anticipated the Children and Young People’s Plan will be launched early in the new year.

For more information please contact Mala Razak, Children and Families Partnership Manager at mala.razak@leics.gov.uk or call 0116 3058055.

Integrated Points of Access (IPOA) Business Case

An independent Gateway Review of the IPOA programme was completed at the end of September. The major recommendation was that a refreshed Business Case should be produced and this was presented to the Programme Board on 17 November 2017.

Feedback from that session and subsequent presentations at Partner Governance Boards is that the IPOA should be seen as an LLR enabler for the wider context of integration, enabling the best outcomes for Clinical Navigation Hub, Home First and the Prevention/Early intervention agenda. The Programme team is now concentrating on producing illustrative material to communicate that message succinctly.

The next few weeks will involve numerous governance forums and it is anticipated that a programme decision from partners regarding the future scope of the programme will be communicated at the January 2018 Programme Board.

For more information contact Mark.Dewick@leics.gov.uk, LLR IPOA Programme Manager or call 0116 3053696 or 07542495638.

Unified Prevention Board update

The programme of work for the Unified Prevention Board has been agreed for 2017 and into 2018. This oversees the development and delivery of prevention activities underpinning the health and wellbeing strategy for Leicestershire and to ensure the prevention objectives of the Sustainability and Transformation Partnership (STP) are jointly delivered across Leicestershire.

The schedule will focus on one outcome pillar per quarter and be able to demonstrate progress throughout the year. The agreed schedule is:

- | | |
|----------------------------------|-----------|
| a) October 2017 to December 2017 | Keep Well |
| b) January 2018 to March 2018 | Keep Safe |

c) April 2018 to June 2018 Stay Independent

d) July 2018 to September 2018 Enjoy Life.

The diagram below shows further detail in each work programme:



From October to December, the board has been working on requirements to support the social prescribing model for Leicestershire. The local definition for social prescribing was agreed in April 2017 as

“A mechanism for empowering people to help themselves and link individuals that need it, with non-medical sources of support within the community. It will ensure that the response given is appropriate to the individual and allows them choice and influence over their situation”.

The model aims to develop the wrap-around prevention offer to support Integrated Locality Teams (ILT) and will initially focus around pockets of need e.g. people with multiple long-term conditions.

For more information contact Lisa.Carter@leics.gov.uk or call 0116 305 0786.

Local Government Association (LGA) Grant projects update

Following confirmation that our funding bid for an LGA grant had been successful, Leicestershire County Council was also asked to participate in the Prevention at Scale Programme. It is intended that both projects will use the Care and Health Track system to develop dashboards for analysis and reporting purposes.

Sharing Information and Integrating Services Project

This was the initial LGA bid submitted earlier this year and the proposal is to:

- Develop a targeted approach to enable support and signposting at the first contact point, irrespective of the organisation itself.
- Develop a method to monitor outcomes that have been missing in previous contacts, or delayed, and have therefore resulted in increased demand on services.

It aims to build methodology to calculate what the contribution of non-medical interventions are on the overall costs of the health and care system by having a systematic method for measuring prevention. Crucially this approach will look at how this data can be integrated across the system from a person centred perspective, providing a solution whereby the individual's journey can be measured over time and the benefits can be measured in terms of outcome for the patient and savings to the health and care system.

The project should help deliver the savings proposed within the STP linked to the implementation of integrated locality teams.

Prevention at Scale Project

This is a separate project, for which the LGA are providing 20 days external consultancy time at no cost to local partners to assist with a specific prevention issue.

Work undertaken by the Unified Prevention Board had previously identified the potential creation of a core prevention offer which wraps around each integrated locality team and the population(s) they are supporting. The prevention offer for integrated teams aims to reduce the activity and costs associated with acute and statutory services in favour of more preventative and low level support where applicable. The target audience for integrated teams is up to 230,000 residents across LLR who have multiple conditions, frailty and/ or high acute care costs.

The work of the Unified Prevention Board has already highlighted that across the partner organisations, representing almost all public sector bodies operating in Leicestershire, there are many residents that create significant demand on us all. Taking the learning from our work so far on Integrated Locality Teams, Making Every Contact Count and the Braunstone Blues scheme, the prevention at scale project will provide targeted approach via the continuous professional development of public sector staff, so they can become skilled at signposting people to what is available locally to improve four key prevention outcomes. Public sector staff will be provided with access to resources and information about the core prevention offer, enabling them to support and signpost people, monitor outcomes that have been missing or delayed and resulted in increased demand on services.

At whichever point of contact the individual enters the system, this key information and signposting can be provided – either directly, or by building on the existing point of entry for social prescribing, Leicestershire County Council's "First Contact Plus". The target groups will be identified through mapping cohorts from the existing programmes and pathways. This will then be used to ascertain the top ten problems that resulted in the need for high-intensity services at some point in the system. Individuals will then be offered this support at an earlier stage in order to prevent the crisis developing. It is intended to have two pilot sites, one in East Leicestershire and one in West Leicestershire. During these pilots it is intended that a variety of entry points will be used, in order to evaluate the user experience as well as effectiveness of different delivery methods for the information available.

It is recognised that our NHS partners have had "Make Every Contact Count" as an objective for several years, however this approach currently only applies within the NHS itself, meaning that residents often remain on the periphery of other public sector services and remain invisible until some form of crisis occurs. This proposal focuses on those that are currently high users, and are within the cohort of individuals meeting the potential future high users of services (which are yet to be identified), as part of a sector wide health and wellbeing education service.

For more information contact Andrea.Baker@leics.gov.uk or call 07460 366 398 or 0116 305 6841.

Enhanced Summary Care Records

Over 62,000 patients across Leicester, Leicestershire and Rutland have signed up to share more information about their health and care preferences across health and social care organisations so far.

Health and social care leads across Leicester, Leicestershire and Rutland recommend that all patients consent to the new 'Enhanced Summary Care Record', which can also include details of illnesses and health problems, past operations and vaccinations, treatment preferences, information about the kind of support needed, and who should be contacted if more information is required.

Dr Andy Ker, Clinical Vice-Chair at East Leicestershire and Rutland Clinical Commissioning Group said: "It's really

pleasing that more patients are signing up for an Enhanced Summary Care Record.

“Doctors and nurses in hospitals do not routinely have access to individual’s GP medical records. By encouraging everyone in Leicester, Leicestershire and Rutland to consent to an Enhanced Summary Care Record we can all help hospital staff treat individuals quickly and effectively. Completing the form only takes a couple of minutes but it could end up saving your life.”

An updated version of the form to provide consent for an Enhanced Summary Care Record that includes the key Read Codes which will allow practices to process completed forms more quickly, via Optical Character Recognition can be downloaded [here](#). The form should be returned to the patients’ GP practice reception.

This information will be managed securely in line with the NHS Care Records Guarantee. The Record will only be accessed by doctors and nurses if consent is provided by the patient, unless they are unconscious or unable to communicate and they believe that accessing the record is in the patient’s best interest.

For more information contact Jennie.Caukwell@westleicestershireccg.nhs.uk

Self-care campaign update

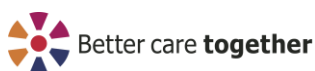
The county’s Health and Wellbeing Board launched a ‘self-care’ campaign recently in Leicestershire, encouraging people to take care of themselves and know what’s available to help them look after their health. The campaign has seen positive engagement, with a focus on increasing physical activity levels and eating healthily – both of which can help reduce or prevent the risk of diabetes. Important ‘self-care’ health and wellbeing messages will continue throughout winter. To find out more visit the [campaign](#) page or follow @leicsHWB on twitter #selfcareforlife #leics .

Contact us

 Follow us on Twitter [@LeicsHWB](#)

See our website: www.healthandcareleicestershire.co.uk

Download our Better Care Fund plan on a page: <http://www.healthandcareleicestershire.co.uk/download/BCF-strategy-and-progress.pdf>



To find out more about Better Care Together – Leicester, Leicestershire and Rutland’s five year health and care strategy visit www.bettercareleicester.nhs.uk

For enquiries about this bulletin please email BetterCareFund@leics.gov.uk or call 0116 305 5749