



**In this edition:**

**Falls Prevention eFRAT update | Integrated Points of Access update | Unified Prevention Board | Summary care records | SIMTEGR8 project**



**Welcome from Dr. Andy Ker**

In this edition we have an update on the work we are doing to prevent falls, including a new video featuring the eFRAT tool, the progress of the Business Case and news of funding for a regional project.

We hear how plans to integrate adult health and social care Points of Access across Leicester, Leicestershire and Rutland are progressing.

We have an update on the Unified Prevention Board (UPB), including the recently agreed outcomes that will form the county wide prevention strategy and delivery model.

We also hear about the successful completion of phase two of the [SIMTEGR8 project](#) that evaluated four services being piloted through the Leicestershire Better Care Fund (BCF) including Lightbulb and Help to Live at Home.

Further information on our 2017/18 BCF refresh and achievements is available at:

<http://www.healthandcareleicestershire.co.uk/health-and-care-integration/resources/local-resources/>

**For previous editions of this bulletin please follow this link:**

[www.healthandcareleicestershire.co.uk/health-and-care-integration/health-and-care-integration-newsletters/](http://www.healthandcareleicestershire.co.uk/health-and-care-integration/health-and-care-integration-newsletters/)

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**Falls Prevention eFRAT update**

The development of the electronic Falls Risk Assessment Tool (eFRAT) app and the new falls prevention pathway is progressing well. We are currently putting the finishing touches to a video explaining how the eFRAT app works and the benefits for both professionals and patients in ensuring that the most appropriate course of action is taken for each individual to help them maintain their independence and remain in the community.

The Business Case for year one has been approved by West Leicestershire Clinical Commissioning Group and East Leicestershire and Rutland Clinical Commissioning Group subject to robust data and monitoring. Leicester City Clinical Commissioning Group will be considering the business case at their next meeting in June.

Meanwhile:

- The new falls triage and assessment process has continued across the county showing great improvements in access to therapy for patients and patient outcomes.
- LPT and county adult social care are working together to develop seamless therapy and falls prevention training to care home staff.
- A needs analysis is underway for falls prevention activity across the county involving the voluntary sector.
- The East Midlands Academic Health Science Network (EMAHSN) proposal for a regional project based on e-FRAT phase 3 proposals has been successful and scoping of this began at the end of May.

For more information please contact [Andrea.Baker@leics.gov.uk](mailto:Andrea.Baker@leics.gov.uk) or call 0116 305 6841 or 07460 366 398.

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## Integrated Points of Access update

Leicester, Leicestershire and Rutland (LLR) currently have multiple points of access that receive referrals for health and social care community based services and admissions into and from acute hospitals. Through our integrated care work we have highlighted the need to simplify these points of access.

Working together, LLR adult health and social care teams want to provide integrated, high quality services, delivered in local community settings (where appropriate to do so). LLR sees the creation of a single point of access for adult services as key to supporting this ambition.

The aim of integrating adult service points of access is to make it as simple as possible to access health and care services without having to go through multiple services and organisations. In turn, this will reduce the duplication in regard to referrals that currently exist and so free up time for direct patient/service user care.

The overall vision is that through calling one number or submitting one electronic referral or electronic record request, each query will be handled by a customer service officer who could deal with all aspects of a referral for both adult health and social care provision. The customer service officer will only request advice/guidance from a suitably experienced Health or Social care professional as required. The ambition is to increase the number of requests that can be processed quickly, without the delay of involving additional professional advice.

The business case to integrate adult health and social care Points of Access (POA) across Leicester, Leicestershire and Rutland (LLR) was approved in summer 2016. Since then, detailed review and future service model design has been taking place involving representatives from the relevant services and members of the public.

Subject to a 'gateway review' of the programme in August 2017 where partners will make final decisions, it is anticipated the existing access points will move into a shared site in spring 2018 and begin working within a single management structure. There is a significant amount of work to complete following this move to enable these multiple access points to change into a single, integrated LLR Adult point of access, underpinned by appropriate systems and record sharing from the spring 2019.

For more information please contact [Mark.Dewick@leics.gov.uk](mailto:Mark.Dewick@leics.gov.uk), call 0116 3053696 or visit [www.healthandcareleicestershire.co.uk/health-and-care-integration/integrating-leicester-leicestershire-and-rutland-points-of-access/](http://www.healthandcareleicestershire.co.uk/health-and-care-integration/integrating-leicester-leicestershire-and-rutland-points-of-access/)

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## Unified Prevention Board agrees outcomes

In Leicestershire we are working together to develop a consistent and coordinated prevention offer.

Providing preventative services and local coordination in communities ensures that vulnerable people have better access to information, support and advice to help them avoid reaching crisis point. It will also ensure that when people need health and care support that they can quickly return home and regain their independence within a supportive community.

The Unified Prevention Board identified four overarching outcomes that have been agreed by partners. These will form the county wide prevention strategy which also incorporates the Sustainability and Transformation Plan (STP) prevention outputs. These are:

- Keep safe
- Keep well
- Stay independent
- Enjoy life

It has been agreed that delivery of this will take the form of a hub and spoke model with some county wide services (e.g. First Contact Plus, Local Area Coordination (LAC) and Lightbulb) and some services delivered at district/locality level.

A workshop held on 10 May 2017 identified activity within each of the four pillars which can be reported on to monitor activity and performance. It was agreed that each partner will feed in their strategic activity.

Terms of Reference are being revised to reflect changes across the region in relation to STP work, the Early Help and

Prevention county project and to strengthen the role of the UPB in approving prevention activity across Leicestershire.

For more information please contact [Andrea.Baker@leics.gov.uk](mailto:Andrea.Baker@leics.gov.uk) or call 0116 305 6841 or 07460 366 398.

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### Summary care records – SCR v2.1

Nationally over 55.2 million people (96%) now have a Summary Care Record (SCR) and over 107,000 SCRs are viewed every week in the NHS. Locally SCRs are already being viewed by University Hospitals Leicester, 111, GP out-of-hours, Leicester Partnership Trust and EMAS. The existing Core Summary Care Record only contains standard information e.g. allergies and medications.

The new SCR v2.1 allows for a wealth of additional information to be recorded, as it is an enhanced version of SCR that, where express consent is given, provides additional information. It has been designed with extensive clinical input and brings together several existing clinical templates into one place for accessibility, using codes from the NHS England Inclusion Dataset for Summary Care Record v2.1. It has also been future-proofed for SNOMED compatibility and is a more comprehensive record and includes an Integrated Care Planning template.

This means accurate and up to date records will be available offering improved communication and information flow, reducing the need for patients to re-answer questions and for clinicians to duplicate work. This will ensure patients receive more appropriate care in emergency and out of hours care episodes, leading to reduced admissions and increased clinical confidence in decision making.

The three CCGs made a successful bid for funding that will enable us to deliver interoperable record sharing for across health and social care colleagues. The programme is being rolled out in three phases across LLR.

**Phase 1** – GP Practices SCR 2.1 for primary Care in LLR, practices are now reviewing care plans and uploading information to SCR.

**Phase 2** – Provider Services and Secondary Care in LLR - this focuses on Community, Mental Health, Urgent and Secondary Care Services viewing information through the SCR. Phase 2 will be completed by November 2017.

**Phase 3** – Adult Social Care in LLR – this focuses on Adult Social Care providers being able to view patient records but only with express patient consent. Patient Summary care record information will be viewable and will enable integrated locality team working. Phase 3 will be completed by August 2018.

For more information please contact [Clare.Sherman@EastLeicestershireandRutlandccg.nhs.uk](mailto:Clare.Sherman@EastLeicestershireandRutlandccg.nhs.uk) LLR STP IM&T Lead

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### SIMTEGR8 project

As part of the Better Care Fund programme, testing the impact and effectiveness of the new health and care pathways in the community is vital.

Phase two of the [SIMTEGR8 project](#) evaluated four patient centric service integrations being piloted through the Leicestershire Better Care Fund (BCF). The project is a collaboration between Leicestershire County Council, Healthwatch Leicestershire, Loughborough University and SIMUL8. The four schemes evaluated were:

- Lightbulb Housing Support Service
- Intensive Community Support Service (LPT)
- Help to Live at Home domiciliary care service
- Glenfield Clinical Decisions Unit (UHL)

The [SIMTEGR8 project](#) used facilitated simulation modelling to test the impact and effectiveness of the schemes. The latest Simulation models are developed after discussing the pathways with relevant stakeholders in a facilitated workshop. The models are subsequently used in a further workshop with the same stakeholders to generate understanding and discussion around the impact of the current pathway on improving user experience and to identify potential improvements.

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## Contact us

 Follow us on Twitter **@LeicsHWB**

See our website: [www.healthandcareleicestershire.co.uk](http://www.healthandcareleicestershire.co.uk)

Download our Better Care Fund plan on a page: [www.healthandcareleicestershire.co.uk/download/unnamed-file.pdf/BCF-strategy-and-progress.pdf](http://www.healthandcareleicestershire.co.uk/download/unnamed-file.pdf/BCF-strategy-and-progress.pdf)



Better care **together**

To find out more about Better Care Together – Leicester, Leicestershire and Rutland’s five year health and care strategy visit [www.bettercareleicester.nhs.uk](http://www.bettercareleicester.nhs.uk)

For enquiries about this bulletin please email [BetterCareFund@leics.gov.uk](mailto:BetterCareFund@leics.gov.uk) or call 0116 305 5749