Local Care Partnership Report

Locality:	Northern
Period Covered by Update:	September-October 2023
Locality Director/Deputy Locality Director:	Lou Higgins/Becky Harty

The purpose of this report is to update all locality partners on the work of the LCP delivery and workplan.

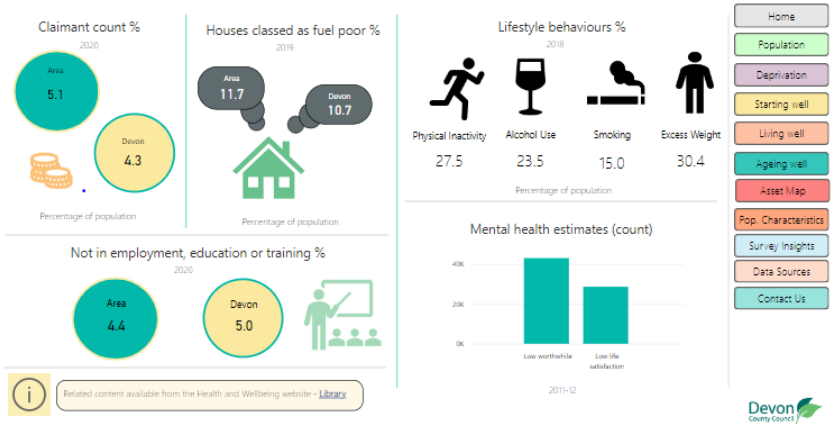
This report goes to the Northern LCP programme group initially where it is amended and updated with key decisions, outcomes and escalations before then going to the executive group and other LCP and locality wide members.

Northern Devon: Data, Evidence and Performance

The aim of this section is to provide a brief overview of where you can access data and evidence to explain what our locality population, demographic, and psychographic looks like and why we are doing what we are doing, including our priorities and programmes of work.

Right - JSNA Headline Tool: Living Well/Eastern LCP [JSNA headline tool - Devon Health and Wellbeing]

Online interactive mapping and analysis tool (only specific organisation email addresses can access unfortunately) [SHAPE Atlas]



September-October 2023

Northern Local Care Partnership: Programme Group Highlight Report

Locality Director:	Becky Harty	Overall Programme RAG Status:	

Priorities	Projects	RAG	Programme Lead(s)/Chair(s)	Progress Update/Key Decisions
1. Prevention, Health Inequalities, Population Health & Community Flow	i. Population health Management (PHM) Action Learning Sets ii. Fuel Poverty iii. Refugee and Asylum Seeker iv. One Communities v. Cost of Living vi. CORE20 Plus5 vii. Innovation for Healthcare Inequalities Programme (InHIP) viii. Active Travel ix. OND Flow Programmes x. Diabetes Transformation		Andrea Beacham/James Lander/Nicola Mitchell/Kay Brennan	• **1iii. Refugee and Asylum Seekers** High activity across all sites continues – in the Northern locality, the refugee resettlement on the Chivenor Military base commenced from the 25th of September. The local council and health providers are working closely together to ensure suitable support. • **1iv. One Communities:** On the 27/9/2023 the 'One Communities' were presented as pre-existing place-based partnerships in Northern Devon that could support the NLCPs aims to help reduce inequalities, engage those most at risk of poor health, empower people to have a greater say in their lives and health and to help create connected, resilient more cohesive communities. The group are now seeking feedback to begin the conversation about how these place-based partnerships could support the NLCP and how the NLCP could support communities, to engage, please complete the survey here: Place-based partnerships: NLCP feedback (google.com) • **1vi. CORE20 Plus5:** The outcome report will be available in the coming month, following a short delay. Funding has recently been extended until March 2024, it was previously due to end on the 30th of September.
2. Integrated Care	i. Enhanced Health in Care Homes ii. Urgent Community Response, Acute Respiratory Infection Response and		Trudy Reeve	• **2i. Enhanced Health in Care Homes:** £10,000 per locality has been agreed for personalised activity projects with a possible focus on male residents. A refresh of the Enhanced Health in Care Home framework has been requested to inform focus areas for the remainder of the year. • **2ii. Urgent Community Response, Acute Respiratory Infection Response and Virtual Wards:**

Priorities	Projects	RAG	Programme Lead(s)/Chair(s)	Progress Update/Key Decisions
	Virtual Wards FaME iii. End of Life Care iv. Connecting You v. Better Care Fund vi. Healthy Ageing Northern Devon Projects vii. Pro-active Care Pilots viii. Spirometry			Options for alternative referral pathways are being scoped, to include from Care Homes, pendant alarm providers and self/direct-referrals (when previously known to services). • **2iv. End of Life Care:** An EOL Implementation workshop took place on the 14th of September as part of urgent and emergency care improvement plan. EOL care enhancements in scope include: central Devon coordination offer; OOH (out-of-hours) access to specialist clinical support; increase advance care planning activity; Digital access to TEP (treatment escalation plan) via Devon & Cornwall Shared Care Record. Liaison with locality Hospice providers - recognising a rising risk being held by both sites to reduced provision/offer within next six months due to financial deficit. Hospice@home or other community services likely to be impacted (reduced) first to protect safety of workforce and maintain key hospice functions. This therefore could result in increased demand on community and/or acute services to provide EOL crisis care this winter. • **2vi. Better Care Fund:** Initial returns of completed review documentation requested for 30th September. Final report to be completed by 31st December to inform BCF 2nd year planning 24/25. • **2x. Spirometry:** A system-led business case in support of Devon wide spirometry offer within primary care is in development. In addition: phased roll-out for Association for Respiratory Technology and Physiology (ARTP) equivalent training for primary care clinicians (practice nurse and care assistants) to be able to undertake or interpret spirometry ahead of and in anticipation of business case approval.
3. Mental Health, Learning Disability and Neurodiversity	TBD		Becky Harty/Emma Elston/Tara Rundle	The group last met on the 3rd of October where there was a good level of representation from across sectors. Members heard from the Kailo project on how we could align better with the LCP and the children and young peoples work, from the MHLDN provider collaborative and from system experts engaged in the refugee and asylum seeker work.

Priorities	Projects	RAG	Programme Lead(s)/Chair(s)	Progress Update/Key Decisions
Partnership Forum				
4. LCP Development	i. Governance and Structure ii. Development and Co-Design iii. Vision and Objectives iv. Leadership Development		Becky Harty/Glen Allaway	• **4iii. Vision and Objectives:** Work to better integrate the Local Care Partnership and One Northern Devon has been underway with a broad range of key stakeholders and partners involved. A document with initial scoping and a strengths, weakness, opportunities and threats (SWOT) analysis can be seen here: 08.08.23-Agenda-Northern-LCP-Executive.-V3._-2.docx (live.com) Work to progress integration/merging plans will begin in the coming months with discussions ongoing across meeting spaces.

North and East Unscheduled Care Board Updates – Lead – Holly McKenzie				
Ambulance Handover Delays	**Ambulance Response**	**12 Hour Breaches**	**4-Hour Performance**	**No Criteria to Reside**
Metric – reduction in handover delays under 15 minutes vs the agreed plan **Trajectory from August gives us a figure of 1274**	June – response times sitting at centre line with trajectory for September coming down	Metric – Improvements in line with agreed baseline plan over two quarters, in 12-hour breaches **Trajectory from August at 0, with figures at 733**	Metric – improvements in line with agreed baseline and plan over two quarters, 4-hour performance to meet 76% in 23/24 **Trajectory at 71%**	Metric – to achieve and sustain for two quarters a reduction in number of patients who no longer meet the 'criteria to reside in hospital' to no more than 5%: **21st August trajectory showing 5%, RDUHN currently at 15% for 42 patients**
Key Messages from Unscheduled Care Board – 20th September				
Deep-dive into Tiverton UTC: • Recruitment underway to provide 8-8 7 days pw (currently 8-6) • MIU workforce challenges around ED minors, MIUs, WICs, UTCs and primary care. Many staff lost to primary care due to banding and Ts and Cs. Task and finish group to look at possibility of a locality workforce model. • Consistent and timely access to imaging for all CUC centres is an issue; caused by funding issues and community radiographer availability. Latent effect of people having a poor experience 1st time, not using the service again, impacting on ED.				

- Review of NHS Quicker App to ensure we are communicating with the public in the optimum way re minors options

Deep-dive into Minors improvements across N&E:

- Clear action plan focussed on improvements required
- Bespoke to each site but shared learning and best practice across both
- Nurse-led model and safety briefs at the heart of the change

Deep-dive into Transfer of Care Hubs:

- Clear action plan focussed on improvements needed to meet national standard
- Weekend discharges biggest challenge

Other:

- Ambulance divert catchment area agreement still impacting negatively on RDUH
- Pre-noon discharge definition and position to be established Devon-wide as lack of clarity on this metric.
- Recent experience from 227 LoS patient in NDDH – learning event to be undertaken and feedback at next N&E UCB

Related LCP Meetings	Key Messages	Chair
Northern LCP Programme Group	The group last met on the 27th of September, a key area of discussion was around how the LCP and One Communities can work more closely together – particularly on community development, as within the Joint Forward Plan.	Becky Harty/Sharon Bates
Northern LCP Executive Group	The group last met on the 12th of September where the remaining health inequality proposals were reviewed and signed off with approval.	Glen Allaway/ Solveig Wright

Northern Local Care Partnership: Programme Group Risk Report

Project ID	Project Title	Current Risk Score	Risk Description	Mitigations
2iii.	End of Life Care	8	Devon-wide concern from hospice providers of significant financial and capacity challenges facing this sector in continuing and maintaining some elements of current provision. Anticipate need to end or down-scale some service provision due to extreme financial pressures.	Following the Devon EOL review priorities have been identified to include: • To produce single service specification for EOL services • Consider single-point-of-access model for EOL care • Progress digital -shared care record roll-out

Project ID	Project Title	Current Risk Score	Risk Description	Mitigations
2.viii.	Spirometry	16	Spirometry N&E escalation of concerns regarding Spirometry and lack of availability of quality assured spirometry to appropriately support management of respiratory conditions included in the CORE20plus 5 long term conditions. Devon system recognising impact lack of access to spirometry is negatively affecting demand on secondary care for diagnostics and as guide for management within primary care. Plus is impeding Devon's ability to deliver on the Long-Term Plan commitments.	Devon wide proposal/solution to be scoped. Devon-wide discussions led by central team for One Devon business case underway with expectation for Q3
1.iv.	One Communities Community Development Officer (CDO) funding	12	If no further funding is secured for the 24/25 financial year, posts will end.	An application to the ICB health inequalities fund for 24/25 will likely be made if additional funding cannot be found or allocated.

Funding Opportunities & Information

Status	Title/Subject of Bid	Purpose/Agreement	Funding/Application Deadline	Associated Workstream	Funding Amount
All health inequality proposals have been agreed followed the last Northern Executive meeting on the 12th of September – progress updates to follow	Northern Local Care Partnership share of Population Health, Health Inequalities & Prevention Funding (Integrated	Support at risk prevention related workstreams in additional to funding extra/prioritised work Improve the health and wellbeing of those that are marginalised and/or	Proposals due for submission in September 2023	One Northern Devon Board/Northern Local Care Partnership Programme Group/Health Inequalities Steering Group	£124k

	Care Board – NHS Devon)	experience health inequalities			