



July 2022 newsletter

Joined Up Care Derbyshire is the name for Derby and Derbyshire's Integrated Care System (ICS). This newsletter is produced bi-monthly; past editions can be found <u>here</u>.

Derby and Derbyshire ICB is now established - what does this mean?

In previous issues of this Joined Up Care Derbyshire newsletter we've explained how Royal Assent has been granted for the Health and Care Bill and that, amongst a range of other measures, the Bill creates Integrated Care Boards (ICBs) as replacements for Clinical Commissioning Groups and establishes in the law the role of Integrated Care Partnerships (ICPs) where health, social care, the voluntary sector and other partners come together as an Integrated Care System (ICS).

As of Friday 1 July, the Derby and Derbyshire Integrated Care Board (ICB) is established by legislation and replaces the Derby and Derbyshire Clinical Commissioning Group. It takes on wider responsibilities for enabling collaboration and partnerships across the health and care sector and takes on the functions

of the CCG, as well as some additional commissioning responsibilities which will develop over time – such as primary care, dentistry, optometry and pharmaceutical, which were previously held by NHS England.

It will also establish new ways of working through integration and collaboration with other health and care partners across the county (such as other NHS organisations, local authorities and the voluntary sector). It is one of the organisations that makes up Joined Up Care Derbyshire, which is the Integrated Care System (ICS) in Derby and Derbyshire. The Derby and Derbyshire ICB, along with Derby and Derbyshire Integrated Care Partnership, plays a coordinating role in Joined Up Care Derbyshire.











What does this mean for the people of Derby and Derbyshire?

This is an important and positive step forward for the NHS in Derby and Derbyshire and our partners across the wider health and care sector when it comes to improving the health of our population, reducing inequalities, and delivering high quality integrated health and care services. Although it is a new body with a new remit, working together as an integrated care system isn't new to us and is something we've been doing successfully for several years. In this time, we have built solid relationships across our Joined Up Care Derbyshire partnership, and have already established ways of working that we can take forward. The formalisation of these relationships challenges us to set out an ambitious and exciting future and mandates us to use our collective will to improve the health and population across the county.

The Derby and Derbyshire Clinical Commissioning Group is leaving us a strong legacy to build on as the Integrated Care Board and we're pleased that many of the people who worked in the CCG will continue their work in the ICB.

One of the core areas of focus for us now as Joined Up Care Derbyshire is to recover from the impact of the pandemic on health care services as a whole. Beyond that, the focus of service delivery will shift to become more preventative and about improving the Derby and Derbyshire population's life expectancy and reducing health inequalities. We want to involve local people more in understanding their priorities and needs, and for them to help us shape the services and support available.

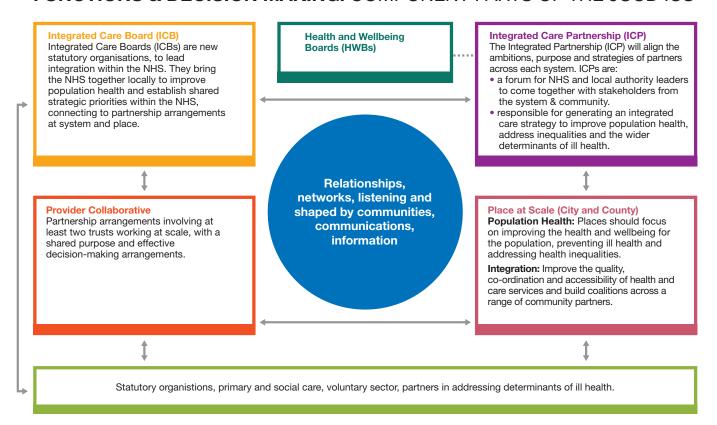
We speak for the wider ICB Board of Directors when we say we're excited about the future of the ICB and ICS. Whilst we know that there are challenges ahead of us, we are very optimistic about the role that we will play in the future of the health system in Derby and Derbyshire, and how people live healthy lives.

For more information about the ICB, ICP and ICS in Derby and Derbyshire, you can visit the new website here: www.joinedupcarederbyshire.co.uk

Dr. Chris Clayton John MacDonald

Chief Executive Chair

FUNCTIONS & DECISION MAKING: COMPONENT PARTS OF THE JUCD ICS



ICB Board Members

As part of the transition to an Integrated Care Board (ICB), six new executive directors were appointed in May, all of whom are highly experienced within the NHS and ready to take the new organisation forwards. A further five non-executive directors have also been appointed. To see the full biographies, visit our website.

Chair

John MacDonald

John is the Chair of the ICB and Independent Chair of Joined Up Care Derbyshire, as well as the Chair of University Hospitals of Leicester NHS Foundation Trust.

He is accountable for ensuring there is a long-term, viable strategy in place for the delivery of the functions, duties and objectives of the Integrated Care System / Integrated Care Board and for the stewardship of public money.

The Chair champions action to help meet the four core purposes of Integrated Care Systems; to improve outcomes in population health and healthcare; tackle inequalities in outcomes, experience and access; enhance productivity and value for money and help the NHS support broader social and economic development.



Chief Executive

Dr Chris Clayton

Chris is the Chief Executive of NHS Derby and Derbyshire Integrated Care Board and the lead executive for Joined Up Care Derbyshire.

As Chief Executive Officer, Chris leads the Integrated Care Board and helps leaders from the NHS, local authorities and the voluntary sector to work even more closely together to join up services, personalise care, tackle health inequalities and improve people's health across the local area, overseeing delivery of the long-term integrated care strategy for the health and care system.



Executive Directors

Brigid Stacey, Chief Nursing Officer & Deputy Chief Executive

Brigid has nearly 20 years' experience in Director of Nursing and Quality roles, including several years at NHS England North Midlands. She brings extensive knowledge of the NHS from the frontline services to senior and strategic level. Her role is to assure the ICB on its statutory duties with regards to the quality and safety of the services it commissions.



Dr Chris Weiner, Chief Medical Officer

Chris joined the ICB from NHS England and will lead on clinical strategy and clinical standards, including strategic planning for long term conditions.

As Medical Director, Chris supports the development and delivery of the long-term plan of the integrated care board (ICB). He is responsible for ensuring this reflects and integrates the strategies of all relevant partner organisations of the ICB, with a particular focus on developing a shared clinical strategy.



Keith Griffiths, Chief Finance Officer

Keith was Director of Finance at Cheshire and Merseyside Health and Care Partnership. As Chief Financial Officer, Keith ensures that the ICB meets the financial targets set for it by NHS England and NHS Improvement, including living within the overall revenue and capital allocation, and the administration costs limit.

As the lead financial executive for the NHS system, Keith works in partnership with lead finance officers in constituent organisations in ensuring that the Integrated Care System (ICS) delivers its financial targets and supports the development and delivery of the long-term plan of the ICB, integrating the strategies of all relevant partner organisations of the ICS, with a particular focus on developing a shared financial and resourcing strategy.



Zara Jones, Executive Director of Strategy & Planning

Zara joined NHS Derby and Derbyshire clinical Commissioning Group in September 2018 from Staffordshire, where she was Director of Strategy, Planning and Performance across six CCGs.

Zara is responsible for transforming the ICB's approach to commissioning to one which is much more strategic and is focused on improving outcomes for patients in agreed priority areas.

Her role is to accelerate the development of Strategic Commissioning in Derby and Derbyshire to set the direction, align the resources and create the conditions to enable improvements in health outcomes and reducing health inequalities for local people.



Helen Dillistone, Executive Director of Corporate Affairs

Helen has held a number of senior management positions in the NHS for the past 18 years. Prior to that she worked in a range of management positions within commercial and legal sectors. Helen's first degree is in law and she also holds an MBA.

She provides the most senior management support to the Chief Executive Officer and ICB Chair in ensuring that the ICB exercises its functions effectively, efficiently and economically. She is responsible for the development and implementation of effective management systems to enable ICB leaders, together with the wider partnership, to deliver the ICB's business and strategic objectives and a continuous improvement in services to the population served.



Amanda Rawlings, Chief People Officer

Amanda was the Executive Director of People and Organisational Development at University Hospitals of Derby and Burton before joining the Derby and Derbyshire ICB. Amanda leads the development and delivery of the long-term people strategy of the ICB, ensuring this reflects and integrates the strategies of all relevant partner organisations within the ICS.

In turn, this will achieve our "One Workforce" approach and deliver Derby and Derbyshire's commitments to The People Plan and our ambition for creating "world class" integrated care.



Non-executive Directors

Margaret Gildea

Margaret is a HR professional with 30 years' experience at Rolls-Royce, culminating in being the company director of learning and development and divisional executive vice president of HR. Since leaving Rolls Royce in 2009, Margaret has run her own business helping organisations with major change programmes.

She has been a Non-Executive Director with the Derbyshire Healthcare NHS Foundation Trust since 2016, helping to develop the 'People First' approach which has moved the Trust to a CQC rating of 'Good'.



Julian Corner

Julian has been Chief Executive of the charitable funder Lankelly Chase Foundation since 2011, where he has led its work to support organisations, networks and places to promote equity and justice through systemic change. He is also coming to the end of a successful term as Chair of Toynbee Hall, which works to tackle the causes and impacts of poverty.

Julian will Chair two committees: the Strategic Population Health & Commissioning Committee and the Public Partnership Committee. Julian lives in Stanton-in-the- Peak, near Matlock.



Dr Buk Dhadda

Dr Dhadda was born and raised in Derby, and qualified at St Georges Hospital Medical School in London in 1995. He has worked as a local GP since 1999, and is currently a GP at Swadlincote Surgery.

Dr Dhadda has a specialist interest in diabetes, and supported the reorganisation of diabetes services in Derbyshire while clinical lead for diabetes for the NHS Southern Derbyshire CCG's Clinical Lead.



Sue Sunderland

Sue is an accountant who has worked for the Audit Commission and KPMG and has held a range of lay and non-executive roles with NHS Bassetlaw CCG, NHS Nottingham & Nottinghamshire CCG; the Office of the Police & Crime Commissioner and has also recently been appointed as a Non-Executive Director at Nottinghamshire Healthcare NHS Foundation Trust.

Sue's entire career has been in the public sector and she has a strong commitment to health equality and mental health issues. Sue will Chair the ICB's Audit and Governance Committee.



Richard Wright

Richard has been a Non-Executive Director at Derbyshire Healthcare NHS Foundation Trust since 2016. He is also Chair of the Finance Oversight Group for Joined Up Care Derbyshire.

Richard is also Chair of the Sheffield University Technical College Multi Academy Trust; and a Board Member of Sheffield National Centre for Sport and Exercise Medicine.

He was previously Executive Director of the Sheffield Chamber of Commerce and has a background in the private sector. Richard will Chair the ICB's Finance and Estates Committee. Richard lives on the border of Derbyshire, Nottinghamshire and South Yorkshire.



Partner Members

Andy Smith Strategic Director for Children's and Adults' Social Services

Dean Wallace Director of Public Health, Derbyshire County Council

Tracy Allen Chief Executive Officer of Derbyshire Community Health Services Foundation Trust

Ifti Majid Chief Executive Officer of Derbyshire Healthcare NHS Foundation Trust

Andy Mott GP Partner Member

Get involved – ICB Board Meetings

The Integrated Care Board currently meet in public and confidentially monthly. The public sessions are an opportunity for members of the public and stakeholders to hear more about what's happening across the ICB, finances and plans for the future.

ICB board meetings remain virtual, making it even easier for members of the public to join. You can get involved by asking a question in advance that relates to the agenda for the meeting you plan to attend, or you can join and watch.

For more information on how to watch the meetings, see the agenda papers and see the minutes and recordings from previous Board meetings, visit the <u>Joined Up Care Derbyshire website</u>.

Upcoming Integrated Care Board Meetings

Thursday 21 July 2022: 9am – 10.45am

Thursday 18 August 2022: 9am - 10.45am

Thursday 15 September 2022:

9am - 10.45am

Thursday 20 October 2022:

9am - 10.45am

Thursday 17 November 2022:

9am - 10.45am

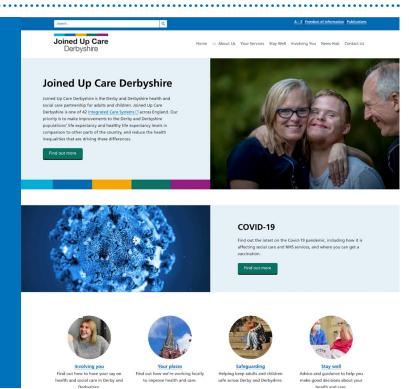
Thursday 15 December 2022:

9am - 10.45am

Have you seen our new website?

To coincide with the establishment of the Integrated Care Board (ICB) we've also launched <u>our new Joined Up Care Derbyshire website</u> this month. It brings together information about Joined Up Care Derbyshire and what we do, but also includes information about the Integrated Cared Board (ICB), Integrated Care Partnership (ICP) and our places, and offers an easy-to -use directory of services. There's also information about how you can stay well and get involved with shaping the future of health and social care in Derby and Derbyshire.

We will also be sending out our new JUCD bulletin to our stakeholders each week, updating on system news. We'll be in touch to tell you how you can subscribe to this, so please keep an eye out for further information.



Are you following us on social media?

We've also updated our social media channels to reflect the transition to becoming an Integrated Care Board (ICB). You can keep up to date by following us on the below channels:

Derby and Derbyshire Integrated Care Board

NHS Derby and Derbyshire ICB

NHS Derby and Derbyshire ICB

@NHSDDICB

Joined Up Care Derbyshire

Joined Up Care Derbyshire

O Joined Up Care Derbyshire

@JoinedUpCare

Derbyshire Dialogue – ICS update

As we move beyond the ICS formal transition date of 1 July we really want to ensure that we keep you informed of progress in the early days of the new arrangements and ways of working for our ICS. We are planning to deliver a Derbyshire Dialogue on the first month of the ICS in early August to update you on progress and to listen to your thoughts and experiences and to respond to questions you may have at that point. The date and time is to be confirmed and we will then send invitations through our usual channels so please keep any eye out for it arriving and as always share via your own networks if you think others would find this useful.



Glossop update

We are delighted to welcome Glossop into the Derby and Derbyshire Integrated Care System from 1 July 2022. Since the government announcement on boundary changes in the summer of 2021 which has resulted in the move from the Greater Manchester system to Derby and Derbyshire, our two systems have worked in conjunction with network partners, public and patient representatives and other colleagues to ensure that the change is as seamless as possible. Ensuring that Glossop residents are informed and reassured that nothing will change in the way that they receive their care, that there are no proposals to make changes for the next 12 months, and that this will continue to be the same for the next 12 months has been paramount. Thanks to all involved for their continuing work on the listening events and other activities that have supported this priority.



Continuing to keep people informed is vitally important and as part of the communications and engagement plan beyond 1 July, there

will be a number of opportunities for local people to ask questions and get involved, including the Saturday morning events in Norfolk Square, Glossop – the next one is on Saturday 9 July at 10.30am. In the meantime Glossop colleagues and partners are already directly and actively involved in Derby and Derbyshire forums including Place, Primary Care Networks and many others to ensure that Glossop is fully integrated from 1 July. Glossop is also represented in the refreshed Joined Up Care Derbyshire brand with an image of Glossop Town Hall in the landscape image below. We look forward to the coming weeks and months as we move on to the next stage of our Integrated Care System journey with Glossop firmly embedded in activities from the start.



Getting on the front foot in proactive care – a focus on the Elderly Care Liaison Officer Role within Team Up Derbyshire

A Derbyshire Primary Care Network (PCN) is taking the first steps in delivering a more proactive approach to care. Arch PCN (covering Alfreton, Ripley, Crich and Heanor) has appointed an Elderly Care Liaison Officer, Cheryl Stanley (pictured) who will visit people in their own homes to take a more holistic assessment of an individual's health and care needs.

Cheryl, a former healthcare assistant, began her visits in May 2022 and will be taking referrals from across the nine GP practices in the three neighbourhood areas.

Becky Tomlinson, Arch PCN Operations Manager, explains: "There is a huge need to provide more proactive care to support people to live as independently as possible. We have been very pleased with the launch of our acute home visiting service but that works on a reactive basis, dealing with frail, housebound people with medical problems, sometimes when they are very unwell. This new service attempts to catch people before they have a crisis."

Cheryl, who is working 30 hours per week in this new role, adds: "GPs and nurses simply do not have the time sometimes to spend with people to listen and understand all of their health and wellbeing needs. I think that I am therefore in a privileged position to sit down with someone in their own home and build up a rapport with them. The time needed varies – from about half-an-hour to more than two hours on one occasion – so I can fully understand what a person needs to help them feel safe and as independent as possible.

"Recently, I went to an older lady living on her own in Alfreton who had developed a high level of anxiety about falling. She had carers visit during the day but inbetween times would not go to the toilet or get any drink or food, for fear of falling, and as such was spending long periods of time in her chair. I was able to look at ways of getting her mobilised, seeing how we could get her to a falls clinic and getting a visit from a physio to provide her with appropriate exercises."

Arch PCN is currently revising how Cheryl identifies and works with her caseload of referrals. Initially by using an



elderly frailty index she was being referred to GP practice patients who were known to and already in receipt of a number of health and care services. However, the aim is to link her up with individuals who might not be on the radar of so many services, so that an intervention, or interventions, can take place before the presenting situation escalates further. In this way, Cheryl can work with individuals to better understand their specific needs and address them, through a variety of ways including completing respect forms, organising support equipment, linking up with befriending or respite services or referrals to other services.

Becky adds: "The type of people we are looking for are the ones who have deteriorated since Covid, maybe had a couple of falls which no-one has picked up and become anxious, someone with non-urgent medical needs who would really benefit from a home visit."

Arch PCN plans to take this new elderly care liaison service to the Place Alliance and open it up for other services in Amber Valley beyond the local GP practices, such as East Midlands Ambulance Service and DHU111, to be able to refer into.

For further information about the service and Arch PCN, please contact Becky Tomlinson, Operations Manager, via email r.tomlinson2@nhs.net.

Derbyshire Dementia Support Services

Dementia is a condition in which there is deterioration in memory, thinking, behaviour and the ability to perform everyday activities. Dementia has a physical, psychological, social, and economic impact, not only on people with dementia, but also on their carers, their families and society at large. Around 17,000 people in Derbyshire are living with dementia, and it is the aim of the JUCD Dementia workstream that they have access to the support, information and help they need to live as well as possible.

Covid 19 has had a significant impact on the way support and help has been available for people living with dementia and we are working very hard to make sure all services are up and running again. We have also been able to add new sources of information, and ways to access information to improve services, information and support for people living with dementia.

We are here, we understand

Derbyshire Dementia Support Services is here to support you to understand dementia through our information and advice service, and to enable you to access other services and activities that may be of interest to you.

They can provide advice for things like benefits and activities of daily living right through to understanding behaviours and the progression of dementia. Whatever your questions they are here to support you and work with you to achieve your desired outcomes.

To learn more about the services offered, meet some of the team or to hear from people who have accessed the services and the impact this has had, watch this short video.

A new website just for Derbyshire has been created by the Alzheimer's Society and covers information about what dementia is, support available and helpful resources. It and be accessed here.

Further information on services is also available on the <u>Derby and Derbyshire Emotional Health and Wellbeing website</u>, as well as information on how to reduce your risk of developing dementia, where to go if you're worried you have early signs of dementia and other useful information on services for people living with dementia and their carers in Derby and Derbyshire.

If you, or someone you are close to, is experiencing problems with memory, or more difficulty with planning or thinking things through than previously, please speak to your GP as a referral to the memory assessment service may be helpful. The causes of these problems are not always, or even often, dementia but whatever the cause, there is support and help available.



Derby City Dementia Support Service – The Next Chapter of Caring

Making Space has created a new group for people whose loved ones have moved into care and for those who have lost loved ones. This group is designed for those who have been dedicated carers to loved ones with dementia to provide them with a safe space to meet friends and support each other as they move into the next chapter of their life.

Please come along and join us for a light lunch. For further information or to book your place, please contact the Making Space office on 01332 497640.

Takes place: Second Tuesday of each month at The Argosy, Manor Road, Littleover, Derby, DE22 3HZ from 11:30 to 13.30.

2022 Dates: 12th July, 9th August, 13th September





Derbyshire LGBT+ - support available and how you can get involved

For almost 40 years, Derbyshire LGBT+ has provided strong support to LGBT+ communities across Derbyshire. We are the only local charity that is dedicated to providing this service.

Derbyshire LGBT+ has two dedicated centres: one in Derby in the old Curzon's nightclub building which has been repurposed specifically for our use; and the other in Chesterfield, a few minutes walk from the Town Hall on the corner of Albion Road and Rutland Road. Our centres are staffed by an experienced, enthusiastic and dedicated team, well-trained and highly experienced in working with the different LGBT+ communities we are proud to serve.

We currently run more than 40 different groups every month ranging from our Families Group which supports LGBT+ parents and/or parents of LGBT+ young people up to the age of 18, a Women's group, Trans group, Men's group, groups for the over 50s, a mental health group, a craft group, and several youth groups. We cover the full age range and support every gender identity and sexual orientation.

Derbyshire LGBT+ receives no money from central or local government and so we rely on funding from national and local organisations as well as fundraising from individuals and organisations, donations and grant applications. If you would like to fundraise for us, please get in touch.

You can also help us to raise money when you're shopping online – please consider naming us as your charity of choice on Amazon Smile or visit www.easyfundraising.org.uk. You can also donate

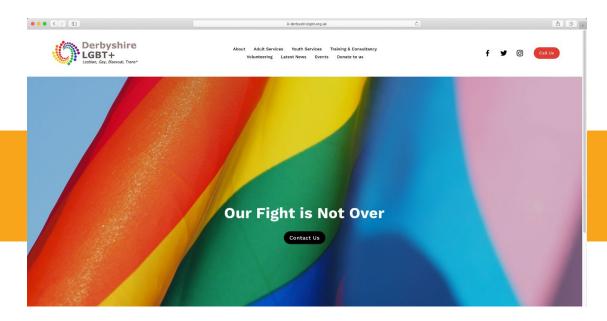
through our <u>JustGiving page</u> - every penny really does matter.

Derbyshire LGBT+ also income generates by providing a range of training and consultancy packages. We work closely with organisations to provide training that is bespoke and works within any budget constraints. Training includes such topics as hate crime, domestic abuse, and LGBT+ awareness. We also work closely with nursery schools, primary and secondary schools, sixth form colleges, universities, and parent groups to provide training appropriate to different age groups and audiences.

Our manual – 'Kings, Princesses, Ducks and Penguins' - uses age-appropriate picture books to empower educators to teach about different families, gender and sexuality. The manual, launched in 2019 and now in its third edition, and the accompanying training, have proved very popular in schools across the county and nationally.

2021 saw the launch of our Rainbow Partnership Accreditation Scheme. This scheme assesses organisations against six standards to enable them to become fully LGBT+ affirmative. So far, we have signed up East Midlands Ambulance Service, Citizens Advice (Derbyshire District). The Elm Foundation, SV2, Elephant Rooms, Deaf-initely Women, Salcare, and a growing number of smaller businesses and self-employed therapists.

To find out more about our groups and services, training and consultancy, our school work, or our accreditation, please email info@derbyshirelgbt.org.uk or call 01332 207 704.



Do you use inhalers? Be greener and breathe better

There are many ways in which climate change adversely affects lung health. These include poorer air quality, wildfires, increases in pollen levels and moulds, as well as difficulty coping with the direct effects of heat.

The NHS in England is responsible for an estimated 5% of the country's carbon footprint. This is equivalent to every plane taking off from Heathrow in an average year. Carbon is a 'greenhouse gas' and a cause of climate change.

The NHS plans to reduce carbon emissions to play its part in tackling climate change. The 'For a Greener NHS' programme aims "to deliver the world's first (carbon) net zero health service and respond to climate change, improving health now and for future generations"

- The NHS Carbon Footprint: for the emissions we control directly, net zero by 2040
- The NHS Carbon Footprint Plus: for the emissions we can influence, net zero by 2045.

Medicines account for 25% of all carbon emissions within the NHS. Within medicines, metered dose inhalers (MDIs) are the single biggest source of carbon emissions.

Green Inhalers

Be Greener and Breathe Better

- Refresh yourself on how to use
 Return your old or empty inhalers - ask your pharmacy or GP practice to check - See www.asthma.org.uk for videos
- Ask about "greener inhalers" and spacers



- inhalers to a pharmacy for safe disposal -Never throw inhalers into your bins at home
- · Reduce inhaler waste: don't order more than you need



Green inhalers can benefit the environment

Inhalers are used to treat lung conditions, such as asthma and chronic obstructive pulmonary disease (COPD).

Many inhalers use gas to create a spray of medication. These are called pressurised metered dose inhalers (pMDIs or MDI's). The gases in MDIs are a powerful greenhouse gas. They are safe for the person using them but harm the environment.

Dry powder inhalers (DPIs) don't use gases, instead using a person's breath to deliver the dose. DPIs are much better for the environment. Dry powder inhalers have an estimated carbon footprint equivalent of just 20 grams per dose compared with 500 grams in pMDIs. Switching to a DPI from an MDI can help to reduce not only the NHS carbon footprint, but also your own carbon footprint! This can have a greater impact than eating less meat or planting a tree – visit <u>www.greeninhaler.org</u> for more information.

While there are lower carbon versions of salbutamol MDIs available, such as Salamol instead of Ventolin Evohaler, Joined Up Care Derbyshire are promoting these as the preferred option for prescribing.

For most people, either type of inhaler work just as well. The most important thing is to ensure that your are using the prescribed inhaler in the right way. In many cases, a DPI inhaler can be easier for a patient as they have a dose counter which reduces wastage, it does not need a spacer device, and it can be easier to co-ordinate with breathing. Most people, once shown the correct technique, can master a DPI, but they are not suitable for everyone.

Dry powder inhalers are not suitable for anyone with severe allergy or anaphylaxis to lactose or milk proteins.

What does this mean for me?

Your inhaler will not be changed to a different type without your knowledge. Not all inhalers are suitable for every patient. The best inhaler for you is the one that gives you the best control of your lung condition and that you can use easily.

Your GP practice or Medicines Optimisation team will contact you and ask you to make an appointment for a yearly review. It's a good idea to take all of your current inhalers or have them handy for a phone review.

At the review, a healthcare professional will review your condition, ask about symptoms, check how you are getting on with the inhalers that you already have and may discuss whether a switch to a greener inhaler would be suitable. You will be able to ask questions and may also be able to look at example inhalers.

Where someone can use a dry powder inhaler effectively to deliver the same medication, then that is likely to be the preferred option – giving benefit to the patient and the environment too.

If you do decide to switch, you will be given training on how to use it and reviewed after a short period of time to see how you are getting on. This may be by the person who changed your inhalers, or the pharmacist who dispensed them.

If you need a reminder how to use your inhaler, Asthma + Lung UK have produced <u>videos showing how to use</u> the different types of inhaler.

If you do change, you probably won't notice any difference in your symptoms. There may be improvement if you are better able to use the new inhaler. However, if there is any worsening, you should contact your GP practice immediately to be reviewed.

They will check how you are getting on, if you are using the inhaler properly or if you need to change back again. If you do need to carry on using an MDI don't worry - the most important thing is that people get good control of their lung condition and for this, some people need MDI inhalers.

Finally, don't throw your used inhaler in the bin! Make sure that you use up all the doses in it before starting a new one. Once you are sure it is empty, please return it to the pharmacy for proper disposal. This means that it won't end up in landfill where the gases will continue to be released into the environment.

Know your GP Practice Health and Care Staff – update to Pharmacy Technician role

You may remember in our May newsletter we shared with you the wide array of health professionals who can help you in different ways, without seeing a doctor first, so you can get the right help and advice quickly.

Following feedback, we have updated the Pharmacy Technician role information and we wanted to share this with you. The new information can be seen below:

Pharmacy Technician

As a Pharmacy Technician, I'm a registered professional with the General Pharmaceutical Council (GPhC). I'm doing two years of on-the-job training as part of a GPhC approved training programme. Patients can often get the right advice from me more quickly than if they waited for a doctor's appointment.

Pharmacy Technicians work at some practices to help with managing prescriptions and also helping patients with everything from lifestyle advice to getting the most from your medications

To find out more about the highly trained experts that can help you to help yourself, visit the <u>Joined Up Care Derbyshire website</u>.

DHU welcomes Derby City Nurses into Derbyshire-wide Community Nursing Team

The Evening Community Nursing service has moved to DHU Health Care from Derby City to streamline out of hours nursing care across Derbyshire.

DHU Health Care has provided out of hours nursing care across Derbyshire since 2001, with the exception of Derby City where community nursing has been provided by Derbyshire Community Health Service.

The nurses have now moved across meaning that all out of hours community nursing in Derbyshire will now be provided by DHU Health Care to ensure a more joined up approach, greater opportunities to provide cover at busy times and streamline the service.

Tracy Steadman is the Head of Community Nursing for DHU Health Care, she said: "We've been looking at how the services work and the potential benefits of bringing all out of hours community nursing under one management team. DCHS has provided a superb service for Derby but splitting county and city services no longer seemed like the most efficient way to run a service at a time when we're looking for a more joined up approach.

"Having two teams meant operating two different systems which made it much harder for nurses in Derby to work together and support each other when needed. By working together, we have ensured a smooth transfer of colleagues to DHU, and now patients across Derbyshire will be receiving an equitable service."

The county team transferred over to DHU in 2011 so the management team have experienced this type of move before and have been able to support the new team in their transition. A number of meetings took place with the staff involved and they were encouraged to visit DHU at the Johnson Building in Derby which is now their base.

There is currently a large group of nurses and health care assistants working for DHU covering the evening and overnight period in the county, and the overnight period in the city. By the city evening team joining DHU, there is now the opportunity to work across the area, providing care to patients and deploying the staff according to patient needs.



Tracy continued: "A number of our nurses were involved in the transfer of services from county to DCHS 10 years ago so know the process and have been reassured that terms and conditions will remain. They also know that the move will be of benefit to patients and increase the level of support available to both sets of community nurses.

"From April it means that if there is capacity for our teams to support each other, we can reach them easily and redeploy. It gives us the ability to provide a greater provision of community nursing more quickly in any given area due to having increased teams covering the area."

Derbyshire Community Health Services NHS Foundation Trust, said: "The professionalism and adaptability of Derby and Derbyshire's community nurses in meeting the needs of local patients in the best way possible is second to none. Increasingly we are working collectively as part of Joined Up Care Derbyshire in the way care is organised so that patients receive the most seamless service possible. This organisational adjustment in how out-of-hours frontline nursing care is managed in Derby is part of that wider process of collaborative system-working. We are proud of the teams who are doing such a brilliant job of providing this care."

The nurses are now based in Derby, having moved from their DCHS base at London Road to the Johnson Building on Pride Park.

Working together to deliver population health

Population Health Management (PHM) is an approach which makes use of data across health, social and other sectors to provide insights of the population's health needs.

The approach drives the design and implementation of proactive interventions, which may not have a clinical focus. This is important as 80% of health factors are shaped by behaviours and housing, education, and employment.

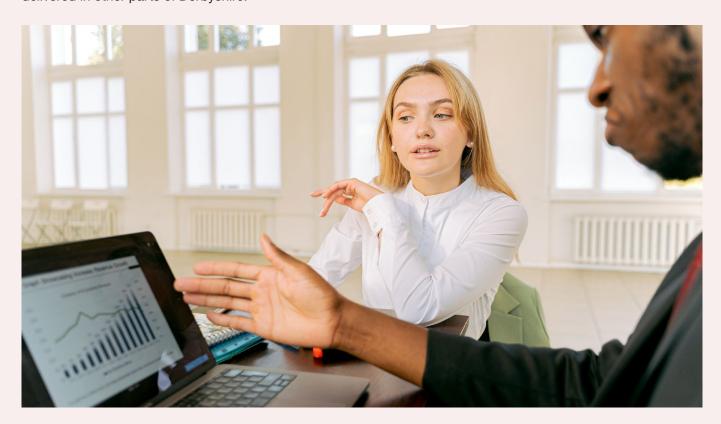
Population Health Management allows Joined Up Care Derbyshire partners to work across the life-course, incorporating all the factors that contribute to health to design and deliver more personal, joined-up, sustainable health and care services.

As well as improving the health and wellbeing of our population, PHM could help to reduce health inequalities in our communities by working in a new and different way.

To support the development of PHM, Joined Up Care Derbyshire is participating in a NHS England co-ordinated 22-week development programme. The programme engages both clinical and non-clinical professionals to provide an opportunity to increase their skills and knowledge, to develop proactive and person-centred solutions, and to develop a shared view on Derby and Derbyshire's approach to population health.

Several virtual workshops have taken place, and three pilot-sites in Derby City, Amber Valley, and Erewash are currently testing out the approach. The teams taking part in the pilots have looked at a range of data and selected a group of patients to support based on their health and wellbeing needs. The programme aims to develop and test proactive, personalised care for the groups identified. Those taking part are either at risk of developing ill health in the future or are having complications due to current illness. In addition, the teams will work with people to engage and develop solutions with them.

If the pilot programme works well, it is anticipated that the Population Health Management approach will be delivered in other parts of Derbyshire.



DHU Healthcare successfully takes on new initiatives

Palliative Care Single Point of Contact (SPOC) and 24-Hour Palliative Care Emergency Support Service (providing a Variable Intensity Palliative (VIP) Service)

DHU Healthcare successfully bid for funding to develop two essential new services to work with the Palliative Care Urgent Response Service.

The services, creating a 24-hour, seven day a week Single Point of Contact and a 24/7 health care assistant run Emergency Carer Support Service, commenced on Monday 13 June, thanks to funding awarded by Hospice UK and NHSEngland.

These initiatives, both part of a two-month pilot, are being managed by DHU Healthcare as they align with NHS111 services that are accessed by patients and other Health Care Professionals.

The purpose of these services and their developments are to support palliative and End of Life patients to stay at home with the right care and support.

Jill Davies, Palliative Care Clinical Lead at DHU, said: "The SPOC's advice line will provide a 24-hour point of access, seven days a week across Derbyshire, meaning any 111 call of a palliative nature will be transferred to an Advanced Nurse Practitioner (ANP) who will have relevant experience in end-of-life care. The ANP will then triage and deal with the call appropriately, making interventions where needed, for example, generating an electronic prescription or giving symptom management advice. In circumstances where the problem cannot be resolved – the call will be transferred to another appropriate service within the timeframe, ensuring the most suitable care."

"The Emergency Carer Support Service (ECSS) consists of up to three HCAs 'on call' 24:7 service across the county to provide crisis care and support to help keep people in their own homes. Staff will provide short term, ad hoc support until more substantive care can be obtained. For example, they will assist with personal care, incontinence care, patient and relative psychological/emotional support or comfort calls. They can also assist existing night services if double handed care is needed for a short time. The HCAs may see several patients during their shift.

"The service is for patients who have tipped into crisis and where existing services cannot provide support (e.g. rapid deterioration or care package waiting for procurement etc.) or it is out of working

hours. It is not intended to replace existing services such as the Hospice at Home teams or the Roaming Service. It is there to complement current services or provide a bridge until longer term support can be supplied. There are many people who tip into crisis where nothing is in place and patients may die before longer-term support can be provided. This can lead to unnecessary hospital admissions and an increase in deaths in hospital due to a lack of practical support for patients and carers at home."

Referrals to the SPOC/ECSS will be via 111. Referrals will come directly from patients/relatives or via the healthcare professional line (08444 122 235 or 111*5) to the ANP working on SPOC.

Given that DHU is a Community Interest Company, funding is solely to provide costs for staffing. IT support and management costs have been supported by DHU in the short term to allow the proof of concept to be developed.

If the benefits of both services can be established, then we would like to welcome the opportunity to work with other providers on establishing a service for the future. The opportunity to align services would be appreciated by commissioners and patients alike.

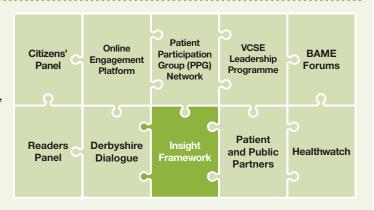
Updates will be provided as we go along via the EOL Board, Ops Group and associated JUCD workstreams. Your feedback is also welcomed. Please contact Jill Davies, Palliative Care Clinical Lead at DHU at jill.davies@dhuhealthcare.nhs.uk or jill.davies15@nhs.net.



Jill Davies (Palliative Care Clinical Lead) and CeCe Green (Community Staff nurse).

Embedding strong engagement with people and communities

Embedding strong engagement with people and communities at the heart of decision-making around system transformation work has always been a priority for Joined Up Care Derbyshire (JUCD). In the November 2021 issue of our newsletter, we introduced our 'Continuous Engagement Framework' and in each issue of the newsletter since we have introduced a different element of the framework. In this issue, we would like to introduce you to our Derbyshire Dialogue.



Learning Network

Joined Up Care Derbyshire is keen to work better together as a system to listen, learn and act on the voice of local people and our communities, to support decision making around health and care services.



Active Derbyshire, along with others, have offered to help with this work by setting up a 'learning network'. It will enable JUCD to learn from our collective experience of working with people and communities and develop an approach to listening and learning across Derbyshire.

There are already lots of different examples of engagement happening across our communities, but in different ways. We know that we have a lot to learn but believe it could be more joined up. Developing a learning network creates an opportunity to connect, learn, and develop our understanding and practice together.

We are currently at the point where we're undertaking a review of learning to date and researching and identifying our shared aims, so that we can be specific about what we want to learn about and why it's important.

As part of this process, we're keen to hear from you. Do you know of any research, evaluation or learning that will help to build a picture of what is already going on and, importantly, what has been learnt so far about how to involve people and communities in health inequalities work, or any stories to tell?

Dr Rebecca O'Connor from ROC Consultancy Ltd is leading this initial review of learning over the summer. Please forward any stories, evaluation or learning documents to rebecca@rocresearchconsultancy.co.uk by 15th July 2022 so that it can be incorporated into this planning phase.



Digital Inclusion across Derbyshire – call for collaboration

Since 2000, <u>Citizens Online</u> have been working across the UK to ensure that no one is left behind in today's digital age. The Charity has a wealth of experience in digital inclusion and listens to people who are digitally excluded, to help organisations to digitally transform in an inclusive way.

Citizens Online has recently started working with the Public Health team at Derbyshire County Council and in partnership with Rural Action Derbyshire to assess the current digital inclusion ecosystem across the County in order to develop an ambitious digital inclusion strategy.

We know that digital exclusion across Derbyshire is a significant public health issue. Around 62,000 people in the county have never used the internet, and many more lack the five essential digital skills for life. Inevitably, the COVID-19 pandemic has further heightened the digital divide as more services move online and become 'digital by default'. People using online services can save on average £228 a year and 87% of those online say it helps them connect better to friends and family. We want to ensure that everyone can benefit from using technology.

As part of our work, we are keen to engage with organisations that are already providing digital inclusion support so we can identify any gaps, highlight what's working well and co-produce future provision. We are also keen to hear residents' views about using technology. Please email research@citizensonline.org.uk or phone 0808 196 5883 if you'd like to take part.

Based on this review, we aim to achieve a strengthsbased collaborative effort to tackle and break down the three main barriers to creating a digitally inclusive Derbyshire, namely:

- Provide residents in need with access to equipment and data
- Promote the benefits of being online to motivate people to engage with digital tools
- Improve digital skills provision by having more digital champions across the County to provide personcentred training

Cllr Hart, Cabinet Leader for Communities at Derbyshire County Council, states:

"There is a strong link between groups that are digitally excluded and those at greater risk of health inequalities. People from excluded groups, such as those who are socially isolated, living in poverty, living with a long-term condition, or struggling with an addiction, often find it difficult to access the digital world due to their skills, motivation, and



technical capacity. Helping them to access and use digital tools can enhance their digital literacy and foster digital activities when it comes to budgeting, money-saving, connecting with friends and family, and seeking a healthier lifestyle which in turn improves public health outcomes."

Helen Dobson, Managing Director at Citizens Online said: "We're delighted that Derbyshire is committed to ensuring that residents, especially the most vulnerable people are supported to develop digital skills and have a positive experience with technology. We will work in partnership with communities to develop the strategy that will embed digital inclusion; making the work sustainable and eradicate digital poverty for good."

Charlotte Winterbottom, Policy and Partnerships Office, Rural Action Derbyshire added:

"This work compliments and adds value to our NHS Charities Together funded digital inclusion project which aims to; develop a network of digital inclusion projects across Derbyshire, pilot new digital skills activities with the help of digital champions and strengthen the digital resilience of our Voluntary, Community and Social Enterprise sector. We're working in partnership to achieve the greatest impact for our communities and want everyone to benefit from technology."

Together with The Digital Inclusion team at Derbyshire Public Health, we will be approaching partners in Amber Valley, Bolsover, Chesterfield, Derbyshire Dales, Erewash, High Peak, North-East Derbyshire and South Derbyshire in due course, with a view to collaboratively working on this project.













Are you working with someone who has an identified mental health need and would benefit from participation in nature-based activities?

As part of the Derbyshire 'GreenSPring' green social prescribing project, we are looking for participants to engage with funded green activity provision to support their mental health and recovery.

Derby and Derbyshire is currently delivering a Green Social Prescribing project called GreenSPring, this is a test and learn project that will investigate ways of improving mental health and wellbeing through engagement with nature-based activities. The project has a particular focus on improving the healthcare system so that there is sustainable provision of these 'green health' activities for citizens. There is a wealth of peer reviewed data demonstrating the benefits of nature-based wellbeing activity for mental health (maintenance and recovery) and we want to ensure that people have access to

such support, not just during the project but for many years to come.

We are testing investment in green activities in a way that could be sustainable, for example, using a Personal Health Budget (PHB). We want to test whether PHBs are a viable option for providing nature-based wellbeing interventions, so we are looking for participants to take part in this testing phase.

A network of providers of 'green health' activities is forming across Derby and Derbyshire, who can deliver a range of activities to support participants. Funding is available to support providers to deliver nature-based activities for those with identified mental health needs.

Further information can be found in the attached document.





GP Access Survey

Healthwatch Derbyshire is wanting to hear from patients and the public about any impact the changes to their GP services may have had on them.

The way we access our GP practices has changed over the past few years, with these changes potentially becoming permanent. You may have found that access to care has moved to a triage system and online services with a mixture of video, telephone, and face-to-face appointments.

Healthwatch Derbyshire would like to hear from patients, carers, and service users about how these changes may have affected them. Feedback from the survey will help inform local health providers to understand these impacts, what is working well and what could be made better.

If you need help completing the survey, give the Healthwatch Derbyshire team a call on 01773 880786.





Contact Joined Up Care Derbyshire

Visit the website: joinedupcarederbyshire.co.uk Email: joinedupcarederbyshire@nhs.net

If you would like to sign-up to receive the Joined Up Care Derbyshire newsletter, please email karen.lloyd24@nhs.net

If you would like to know how you can get involved click here.

