May 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>.

Our partnership recognised in law

Royal Assent has now been granted for the <u>Health and Care Bill</u>. Among 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) as the committee where health, social care, the voluntary sector and other partners come together as an Integrated Care System (ICS).

Our ICS will continue to be known as Joined Up Care Derbyshire (JUCD); JUCD is the Derby and Derbyshire health and social care partnership for adults and children. JUCD's priority is to make improvements to the Derby and Derbyshire populations' life expectancy and healthy life expectancy levels in comparison to other parts of the country and reduce the health inequalities that are driving these differences.

In Derby and Derbyshire, our health and care system has worked in partnership for many years; the duties the Bill places on the local NHS and local authorities are welcomed and fit well with the direction we have been taking to improve the health of the local population. Having an ICS which is now established in law, with a new organisation that reflects the collaborative approach required, is very helpful to what we are aiming to achieve.

When the NHS was set up in the 1940s its aim was to treat symptoms. It has come a long way since then, supporting people to live healthier lives. This change is continuing along that journey and aims to make social care and health even more aligned. Our health is affected by many things – housing, unemployment, financial stress, domestic abuse, poverty, and lifestyle choices. This is something that we need to look at through a partnership between the NHS, local authorities, and the voluntary sector.









Many councils have taken steps to improve the health of their communities. These steps are included in their policies and plans for housing, early years, growth, skills, and employment. Local councils also have lots of information about their area, such as levels of poverty and housing problems, which they will now be sharing with health services. Local councils also run social care services, crucial in ensuring our citizens are cared for in the community.

Every location already has established health and wellbeing boards and health overview and scrutiny committees. These statutory bodies, run by councils, will continue to exist within the new ICS structure and work jointly within the new approach, reflecting the depth of the task to ensure everyone's health is protected and improved where possible, not just treated.

JUCD's integrated care strategy will outline the approach and priorities we will take to make improvements to life expectancy, healthy life expectancy and to reduce health inequalities. It will be developed during the autumn and winter of 2022 and great importance will be placed on the conversations we will have with local people, to help inform the priorities and approaches to be taken. Further details on the strategy development will follow, and opportunities to get involved will be communicated through a wide range of outlets, including in this newsletter, at www.joinedupcarederbyshire.co.uk and on the JUCD social media channels.

Awards recognition for Derbyshire

Tarry Hill, a Derbyshire care home in the High Peak working with Team Up Derbyshire 'Enhancing Health in Care Homes' initiative, has won a regional award. Stephanie Turner, manager of Tarry Hill, was announced as the main winner at the 'Connecting Together' care home webinar on Wednesday 6 April. Tarry Hill is a residential service offering support to people with learning disabilities.

These are the first care home awards run by the East Midlands Patient Safety Collaborative, part of East Midlands Academic Health Science Network (EMAHSN). They recognise the achievements of care homes in the region that have excelled at 'improved team working'.

Stephanie was nominated for her skills in helping the team go from strength to strength, and increasing staff confidence in following personalised care plans, making positive risk assessments, and identifying subtle changes in the health of residents they care for. Since joining, Stephanie has taken Tarry Hill from an 'inadequate' to a 'good' CQC rating.

To find out more about the awards, please visit the EMAHSN <u>website</u>. Congratulations to Stephanie and her team on this huge achievement.



Glossop boundary change - Update

Work continues to keep people informed on developments regarding the boundary change which will see the responsibility for funding health move from Tameside and Glossop to Derbyshire from 1 July 2022. This will make health provision coterminous with social care and forms the basis of the decision made by the Secretary of State for Health in the summer of 2021. Change inevitably leads to questions and for some people it may cause anxiety or concern, so in recent months we have shared information and run virtual listening events for people to ask questions and share their thoughts and concerns. Our continued assurance is that we do not propose to make any changes for the next 12 months as we continue to listen to what matters most to people and any discussions about potential change will involve patients and the wider community from the start.

This listening approach will continue with more community-based events leading up to July and certainly beyond. On Saturday 8 April we joined voluntary and community sector partners in Glossop as part of a drop-in event to listen and understand what matters most to people about the Glossop boundary change. We received questions and some important insights from local people which we have logged and already fed into our transition workstreams as part of our commitment to listen and respond. We will be back in Glossop for the next event on Saturday 7 May and again on Saturday 11 June as part of a longer-term approach that will include information sessions and listening events to keep people informed of progress as the Integrated Care System (ICS) becomes embedded. In the meantime, you can see the latest information, ask a question, or leave a comment here.



New home for Joined Up Careers' news

This Joined Up Care newsletter regularly features stories from Joined Up Careers Derbyshire about the partnership's various activities in promoting recruitment and retention in health and social care careers.

But with Joined Up Careers involved in an increasing number of initiatives, the number of stories being produced about this work means that a new separate newsletter is now required.

You will find the new newsletter on the Joined Up Careers website at:

https://joinedupcareers.co.uk/news/newsletters

The launch issue includes eight pages of content including stories on NHS Cadets, Step Into Work, Wellbeing Enablers, apprenticeships and a new digital advertising campaign promoting local jobs.



LGBT Collective Revolution – Introducing new LGBT provision

We are a new LGBT provision in Derbyshire. Our main aims are to offer free groups, events, activities, and support for the LGBT community.

- We already have Ripley and Alfreton LGBT youth clubs up and running and within the next 2-3 months we will also be opening Matlock, Belper, Heanor, Swadlincote and Buxton
- We hold monthly LGBT family days
- We hold youth events such as our LGBT youth Prom
- Inclusive Boxing Club
- School Holiday Activity Club
- We will soon be available for face-to-face LGBT focussed mental health support in Ripley (monthly Monday 10-12).



One2One Support - We offer confidential, sympathetic, inclusive, and non-judgmental support, guidance and signposting service when needed. This can be a one-off chat, weekly, monthly or whatever is requested. There is no age restriction for our service although those under 16 will need a consent form signed by someone over 18 due to the nature of some of the discussions i.e., coming out. This does not have to be a parent/ guardian, it can be a referral from a school, youth worker or NHS service. Referral forms are available for professionals by emailing info@collectiverevolution.co.uk.

We offer support with:

- Sexuality and/or Gender Identity
- If you're feeling lonely/ isolated
- · Waiting for a referral and need someone to talk to whilst waiting
- If you or someone you love has low self-esteem, depression or is experiencing emotional difficulties
- Advice on building relationships and keeping safe
- Advice on sexual health
- Advice on being safe and building relationships online
- If you or someone you know has been bullied or been a victim of a hate crime

Or anything else really... We are here to listen and to help in any way we can!

This is a free service run by volunteers who receive ongoing training and support. We ensure that all support we provide is bespoke and set to induvial needs. Our volunteers all have a wide range of experiences and knowledge.

To access our support:

- Refer to us this can be a self-referral or via a professional
- We will arrange to have an initial conversation within 5 working days (virtually)
- We will then link you with a relevant volunteer (usually the same week dependent on your availability)
- There are no time frames, you can talk to us as a one-off or every week for the foreseeable future.

Text us for support: 07984352366 Email: info@collectiverevolution.co.uk

Website: https://lgbtcollectiverevolution.co.uk/

Personalisation - What matters to me

Personalised care is based on a 'what matters to you' conversation. It supports people with choice and decision making; harnessing the expertise of people, professionals and the health and care system and provides a positive change in power and decision making that enables people to feel informed, have a voice, be heard, and be connected to each other and the community in which they live.

In previous editions of our newsletter, we have covered Personal Health Budgets, Shared Decision Making and Social Prescribing. In this edition, we look at Personalised Care and Support Planning (PCSP).

What is personalised care and support planning?

PCSP aims to ensure a better or different conversation between a person and their health and social care practitioner to create a more equal relationship. The overall aim is to identify what is most important to the person for them to achieve a good life and ensure that the support they receive is designed and coordinated around their desired outcomes.

PCSP is at the heart of <u>personal health budgets</u> and is beneficial for people with long term conditions or ongoing care needs. It provides an opportunity to discuss what matters to the person, the outcomes they want to achieve, and what support they can access, whether through statutory services or personal connections and local voluntary services, to help them build their knowledge, skills, and confidence to manage their health and wellbeing.

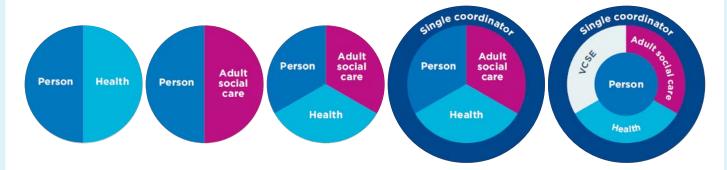
The complexity of a person's needs, the number of conditions they manage, the breadth of services they are currently accessing, and their preferences will influence the type of support they might receive and the level of choice and control they have over managing their health and care. This ranges from being signposted to support to self-care, to people having control over their care package using a personal health budget or integrated personal budget (this covers both your health and care needs). At the heart of these different levels of support is a personalised conversation.

PCSP: What this looks like for people and families

People will have a different or better conversation with practitioners which focuses on what matters to them and what is working and not working in their life. This will be done in a way that builds on their skills, knowledge, and confidence, recognising the patient as the expert on their condition. People will experience an integrated process coordinated by a single, named coordinator and a single care and support plan developed in partnership and owned by them. People will have the chance to regularly review their care and support plan.

Please click here to see a PCSP example.

The diagram below shows the traditional approach to patients (left) and the new personalised approach (right).



You can find an example of a gold standard PCSP here. You can see the focus is clearly about 'what matters to me?'

If you have any questions regarding Personalisation please contact Jo Blackburn at joblackburn1@nhs.net

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 Learn how to access free Personalised Care Institute

England here.

training. For more information please watch the comprehensive model of personalised care video here and view the factsheet from NHS

Want to access Personalised Care training? Visit the PCI website here.

If you would like to book onto a webinar, please click on the relevant webinar title and register your details.

to me

For further information, please email: lauren.curry@nhs.net and janinemcknight@nhs.net

Personalised Care webinars available to the JUCD workforce, including Social Care & Voluntary sector:

- 1. Maternity services webinar on 16th June 2-3pm
- 2. End of Life care webinar on 23rd June 2-3pm
- 3. Long Term Conditions webinar on 30th June 2-3pm
- These webinars are designed to provide information and answer your questions on Personalised Care, and how it affects you in your role.
- View the newly filmed JUCD Personalised Care video, filmed across the workforce in April.
- Learn how to become involved and become a Personalised Care ambassador.

We want you! Recruitment events for health and social care

NHS and social care employer organisations from across Derby and Derbyshire are coming together to host two recruitment events this summer.

Attendees will be able to learn about a world of wonderful careers in the sector at the events - spanning hundreds of different roles, to suit all ages, experience and abilities.

The events take place on Tuesday 28 June 2022 at Chesterfield College (Heartspace) and on Wednesday 29 June 2022 at Derby College Roundhouse. Both run from 10am to 4.30pm.

The events are free to attend and do not require pre-registration. They have been set up by Joined Up Careers Derbyshire, a partnership of local health and social care organisations which works to support the current and future health and social care workforce.

Susan Spray, Joined Up Careers Derbyshire lead, said: "These events provide a tremendous opportunity for anyone seeking a new job or career in health and social care to take the next step. At the events, attendees will be able to meet several different health and social care employer organisations and talk through the large number of vacancies currently being recruited to."

As well as meeting employers and learning more about role vacancies, there will be workshops held on application and interview skills. There will also be information on apprenticeship opportunities and support programmes that aim to help jobseekers find work.

Further information about Joined Up Careers Derbyshire and the event flyer are available on: https://joinedupcareers.co.uk/news/news

For any enquiries about the events, please email Dhcft.joinedupcareers@nhs.net



Let's Talk Teeth

It's National Smile month throughout May and the ideal time to think about all things oral health-related. So, Let's Talk Teeth!

Oral health is all about the health of your teeth, gums and mouth. Tooth decay and gum disease are the most common problems that dentists see - but they are largely preventable with the right oral health routine.

Poor oral health can affect your overall health, if your mouth is healthy, it's easier to chew, taste, swallow, speak, and smile.

Oral health is in your hands and all it takes is a few simple steps every day to ensure you have healthy teeth and gums for a lifetime.

Find out more about how to keep your smile in top condition online at www.derbyshire.gov.uk/oralhealth





Books to help people manage or even reverse your diabetes

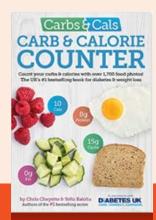
Derby and Derbyshire CCG have purchased copies of each of these books for all Derby and Derbyshire libraries to help people with diabetes.

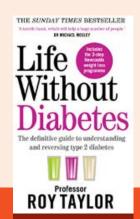
Carbs and Cals books are useful for individuals with type 1 or type 2 diabetes as they are full of photos that give a pictorial illustration of portion sizes and show how many grams of carbohydrate there are in each food. This can help people to make lower carb choices to control their glucose levels.

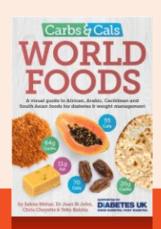
Life Without Diabetes is the definitive guide to understanding and reversing type 2 diabetes. It is written by Professor Roy Taylor who is one of the world's leading experts in diabetes and the man who discovered that type 2 diabetes is a reversible condition. The book explains what happens to the body as type 2 diabetes develops and presents a 3-step weight loss plan that supports the reversal of type 2 diabetes and helps people live a full and healthy life beyond it. It also includes tried and tested recipes.

Look out for these books in a library near you.

Find your local library here
if you are a Derbyshire
resident, or here if you are a
Derby City resident.







Top marks for life-saving learners at DHU Healthcare

The training team at DHU Healthcare have been sharing life-saving skills with young learners in Derby as part of their commitment to improving the well-being of local communities.

As a not-for-profit Community Interest Company, DHU Healthcare provided two trainers to teach a class of 16 to 19-year-old health and social care students, essential CPR skills that could one day save a person's life.

Derby Skillbuild tutor Stacey Mortimer spotted the opportunity for her students to take advantage of DHU's continued efforts to work with voluntary and community sector organisations.

This led to DHU Healthcare's Lead Clinical Mandatory Trainer Zoe Hunt and Clinical Mandatory Trainer Sarah Goodwin visiting the Skillbuild site for the intensive session with youngsters looking to start a career in the health sector.

Zoe said: "When Stacey approached us to teach her students, we jumped at the chance to share our skills. Both of us have a wide range of experience within healthcare to share with the learners, many of whom are looking at taking their first steps into the health and social care profession.

As a socially conscious business, supporting the voluntary and community sector is a vital part of what DHU do. Creating social value means going beyond the 24/7 high-quality patient care our services are known for delivering, it's about how we can further support the community."

The students were shown a range of techniques using manikins, training CPR machines and scenarios that mirror real-life situations in a safe environment. This included checking the airways, how to position the patients and the dos and don'ts of resuscitation using a combination of theory and practical examples.

Stacey said: "I teach a variety of courses at Skillbuild and am fortunate that every day I get to work with some incredible and talented young people. Many of those we support have often been failed by the education system and so we try to show that a different path is available to them.

Following our learners on their journey as they take their next steps into a career is an exceptionally rewarding experience for everyone involved. Having DHU at Skillbuild gave our learners a real sense of what it is like to work in the health and social care sector and some useful hands-on experience that will stand them in good stead during this course but also in life!"

Skillbuild offer courses in a variety of subjects such as Music, Business Administration, Electrical Installation, Construction and Health & Social Care to learners outside of the traditional educational system.



The DHU Healthcare team helping patients in their final days

A specialist team from DHU Healthcare has been preparing, supporting and treating end of life patients in their own homes to ensure their final moments are spent in comfort with loved ones.

Since June 2021, an incredible team of nurse practitioners, nurses, and admin staff have been running the service from Chesterfield's Ashgate Manor from 8 am until 8 pm with just one car to cover the entire county. It's been so successful it was extended to midnight across two shifts to make a 16-hour service with a view to extending it even further in the coming months.

Jill Davies is DHU's Palliative Care Clinical Lead and Advanced Nurse Practitioner, she said: "At its heart, it is a simple idea but in my view it is absolutely essential. What we try to do is help people in their final days of life to die peacefully, with dignity, in comfort, surrounded by the love of their friends and family instead of in a busy hospital environment or at home and in pain. The calls we get vary in complexity, but a typical call will involve us visiting a patient and family to give them very specific palliative care to enable them to fulfil their final wishes to remain at home.

How it works is that a crisis call will come into our dedicated end of life team and either myself or one of the nurse practitioners will triage. Our rapid response car will be ready and stocked up with the necessary medication, equipment, and kit so that a nurse practitioner and one of our community nurses will go to the patient's house, assess their needs, and support the family through the process. The idea is that we can prescribe and administer in one visit to reduce waiting times and get the patients comfortable as quickly and effectively as possible. Most of our calls are for one-off or ad hoc visits and we then refer or update other teams and organisations to provide longer-term care and support."

Cecilia Green is a Community Staff Nurse at DHU Healthcare, she said: "When we get to the patient's home, we'll see what's there to make them comfortable, for example, what mattresses they have, what care plan is in place and what medication, if any, they have. We then need to



address the reason we've been called out which could be pain management, maybe they're not eating, they could be fitting or any other cause for concern.

We do explain to the families that they will see changes in their loved one in those final days. Their colour will change, there will be loss of appetite and breathing difficulties may become more common. These are the signs and symptoms of dying and we need to prepare families for what to expect. We have to remind ourselves that this is a new experience for these families so we approach every single moment of care with compassion; the family becomes central to the patient experience and we must remember that we are in their home."

The team are hoping to see the service expanded to two cars which will enable them to operate a 24-hour service and cover the county more efficiently. They've also been working very closely with paramedics, 111 Health Advisors and social services to help them recognise some of the signs and to call for advice first instead of sending someone to the hospital.

The team consists of a pool of around a dozen Nurse Practitioners and six nurses with significant support from care coordinators. The team receive around 70 to 80 calls per week. Jill leads the team with more than 30 years of palliative care experience; Cecilia and her colleague Hannah Broderick make up the core of the team.

ICS guidance on effective clinical and care professional leadership

Integrated Care Systems (ICSs) received a whole range of guidance in the later months of 2021 aimed at supporting systems to develop effective partnership working. All the guidance can be found here.

In this issue of the newsletter, we'll be summarising ICS implementation guidance on effective clinical and care professional leadership.

This guidance supports the development of distributed clinical and care professional leadership across ICSs. It describes 'what good looks like' in this regard, based on an extensive engagement exercise involving over 2,000 clinical and care professional leaders.

Fully inclusive multi-professional clinical and care professional leadership is central to designing and delivering integrated care and meeting the complex needs of people, rather than just treating their individual conditions. Therefore, it needs to be a priority from the outset. As we transition to the proposed new statutory arrangements for ICSs in July 2022, the full range of clinical and care professional leaders, from a diversity of backgrounds, should be involved in decision-making throughout the ICS so they can share and contribute towards a collective ambition for the health and wellbeing of the population. Together they will help ensure the priorities, strategies and plans of the Integrated Care Partnership (ICP) and Integrated Care Board (ICB) fully connect with the needs and aspirations of local communities, service users and carers. They will



play a key role in ensuring that care is high quality and that any risks are identified and managed effectively. The Covid-19 pandemic accelerated the shift to system working, empowering clinicians and care professionals to work across traditional organisational boundaries to overcome challenges, protect communities and redesign services when needed. It is important to retain and embed this spirit of innovation as ICSs develop.

The guidance identifies five core design principles for effective clinical and care professional leadership across ICSs.

- Ensure that the full range of clinical and professional leaders from diverse backgrounds are integrated into system decision-making at all levels, supporting this with a flow of communications and opportunities for dialogue.
- 2. Nurture a culture that systematically embraces shared learning, supporting clinical and care professional leaders to collaborate and innovate with a wide range of partners, including patients and local communities.
- 3. Support clinical and care professional leaders throughout the system to be involved and invested in ICS planning and delivery, with appropriate protected time, support and infrastructure to carry out this work.
- 4. Create a support offer for clinical and care professional leaders at all levels of the system, one which enables them to learn and develop alongside non-clinical leaders (e.g., managers and other non-clinical professionals in local government and the VCSE sector), and provides training and development opportunities that recognise the different kind of leadership skills required when working effectively across organisational and professional boundaries and at the different levels of the system (particularly at place).
- 5. Adopt a transparent approach to identifying and recruiting leaders which promotes equity of opportunity and creates a professionally and demographically diverse talent pipeline that reflects the community served and ensures that appointments are based on ability and skill set to perform the intended function.

It asks system leaders to develop a local framework for embedding these principles in their ICS arrangements and to ensure that the full range of clinical and care professionals are involved in decision-making at every level of their system.

This guidance will support the Joined Up Care Derbyshire ICS to build on work already underway and strengthen our current Clinical and Professional Leadership Group (CPLG).

This group is made up of representation across health and social care providers who meet on a fortnightly basis. The group is responsible for facilitating and building clinical and care professional leadership across Derbyshire so that the best outcomes for the population are achieved collectively. CPLG does this by ensuring clinical and care professionals are involved, informed, and have the ability and opportunity to influence and lead decision making at all levels. CPLG also takes a proactive role in shaping the shared vision and strategy which supports new models of integrated care by providing high-quality advice, shared learning, and best practice.

In addition, locally CPLG acts as the collective clinical and care professional point of reference to support service developments and delivery by providing a senate/council approach to scrutinise and approve transformation proposals in the early stages with appropriate checkpoints at which the CPLG recommendations need to be taken into consideration. In doing so, CPLG seek and provide assurance of strong clinical and professional involvement in developments. Programme leads must ensure their proposals are considered through CPLG in the development stages to ensure system-wide developments remain consistent with the Derbyshire model of care and are aligned to the Quadruple Aim. CPLG also offers an 'open door' to resolve difficult/ system problems with a clear route of escalation for frontline clinicians and professionals.

An event for all existing, emerging and aspiring clinical and care professional leaders in health and social care was held on the 10th May 2022 where they heard about the movement to create supportive and distributed leadership networks across the Joined Up Care Derbyshire ICS and the difference that can be made to care through leaders connecting and collaborating.

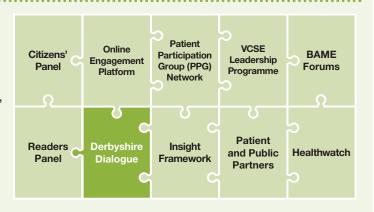
The event gave clinical and care leaders the chance to influence and add to Joined Up Care Derbyshire ICS's clinical and care professional framework, by inviting discussion around what mattered to them and what needed to be different.

For more information about the CPLG you can contact Abi Ingram at abigail.ingram@nhs.net



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.



Derbyshire Dialogue

The 'Derbyshire Dialogue' project has been set up to start a conversation between Derbyshire residents and those delivering and commissioning services. It was launched back in September 2020 originally to update people on our response to the Covid-19 pandemic but has developed into regular dialogue with our population about all manner of different health and care-related topics. Our residents can tell us about their experience of services, what's been helpful, what else they may have found useful, any particular highlights or problems and what matters most to them about health and care services. We feed all this information back to our commissioners and providers to build on our strengths and work on any areas that require further development.



Our Derbyshire Dialogue sessions currently take place on Microsoft Teams monthly for an hour. Past and future topics can be found here, along with the booking link.

If you would like to suggest a topic for our Derbyshire Dialogue or ask a question, please contact ddccg.derbyshiredialogue@nhs.net



Living Well Derbyshire – our new community mental health offer

In the July issue of our JUCD newsletter, we informed you of the Community Mental Health Framework, which is a three-year NHS programme aiming to improve care and support for people experiencing serious mental illness (SMI).

Since then, Derbyshire Healthcare NHS Foundation Trust, voluntary sector organisations, local authorities, the CCG and those with a lived experience of mental health illness, and their carers, have been working hard to create a new model for the communities in High Peak and Derby City. The new model of care has been named 'Living Well Derbyshire' (name TBC for Derby City).

Living Well Derbyshire is a new way of approaching mental health and how we deliver services. It ensures that support is joined up, focuses on the whole person's needs and can be easily accessed from the community, aiming to make sure people get the right support, in the right place, at the right time.

Sometimes, people, have difficulties moving between services or getting access to some services and the Living Well Derbyshire programme wants to ensure this doesn't happen so support will be improved by organisations working closely together. Living Well Derbyshire is about bringing services together to help people get well and stay well, and may include support with employment, welfare benefits, physical health issues or taking part in activities or groups.

What have we done so far?

In 2021, two of our localities (High Peak and Derby City) started to shape and describe the Living Well vision, and apply it to their local infrastructure, to meet the needs and aspirations of their communities.

This has brought together people with lived experience and carers, staff, managers and volunteers, the voluntary and community sector, Derby and Derbyshire Clinical Commissioning Group (DDCCG), Derby City Council and Derbyshire County Council, and Derbyshire Healthcare NHS Foundation Trust.

How have people been brought together?

Collaboratives:

A community forum where people with lived experience and those using services sit alongside people and organisations delivering services and system leads to develop a shared understanding of their community and its needs.

Living Well Teams:

We have created space for a multidisciplinary team to step away from their usual job roles and have dedicated time to try out new ideas coming from the Collaboratives and evidence-based ideas from elsewhere to grow new practice and structures of integrated support

Network events:

These build relationships across the network of providers and community groups across local areas to grow joined-up ways of working and practice that wraps support around people.

Lived experience forums:

Where we meet with people on their terms and ensure people with lived experience stay at the heart of this process.

Integrated leadership:

Bringing together Derbyshire Healthcare Foundation Trust, the voluntary and community sector, local authorities, and the CCG, to represent a range of voices and perspectives.



What are we doing next?

Derby City and High Peak Community Mental Health Teams have been pioneering the transformation, with new, open access Living Well Teams established in 2021, and Community Mental Health Teams (CMHTs) integrating with those teams in 2022.

A similar process has started for Chesterfield, North East Derbyshire, Bolsover and Derbyshire Dales in April 2022. Amber Valley, Erewash and South Derbyshire in April 2023. This will take the learning from year one and allow future areas to adapt the model to their local infrastructure.



Our Values

Underpinning our approach

"Planting person centred seeds and enabling them to grow"



















Person centred outcomes

We believe in, and are passionate about, choice. inclusion, recovery and citizenship

Voice of Lived Experience

We put the voice of lived experience at the centre of support and decision makina

Easy access

We provide timely and easy access to help and support when and where it is needed

Coproduction

We give people pride, meaning and purpose by working with them to identify, build on and utilize

People, not just patients

We see people as individuals within their communities, rather than 'patients', 'service users or 'professionals





















Strength based We believe in people's strengths and aifts and build on these

Holistic support We work with the

whole person, not just their diagnosis

Whole family approach

We consider the needs and strengths of the whole family and empower and support carers

Collaboration at all levels

collaboratively, as one team, with one purpose, and value and respect each others' expertise

Power of the community

We work hand in hand with the community to ensure people feel connected to, and supported by, those around them

Learning culture

We have permission to try new things, adapt and learn from each other and the people we support

Your local pharmacy should always be your first choice





If you or your family become unwell, you may not always need to see a doctor or get a prescription.

Your local pharmacy should always be your first choice for help with minor ailments and conditions such as aches and pains, coughs, colds, rashes and allergies.

Many local pharmacies offer seven-day opening and late hours for convenience and you don't need to make an appointment.

Delivering care in new ways - a focus on the community GP role within Team Up Derbyshire

General Practitioner (GP) in Derby and Derbyshire are being promoted by Team Up Derbyshire.

The innovative role provides the chance for GPs to develop flexible, portfolio careers working alongside their health and social care colleagues in multidisciplinary teams in the community.

A number of individuals have already begun working as community GPs in Primary Care Networks (PCNs) in areas such as Chesterfield and Derby, and within Derbyshire Community Health Services NHS Foundation Trust, but there are vacancies for more to join, with the opportunity of selecting sessions to fit in with other career commitments.

The role is being promoted by Team Up Derbyshire, an ambitious local programme that aims to create one team across health and social care that sees all housebound patients in a neighbourhood. The overall aim is to keep people safe at home and provide the best, most seamless, care, keeping people out of hospital wherever possible.

A community GP oversees a team of communitybased professionals who provide personalised care to people who are housebound, carrying out some visits themselves and supervising the visits of their colleagues. It is both a clinical and team leadership/ supervisory role.

Dr Amy Lampard, a community GP with Chesterfield and Dronfield PCN, said: "This model of working allows the community GP and team members to take a more holistic view of the person they are caring for and allows for greater continuity of care. The care provided tends to be more joined-up between disciplines, where you can really get to know the patient, and often by doing so, we can anticipate the individual's care needs before any concerns escalate.

"Historically, with patients registered to the GP practice, we would be rushing out to see

The opportunities and benefits of becoming a Community them at lunchtimes, with limited time and it felt very much like a firefighting process. Now, as a community GP, I feel I have the time to take a more personalised approach, to work up a care plan with the patient which all colleagues can adhere to."

> Dr Anne-Marie Spooner, a GP partner with Inspire Health, and GP clinical lead and chair of Chesterfield Place Alliance believes the community GP role would be attractive to existing GPs who might be seeking a diverse career portfolio, as well as trainee GPs and possibly hospital clinicians specialising in frailty who have some experience of working in the community.

Anyone interested in becoming a community GP would need to be able to commit to at least two sessions per week. Applications for full-time positions are welcomed.

For further information on the role of community GPs and local opportunities, please email anne-marie.spooner@nhs.net or amylampard@nhs.net.

Team Up Derbyshire



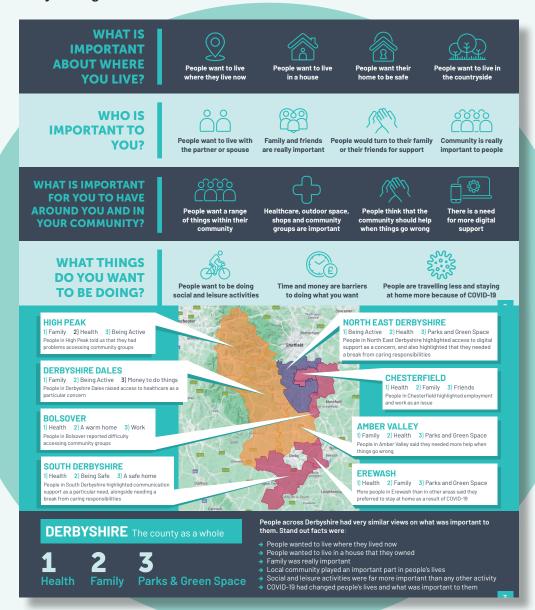
Best Life Derbyshire - What's important to people who live in Derbyshire?

At the end of 2021, Derbyshire County Council worked with a Social Enterprise called Sortified to ask the people of Derbyshire 'What's important to live your best life now and in the future?'.

The overall aim of the engagement was to understand how people want to live their best lives in Derbyshire to ensure planning for the future is based on what people have told us.

The engagement gave local people a chance to have their say around what matters most to them and it was an opportunity to particularly understand how viewpoints and preferences may have changed due to the pandemic.

These were the key findings:



Next steps

Derbyshire County Council will:

- Have a look at all the information, and use it to help with their plans for the future
- Share key information and feedback across different departments so that everyone knows what is important to people in Derbyshire
- Talk to a number of local organisations about what the information means, and how everyone can work together to make things better for people in Derbyshire.

You can find more information here.

Support and services for unpaid carers

Who are unpaid carers?

A carer is anyone who looks after (unpaid) a family member, friend, or neighbour who, due to disability, physical or mental health condition, illness, or addiction cannot cope without their support.

Supporting unpaid carers has never been so important, with the last two years during the pandemic resulting in carers feeling stressed, isolated, and overwhelmed at times.

It's important that we all raise awareness of the role of unpaid carers, and support with their identification, so that carers recognise themselves as a carer, understand their rights, and get the information, advice and support they need.

Help and support for carers

If you are an unpaid carer or know someone who is, help and advice is available.

A great place for carers and professionals to start is the <u>Carers in Derbyshire</u> website, which is a local and accurate source of crucial information for carers.

Carers can also access a range of support and advice from their local carer support service:



If you are a Derbyshire County resident <u>Derbyshire Carers</u>
<u>Association</u>





If you are a Derby City resident
Universal Services for Carers in
Derby City

Taking a 'break' from caring

Caring for someone can be relentless and exhausting and almost every carer needs a break from caring to feel recharged and prioritise their wellbeing. There are different ways carers can take time out from caring, including spending time in the garden or local area, having a takeaway or meal box delivered so carers don't have to cook or think about what they are going to eat, a pampering session in the home or taking up a hobby. You can get help by contacting your local carer support service (see above), which can provide personalised advice on ways to get a break. It may be that you would benefit from a carers assessment to see if you are eligible for a 'carer personal budget' to help with the cost of accessing a break.

A carers assessment will help to identify the help and support you need and is your opportunity to say what things could make caring easier for you. You will be provided with information and advice on the support available to you including information about training courses, support groups or services to get a break from caring.

Mobilise



<u>Mobilise</u> provide a range of online support to carers, including connecting carers with other carers through their <u>Virtual Cuppas</u>. Please visit the website for further information on caring and to sign up for their newsletters.

Carefree space

Another option might be <u>Carefree space</u> whose goal is for every full-time unpaid carer to have access to a short break. For a £25 registration fee, this can offer a low-cost option for those carers who can obtain back-fill support for the person depending on them whilst they take a break.

Planning for an emergency

If you look after someone it can be helpful to create an emergency plan, ahead of an actual emergency! There is a free emergency planning service for carers who wish to plan support arrangements for the adult (or adults) they care for, in advance of a crisis or emergency, to ensure nominated family or friends are contacted and essential backup support is co-ordinated.





The Carer Emergency Card held by the carer indicates that you are a carer and that someone relies on you for support. If you are over 18 and the person you care for lives in Derbyshire, you can apply for a Carers Emergency Card and register your emergency plan.

If you are a Derbyshire County resident, you can find more information here.

If you are a Derby City resident, you can find more information here.

For more information about services and support for carers, please see Derbyshire County Councils Guide here.



Know your GP Practice Health and Care Staff

Your local GP practice has a 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 more quickly.

From physiotherapists and dieticians to pharmacists and nurses, these highly trained experts can help you to help yourself.

Next time you have a health concern, consider whether one of these staff could help you or ask for the advice of the reception staff, who are trained to help get you the best care as quickly as possible.

Advanced Clinical Practitioner

I decided to undertake extra training so I can help patients with more complex problems.

Now I can prescribe medicines, order tests and interpret the results, and work on treatment plans with patients.

I can help a lot more patients, freeing up the doctors to see patients with the most urgent or complicated health issues. Advanced Clinical
Practitioners are highly
trained, skilled
clinicians who can
help you with many
different health
problems

Care Co-ordinator

As a Care Coordinator, I really focus on providing a more joined-up and coordinated care journey for patients.

I am the single point of contact for patients to navigate the health and care system, helping to break down traditional barriers between health and care organisations.

I do a lot of work with people who have long-term health conditions in particular.

Care Co-ordinators help people to manage their needs through answering queries, making and managing appointments, and ensuring people have good quality information to help them make choices about their care

Clinical Pharmacist

I'm a Clinical Pharmacist and I help patients to understand and get the most out of their medicines.

I often also help with lifestyle changes to tackle longterm conditions, order blood tests where necessary and often advise patients who have just come out of hospital and need help with their new medications.

Being part of the team here means our patients have an expert they can talk to pretty quickly when they need to.

Clinical
Pharmacists
are experts in
making
sure your
medicines work
for you



Dietician

I'm trained to help with diet but also to spot health conditions which may be unrelated to diet, and I work closely with colleagues to treat complex conditions such as diabetes, chronic fatigue, and kidney failure.

I advise patients on how they can improve or change their diet.

A big part of my training is recognising how diet is part of the whole picture for a patient and can improve a person's health and wellbeing. Dietitians can help
people to work out
problems with
their diet to
prevent or treat
ill health

General Practice Nurse

I can help dozens of patients every day. As a registered nurse I do all sorts, from baby immunisations to helping people with long-term conditions like diabetes and asthma.

I can also do breast exams, check that strange rash you're worried about, or even talk to you about contraception.

It's great to be able to help so many people!"

I'm a General
Practice
Nurse, and I
can help you
with most
health issues



Health and Wellbeing Coach

As a Health and Wellbeing Coach, I play an important role in helping patients to achieve goals set out in a personalised health and care plan.

I can also refer people to other health professionals within the practice.

Health and
Wellbeing Coaches
coach and motivate
patients through
multiple sessions to
identify their needs,
set goals, and
support patients



Health Care Assistant

Being a Health Care Assistant is a great job, as I received special training to administer Covid-19 and flu vaccinations.

I also do lots of jobs around the practice that nurses used to do, so now they're able to see patients more quickly.

Health Care
Assistants
play a key role in
vaccinations and
help to free up
nurses' time



Mental Health Practitioner

I'm a Mental Health Practitioner, and I work with patients to make the best possible decision to manage their care and help them access treatment.

I'm a bridge between primary care and specialist mental health providers, providing care to patients with a range of needs.

Patients who need specialist support can be seen with no formal referral and can then go on to access a range of mental health services. A Mental Health
Practitioner
provides a combined
consultation, advice,
triage and liaison
function, supported by
the local community
mental health provider

Nursing Associate

A lot of people don't know much about what I do, but my main role is working with patients who need help or advice but don't need to see a doctor or a nurse.

It's great because people don't need to wait so long for an appointment, and it's helping me for when I train to become a registered nurse. As a Nursing
Associate,
I do lots of important
tasks to help
patients with less
complex health
issues

Occupational Therapist

I help people develop, recover and improve, as well as maintain the skills needed for daily living and working.

I assess, plan, implement and evaluate treatment plans to increase patients' productivity and self-care.

I work really closely with patients through a shareddecision making approach to plan realistic goals. Occupational
Therapists
work with injured,
ill or disabled
patients through
the use of everyday
activities



Paramedic

My Paramedic training means I can deal with lots of different types of illness and injury, but I also did extra postgraduate training so I can help even more patients.

I do quite a few home visits and help to assess patients on the phone, so I can help people get the right care as quickly as possible. You may see a
Paramedic
at your GP
practice because
their skills and
experience can
help

Pharmacy Technician

I have a post-graduate degree in pharmacy and love working with patients to help them understand and get the most out of their medications.

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

Physician Associate

I have a list of my own patients and can diagnose many conditions, order up tests and interpret the results, then make referrals if needed.

I originally did a degree, then studied for another two years to become a Physician Associate, so I have a lot of skills that I can use to help people.

This means I can take some of the load off the GPs, which also means less waiting time for patients!

Physician
Associates
can diagnose,
order tests and
make referrals

Physiotherapist

I work with lots of patients who have muscle or joint problems. That includes people recovering from serious injuries or illness, and those with new injuries.

I can book scans and tests, and even organise joint injections, which used to need a GP. We're also trained to spot 'red flags', which means we can recognise when a joint or muscle problem may be a sign of something more serious.

This is great because patients can come to me without needing to wait for a doctor's appointment.

Physiotherapists are the best people to help you if you have a muscle or joint problem



Podiatrist

As a Podiatrist, I work on the prevention, diagnosis and treatment of conditions that affect the foot, ankle and leg.

Podiatrists work in a variety of places and can work with a team of people including doctors, nurses and physiotherapists.

My main aim is to improve mobility, independence and quality of life for patients.

Podiatrists specialise in treating the foot, ankle and leg, and work with patients through the whole care journey

Social Prescriber Link Worker

As a Link Worker, I help patients to improve their health, wellbeing, and welfare by connecting them to community services which might be run by the council or a local charity.

Social Prescribers can take time to talk about what matters to patients and support them to find suitable activities that are a better alternative to medication.

They connect people to community groups and services for practical and emotional support.

Social Prescribing
Link Workers
connect people to
community groups
and statutory
services for practical
and emotional
support

Just a reminder!

In previous issues of the newsletter, we have featured these resources available to our system partners, this is just a reminder to consider them when making decisions about the design and delivery of services:

Readers Panel

We have a readers' panel which is made up of 34 volunteers who review new and revised information that is shared with patients and members of the public to make sure the information is clear, understandable, and concise. It is important that any patient and public facing information uses the right words, in the right way to ensure our messages are clear and the readers' panel can help with this.

Panel members are sent one leaflet/document per month to read and are asked to provide feedback within two weeks. We have a standard feedback form and members are free to comment on any aspect of the leaflet/document in relation to what they feel needs improvement or praise politely and constructively, however, if there is anything specific you would like feedback on we can ensure this is incorporated into the form.

If you have any information that you would like the panel to review or would like to discuss further, please contact: Hannah Morton – Hannah.morton10@outlook.com

Patient and Public Insight Library

JUCD have developed a system to collect, and collate insight gathered across all system partners in Derbyshire, called the Patient and Public Insight Library. It is easily accessible and searchable by a wide variety of professionals and can be found on the NHS Futures Platform.

The library aims to assist decision-makers to find current insight in the system, avoid duplication and consultation fatigue, and aid decision making.

To request an invite to join the Patient and Public Insight Library please contact lee.mellor1@nhs.net. If you are new to the NHS Futures Platform, you will be asked to sign up and complete your profile details. This is free, quick, and easy and instructions will be included in the joining email. If you already have a log in for the platform you can find the workspace here.

Here are a few examples of reports that can be found in the Patient and Public Insight Library:

 Perceptions and Reality of accessing Primary Care, and Urgent and Emergency Care (UEC) conducted by Britain Thinks - JUCD commissioned research to understand patients' perceptions and experiences of accessing primary care and UEC.

- Covid-19 Population Restoration and Recovery:
 Anticipating the future direct and indirect negative impacts of the pandemic for Derbyshire (City and County). This insight outlines the anticipated negative effects of Covid-19 measures on accumulating unmet need and build-up of morbidity.
- A Report on the Black Caribbean Community's Relationship with Social Care in Derby - Derby West Indian Community Association (DWICA). The report takes a thematic analysis approach to understand the black Caribbean community's relationship with social care in Derby.

We are keen to feature insight from all system partners on the library, so if you are aware of relevant insight, please get in touch. If you have any questions, please contact leni.robson2@nhs.net.



Following a demonstration of the Joined-Up Care Derbyshire Public and Patient Insight Library at a recent NHS England and Improvement Share and Learn session for Integrated Care System Engagement Leads, it was decided that an Insight Library template would be created on the Futures NHS platform to enable all ICS systems to replicate the structure we have developed in Derbyshire.

Exciting free training opportunity! - Virtual sessions in Health Literacy Awareness

Did you know that nearly half of the UK adult population does not have the required literacy skills to routinely understand health information, with even more not having the necessary numeracy skills?

Health Literacy involves people having the skills, knowledge, understanding and confidence to make decisions about their health and well-being, and ensures that the services and systems we work in, provide health and social care information in a way that can be understood by everyone.

Derbyshire County Council's Public Health team are funding 12 x 2-hour virtual sessions over the next 12 months which will be delivered via Microsoft Teams. They are open to partners across the wider public health workforce who work wholly or predominantly in Derbyshire County.

If you're interested in transforming the way you work by understanding more about health literacy and why it's important, then please register for one of the upcoming online sessions:

- Tuesday 21st June 9.30 11.30 am
- Wednesday 13th July 1.30 3.30 pm



The booking form can be found <u>here</u>. Further dates will be released throughout the year and can be found on the same booking link.

You can also access a free 35-minute Health Literacy e-learning module:

- For Derbyshire County Council employees:
 DCC Health Literacy e-learning
- For non-Derbyshire County Council employees:
 e-Ifh Health Literacy

Or for more information contact:

ASCH.healthliteracy.admin@derbyshire.gov.uk

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.

