

Quality Account 2022/23



What are the required elements of a Quality Account?

The National Health Service (Quality Accounts) Regulations 2010 specify the requirements for all Quality Accounts. We have used the requirements as a template around which our account has been built. The Quality Account is therefore laid out as follows:

Part one

- A statement from the Chair and Chief Executive about the Quality Account.

Part two

- Priorities for improvement – this section looks ahead and identifies our three priority areas for improving the quality of our services for 2023/24, why we have chosen these priorities, and how we are going to develop the capacity and capability to achieve them.
- Mandatory statements relating to the quality of our services, as set out in the Quality Accounts Regulations 2010.

Part three

- The review of our quality priorities and performance in 2022/23 and examples to illustrate ongoing improvement in our services.

Part four

- Statements from Kirklees Health and Care Partnership, Kirklees Healthwatch and Kirklees Health and Wellbeing Board.

Whilst every attempt has been made to write this report in accessible language, and most acronyms clarified, inevitably due to the specialist nature of some of the content, clinical and technical terminology has sometimes been used.

Development of a Quality Account

Locala's Quality Account for 2022/23 has been developed with our colleagues, stakeholders and partner organisations, including clinicians, senior managers and commissioning colleagues.

The Quality Account outlines our achievements and challenges throughout 2022/23 and illustrates our ambitions for 2023/24.

We are keen to share information with service users, patients and their carers about the current quality of all our services and our plans to improve even further. It has been approved by Locala's Board of Directors.



Section 1

Statement from Karen Jackson, Chief Executive

Each year I am incredibly proud of the work done by the fantastic teams that deliver Locala's healthcare services. They work tirelessly and passionately to support our communities. Within this report there are some fabulous examples of the work done this year which is great to see. I am also delighted that there has been work done to support colleagues such as the increased focus on gathering and responding to colleague feedback, and the Schwartz Rounds initiative that provides a structured forum for colleagues to discuss the emotional and social aspects of working in healthcare. The fact this is done as a system across Kirklees also demonstrates the benefits of more integrated working.

The positive reports received for the Locala Walk In Centre, and the Joint Targeted Area Inspection (JTAI) of the multi-agency response to child criminal exploitation, also show the excellent work being done, and effective partnership working that benefits communities.

The new Patient Safety Specialist role within Locala, and the expert support they bring, is great to see. I am also very pleased, and proud, of the progress that has been made to respond to the Patient Safety Incident Response Framework requirements.

I would like to take this opportunity to thank all of Locala's colleagues for their work and commitment every day to making people's lives better.



Karen Jackson, Chief Executive

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Statement from Diane McKerracher, Chair

This Quality Account demonstrates the excellent care Locala colleagues continue to provide. The progress against each of the three quality objectives is excellent, and I am enthused by the clear and well thought out priorities for the year ahead. They strike an excellent balance of being safe, inclusive and innovative.

The Quality First Clinical Accreditation process provides robust assurance to the organisation that our services are providing an excellent standard of healthcare to our communities. Having 11 accredited services this year in is commendable and the responsive review process in place is very encouraging.

It is important that we look after our colleagues, and gathering and monitoring feedback is key to that. Whilst there will always be more to do I am enthused, and pleased, by the latest colleague survey results and how they compare to those nationally. Volunteers are an important part of our workforce, and very important to us in delivering social impact, so I am delighted with the continued developments in this area.

Thank you to colleagues, volunteers and carers, for all that they do to support all of our communities, particularly the most vulnerable.



Diane McKerracher, Chair

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The information provided in this report is, to the best of our knowledge accurate and a reasonable reflection of our commitment to quality.

Care Quality Commission (CQC) – Inspection and Ratings

	SAFE	EFFECTIVE	CARING	RESPONSIVE	WELL-LED	OVERALL
Community health services for adults	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020
Community health services for children and young people	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020
Community dental services	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020
Community health sexual health services	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020
Overall*	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020

Locala's services were not subject to a CQC review in 2022/23.

Walk In Centre Dewsbury

In April CQC carried out an announced focused inspection at the Walk in Centre, which is situated in the emergency department (ED) at Dewsbury and District Hospital. This inspection was carried out as part of CQC's national programme of urgent and emergency care inspections.

At this inspection, only those key lines of enquiry designed to support the focused inspection of the walk in centre within the key questions of safe, effective, caring and well-led were examined. Therefore, there are no ratings associated with this inspection.

At the inspection of the Walk in Centre the CQC found:

- Safeguarding and safety systems, processes and practices had been developed, implemented and communicated to staff to manage risk and ensure patient safety.
- Recruitment records were maintained in line with guidance and staff had access to induction, training and development.
- Infection prevention and control was appropriately managed to help safeguard people from a healthcare associated infection.
- The provider had access to appropriate clinical equipment in place to enable assessment of patients including emergency resuscitation equipment and medicines.
- Despite facing challenges with staffing the service had continued to maintain safe staffing levels with an appropriate skill mix of staff. The service had maintained face-to-face appointments during the COVID-19 pandemic.
- Systems were in place to respond to incidents and to ensure learning was identified and cascaded so improvements could be made when necessary.



- Clinical records viewed provided evidence that care and treatment was provided safely and effectively and in accordance with evidence-based guidelines.
- Staff had the skills, knowledge and experience to deliver effective care.
- Performance was routinely monitored, and data indicated that the service was performing well against key performance indicators. The service had paused some of their quality improvement activity, including clinical audit, during the COVID-19 pandemic but told us these were about to re-commence and demonstrated their 2022/23 schedule.
- CQC observed staff treating patients in a respectful and considerate way and patient feedback reviewed was very positive.
- The provider had an effective governance system in place that enabled ongoing monitoring and scrutiny of the operation and performance of the services provided.
- Leaders demonstrated they had the capacity and skills to deliver high-quality, sustainable care.
- The provider engaged with patients and staff to improve the service.

The areas where the provider should make improvement are:

- Deliver the planned audit schedule for 2022/23.
- Improve and develop staff awareness of the nominated Freedom to Speak Up Guardian and the duty of candour to ensure all staff are aware of these.



Joint Targeted Area Inspection

A Joint Targeted Area Inspection (JTAI) of the multi-agency response to child criminal exploitation took place in Kirklees in June 2022. JTAs are carried out by Ofsted, HMI Constabulary and Fire & Rescue Services, the Care Quality Commission, and HMI Probation. These thematic inspections look at how well local agencies work together in a particular area to protect children.

The inspection found that children in Kirklees who are at risk of, or are experiencing, criminal exploitation have their needs identified quickly and receive multi-agency support to manage and reduce risk to them effectively.

Children in Kirklees were noted to benefit from the strong relationships between partners in the 'Front Door' service with appropriate challenge when there is a dispute about decision making. The Front Door is a multi -agency team, that includes Locala 0-19/ Health Visitor Practitioners, Police representatives, Children's Social Care, and other relevant partner agencies. It undertakes reviews, assesses risk levels and responds according to risk level to child safeguarding concerns and domestic abuse incidents notified to children's social care.

Agencies across the partnership were found to have a strong child-centred approach.

Practitioners are persistent in their efforts to engage children and families who present as resistant to professional involvement. When child protection concerns are highlighted, strategy discussions are arranged quickly, and these are well attended by the relevant professionals who know the children best. Children and young people's voices are captured well in our children's records to offer additional insight into their lived experiences.

The following actions were completed by Locala in response to learning identified during the course of the inspection:

- A robust process was developed for sharing Locala health information with the Kirklees Multi Agency Child Exploitation process.
- A robust process was developed to enable the flagging and risk notification of children that were discussed at Kirklees Exploitation Screening Panel.
- Processes were introduced to ensure GPs are informed about strategy meetings held in Kirklees Front Door and Locality settings

Section 2

Priorities for Improvement

In this part of the report we will focus on the year ahead - 2023/24. Locala's organisational strategy and business plan sets out our strategic objectives. The three-year quality strategy that sits alongside the main Locala strategy identifies our priorities for quality, which will enable the delivery of exemplary care, meeting, and exceeding, the expectations of people who use our services.

The following priorities have been developed in consultation with key stakeholders and are framed around the three dimensions of quality, i.e. that care is safe, effective and that people have as positive an experience as possible.



1. We will grow a “safety through learning” culture.

Why we think it should be a priority

The culture of an organisation shapes how care is delivered and experienced. Through compassionate and inclusive leadership we aim to ensure all colleagues feel psychologically safe to speak up and learn from when things go wrong, as well as when things go well. When coupled with listening and learning from the feedback of people and communities, this means we will grow a culture focused on ensuring safety through learning in everything we do.

How we will achieve it

- Implement the Patient Safety Incident Response Framework.
- Triangulate data from a variety of sources to inform improvement initiatives.
- Produce high quality reports that demonstrate learning.
- Be able to demonstrate the involvement of those affected by a patient safety incident, colleagues and patients and the learning that provides.
- Learn from any clinical negligence claims and ensure robust actions as a result.
- Have established the role of Patient Safety Partners and begun to evidence their impact.
- Ensure we use the new Learning From Patient Safety Events system to maximise learning.
- Re-establish a learning forum.
- Develop various mechanisms to ensure learning is captured and shared, whether from when things go well, when things go less well, or from feedback.
- Connect mechanisms to learn to the cultural development work.

We will monitor progress through the business unit meetings that support our clinical teams, with quarterly reports to the Locala Patient Safety Quality Standards group, which reports into Locala’s Quality Committee, a sub-committee of the Board.

2. We will work with people, communities and stakeholders to develop and deliver accessible, inclusive and responsive services

Why we think it should be a priority

We believe in supporting people to have better lives and receive care where they live, in a way that eliminates inequalities and promotes equity of outcomes and experiences. We are ambitious to make sure people start life well, live well, age well and die well. We will work with all our partners to optimise care delivery opportunities towards outcomes and experiences where people feel truly at the centre of their own individualised care journey.

How we will achieve it

This is a big ambition, for the next year we will focus on working with our system partners to identify and develop priority clinical pathways and models of care that respond to the needs of people and communities.

In addition we will:

- Promote independence through developing models of care that support people to develop the skills and confidence to self manage their medication.
- Identify the capability and skills that will equip our teams to identify and deliver personalised care for people.
- Set out a plan to describe how we will build and embed personalised care capabilities and skill across our clinical and AHP workforce, including the establishment of a personalisation steering group.
- Learn from our best current approaches to care delivery, where care is already delivered in a way which is highly personalised to the needs of people.
- Ensure we reduce inequalities of access and experiences for people and communities.
- Expand our research capacity and capabilities.
- Work closely with partners and stakeholders to identify and develop opportunities to reduce health inequalities.

3. We will embed innovation to the core of how we design, develop and deliver our services.

Why we think it should be a priority

People and communities rightly expect to be at the centre of high-quality care. Care that is seamless, effective and digitally enabled. We recognise that we need to commit to exploring different approaches and do things differently if we are to deliver and exceed the ambitious standards we set ourselves and all our partners expect.

How we will achieve it

- Through an organisational culture and capability focused on quality improvement, we will empower colleagues to develop and improve how we work, ensuring we are delivering our best everyday for people, communities, partners and our workforce.
- We will design new service models to meet the needs of modern society, accessible at home or as near to home as possible.
- We will monitor our success through the number of, and impact of projects that we adopt into practice. This will include but not be limited to digital transformation.
- Through digital transformation, we will explore new ways of delivering specialist care through the use of interactive virtual tools.
- We will optimise technology to ensure improved patient access to specialist tissue viability care and treatment.
- We will explore the benefit new technology can bring to patients who are able to provide self-care. Through providing access to clinical oversight and assistance we aim to equip patients to maintain their independence and increase their confidence in managing their condition at home.

Clinical Effectiveness of our Services

Participation in clinical audits

Locala is committed to improving services and has a comprehensive clinical audit programme in place, informed by NICE guidance, local policy compliance and risk. Audit is an important tool for measuring and benchmarking a range of activities against agreed markers of effective professional practice, stimulating changes to improve practice and evaluating the impact of service improvements. Robust audit also contributes to assuring both commissioners and regulators of the quality and effectiveness of services being provided.

The audit programme reflects priorities for services and organisations and should be informed by the analysis of risk demonstrated through a range of sources of intelligence such as complaints, incidents and patient experience. Locala has a comprehensive audit programme which is reviewed annually and reported at Locala's Quality Committee.

Clinical audit activity was reduced during 2022/23 in line with national guidance provided in response to the Covid-19 pandemic and increased pressure on clinical teams, however a number of local audits did continue throughout this period and Locala participated in all National Audits we were eligible to take part in.



National Audit

The reports of 5 national audits were reviewed by the provider in 2022/23 and Locala intends to take the following actions to improve the quality of healthcare provided:

- Improve the way we review and collate learning from national audit

Audits Title	Key Recommendations
National Audit of Cardiac Rehabilitation (CR)	<ul style="list-style-type: none"> • Implement service changes to reduce inequalities in CR Provision- Provision of all forms of CR/ Outreach to underrepresented ethnic/geographic groups • Ensure CR is tailored to the patient through Baseline Assessments-Reviews of Patient Assessment Protocols. • Reduction of excess risk related to exercise as part of CR- Baseline Exercise Assessments
National Paediatric Diabetes Audit.	<ul style="list-style-type: none"> • Ensure adequate staffing of full multi-disciplinary teams to manage the increasing caseload • Health checks for children/young people along with clear communication with families • Raise public awareness of symptoms to avoid escalation to Diabetic Keto Acidosis
Sentinel Stroke National Audit Programme	<ul style="list-style-type: none"> • A systematic approach taken to address the shortfall of ambulance delays and transfers • Greater emphasis to be applied to deliver a multi-disciplinary workforce capable of delivering rehabilitation according to patient's need • The addressing of inequalities for healthcare related to stroke patients

Local Audit

The reports of 15 local clinical audits were reviewed by the provider in 2022/23 and Locala intends to take the following actions to improve the quality of healthcare provided.

Local Audits	Key Recommendations
Adult Therapy Services- Carer needs in 0-19	<ul style="list-style-type: none"> Encourage use of the Carer Template on SystmOne to ensure carer needs are captured 0-19 service to be contacted in regard to support for young parents/carers. Possibility of a training session to be discussed
Intermediate Care – Delirium Risk Assessment	<ul style="list-style-type: none"> Link with SystmOne to change the wording of the Delirium Risk Assessment (DRA) template to make it more user friendly Implement the DRA into the template completed on-admission Re-audit patients who have completed stays in the unit within the next quarter
Continence Service – Intimate examinations	N/A: The audit achieved 100% compliance
Sexual Health - Trichomonas Vaginalis	<ul style="list-style-type: none"> Exploration of sending messages via phone inviting contacts to contact the service. Balanced against confidentiality concerns
Children Diabetes Nursing Service - Prescribing	<ul style="list-style-type: none"> Develop a consumables formulary for paediatric diabetes Develop a non-antidiabetic formulary for other medication that may be prescribed

Research and Development

Locala understands the importance of clinical research in providing new knowledge and understanding of health and illness. This new knowledge could lead to changes in care, treatment and policies. We are committed to improving our research capacity and capability over the coming year.

A Locala colleague within the 0-19 service is a research champion and is working as part of the Yorkshire and Humber 0-19 research network. She is funded in her role for half a day a week by the National Institute for Health Research (NIHR) and as a result she is establishing a Locala 0-19 Research and Innovation Group. The aim of this group is to connect interested colleagues and post graduate students to strengthen research activity across the 0-19 services.

Participation in Research

We continue to strengthen our involvement in research at a local and national level. Locala's research panel has approved colleagues and/or patients and carers to take part in the following ongoing studies:

The PALLUP Study	Equipping community services to meet the palliative care needs of older people with frailty approaching the end of life; a mixed methods study. University of Surrey
Bolus Feeding	A study evaluating a newly designed nutritional tube feeding pouch for bolus feeding in adults. Nutricia
Support for Parents with Learning Disabilities (Assets for Parents)	A qualitative study of the potential for asset based approaches to support parents with learning difficulties. University of York
VenUS 6	Adjustable hook-and-loop-fastened compression systems for the treatment of venous leg ulcers. University of York
Inequalities in Identification and Treatment of Perinatal Mental Health	University of Huddersfield
Leeds and West Yorkshire bid to the Engineering and Physical Sciences Research Council Digital Health Hub Pilot Scheme	University of Leeds
Improve	Improving completion of pulmonary rehabilitation with PR-buddies.. University of Leeds

Locala's research panel has approved colleagues and/or patients and carers to take part in the following studies which are now completed.

ROSHNI-D	Multi Centre RCT of a group psychOlogical intervention for poStnatal depression in british mothers of south asiaN origin. Research by the University of Manchester & Lancashire Care NHS Foundation Trust
Oral Health, Autism and Schools	The Impact of Poor Oral Health on School Attendance and Potential School-based Preventative Solutions University of Leeds
Research Community Caring for the Dying Through COVID 19	Universities of Sheffield, Cambridge, Warwick and Edinburgh
What is the experience of UK Speech and Language Therapists when working with clients with communication difficulties who require a decision-making capacity assessment?	Leeds Beckett University
PrEP	PrEP (pre-exposure prophylaxis) is medicine taken by people at risk of HIV to prevent getting HIV from sex or injection drug use. When taken as prescribed, PrEP is highly effective for preventing HIV. NHSE
Exploring the use/provision of strength training and strength assessments in Pulmonary Rehabilitation	University of Essex
Drink Supplements	The study is evaluating three new ready to drink supplements for the management of disease related malnutrition in adults. Nutricia

Data quality

We accept responsibility for providing good quality information to support effective patient care, and therefore comply with the National Data Guardian's ten standards for good information security and records management. We are supported by our Chief of Nursing and Allied Health Professionals, who is our designated Caldicott Guardian, and our Director of Corporate Affairs who is the Senior Information Risk Owner. The vast majority of our services continue to use the electronic record keeping system; SystmOne. This provides a single information and electronic record keeping system and reduces the number of times a patient is required to give personal information, as relevant data can be shared electronically between the clinicians involved in their care. Our dental service uses R4 which is a specialised electronic system. Both these systems are fully encrypted.

In 2018-19 the Information Governance Toolkit was replaced by the Data Security and Protection Toolkit (DSPT). The DSPT assesses health and social care organisations' compliance against the National Data Guardian's 10 standards for good information security and records management. NHS Digital view this new Toolkit as a process of continuous improvement.

In 2022/23, our DSPT was completed by our Data Protection Officer and validated by our Strategic Information Risk Owner before submission. Our evidence was also externally reviewed by Audit Yorkshire to ensure that we had fully complied with all the requirements. Our DSPT assessment shows that we have achieved full compliance with all the mandatory standards.

We have an annual data quality improvement plan targeting enhancement of the timeliness, accuracy, validity, reliability, completeness and relevance of data and have begun to assess some of our data using these criteria in Locala's Board's monthly Integrated Performance Report.



Section 3

Our Achievements This Year

In 2022/2023

We said

The aspirations outlined within the Quality Strategy continued to be our priorities for 2022/23. These priorities align with our exemplary care objectives and the NHS Patient Safety Strategy, with a clear vision to continuously improve patient safety with a key focus on insight, involvement and improvement.

We planned to further embrace the Patient Safety Specialist role, alongside the introduction of the Patient Safety Incident Response Framework to include:

- A new investigation model that provides greater insight
- Key focus on a culture of learning and continuous improvement
- Collaboration with colleagues, service users and key stakeholders

We did

Patient Safety Specialists (PSS)

Patient Safety Specialists are individuals in healthcare organisations who have been designated to provide dynamic senior patient safety leadership.

Each PSS is dedicated to providing expert support to their organisation and is expected to have direct access to their executive team, which facilitates the escalation of patient safety issues or concerns. They also play a key role in the development of a patient safety culture, safety systems and improvement activity.

- Our PSS joined local and national networks to ensure Locala is abreast of the latest developments in patient safety.
- As well as coordinating and supporting local patient safety priorities, Our PSS support local patient safety priorities and are part of the implementation team for Locala's Patient Safety Incident Response Plan.

- The specialists have close links with the NHS England and NHS Improvement National Patient Safety Team.
- The PSS have undertaken the recommended available training; Patient Safety Training levels 1 and 2.

Patient Safety Incident Response Framework (PSIRF)

Published in September 2022, the PSIRF sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. Patient safety incidents are unintended or unexpected events (including omissions) in healthcare that could have or did harm one or more patients. It fundamentally shifts how the NHS responds to patient safety incidents for learning and improvement, advocates a co-ordinated and data-driven approach to patient safety incident response that prioritises compassionate engagement with those affected by patient safety incidents, embeds patient safety incident response within a wider system of improvement and prompts a significant cultural shift towards systematic patient safety management.

Organisations are required to develop a thorough understanding of their patient safety incident profile, ongoing safety actions (in response to recommendations from investigations) and established improvement programmes.

Locala has a project plan which describes the various phases required for implementation of the plan. To date we have:

- Established the implementation team and identified the Lead Director and Senior Responsible Officer.
- Held a number of focus groups with colleagues from roles such as Freedom To Speak Up Guardian, Human Resources, Organisational Development and Safeguarding to explore the preparation questions for Phases 1 and 2 of implementation.
- Established a fortnightly meeting to discuss any enquiries or investigations which may involve colleagues to ensure the correct pathway is being followed and that colleagues are being treated compassionately.
- Established good working relationships with colleagues in patient safety roles in other local and national organisations.
- Begun work with the Improvement Academy on assessing our Safety Culture.
- Been asked to present at the regional PSIRF forum regarding our work done to date in particular the "After Action Reviews".
- Begun to use the tools and methods within the PSIRF.

In 2022/2023**We said****Quality First Clinical Accreditation and assurance process**

We will continue to work in collaboration with clinical teams on the implementation of the Quality First Clinical Accreditation process, providing greater oversight and ownership of patient safety and quality. In addition, encouraging and supporting teams with local quality improvement initiatives and improved safety culture.

Quality First Is a bespoke framework designed to provide a standardised, comprehensive assessment of the quality of care at service/team level. Evidence is collected from various sources, and a team of reviewers observe the delivery of clinical care. Evidence is analysed against the CQC's five key questions (safe, effective, caring, responsive, well-led) and a level of accreditation awarded to the service/team if certain standards are met.

Services that are achieving high standards of quality care are recognised through the bespoke clinical accreditation process and those who are not meeting the expected standards are supported to develop an improvement plan. This year we have worked hard alongside our colleagues to further develop our accreditation approach. We have introduced responsive visits alongside the established accreditation visit, which provides services with more rapid support when needed.

We did

- 11 services were accredited to Bronze (5) Silver (3) and Gold (3) levels. This consisted of 31 individual team visits by the accreditation team who were assessed against the accreditation framework.
- 4 services (11 teams) have completed the self- assessment process.
- We developed a responsive review process which allows a swift response to emerging risks. 1 service (4 teams) has been through the responsive review process.

In 2022/2023**We said****Use intelligence to address health inequalities**

We said we would review and expand the opportunity for identification of priorities and learning, through improving the ways we use our data sources and local intelligence. By gaining a better understanding of patient outcomes, we aim to further understand the health inequalities and actions needed to ensure we are able to support and impact the wider population health agenda.

We did

- Formed a Clinical Effectiveness and Outcomes Group to lead, support and report on activities related to clinical effectiveness, clinical audit and clinical outcomes in all areas within Locala.
- Became a key partner in the Kirklees Reducing Health Inequalities Hub along with other key partners within the Kirklees System as we acknowledge this workstream needs to be done as a system to impact the wider population
- Began developing a Community Champion role to speak to communities to hear and understand their needs to ensure we have the qualitative insights into population needs.
- Continued to report and monitor waiting lists for patients waiting who have a Learning Disability and prioritised accordingly.



Patient experience and engagement

All feedback, positive and negative, provides us with an opportunity to learn and improve our services for patients, their families and carers and our colleagues. We place high importance on hearing the voice of the community that we serve, and strive to act on it to continually improve care. We are proud that on average more than 95% of people responding to the Friends and Family survey said the Locala service was very good or good.

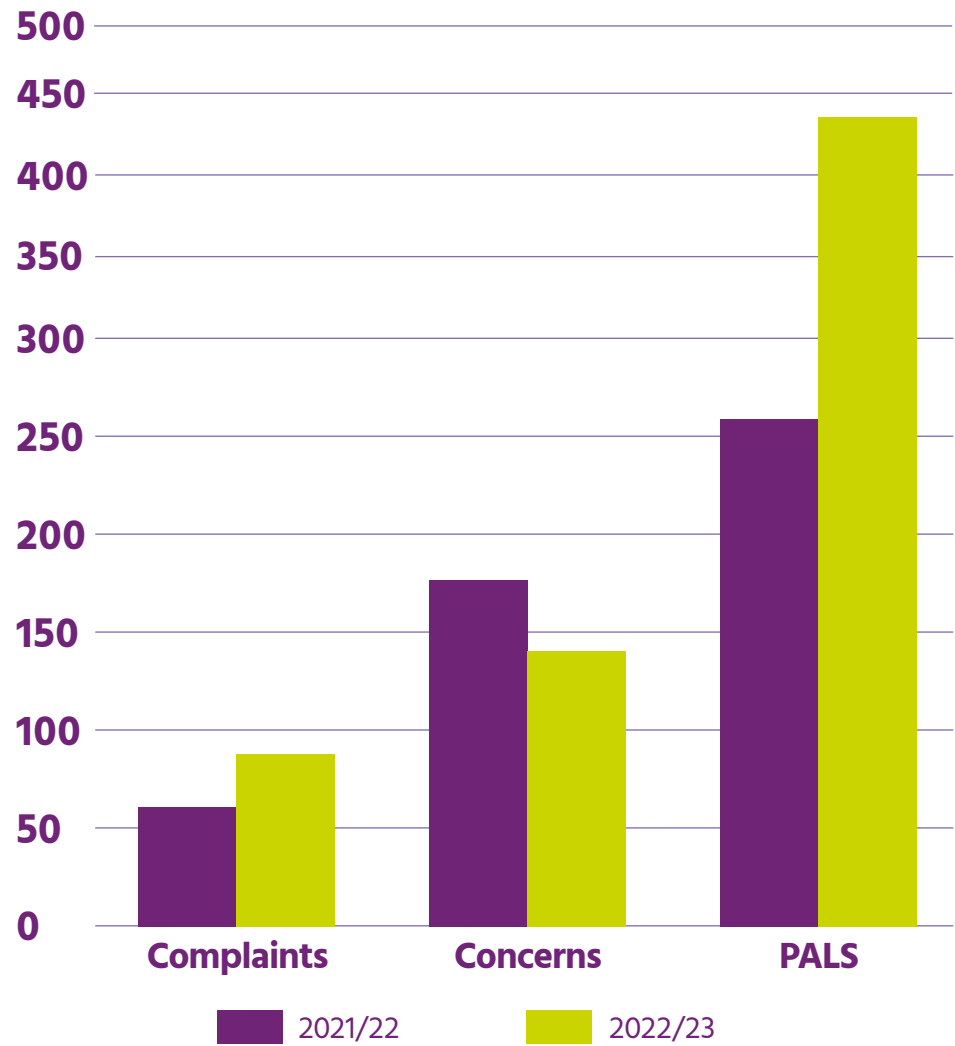
Complaints, Comments and Concerns

Locala encourages the early resolution of complaints, undertaking where necessary detailed investigation and conciliation.

Customer Liaison is an integral part of the Quality and Patient Safety Team and the work of the team continues to be monitored through the Director led “Patient & Carer Experience Group”. Learning from informal concerns or formal complaints are shared through a variety of mechanisms to improve practice across Locala.

The graph shows the number of enquiries received during 2022/23, broken down by complaints, concerns and Patient Advice and Liaison Service (PALS) enquiries. Cases received during 2021/22 are also shown for comparison. PALS cases are general enquiries that can usually be dealt with quickly (within 48 hours).

Comparison of types of case by year



There has been a slight increase in the number of complaints and slight reduction in the number of concerns compared to last year. The most marked change is in the increase in PALS received, up from 263 to 431.

The highest number of PALS enquiries have been received by Corporate Services, with the majority being related to receiving Parking Charge Notices (or fines) for non-payment of parking at Princess Royal Health Centre. Parking charges were suspended during the COVID pandemic and their reintroduction was not always realised by drivers. Parking Charge Notices have been rescinded in all cases where payment was not due. New signage and information in patient letters have been introduced to try and help avoid issues in future.

A number of PALS enquiries related to difficulties in callers getting through on the phone lines to Bradford and Kirklees sexual health services and the services are working with IT colleagues to improve the phone system.

The effects of the coronavirus pandemic have continued to have an impact on services throughout the year. The restrictions to services during the pandemic, while eased, have resulted in services having longer than usual waiting lists and waiting times for patients to be seen. The significant pressures on services seen during the pandemic have continued resulting in enquiries and concerns regarding care and treatment from affected patients.

Of all Locala services, Community Nursing Networks, Community Dental Service, Kirklees Sexual Health Service, Calder Community GP Practice and Podiatry had the highest number of complaints and concerns raised in 2022/23.



Community Nursing Networks

Community Nursing received the highest number of complaints and concerns during the year, although it is highlighted that they are the largest service in Locala. This equates to 0.03% of patient contacts resulting in a complaint or concern being raised.

The majority of concerns related to missed or deferred visits, (including not receiving a visit when expected). A Community Nursing Network Programme Board has been established to co-ordinate activities seeking to increase the number of community nurses and to ensure the skills of the workforce supporting CNNs are used effectively.

Community Dental Service

Complaints received have been on the theme of discharge of patients who do not meet the criteria for the service and patients waiting for teeth extracted under general anaesthetic.

Historically some patients were retained on caseload that did not meet the criteria for the service. Patients continue to be assessed at appointments against the service criteria and discharged if they no longer meet the criteria. While the aim is to see those patients who meet the criteria more quickly, complaints have been received from some of those patients discharged.

During the pandemic Locala was unable to access hospital operating theatres to carry out teeth extraction under general anaesthetic. While Locala has now gained limited access to theatres, the waiting list has led to complaints about the lack of appointments for this procedure. Unfortunately, this is outside of Locala's control.



Kirklees Integrated Sexual Health

A number of complaints related to difficulty calling the service on the phone, appointment availability and the attitude and behaviour of colleagues. It was identified that at certain times of day there were high numbers of callers leading to patients being on hold longer than usual. The service is working with IT colleagues and looking at improvements to the telephone system and recruitment is taking place to increase the number of clinicians.

Patient Experience

The following table shows the percentage of people said the service and care was very good or good through the year:

Month	Number of responses	Percentage of very good or good
April 2022	1849	97%
May 2022	1996	97%
June 2022	1960	96%
July 2022	1946	97%
August 2022	1792	95%
September 2022	1754	97%
October 2022	1240	93%
November 2022	1387	95%
December 2022	988	93%
January 2023	1404	95%
February 2023	1159	95%
March 2023	1371	94%



Our Engagement Team works with patients, carers and families to encourage them to share their experiences and to involve them in how we improve our services. They do this by capturing feedback using the Friends and Family Test (as above), surveys, focus groups, patient stories, Patient Participation Groups and telephone and face to face conversations including 'Waiting Room Roadshows'. The team also works closely with a range of community groups and networks, to ensure that we reach a diverse and representative cross section of the communities that we serve through our services.

Each Locala team has its own Engagement Champion and the team captured 33 patient stories in 2022-23. These patient stories are shared across Locala and with partners and stakeholders.

Equality, Diversity and Inclusion

The Engagement Team monitors Equality & Diversity data in patient feedback and the figures show we are listening to people that represent our local community. Last year Locala received an 'Achieving' grade in the Equality Delivery System (EDS2), a national programme for NHS commissioners and providers to ensure they are inclusive, fair and accessible to all.

In the year 90% of Locala services have completed an Equality Impact Assessment to ensure services are as accessible as they can be.

The Accessible Information Standard (AIS) was launched in 2016. It is a legal requirement that all organisations that provide NHS and/or publicly funded care follow the AIS. The aim is to make sure that people with a communication disability get information that they can access and understand, and any communication support that they need from health and care services. It covers the needs of people who are deaf, blind or who have a learning disability. This includes interpretation or translation for people whose first language is British Sign Language. It can also be used to support people who have aphasia, autism or a mental health condition which affects their ability to communicate. When appropriate, AIS also applies to their carers and parents. Locala has put a variety of processes and supporting documents in place for Locala colleagues to meet the AIS, and started running monthly training sessions in September 2022. So far 354 colleagues have attended. Colleagues are encouraged to adapt services as needed for example teams in both the Musculo Skeletal and Intermediate Care Beds introduced clear face masks to aid communication with patients who are hard of hearing.



Engagement activity

The Locala Engagement Team has undertaken more than 15 pieces of engagement work through the year, focussed on gaining a better understanding of the patient experience in our services, and working in partnership to make things better. This includes working with Unpaid Carers, patients and carers on an end of life pathway, children and young people. One example is in the Intermediate Care Bed service.

Intermediate Care Beds Insight Project

Supporting guests’ cultural and religious needs

Introduction

Feedback from guests about both Intermediate Care (IMC) bed bases is mainly very positive and by far the majority of guests say their experience is ‘Very good’ or ‘Good’. However, feedback from the discharge survey suggests that although many guests feel their cultural and religious needs are always respected, some do not. Furthermore, some guests told us that they were not asked about their cultural or religious needs during their stay.

Purpose of insight project

To understand what good practice already exists at both bases and to learn if there is more that can be done, to enhance the experience of all guests with cultural and religious needs.

This insight project was a joint initiative with Locala’s Intermediate Care team and Kirklees social care colleagues. The project was led by Locala’s Engagement Team.

What the feedback said

An anonymous feedback survey is used with guests prior to them leaving either bed base. Our IMC beds bases are Moorlands Grange at Netherton and Ings Grove at Mirfield.

Results between January 2022 and September 2022 captured feedback from 106 people. Participants were aged between the age groups of '25-34' and 'over 85', with 68% female and 32% male. Ethnic groups were reported by the 106 guests as follows:

- Asian or Asian British 3%
- Black or Black British 2%
- Mixed or multiple groups 0%
- White or White British 93%
- Any other ethnic group 2%

Of these 106 guests, 92 answered the following question:

Do you feel that your cultural and religious beliefs were respected?

Ings Grove			
Always	Most of time	Sometimes	Never
85.33%	10.67% 8	1.33% 1	2.67%

Moorlands Grange			
Always	Most of time	Sometimes	Never
58.82%	5.88%	0	35.29%

Our guests also told us:

“Hospital did not tell me anything about Ings Grove. I am a practising Catholic, never asked for any cultural needs met. Overall happy with care received.”

“Was never asked about my religion or beliefs. I have had no problems during my stay at Moorlands Grange.”

“I do belong to Church of England, however, this has never been factored into my stay in IMC.”

“My religious and cultural beliefs have never really come up.”

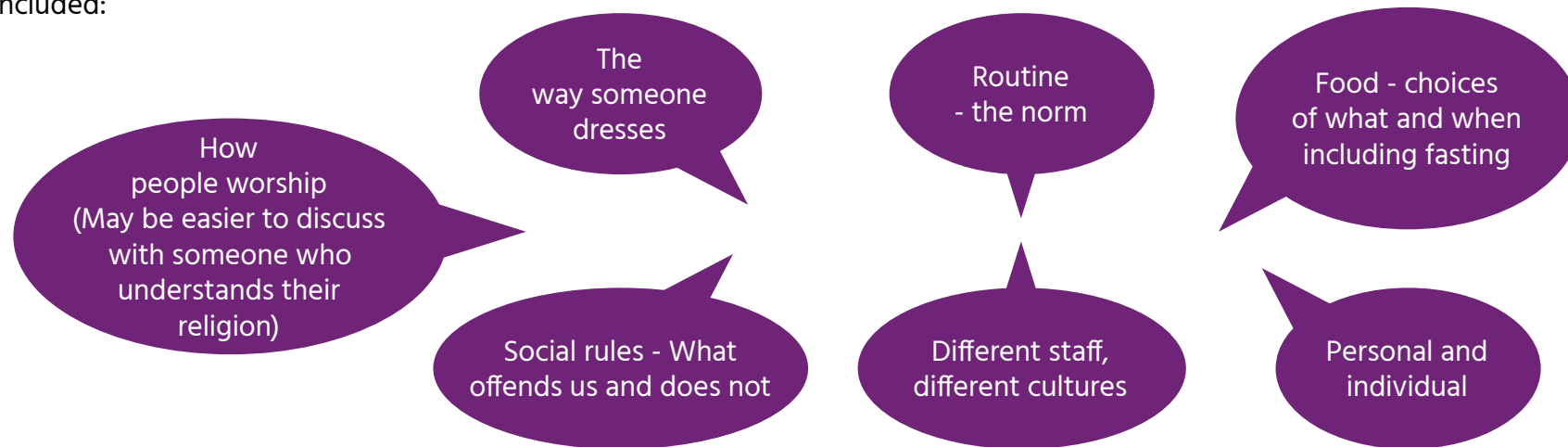
“I was never asked about my religion”

A guest who is a practicing Muslim explained she used a special stone called a tayyamum if she cannot wash before praying. Ideally, she would prefer to wash with a bowl of water but doesn't feel comfortable to ask the carers to help. She explained that a bidet shower spray would be ideal and that a 'bodna lota' vessel would also be valued. Wet wipes would be acceptable but not ideal. This guest said that she would like Halal food, but that vegetarian options would be a compromise. She also suggested a 'Do Not Disturb' sign on the door for prayer times and that night staff needed to be aware of prayer times as (fajr prayer) is before 6am and if people want to pray 'fajr namaz', they may need carers to get them up earlier.



Exploring cultural and religious beliefs

Feedback from guests about both Intermediate Care (IMC) bed bases is mainly very positive and by far the majority of guests say Colleagues based at both IMC bed bases were asked to consider what 'cultural and religious beliefs' means to them. Their thoughts included:



The team members were asked to consider what was already happening in the bed bases to support guest's cultural and religious needs. Examples listed were:

- Guest who wanted to fast had changes made to their care plan so that medication and food were given differently
- Female guests who do not want male colleagues to assist with personal cares are provided with female team members
- Halal meals can be purchased and ordered in
- Information is displayed in entrance regarding religious and cultural celebrations, for example Black History Month and Eid

Improvements following feedback

The IMC teams at Ings Grove and Moorlands Grange have worked together to bring about new ways to support guests' cultural and religious needs. This work is ongoing, as the team continue to have conversations with guests and colleagues about culture and religion. The team have a new confidence to facilitate these conversations and to continue learning. Following this work the following has been done:

- Moorlands Grange: a question has been added to care plan to ask if guest practices a religion and what needs do they have to support their faith whilst at IMC beds. The guest is asked if the team can let their usual place of worship know they are at the bed base
- Ings Grove: notices have been made to put on a guest's door to indicate the guest is praying and doesn't want to be disturbed
- Information sheet for guests produced, inviting them to identify any cultural or religious needs they may have, so that the team can support them (also translated into Urdu). Co-designed with Locala colleagues and Locala's Race Equality Network.
- Contacts made with local churches who will visit guests for prayer and worship, for example Baptist and Catholic. The churches have also provided leaflets for guests
- Costings completed for bidet attachments – for washing prior to prayer (wadhu). Will be considered in 4 bathrooms at Ings Grove in any future renovations
- 'Bodna lata' ordered and now available – for washing prior to prayer. See photo
- Advised by local scholar that any stone can become 'tayyamum' for cleansing prior to prayer. Storage in plastic bag on table is suitable
- Access to cultural or religious media – for example, Songs of Praise and other programmes on Smart TV in lounges, BBC Sounds App downloaded on tablet for guest's use
- Appropriate storage of guest's Holy Book or prayer book (needs to be kept flat, high up and adhere to wadhu – it is disrespectful if someone turns their back to the Holy book). On top of chest of drawers should be suitable – check with guest
- Local fish and chip shop found to use beef dripping, so alternative to be sourced for vegetarian guests (businesses identified)
- To add question on electronic care plan regarding cultural or religious support

Examples of changes made based on feedback

It can often be the seemingly simple things that make a big difference. We work hard to respond to feedback and ensure that it leads to improvements in our services. Here are some examples.

Thriving Kirklees and Public Health Early Years in Calderdale	
Feedback	Action taken
A letter about a young child had been addressed to 'Mum/Carer' and Dad felt discriminated against.	All letters changed to be addressed to Parent/Carer.
The results from a survey aimed at male parents made it clear that actions were needed to make men feel more included.	<p>Changes were made to the planned antenatal fayre to reflect feedback from the male inclusive survey.</p> <p>We are making changes to the availability of appointments, responding to feedback from men to offer services outside of the routine 9-5 appointments. This is also an improvement for working mums who can also find it hard to attend appointments in working hours.</p> <p>We have adapted antenatal and birth letters to be more inclusive to partners and other parents by taking up a suggestion that a respondent to a survey made suggesting the term "family appointments".</p> <p>We are running training on being male inclusive to support our teams to consider male inclusivity.</p>

Sexual Health

Feedback	Action taken
Patient told us that the waiting room was unwelcoming and that they would like to see some posters telling them what to expect.	Noticeboards have been put up with key information for patients, that also make the room look more inviting.
Patient commented "I was asked about my sexuality at reception."	If there is any missing information, patient now asked to complete a missing data form. Forms available at all receptions. In addition, to increase confidentiality, instead of asking patients to confirm their full address, patients asked to confirm the house number and postcode only.
Patients commented about lack of privacy in the Reception Area and that patients could be heard from the Waiting Room. Suggestion to play music to stop patients being overheard.	Music now played in the Waiting Area which has helped to stop patients being overheard in the Reception Area. Patients now commenting that they like the music and that it made them feel at ease whilst waiting.

Out-patient Dietetics

Feedback	Action taken
A patient felt that a letter sent to them by the service was "too harsh".	The letter template has been rewritten with guidance, so all patients now received the improved letter.
It was felt that the wording of the service details on the website regarding referral criteria was not appropriate.	The wording on the website has been reviewed and improved.

Learning Disability and Autism

We are committed to support enhanced care for people with learning disabilities, autistic people, and their carers. The NHS England Learning Disability Improvement Standards benchmarking data collection is used to identify improvement opportunities and to understand the overall quality of care across services for people with learning disabilities, autistic people, and their carers. We have assessed ourselves against these standards and Locala:

- Is able to evidence positive patient feedback from people with learning disabilities and autistic people which demonstrates involvement in decision making and maximised independence, utilising easy read patient surveys.
- Notes the requirements of “Ask Listen Do” and makes reasonable adjustments to the complaints processes for people with a learning disability or autistic people.
- Allows flagging and identification within the clinical record of autistic people, who do not also have a learning disability but who may similarly require reasonable adjustments.
- Is able to identify patient safety incidents involving people with a learning disability and autistic people to ensure incidents are reviewed and monitored for themes and trends. Risks and areas for improvement are identified and relevant learning is cascaded.
- Supports the involvement of volunteers trained in learning disabilities and autism in our Walk in Centre.
- Learning Disability and Autism Steering Group continues to ensure continued traction with the Learning Disabilities and Autism action plan. The Steering group includes membership from acute trust partners, self-advocacy services and internal colleagues.
- Includes The NHS England Learning Disability quality checker in our Clinical Accreditation process.
- Provides specialist supervision and advice to support operational services within clinical practice by the Learning Disability and Autism Lead.
- Has links with partner organisations including Mencap and Cloverleaf. Furthermore, there is representation from Mencap at Members’ Council.
- Continues to ensure that case studies related the care of people with learning disabilities and autistic people are presented to the board on a quarterly basis to ensure that the voices of people with lived experience are heard at a senior level.
- Reviews our waiting lists to prioritise patients with a Learning Disability or Autism or to ensure they are waiting safely.

Colleague feedback

Our colleagues are our greatest asset and we are committed to gathering their feedback. Colleagues were asked to give their thoughts on the following statements. Whilst we appreciate that there are improvements to be made, our colleagues are more positive across all domains in comparison to the national average results. The results of the survey and associated actions are monitored via our Caring for Colleagues Group.

Questions	Locala Dec 22	National NHS Staff Survey 2022 (Average)
I look forward to going to work	57%	52.6%
I am enthusiastic about my job	77%	66.9%
Time passes quickly when I am working	85%	72.1%
There are frequent opportunities for me to show initiative in my role	80%	72.9%
I am able to make improvements happen in my area of work	65%	54.3%
I am able to make suggestions to improve the work of my team/department	80%	70.9%
Care of patients/service users is Locala's top priority	80%	74%
If a friend or relative needed treatment, I would be happy with the standard of care provided by Locala	79%	62.9%
I would recommend Locala as a place to work	68%	57.4%

Freedom to Speak Up

The Freedom to Speak Up (FTSU) Guardian and Locala's Colleague Board member have visited several sites over the last 12 months to speak to colleagues to ensure they understand the role of the FTSU Guardian and the different ways they can raise concerns about Locala. Response to these visits has been good with colleagues reporting the direct accessibility as a driver to allowing them to speak up.

All FTSU Associates and members council representatives have now been trained in line with the National Guardians Office 'Training for Champions, Ambassadors and Associates.

The FTSU Guardian is involved with the Patient Safety Incident Response Framework implementation to ensure colleague concerns are considered in the development of our Patient Safety Incident Response Plan and to provide information to inform our safety culture, whilst maintaining individual's confidentiality.



Volunteers

As part of its ethos as a social enterprise, volunteers continue to be an integral part of the organisation, as they enable us to be more closely involved with communities, obtain feedback to improve patient experience and help to develop community cohesion.

Locala recruit volunteers from all sectors of the community, providing them with the opportunity to make a real difference to our patients, using their skills and talents, whilst building their confidence. Volunteering provides personal development and a sense of purpose for the volunteers themselves, and Locala values and benefits from the skills and knowledge that volunteers bring.

Following the Covid-19 pandemic, all volunteer roles were fully re-opened by the end of April 2022. Our aim is to build a volunteer population that reflects the diverse community we serve; targeting our recruitment at people from a variety of ages, ethnic backgrounds, employment status and language abilities.

- Number of Active Volunteer Roles: 18
- Number of Active Volunteers: 102
- Number of Volunteer Hours Filled: 380 per week

In June 2022, Locala was proud to be reaccredited with the Kirklees Volunteering Quality Award for the third time. This certificate is awarded to organisations to show that they involve volunteers in ways that have been agreed as good practice, which includes making sure volunteering is open to everyone, encouraging volunteers to develop their skills and offering support and supervision to active volunteers.



Colleague Volunteering Programme

Locala's Colleague Volunteering Programme has been running for almost two years. The programme continues to offer all colleagues up to 3 days per year, pro-rata, to carry out volunteering for the geographical areas in which Locala provides services.

We have continuously offered colleagues a wide range of opportunities to choose from and, as a result, around 60 colleagues have taken up the opportunity, fulfilling 586 hours of volunteering, assisting on boat trips, reducing social isolation, gardening and canal clearing to improve the local environment, stewarding at Junior Park runs, sorting school uniforms to help reduce inequalities and career/interview coaching.

Patient Safety

The total number of clinical incidents occurring in a Locala service reported in 2022/23 as was 1889. These include pressure ulcer related incidents. The table below shows those incidents by level of harm.

No harm	885	47%
Near Miss	37	2%
Psychological Harm	8	0.5%
Low Harm	828	44%
Moderate Harm	131	6.5%
Severe Harm	0	0%
Death	0	0%

Locala reported 15 Serious Incidents in 22/23, 12 of which were pressure ulcer related.

Locala strives to ensure that patients and, where appropriate, their carers or families, feel full included in any learning response following an incident. We encourage a personal approach to the inclusion of those affected by incidents and ensure their views are considered when undertaking and investigation. Learning is also shared with the family.

Infection Prevention and Control

Infection Prevention and Control (IPC) continues to be a key priority for Locala in the delivery of high quality, safe and effective care.

During 2022/23, our IPC team have supported our colleagues to deliver safe care by providing timely support and guidance, to respond to an increase in some viral infections this year, particularly invasive Group A Strep and Mpox (monkeypox) as well as an increase in the number of national safety alerts requiring urgent action.

Actions taken in response to changes to Covid-19 guidance

We have:

- Developed and updated the Covid-19 Business Assurance Framework to provide assurance to board that the organisation was meeting Covid-19 requirements.
- Actively reviewed and responded to changes in national Guidance to keep patients, service users and colleagues safe.
- Produced regular Covid-19 communication for all colleagues based on national IPC Guidance as well as benchmarking against regional healthcare organisations.
- Undertaken regular 'every contact counts' audits to monitor adherence to COVID-19 requirements in healthcare premises.
- Monitored adherence to PPE requirements and hand hygiene compliance
- Monitored Covid-19 outbreaks, leading on outbreak investigations in bed bases, clinical and non-clinical services
- Developed a respiratory screening template within the clinical record for colleagues to use prior to face-to-face contact with patients



Mpox (Monkeypox)

Mpox, previously called monkeypox, is a rare disease caused by the Mpox virus and is most commonly found in west or central Africa but has recently been linked to an increase in cases in the UK. As Mpox is caused by a virus similar to the one that causes smallpox, vaccines designed for smallpox are considered effective against Mpox.

Locala commenced vaccination in August 2022 in sexual health clinics for pre and post exposure cases of Mpox. It was also offered to frontline colleagues working in sexual health services.

Flu and Covid-19 vaccinations

Flu and Covid-19 vaccinations are an important way to help protect vulnerable patients and colleagues and help reduce pressures on health services, both in the community and unplanned admissions to hospital.

Flu and Covid-19 vaccinations are offered to all employees in Locala

For the first time, one of the quality indicators in the 2022 to 2023 Commissioning for Quality and Innovation (CQUIN) is a goal of vaccinating between 70% to 90% of staff against flu.

71.1% of Locala colleagues were vaccinated against flu.



Innovation and Improvement

Schwartz Rounds

Schwartz rounds provide a structured forum where all staff, clinical and non-clinical, can regularly come together to discuss the emotional and social aspects of working in healthcare.

The purpose of the rounds is to understand the challenges and rewards that are intrinsic to providing care, not solve problems or to focus on the clinical aspects of patient care. The underlying premise for rounds is that the compassion shown by staff can make all the difference to a patient's experience of care, but that in order to provide compassionate care, staff must in turn feel supported in their work.

Locala has a strong presence in the Kirklees and Calderdale Health and Wellbeing Schwartz rounds with 4 colleagues being active members of the steering group.

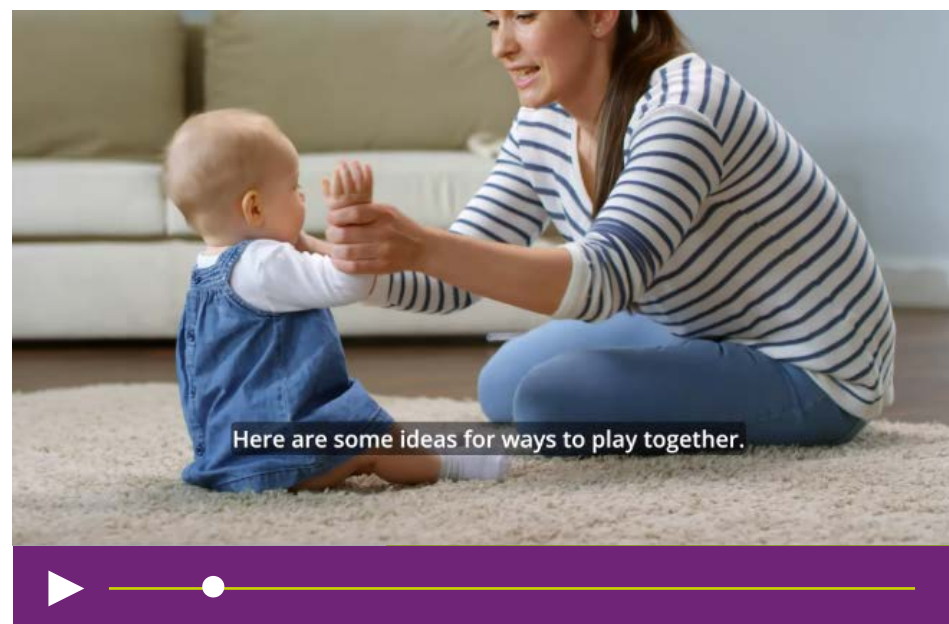
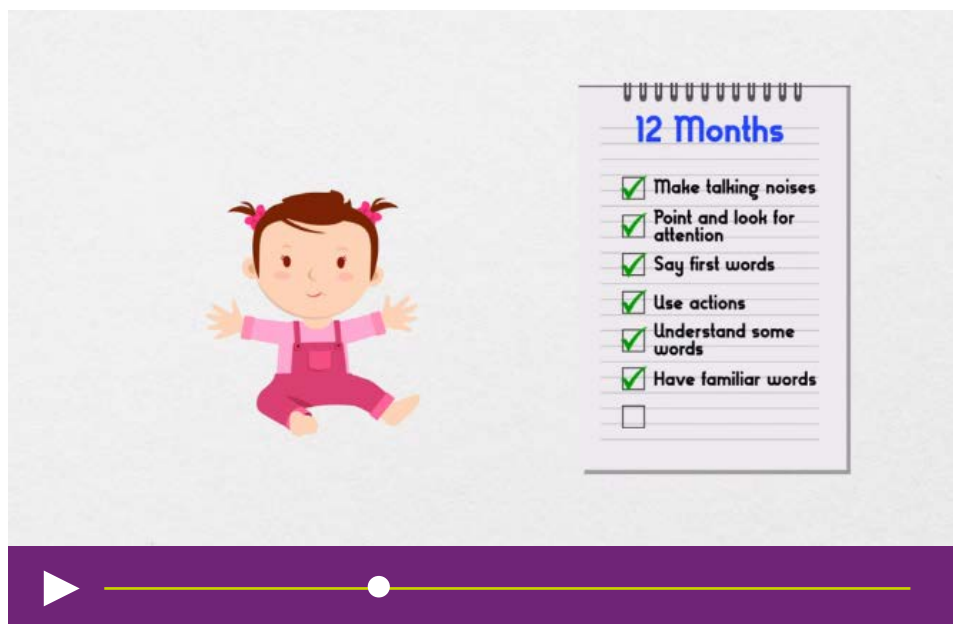
We currently have 3 Locala colleagues who have completed Level 1 Schwartz Round training, and one colleague undertaking the Level 2 training.

Recent feedback shows that:

- 95% of attendees plan to attend rounds again
- 100% of attendees would recommend the rounds to colleagues



Short film series to improve speech and language



As part of the Starting Well project (funded by the Department of Health and Social Care) an innovative series of short films has been created. Each of these films will be sent out to all families in Calderdale and Kirklees relevant to the age of their child with the aim of helping improve health literacy with parents and families around early speech and language development and how they, as parents, can support and encourage this. The series has been developed in partnership with Speech and Language Therapy colleagues in Locala and Calderdale and Huddersfield Foundation Trust and will be shared to other professionals working with families in Kirklees and Calderdale.

Whitehouse Centre

Our Whitehouse Centre is based in Huddersfield and is specifically for patients who may have difficulty accessing mainstream GP Practices such as people who are Homeless or Asylum Seekers. Clinical sessions have been established at an asylum seeker residence hotel. The hotel is in a geographical location which makes it difficult for individuals to attend the Whitehouse GP Practice which provides a service to this community. As many as eight patients per day were making appointments and all required a taxi.

Setting up a weekly clinic at the venue avoids having to transport numerous patients to the practice and ensures this vulnerable patient group gets the care it needs in a timely manner. Appointment requests are triaged to ensure any urgent requirements are not overlooked.

Childhood Immunisations

In recent years the number of parents who decline consent or return consent for their child's immunisations to be administered in schools had fallen. This led to the Immunisation team attending schools which have a low return rate of consent/decline forms submitted to carry out individual telephone discussions with the parents who have not consented. This method allows parents and pupils to ask questions and gain additional information regarding any queries they may have. Following this initiative, those returning forms that do not consent for immunisations has fallen from 224 to just 11 in the schools visited. A percentage improvement of 95%.

This initiative will continue in all schools where the return rate is below 70%. There is a benefit firstly to the pupils ensuring they are vaccinated but also to the community as it leads to a contagious infection not being spread because many people are immune, having had the vaccination.

Sexual Health

Our Kirklees and Bradford Sexual Health services have been successful in obtaining funding from UKSHA for "pop up" clinics to support vulnerable Gay and Bisexual men with vaccination against diseases of which they are more vulnerable (M Pox, HPV and Hepatitis), sexual health disease testing and prescribing of PREP (a drug which is taken before being exposed to HIV which enables the patient to block HIV if it enters the body).

Community Nursing Services

Locala's Community Nursing services are delivered across Kirklees to support patients who are 'housebound', i.e. those who are not able to leave their homes to attend clinical appointments to meet their personal needs. The specialist team of Nurses, Nurse Associates, Support Workers and Administrators ensure quality care is provided to meet the patient's individual needs. As part of our recent review of the service some positive improvements have been made to ensure specialist practitioners are available to support the diverse and complex patient needs. This includes the introduction of; lower leg wound care provided by specialist Podiatrists, Continence care delivered by Specialist Continence Nurses and Tissue Viability assessments conducted by specialist Tissue Viability Nurses. We have also set up some wound care and leg ulcer clinics, with supported transport for those who are able to attend, and the self-care service is currently in development with a dedicated team of nurses and coaches who will be supporting patients and carers to self-care where appropriate.

Virtual Ward

In 2022/23 the Virtual Ward was set up across Kirklees, Calderdale and Wakefield with Locala working in partnership with Calderdale and Huddersfield Foundation Trust and Mid-Yorkshire Acute Trusts. The aim of the Virtual Ward is to provide safe care in the patient's own home so as to avoid admission into the acute hospitals, or to facilitate earlier discharges for those patients where ongoing management can be provided with clinical and care support in their place of residence. The focus is currently on Frailty and Respiratory Patients.



Urgent Community Response (UCR)

Urgent Community Response is an Alliance model delivering care to patients in crisis facing a hospital admission. The Alliance consists of Locala, CURO Health (a GP federation), Local Care Direct and Kirklees Council. This partnership ensures responses and care are cohesive, facilitating personalised care through an MDT (multi-disciplinary team) approach at the resident's home, rather than in hospital. We know that many patients wish to remain at home where possible and that there can be problems for both patients and carers when they are admitted, therefore, when it is clinically safe to do so, these patients are managed at home.

During 2022, the ambition was to have a single point of access for urgent, out of hospital, same day care. To support this ambition, Locala's urgent response element of the START (Short Term Assessment Response Team) service was successfully integrated with UCR, enabling a more efficient point of access and a more diverse, multi-disciplinary workforce – which also increases service capacity. This has also created a more seamless route for urgent social care referrals via the same number.

UCR service was then merged into the existing multi-disciplinary Rapid Response, working in the community and in A&E / Frailty within Locala, with the latter linking in with existing Integrated Transfer of Care Team to increase support for patients discharged from hospital. This merge was designed to:

- Increase the number of crisis responses
- Ensure the most appropriate practitioner is deployed to meet the patients crisis needs
- Decrease reliance on GP call backs/time as access to Advanced Clinical Practitioners within service
- Reduce inappropriate hospital admissions
- Reduce ambulance conveyances
- Reduce inappropriate A&E attendances
- Provide holistic response to rapid/crisis care

Intermediate Care (IMC) Beds – transfer of care home

The IMC service provides physical rehabilitation and enablement by developing knowledge, skills, resilience and confidence for service users who are in a bed base, with a planned return home, for a period of up to 6 weeks. The IMC beds are available across Kirklees currently delivered within Ings Grove House or Moorlands Grange.

Kirklees ambition is to take a 'Home First' approach to care, understanding that patients recovery is more successful within their own home. As part of our approach to support patients to transfer home as soon as they are able to do so, improvements were made to the IMC bed services to reduce the Length of Stay for IMC bed patients, by introducing an outreach therapy model following a patients transfer home. The benefits of the change for the patient are to have the same standard of quality care in their own home as they do within the bedded setting.



Quality Improvement

At Locala, we are committed to being a sustainable organisation and constantly improving the care we provide. Our Quality Improvement (Qi) Priority, known as the Our Locala Way, focuses on creating a culture of continuous improvement. We want every member of our team to feel empowered to enhance the experience of our service users and patients every day. The Locala Way promotes a culture of Qi and coaching leadership across our organisation, giving colleagues of all levels the chance to come up with and test new ideas. These Qi priorities drive ongoing improvements within Locala, fostering a culture of learning, sharing successes, and celebrating our journey of improvement.

To encourage innovation and involvement, we have created the Bright Ideas Hub in 2022, an online platform where colleagues can submit improvement ideas, vote on existing ideas, and engage in discussions. This hub allows our colleagues to contribute their ideas, bring about positive change, and connect with each other to shape the future of Locala. We have received a total of 136 ideas from colleagues, with 31% already being put into action and another 31% progressing as individual projects. Twenty-two percentage of ideas were reviewed and assessed and were not able to be prioritised.

Despite the challenges posed by the second wave of COVID-19 and increased work pressures, we have conducted 11 Rapid Process Improvement Workshops (RPIWs) during 2022/23. These workshops bring together diverse team members, colleagues, and our valued customers/patients to address identified issues and challenges. The workshops encourage collaboration, generate innovative ideas, improve processes, and develop clear action plans for teams to implement. We follow up with review meetings at 30-60-90-180-day intervals to track progress, learn from our experiences, and make further improvements. The fundamental principle is for colleagues to work together in a joint effort, pooling their expertise and knowledge.

We provide a range of Qi training programs to our colleagues across Locala, helping them develop the skills and confidence needed for quality improvement. So far, approximately 818 colleagues have participated in Qi training sessions, including 314 colleagues in the 2022/23 period. Furthermore, we are proud to have certified 24 colleagues as Qi coaches after they completed a six-month training program and a work-based project.



In August 2022, we successfully completed a one-year Quality Improvement (Qi) programme for Oakland and Slaithwaite GP practices. The key aims of this Qi program were to streamline the service, improve the patient experience, and reduce variability in patient journeys. We aimed to address service pressures, enhance our digital technology utilization, and foster active engagement and ownership of Qi projects among all colleagues at the practices. A critical objective was to develop confidence and skills in Quality Improvement for a sustainable approach moving forward.

As part of this comprehensive programme, Locala delivered six bespoke Qi sessions, each 2.5 hours long. Two colleagues from the GP practices completed the Qi Coach certification program and were certified as Qi coaches in October 2022. The feedback received was overwhelmingly positive, which was a testament to the diligent efforts of the entire Qi team.

Our Quality Improvement Programme Plan for 2022-24 includes clear milestones, metrics, and expected outcomes. These elements allow us to measure our progress and engage in open discussions with our patients, service users, colleagues, members, and partner organisations. We value transparency and want to ensure that we are meeting our goals and making positive changes together.

At Locala, we take a proactive approach to risk management within our quality improvement programme. Rather than being reactive, we aim to identify and manage risks and seize opportunities. This proactive risk management, combined with critical analysis of our current position and a commitment to continuous learning, contributes to the successful implementation of our improvement programme.

People, processes, and effective ways of working are at the heart of successful transformation. Embracing digital technology is a vital aspect of quality improvement. People and technology play key roles in enabling us to make improvements. Recognising the potential of digital continuous improvement is essential in achieving our quality improvement goals. Given the successes achieved during the pandemic and recent technological advancements, we must integrate our improvement plans with digital opportunities to sustain the significant progress we have made. We understand that digital transformation and quality improvement must go hand in hand to achieve operational excellence, which is vital for our ongoing success. Locala has made investments in a digital transformation programme that will support the successful implementation of this quality improvement plan.

Through patient involvement, collaboration with partners, continuous learning and training, sustainability efforts, recognitions, case studies, and future goals, Locala demonstrates its unwavering commitment to quality improvement and digital innovation. These efforts contribute to enhancing patient experiences, improving outcomes, and shaping a sustainable and patient-centred healthcare organisation.

Section 4

4.1 Statements from our Stakeholders

4.1.1 Kirklees Health and Care Partnership

As commissioners of Locala community services delivered throughout Kirklees we welcome the opportunity to comment on the 2022/23 Locala Health and Wellbeing Quality Account.

To the best of our knowledge, we believe that the information provided in the account is accurate and has been fairly interpreted.

We are mindful that during 2022/23, Locala needed to instigate its escalation protocols under the Operational Pressures Escalation Levels Framework (OPEL), due to unprecedented service demand and workforce pressures, which was also experienced across the health care system. This impacted significantly on Community Nursing Services and waiting times for a range of Locala services. This resulted in periods where service delivery had to be prioritised daily to ensure care was provided to patients who were at the highest and most urgent risk, which meant some patients experienced delays in their care. Throughout this period, safety of patients and the management of risk remained the first priority of all services. Locala's focus on maintaining patient safety is reflected in its ongoing programme to improve standards, to learn from events impacting on the safety of service users, and to build innovative ways of working in partnership with partner organisations.

We recognise the phenomenal challenge faced by Locala and all healthcare providers throughout the past year, to meet the ever-increasing demand placed on services. We would like to take this opportunity to thank all Locala colleagues for their hard work and commitment in continuing to provide healthcare services to the residents of Kirklees.

We are pleased to see initiatives to support staff being highlighted in the account, including the success of Schwartz rounds, and mechanisms to support staff and raise concerns through Freedom to Speak Up and Caring for Colleagues. We will continue to seek feedback on the further developments to support staff in the coming year.

Clinical audit and research activity needed to be reduced in 2022/23 in line with national guidance, but we commend Locala for maintaining its involvement in audit and research and development as described in the account, and its commitment to act on findings from these to promote best practice and clinically effective care.

Whilst complaints have increased, the account describes how Locala has responded to these for individuals and to improve services for future service users. The high percentage of people saying their care was very good or good via the Friends and Family Test throughout the year is positive, and the continued commitment to engagement using a broad spectrum of approaches and acting on feedback is to be commended.

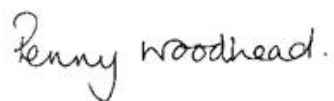
There has been an increase in clinical incidents reported from 1688 in 2021/22 to 1889 in 2022/23. However there has been a decrease in the percentage of those leading to moderate harm, and none reported as leading to severe harm or death. We wish to highlight that the account does not fully reflect the sophistication of investigation, analysis, learning and implementation of actions, and the developing approaches we know have been adopted by Locala to examine the interrelationships between types of incidents and shared contributory factors, and the progress made to implement the new NHS Patient Safety Incident Response Framework. These developments are fundamental to learning and improving patient safety further going forward and we welcome the continued commitment to this work.

We congratulate Locala on its achievements in 2022/23 and being able to progress its priorities during a period of sustained pressure on services and staff.

We support the key quality priorities identified for 2023/24 which focus on culture, collaboration and system working, and innovation, which are all essential to underpin safe and effective health care now and for the future and build these on the work programme from 2022/23. Last year we asked for more information surrounding future priorities and welcome the inclusion of the reasons for choosing this year's priorities and the actions planned to meet these.

We look forward to continuing to work with Locala as a key partner in Kirklees Health and Care Partnership in the coming year.

Yours sincerely



Penny Woodhead

Director of Nursing and Quality

Kirklees Health and Care Partnership

NHS West Yorkshire Integrated Care Board

4.2 How to provide feedback on this Quality Account

If you would like to request a copy of this document in an alternative format or other language, or if you have any queries about its content please contact our Head of Quality and Patient Safety: Tel: 0303 003 4529 or email: gemma.fowler@locala.org.uk

This report is also available at www.locala.org.uk

Glossary

After Action Reviews - a method of evaluation that is used when outcomes of an activity or event, have been particularly successful or unsuccessful. It aims to capture learning from these tasks to avoid failure and promote success for the future.

Business Unit – Locala services are grouped into one of two management units, known internally as Business Units.

Colleague Board Member – a Locala colleague who sits on Locala's Board of Directors, ensuring the colleague voice is represented.

Clinical incidents - An event or circumstance resulting from health care provision (or lack thereof) which could have or did lead to unintended or unnecessary physical or psychological harm to a patient.

Engagement Team – This is the team within Locala responsible for gathering and sharing patient experience information, and engaging patients, carers and families in ensuring services are as good as they can be.

Engagement Champion – Each Locala service has a nominated ambassador for patient experience and wider patient engagement.

Equality Delivery System (EDS2) - The Equality Delivery System (EDS) is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments, free of discrimination, for those who work in the NHS, while meeting the requirements of the Equality Act 2010.

Equality Impact Assessment - An Equality Impact Assessment (EIA) is a tool that helps us to place equality, diversity, cohesion, and integration at the heart of everything we do and make sure our strategies, policies, services and functions do what they are intended to do and for everybody.

Focus groups - A group of people assembled to participate in a discussion about a product before it is launched, or to provide feedback.

Freedom to Speak Up – An initiative to ensure colleagues feel able to speak up about anything that gets in the way of doing a great job. Freedom to Speak Up Guardians support workers to speak up when they feel that they are unable to in other ways. There are nearly 700 Freedom to Speak Up Guardians in the NHS and independent sector organisations, national bodies and elsewhere.

Friends and Family Test - An important feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience.

Hand hygiene compliance – The proportion of observed hand hygiene opportunities that resulted in ‘hand rubbing with ABHR solution’ or ‘handwashing with water and soap’.

Immunisations - The process of giving a vaccine to a person to protect them against disease.

Intermediate Care Beds - Provided to patients, usually older people, after leaving hospital or when they are at risk of being sent to hospital. Intermediate care helps people to avoid going into hospital or residential care unnecessarily.

Infection Prevention and Control (IPC) – Infection prevention and control (IPC) is a practical, evidence-based approach preventing patients and health workers from being harmed by avoidable infections.

Kirklees Volunteering Quality Award – Recognises good practice in volunteer management. Where you see this, you will know that the organisation values their volunteers and offers a high-quality volunteering experience.

National Guidance - Support for those who make decisions concerning the allocation of resources within health and medical care and social services. The goal of these guidelines is to contribute towards patients and clients receiving a high standard of medical care and social services.

National IPC Guidance - A new education framework on infection prevention and control (IPC). It sets out a vision for the design and delivery of IPC education for our people that support effective and safe care.

National Safety Alerts – Issued when there is a specific safety issue that without immediate action being taken could result in a serious or fatal injury.

Nurse Associate - A nursing associate is a member of the nursing team in England that helps bridge the gap between health and care assistants and registered nurses.

Patient Safety Partners – A role that patients, carers and other lay people can play in supporting and contributing to a healthcare organisation's governance and management processes for patient safety.

PPE - Personal protective equipment (PPE) at work.

Pressure ulcer – Damage caused to the skin and the tissue below when it is placed under enough pressure to stop the blood flowing.

PSIRF Published in September 2022, the PSIRF sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety.

Quality indicators - Quality indicators are measurable, objective, quantitative measures of key system elements performance. They indicate the extent up to which a certain system meets the needs and expectations of the customers.

Stakeholders - A stakeholder is a person, group or organization with a vested interest, or stake, in the decision-making and activities of a business, organization or project.

The Accessible Information Standard (AIS) - Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. It is now the law for the NHS and adult social care services to comply with AIS.

The NHS England Learning Disability Improvement Standards - The standards are intended to help organisations measure quality of service and ensure consistency across the NHS in how we approach and treat people with learning disabilities, autism, or both.

UKHSA – The UK Health Security Agency

Quality Account 2022/23

Locala
Health & Wellbeing

Locala Community Partnerships CiC
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