

Quality Account 2024/25



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:

Section one

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

Section two

- Priorities for improvement – this section looks ahead and identifies our three priority areas for improving the quality of our services for 2025/26, why we have chosen these priorities, and how we are going to develop the capacity and capability to achieve them.
- The review of our quality priorities and performance in 2024/25.
- Mandatory statements relating to the quality of our services, as set out in the Quality Accounts Regulations 2010.

Section three

- Examples to illustrate ongoing improvement in our services.

Section four

- Statements from our partners.

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

Section 1

Statement from

Karen Jackson, Chief Executive



As always, I am incredibly proud of all the amazing work that our colleagues have achieved over the last year. During a time of change, we have never wavered from our absolute commitment to our quality and safety priorities, and we can only do that with the investment in and engagement of our colleagues.

The aim to support our patients to thrive through our personalisation agenda shines in our Self Care Team. This team earned our first platinum accreditation status (100% score following review). The difference they are making to people's lives is truly remarkable.

I know we will continue to provide high quality services to our clients in the year ahead. Ensuring safety and quality of our services is critical and I know this is what motivates our colleagues every day.

Looking forward, we will continue to be part of our integrated neighbourhood partnerships in both the statutory sector and beyond to support people to thrive where they live.

Karen Jackson

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Statement from

Colin Lynch, Chair



This Quality Account I believe illustrates a deeply impressive degree of high-performance patient and client care, innovation and impact. In what has been a year of significant change and evolution for us – change that makes us so much more able to deliver sustainable top-quality care for our communities under our THRIVE strategy - the number and breadth of our services that provide top-quality care and make that positive impact is genuinely inspirational. What all our colleagues do at Locala on a daily basis – and in whichever role, from our most senior managers and clinicians to our newest trainees - truly matters to people.

Whilst we begin to realise our THRIVE ambitions for the benefit of those communities, this Quality Account makes the case again – if any case needed to be made – for the importance of our aspiration to continually improve the quality, impact and value of all services that we provide. It's also abundantly clear to me that having a priority focus on looking after and developing our colleagues, to the best of our ability in Locala, is fundamental to delivering on that aspiration.

Throughout this year's Account, there are several examples of our work in communities where we start to make a positive impact on reducing health inequalities and provide impactful personalised care to our patients in their own environments. I say 'start' in relation to health inequalities because there is so much more that we want to and will do, to become that embedded, strategic partner bringing greater equity and health benefits to people in West Yorkshire and Greater Manchester.

In 2025/26, it's likely that we'll see the emergence across the country of more focus on neighbourhood health and care and evolving forms of broader, place-based service provider partnerships. This gives us so much in the way of opportunity – through being a continued and committed leader in partnership working, as well as through our excellence of service in all that we do – to realise our THRIVE ambitions for the benefit of our communities.

Thank you to each and every colleague, those who support them, our volunteers, partner agencies, and our patients and their loved ones. And please...

Be Caring, Be Ambitious, Be Part Of It.

Colin Lynch

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Section 2

Priorities for Improvement

Locala's organisational strategy, THRIVE, and business plan sets out our strategic objectives for the year ahead, 2025/26.

The three-year 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.



We will ensure exemplary quality of care in everything we do by focussing on better care every day:

Central to this will be:

- To continue to develop a “safety through learning” culture.
- To be a trauma-informed organisation.
- To deliver accessible, inclusive and responsive services.
- To embed innovation to the core of how we design, develop and deliver services.



Within our other THRIVE pillars, we support the quality agenda in the following ways:

1. We will empower our colleagues, ensuring our increasingly diverse workforce is the most inclusive and engaged of any community health and care provider in the areas we serve.

To achieve this, we will:

- Equip all managers to live up to expectations of a 'Locala Leader'.
- Support development opportunities for all our colleagues.
- Invest in developing our workforce pipeline and significantly increase the diversity of our senior leadership.
- Create a culture of belonging.
- Be an anti-discriminatory organisation.
- Significantly improve the productivity of our clinical and support services, including implementation of our digital interventions that support patient delivery.

2. We will expand our reach to serve more communities, embedding Locala as a leading provider of health and care services across West Yorkshire and Greater Manchester, and tackling the causes of health inequalities.

Our priorities within this are to:

- Reduce health inequalities through targeted action for priority groups, bringing together existing data and activity, coordinated by a dedicated multi-disciplinary team.
- Develop and build self-funded services, complementing and supporting our existing provision, building on our expertise. Generated returns will then help to enhance our social value offer to our communities.
- Become a stronger alliance partner within West Yorkshire, delivering existing contracts and proactively seeking opportunities for greater integration.
- Treble the scale of our publicly funded services in Greater Manchester through tenders and partnerships, and a dedicated local team.

Our Achievements This Year 2024/2025

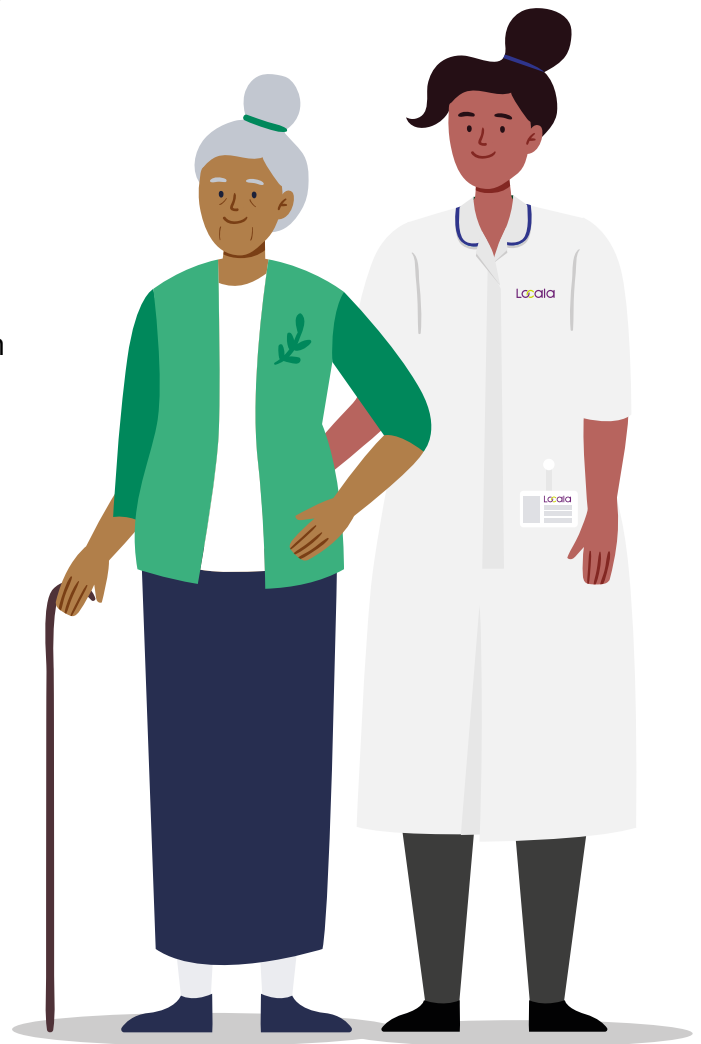
Better care everyday

We said:

- We would develop a “safety through learning” culture.
- Be a trauma-informed organisation.
- Deliver accessible, inclusive and responsive services.
- Embed innovation to the core of how we design, develop and deliver services.

We did:

- Redesigned and mobilised new ways of working. These new ways ensure parity of focus in how we work, support, manage and lead our teams, dynamically balancing operational service focus with a continuous focus on quality and professionals.
- Met our set KPIs for shared learning across the organisation and launched our Locala Learns working group to develop a digital learning solution.
- Appointed a Lead for Trauma-Informed Care and benchmarked our colleagues’ awareness of this topic.
- Continued to develop our understanding of data on patient demographics to inform our improvements in health inequalities.
- Continued to embed digital solutions through our Clinical Safety Officer role.



Empower our colleagues

We said:

- We would equip all managers to live up to expectations of a 'Locala Leader'.
- Invest in developing our workforce pipeline and significantly increase the diversity of our senior leadership.
- Create a culture of belonging.
- Be an anti-discriminatory organisation.
- Develop our business intelligence capabilities to ensure the business can monitor performance, and decisions are informed, providing assurance to the Board on key strategic issues.
- Significantly improve the productivity of our clinical and support services, including implementation of our digital interventions that support patient delivery.
- Ensure our governance is the most effective it can be.

We did:

- Completed 10 cohorts of the Locala LEAD programme.
- Introduced psychologically safe spaces to understand 'work as done' to inform our learning.
- Redesign the structure of the organisation to support 'professionals' throughout the organisation with routes into practice.
- Developed our support for next generation leadership through our fellowship programme.
- Supported colleagues into further education on Queens Nurse Institute Courses, NHSE Nurse equity programmes and Trauma-Informed courses.



Serve More Communities

We said:

- We would reduce health inequalities through targeted action for priority groups, bringing together existing data and activity, coordinated by a dedicated multi-disciplinary team.
- Develop and build self-funded services, complementing our existing provision, building on our expertise.
- Become a stronger alliance partner within West Yorkshire, delivering existing contracts and proactively seeking opportunities for greater integration.
- Treble the scale of our publicly funded services in Greater Manchester through tenders and partnerships and a dedicated local team.

We did:

- Appointed Inclusivity Leads to ensure we understand health inequality and reduce the impact on our communities.
- Developed and built self-funded services, complementing our existing provision, building on our expertise.
- Became a stronger alliance partner within West Yorkshire, delivering existing contracts and proactively seeking opportunities for greater integration.
- Trebled the scale of our publicly funded services in Greater Manchester through tenders and partnerships and a dedicated local team.
- Successfully delivered several initiatives that have improved health outcomes and enhanced the experience of people with learning disabilities and autistic individuals.
- Identified four key population groups for whom we are dedicated to levelling up their experience and outcomes.
- Utilised the clinical van to ensure we reach the most vulnerable cohorts of patients in all our geographical areas.



Clinical Effectiveness of our Services

Participation in clinical audits

Local Audit

During 2024/25 Locala undertook 22 clinical audits which informed a number of actions taken to improve the quality of care received:

Audit info
Resuscitation Audit To provide additional assurance after audit (2324COR005) during 2023/34 that risk 3393 (Limited assurance that resuscitation equipment is being checked in line with policy) has been fully addressed. To provide assurance that resuscitation equipment throughout Locala is safe to use. To confirm that, daily and weekly checks are being correctly completed.
Key Findings
2023/24 audit showed that 52% of sites had acceptable recordings of checks being completed at the start of the year, increasing to 83% after the reaudit was completed and site visits were undertaken to support with compliance. 2024/25 all sites had good evidence of the daily checks being completed, however further assurance is required of the quality of the checks as some machines were found to have their pads detached and others were out of their service date.
Key Recommendations
An interim audit on equipment to be completed in January 2025. This was completed in January 2025 and provided assurance that quality of checks meets the Locala standard.
Impact on Patients/Colleagues
Essential to ensure that Locala has the right resuscitation equipment ready for use at all times, to provide the best chances of a positive outcome for patients and colleagues in the event of a cardio-respiratory arrest.

Audit info

Podiatric Day Surgery Audit

To provide assurance that the Podiatric Day Surgery Unit's Patient group directions (PGDs) are aligned to the legal framework that allows the supply and/or administration of a specified medicine(s). To provide assurance that this is undertaken by a named, authorised, registered health professional, to a pre-defined group of patients needing prophylaxis or treatment for a condition described in the PGD (without the need for a prescription or an instruction from a prescriber).

To provide assurance that administration and supply of controlled drugs meet the requirements of Locala's Patient group directions (PGDs) Policy, and therefore the Human Medicines Regulations (2012).

To provide assurance that all PGDs are signed and fit for purpose.

Key Findings

2024/25 audit demonstrates that the administration and supply of controlled drugs (CDs) under Patient Group Direction (PGD) met the key standards, and that relevant checks were in place to support this.

The audit found that colleagues had only recently started to use the correct SystmOne template for the supply or administration of medicines under PGD, and the team are committed to embedding this in future practice to ensure the correct details are always captured.

There was an occasion on which supply was booked out prematurely and then booked back in when surgery was declined. Booking medicines out at the point of administration/supply would reduce the risk of balance errors and stock discrepancies.

A booklet for medications administered/supplied printed within the Podiatric Surgery states a range of medication doses. It is recommended to align the wording of this to the current PGD.

Key Recommendations

To align the wording in the Podiatric Surgery Booklet with current PGDs and submit to Medicines Optimisation Group for approval.

Issue medicines using the PGD function in SystmOne to ensure all that relevant details are captured accurately.

Impact on Patients/Colleagues

Provides assurance that the following requirements are met:

Locala's Medicines Policy

Policy for the Development, Approval and Implementation of Patient Group Directions (PGDs) v8.1

PGD 96 V7 Codeine 30MG Tablet

PGD 95 V6 Diazepam 10MG Tablet

Appendix 5- Auditing PGD Use within your Service.

Audit info

Safeguarding Team

To provide assurance that all information recorded by Front Door Practitioners is necessary, proportionate, relevant, accurate, shared timely and securely, and documented in child/young person's health record in line with the 7 golden rules (HM Gov 2018).

The Kirklees Front door information sharing Protocol (2023) recognises that information viewed alone or in siloes is unlikely to give the full picture or identify the risk, therefore raises the importance of timely multi-agency communication between partners to identify children and young people who are subject to or at risk of harm.

Key Findings

2024/25 audit demonstrated 100% of records evidenced that information is shared in line with the 7 golden rules (HM GOV 2018).

100% Front door practitioners are recording information appropriately in Daily Risk Assessment Management Meeting (DRAMM) and Strategy meeting templates, providing assurance that information is stored correctly and Locala colleagues can review.

The audit found that the safeguarding node was updated in 100% of cases. The safeguarding node alerts health professionals to any significant safeguarding issues, for example, if a child is subject to a child protection plan.

The audit found that the main body of records indicated a clear understanding of the significant adults in the life of the child.

It was also identified that documentation of groups and relationships and specific details regarding the nature of relationships and contact, particularly with fathers/significant males, required improvement.

Key Recommendations

1. To add a prompt on SystmOne Daily Risk Assessment Management Meeting (DRAMM) and Strategy templates to remind colleagues to document the reason why consent has been overridden.
2. To add a prompt on SystmOne to remind colleagues to update groups and relationships when attending DRAMM and Strategy meetings.
3. To attend the front door team meeting to share the results of the audit to ascertain if current processes need to be updated and refined.
4. To re-distribute Locala's Safeguarding Children and Child Protection Policy (2022), Locala Domestic Abuse Policy (2021) and Locala SystmOne training Guide (2021) to ensure Front door practitioners are aware.
5. To re-circulate 30-minute briefings on: "Think Family", "Professional Curiosity", "Working Effectively with Father's and Men to Safeguard Children" to refresh awareness of the importance of good documentation around groups and relationships.
6. For a larger peer audit to be completed by front door practitioners to ascertain if learning and recommendations (from this audit) has been embedded into practice.
7. To explore if GP's need or want to be informed if their information is shared in DRAMM.

Impact on Patients/Colleagues

1. Children and families are assured that Locala colleagues working in the Front Door are sharing proportionate and relevant information in line with the 7 golden rules (HM GOV 2018)
2. Children and families are assured that Locala colleagues working in the Front Door are attending multi-agency meetings and making an active contribution to protect children and young people from actual or potential harm.
3. Children and families are assured that recommendations to improve practice will be implemented in collaboration with practitioner representation from the Front Door.
4. Colleagues will be supported to implement effective change.

Audit info

6-8 week contact and weigh clinic

To provide assurance that babies are being weighed appropriately to identify risk of faltering growth.

To ensure practitioners were adhering to the process and resource was appropriately targeted to families of higher need or where there were any concerns.

The 0-19 service is commissioned to deliver the 6-8 week contact for universal families via telephone. This means a physical examination of the baby including feeding assessment and growth cannot be completed at this visit. A decision is made at the new birth home visit whether the 6-8 week review can be carried out via telephone or whether the family require further face to face intervention.

The family's GP also completes a 6-8 week medical review of both mother and baby.

Key Findings

The audit informed us that 22% of babies were not being weighed either by the 0-19 team or their GP.

Alongside this, there were incidents reported in service where faltering growth had not been identified as a result of growth not being appropriately assessed (these were identified through parents bringing babies into clinics or contacting the service for infant feeding support).

A risk was logged on the risk register to capture this gap.

Key Recommendations

To set up across the Kirklees locality for baby weighing prior to the 6-8 week call.

For the caseload holder Health Visitor to book babies (who do not require home visits) into a clinic for when the baby is around 4-5 weeks old. This means the Health Visitor can review growth ahead of the planned telephone contact and assess whether further intervention is required.

Introduce a video call function so the Health Visitor can see mother and baby, observe feeding and give advice on skin rashes or other visible conditions.

Impact on Patients/Colleagues

Essential to ensure that babies are monitored appropriately for faltering growth, and that any cause for concern is identified early.

National Audit

The reports of 7 national clinical audits were reviewed by the provider in 2024/25. Below is an example of actions to improve the quality of healthcare provided by Locala.

National Audit	Recommendations for Locala
National Paediatric Diabetes Audit 2024	<p>Recommendation 1: Ensuring families are educated on diabetic ketoacidosis (DKA). A workbook is provided at diagnosis and explained. Annual checks are then undertaken to help manage the condition. This also allows an opportunity to discuss pump therapy.</p> <p>Recommendation 2: Families should have 24hr access to advice from a paediatric diabetes expert. The workbook provided includes a dedicated 24/7 phone line which can be accessed. This is also discussed with the family. The number is also given out at every multidisciplinary team clinic.</p> <p>Recommendation 3: All newly diagnosed children and young people and their parents and carers should be provided with a full multidisciplinary team support, including a diabetes psychologist. All patients are referred to MHT psychology at diagnosis. They also have an annual wellbeing assessment to see if they need a referral. Families are told they can also be asked to be referred at any time. They also have access to specialist Doctor, Nurse and Dietitian.</p> <p>Recommendation 4: Diabetes technologies (i.e. insulin pumps, continuous glucose monitors etc) should be offered to all children and young people with diabetes in England and Wales). We offer hybrid closed loop therapy approximately 3-4 months post diagnosis.</p> <p>Recommendation 5: Paediatric diabetes teams should be provided with the skills and training to ask family about financial challenges. We encourage families to apply for Disability Living Allowance, we also provide letters of support for this and Personal Independence Payments. Colleagues have been on poverty proofing training and look to support and signpost to food banks or other services.</p> <p>Recommendation 6: Paediatric diabetes units to be aware of disrupted sleep post-diagnosis and psych support offered where needed. Families are referred to psychology at diagnosis. We put patients on sensors from diagnosis to help parents to 'follow' glucose levels and start hybrid closed loop pumps within 3-4 months of diagnosis.</p> <p>Recommendation 7: Does the diabetes team ensure staff at patient's school/college have the necessary information about their diabetes? – every child/young person has a school care plan. We also offer a monthly virtual school training to any school requiring this.</p> <p>Recommendation 8: There should be a positive relationship with the diabetes team. The engagement team contact families every 3 months to gain feedback which has been 100% positive.</p>

Research and Development

Developing research capability and capacity has been a key focus over past year, to position Locala as an active partner in community research and the continuing development of research to be everyone's business:

Our aims continue to:

- Encourage a positive research culture and a workforce who are interested in research to improve outcomes for our communities.
- Ensure that everyone understands that research is part of all our jobs.
- Inspire a curious workforce who look to research and other evidence to solve problems and improve things.

This will be achieved through:

- The Thrive Strategy which includes a research focus.
- The Locala Research Strategy 2024-2027.
- Promoting the quality, quantity and breadth of research undertaken within Locala.
- Influencing the national research agenda to better meet the needs of community services.
- Co-ordinating and developing the Locala research workforce across all services.

Development of the Locala Research Framework continues to support colleagues to get involved through the stages below:



Over the past year colleagues have been able to directly participate in 9 studies, including a mix of research stakeholder groups/joint working projects, and colleague research studies. The Nursing and AHP Fellowship Programme has gained momentum, with 3 successful projects concluded, and we are now looking to recruit into next year's programme. A new Research Manager post has also been developed to support the ongoing research agenda and to oversee the Nursing and AHP Fellowship Programme.

Key Achievements:

1. Locala research database now in place.
2. Research data asset register now in place.
3. Locala recently registered as an independent research site (for the purposes of access to portfolio studies and independent receipt of accruals).
4. Research Governance Officer completing M(Clin)Res in Clinical Research.
5. Nine colleagues in 0-19 Service have recently completed GCP (Good Clinical Practice) training prior to undertaking research roles as part of Surviving Crying study.
6. Participation in the ComBAT randomised control trial in 2024 with successful achievement of recruitment target.
7. National Institute for Health and Care Research (NIHR) Associate Principal Investigator training has been completed, and opportunities have been taken up by colleagues in research intervention delivery.
8. NIHR Senior Research Leader role is now in Locala, projects include:
 - Evaluation of nursing research capacity and capabilities at organisational level to be carried out using the SORT (Self-Assessment of Organisational Readiness Tool).
 - Expansion of 0-19 Research & Innovation Group into other nursing divisions.
9. Increasing number of colleagues taking part in independent research projects, stakeholder events and other research engagement activities.



Data quality

We accept responsibility for providing good quality information to support effective patient care, and comply with the National Data Guardian's 10 standards for good information security and records management. We are supported by our Executive Director of Services and Professionals who is our designated Caldicott Guardian, and our Director of Risk and Governance who is the Senior Information Risk Owner. The majority of our services continue to use the electronic record keeping system, SystmOne. This provides a single information and electronic record keeping platform 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 currently uses Dentally. Both are specialised electronic systems. This system and SystmOne have been fully encrypted.

The Data Security and Protection Toolkit (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 2024/25, we completed and submitted our self-assessment against the DSPT. Our evidence was externally reviewed by our internal auditors. This independent assessment confirmed that we had achieved full compliance against 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 we assess our data using these criteria in our monthly Integrated Performance Report to Locala's board.



Section 3

Patient experience and engagement

Patient experience and involvement

Locala's Engagement & Involvement Team work with patients, carers, families and the wider community to encourage people to share their experiences about the care they have received. They also involve people in how we improve the quality of our services and plan for the future.

To capture feedback we use surveys, focus groups, patient stories, telephone interviews and have face-to-face conversations in health centres, at community events and community group meetings. Involving local community groups, our partners and our members is important to ensure we reach a diverse and representative cross section of the community. In 2024/25 we had over 15,000 responses to surveys, with 97% of patients, carers and families telling us their care was very good/good.

As part of our Thrive Strategy, we are keen to understand if our patients and carers feel their care is co-ordinated and supportive. This question has been included in our surveys, with 99% of people who responded telling us that they feel the care they received from Locala was well organised and supportive.



As a result of listening to what our patients and carers have told us over the past 12 months, 54 improvements were made to our services. Examples include:

You said	We did
Cardiac Rehab Patients asked if family members could join online CPR education sessions.	Patients now are asked to invite any interested family members to join sessions.
When patients need further assessment or continence products following the removal of a catheter, they need to complete a bladder and bowel diary. Patients said this process was too slow.	All patients are now given a bladder and bowel diary when their catheter is removed. If they need to complete one, they have it to hand.
People completing our Bladder & Bowel diaries found them too complicated to complete.	The diaries were reviewed and reduced from 12 pages to four.
People attending our Pulmonary Rehab classes asked if we could include circuit style elements and a relaxation session.	These have been added to the sessions.
Patients and carers told us they didn't really understand what the Recovery Hub is. When they are discharged from hospital they are being given incorrect information.	Working with our colleagues at Kirklees Council we have created information explaining what the Recovery Hub is, and this is distributed whilst in hospital by discharge teams.
The dental waiting area is tired and doesn't look cared for.	The area has been decorated and tidied up – patients have commented on how much better it looks.

Engagement & involvement projects

Better Care Every day

Diabetes Care in Kirklees

In 2024, Locala's Diabetes Team began work to relaunch group education programmes designed for newly diagnosed Type 1 and Type 2 diabetic patients. Patients had previously attended the national courses 'Desmond' (Type 2) and 'Daphne' (Type 1) and had found that they were not meeting their individual needs. As a result of this, the team made the decision to create their own programme using feedback and having input from patients and the local community.

Locala's Engagement Team created a survey in April 2024 which was sent to Type 1 and Type 2 Diabetic patients and to local community groups with lived experience of, or an interest in diabetes. The survey was live for four weeks and 165 people responded by sharing their thoughts about the course content. The feedback was used to help design the content of the new programmes.



Pilot sessions allowed patients another opportunity to assess the courses and the team to develop the content further. It was apparent during these sessions that peer support was very important to people. As part of the course content, a list of local support groups is shared, as well as the offer of support to set up new groups where there are gaps. A new group is now successfully running in the Holme Valley area for people with Type 1 or 2 diabetes and is providing much needed help and support to the people in the area. Locala plan to support the launch of more groups during 2025.

Listening to, and involving parents

We wanted to find out more about the experiences of families using our Health Visiting service, particularly from those who have children with special educational needs and disabilities (SEND).

To allow for more in-depth conversations, we decided to speak to parents over the phone rather than send out a survey. This resulted in richer feedback with parents feeling comfortable sharing their experience in this way. Most parents said they received a very good service from Locala, however, there were things they would like to see improved. People were keen to stress that it was the systems that let them down, not the people providing the service. In summary, they told us:

- More support was needed when parents are having initial concerns about their child's development. This includes helping to navigate the system and their own wellbeing.
- Parents commented on how stressful it was to find a suitable school, especially the paperwork required. Once in school, they felt supported.
- People found the waiting times for assessments too long, particularly within the Speech & Language and Autism Spectrum Disorder teams.
- More support was needed to coordinate referrals and the information overload they experience.
- Communications were not always appropriate, and the language used had, on occasion, caused upset.

In response to this feedback, improvements have been made, and others are still in progress. The team continue to listen, learn and involve parents and community groups in the development of the service.

Improvements made:

- Two SEND champion roles have been created within the Health Visiting service. They are a point of contact with partner services and represent the 0-19 team at associated meetings/practice forums. This will help develop practice and processes in the service. This role will develop in 2025 to offer the additional support our families have requested.
- All letters and SMS messaging have been reviewed and amended.
- A system has been adopted to ensure that messaging is appropriate for the audience.
- Autism Awareness Training has been carried out with colleagues.
- A SEND event is planned for May 2025 that will bring together SEND community groups offering support in our local community.

Patient Experience Spotlight

Making a difference with Makaton

Bailey is four years old and has had a tracheostomy since she was 10 months old. This is when an opening is made at the front of the neck, so a tube can be inserted into the windpipe to help breathing. Bailey was born 8.5 weeks early and spent most of her first year in and out of hospital because of breathing difficulties. She also needed surgery to repair the pipe that connects the mouth to the stomach.



Bailey was supported by Locala's Physiotherapists and Occupational Therapists and then referred to Jodie, Locala's Play Intervention Lead. At the time, due to her tracheostomy, Bailey couldn't talk. Jodie suggested using Makaton - a language that uses symbols, signs and speech to enable people to communicate. Being able to communicate with signing and a communication board would mean Bailey wouldn't get frustrated.

Becci, Bailey's Mum said: "It was slow and steady at first. And then, this silent child was talking to us in her own way. It was great!"

"Jodie tailored the choice of Makaton signs for Bailey. Bailey can get anxious and cry and cling to me. Jodie let her play with toys to settle her. She taught her animal signs and 'more' and when she needed a drink. A communication board helped too. As Bailey has grown, she's now got a quiet voice. The 'air leak' around her tube allows air to pass over her vocal cords and she can say three or four words in one breath, then takes her time. She's using the Makaton less often now, but it filled a gap. We wouldn't be where we are today without Jodie – all that time and effort helping us!"

Supporting bereaved families

After listening to comments from bereaved families and colleagues, Locala have collaborated with a local photographer to create a series of bereavement cards.



Sam, Clinical Lead for End of Life Care, said,

“The bereavement cards offer sympathy, empathy, and reassurance that Locala is thinking of the families of our patients during such a challenging time. Our team build strong relationships with patients and families, so it felt important to be able to do something to show we are thinking about them.”

Finding the right words

Locala's Readers Panel has 14 members who meet quarterly to review leaflets, letters and website content. The Panel carry out a vital role in helping us provide better care, by reviewing patient information to ensure it's easy to read, relevant and free from jargon.

It's all about the Vlog

Locala and local community group Youth Social, have worked together to create a series of health-related podcasts. Created by young people for young people, the content focuses on health and wellbeing topics. The editorial group is made of up young people to ensure all content is interesting and relevant. Topics have covered immunisations, vaping, sexual health and mental health. The platform has content from other local organisations linked to careers and volunteering and shares real-life experiences of young people.

The partnership will continue throughout 2025 with plans to involve local community groups and Locala colleagues and share on platforms such as TikTok.

Spotify: <http://tiny.cc/yryxzz> **Apple:** <http://tiny.cc/vryxzz>

YouTube: <https://www.youtube.com/@YouthSocialCIC>

Working together works!

Locala's Sexual Health team recognised that a considerable number of looked-after children in Tameside were using sexual health services. They often had complex needs that required additional support. The team wanted to investigate this further and see if there was more they could do to help and support these young people.



Working with Tameside Metropolitan Borough Council, it was agreed to recruit a Youth Worker Apprentice funded by Locala's Social Value Fund. The collaboration has demonstrated the importance of innovation, initiative and a shared commitment to improving the lives of vulnerable young people in the Tameside area.

The apprenticeship role was designed to be filled by someone from the Tameside area who had personal experience of the challenges faced by looked-after children. This approach would ensure that the apprentice would be equipped to engage with young people in a meaningful way. Working closely with the Council's YOUthink Team and Locala's Sexual Health Teams, the apprentice would receive training to develop professional youth work skills, including achieving an NVQ Level 3 in Youth Work, while also supporting young people in accessing sexual health services and education.

Jay was recruited into the role in the YOUthink Team in August 2025. Jay is 20 years old and has experience as a looked-after child and of being supported in semi-independent living.

Jay's work is already making a huge difference to the young people in Tameside, Sexual Health Services across the borough, and of course Jay herself. Jay has re-designed PowerPoints by improving the quality, updating them with images and language to make them more relatable to young people, and developed new ways of working. In February, Jay received the 'Apprentice of the Year Award' from Tameside Council.

The success of this project is a direct result of the innovative thinking and proactive approach demonstrated by all parties involved. By combining resources, expertise and lived experience, the collaboration has created an environment where vulnerable young people are better supported in accessing sexual health services and education.

A wheely great time

In November, Locala supported a Wheelchair Skills event for children on our caseload. Ten children and their families attended the event where they honed their skills tackling ramps, stairs, emergency evacuation and opening doors. The day also included racing and the most popular activity - basketball. The impact was huge, with new connections made, fun had by all and plenty of new skills were learnt.



Class of 2025

Locala and Kirklees Adult Social Care working together: improving Halal choices on the menu!

Colleagues, volunteers and patients joined a Halal food tasting session at our Intermediate Care bed base, Ings Grove House. A selection of locally bought food was tested for taste and appearance. Everyone was asked to consider if the items should be regularly offered as part of a new and improved Halal menu for patients staying at Ings Grove House.



Ready for tasting

Feedback/stories from our services

Self-Management Service

Locala's self-management service has developed an innovative way of working which is delivering positive outcomes in both its clinical and social impact.

For the financial year 2024/25, the self-management service received 235 referrals, these have been from Community Nursing Networks (CNNs) as well as from services that directly support the CNNs, such as the Tissues Viability Service and the Continence Service.

A positive impact was seen in teaching catheter care, to which 114 patients were referred. This service has also seen an increase in successful trials without catheters, which will reduce the number of blocked catheter call outs for the CNNs, catheter acquired urinary tract infections, hospital admissions and increased clinical waste related to catheter product use.

Insulin/blood glucose teaching has also been hugely impactful on the CNN caseloads. For example, 39 patients were referred to be taught insulin administration to support self-management of diabetic care, which could save between one and three visits a day for the CNNs.

Aside from the clinical impact of the visits, the social impact seen has been positive. Training in Cognitive Behavioural Therapy and Health Coaching has helped the team have better conversations with patients, finding out 'what matters most to them.' These conversations can provide goals and patients can be directly referred to Community Plus, this has meant the service have patients who now have befrienders visiting weekly to reduce social isolation. Patients are also undertaking online courses to include mindfulness or a creative activity. There is an example of a lonely gentleman being referred into a men's group and going on to make more social connections locally.

Locala's Health Inequality and Inclusion Leads has been working with Social Enterprise UK and they are including the patient story and the service in an article for the King's Fund.

This year the implementation of the team and its work was recognised in the annual Self-Care Forum Awards and the service was recognised as a highly commended initiative and highlighted across the Self-Care Forum's social media platforms.

The team is mostly made up of un-registered colleagues, all of whom have undergone extensive training and are delivering care that fully utilises their capabilities.

Looking forward, the self-management team is working towards establishing a team within the acute trust so patient teaching can take place at source with the intention of reducing referrals into Locala.

0-19 Services Antenatal contact

In a bid to improve the numbers of families receiving antenatal visits, the team undertook engagement with families in Kirklees. Parents indicated that, where appropriate, they would prefer the option of a video consultation or phone call over a group antenatal setting.

This was trialled successfully and is now being rolled out across all teams in Kirklees, demonstrating our commitment to providing personalised care for our diverse communities. First time parents and families requiring targeted interventions are still offered a home antenatal appointment to ensure our vulnerable families receive the higher level of support required.

Tailored Support for Thornhill Academy & Positive Choices Programme

Locala's 0-19 Service is committed to delivering targeted support to young people, helping them make informed and healthy choices. Two recent initiatives, the Thornhill Academy Girls' Exploitation Programme and the Positive Choices Programme, are designed to meet the specific needs of vulnerable young people.

Thornhill Academy Girls' Exploitation Programme: A Specialised Intervention

The Thornhill Academy Girls' Exploitation Programme was a single intervention, delivered in response to particular safeguarding concerns raised by the school in 2024. The programme targeted students in Years 8 and 9 who were identified as being at risk of unhealthy relationships and exploitation. With the involvement of Locala's 0-19 Service, the Sexual Health Outreach Team and West Yorkshire Police, the intervention covered crucial topics such as sexual health, self-esteem and joint enterprise law.

Although this was a one-off initiative, its impact was significant. Students actively participated in discussions on topics like contraception and consent, benefiting from the small-group environment that encouraged open conversation through psychological safety. This tailored intervention addressed the specific needs of the Thornhill students, equipping them with valuable knowledge and awareness.

Positive Choices Programme: Delivered Based on Need

The Positive Choices Programme offers ongoing support, delivered as required based on the needs of local schools and communities. This programme is designed to reduce teenage pregnancy rates and foster healthy relationships, helping young people make informed decisions about parenthood and future family life.

Delivered in collaboration with Locala's Sexual Health Outreach Team and Clinical Nurse Specialists, the programme runs over five weeks. It provides practical guidance on parenthood; addressing topics such as financial stability, mental health and the emotional demands of raising a child. With sessions designed to meet the specific needs of young people in Kirklees Alternative Provisions, the programme is flexible and can be offered whenever required. Participants have reported greater understanding of parenthood, helping them make responsible decisions about their futures.

Through these initiatives, Locala's 0-19 Service demonstrates its commitment to addressing the unique challenges faced by young people. Whether through one-off interventions like the Thornhill Academy programme or through ongoing support via the Positive Choices initiative, we continue to promote the wellbeing and resilience of our community's youth.

Locala's 0-19 Service is proud to deliver targeted programmes that support the unique needs of young people. Both initiatives highlight Locala's commitment to safeguarding and empowering young people in vulnerable situations.

Public Health Early Years

Feedback received from parents highlighted difficulties in getting through to Calderdale Public Health Early Years Service and Young People's Services. Following this the service increased the number of administrative colleagues taking calls in the busier morning periods, meaning that when parents/carers called the service, they were more likely to speak to a person rather than having to leave a voicemail and wait for a call back. This resulted in a significant reduction of parents left waiting for a call back and parents being signposted to relevant support much quicker.

In August 2024, Calderdale retained the Baby Friendly Initiative Gold Standard Award following assessment which was a significant achievement.

Safer Sleep

‘Every Sleep a Safe Sleep’ is a multi-agency training programme for the prevention of sudden unexpected death in infancy (SUDI) co-produced by Locala Health and Wellbeing, Calderdale Safeguarding Children Partnership and West Yorkshire Health and Care Partnership. It is available for any service working with families where there is a child aged 12 months and under, including pre-birth.

The sudden unexpected death of an infant is one of the most devastating tragedies that can happen to families. At least 300 infants die suddenly and unexpectedly each year in England and Wales, with West Yorkshire experiencing the highest rates. Universal SUDI prevention has reduced unexpected infant deaths since the back to sleep campaign in the 1990s, however, these deaths now cluster among families from deprived socio-economic circumstances.

In response, ‘Every Sleep a Safe Sleep’, which includes a SUDI risk minimisation tool and guidance document, was produced to upskill the multi-agency workforce to identify risk and deliver individualised safer sleep messages. By targeting support and addressing health inequalities in the most vulnerable babies in our society, we can potentially reduce these deaths by up to 90%.

All professionals who attended the training demonstrated a significant improvement in their knowledge of modifiable and non-modifiable risk factors for SUDI, and an increase in confidence when discussing safer sleep with families.

The programme reached the finals of the Nursing Times Awards.



Sexual Health career progression

Kirsty's journey from Health Care Assistant to fully qualified Sexual Health Nurse.

Kirsty joined the Sexual Health team in Bradford in April 2016 as a Health Care Assistant. She progressed well, completing the Care Certificate when it was introduced to Locala, and working as part of a multi-disciplinary team, learning new skills and how best to support the clinic and the patients we see. During this time Kirsty trained in microscopy, which enables the service to diagnose and treat infections on the same day. She also learned to cover reception and answer the phones so that she could support with any administrative staff shortages.

In 2019, Kirsty was supported to apply for the Training Nurse Associate (TNA) role, was successful, and enrolled on the course. This saw Kirsty attend university once a week to undertake her theoretical knowledge and also work two days a week as a TNA in clinic, supported by mentors in the team.

During Covid-19, Kirsty was redeployed to work with the Short Term Assessment and Reablement (START) Team in Locala for 8 months, which added to her experience.

After successfully completing the course, she graduated in July 2020 and became a Nurse Associate. This saw Kirsty take on new skills in the service. Kirsty was Locala's first Nurse Associate in Sexual Health so the team learned how best to utilise her new skills and knowledge, and how this would best help support the patients of Bradford.

Kirsty's role became pivotal in providing specific care to patients with ongoing needs, which included treating patients with sexual infections, ongoing herpes and wart treatment along with partner notification. Her role allowed her Registered Nursing colleagues to focus on other clinical care which she was able to support.

After a year in this role, Kirsty decided that she wanted to complete the transition to Registered Nurse and applied for the top up course. This would take Kirsty out of our service for 2 years, where she would be on various placements in a variety of settings including Day Surgery, Medical Assessment Unit, elderly medicine and Accident & Emergency Departments.

Kirsty continued to work on bank for the service during this time, so that she could maintain the skills that she had already developed. This also helped the service with capacity at the time.

Finally, after graduating as a Registered Nurse, she received her PIN in August 2023 and returned to the service as a Band 5 trainee Sexual Health Nurse. Kirsty started to work through all the competencies of becoming a fully-fledged Sexual Health Nurse; these competencies are complex and cover both sexual health and contraception. Kirsty was supported by the preceptorship programme to help with her transition from Nurse Associate to a Registered Nurse. Kirsty completed all these in approximately 18 months and, as of January 2025, is a fully qualified band 6 Sexual Health Nurse.

Throughout the years, Kirsty's confidence has grown in managing sexual health and contraceptive needs, and as a result has developed into an extremely competent practitioner.

This is a testament to her commitment and dedication in becoming a Nurse, from a starting point of Health Care Assistant. We are very proud of her and her accomplishments.

Safeguarding

Over the last twelve months, the Safeguarding Team have continued to explore creative ways of working due to demands which can sometimes outweigh capacity. The focus has been on upskilling the team while maintaining statutory requirements.

Over the past year, the number of serious case reviews have increased, and the team have implemented changes in response to the learning from these, such as:

- The introduction of the Significant Events Node. This aims to streamline safeguarding documentation, ensuring critical information is accessible, organised, and easily identifiable to support timely interventions.
- Improved multi-disciplinary working with Social Works and child and adult mental health services to ensure timely sharing of information.
- Changes to processes in the 0-19 service regarding making routine enquiries when children are present.
- The implementation of increased translation options at The Whitehouse Centre following work with the Engagement Team.

Key successes

- Access to a highly skilled team offering support and guidance regarding children and adults at risk. The team advocate for adults and children ensuring that vulnerable patients receive additional support conducive to their needs.
- Safeguarding Week: The safeguarding team supported Safeguarding Week, delivering 30-minute briefings with a domestic abuse theme to Locala colleagues and external partners, with over four hundred attendees. The Safeguarding Week was a momentous success and has gained recognition internally and externally. The team continue to support other safeguarding events, an example being the Prevent and exploitation week which gained equally positive feedback. The 30-minute briefings are proving to be an ongoing success within Locala due to their flexible approach to learning.

Feedback from colleagues, who attended during safeguarding week include comments such as, "That was an amazing, very informative, brilliant presentation".

Complaints and Patient Advice and Liaison Service (PALS)

The first point of contact for patients and families with general enquiries or concerns about their care is with Locala’s Customer Liaison Service. The team help people find the answers they need, whether it is information about Locala services or addressing complaints about care provided. Lessons learned from complaints are shared through a variety of mechanisms to improve practice and care delivery.

The graph below shows the number of cases received during 2024/25, broken down by complaints and PALS enquiries (Patient Advice and Liaison Service). PALS cases are general enquiries that can usually be dealt with quickly (within 48 hours), although it should be highlighted that a PALS enquiry can sometimes be complex and take more time to resolve. Cases received during 2023/24 are also shown for comparison.

Table One: Complaints comparison:

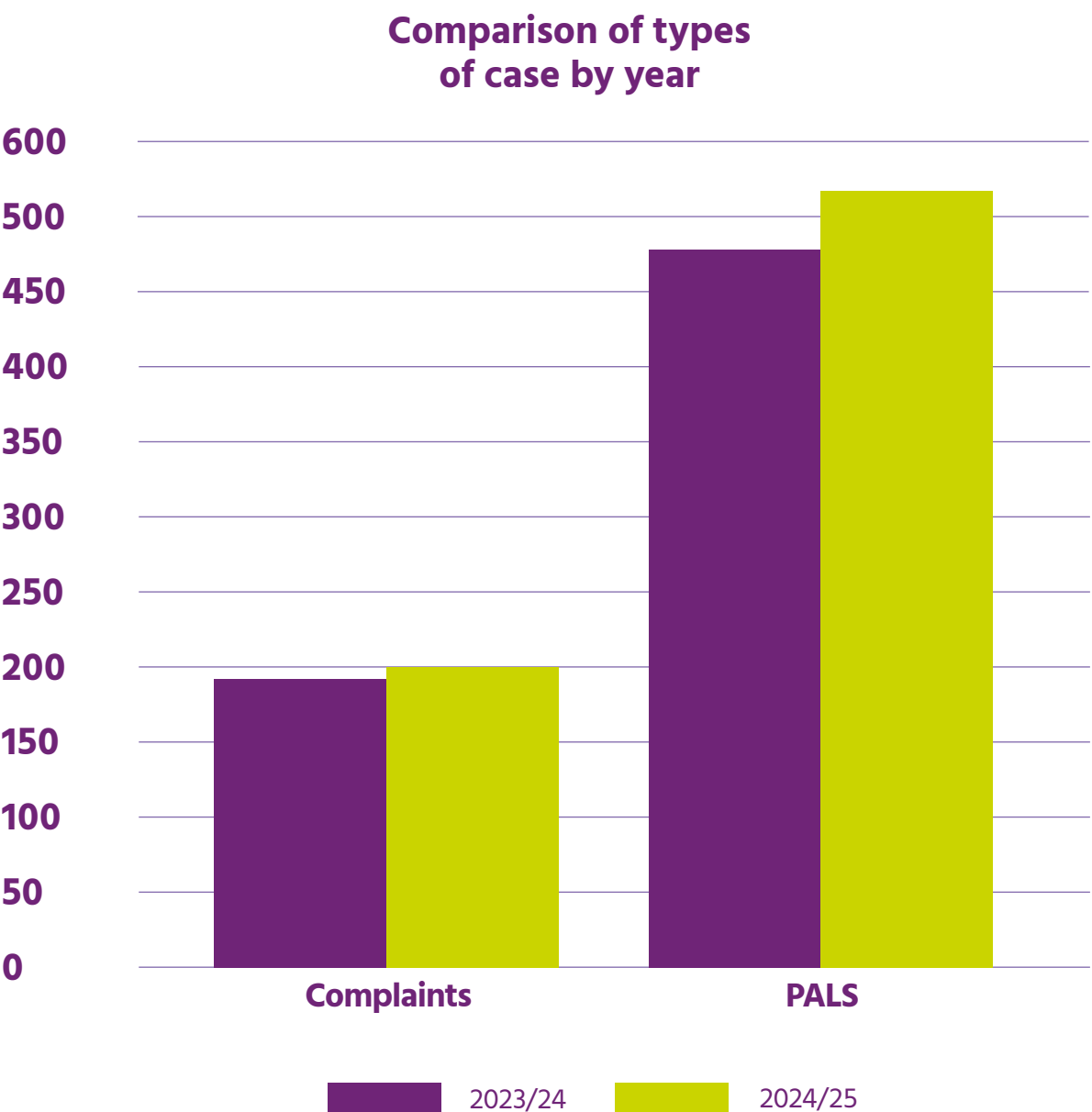


Table One shows there has been a similar number of complaints received and an increase in PALS compared to last year. Over the last four years, there has been a decreasing trend in complaints received, over the same period PALS received have increased. Reviewing the PALS received by service, there are no themes or trends related to a particular service or issue. The data is not directly comparable as over the same time period Locala has ceased to provide some services and has taken on the care delivery of others. Over the same period, most cases were raised by email/website rather than by telephone. This likely reflects changing habits in society and increased use of digital communication methods via the 'Contact Us' details provided on the website. Many of the contacts are also received out of hours when almost all services are closed (i.e. for telephone contact).

The highest number of complaints were received by the Community Nursing Network teams which is also the largest workforce in Locala. Themes remained similar to last year, predominantly relating to visits being deferred (postponed) to another day. The service overall saw a total reduction in complaints by 37%, demonstrating the impact of quality improvement initiatives and the dedication to resolve this issue across the teams.

Locala's Sexual Health services received the next highest number of complaints, with double the number compared to the previous year. However, it should be noted that these services have also increased in size, with the addition of Wigan & Leigh to the existing Bradford, Kirklees, Stockport and Tameside services. Kirklees saw the largest rise in complaints, and these mainly relate to the difficulty getting through on the phone to book an appointment and attitude of colleagues. All concerns regarding attitude are raised with the individuals concerned to ensure our standards of customer service are maintained. A new telephone system has been introduced to Bradford, and this has seen a reduction in such complaints. The system is to be rolled out across all sexual health services, and it is hoped this will improve the patient experience and reduce complaints received.

The Continence Advisory Service received the next highest number of complaints, though this was a 20% reduction compared to the previous year. The concerns received were varied and no theme or trend was identified.

The highest number of PALS enquiries were received by Sexual Health services, Community Rehabilitation Service and Continence Advisory Service.

Across all these services there were enquiries regarding referrals and cancelling or rearranging appointments. Sexual Health cases also included enquiries regarding test results and appointment availability. Community Rehabilitation cases also included questions regarding equipment and Continence Advisory Service included questions regarding waiting times for visits.

Customer Liaison work with services to learn from the complaints received in order to improve the care provided to patients and their families, and this is reflected in the overall trend over recent years of a reduction in complaints received.

Freedom to Speak Up (FTSU)

Growth of FTSU Associate Network

In order to support the speak up culture across Locala and take account of the geographically challenging nature of the organisation, the number of associates has been increased. The 19 FTSU associates come from a variety and range of clinical and non-clinical areas across the organisation, including the inclusivity networks, and aim to support colleagues locally to have a voice.

All contacts with associates will be recorded and passed to the guardian with usual confidentiality maintained. This aims to ensure full and more comprehensive reporting of speak up data for the National Guardians Office and to the Locala Board.

Board Development Session

There was a FTSU Board Development session held in November 2024. The aim of the session was to support the 'Follow up' ESR training which all senior and executive leaders are mandated to complete with supplementary learning and understanding. Positive feedback was received, and further sessions are to be planned into the Board Development programme going forward.

Peer Review

A peer review of FTSU is currently taking place across Locala. The FTSU Guardian from Leeds Community Healthcare NHS Trust is undertaking the review and is speaking to colleagues, managers, executives and non-execs about their experiences of speaking up, listening up and following up. All have given consent to be approached and findings from the review will help shape developments and formulate an action plan alongside the reflection and planning tool which will be reviewed again later this year.



Learning Disability and Autism

Significant progress has been made in improving outcomes for people with learning disabilities and autistic individuals over the past year. Locala remains committed to tackling health inequalities and ensuring equitable access to healthcare services. This work aligns with Locala's Thrive strategy, which prioritises improving access, experience, and outcomes for underserved populations.

Throughout the year, we have successfully delivered several initiatives that have improved health outcomes and enhanced the experience of people with learning disabilities and autistic individuals. Key achievements in 2024/25 include:

- Delivered targeted messaging on health risks during adverse weather conditions to ensure those with learning disabilities and autism received clear and accessible advice.
- Promoted learning disability Annual Health Checks (AHCs) in special schools, improving awareness among families and increasing uptake.
- Secured grant funding for several impactful projects, including:
 - Development of an accessible Antenatal Resource Pack for parents, supporting expectant parents with learning disabilities.
 - Oral health support for children and young people with learning disabilities in Kirklees.
 - Development of transition resources to support young people with learning disabilities moving from children's to adult services.
 - Empowerment of individuals with learning disabilities to become 'Cancer Champions,' promoting cancer screening.
- Delivered impactful training to our colleagues and external partners to improve understanding and support for people with learning disabilities and autism. This included Neurodiversity Awareness sessions, which have received positive feedback and enhanced staff confidence in providing inclusive care.
- During Black History Month, delivered a dedicated training session highlighting the experiences of black people with learning disabilities. This session explored the impact of intersectionality and drew on insights from Learning from Lives and Deaths of People with a Learning Disability and autistic people (LeDeR) reviews, further embedding inclusive practice.
- An audit was undertaken at The Whitehouse Centre GP practice to assess the effectiveness of support provided to individuals with learning disabilities. The audit reviewed the accessibility of services, the quality of reasonable adjustments made, and staff awareness of the needs of this patient group. Findings demonstrated positive outcomes, including improved identification of patients requiring additional support, and enhanced use of health passports to personalise care. The audit also highlighted areas of good practice, such as proactive engagement with patients to ensure they felt supported throughout their healthcare journey.

- Collaboration with partners and stakeholders has been essential in improving care for individuals with learning disabilities and autism. We have worked closely with Parents of Children with Additional Needs (PCAN), Kirklees Action Network (KIN), Mencap, local authorities, and community organisations to co-produce resources and improve access to services. Our partnership with PCAN has been particularly valuable in ensuring the voices of parents and carers are embedded in service developments, helping us to better understand the challenges faced by families. This collaborative approach has informed the creation of accessible resources, promoted awareness of Annual Health Checks, and supported families in navigating healthcare services. By strengthening these partnerships, we continue to improve outcomes and reduce health inequalities for individuals with learning disabilities and autistic people.
- We continue to review and monitor incidents and complaints to identify themes and learning opportunities. All complaints were addressed appropriately, with no significant concerns or trends identified.

Locala's commitment to improving care for people with learning disabilities and autism remains a priority. Through targeted initiatives, collaborative partnerships, and a focus on accessible care, we are ensuring that individuals with learning disabilities and autism receive the support they need to lead healthier, fuller lives.



Health Inequalities

Our Purpose and Commitment

Health inequalities remain a significant challenge in the communities we serve, with evidence showing that social, economic and environmental factors contribute more than three-quarters of the impact on health and wellbeing, while direct healthcare interventions account for less than a quarter. Locala has a critical role in addressing these inequalities by taking a targeted, population-based approach to improving health outcomes for those who need it most.

Reducing health inequalities is a key priority under Locala's 2024-2027 THRIVE Strategy, aligning with the ambition to expand our reach and serve more communities. Our approach is guided by the principle that everything we do already influences health inequalities; however, our ambition is to go beyond standard care to make a meaningful, measurable impact.

Based on an analysis of data from Public Health England (PHE), the Office for Health Improvement and Disparities (OHID), Indices of Multiple Deprivation (IMD), and local Healthwatch reports, four key priority population groups have been identified and agreed by the organisation, these are:

1. Disabled people, including individuals with a learning disability and autistic people.
2. People experiencing poverty and deprivation, particularly those in the most socioeconomically disadvantaged communities.
3. Ethnic minority groups, who face systemic barriers to accessing care and poorer health outcomes.
4. Children, particularly in relation to early years development, speech and language, and childhood obesity.

These priorities reflect the structural and systemic challenges that shape health outcomes, including income inequality, housing conditions, access to healthcare, and structural racism.

Achievements

- We have laid a foundation for meaningful change through:
 - o Data-driven decision-making: Strengthening our use of population health data to inform service planning and intervention strategies.
 - o Partnership working: Collaborating with Primary Care Networks (PCNs), local authorities, community groups, and advocacy organisations to create integrated solutions.
 - o Targeted interventions: Implementing initiatives such as culturally competent care in Intermediate Care, diabetes service improvements for ethnic minority communities, and enhanced access for people with disabilities.
 - o Internal workforce and governance: Supporting colleagues to embed health inequalities considerations in their work, including supporting completion of Equality Impact Assessments (EIAs) and the Equality Delivery System (EDS).
- To ensure that our health inequalities work is both evidence-based and outcome-driven, we are aligning our measurement approach with NHS England's Tackling Inequalities in Healthcare Access, Experience, and Outcomes framework. This provides a structured way to assess how our interventions are improving.
- Our approach to tackling health inequalities is not only about identifying gaps but also taking targeted, practical actions to improve access, experience, and outcomes. Some examples of recent developments that directly address barriers to access and inclusion are:
 - o Culturally appropriate continence support for South Asian women
 - o Improving Halal menu choices in Intermediate Care
 - o Enhancing digital accessibility in 0-19 Services
- Continued learning opportunities for colleagues aim to enhance understanding of key issues such as health inequalities, inclusion and accessibility, ensuring that colleagues are equipped to deliver equitable and person-centred care.
- Addressing health inequalities requires collaborative, system-wide action, and we continue to strengthen our partnerships with Primary Care Networks (PCNs), acute services, local authorities, advocacy groups, and community organisations. These partnerships allow us to reach underserved communities, address the wider determinants of health and co-design solutions that are locally meaningful and impactful.

Looking Ahead

By embedding a culture of data-driven action, we can ensure that health inequalities work is both evidence-led and impactful. We will continue to strengthen engagement with existing partners to deepen our impact as well as identify new partnership opportunities, particularly in areas where data highlights gaps in access or outcomes. Our continued commitment to addressing health inequalities will remain at the heart of our work as we strive for a more equitable health system for all.

Colleague feedback

Improvements from feedback

Sexual Health:

Feedback in Sexual Health is captured via an electronic survey that is sent to patients via a text message. The service has a response rate of between 7-9% and 98% of people who respond say the service is very good/good.

In 2024/25 our sexual health services received 4,545 responses to surveys. The service also has bespoke surveys linked to the Clinical Van and the more vulnerable service user clinics. As a result of the feedback, the service made 10 improvements.

Examples:

1. Feedback highlighted that several patients felt frustrated about having to wait too long for a Pre Exposure Prophylaxis (PREP) appointment. These appointments need to be held promptly to ensure that the medication required to prevent HIV is accessed in a recommended time frame. The feedback was discussed with the team and discussions had about what could be done to improve the situation. The service reacted quickly and increased the clinics to weekly sessions to ensure more appointments were available.
2. These changes resulted in a reduction in the number of comments on this subject however there were still comments received, so in response the team implemented two other improvements (see next).
3. A joint clinic is held monthly at the Brunswick Centre. This service reaches patients that would not necessarily attend clinic including people with HIV and they also offer regular screening services in their premises all which complement the PREP offer.
4. An online Grindr account was set up to enable communication with hard-to-reach service users. This account told us that service users were still finding it hard to access PREP via the telephone lines. In response the service launched a twice weekly drop-in clinic for men that have sex with men (MSM).

Multi-service Engagement project

Birkby is an area in Huddersfield with a high population of families and individuals with mixed ethnicities.

Locala's Engagement Manager met a team from Birkby Junior School including parents which led to the planning of a health event at the school. This included our 0-19 School Nurses, the Immunisation Team (in the clinical van) and the Dental Team.

The Lipstick Project organise sessions to enhance mental health and wellbeing, and having worked extensively in the Birkby area, supported the health event in collaboration with Locala. They also provided links with food banks and information on extra support for low-income families.

On the day:

- 15 parents attended the coffee morning. Each service had the opportunity to present for 10 minutes to talk about how they can support children and families.
- The clinical van remained on site at school for the full day to provide immunisations. The school sent a text message to all parents to let them know they can visit the van with their children.
- During the afternoon/evening session the immunisations van was very busy. In total, the team administered 33 vaccinations on the day, and then due to the high demand, returned on the 16th October and administered a further 22 vaccinations.
- The Dental Team were located in the main hall and were engaging with families, and in total handed out 50 toothbrushes and toothpastes.
- The Immunisation Team said: "It is clear that this is an area that has benefited from us being there today. We have discussed as a team it will be worthwhile to do something like this again in the future."



- Chrystal from the Dental Team attended and said: “Birkby Junior schools’ promotional day was a great success. One of the mum’s had waited to see me after dropping her child at school that morning before the event even started. One of the children also told me they are told not to brush at nighttime, and I got to speak to his mum to explain that nighttime is the most important time to brush”.

“Since the event I have been reaching out to the local big supermarket stores to try and source oral health supplies such as brushes and toothpaste. I did meet with Huddersfield Asda who will supply some products monthly going forwards. This manager attended the event at Birkby with his son to get his vaccines up to date. In partnership with the Engagement Team and Health Inequalities Lead, Preeya, we are working together a plan to address oral health support in deprived communities”.

- Nusrat from the Lipstick Project felt the day was beneficial and was able to engage with lots of parents. “We also made contact with the families that are living in temporary accommodation without cooking facilities and were able to give them food bags that did not need cooking. The families are now registered with The Lipstick Project and registered with the food bank.”
- “It was a very educational event about the importance of immunisation. Having the health practitioners on site allowed the parents to ask questions in a very safe environment, which encouraged them take up the offer of immunisations. The session was very well attended and organised. It was also lovely to meet other professionals and hear of the services they provide.”



Volunteers

Volunteering enhances Locala's vision to make a positive difference to the wellbeing of the people and communities we serve, and help people thrive where they live.

As a social enterprise, volunteers continue to be an integral part of the organisation because they make a real difference to our patients by offering support and care, enhancing the services we provide. Volunteers enable us to be more closely involved with communities, obtain feedback to improve patient experience and help to develop community cohesion.

Locala recruits volunteers from all sectors of the community, offering them training, practical experience, a sense of belonging and purpose, and the knowledge that they are helping others in their community.

Locala values and benefits from the experience, skills and knowledge that volunteers bring. We aim 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.

The team have expanded a number of our roles over the past twelve months, including the provision of three new sessions providing breastfeeding peer support, two of which are based in the community setting to allow mums to access this support nearer to home (coffee shop and stay & play group) and a third volunteer-led Baby Self-Weigh clinic.

New roles have been developed to improve the patient journey through services. These include Patient Helpers in our new Treatment Room Clinics and Team Supporters with both our Day Surgery Unit and Bradford Sexual Health Service. A Patient Feedback role has also been developed in the specialist Dental Services to hear the patient voice and influence positive change.

Locala is proud to be accredited with the Kirklees Volunteering Quality Award, which shows that we involve volunteers in ways that demonstrate good practice. These includes making sure volunteering is open to everyone, encouraging volunteers to develop their skills and offering them support and supervision.

Our Colleague Volunteering Programme has been running for four years, offering all colleagues up to 3 days per year, pro-rata, to carry out volunteering for the geographical areas in which Locala provides services. The programme runs in line with our new THRIVE strategy, so is designed to impact the reduction of social isolation, the reduction of health inequalities, offer coaching/mentoring opportunities and improve the environment.

Since the start of the programme, 141 colleagues have taken up the opportunity, fulfilling 1277.5 hours of volunteering. Most recently, this has included marshalling at Junior Park Runs and Memory Walks for one of our local hospices, helping to run a 'Re-start the Heart' campaign in schools with the Yorkshire Ambulance Service, School Governing and using personal experience to help facilitate a service user forum for the Pennine Domestic Abuse Partnership.

92% of colleagues told us that their volunteering has created positive feelings and 80% of colleagues reported a sense of achievement.

Patient Safety

The Patient Safety Incident Response Framework (PSIRF)

Locala has fully adopted PSIRF methodologies and has a current PSIRF Plan and Policy.

Following patient safety events, PSIRF is utilised to obtain learning in a swift manner while supporting those involved in incidents, and includes patients and their families in our investigations. This approach enables us to look at the entire patient journey by including the voice of all.

Learning

Learning from all patient safety events is a key objective. Locala has committed to establishing a learning platform (Locala Learns) that all colleagues and partners can access to widen the scope and impact on our learning. Locala Learns will upload and cross reference learning from all aspects of the organisation and external factors to ensure we understand and learn from all that we do, and share this with our colleagues and partners to ensure continuous improvement and high-quality care. Locala had two established Patient Safety Specialists who support this work using PSIRF methodologies.



Patient Safety Specialist Update

Following a spike in incidents relating to pressure ulcers in 2024/25, Locala's Patient Safety Specialists identified this area as a priority. They worked with operational and specialist colleagues (both clinical and non-clinical) using PSIRF methodologies to:

- Set up psychologically safe workshops with clinical colleagues (both registered and non-registered) to understand 'work as imagined' vs 'work as done'.
- Agree co-produced actions with our colleagues to improve patient safety within this workstream.
- Understand the functionality of SystmOne in order to improve reporting opportunities.

This led to the following changes to practice:

- Changes to SystmOne templates were made immediately to ensure pressure ulcer prevention (PUP) care plans were set to the correct care default timescales (4 weekly).
- PUP care plans were added to all patients without the need for initial holistic assessment having taken place.
- Community Nursing Network (CNN) Team Leaders can now pull weekly reports to identify any gaps in completion of PUP care plans at initial visits and 4 weekly.
- There has been a notable improvement in the quality of pressure ulcer debrief calls in terms of risk assessment completion, correct scheduling and evidence of holistic care.
- Following positive debrief calls colleagues in the Quality Team share this feedback widely using the CNN communication chat on Teams. This has received positive feedback from all teams.
- There have been no reported patient safety incidents relating to the development of pressure damage since December 2023.

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 2024/25, our IPC team have supported our colleagues to deliver safe care by providing timely support and guidance.

In August 2024 a Public Health Emergency was declared, to manage a new Clade of Mpox, known as MPXV Clade 1b, this virus was categorised as a High Consequence Infectious Disease (HCID). Locala IPC Team provided organisational communications, training sessions across all high-risk services and put a triage template in place for Locala Sexual Health services. The IPC Team also created a clear pathway for colleagues to follow in the event that they came into contact with a possible or confirmed MPXV Clade 1b case.

Achievements in 2024/25 include:

- Amalgamation of all Locala IPC policies into the National Infection Prevention and Control Manual, which has been ratified and shared across the organisation.
- 47 environmental audits have been completed across both Locala Health Centres and services to ensure Locala Colleagues are providing care in clean safe environments whilst providing care that complies with IPC.
- The IPC Team have introduced a new - updated training package for Aseptic Non-Touch Technique (ANTT), clinical colleagues have been divided into 2 clusters.

Cluster 1 – all clinical colleagues must complete ANTT eLearning Bi-Yearly.

Cluster 2 – all clinical colleagues who use ANTT as part of their role must also complete a face-to-face assessment Bi- Yearly.

The IPC Team have completed over 400 ANTT face to face assessments.

- The IPC Team have carried out Face Fit Piece testing across the organisation – known as respiratory protective equipment (FFP3 Masks) 456 Locala colleagues have now completed FFP3 Mask Fit Testing.
- The IPC Team have introduced their first sustainability project – “Ditch the Couch Roll” this will hopefully be a step in the right direction to contribute to a reduction in our carbon footprint and this project will be reviewed in February 2026.
- The IPC Team have re-introduced a monthly Newsletter that shares an IPC related topic across the organisation.
- The IPC Team have re-introduced Gram Negative Health Care Associated Infection Surveillance and use PSIRF methodology to investigate all cases that have occurred in patients that have been under the care of Locala services, this information is shared at the West Yorkshire HCAI Group so analysis can take place and changes in practice can be initiated if required.

Innovation and Improvement

Schwartz Rounds

A Schwartz round provides a structured forum where colleagues come together regularly to discuss the emotional and social aspects of working within health and social care (Point of Foundation, 2021)

Locala continues to be a key partner of the Calderdale and Kirklees place-based rounds, which is a collaboration of health and social care organisations providing rounds relevant to the communities we serve.

Locala colleagues are active members of the steering group and have attended, facilitated and told their stories at 20 rounds this year. We have also produced promotional videos which highlight the benefits of being involved within the Schwartz rounds.

Schwartz Round video

https://youtu.be/_WOzVx2VGGA#

Compassionate leadership - Schwartz rounds

<https://youtu.be/cG6lrGmhg8E>

As an organisation we also have a presence within the wider Integrated care system rounds which cover the whole of West Yorkshire.

Data collected from the rounds show that over 60% of colleagues feel that attendance at the rounds provides them with the insight to meet the needs of their patients better, and 80% feel the rounds help them to work with and understand their colleagues better.

Trauma-informed Organisation

Being trauma-informed has remained a key priority for Locala. Being trauma informed realises the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into procedures and practices and seeks to actively resist re-traumatization.” (SAMHSA, 2023). In 2024 we appointed a lead who will move this agenda forward and work towards Locala attaining the West Yorkshire Trauma informed Charter.

A scoping activity of knowledge and confidence was completed within the Locala and showed more than half our colleagues have an understanding of providing trauma-informed care. Educational packages have been developed to ensure that all Locala colleagues have the knowledge and understanding to deliver trauma-informed and responsive care to our communities, and is the golden thread that runs through our policies and procedures.

Personalisation and Trauma awareness is currently being delivered to all new Locala colleagues as part of the clinical induction.

Clinical Accreditation

Our bespoke clinical standard and quality assurance process reviews clinical services in line with a framework which identifies the areas for improvement and celebrates the areas of excellence.

22% of our clinical services reviewed have been awarded the highest level of achievement.

The programme continues to develop and recognises the need for sharing the learning from clinical service across the organisation with the ongoing development of the Locala learns platform.



Section 4

4.1 Statements from our Stakeholders

4.1.1 Kirklees Integrated Care Board

The West Yorkshire Integrated Care Board (Kirklees) welcomes the opportunity to comment on Locala Health and Wellbeing's 2024/25 Quality Account. We commend Locala's continued commitment to delivering safe, inclusive and person-centred care, and we acknowledge the progress made across a range of priorities including patient safety, safeguarding, research, and health inequalities.

We particularly value the contributions Locala has made to system-wide learning, their positive engagement with patients and families, and the embedding of improvement culture across services. The breadth of activity undertaken this year demonstrates Locala's responsiveness to community need, innovation in care delivery, and clear alignment to national quality ambitions.

Key achievements we wish to highlight include:

Embedding of a 'safety through learning' culture and the development of the Locala Learns platform.

Finalist recognition in the Nursing Times Awards for the 'Every Sleep a Safe Sleep' programme.

Development of a robust research strategy (2024–2027), with participation in 9 active studies.

Innovative safeguarding practice including Significant Events Node and targeted learning interventions.

Implementation of improvement cycles that led to a 37% reduction in complaints in Community Nursing Networks.

Strong co-production activity with 54 service changes directly informed by service user feedback.

Positive patient feedback: 97% rated care as good/very good and 99% felt care was well organised.

Recognition of colleagues for national awards (e.g., AHP and Nursing Times).

Focused work on inclusion and health inequalities, with dedicated leads and population group priorities.

System-wide learning contributions, including sharing PSIRF journey and national safety alert responses.

We look forward to continuing our collaborative work in 2025/26 and support the priorities set out in the THRIVE strategy. As commissioners, we encourage the ongoing development of the Quality Account to reflect not only achievements but also shared challenges and learning as part of a transparent, evolving improvement journey.

Ian Bennett

Director of Nursing and Quality
Kirklees Health and Care Partnership
NHS West Yorkshire Integrated Care Board

4.1.2 Healthwatch

Healthwatch Kirklees and Healthwatch Calderdale have a statutory role as the consumer champion for those who use publicly funded health and care services.

We welcome the opportunity to comment on Locala's Quality Account for 2024/25. We have a productive and open working relationship with Locala, sharing feedback from the public and working together to address concerns and improve services. We continue to find Locala to be responsive and reflective - demonstrating a clear commitment to learning and acting on feedback.

We are particularly encouraged by the focus on tackling health inequalities, and the development of specific roles such as Inclusivity Leads and Engagement Champions to support this work.

Healthwatch would like to see Locala continue to:

- Build on its health inequalities work by clearly demonstrating how the experiences and outcomes of the identified priority population groups are improving year on year.
- Strengthen co-production approaches by embedding lived experience even further into service planning, delivery, and governance.
- Maintain transparency by regularly sharing learning from complaints and patient feedback in accessible formats.

We look forward to continuing to work alongside Locala to ensure local voices shape and improve services across Kirklees and Calderdale.

Clare Costello

Healthwatch Kirklees & Healthwatch Calderdale

4.1.2 Stockport and Tameside Public Health

Over the past 3 years since Locala was awarded the specialist Sexual and Reproductive Health Service in Stockport and Tameside, we have seen Locala become a key organisation in our areas, demonstrating strong partnership working with other local services and continuously developing service provision to effectively meet the needs of our residents. We have also seen the development of relationships across the wider Greater Manchester city region (comprising of 10 areas and 4 sexual health providers), with Locala becoming a respected player and voice in Greater Manchester strategic and operational arrangements.

From a quality and innovation perspective, we continue to be impressed by Locala's approach. There is a clear understanding of what collectively we want to achieve and how to progress to achieve these aims. We value the pragmatic attitude of senior leads and the wider workforce and their ability to understand the local, regional and national landscape, creating and taking opportunities, being flexible and adapting local offers to maximise outcomes. We are always aware of the challenges of resources, with increasing demand for sexual health services and increasing costs of delivery. As commissioners, we are committed to promoting the importance of investment in sexual health and identifying additional funding where feasible, noting this is within the context of available resources and local priorities. As always we welcome frank discussions about the challenges and best use of resources and value the conducive relationship we have with Locala.

Alison Leigh, Behaviour Change Lead - Public Health and commissioner of sexual health services for Stockport MBC

Pamela Watt, Public Health Strategic Lead and commissioner of sexual health services for Tameside MBC.

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 Independent Quality Team:

Tel: **03030 0034532**

or

email: **qualityinbox@locala.org.uk**

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

Glossary

ACP - Advance care planning' (ACP) is the term used to describe the conversation between people, their families and carers and those looking after them about their future wishes and priorities for care.

CAMHS - child and adolescent mental health The Community Child and Adolescent Mental Health Service (CAMHS) teams offer specialist mental and emotional health support to children, young people (age 0-18 years) and their families.

Cardiology - Service specialising in disease and defects of the cardiovascular system.

Care Home Support Team - A multidisciplinary team that consists of nurses, clinical assistants, pharmacists, dietitians, physiotherapists, supported by consultant Geriatricians from our local hospitals. Our aim is to improve the quality of clinical support for residents and carers in older people's care homes across Kirklees and prevent inappropriate admission to hospital and maximise quality of life.

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.

CNN - Community Nursing Network teams provide valuable care in or close to people's homes. Their expert leadership, clinical skills and knowledge enables them to support people to manage their long-term conditions and maximise their independence.

Continence - Services that specialise in the treatment and management of bowel and bladder conditions.

CQC - Care Quality Commission.

Diabetes - Diabetes is a condition that causes a person's blood sugar level to become too high.

DNA - Did not attend.

Domestic Homicide Review (DHR) - is defined to have occurred when the death of a person aged 16 or over has or appears to have resulted from violence abuse or neglect by a person there were related to, a person they were or had been in an intimate relationship with a member in the same household. The purpose of a DHR is to enable lessons to be learnt, prevent domestic abuse and homicide and to ensure that abuse is identified and responded to effectively at the earliest opportunity improving services responses for victims through a coordinated multi-agency approach.

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.

EPaCCS - Electronic Palliative Care Coordination Systems is a means to capture and share information electronically from people's discussions about their care. The aim of this is to ensure that any professional involved in that person's care has access to the most up to date information, including any changes to their preferences and wishes and personalised care plans.

ESP - Exploitation screening process: This process was originally in place following the JTAI (Joint targeted area inspection) in Kirklees and consists of a written process to support information sharing. The process involves sending an electronic task or email to the GP to make them aware that a young person had been discussed at the exploitation screening panel meeting.

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.

Health assurance improvement meeting (HAIG) - This is a forum for health representatives to meet share good practise, work in collaboration, receive updates on case reviews and receive local regional and national updates. This is a supportive meeting which occurs quarterly and covers safeguarding children and adults at risk.

ICB - Integrated Care Board.

Implanted Pacemaker - An implanted pacemaker is a small device that is surgically placed in the chest or abdomen to regulate the heartbeat.

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.

NACR - National Audit of Cardiac Rehabilitation.

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.

NCEPOD - National Confidential Enquiry into Patient Outcome and Death.

Parkinson's Disease - Parkinson's disease is a condition that affects the brain. It causes problems like shaking and stiffness that get worse over time.

Parkinsons UK - A charity that aims to support better care, treatment, and quality of life for those suffering from Parkinson's Disease.

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.

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.

Risk Assessment - Clinical risk assessment is a process carried out by clinicians in the field of mental health to reach a judgement on whether the patient will go on to act in a way that is harmful to themselves or others.

Sleep Hygiene - Aspects of environment and behaviour that influence the quality of sleep.

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.

SystmOne (S1) - SystmOne is a centrally hosted clinical computer system developed by Horsforth-based The Phoenix Partnership (TPP). It is used by healthcare professionals in the UK predominantly in primary care.

TB - Tuberculosis is an infection that usually affects the lungs. It can be treated with antibiotics but can be serious if not treated.

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.

Transition - The preparing, planning and moving from children's to adult services.

UCR - Urgent community response teams provide urgent care to people in their homes which helps to avoid hospital admissions and enable people to live independently for longer.

UKHSA - The UK Health Security Agency (UKHSA) is a government agency in the United Kingdom, responsible since April 2021 for England-wide public health protection and infectious disease capability and replacing Public Health England. It is an executive agency of the Department of Health and Social Care (DHSC).

Quality Account 2024/25



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