

Talking, Listening and Working Together

North East Lincolnshire Health and Care Partnership

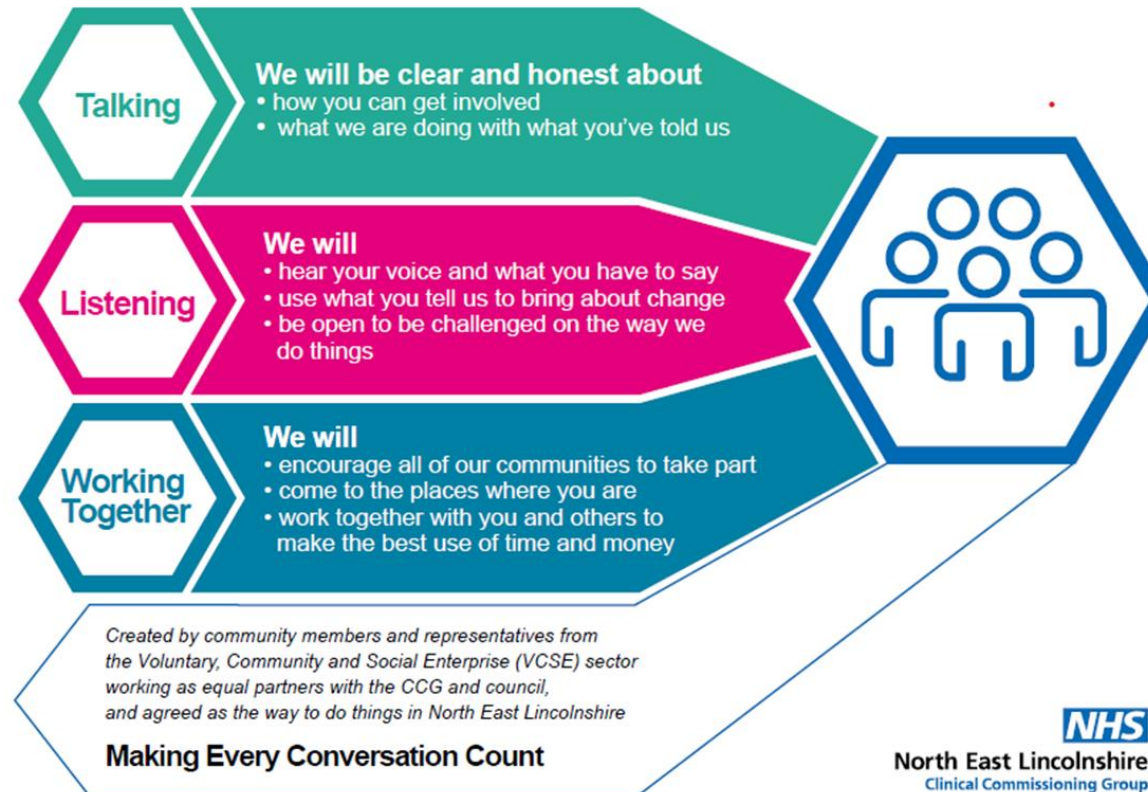
April 6th, 2022

Welcome

- Housekeeping
- Getting the most out of our time this morning
- Session plan
- Help us to get it right - NHS jargon!
- Question Time
- Forms, forms and more forms!

Talking, Listening and Working Together

The North East Lincolnshire Commitment



Strong, Integrated Care Systems Everywhere



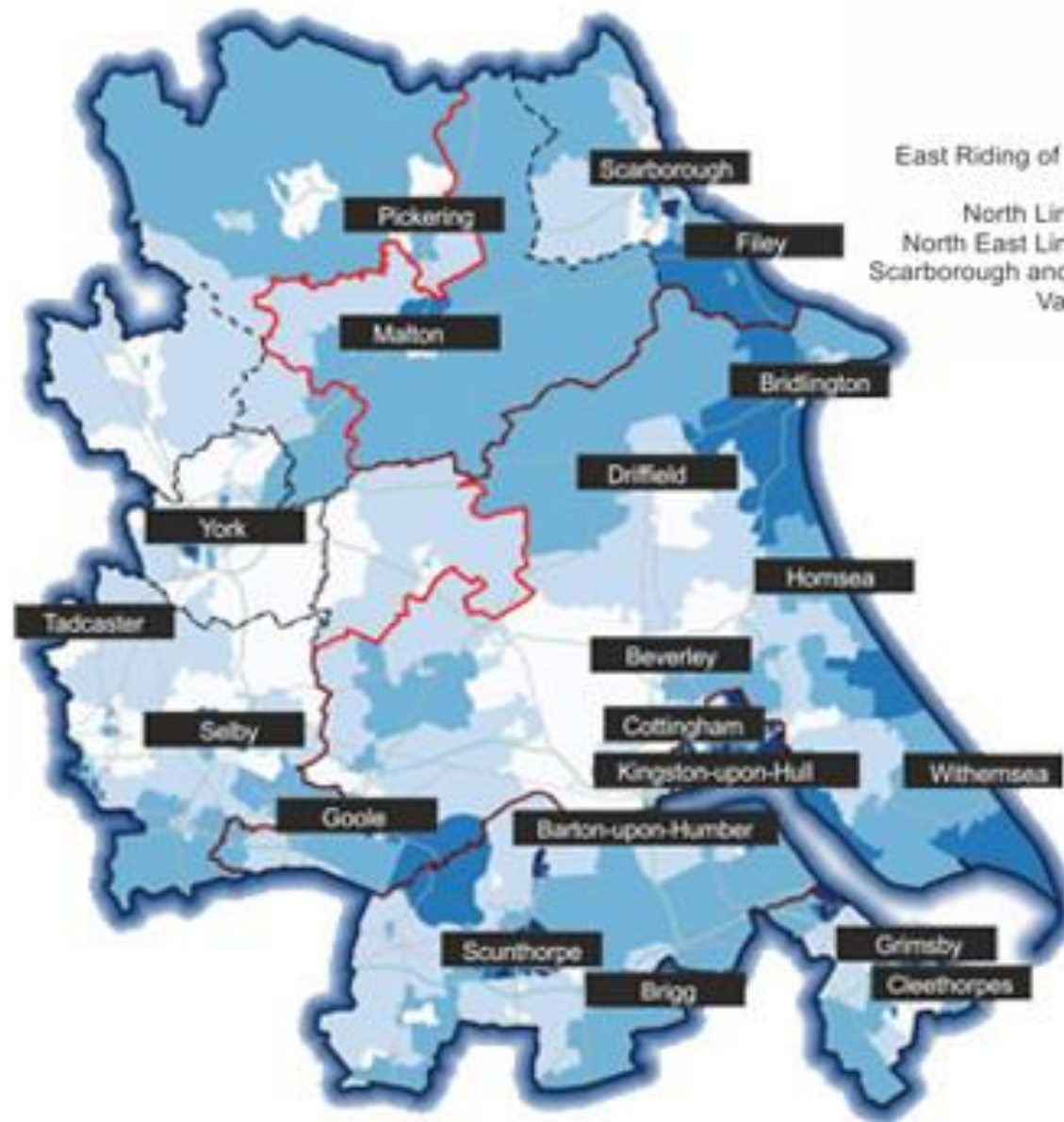
Integrated Care Systems

What does this mean locally?

Julie Wilson, Commissioning Lead, North East Lincolnshire CCG



Integrated Care System (ICS) = Humber and North Yorkshire



East Riding of Yorkshire Clinical Commissioning Group
Hull Clinical Commissioning Group
North Lincolnshire Clinical Commissioning Group
North East Lincolnshire Clinical Commissioning Group
Scarborough and Ryedale Clinical Commissioning Group
Vale of York Clinical Commissioning Group

01/07/2022 (pending parliamentary approval) this will become the statutory NHS body, with an Integrated Care Board (ICB)

Current Clinical Commissioning Groups (CCG) will no longer exist

All of the responsibilities for planning and contracting of health services will transfer to the Humber and North Yorkshire Integrated Care Board

How will the ICS
deliver on it's
responsibilities?

Humber and
North Yorkshire

***Partnerships
and
collaboration***

Provider
Collaboratives

(joint working on
larger scale services /
sharing best practice)

*Responsibilities and funding for some services and
outcomes will be delegated by the ICS to collaboratives
and places*

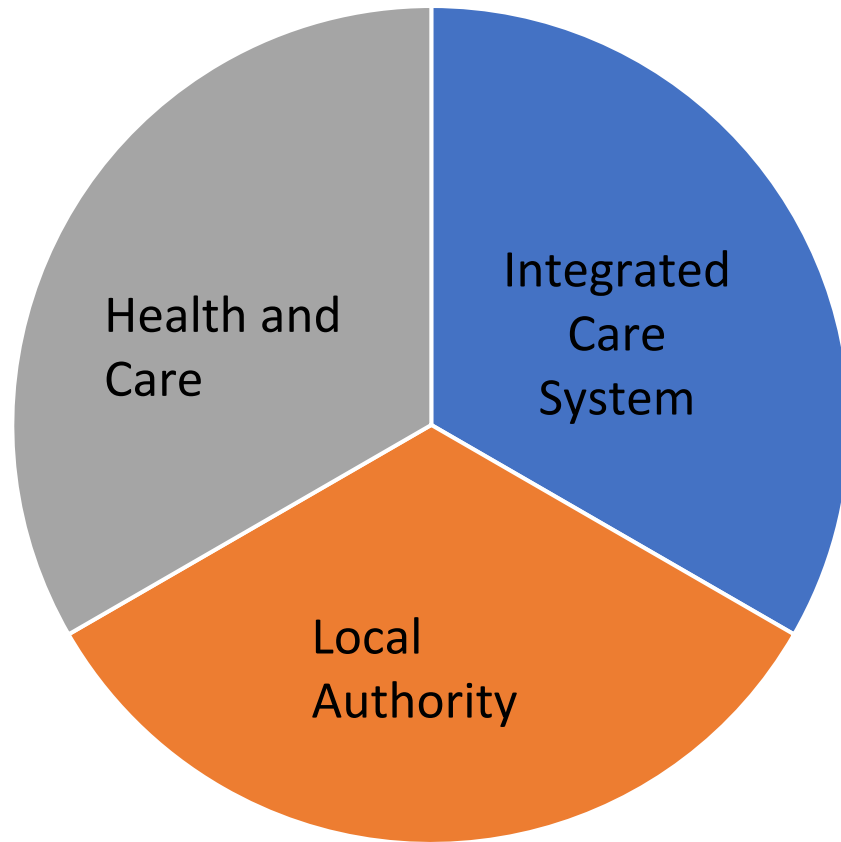
Geographical
Places x 6

(services best
delivered at very
local level)



North East Lincolnshire Health and Care Joint Committee

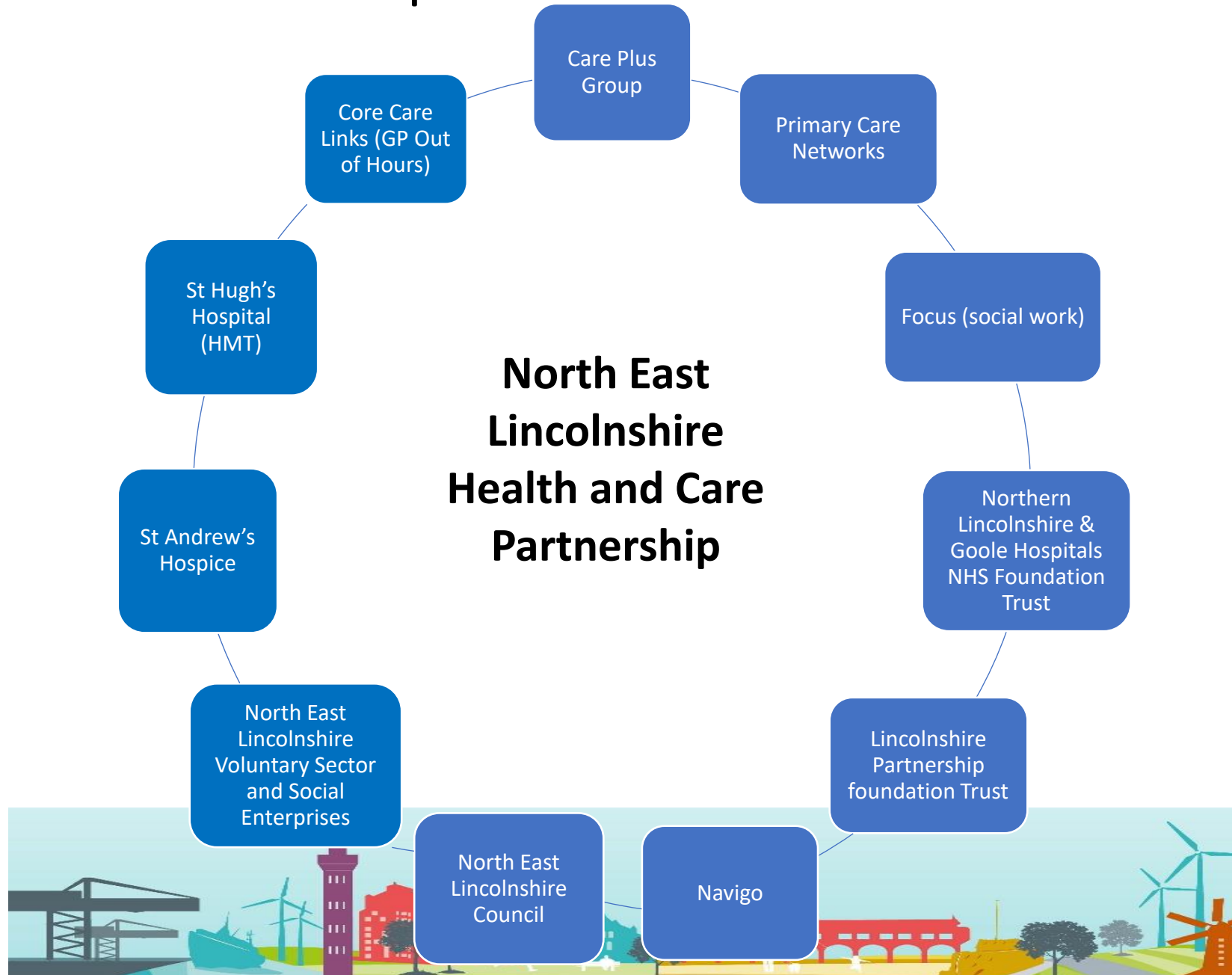
Joint Committee membership



- Local health and care providers / Local Authority / Integrated Care System
- Funding flow, local accountability, assurance
- Strategic leadership and direction of NEL health and care system
- Clinical leadership and community voice
- Full provider involvement and engagement



NEL Health and Care Partnership (HCP)



Proposed Health and Care (HCP)
Partnership Governance

NEL Health and Care
Partnership Board

HCP Professionals
Group

HCP Steering Group
/ Operational Grp
(Engine Room)

NEL HCP Leadership
Group

HCP Community &
Service User Forum

HCP Staff Forum



So What?

- Collectively focus on interests and outcomes of North East Lincolnshire residents
- Collaborate to deliver improvements
- Eliminate variations in health across and between neighbourhoods in North East Lincolnshire
- Improve health and wellbeing through targeted approaches to care delivery
- Help shape services outside of North East Lincolnshire (work with provider collaboratives)
- Deliver integrated services, closer to home



Discussion time

On your table discuss the different ways you have your say now about health and care services. What works well for you?

Share you ideas on how do you think we can involve people from all parts of our community in the future?

Feedback two ways that the group feels work well and two ways to involve people who do not speak up

Talking, Listening and Working Together
in action - improving patient experience
of diagnostic services

Julie Wilson, Commissioning Lead, North East
Lincolnshire CCG

Background – why Community Diagnostics Centres?

- Richard's Report*
 - Implementation of optimised pathways for assessment and diagnosis
 - Separation of urgent/emergency and planned diagnostics
 - Reduced footfall on acute hospital sites
 - Increased service capacity
 - Improve access and reduce health inequalities
 - Workforce: improved clinical training and development of roles
 - Improve digital connectivity
- Local issues with diagnostic waits (see next slide)

[*DIAGNOSTICS: RECOVERY AND RENEWAL – Report of the Independent Review of Diagnostic Services for NHS England – October 2020](#)





Diagnostic Waiting Times Performance Summary

MthYr

February 2022

Provider Name

All

Diagnostic Tests

All



Provider_Short	Total_Act (Incomplete)	Total Within 6Wks	% Within 6Wks	DM01 Target	Tests Carried Out
NLaG	6160	5003	81.22%	99.00%	7892
360 CARE	461	461	100.00%	99.00%	973
HULL TEACHING	233	176	75.54%	99.00%	261
SHEFF CHILDREN'S	51	35	68.63%	99.00%	67
SHEFF TEACHING	29	24	82.76%	99.00%	28
OTHER	26	19	73.08%	99.00%	51
LEEDS TEACHING	21	15	71.43%	99.00%	36
ULH	20	13	65.00%	99.00%	17
HULL SPIRE	4	4	100.00%	99.00%	1
NOTTINGHAM UNI	3	3	100.00%	99.00%	7
Total	7008	5753	82.09%	99.00%	9333

Not all providers deliver all types of tests

Illumina Diagnostics – to be added

Diagnostic Tests	Total_Act (Incomplete)	Total Within 6Wks	% Within 6Wks	DM01 Target	Tests Carried Out
CT	2046	1522	74.39%	99.00%	3527
MRI	1698	1585	93.35%	99.00%	1703
NON_OBSTETRIC_ULTRASOUND	1372	1255	91.47%	99.00%	2550
ECHOCARDIOGRAPHY	570	252	44.21%	99.00%	310
AUDIOLOGY_ASSESSMENTS	495	399	80.61%	99.00%	279
COLONOSCOPY	231	206	89.18%	99.00%	297
GASTROSCOPY	159	140	88.05%	99.00%	188
DEXA_SCAN	132	123	93.18%	99.00%	93
PERIPHERAL_NEUROPHYS	100	98	98.00%	99.00%	91
FLEXI_SIGMOIDOSCOPY	60	58	96.67%	99.00%	61
URODYNAMICS	53	44	83.02%	99.00%	75
CYSTOSCOPY	52	38	73.08%	99.00%	125
SLEEP_STUDIES	40	33	82.50%	99.00%	34
BIARIUM_ENEMA	0	0		99.00%	0
ELECTROPHYSIOLOGY	0	0		99.00%	0
Total	7008	5753	82.09%	99.00%	9333

Services to be included

Imaging	Physiological Measurement	Pathology
MRI	Echocardiography	Phlebotomy
CT	ECG	Point of Care Testing
Ultrasound	Oximetry	Simple biopsies
X Ray	BP monitoring	BNP testing (heart failure)
	Spirometry	Urine testing
	FeNo testing (asthma)	
	Lung Function testing	
	Blood gas analysis	
	Simple Field Tests	



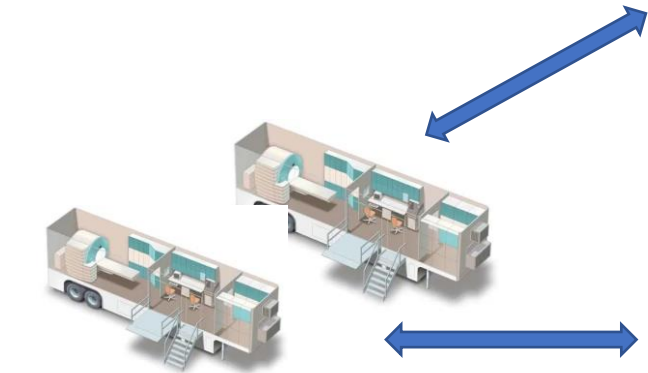
Proposed Service Configuration



Access to diagnostics on hospital site for complex and emergency/urgent provision



New build Community Diagnostics Centre for routine imaging work –
CDC ‘Plus’ - Opportunity for ‘one-stop shop’ (tests, results and treatment / treatment plan all in one go)



Continued use of mobile units to complement capacity



Continued General Practice / Primary Care Network Provision



What stage are we at?

Early April:

- High level business case to NHS England & Improvement to secure capital funding for the build

Further work:

- Further detailed work-up of clinical service model (including plus element)
- Evaluation of potential sites for the centre
- Communications and engagement
- Detailed understanding of workforce baseline and requirements to meet future demand



How can you help?

- Share with us your current experiences
- In your group, discuss your experiences of being referred for tests
- What worked well and what would have made it better?
- What do we need to consider when designing new ways of delivering diagnostic tests?



Discussion Group 2

- In your experience of being referred for tests (or from talking to others who have) what worked well and what would have made it better? Things like...
 - Getting an appointment
 - Getting to the appointment
 - Finding out the results and next steps
- Your views on what is important to patients to get this right



Coffee Break

Feedback

- What is important to patients/carers when they are having a diagnostic test or tests.
- Three 3 key issues from each group

Planning Community Diagnostic Services

- What are the important things to consider to improve patient experience and outcomes?

Question Time



Closing

- Thank you
- Please complete the evaluation – it will help us to plan the next session
- We will send you the slides and notes from today
- Next workshop is:
 - Wednesday 4th May, 10am
 - Wednesday 15th June, 10am
- What shall we talk about?