Transferring Care Safely Group (TCS) Update

Message from the TCS Chair—Dr Nilesh J. Sanganee

Hello, I'm Nil Sanganee Vice Clinical Chair of WLCCG and the new Chair of the Transferring Care Safely Group.

In this first newsletter, I'd like to start by expressing enormous gratitude to my predecessor Dr Nick Pulman who set up and led this group for several years; there are considerable achievements as a result of his work with the committed members of this group which have directly benefited patients and health professionals across our patch, ensuring their care isn't at risk as it transfers between organisations.

Transferring Care Safely is evolving. It has mainly focused on the interface between primary care and secondary care, mainly highlighting concerns that the former may have with the latter. As we move closer to ever more integrated ways of working, we hope that any issues or concerns about transfers of care between a greater number of providers, can be shared by colleagues, in any direction, to improve the quality of the patient experience, ensure patient safety and focus work in the right place.

We hope that the interface between LPT and other Providers eg Primary Care, UHL, will continue to identify ways that we can work better and more effectively together and we are pleased to announce that DHU will be coming on board in the next few months so that any concerns about interactions with their services can be reported to streamline and optimise the patient journey.

We want to focus on patients at the heart of all of this, ensuring that the decisions we make prioritise their care but equally, that the most appropriate health professional or organisation undertakes what sits best with them clinically and professionally.

The learning from the themes that TCS identifies will be taken into the pathway design groups and we hope to share with you, the many interventions that the patient safety team have addressed by way of this newsletter.

There are some particularly pressing issues as a result of Covid around virtual prescribing and the consequences of remote working which are impacting on primary care but other providers too and we have created bespoke groups to tackle these issues, thanks to the feedback you have provided.

Last month, for example, 117 concerns were reported by UHL; 25 in Quarter 2 by LPT and 25 in Quarter 2 by the LLR CCGs, with a large number have been completed.

Please do continue to report your concerns on the Prism template and thank you to all of those teams that are regular reporters through TCS- you help us to identify the challenges in the system and keep our patients safe.

We will endeavour to keep your updated and respond to your feedback and concerns as best we can.

Stay safe

Best Wishes

Nil





Important Dates and TCS Meetings:

15 December 2020 09:00 -11:00 TCS Meeting via MS Teams

18 January 2021 09:00 -11:00 TCS Meeting via MS

November 2020

Purpose of TCS

The TCS Group is under review to establish it as a Leicester, Leicestershire and Rutland (LLR) system group providing a mechanism to manage quality improvement perspective.

The TCS group will provide oversight and guidance to the LLR system to ensure that the safe transfer of care for patients who move between system partners within LLR whilst working together in more integrated ways.

The aim of the group is to be a productive and solution-based place to offer an open forum for discussion, focus on patient safety and act as an early warning mechanism to identify any unintended consequences from pathway redesign. IN A WORLD WHERE YOU CAN BE ANYTHING, BE KIND.

Theme Topics - Professional Behaviour

We fully recognise that when concerns are identified and reported through TCS, we sometimes feel irritated or annoyed with our colleagues or another organisation especially as we are all extremely busy. Our emotional response to address these concerns and achieve quick resolution for our patients and for ourselves can sometimes result in communication that is extremely direct or somewhat accusatory. Our patient safety team colleagues work hard to investigate and respond to the concerns raised and are the recipients of the TCS reports.

Most of the concerns that we review through TCS have multiple elements to them and often have sound and reasonable explanations to justify the decisions made, even if there is room for improvement. It is, therefore, really crucial that when raising concerns, we all consider our language and appreciate others' perspectives, adopting a professional and constructive approach. The TCS committee has adopted the RCGP document attached which sets out some common sense but fundamental principles about how we can all work together for the good of our patients. We hope that you would agree, these are worth adopting within our respective organisations.



Theme Topics

Radiology Imaging Requests

Radiology imaging requests made by non medical practitioners were being declined by UHL's radiology team. It was noted that the requesters were not on the list of approved requesters held by UHL.

Requesting of Imaging Examinations by Non-medically Qualified Professionals

If a practice wishes to apply for a non-medically qualified professional to have access for imaging, they must fill in the application form attached. Please read the Policy for the Requesting of Imaging Examinations by Non-medically Qualified Professionals. This sets out the policy of the Imaging Service within University Hospitals of Leicester (UHL). Please forward completed forms plus any other supporting information to Nicola Pearman (Superintendent Radiographer Radiology Department LGH) at <u>nicola.pearman@uhl-tr.nhs.uk</u> The relevant policy and form accompany this newsletter.

Outpatient Medications

Work is underway by a small working group exploring ideas and in relation to postal and courier services delivering medications, with the exception of controlled drugs, to patients who have 'attended' virtual outpatient appointments.

Complex Wounds

It has been reported that there is an increasing number of patients being sent by community nursing staff to GP Practice Nurses and GP practices for the management of complex wounds. Significant work is underway between Primary Care and LPT to redesign the pathway for patients.

Watch this space for updates





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Good News Stories and Successes

Second Phlebotomy Collection - From Monday 9th November 2020

Major change in service provision and practices ability to adjust to these new timings will take some weeks and months. It is not logistically possible for all 130+ practice sites to be last on the route run for a late collection or for the morning collection.

The CCG and UHL will be reviewing the new arrangements towards the <u>end of December 2020</u>. and this will continue to evolve and adapt as part of a gradual development and review.

The drivers will be working to a tight schedule, please be patient and understanding with them and assist your other colleagues in primary care by ensuring that samples are ready to be collected. Drivers are unable to 'return' to practice for collection of urgent samples.

- Use Orange bag for morning/first collection and if you are a site with once daily collection for samples that require a U/E request; this will allow these samples to processed first on arrival at the labs
- Use <u>Green bags</u> only for <u>all other samples</u> and U/E requests in afternoon/second collection

To contact the collection team on the day for troubleshooting immediate collection issues, please do contact Jason on 07942 301814.





UHL GP Concerns Process - Launched 6 November 2020

The UHL Medical Director, Mr Andrew Furlong launched the reciprocal UHL GP Concerns process on the 6th November 2020 with communication sent to all UHL consultants. In line with the agreed Transferring Care Safely processes this facilitates UHL clinicians reporting issues and concerns focused on the safe and appropriate transfer of care into UHL. These concerns will be shared with GP Practices and the CCGs for response (if appropriate) with system learning as needed to improve the patient journey.

The current process is that reported concerns will be sent to the LLR Patient Safety team and they will forward, via email, on to practices for investigation, learning or response. All clinicians participating in the process are reminded of the importance of remaining professional, objective and patient centric.

Concerns from all providers across LLR are reviewed and themed to highlight system wide issues and required improvement work at the monthly Transferring Care Safely Board meeting. The UHL GP Concerns Process is part of the Transferring Care Safely Framework to promote collaborative working, troubleshooting and identification of gaps and improvements required in commissioned patient care within the wider system.

Home First

Home First

Many complex discharges could be managed effectively for community discharge through the Home First offer. Home First offers integrated rapid response, rehabilitation and reablement, and is supported by the enhanced medical offer commissioned through primary care enabling more complex patients to be cared for in the community.

This service has struggled to effectively communicate the types of patients that could be managed in this way to UHL clinicians resulting in under utilisation of the medical support, and complex discharges without this support. We hope by identifying patients through TCS that potentially could have been managed on Home First, we can create case studies to improve acute discharge behaviours.





Reporting a Concern

GPs and others who use PRISM can report concerns through the system.

https://prism.leicestershire.nhs.uk/HISCore_PathwayShow.aspx?p=3110

Anyone without access to PRISM can report via the LLR CCGs' Patient Safety

on <u>LLRIncidents@EastLeicestershireandRutlandccg.nhs.uk</u>

or UHL Patient Safety Team - uho-tr.uhlgpconcerns@nhs.net

and LPT Patient Experience Team - lptpatient.experience@nhs.net



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If you would like more information or have suggestions for future editions, please do get in touch with the LLR CCGs' Patient Safety Team on <u>LLRIncidents@EastLeicestershireandRutlandccg.nhs.uk</u>

