



Primary Integrated
Community Services Ltd

Primary Integrated Community Services



Quality Account 2024/2025

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1.0 Introduction

Welcome to the Primary Integrated Community Services (PICS) 2024/25 annual quality account. All providers of NHS care are required to produce an annual quality account, showcasing the work undertaken during the year to continuously improve service quality. We are proud to be able to share with you the fantastic achievements that our staff, patients and carers have accomplished together.

PICS continues to deliver a wide spectrum of services that fall under four main pillars: GP Practice, Community Services, Out of Hospital Services and Primary Care Network (PCN) Services. Despite the diverse range and breadth of our services, one thing is consistent: our core value, 'We care'. This remains at the forefront of our service delivery, ensuring high quality, evidence-based services that are safe, responsive and have patients at their heart.

PICS staff numbers have been stable over the past 12 months. Whilst we have welcomed a new service providing primary care medical cover at Lings Bar in Gamston, we have also sadly said goodbye to some of our community services that have been transferred back to Nottinghamshire Healthcare NHS Foundation Trust. Having a stable executive team and Board has aided consistency for staff during uncertain times and we continue to pride ourselves on providing a positive workplace that is supportive, enabling staff to learn and develop in an environment that promotes wellbeing.

Our governance structure remains robust, and we continue to strengthen patient safety with the implementation of the Patient Safety Incident Response Framework (PSIRF). We will continue work around PSIRF and the patient safety strategy in 2025/26 and we commit to sharing learning both internally and externally.

As the PICS Chair, Medical Director and Managing Director, we are proud to present this report which we hope gives a comprehensive and insightful account of our quality achievements for 2024/25 and our priorities and ambitions for the year ahead.



Anita Dixon
Chair



Dr Neil Fraser
Medical Director



Karen Frankland
Managing Director

2.0 About PICS

PICS is a local health care service provider, founded and co-owned by local clinicians. Established in 2013 with less than 20 staff, PICS now employs just under 500 staff. Divided between the four pillars of the organisation, staff work in either GP Practice, Community Services, Out of Hospital Services or Primary Care Network (PCN) Services and are supported by a strong corporate team. PICS has a reputation for delivering high quality, evidence-based, patient-centred care. This is evidenced through our audit work, clinical outcomes and patient and stakeholder experience feedback. The organisation's value base is underpinned by the principles and values of the NHS Constitution. Fundamentally, the core value of PICS is 'We Care'. This caring philosophy extends beyond our patients, their carers and families to our staff, partners and all the people we work with.

Our values:



We are patient-focused

We are can-do

We are empowering

We create a learning environment

We create evidence-led solutions

We create integrated, safe services

PICS also supports and advocates the principles and values that guide the NHS.

Our 'can do approach' is integral to how we work. Through collaboration with a wide range of health, social and third sector providers we provide innovative and creative services. We enable delivery of safe and effective care that is responsive to local need.

3.0. Accountability

PICS meets, and is compliant with the Fit and Proper Person Requirements (FPPR) as set out in the Health and Social Care Act, 2008, (Regulated Activities), Regulations 2014: Regulation 5. PICS has a Board of Directors who hold accountability for ensuring the efficacy of the business, for leading the strategic direction and overseeing safe and effective service delivery.

Board of Directors

Name	Role
Mrs Anita Dixon	Chair and Non-Executive Director
Mrs Karen Frankland	Managing Director
Dr Neil Fraser	Medical Director
Dr Paul Scullard	Non-Executive Director
Dr Junaid Dar	Non-Executive Director
Dr Umar Ahmad	Non-Executive Director
Dr Andrew Pountney	Non-Executive Director

Board attendees are invited to attend when required. They do not routinely attend every Board meeting.

Board Attendees in 2024/25

Name	Role
Jonathan Bemrose	Finance Director
Lyn Gregory	HR Manager
Julie Redshaw	PA to the Senior Management Team

Data Protection

PICS has a designated Data Protection Officer (DPO), an Information Governance Lead and a Caldicott Guardian (Medical Director). All Information Governance/Data Protection/GDPR policies are written and updated annually by the DPO and are accessible to staff through the Bluestream policy library.

All patients receive a copy of the organisation's 'Data Protection Privacy Notice for Patients' and a 'How we use your information' leaflet that gives a comprehensive explanation on data collection, confidentiality, partner organisations, legislation and patients' rights. Sharing of patient information takes place once informed consent has been given by the patient and recorded.

In June 2024, PICS submitted its responses to the NHS Data Security and Protection Toolkit and PICS met all required Standards set by NHS England. PICS reported nine data breaches via the toolkit during 2024/25, but none of them required reporting to the Information Commissioner's Office (ICO).

Where information is shared with another organisation, Information/Data Sharing Agreements are in place.

Patient Experience

PICS continues to seek feedback on patient experience with the aim of increasing patient satisfaction, experience and safety. Feedback is collected through a variety of methods and reported quarterly to Board.

In addition to the patient satisfaction survey feedback, PICS also collates unsolicited feedback on the 4Cs: complaints, compliments, comments and concerns. This is recorded through Datix and is analysed and reported quarterly to Board.

PICS commits to the following pledge when complaints are made about our services. We will:

- ✓ Listen to you.
- ✓ Work with you to resolve your concerns as quickly as possible.
- ✓ Signpost you to other services who can help if we are unable to resolve your concern.

The website gives information on how to submit complaints which can be done either verbally or in writing. Complaints can also be given verbally over the telephone or face to face. This is summarised in a flyer for those patients that do not have access to the internet.

PICS takes all feedback seriously and is committed to resolving complaints, ensuring that apologies are given, appropriate actions are taken, and learning is disseminated across the organisation.

Clinical Governance

Robust governance structures are in place to ensure that quality and safety are integral factors in everything we do. The Medical Director has overall responsibility for clinical governance within the organisation and is supported in this arena by a full time Quality and Clinical Governance Lead Nurse. Reporting directly to Board, the PICS Clinical Governance Committee meets monthly and is chaired by the Medical Director. The structure and membership of this committee, along with terms of reference are reviewed and updated annually.

The committee reviews all complaints and significant events except for third-party incidents, to ensure appropriate actions have been taken to improve patient safety and experience. Duty of candour is applied where needed.

In addition, the committee has responsibility for reviewing and disseminating clinical audit findings, safety alerts and reviewing safeguarding activity. Good practice and learning are shared via a monthly governance update and discussed at team meetings.

Considerable work was undertaken during 2023/24 to support the implementation of the Patient Safety Incident Response Framework (PSIRF). Our first Patient Safety Incident Response Plan (PSIRP) was published in April 2024, outlining how we would respond in a proportionate way to patient safety incidents. Further work has been undertaken on PSIRF during 2024/25 and this is outlined in section 4.

Risk registers are held at service level and discussed with staff regularly at team meetings. Service level risk registers are contemporaneous and feed into the corporate risk register

managed by the Managing Director. Action plans are in place to mitigate risk where indicated.

Finance

This year has been one of consolidation for the organisation with fewer external factors impacting our financial position. However, there has still been the loss of several long-standing community health services to the host NHS trust. These have been an important part of our portfolio and all involved were sad given the excellent service which has been provided to our patients for many years. The financial impact of this service reduction has been mitigated and our financial plans for 2025/26 and beyond are realistic and confident.

Our local health and care system is severely challenged financially with considerable savings required across all areas. The early narrative from the new government is positive about both the NHS and more importantly the shift of care out of hospital, which could be beneficial for us. This direction of travel is welcomed but we are aware that there is often a disconnect between political ambitions and what happens on the ground, and we recognise the timescales involved in refocusing care from one setting to another, which does not happen overnight. Nevertheless, our leaders are part of the various “place-based partnerships” locally and PICS remains a trusted, can-do player in the system.

Regular reporting of finances continues with updates to every Board meeting, emerging positions presented to the Finance Committee, and draft/detailed discussions taking place during regular updates with the key leaders.

The Finance Committee membership is unchanged, as it provides an appropriate balance of executive/professional expertise with a level of challenge, scrutiny and support from the Board Chair and other non-finance representatives. The terms of reference and membership have been reviewed, and the meeting is deemed to be working well and continues to be fit-for-purpose. The meeting is held every 6-8 weeks, and the minutes of the Finance Committee are presented at Board meetings. The agenda covers the wider understanding of the organisational strategy and business growth and development.

There has been further change in the finance team during 2024/25 with staff turnover. At the time of writing, the finance team is at full strength and the new joiners are real assets to us.

The 2023/24 audit was a success with the external audit partner describing it as the “best year yet”. Preparation and planning for the 2024/25 audit is underway with positive conversations with our BHP auditors.

Safeguarding

Safeguarding vulnerable adults, children and young people is an integral role of all PICS employees. PICS has an organisational Named Nurse for Safeguarding Adults/Children and Young People who is trained to level four. The Medical Director is the organisational Medical Safeguarding Lead, supported by the Deputy Medical Director. Level four GP support and safeguarding supervision for the Named Nurse is provided by the ICB. Each GP practice managed by PICS has a lead GP and lead administrator for safeguarding.

Safeguarding self-assessments (SSAF and Section 11 for PICS) are reviewed and updated annually to provide assurance of safeguarding training, policies and activity that are congruent with the Nottinghamshire Interagency Safeguarding Children and Adults procedures. The Named Nurse for Safeguarding provided support to PICS General Practices to ensure submission of their individual SSAFs to the ICB by the required date in September 2024.

All staff within PICS receive mandatory safeguarding training at a level that is appropriate to their role and in alignment with the intercollegiate documents. The figures for compliance can be seen below and have remained above the organisational target of 90% except for quarter four. Compliance will be monitored and discussed with line managers to ensure staff are given time during work hours to complete mandatory training.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
MANDATORY TRAINING				
% Compliance of Safeguarding Adults	93%	91%	91%	88%
% Compliance of Safeguarding Children	95%	93%	93%	86%
% Compliance of Prevent	94%	91%	91%	91%

Safeguarding supervision is available as required with the Named Nurse and additional training on learning themes from serious case reviews was rolled out through PCN staff and continues as required.

Safeguarding referrals are made through the Multi-Agency Safeguarding Hub and activity is reported and monitored through Datix, enabling trend analysis and comparison to local/national data. Information is provided on request to comply with serious case reviews, and we ensure sharing of themes/learning within teams. An annual safeguarding report has been produced for the attention of Board and the wider organisation..

Corporate Governance

There has been a rapid growth in the portfolio of PICS over the last two years leading to more pressure in the system. Following a time out, the Board made the decision to have a period of consolidation to ensure we maintain our fit for purpose position and minimise any risk to quality before taking on new business. This has been a positive decision, and an analysis of our internal environment has enabled us to review existing services in more detail, drive up quality and improve efficiencies where needed. The quality and care of our patients and the health and wellbeing of our staff are of the utmost priority.

As the Health and Wellbeing Guardian representative of the Board, the Chair ensures wellbeing is a standing agenda item and that we are adhering to the 9 NHS Board principles. The Chair and other Board members have attended two staff conferences inviting staff to participate in a "Question and answer" session. This has proved to be popular with good feedback from staff and will continue. Next year the non-executives will periodically attend staff meetings or participate in an organised "meet and greet," We anticipate this will give staff the opportunity to see that Board members care and provide Board members with an opportunity to listen to staff face to face.

As demands and financial constraints across the whole of the NHS system continue, we are very aware as a Board that we must make savings where we can.

Looking forward into the 2025/26 financial year, we have made the decision to take on another practice, Saxon Cross after doing full due diligence and ensuring we were in a good financial position to take this on. The Medical Director is working hard to provide continuity of care across all our practices and improve efficiencies and quality. Our practices are all now in a much more stable position

Over the course of the 2024/25 financial year, PICS made significant strides in ensuring stability and growth across various departments. In the process of introducing a new corporate and meeting structure aimed at streamlining the flow of information from the Board to staff and vice versa, ensuring that all team members are well-informed and aligned in our goals.

As part of our ongoing commitment to fostering integrated and safe services, we have implemented a new on-call procedure and held workshops with our service managers to overhaul and align our business continuity procedures which has been very well received.

Our relationship with Primary Care Networks (PCNs) has continued to strengthen, and we are excited about the potential for further Integrated Neighbourhood Working. We look forward to continuing to provide high-quality care in partnership with our local communities.

4.0 Review of 2024/25 objectives and additional achievements

Statement of Assurance from the Board

This quality account demonstrates the achievement of our objectives for the year 2024/25 and sets out our priorities for 2025/26. We will be persistent in our ambition to achieve the best possible care and outcomes for patients, pursuing patient safety and clinical excellence in everything we do. The priorities for improvement, therefore, reflect our ambition and underpin our organisational transformational change approach. In addition, the priorities take into consideration any additional requirement needed to deliver services under the NHS standard contract.

PICS can demonstrate through action that we continue to provide responsive, evidence-based services to patients. Below is a review of the priorities we set for 2024/25, along with other achievements. These are presented under the CQC 5 domains of safe, effective, caring, responsive and well-led.

Safe

- **During 2024/25, we enabled our staff to have a better understanding of patient safety in the NHS and reducing risk and harm to patients.**

From April 2024, patient safety syllabus training levels 1 and 2 were made mandatory for staff to undertake. Some staff have now completed this training but due to complexities with monitoring uptake, the remaining staff will undertake PSIRF training via Bluestream from April 2025. This will enable easier and more accurate monitoring of completion. In addition to the above training, we introduced the concept of PSIRF at our staff conference in June 2024 and have also trained 10 managers in Patient Safety Incident Investigation which was commissioned from an approved external training provider. Focus will now shift to reviewing and updating PICS PSIRP, embedding learning across the system and uploading patient safety events via Datix to the national Learn From Patient Safety Events platform (LFPSE). In addition, we will consider how PICS will

utilise patient safety partners and work on improving engagement with those involved in patient safety incidents.

In addition to this work, PICS has taken part in the 'PSIRF in Primary Care' pilot run by Health Innovation Network, South London. Whilst PSIRF is not currently mandatory for primary care, PICS has taken the approach of adopting PSIRF for the whole organisation which includes the three general practices that we manage. Taking part in the pilot has enabled shared learning, sharing of resources, input into education appropriate for primary care and maintaining focus on progression of the PSIRF journey. Our commitment to being involved and help shape PSIRF in primary care has earned PICS the early adopters' digital badge which we proudly display.



- **During 2024/25 we made Oliver McGowan training mandatory for staff.**

All PICS staff are required to undertake this training. Level 1 learning disability and autism training is undertaken via Bluestream, and we currently have 81% and 90% completion rates respectively. Staff that have undertaken level 1 training can then access level 2 training which is either via a 1-hour webinar for non-clinical staff or a full day of face-to-face training for clinical staff. These are the recommended courses and have input from people with lived experience. Over half our staff have completed level 2 and we will continue to ensure staff are compliant with this training, including new starters to the organisation.

Effective

- **During 2024/25 we aimed to improve the percentage of gynaecology patients that were treated within the 18-week referral to treatment.**

2024/25 has been a challenging year within community gynaecology due to ongoing industrial action in the early part of the year and issues with provision of GPs with a specialist interest, both of which increased clinic cancellations and had a knock-on effect on waiting times. The average percentage of patients achieving a referral to treatment time within 18 weeks was 46% which is below our target of 90%. We are having monthly contract review meetings with the ICB to develop an action plan to improve on achievement of this target and this work will be ongoing.

- **PICS delivers effective services with patient outcomes at the heart.**

We deliver services using best evidence care and treatment aligned to local and national guidance. During the past 12 months some PICS staff and services have been either shortlisted or successful in gaining awards as detailed below.

- A total of seven PICS staff were either nominated or category winners in the Nottingham and Nottinghamshire GPN awards. Hollie Bloom (Clinical Care Co-ordinator, Ashfield South PCN) won the Education Award for the amazing work she does in supporting the development of other nurses. Darren Beaman (Clinical Care Home Nurse, Arrow PCN) won the Innovation Award for his work in supporting care home patients and Sharon Smithurst (ANP, Meden Medical) won the Leadership Award for her support in developing other nurses. Other nominations included Natasha Powell (Care Co-ordinator, Mansfield North) in the 'Above and Beyond' category and Marcia Dawes (Lead Nurse, Whyburn), Hazel Firmin (Lead Nurse, Primary Care) and Clare Watson (Clinical Lead for Health Inequalities, Nottingham West PCN) in the Leadership category.



- PICS was shortlisted in the Outstanding Collaboration category in the East Midlands Business Masters Awards 2024.
- PICS works collaboratively with the Nottinghamshire PCNs, and this resulted in being shortlisted as finalists in the Excellence in Collaboration category of the East Midlands Chamber Business Awards for Nottinghamshire.
- Hazel Firmin, Lead Nurse for Primary Care PCN Nurses, has been shortlisted as Mentor of The Year at Nottingham Trent University Awards. The winner will be announced at an event ceremony in May 2025.
- The Nasal Flu in Nurseries pilot project poster was awarded highly commended at the Nottinghamshire Primary Care annual conference.

- The Tissue Viability Service Improvement Group of which PICS is a member won the award for wound care collaborators at the Journal of Wound Care national awards. This celebrates the work that has been undertaken by the group on working towards reducing pressure ulcers and associated harm across the system.
- PICS Acute Home Visiting Service for Mid Notts won the Value for Money category of the NHS Nottingham and Nottinghamshire Health and Care Awards (see story below).
- At the same ceremony, PICS Health Inequalities staff from Nottingham West PCN won the Health Inequalities Award as part of the Broxtowe Learning Disability Collaborative and the Nottingham West Pharmacy Cardiology Team were shortlisted for the best outcomes award.

Congratulations to everyone involved in the Acute Home Visiting Service in Mid Notts, which won the Value for Money category of the NHS Nottingham and Nottinghamshire Health and Care Awards this week! Gerald Ellis, Programme Manager GP Clinical Pharmacy; Mid Notts PCN Support, and AHVS Business lead said: “We are so proud of the service we deliver, and I was delighted to be joined by Dr Karen Fearn, GP at Collingham, CD for Newark PCN and participating GP on the HVS Oversight Group; Louise Kalka Deputy Clinical Services Lead for PICS; and Eve Elliot, HVS Advanced Nurse Practitioner for PICS to celebrate.

Award winning Acute Home Visiting Service



Photo: Gerald (right) with Karen, Louise and Eve.

Caring

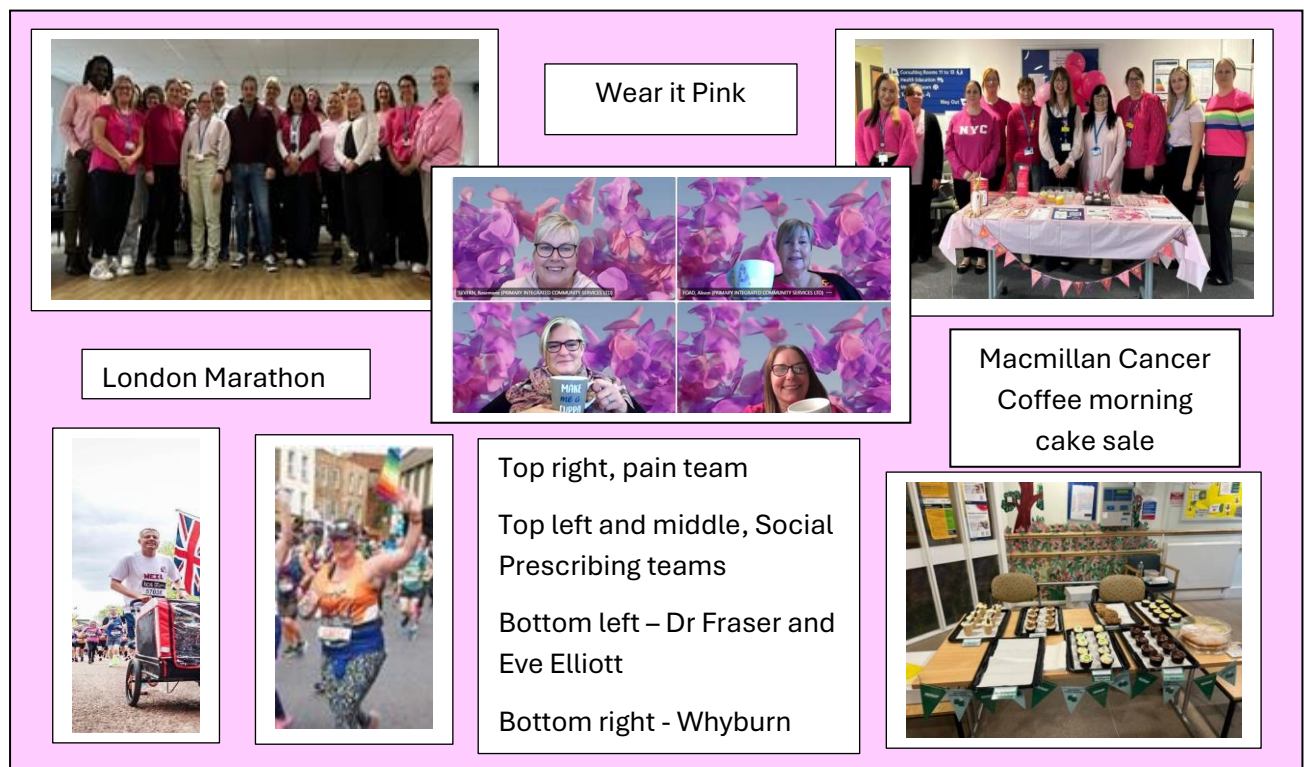
- **Staff continue to demonstrate their commitment to PICS core value of ‘We Care’.**

Not only do they care about patients which is demonstrated in the compliments and feedback we gather but they care about the wider communities, including charities. During 2024/25 PICS and our staff have supported charities in the following ways.

- Whyburn Medical Practice supported Macmillan cancer coffee morning, raising £140. The morning was supported by Whyburn’s patient participation group who sold cakes that had been baked by themselves and the staff.

- In April 2024, two members of PICS staff ran the London Marathon, both raising money for Motor Neurone Disease Charities. Dr Neil Fraser (Medical Director) ran to raise money for Stand Against MND and Eve Elliott (Acute Home Visiting Practitioner) for the MND association. They both successfully completed the marathon.
- PICS staff from across the organisation supported 'Wear it Pink Day', raising money for breast cancer awareness.
- PICS staff supported Christmas jumper day, raising money for Save The Children.
- PICS donated £200 pounds to local food banks for reaching the target of staff completing the staff survey.

Below is a selection of photographs of our fabulous fund-raising staff

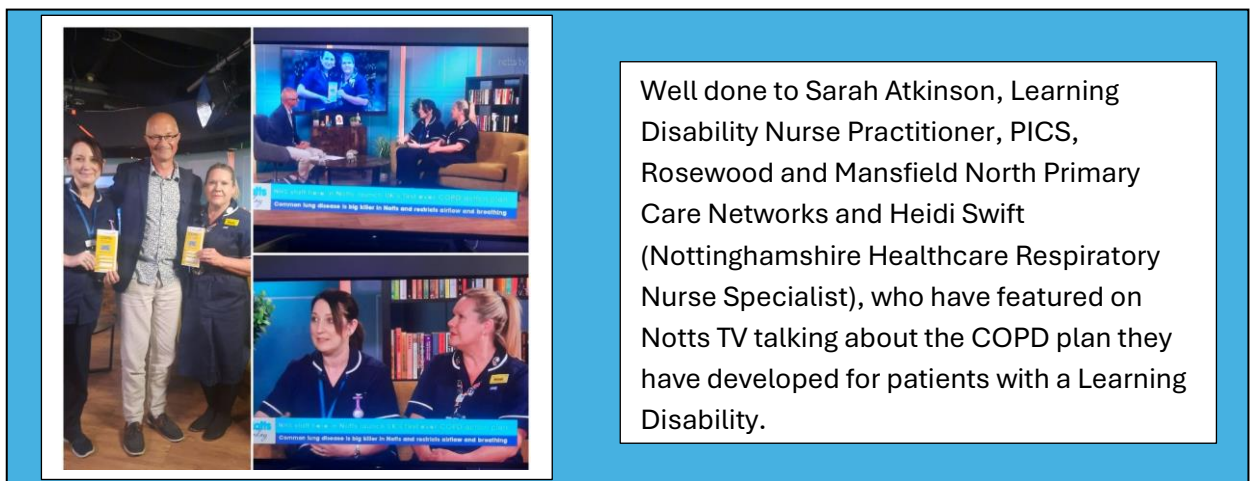


Responsive

PICS has undertaken work with those experiencing health inequalities to identify areas for service improvement and/or patient experience.

- The pain service has been working with the Thalidomide Trust and Nottingham University to better understand pain and suitable treatments for people living with disabilities associated with the drug Thalidomide. They have co-produced a pain pathway and looked at commissioning of services for this cohort of patients who may have special needs associated with their pain and disability.
- PICS has supported the CAPPeD research study. Our three GP practices have been patient identification sites for the study which is looking at pain recognition and management in patients with dementia.
- PICS provided Specialist Diabetes Nurse involvement in a low-calorie diet project to identify eligible patients with type 2 diabetes for intervention. This was conducted across three PCNs with the involvement of 16 general practices.

- PICS has been commissioned to provide a spirometry service to increase diagnosis of those with respiratory illness, particularly COPD, to enable them to be prescribed evidence-based medication and access lifestyle approaches (including pulmonary rehabilitation) to improve their outcomes.
- ✓ PICS has supported a project to deliver nasal influenza vaccinations to eligible children within nursery settings.
- ✓ PICS staff have been key in facilitating workshops for people with learning disabilities (LD) in Nottingham West PCN. PICS has been improving the care for patients living with an LD in Mid Nottinghamshire through the employment of a PCN LD Nurse Practitioner. This work has included designing and bringing to life a COPD action plan for patients with learning disabilities, cognitive impairment and poor literacy, with the aim of helping them to have a better understanding of and gain some control and autonomy over their condition. This has been a collaborative piece of work between Sarah Atkinson (LD Nurse Practitioner in Rosewood/Mansfield North PCNs) and Heidi Swift (Respiratory Nurse Specialist, Nottinghamshire Healthcare) – see below.



We endeavour to continue our support in pilots, projects and services that tackle health inequalities and improve access to evidence-based health care.

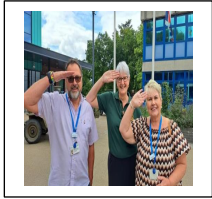
Well-led

- **During quarter 4 of 2024/25 we applied for the 'Gold' award in the Defence Employer Recognition Scheme.**

Results from this will be announced later in 2025. In addition to our gold application, we have continued our commitment to the armed forces community, supporting patients, staff and the wider community. Specifically, we have:

- assisted veterans to identify themselves and be recorded as military veterans within their general practice record.
- promoted the veteran friendly scheme to other practices within the Primary Care Networks and encouraged them to sign up.
- supported local veteran walks.
- supported VE day events and celebrations.
- supported Armed Forces Day by attending Nottinghamshire Police Headquarters Big Brew Event and other local parades.
- supported poppy selling for Armistice Day and made staff aware of local events in recognition of the sacrifices made by our Armed Forces past and present.

- encouraged staff within the organisation to take part in #SaluteOurForces to pay tribute to the British Armed Forces community for their hard work, dedication and effort. A selection of staff taking part can be seen below.



- attended a cadet weekend to deliver a session on careers in the NHS to over 100 Nottinghamshire cadets – see below

PICS were invited by Major Ellison (Cadet Force Adult Volunteer (CFAV) from D squadron of the Nottinghamshire Army cadet Unit) to attend a cadet weekend camp in Chilwell and give a talk on careers in the NHS. We were delighted to accept his invitation and eight staff attended to represent PICS and a range of disciplines. We were able to present to over 100 cadets during the afternoon of Saturday 23 November. The cadets were split into two age ranges and each group received a one-hour presentation with the chance to ask questions and get moving with some light exercise and stretching delivered by Gareth Dixon, Health and Wellbeing Coach. The cadets and ACFVs were engaged and keen to ask questions. The following staff for attending to talk about their role/profession:

- Karen Frankland – non-clinical roles
- Jo Fleming – Clinical Pharmacist
- Neil Fraser – GP
- Emma Alder – Registered Nurse
- Gareth Dixon – Health and Wellbeing Coach
- Louise Lee – Paramedic
- Fiona Blackwell – Physiotherapist
- Rose Severn – Social Prescribing Link Worker.



Speaking to armed forces cadets about opportunities in the NHS

Feedback from Major Ellison was very positive, and he advised that a number of cadets were now considering careers in the NHS and had asked for further information.

- During 2024/25, we held staff question and answer sessions at our staff conferences to enable feedback and questions to be asked directly of Board members.**

We also had question boxes for staff who wanted to ask questions anonymously. This was a great and very positive way for staff to 'be heard' and give feedback directly to the executive directors and chair of the Board. We aim to have these types of sessions at future staff conferences. In addition, the chair of the Board in her role as 'Wellbeing Guardian' has joined team meetings to have discussions directly with staff on how we can improve wellbeing and experience for our employees.

The results from the staff survey in November 2024 have been shared and highlights can be seen in section 10. Overall, the results compare favourably to the wider NHS staff survey results. We aim to address areas for improvement by facilitating further forums with staff where their views can be heard.

5.0 Priorities for improvement 2025/26

Building on achievements from 2024/25 and to address areas that require improvement, the following are our priorities for 2025/26:

- **In 2025/26 we will continue our journey to improve patient safety.** This will be achieved through:
 - review and amendment (where required) of the PSIRP based on 2024/25 patient safety incident data
 - utilising the systems engineering approach to patient safety incident investigations
 - increasing the number of after-action reviews undertaken across the organisation in response to certain types of patient safety incidents
 - inputting to LFPSE through the Datix system (go live date planned for Q1-Q2)
 - continue to be part of the PSIRF in primary care pilot facilitated by HIN South London. This will be in partnership with the Nottingham and Nottinghamshire ICB.
 - Monitor and increase compliance with PSIRF mandatory training.
- **In 2025/26 we will review and improve where needed our complaints process with an emphasis on improving experience.** This will include:
 - undertaking the NHS complaints standards organisation self-assessment tool during quarter 1-2
 - formulating an action plan based on the results of the organisation self-assessment
 - reviewing the complaints policy and information available to the public on the complaints process
 - reviewing training requirements of our staff in dealing with complaints.
- **In 2025/26 we will aim to improve efficiency with the use of appropriate and safe ambient artificial intelligence (AI).** This will be achieved by:
 - reviewing our current use of AI within both clinical and administrative settings
 - having a plan to roll out the use of appropriate ambient AI in a safe, risk-assessed way
 - ensuring the safe and appropriate use of AI by recording, investigating and learning from any incident arising from the use
 - evaluating the use of AI.

6.0. Our Services

PICS provides a diverse portfolio of services across Nottinghamshire, supporting general practice and the wider health and social care system. A brief overview of the services we provide is given below; our portfolio falls into three categories:

1. Directly commissioned Clinical Commissioning Group (CCG) services
2. Commissioned through sub-contract arrangements
3. Commissioned by Primary Care Networks

Directly commissioned services

Acute Home Visiting

The service supports 36 General Practices across Mid Notts with same day visits to patients in their own home, including residential and nursing care. A highly skilled and dedicated team of Home Visiting Practitioners and Emergency Care Practitioners provide acute and sub-acute same day visits to clinically assess, diagnose, and treat patients at home where safe to do so. This results in reducing inappropriate hospital admissions and providing safe, effective, responsive, and timely clinical care to patients. The team carries out approximately 900 visits per month and prevents approximately 300 admissions per month.

Community Gynaecology

This service is led by PICS and provided in partnership with Nottingham University Hospitals NHS Trust (NUH). The service is Consultant-led and they work alongside GPs with Special Interest to provide an accessible and clinically excellent service, thereby enhancing and improving gynaecology community care. The service is provided for patients in the greater Nottinghamshire area. Care provision has demonstrated high patient satisfaction rates and reduced secondary care activity.

Community Pain Management/ME/CFS/Long Covid

This community pathway service provides care to patients registered with a GP in Greater Nottinghamshire, Mid Notts and Bassetlaw. Further service expansion during 2024/25 encompassed the Long Covid Fatigue Service.

A multidisciplinary team of clinical specialists utilise a biopsychosocial model to help patients with persistent pain conditions and chronic fatigue syndrome (ME/CFS and Long Covid). The service supports patients to get the right diagnosis and treatment under our Specialist Physio pathway and enhance their quality of life through improved symptom management. The service provides holistic patient centred care through individual treatment or group work, depending on their needs. The Pain Service also hosts a Young Person's pathway in close conjunction with the Paediatric Pain Service at NUH.

GP Practice

PICS currently manage three general practices within Nottinghamshire:

- ❖ Hama Medical Practice, Kimberley
- ❖ Meden Medical Services, Warsop
- ❖ Whyburn Medical Practice, Hucknall

Each practice has a Practice Manager, Deputy Practice Manager and a range of clinical and admin staff. The practices are supported by PICS corporate team and the central quality audit group.

Commissioned through sub-contract arrangements

Community Services

The community services described are commissioned by Nottinghamshire Healthcare NHS Foundation Trust and subcontracted to PICS for delivery.

From quarter 1-3 of 2024/25, PICS managed specialist community nursing services for cardiology, respiratory (including cardiac rehabilitation), diabetes, non-malignant palliative care, proactive care. These services were predominantly provided in Nottingham West except for cardiology which was also provided in Nottingham North and East. Due to the financial situation of Nottinghamshire Healthcare, PICS were served notice on the

subcontract and the staff were Tupe'd over to Nottinghamshire Healthcare at the beginning of quarter 4. The above services are now solely provided by Nottinghamshire Healthcare.

Palliative Care – Mid Nottinghamshire

PICS is part of the “End of Life Care Together” Integrated Delivery Model for Mid Nottinghamshire. This service is therefore commissioned through the Mid Nottinghamshire Alliance and is provided to patients registered with general practices in both Mansfield and Ashfield and Newark and Sherwood PCNs.

PICS work in partnership with statutory and third sector organisations to collaboratively support patients at the end of life by provision of holistic, evidence-based care. Patients with a palliative prognosis and who are not expected to survive more than 12 months have access to the integrated care delivery model. In addition to individual patients' interventions, PICS provides an outreach Specialist Palliative Care Nurse service and clinical triage.

Lings Bar

From 1 January 2025, PICS commenced a contract to provide GP-led medical cover for the three rehabilitation units at Lings Bar Hospital. Working alongside Nottinghamshire Healthcare colleagues, the service provides medical input through a primary care model. The service provided is Monday to Friday from 8am to 6pm and ensures that patients receive high quality primary care medical management tailored to their needs. Alongside the multi disciplinary team, the GPs oversee complex medical management of conditions and provide prompt clinical decision making to support patient recovery and discharge. The collaborative approach between PICS and Nottinghamshire Healthcare enhances patient outcomes, reducing unnecessary hospital admission and support seamless transition back into other community settings.

Care Navigation (commissioned through the Integrated Care Board)

PICS employs eight Care Navigators to support patients across Nottinghamshire. Of these eight, six operate in Mid Nottinghamshire, with one Care Navigator assigned to each Primary Care Network (PCN), while two support Nottingham West. The NW care navigators are subcontracted through Nottinghamshire Healthcare NHS Foundation Trust

The Care Navigation Service plays a crucial role in coordinating patient care, providing daily operational multidisciplinary team (MDT) support to identify individuals at risk of losing their independence, being admitted to acute care, or being readmitted after discharge. By proactively engaging with patients, carers, and their families, the service ensures they receive the most appropriate support to maintain their health and wellbeing.

Key responsibilities of the Care Navigators include:

- Coordinating MDT meetings to enhance patient care planning and risk management.
- Providing high-quality non-clinical and administrative support to GP practices and healthcare teams.
- Identifying and assisting patients with growing or high risk of deterioration, ensuring timely intervention.
- Facilitating access to appropriate community services, social care, and voluntary sector support.
- Actively contributing to GP-led MDT meetings to support integrated care approaches.
- Supporting Integrated Care System (ICS) Population Health Management projects, aimed at reducing healthcare inequalities and improving outcomes across the population.

By enhancing collaboration between healthcare providers and ensuring patients receive personalised, proactive care, the Care Navigators play a vital role in improving patient experiences, reducing hospital admissions, and promoting independence within the community.

Primary Care Networks (commissioned on behalf of PCNs)

Electro cardiology (ECG) 24-hour monitoring service

Patients in six GP Practices have rapid access to an ECG fitting and removal service. The data is analysed by a central provider and results reported back to the GP. Patients receive care closer to home and a timely diagnosis with any relevant treatment.

Clinical Pharmacy

This service is available to the Primary Care Networks federated under PICS and a large team of Clinical Pharmacists and Pharmacy Technicians are now employed to work in General Practices across Nottinghamshire. The team is led by a Clinical Pharmacist Lead, supported by a small team of Senior Pharmacists. The clinical pharmacy team provides a range of pharmaceutical services to support practitioners and patients. These include medication reviews, responding to medication queries, long term condition management and audits to improve quality and safety. Evidence-based research demonstrates that clinical pharmacy in General Practice has helped patients gain a better understanding of their prescribed medication and its use.

Social Prescribing

Social Prescribers work with patients to address non-medical issues that may be causing or exacerbating long term health problems such as mental health and social isolation. Patients receive short term intervention over a 3-month period (longer if necessary), co-producing a personalised care and support plan to improve overall wellbeing. This is achieved by linking into community and other services to have a positive patient impact. This service covers Nottingham West, Mid Nottinghamshire and NNE PCNs. The service is managed by a lead except for Arrow and Nottingham West PCNs, who provide their own line management to the social prescribers in their areas.

Extended Access

PICS administers this service on behalf of GP practices within some of the Greater Nottinghamshire and Mid Nottinghamshire PCNs. Patients can book routine GP and nurse appointments in the evening, at weekends and bank holidays. Acting as an umbrella organisation, PICS provides governance, the necessary information systems and operational support to manage the service.

First Contact Physiotherapists (FCP)

PICS currently employs FCPs on behalf of Mid Nottinghamshire and South Nottinghamshire PCNs. The FCPs are supported by an FCP Clinical Lead who provides support to the team and is a qualified 'Roadmap Supervisor'. Patients are booked into FCP clinics within the GP practices to provide assessment and management plans for those presenting with a range of soft tissue, muscle and joint problems. No initial triage is required by a GP. This enables timely and expert assessment resulting in an enhanced patient journey and reduction in GP workload. FCPs are required to undertake the Health Education England 'Roadmap to Practice' at Masters level to ensure competency.

Health and Wellbeing Coaches

PICS' Health and Wellbeing Coach service currently employs 11 staff, and the team is line managed by a lead who also manages the Social Prescribing Link Workers. The inclusion of the lead role has enabled further service development, with key performance indicators, clinical supervision and additional services being launched in the last year. Of note is the addition of mental health services to the role, meaning Health and Wellbeing Coaches are now supporting patients to improve both their physical and mental wellbeing. Our team of Health and Wellbeing Coaches provides structured coaching sessions during one-to-one or group interventions, helping patients take an active role in their own healthcare and helping

them to lead healthier and happier lives. Health and Wellbeing Coach services help patients to:

- Reduce their risk of becoming ill.
- Improve how they manage their chronic conditions.
- Feel empowered them to make positive decisions.
- Improve blood glucose and lower blood pressure.
- Improve their mental health.

Paramedics

PICS employs 10 paramedics on behalf of the PCNs. The Clinical Lead for the paramedics provides day-to-day line management. The Clinical Lead also provides supervision, education and support as the team undergo further training at Masters' level to complete the roadmap to qualify as First Contact Practitioner Paramedics.

The paramedics' role in primary care has been developed in collaboration with the PICS PCN support team to meet the needs of the patient population within the individual PCNs. Therefore, the roles vary from providing care to frail/elderly or housebound people within their own homes or residential/nursing home settings, to delivering clinics in GP practices where patients have their acute/urgent health needs met. Their role also includes offering advice and support for patients and their carers to adopt self-management strategies for their own health and wellbeing which is personalised to their needs and circumstances.

Mental Health Occupational Therapist (MHOT)

PICS currently employs nine MHOTs across mid and south Nottinghamshire, in four PCNS. The remit of the MHOT is to provide first contact assessments for individuals presenting in mental health distress in primary care followed by brief intervention, self-management advice or referral on to community or other healthcare. MHOTs are core members of the multidisciplinary team and, being dual trained, can effectively work across both physical and mental health domains. They provide both functional and cognitive approaches to care and evidence developed over recent years has demonstrated that OTs can have a key role in primary care, particularly working with individuals with complex presentations that may be driven by social need. PCNs are starting to offer group work addressing local population needs including ADHD, ASD screening, skill-based education and dementia patient support. The MHOTs have a Clinical Lead supporting their professional development including completion of the Health Education England First Contact Practitioner Roadmap, providing a Clinical Psychologist to offer specific Mental Health supervision and all OT governance meetings.

Learning Disability Nurse Practitioner

PICS employs a Learning Disability (LD) Nurse Practitioner on behalf of Mansfield North and Rosewood PCNs to provide specialist advice, care and intervention for this patient group. The focus of the work is to support practices in undertaking the annual health review with a particular emphasis on those patients who have historically been difficult to reach and do not attend the practice for their reviews. In addition to this post, Mansfield North PCN employs a Nurse Associate to support the LD Nurse Practitioner including working directly in the PCN practices, assisting with annual reviews.

During 2024/25, the Learning Disability Nurse Practitioner helped the practices to achieve very high levels of annual reviews. The national target is that 85% of patients with a learning

disability will have an annual review. In 2024/25, Mansfield North practices achieved 94% and Rosewood 93%. These PCNs are in the top three for Nottingham City and Nottinghamshire.

Throughout the year the LD Nurse Practitioner and Nurse Associate have supported learners in both the PCN and from PCN practices, sharing their expertise and passion for learning disability nursing.

Dietitians

PICS employs three dietitians on behalf of the PCNs. They are line managed and obtain clinical leadership from their individual PCNs.

The dietitian's role is primarily to work with the Enhanced Health in Care Homes (EHCH) teams to ensure the nutritional needs of residents are being met, although they also visit frail patients in their own homes as required by the PCNs. By providing adequate nutritional support, patients have:

- better skin hydration and integrity which helps reduce the risk of pressure sores and other symptoms such as dry skin and itching
- stronger immune systems which help them to stay well and manage other conditions more successfully
- stronger muscle mass which enables greater mobility and independence and reduces the risk of falls
- improved mood and better wellbeing.

Wherever possible, dietitians promote early intervention to prevent ill-health caused by poor diet and nutrition. They also make onward referrals where needed and provide education programmes within the care home setting.

Enhanced Health in Care Homes Service (EHCH)

PICS employs clinical staff to deliver the EHCH service within Nottingham West, Newark, Sherwood, Arnold & Calverton and Arrow PCNs. The EHCH service, specified in the PCN Direct Enhanced Service (DES), changed the way care is delivered to patients in residential and nursing homes. Achieved through a proactive model of collaborative working, the aim of the service is to provide the same level of care and support to those patients residing in a residential care setting as those living in their own homes.

Each PCN has adopted a unique delivery model using a variety of clinicians including Advanced Nurses, RGN/RMN nurses, Nurse Associates, Occupational Therapists, Dietitians, Care Coordinators and Clinical Pharmacists. They provide support and care in the form of weekly home rounds, holistic assessments and targeted interventions where needed. They provide personalised care plans for new residents, structured medication reviews and advance care planning.

PCN Nursing

The PCN nursing workforce continued to grow in 2024/25, with PICS now employing 27 RGN nurses and Nurse Associates across nine PCNs.

This year saw the introduction of the 'Enhanced Practice Nurse' into the ARRS role. The criterion for this post is that the nurse has significant experience and master's level education. The nurses are working to support housebound patients and patients living in care homes.

PICS and PCNs continue to support a substantial number of Student Nurse Associates in undertaking the 2-year foundation degree programme to become a registered Nurse Associate. This year we have had 12 students on the programme with 4 of them completing and gaining registration with the NMC. The programme requires them to have an assessor

and supervisor as well as to have insight days and placements. The PICS nurses and wider PICS workforce have been generous in their support for the students.

The PICS Lead Nurse for PCN nurses provides management support to these nurses and acts as a clinical assessor for many of the students. She attends regular meetings with academic staff from both Derby University and Nottingham Trent University regarding individual students as well as about development in the academic programmes. She also attends a Midlands Nurse Associate forum to develop and shape the role of Nurse Associate in Primary Care.

There have been successes in terms of professional development. Two of the RGN nurses have qualified as Non-Medical Prescribers and another has undertaken a General Practice Nurse Mid-Career Fellowship programme which has given her the skills to undertake a quality improvement project.

At the ICB General Practice Nursing Conference, one of the nurses won the Education Award for her work in supporting the development of students and colleagues and another won an award for innovation in care home nursing.

Prostate-Specific Antigen Monitoring Nurse

PICS employs a part-time PSA monitoring nurse on behalf of Rosewood PCN. She supports practices in the monitoring of PSA levels in men who have prostate pathology. Her strong links with secondary care mean that patients receive a safe and seamless service.

GP Assistants

PICS employs four GP Assistants (GPA) on behalf of two PCNs. The four GPAs are based within surgeries and possess a combination of administrative and clinical skills. This broad skill set enables them to be flexible, meeting the demands of the service on the day.

Two of the GPAs completed the GPA university-based programme this year and received their qualification from Derby University.

7.0 Patients are at the centre of everything we do

7.1 Patient feedback

Patient feedback steers improvements to enable provision of high-quality care and experience. Across all our services, patient feedback consistently shows a high level of service satisfaction as can be seen from the Figure 1 below. The data represents the percentage of patients/stakeholders scoring the overall satisfaction of the services as good, very good, excellent or outstanding. Improvements have been made to the feedback survey, both in methods of data collection and streamlining of data collected.

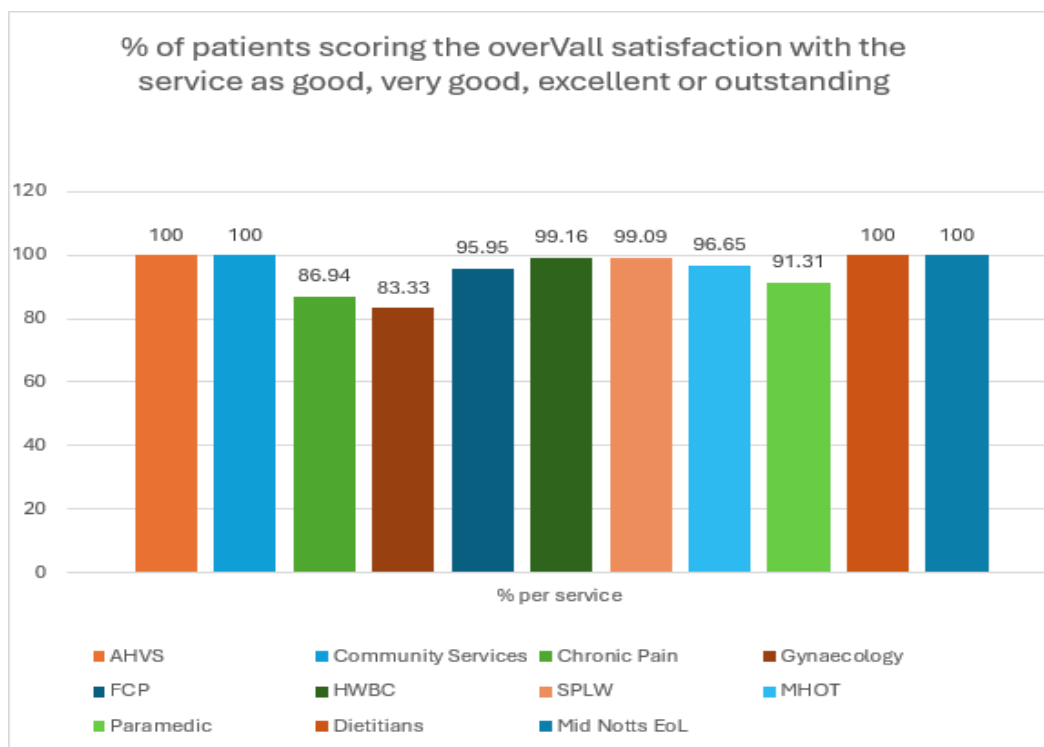


Figure 1 - patient feedback by service

PICS actively promotes patient, carer, family and stakeholder feedback. In addition to the patient survey, other unsolicited feedback is captured on Datix. We collect data against the 4Cs: compliments, comments, concerns and complaints. Feedback by type and department can be seen in Figure 2 below.

In total, 273 pieces of feedback were received and uploaded to Datix between 1 April 2024 and 31 March 2025. 25 of these were rejected as duplicates, leaving a total of 248. This is an identical number to the previous twelve months. The increase in rejected feedback can be explained by a system error in Datix which was resolved following an upgrade.

The feedback can be split into the following:

Compliments -111

Complaints - 129

Concerns - 5

Comments – 3

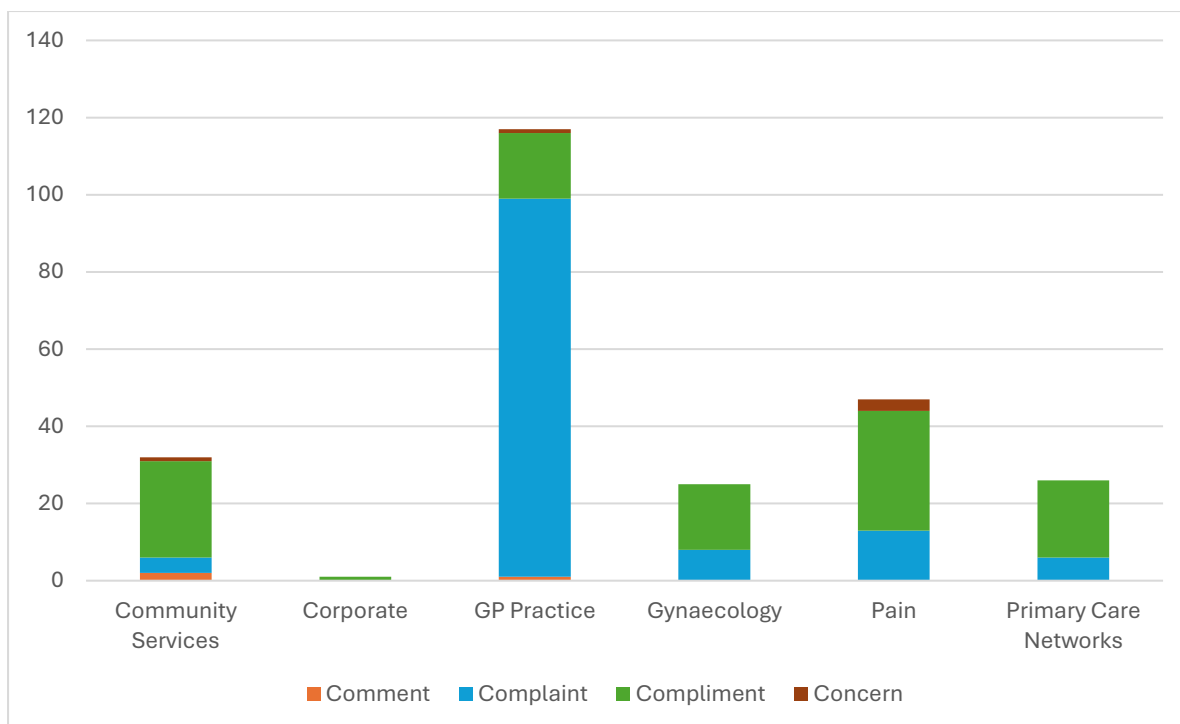


Figure 2. Feedback by type and department 1 April 2024- 31 March 2025

Overall, complaints have increased by 3.2% from 2023/24 and compliments by 1%. Whilst there is currently no national 2024/25 data for comparison, NHS Digital (2024) reported a 5.4% increase in complaints between 2022/23 and 2023/24.

GP Practices received the highest number of complaints at 98, a slight decrease of 4.8% from the previous 12 months when 103 were recorded. Whilst there is no comparable national data for the same period, NHS Digital noted that primary care complaints rose by 6.8% in 2023/24. However NHS Digital also reported that of the complaints received for primary care, only 31.6% were fully upheld. Not all complaints from 2024/25 have been reviewed at clinical governance committee yet but of the 91 that have been reviewed and approved, 30% were fully upheld, a comparable figure to the national data.

The three largest complaint subjects were clinical treatment (37.9%), attitude and behaviour (20.9%) and communication (16.2%), which is consistent with the findings from national primary care data (NHS Digital 2024). Communication was the biggest lesson learned at 34%. This is unsurprising as there is increasing evidence that poor communication and lack of empathy are major causes of adverse events, patient dissatisfaction, and, therefore, complaints (British Medical Journal (British Medical Journal 2017). The General Medical Council (2018) feel that communication issues are at heart and running through most, if not all complaints. The evidence suggests that most complaints are down to miscommunication. PICS adopts a no-blame attitude to staff and encourages the opportunity for learning/reflection and apology to the patient where needed. The second largest lesson is delivery of care (11%) and diligence (6%).

All complaints are reviewed and approved by the Clinical Governance Committee and any learning or positive feedback is disseminated throughout the organisation in a monthly update. It should be noted that not all complaints from 2024/25 have been reviewed and approved by clinical governance as yet.

Compliments are reviewed by the service manager and fed back to teams. Compliments form an important part of PICS feedback as they can boost morale.

Themes from compliments were:

- Excellent clinical care
- Dedication
- Being caring/empathetic/kind
- Being proactive/effective/Informative
- Being supportive, listening and showing understanding/patience.
- Showing professionalism/demonstrated excellent knowledge.

A quarterly feedback report containing both friends and family and Datix feedback is produced for Board.

7.2 Patient Safety and Risk

Since the adoption of PSIRF, we are no longer required to differentiate between serious untoward incident and other types of incidents. PICS has a Patient Safety Incident Response Plan that outlines how we will investigate or review patient safety incidents and during 2024/25 we have only initiated one Patient Safety Incident investigation (PSII) around a delayed diagnosis which is currently ongoing. Other types of response have been around a concise investigation for a pressure ulcer, documentation/process reviews and some after action reviews for medication errors.

259 significant events were recorded on Datix with 20 being rejected as either a duplicate or not meeting the criteria. Therefore, a total of 239 were either approved or awaiting approval, a 27.5% increase on 2023/24. Due to the changes arising from the implementation of PSIRF, all PCN staff now report significant events through Datix which may be a reason for the increase. Other possible explanations for the increase could be an increased awareness of reporting through training or an increase in incidents.

Figure 3 below shows significant events by department and category for 2024/25.

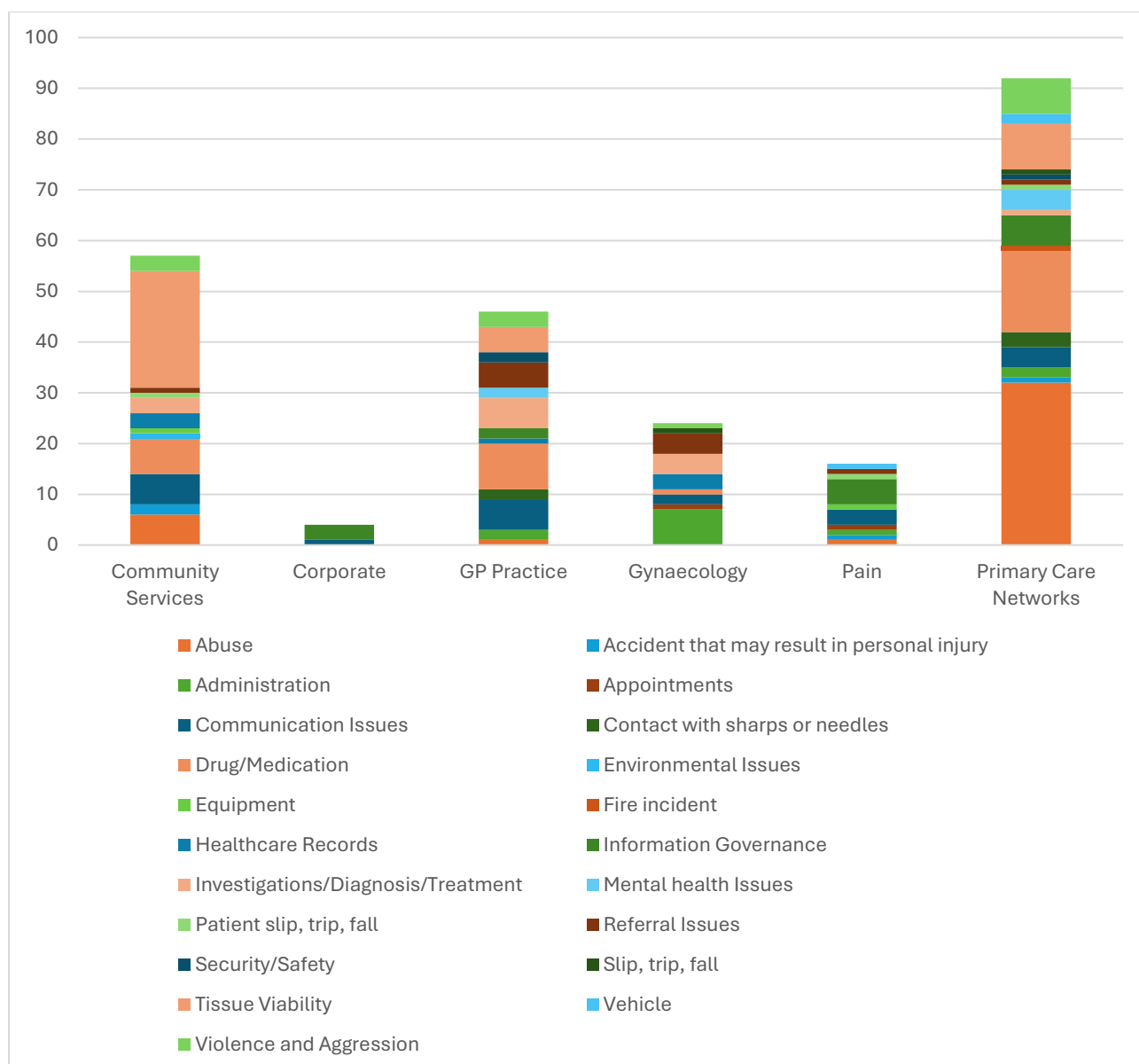


Figure 3. Significant events/incidents by departments and category

In 2024/25, PCN services were the biggest reporter with 34.7% of their incidents being safeguarding concerns/referrals. Safeguarding concerns/referrals (under the category of abuse) was the largest category overall, accounting for 16.7%. It should be noted that whilst PICS staff use Datix for the reporting of safeguarding concerns/referrals, this is usually concerning abuse alleged to have been committed by perpetrators that are not PICS staff. It is therefore evidence of good practice and staff having a good understanding of their role within safeguarding of vulnerable adults, children and young people.

The second largest category of incident was tissue viability for the reporting of pressure ulcers. The majority were reported by Community Services who were the second biggest reporting department. 79.5% of the pressure ulcers reported were present on admission to a PICS service. Where the pressure ulcer developed during provision of a service, they were found to be unavoidable and appropriate investigations were conducted for category 3-4, deep tissue injury and unstageable pressure ulcers. These numbers demonstrate good

tissue viability care to our patients that didn't result in harm. PICS has representation at the integrated care system (ICS) wound care work stream which is addressing tissue viability as a patient safety issue across the wider system and at national level. Whilst pressure ulcers aren't a major issue on PICS' patient safety profile, presence within this workstream enables sharing of good practice and innovations.

Similarly to 2023/24, GP practices were the department with the third highest number of reported incidents with 45. The five categories most reported by GP practices were drug and medication (nine incidents), problems with investigations, diagnosis or treatment (six incidents), communication (six incidents), tissue viability (five incidents) and referral issues/delays (five incidents). There is not currently any comparable data from NHS Digital as reporting has been paused from September 2023 due to the introduction of the Learn From Patient Safety Events (LFPSE) database. However, previous data show PICS results to be similar in nature to the most common categories of incidents reported in primary care.

Staff can also report incidents that involve other organisations (third party), and we classify these as 'Not a PICS incident'. Whilst they may be classed as a third party, we aim to learn and share wherever possible. We also identify good practice from incidents to share with staff as learning from excellence is very positive and important for morale. During 2024/25, 35 third party incidents were recorded on Datix.

The top three lessons learned codes from the recorded incidents were diligence, staff education/training and communication. As we transition through PSIRF it is hoped that there will be more focus on a systems engineering approach to incidents which in turn will create greater learning.

8.0 What the CQC says about us

Currently PICS manages three General Practices: Meden Medical Practice, Whyburn Medical Practice and Hama Medical Practice. We will be managing an additional practice from April 2025, Saxon Cross Surgery in Stapleford. Saxon Cross Surgery is currently rated 'outstanding' by CQC.

PICS managed GP Practices

Whyburn Medical Practice was inspected in April 2022 and has been given the rating of 'Good'. The CQC said:

'We have rated this practice as Good overall'

We found that:

- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Staff had the skills, knowledge and experience to carry out their roles.
- Patients taking regular medicines and those with long term conditions were not always being monitored in line with national guidance".

The full report can be found [here](#)

Hama Medical Centre was inspected in July 2022 and has been given the rating of 'Good'. The CQC said:

'We have rated this practice as Good overall'

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care. We found that the service had strong leadership from experienced, committed and patient-centred clinical and operational managers.
- Patients taking regular medicines and those with long term conditions were monitored in line with national guidance.
- Staff had the skills, knowledge and experience to carry out their roles.

The full report can be found [here](#)

Meden Medical Practice was inspected in March 2020 with a report being published in April 2020 and was rated as 'Good'.

Further information from the 2020 inspection report for Meden Medical Centre is detailed below.

Meden Medical provides primary medical services to approximately 6,059 patients. PICS manage the service through a General Medical Services contract (GMS)

Ratings for the five CQC inspection domains and comments from the Inspectors were:

- The practice was rated as GOOD for providing safe services. 'The Practice provided care in a way that kept patients safe and protected them from avoidable harm'.
- The practice was rated as GOOD for providing effective services. 'Patients received effective care and treatment that met their needs'.
- The practice was rated as GOOD for providing caring services. Staff dealt with patients with kindness and respect and involved them in decisions about their care'.
- The practice was rated as GOOD for providing responsive services. 'Staff dealt with patients with kindness and respect and involved them in decisions about their care'.
- The practice was rated as GOOD for being well-led. 'The way the practice was led and managed promoted the delivery of high-quality person-centred care'.

The full CQC report can be accessed [here](#)

CQC has now altered the approach to its monitoring regime and has moved to a system whereby data is analysed remotely monthly. There have not been any concerns raised by CQC or follow up inspections (full or focussed) announced at present.

PICS corporate and other services

PICS corporate/other services were inspected in 2017, the full report can be accessed [here](#). CQC undertook direct monitoring activity with PICS services in February 2023 and issued the following statement:

'We have reviewed the information and data made available to us about your service on 20/02/2023. We consider that no further regulatory activity is indicated currently. We reserve the right to keep this under review and it may be subject to change. Please note this is not an assessment for the purposes of section 46 of the Health and Social Care Act 2008.'

The findings of the CQC reflect our commitment to the delivery of high-quality care underpinned by our value base.

9.0 Workforce

PICS believes the pathway to the delivery of safe, quality care starts by ensuring a respected, engaged and motivated workforce, equipped with the necessary knowledge and skills. In addition, we believe that compassionate leadership is required to support and lead the staff.

We have a dedicated Human Resources department to support our large workforce. HR remains committed to:

- ✓ safe and effective recruitment, ensuring the workforce complies with legal/professional requirements
- ✓ comprehensive induction of new staff
- ✓ maintaining the function and update of the electronic HR system
- ✓ retention of the workforce and ongoing HR support for all staff
- ✓ managing employer/employee relations through measuring job satisfaction, employee engagement and resolving workplace conflict
- ✓ providing reliable HR data
- ✓ supporting the application of staff to receive funded apprenticeships through the Apprenticeship Levy.

PICS sees collective organisational leadership as central to delivery of services and maintenance of high-quality care and patient experience. On recruitment, all staff receive and complete:

- ✓ A corporate induction programme
- ✓ An individualised service specific induction programme.

All staff are expected and given adequate time to complete mandatory e-learning training within their induction period. In addition, face-to-face basic life support and fire training is organised ahead to enable new starters to complete this during induction.

With the retirement of both the HR Manager and Workforce and Development Lead during 2024/25, PICS Board has reviewed the corporate structure and specifically these two roles. As both roles were previously part time, they have now been amalgamated into one full time 'Head of Workforce and Development' role.

We have developed a training needs analysis and work collaboratively with Nottinghamshire Alliance Training Hub (NATH) and other institutions to achieve this. During 2024/25 NATH has provided substantial funding for both clinical and non-clinical staff to support staff development. PICS has two staff working alongside NATH as ARRS ambassadors. PICS is committed to supporting staff to attend external education and learning programmes to facilitate their ongoing development of clinical skills and non-clinical skills.

Over the past 12 months we have supported (list not exhaustive):

- 7 staff to undertake the non-medical prescribing course
- 4 staff to successfully complete the Nurse Associate Course and be registered with the NMC. An additional 8 staff are still undertaking the course
- 1 member of the PCN nursing team to undertake a General Practice Nurse Mid-Career Fellowship Programme
- 4 FCPs to undertake injection therapy training
- 1 member of staff to undertake the Mary Seacole Programme
- 1 member of staff to commence a master's in public health
- 2 members of staff to undertake the foundation programme for practice management
- 1 member of staff to undertake a diploma in counselling.

In addition to the above longer courses, we have supported many staff in undertaking shorter courses/study days in training to enhance their practice such as venepuncture, immunisation and vaccination, spirometry, frailty, ear irrigation and infection control.

Internally we have provided additional education sessions on safeguarding, audit, Datix and a variety of clinical topics. We have also facilitated four non-medical prescribing education events with around 30-40 attendees at each session. All staff are advised to attend at least one session in line with PDR/competency requirements.

We continue to have placements for students and receive positive feedback. This demonstrates our commitment to supporting the workforce of the future and our passion for providing excellent high-quality care. This is a priority for the Nottingham Nursing and Midwifery Cabinet, of which we have two members.

Other projects undertaken by the Workforce and Development Lead have focused on:

- ✓ Working with the ICB to roll out the Oliver McGowan Learning Disability and Autism training which is mandatory for all organisations.
- ✓ Input on the Primary Care Workforce Group and Allied Health Care Professional meetings/forums.
- ✓ Working closely with NATH and universities on the Advanced Clinical Practitioner workforce project to assess and standardise the training and qualification requirements of these roles within primary and secondary care. This work will continue during 2025/26.

PICS also ensures that appropriate supervision is in place where required to support specific educational requirements. Clinical supervision is available and accessed by all clinicians across PICS. In addition, safeguarding supervision is available to all staff and restorative supervision for nurses is accessible as required.

During the past 12 months, sickness rates for PICS were lower than for the previous 12 months. PICS sickness and absence rates are consistently lower than the NHS average for England and the Midlands area (see Figure 4 below)

Sickness and absence %	Q1	Q2	Q3	Q4
PICS 20/21	3.73	1.33	2.23	1.27
PICS 21/22	1.7	2.2	3.2	3.4
PICS 22/23	3.9	4.2	3.0	2.7
PICS 23/24	4.2	4.0	4.1	4.5
PICS 24/25	1.6	2.6	2.9	2.4
NHS – England 20/21	4.98	3.99	4.84	4.79
NHS – England 21/22	4.34	5.19	5.66	6.10
NHS - England 22/23	5.29	5.35	5.77	5.0
NHS – England 23/24	4.5	4.9	5.3	4.8
NHS – England 24/25	4.9	5.0	5.4	No data
NHS – Midlands 20/21	5.13	4.28	5.17	4.98
NHS – Midlands 21/22	4.6	5.52	5.96	6.37
NHS – Midlands 22/23	5.6	5.78	6.16	5.44
NHS – Midlands 23/24	4.85	5.26	5.66	5.49
NHS- Midlands 24/25	5.16	5.32	5.99	No data

Figure 4 – Sickness and absence rates for PICS, England and the Midlands

PICS has always given consideration and support for staff wellbeing which may be indicated by our lower sickness rates. The support was significantly increased during the Covid pandemic and much of this has been continued. Staff have continued to be supported in the following ways:

- ✓ Access to mindfulness training and update sessions
- ✓ Open door policy from managers to provide support and troubleshooting as required.
- ✓ Access to My Care Space
- ✓ Wellbeing newsletter and intranet updates highlighting access to resources
- ✓ Wellbeing champions and carers champions
- ✓ Staff conference aimed at connecting staff
- ✓ Restorative supervision for the nursing workforce, aligned to PNA strategy.
- ✓ Freedom To Speak Up Guardian

The Chair of the Board has the role of wellbeing champion for PICS. Considerable work has been done in this area since 2022, including adoption of the NHS England wellbeing framework, wellbeing champions and wellbeing newsletter as highlighted above. The chair also takes time to join staff meetings to discuss issues that may affect wellbeing.

At the January 2025 staff conference, the wellbeing champions introduced the concept of Fika to staff. This is a Swedish tradition that can boost wellbeing and productivity by staff taking a short break to enjoy a drink and snacks with colleagues. We challenged staff to set aside some time with colleagues to practice Fika and send in their photos– see below.



10.0 What our staff say about us

Caring is at the heart of PICS and continues to be our core value. This caring value extends to our staff. We believe that by empowering and providing staff with support to take care of themselves and treating them with compassion and respect, they are better able to provide compassionate care and dedication to our patients, families and carers. This is very much reflected in both our staff and patient feedback.

Whilst 100% of our services are provided on behalf of the NHS, PICS carries out its own staff survey which can be directly compared to comparators. The survey which is conducted through Survey Monkey was open for a period during Q3 of 2024/25; all responses are anonymous to encourage honest feedback from staff. Whilst the NHS is not a direct comparator to PICS because it is a much larger and more complex organisation with a wider variety of roles and working conditions, we do have shared goals, values and purpose of caring for patients.

494 staff were surveyed with 294 responses received. This represents 60% of the workforce. Whilst this response rate is lower than the previous five years, it remains a good response rate when compared with the NHS Staff 2023 survey of 48%. (2024 results are not yet available.) The survey is not compulsory. We strongly encouraged participation, and automated reminders were periodically issued by Survey Monkey along with organisation-wide communications. PICS was keen to support a charity once again this year by donating £200 to a foodbank once a response of 60% had been achieved.

- 88% agree that care of patients is the organisation's top priority.
- 87.8% of staff said if a friend or relative needed treatment they would be happy with the standard of care provided by the organisation.
- 81% of staff say the organisation acts on concerns raised by patients/service users.
- 91% know how to report concerns regarding unsafe clinical practice.
- 88% agree or strongly agree that the organisation encourages us to report errors, incidents or near misses.
- 96% of staff agree that they are trusted to do their job.
- Teamwork, support from colleagues, line managers and leaders all scored highly (as in previous years).
- 90% agree or strongly agree that the people they work with are understanding and kind to one another.
- 90% say they are treated with respect
- 82% of staff stated that they can approach their line manager to talk about flexible working, slightly improved from last year which is encouraging.
- 91% of respondents said they know their work responsibilities – this shows a great level of engagement in their roles and reflects well online management.

Figure 5 – Staff survey highlights

Whilst the staff survey had many positive points, there is always room for improvement. The following are areas for us to work on.

Health and Wellbeing/Burnout

- Whilst 76% of staff say they achieve a good work life balance, 13% of respondents (68 people) reported feeling unwell due to work-related stress in last 12 months. This an improvement from 2023 when the figure was 30% but we acknowledge that further improvement can be made.
- 45% of respondents said they had come to work despite not feeling well, an increase of 5% from 2023.
- 13% of staff said they find their work always or often emotionally exhausting, a decrease of 14% from 2023.
- 71% of respondents said work either always, usually or sometimes frustrated them (71% in 2023).

PICS has recently changed insurers to Aviva – and as result have access to a new Counselling Line which is free to all staff and their families. We will monitor the uptake of this – as the previous supplier was not able to give us any indication of usage. We will market this at every opportunity with line managers/staff. We also have a new occupational health provider which can be used by staff where needed.

Career Development and progression

In terms of learning and development, scores were lower than in all previous surveys.

- Less than half the respondents (41%) were satisfied with their pay. This declined from 47% in the 2023 survey. It is difficult for PICS to meet the demand for pay increases as the full funding is not forthcoming. People are not satisfied with their pay, despite most staff being awarded the 5.5% equivalent of Agenda for Change – acknowledging that not everyone was in receipt of this level of award. PICS continues to lobby the government for the previous non-consolidated pay award the PICS did not receive.

- 44 staff said they would probably look for a job in the next 12 months, similar to last year's figure of 42.

Safety at work

- Staff were asked whether they had personally experienced physical violence at work – 98% stated they had not from patients/service users or relatives, but 5 people stated they had (only 4 out of the 5 people reported it). We encourage staff to report this unacceptable abuse on Datix and offer them support following the event.

The results of the staff survey were highlighted in the staff newsletter. Rather than management producing a list of actions, it was felt that staff should be involved in reviewing the results and suggesting improvements. We have therefore asked staff to make suggestions, and they have the opportunity to discuss ongoing concerns through their line manager, HR or via Freedom to Speak Up route. We also aim to have a staff suggestion, and questions and answers to the board session at the next staff conference in July 2025.

11.0. Quality Performance across our services – directly commissioned services

The five prescribed domains NHS providers are required to report on annually are:

Domain	
1	Preventing people from dying prematurely
2	Enhancing quality of life for people with long term conditions
3	Helping people to recover from episodes of ill health or injury
4	Ensuring people have a positive experience of care
5	Treating and caring for people in a safe environment and protecting them from avoidable harm.

Incorporated into each domain is a set of indicators that NHS bodies have a statutory responsibility to report on (as applicable).

There is no mandate for PICS to report against the domains or indicators. However, as a provider of NHS services we are accountable for the care we provide and therefore this section provides a quality review of our service portfolio, considering the five domains and focuses on:

- **Safe and effective services**
- **Quality improvement**
- **Patient experience**

11.1. General Practice

Overview

PICS currently manages three General Practices, with a fourth coming under PICS management from April 2025. We employ a multi-disciplinary workforce to deliver safe and

effective primary care services in line with the GP contract. Each practice has a Practice Manager and Deputy to operationally manage. Overarching support and leadership are provided by PICS corporate management team. Each practice also employs a Lead GP for clinical oversight. The Deputy Medical Director and the Quality and Clinical Governance Lead Nurse co-ordinate the audit programme across primary care which feeds into the annual PICS audit plan. Due to the retirement of the Lead Nurse in January 2023, each practice now has a designated nurse lead to take on responsibility for leading the nursing team, including audit. However, we are also exploring the possibility of having an overarching lead nurse that will also lead on advance practice and infection, prevention and control.

Safe and effective services

All the practices that PICS currently manages have received a CQC inspection and have been rated as good.

The General Practices have all been assessed as

- ✓ Safe – with clear systems and processes to keep people safe and safeguarded from abuse.
- ✓ Effective – patient care and treatment is delivered in line with legislation, standards and evidence-based guidance.
- ✓ Benchmarked against national and local quality improvement.

All Practices operate to PICS clinical and non-clinical policies and procedures; all policies are ratified and updated on a one-five yearly basis (which is decided by the Policy Review Committee) or as required following updated legislation or other reason. All Practices have business continuity plans in place.

Clinical Audit

A summary of general practice nursing audits can be seen in Figure 6 below.

Additional audits were undertaken across the three practice sites:

- Patients receiving home oxygen and prescribed emollients containing paraffin.
- Several audits pertaining to medication safety alerts requiring action.

Figure 6 Practice Nursing Audits 2024-25

NMP - The aim of the audit was to benchmark prescribing practice of all the non-medical prescribing nurses across the PICS General Practices to the RPS standards. Results were excellent showing competence in all areas when related to the standards.

Emergency equipment – This audit is undertaken annually to give assurance that good systems are in place for checking and maintaining the emergency equipment and drugs in the GP practices and that it is in line with the PICS Emergency Equipment Checking Protocol. Results were good and demonstrated that in each practice a lead was responsible for the checks and overall, these were done as per protocol.

Infection Control – Audits took place across all practices by the Infection Control Leads. Additional audits were undertaken by the ICB infection control team. Any areas of improvement have been detailed in an action plan.

Learning is disseminated from all audits via the Clinical Governance Committee and where indicated improvements are made and audit cycles completed.

Across all the GP Practices managed by PICS there is an evidence base to demonstrate:

- ✓ Patients with long term conditions are offered an annual structured review.
- ✓ Primary Care staff work collaboratively and share appropriate information with multi-disciplinary colleagues in a timely way.
- ✓ Regular multi-disciplinary team meetings take place to aid discussion, reflection and share learning.
- ✓ Appropriate safeguarding measures are in place, including safeguarding self-assessment frameworks, safeguarding clinical and admin leads and regular MDTs.

Quality Improvement

This year has seen significant progress in the recruitment of Lead GPs across all sites, with the exception of Hama, who will welcome their new Lead GP in July 2025. This development marks a positive step toward strengthening on-the-ground clinical leadership, enabling each practice to steer strategic focus and implement improvements more effectively.

Across the board, our practices have made commendable efforts to achieve strong outcomes in the Quality and Outcomes Framework (QoF). While there remain areas for further improvement, we acknowledge the ongoing impact on Meden following the patient transfer from Riverbank last year. In response, our Deputy Medical Director has secured free chronic disease review resources to support long-term condition management. Most practices have adopted this support, which not only boosts QoF performance but also frees up clinical time to focus on broader priorities.

Operationally, we have successfully recruited into Deputy Practice Manager roles. Their addition strengthens the administrative support structure across the practices and contributes to smoother day-to-day management.

This year also marked the launch of the Business Support Group (formerly the QAG group), which has already made a significant impact. Achievements include:

- Implementing a new standardised letter process across all sites.
- Identifying approximately £20,000 in unclaimed funding.
- Taking on responsibility for managing and completing medical reports, thereby reducing administrative workload for practices.
- Securing research status for all three practices.

Looking ahead, following our Medical Director's successful research grant award, we plan to integrate AI tools to meet the contractual online appointment access requirement by October. This initiative is expected to:

- Help manage and reduce the burden of same-day demand.
- Streamline patient access to the most appropriate care pathways.

In parallel, we have subscribed to a population health dashboard that provides meaningful optics on patient outcomes. This will allow us to take a more proactive, data-driven approach to healthcare planning and delivery.

As we move into the coming years, our focus remains on consolidating the progress made, fully utilising our expanding team, and delivering measurable improvements in patient care.

Patient Safety

Safety alerts are disseminated to all staff as per PICS protocol and actions taken as needed. Safety alerts are also discussed at the Clinical Governance Committee as a standing agenda item. Audits are undertaken where required with any follow up action being completed. Incidents are reported through Datix and have been discussed in section 7.2.

Patient Experience

All practices have established patient participation groups, and we have recruited additional patients to some of the groups during 2024/25.

Every year NHS Digital collects data on patient satisfaction with general practice. Data from 2024 was published in July along with comparison to ICS and national data. Whilst one out of the three PICS practices scored similarly to local and national data, two were considerably lower in some categories. This data has been discussed and reviewed at practice and organisational level and based on the results an action plan has been implemented. Actions are outlined below:

- Lead GPs have been appointed for each surgery to oversee the clinical team, lead clinical meetings, review incident and complaints and share learning.
- The new telephone system is now live and has a call back feature which holds the patient place in the queue and calls them back when the phone is answered by the surgery.
- We are ensuring extended access appointments are promoted and used to improve length of time waiting for an appointment and access for those patients that work.
- We are promoting the use of the NHS app to improve digital connectivity in harder to reach groups.
- All practices have pre-bookable and on the day appointments for urgent issues plus appointments that are bookable by 111.
- We are trialling a new did not attend procedure to try and reduce the number of appointments not attended.

When available in July 2025, data for the 2024/25 period will be reviewed.

Datix is also utilised for capturing comments, compliments, concerns and complaints across the three practices managed by PICS. The graph in Figure 7 below shows feedback by type and GP practice from 1 April 2024 to 31 March 2025.

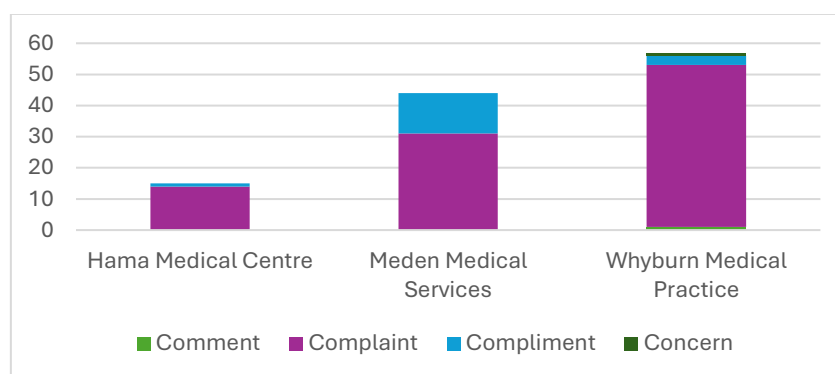


Figure 7 – Feedback by type and practice

Over the past year, across all our GP Practices we have received 17 compliments, one concern and 98 complaints. Complaints have decreased by 4.8%, concerns by 50% and

compliments by 26.8% from the previous 12 months. There is currently no national complaints data for 2024/25 for comparison.

Clinical treatment, attitude and behaviour and communication continue to be the top three themes in general practice complaints. These themes, as previously mentioned, correlate with the findings of national primary care data (NHS Digital, 2023) and research published in the BMJ (2017).

Communication was the biggest lesson learned. Most complaints have been actioned and closed by the Clinical Governance Committee except for a few that are still being resolved.

All practices have up to date and informative websites with information around services, staff and appointments.

Leadership in general practice reflects the culture and values of the organisation. All three practices have been accredited as both Veteran Friendly and Carer Friendly.

11.2. Community Pain Management Service

Overview

The Community Pain Management service operates across Greater Nottingham, Mid Nottinghamshire and Bassetlaw. Patient care is delivered through following the Nottinghamshire and Mid Nottinghamshire Community Pain Pathway (NCPD).

Service priorities are to:

- Maximise patient safety
- Enhance patient and carer experience
- Optimise patient outcomes

Safe and effective service

The multi-disciplinary approach to pain management incorporates a full assessment to rule out 'red' flags and identify 'yellow' flags. Services are mapped to NICE guidance and 'Core Standards for Pain Management'. Local area prescribing guidance is adhered to and evidenced by audit. New patients' management plans are reviewed at monthly multi-disciplinary team meetings and evaluated for compliance with best practice guidance. Referrals to secondary care are only made following MDT discussion.

The multi-disciplinary team is led by a Medical Consultant in Pain Management. Clinical team members comprise:

- Clinical Leads (1 for Nottinghamshire and 1 for Bassetlaw)
- Clinical Nurse Specialists
- Extended Scope Physiotherapists
- Cognitive Behavioural Therapist
- Assistant Psychologist
- Well-being Practitioner and Lifestyle and Activity Coach
- Specialist Clinical Pharmacists
- Professor in Pharmacy

Audit

During 2024/25, audits have been undertaken in hand hygiene and non-medical prescribing. Audit results were very positive and demonstrated good practice. Learning points and actions were discussed with the team, mainly around documenting rationale for choice of analgesia and documenting that the side effects have been discussed with the patient. Reaudit will be due in 2025/26.

Referral to treatment

The service operates to the 18-week referral to treatment standard. The target for patients meeting referral to treatment time within 18 weeks is 92%. This was achieved consistently throughout 2024/25, with an average of 95.4%.

Compliments, Complaints, Comments and Concerns

55 pieces of feedback were received for the pain service during 2024/25. 4 of these were rejected as duplicates. The remaining 51 were divided into feedback type as below in Figure 8.

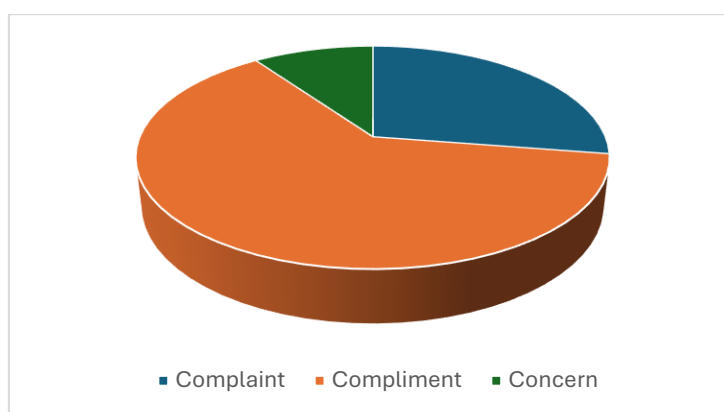


Figure 8 - Pain feedback by type

Compliments was the largest category at 32, followed by complaints at 14 and concerns at 5. The largest themes for pain complaints were attitudes and behaviour, clinical treatment and date for appointment. Themes around lessons learned were largely communication, staff education/training and diligence. 9 pain service complaints for 2024/25 have been actioned and approved following resolution with the patient; 5 are currently either still being investigated or awaiting approval at Clinical Governance Committee. Lessons learned were disseminated via clinical team meetings and appropriate actions taken where needed.

Incidents

17 incidents/events have been reported during 2024/25 for the pain service with one being rejected, leaving a total of 16. Themes of communication and information governance accounted for 8 incidents; 1 of the events was a safeguarding referral made by a pain clinician, evidencing good practice. The remaining incidents covered several categories but no obvious themes. All incidents have been investigated and resolved and lessons learned disseminated across the team and wider organisation where indicated.

Workforce

Ensuring staff have the right skills and training to care for patients effectively and safely is essential. As part of the quality requirements and Board reporting for the pain service, workforce information is collated, and 2024/25 figures can be seen below in Figure 9.

	Q1 Apr - Jun 24/25	Q2 Jul - Sept 24/25	Q3 Oct – Dec 24/25	Q4 Jan – Mar 24/25
Appraisals	89%	85%	92%	87%
Sickness	2.02%	1.1%	2%	4.01%
Vacancies	3%	3%	0%	0%
Mandatory Training	92%	95%	93%	93%
NMC / AHP revalidation	100%	100%	100%	100%
Agency / Bank usage	0%	0%	0%	0%
Prevent Training Compliance	95%	100%	99%	95%
Safeguarding Adults	92%	94%	80%	79%
Safeguarding Children	99%	100%	86%	84%

Figure 9 - Pain workforce data

Staff are given protected learning time to complete mandatory training. The Clinical Leads monitor compliance and take actions to improve completion where needed. As can be seen from above, mandatory training has been consistent over most of the year, with a slight dip below the target of 90% in quarters 3 and 4.

Performance monitoring

A quarterly Quality and Outcomes report is completed and shared/discussed with commissioners. Regular quality contract review meetings have taken place throughout 2024/25. Changes to the NHS quality contract have seen increased quality reporting to the ICB during 2024/25.

Quality Improvement/ Excellence

- The pain service has been working with the Thalidomide Trust and Nottingham University to better understand pain and suitable treatments for people living with disabilities associated with the drug Thalidomide. They have co-produced a pain pathway and looked at commissioning of services for this cohort of patients who may have special needs associated with their pain and disability.

- The pain service supported the British Pain Society's annual scientific meeting in the city at the start of June 2024 – see below.



Members of the pain team present at British Pain Society Annual Scientific Meeting June 2024

Paula Banbury and Caroline Neal from the PICS pain pathway were involved in organising a pre-conference study day with a focus on pain management programmes and primary care, on behalf of the BPS special interest groups in pain management programmes and primary care.

Paula and Caroline were also involved throughout the conference, supporting a pain café patient engagement event at the new central library, and supporting the delivery of the main conference.

Quality Improvement for 2025/26

- To undertake audits as identified in the audit plan for 2024/25 in hand hygiene and non-medical prescribing.
- To improve mandatory training completion to achieve the target of 90%.
- To continue quality improvement work around patients experiencing health inequalities as per quality contract requirements.

11.3. Community Gynaecology

Overview

This service is led by PICS and provided in partnership with Nottingham University Hospitals NHS Trust (NUH).
NUH provides a Medical Consultant as Service Lead.

Safe and effective

The service operates within the applicable NICE guideline frameworks and the Lead Clinician cascades updated guidelines and any other quality standard frameworks. In

addition, safety alerts are actioned where required. Supervision takes place to ensure adherence to guidance.

Referral to treatment

The service operates to the 18-week referral to treatment standard. Following COVID a recovery plan was put in place to increase clinic capacity and by quarter 4 of 22/23 the referral to treatment target had been met. However, ongoing industrial action and issues with GPs with Special Interest availability during the first 2 quarters of 2024/25 has had a big impact on clinic capacity and percentage of patients treated within 18 weeks of referral can be seen in the Figure 10 below. PICS meets with the ICB monthly to review the key performance indicators and discuss issues with service delivery and agree actions for improvement to the waiting times.

	April 24	May 24	Jun 24	July 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
% of patients treated in month against the 18-week target	46%	48%	41%	48%	14%	32%	58%	67%	57%	62%	46%	34%

Figure 10 – RTT for gynaecology service

Complaints, Compliments, Comments and Concerns

There have been 26 pieces of feedback received and recorded for the gynaecology service during the past 12 months which can be broken down to 8 complaints and 18 compliments - see Figure 11.

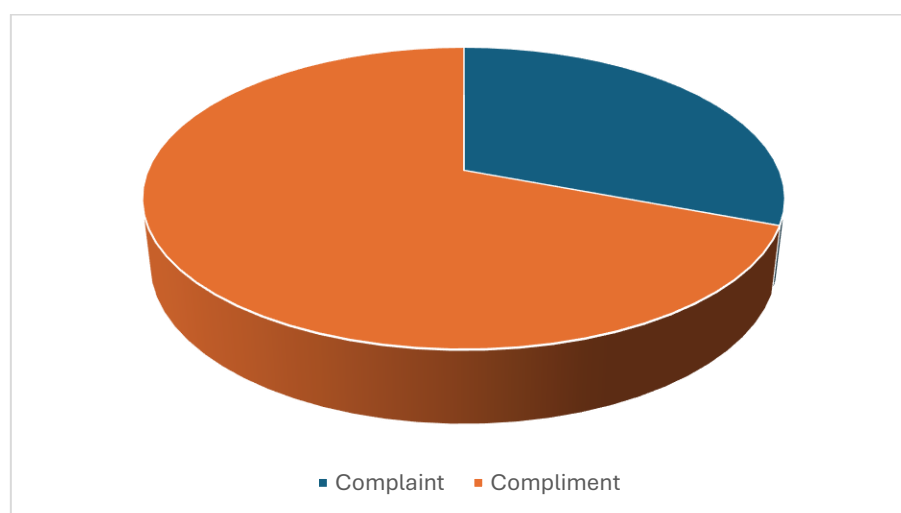


Figure 11 – Gynaecology feedback by type

The main themes from complaints were communication and date for appointment. Unsurprisingly, learning themes were communication, staffing levels and diligence. Most complaints have been resolved and approved by clinical governance, with a few still being investigated or handled by the manager.

Incidents

25 incidents were reported from April 24 - March 25. The main category accounting for 28%, followed by issues relating to referrals (16%) and incidents relating to investigations/diagnosis and treatment (16%). Themes for learning included staff training and education, diligence and communication. Any learning is disseminated appropriately throughout the organisation.

Workforce

Ensuring staff have the right skills and training to care for patients effectively and safely is essential. As part of the quality reporting for the gynae service, workforce information is collated and provided to the ICB as below.

	Q1 Apr - Jun 24/25	Q2 Jul - Sept 24/25	Q3 Oct – Dec 24/25	Q4 Jan – Mar 24/25
Appraisals	88%	100%	100%	100%
Sickness	6.25%	4%	0.3%	4.39%
Vacancies	17%	7%	0%	7%
Mandatory Training	86%	86%	93%	95%
NMC / AHP revalidation	N/A	N/A	N/A	N/A
Prevent Training Compliance	100%	100%	100%	93%
Safeguarding Adults	100%	86%	100%	100%
Safeguarding Children	100%	86%	100%	100%

The drop in mandatory training compliance in quarter 2 can be explained by the recruitment of new HCAs that were added towards the end of the quarter. They completed their mandatory training during induction, hence the raise back to 100% by quarter 3.

On occasions where no Consultants are available from NUH, agency locum gynaecology Consultants have provided clinic cover to ensure continued provision of the service. In addition, the service has utilised freelance Specialist GP cover.

Performance monitoring

A quarterly Quality and Outcomes report is completed, shared and discussed with commissioners. In addition, monthly contract review meetings have been held to review ongoing metrics and achievement of key performance.

Quality Improvement

Quality Improvements made in 2024/25 were:

- ✓ Amendments to data collection methods and reporting to ensure transparency and accuracy of statistics.
- ✓ Collection of data around ethnicity to identify if there are any inequalities for referral within the protected characteristic of race.

Discussions are currently being held with the ICB regarding the action required and plans moving forward for this service

11.4. Acute Home Visiting Service (AVS)

Overview

Following an initial pilot in Newark, the Acute Home Visiting Service was commissioned in 2019 to cover the 41 GP Practices across Mid Nottinghamshire. The team of Advanced Clinical Practitioners and Emergency Care Practitioners undertake acute home visits to patients in their own homes at the request of GPs; they are assessed, treated and cared for in their usual place of residence if safe and appropriate to do so, thus preventing unplanned admissions. The team co-ordinates ongoing care with community and primary care colleagues. 10,865 visits were made during 2024/25, an increase of 11.6% from the previous 12 months.

Safe and effective

To ensure the service provides responsive, safe and timely interventions for patients with an acute care need, all referrals are triaged by a GP for suitability and to assess urgency of response; an urgent 2-hour response can be requested where deemed necessary. This enables patients to receive appropriate, timely care and treatment in their own home, reducing inappropriate hospital attendance and potential admissions. During 2024/25 it was estimated that 3,412 admissions were avoided.

Staff have monthly team meetings with standing agenda items of clinical governance, mandatory training, safeguarding and risk registers being discussed. All staff have group supervision monthly to reflect and discuss clinical cases and share learning. All staff can attend the twice-yearly non-medical prescribing forum. One of the Advanced Nurse practitioners within the services is a qualified PNA and can deliver restorative supervision to the team.

Clinical Audit

During 2024/25, two repeat audit cycles were undertaken within AVS; documentation and non-medical prescribing, evidencing high standards in both. These are undertaken annually and for the past two years, staff working within the service have conducted the audits in conjunction with the deputy clinical lead and disseminated learning through the team. In addition, a hand hygiene audit was conducted with clinicians to review and evaluate hand washing techniques, the results of which were generally good.

Datix - Compliments, Complaints Comments and Concerns

The service received one complaint regarding staff attitude, and this is still being dealt with by the manager. Two compliments and one concern were also received. The complaints were actioned as per complaints policy.

Incidents

As can be seen from figure 12 below, there were 17 incidents reported by the AVS team during 2024/25 which is 3 more than the previous 12 months. 3 AVS incidents were for reported safeguarding of alleged abuse which evidenced good practice, and 9 incidents were for pressure ulcers that were present on admission to the service. 2 incidents were attributed to a third party and 2 were for verbal or physical aggression against staff. All learning was shared via team meetings and across the organisation where appropriate.

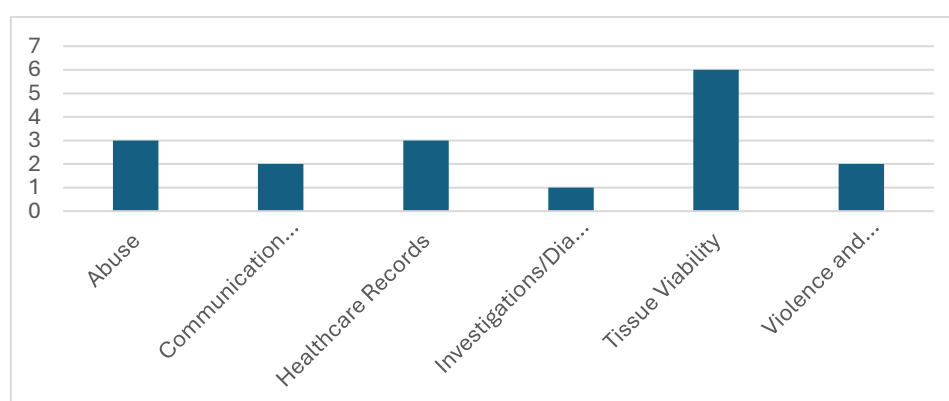


Figure 12 – AVS incidents by category

Performance monitoring

A set of key performance targets are in place to monitor the effectiveness of the service and to identify quality improvement areas. These are monitored through the quality dashboard.

. During 2024/25:

- ✓ 10,865 visits were carried out
- ✓ 3,412 resulted in hospital admission avoidance, equating to 31 % of all visits undertaken
- ✓ 231 referrals resulted in no visit occurring (e.g., inappropriate referral, attended failed visit, GP cancelled, ambulance called prior to visit)

Quality Improvement

The service has:

- ✓ Reduced emergency admissions to hospital
- ✓ Increased GP Practice capacity
- ✓ Enabled patients to receive responsive and appropriate care at home.
- ✓ Contributed to the wider system through financial savings and been awarded a 'value for money' award for Nottinghamshire ICB services.

12.0 - Sub-contracted services

Most community services have now been transferred back to Nottinghamshire Healthcare Foundation Trust and therefore data is no longer collated for these services. The Mid Notts Palliative Care Nurses work as part of the end-of-life alliance and work collaboratively with the specialist palliative care nurses from Nottingham Healthcare Foundation Trust (NHFT). Data for this service is owned and collated by NHFT.

13.0 Primary Care Network Services

All PCN services

Clinical Effectiveness/Audit

PCN services are included in the annual audit plan and audits will be specific to the provision of the service and availability of best practice/evidence-based guidance. Documentation audits were undertaken within the ARRS FCP, OT, Paramedic, and Nurses services. In addition, NMP audits were undertaken for the prescribing nurses, evidencing excellent results. These audits will be repeated annually to ensure learning and actions from the audits have been achieved.

Clinical Pharmacist Audits

Audits have been undertaken by Clinical Pharmacists in General Practice during 2024/25 relating to both quality outcome frameworks and medication safety alerts. Plans are in place to undertake audits on all Clinical Pharmacists who are qualified non-medical prescribers during 2025/26.

Patient Safety

All incidents for PCN services are now reported through Datix to ensure we have a complete picture of patient safety across all our services. This is in line with our Patient Safety Response Plan. Overall, 101 incidents were reported by PCN staff; 8 were rejected as not meeting criteria leaving a total of 93. A breakdown of incidents by service and category can be seen on the page below in Figure 13.

Performance Data

For many of the PCN services, specific performance data is not yet available either due to the recent commencement of the service or the national/local difficulties with data collection. We do however have data for both the social prescribing service and health and wellbeing coach service for some of the PCNs.

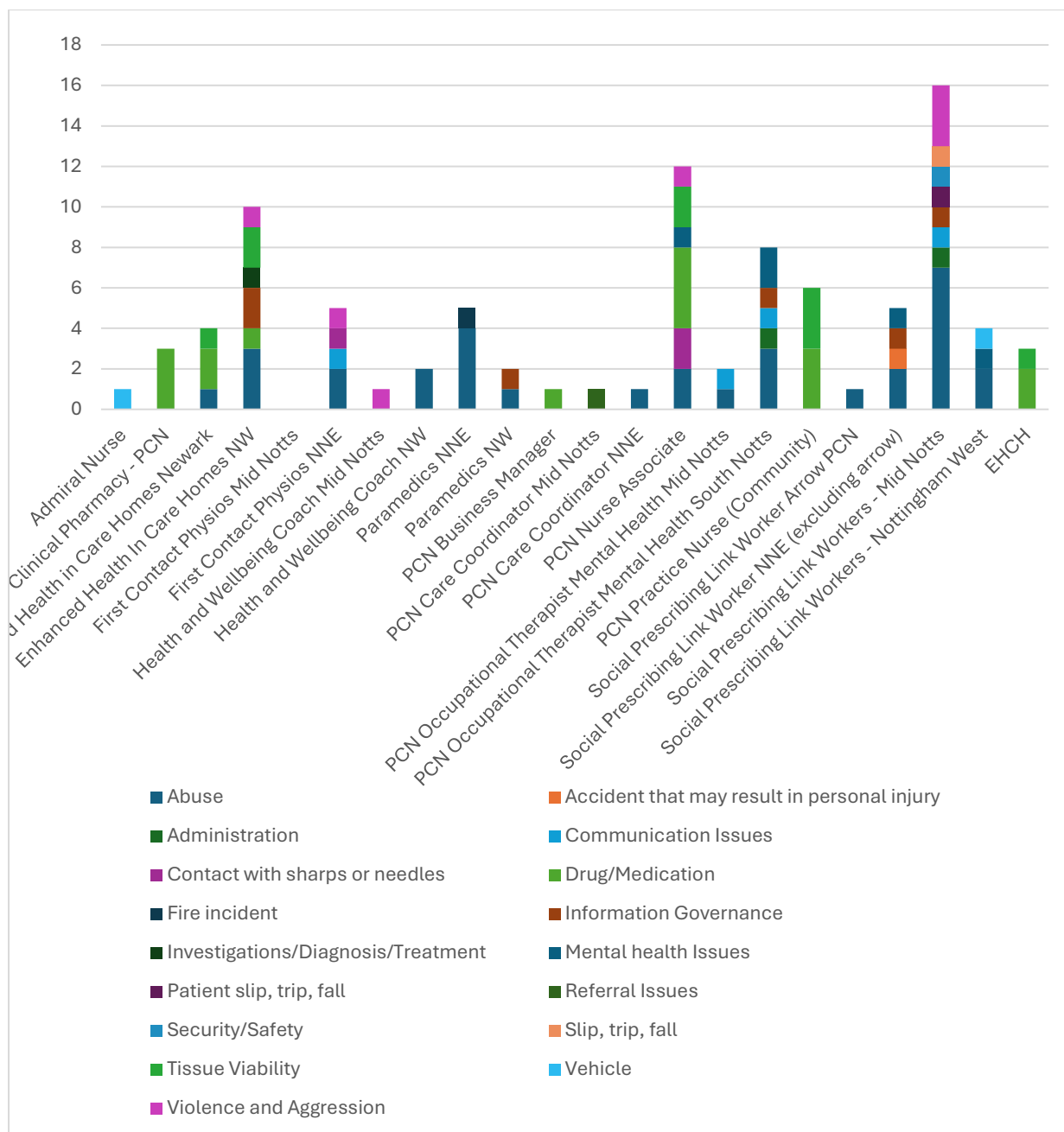


Figure 13 – PCN incidents by service and category

Social Prescribing Link Workers (SPLW) KPI Data

PICS employs SPLW in both Nottingham West, Nottingham North and East (NNE) and Mid Notts area on behalf of the PCNs. Data collection has continued to 2024/25 and can be seen below. Nottingham West data is not listed as the PCN collates its own data. Please note direct comparison cannot be made between Mid Notts and NNE due to differences in geographical size and commission between the two areas.

Arnold & Calverton PCN	Q1	Q2	Q3	Q4
Number of referrals to service	102	90	93	66
Number of onward referrals	391	431	528	618
Number of patients who have a personalised care support plan in place	73	64	127	97
Arrow PCN				
Number of referrals to service	198	194	188	239
Number of onward referrals	614	665	580	780
Number of patients who have a personalised care support plan in place	134	172	219	206
Mid Notts				
Number of referrals to service	736	879	555	724
Number of onward referrals	2678	2445	2475	3152
Number of patients who have a personalised care support plan in place	772	761	689	790

Health and Wellbeing Coaches

PICS employs Health and Wellbeing Coaches to support patients to make healthier lifestyle choices. This service has developed and increasing number of referrals have been received as can be seen below.

Referred into HWBC	Q1	Q2	Q3	Q4
MANSFIELD NORTH PCN	58	56	56	58
NOTTINGHAM WEST PCN	40	22	35	12
ROSEWOOD PCN	45	44	46	45
SHERWOOD PCN	16	8	17	14

Workforce

HR support, line management, clinical supervision and training and education is provided by PICS in conjunction with external facilitators where needed. A document outlining PICS responsibilities for PCN staff has been produced and signed off by PCN Clinical Directors. As PCNs mature, some are looking at line managing their own ARRS staff with PICS still being the main employer. The HR and governance issues around this are being addressed

and if this model progresses a memorandum of understanding will be put in place outlining responsibilities for both PICS and the PCN.

Quality Improvement / Excellent Practice

Work on outcome and output measures will continue and service/quality improvement initiatives will be actioned accordingly. Below are a few of the PCN highlights from the past 12 months.

PICS social prescribers continue to support veterans within our communities. They support breakfast clubs, veteran walks and commemorative events such as Armed Forces Day, D Day celebrations and Armistice Day. Not only does this show our commitment to the armed forces community, but it is also a way of identifying any veterans that may benefit from additional support. Below is a selection of photos from the events they have supported in 24/25.



Supporting the Armed Forces Community and local veterans



Social Prescribers have also been providing their valuable expertise to many other groups and individuals within our communities. They have:

- joined forces with the Salvation Army to support the opening of a new community allotment in Mansfield
- raised awareness of women's health at Oakwood Surgery
- linked in with charity Baby Basics in Newark to support women who may be struggling financially during pregnancy – see below
- worked collaboratively with the Salvation Army to support a socially isolated patient to open a new sewing club – see below

The Newark Social Prescribing Link Worker (SPLW) team have linked in locally with Baby Basics (Newark). This is a new charitable organisation for Newark, which works in conjunction with King's Mill Midwifery Team, supporting women who may be struggling financially during their pregnancy.

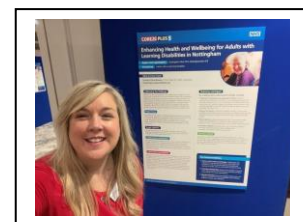
Newark SPLW Team sought the support of the local community, receiving donations of baby equipment/clothing etc, that were then given to the charity/midwives at Baby Basics' evening launch in Southwell, earlier this month.



Andy Simpkins and Liz Cheetham, Rosewood PCN Social Prescribing Link Workers, recently met with a patient, who had been referred to social prescribing for support with social isolation. They discovered that she wanted to set up a sewing group and through their connections they were able to secure the free use of a room for her at the Salvation Army, thanks to Angelo. Andy said: "We are also supporting her to access funds to purchase some more sewing machines. The Sewing group is now up and running. We paid a visit to one of her sessions and it was already well supported by people wanting to learn how to sew. This will be an ongoing venture, and the next group is already in the planning to start in early January



PICSie Clare Watson (right), Nottingham West PCN Clinical Lead for Health Inequalities, has become an 'Alumni Ambassador' for the national Core20PLUS5 programme. This new role will see her sharing the successes of the PCN to support colleagues across the country as they work to tackle healthcare inequalities.



Congratulations to Nurse Associates Hayley and Margaret and General Practice Assistant Joanne who all gained their qualifications in 2024/2025. These roles are all under the

Additional Roles Reimbursement Scheme and are aimed at supporting general practice to have by utilising different skill sets and knowledge to meet the needs of the local patient population. PICS supports staff to undertake training and apprenticeships to be able to fulfil these roles which are essential in an increasingly pressured national health primary care system. Pictured below, NAs Margaret and Hayley and GPA Joanne.



14.0 Corroborative statement – Nottingham and Nottinghamshire ICB

Primary Integrated Community Services Quality Account - ICB Corroborative statement 2024/25

Introduction

1. Nottingham and Nottinghamshire ICB (NNICB) have continued to work with Primary Integrated Community Services (PICS) in pursuit of the monitoring and continuous improvement of services during 2024/25, in accordance with the statutory functions of the ICB¹.
2. The intention for 2024/25 was for Nottingham and Nottinghamshire ICB and PICS to continue fostering and developing collaborative and systems-based working, and this statement provides a reflection of progress.
3. The PICS Quality Account for 2024/25 illustrates the scope of work undertaken in the last year and an organisation that continues to develop.
4. Key highlights included within the account include:
 - a) Further participation in the “Patient Safety Incident Response Framework (PSIRF) in Primary Care Pilot”, earning the early adopter’s digital badge. The quality account details significant work undertaken to implement and move to embed PSIRF² principles with PICS initial PSIRP published in April 2024.
 - b) Supporting in the facilitation of workshops with a focus on improved care for individuals with a learning disability, including designing a COPD action plan to

¹ [Health and Care Act 2022](#)

² [NHS England » Patient Safety Incident Response Framework](#)

enable people to have a better understanding of their condition and gain some autonomy in their care.

- c) Social prescribers have made good links to support people within our communities, working collaboratively with charities such as the Salvation Army and Baby Basics.

Oversight Arrangements

- 5. PICS have maintained an overall CQC rating of Good with no concerns raised from CQC inspections.
- 6. PICS are taking on another practice in 25/26, Saxon Cross, who have been rated Outstanding by CQC.
- 7. The Quality Team continue to support and oversee the delivery of services through meetings and planned contacts.

Quality Visits

- 8. There have been several touchpoints, meetings and discussions with PICS during 24/25 which have considered the continued development of services across the wider system. Work continues to focus on 4 main pillars, GP practice, Community Services, Out of Hospital services and PCN services
- 9. There have been frequent contract review meetings between NNICB and PICS to facilitate system level support and insight. Continued focus remains on waiting times particularly in the community gynaecology pathway where challenges continue to be addressed in part due to industrial action.
- 10. PICS continue to engage in an open and transparent way with a clear commitment to providing quality care, using evidence-based practices and ensuring staff wellbeing is supported.

Working as System Partners

- 11. PICS continue to positively engage in several system groups including the Partner Quality Assurance and Improvement Group (PQAIG).
- 12. Tackling inequality remains a key driver with PICS supporting pilots, projects and services. Work with Nottingham University and the Thalidomide Trust has resulted in a coproduced pain pathway to support this cohort of patients.
- 13. From the 1st of January 2025, PICS now provide medical cover at Lings Bar Hospital, enabling collaborative working with Nottinghamshire Healthcare Trust to reduce unnecessary hospital admissions and support transition into the community.

Forward View 2025/2026

- 14. Plans for a continued focus on patient safety, clinical effectiveness and quality of care are evident in the PICS quality account with a commitment to strengthening relationships with Primary Care Networks (PCNs) with a positive view of the potential for further integrated neighbourhood working.
- 15. A use of digital solutions to increase efficiency is being considered, including evaluating the use of artificial intelligence (AI).

- 16.** Moving into 2025/26 NNICB looks forward to continued collaboration with PICS and partners to drive improvement both within the organisation and across the wider system.