



Primary Integrated
Community Services Ltd

Primary Integrated Community Services



Quality Account 2023/2024

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1.0 Introduction

Welcome to Primary Integrated Community Services (PICS) 2023/2024 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 the quality of services, based on national policy drivers and patient, staff and stakeholder feedback. In the year that we celebrated the 75th birthday of the NHS and our services received visits from the Prime Minister and the Princess Royal, we are proud to be able to share with you the fantastic achievements that our staff, patients and carers have accomplished together.

PICS continue 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 have grown considerably over the past few years and we now employ more than 500 staff. In addition, this year has seen the recruitment of a new Medical and Managing Director. Despite the growth and changes, we continue to pride ourselves on providing a positive workplace that is supportive, enabling staff to learn and develop in an environment that promotes well-being. This year has seen our well-being strategy develop with the appointment of staff well-being champions to assist the Board Chair who is the well-being guardian.

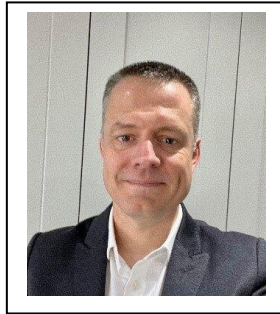
Our governance structure remains robust and we continue to have an excellent track record in patient safety. We have made good progress in the adoption of the Patient Safety Incident Response Framework (PSIRF) and will continue this work into 2024/25 and beyond, sharing our learning both internally and externally through the Learning From Patient Safety Events platform.

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 2023/24 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 are a local health care service provider; founded and co-owned by local clinicians. Established in 2013 with less than 20 staff, PICS now employs more than 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 have 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. Providing innovative and creative services is achieved through collaboration with a wide range of health, social and third sector providers. We enable delivery of safe and effective care that is responsive to local need.

3.0. Accountability

PICS meet, and are 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 and 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

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

Board Attendees

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 Caldicott Guardian (Medical Director). All Information Governance/Data Protection/GDPR policies are written and updated by the DPO annually 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 2023, PICS submitted its responses to the NHS Data Security and Protection Toolkit and PICS met all required Standards set by NHS England. PICS has reported four data breaches via the toolkit during 2023/24.

Where information is shared with another organisation, Information 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.

Further improvements have been made to our feedback process during 2023/24 including updates to the information on our website. PICS commit 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 improved information on the website allows complaints to be submitted digitally via a form or alternatively can be sent via an email or letter. 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. PICS Clinical Governance Committee meets monthly and is chaired by the Medical Director. This committee reports directly to the Board. The committee reviews all complaints and significant events and ensures appropriate actions are taken and duty of candour applied where needed to improve patient safety and experience. In addition, the committee has responsibility for reviewing and disseminating clinical audit findings and safety alerts and reviewing safeguarding activity. Good practice and learning are shared via a monthly governance update and discussed at team meetings.

Considerable work has been undertaken during 2023/24 to support the implementation of the Patient Safety Incident Response Framework (PSIRF) and production of a Patient Safety Incident Response Plan (PSIRP). This plan outlines PICS' implementation of PSIRF; this includes our patient safety profile, plan for types of investigations and commitment to staff training. The plan is now live and published on the PICS website. Work is ongoing with the Integrated Care Board (ICB) on engaging with those affected by patient safety events and use of patient safety partners.

Risk registers are held at service level and discussed with staff at regular 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

2023/24 has been an important year for the organisation's finances. Concerted effort was required to get us back into a sustainable financial position and reset our approach and establish robust conditions and criteria for business decisions. Much progress has been made on this vital work and this should give us solid foundations for the future.

This is crucial given the financial challenges faced by the NHS and local ICB system. There seems little prospect of significant new investment in the health system in the short term and making every pound count will continue to be important.

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

The Finance Committee membership is unchanged (postholders of Medical Director and Managing Director have changed) 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 meeting is held every six to eight weeks and the minutes of the Finance Committee are presented at each Board meeting.

The agenda still covers the wider understanding of the organisational strategy and business growth and development.

The Board and Finance Committee members continue to provide constructive challenge and support with an open and honest relationship to ensure members have a collective understanding and ownership of the position.

There has been further change in the finance team in 2023/24 with a couple of experienced staff leaving with the inevitable temporary interruption as the replacement people get up to speed.

The 2022/23 audit was a success with only minor issues and the planning for 2023/24 is underway with positive conversations between the Finance Director and the external audit partner.

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 has completed level four safeguarding training. 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.

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 has provided support to PICS General Practices to ensure submission of their individual SSAFs to the ICB by the required date in September 2023.

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, with the exception of Q3, the figures have remained above the organisational target of 90%.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
MANDATORY TRAINING				
% Compliance of Safeguarding Adults	91.9%	92.1%	89.7%	90.2%
% Compliance of Safeguarding Children	94.6%	94.5%	92.4%	92.6%
% Compliance of Prevent	93.8%	94.2%	93.6%	92.8%

Safeguarding supervision is available as required with the Named Nurse and additional training on learning themes from serious case review has been rolled out and continues on an 'as required' basis.

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. This has been approved by the Clinical Governance Committee and is attached in Appendix 1.

Corporate Governance

We have made considerable progress on our key strategic priorities from 2022/23. Our financial position shows much improvement and we have been able to secure most of our community and out of hospital contracts which provides further assurance to the Board for the future.

The additional finance meetings and cost saving exercises have proved beneficial along with a 'deep dive' into our Whyburn practice which had both internal issues around culture and was showing a considerable recoverable deficit. All practices including Whyburn are now showing small profit.

There have been unintended costs; new pay scales and uplifts have impacted us and may continue to do so. The junior doctors strike has also had an impact on our gynaecology and pain services where we have no option but to recruit locums and build up a waiting list.

It has been a challenge to build a new Executive team with a new Managing Director and Medical Director and there is still some more operational/organisational structure to secure and develop going forwards to ensure we can provide efficient and well-led services. The new team has shown great resilience to the significant challenges and helped to put PICS back into a more secure place.

Our relationships with the PCNs works well but is complex in terms of continuity and establishing the right level of partnership working. Our Managing Director and other senior managers are working closely with Clinical Directors to establish good strong working relationships. This is helped by having PCN Clinical Director representatives on the PICS Board.

Our plans for 2024/25 are to review our current Board structure and open it out more widely to include more diversity. We will also be looking at succession planning over the next year for the Chair and senior managers. We will continue to ensure we are being efficient in terms of our financial position and are now able to take on more business opportunities. There are already discussions taking place for integration with other partners in our communities.

Our focus next year is ensuring our staff and patients have the best care and support possible. The staff survey was generally good but there are several actions being taken to address some concerns that were highlighted. The Chair is continuing as Wellbeing Guardian and is addressing the nine principles at Board. She is keen that these principles are measured regularly and staff stories will be a regular feature of the Board Agenda. The Chair attends all Wellbeing management meetings, has attended several staff meetings and has helped to support our 10 new health and wellbeing champions.

This year will be a time to take stock as a Board, review our position, our culture and values along with our newly formed Executive team and develop our strategy to support our staff to provide the best services possible.

We will strengthen our four pillars of PICS to ensure we maintain business continuity in all areas. Strategic meetings will be tabled to ensure our priorities are addressed.

4.0 Review of 2022/23 objectives and additional achievements

Statement of Assurance from the Board

This quality account demonstrates the achievement of our objectives for the year 2023/24 and sets out our priorities for 2024/25. 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 2023/24, along with other achievements. These are presented under the CQC 5 domains of safe, effective, caring, responsive and well led.

Safe

- **During 2023/24 a pilot census was undertaken to analyse the usefulness and inform further use of the Community Nursing Safer Staffing Toolkit (CNSST) within PICS.**

The pilot census was undertaken in October 2023 with the Nottingham West Respiratory Team to coincide with the Midlands regional census week. All staff were trained in the use of the tool and undertook data collection for five days. Scoring was quality assured for accuracy. Since the original pilot, three other teams have been trained and a further census week was conducted in March 2024 following the same quality assured process. NHS England advises that data from an isolated census week should not be used to make recommendation on changes to workforce. It has therefore been decided to continue with use of the tool twice yearly, conducting a census in winter and again during the summer. We will then use this data to assist with workforce planning.

- **During 2023/24 PICS has further strengthened a patient safety approach by adopting the National Patient Safety Incident Response Framework (PSIRF).**

Initially, a PSIRF Lead and executive sponsor were identified. An assessment was made of PICS' patient safety profile based on Datix incident data from April 2022 to March 2023. This has enabled development of a Patient Safety Incident Response Plan which was approved by the Clinical Governance Committee in quarter three and is now live on the PICS website. PICS incident policy has been updated to include PSIRF. The next stage is to ensure all staff are trained in this new patient safety approach and this will commence in 2024/25.

Effective

- **PICS deliver 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 of PICS staff and services have been either shortlisted or successful in gaining awards as detailed below

- In October 2023, the community heart failure pathway won 'Best Outcome Award' at the Nottingham and Nottinghamshire Integrated Care System health and care awards.
- Meden Medical Services were shortlisted for a Local Medical Council (LMC) general practice award
- Tracey Colman (Nottingham West PCN Business Manager) was highly commended in the 'Primary Care Network Manager of the Year' category at the national PMA awards
- Arrow PCN Social Prescribing team who were shortlisted for 'Practice Team of The Year' at the Nottinghamshire LMC awards.
- Nottingham West PCN Pharmacist led cardiology team were nominated for a HSJ award, finalists in the National General Practice awards and winners of the PrescQIPP award for 'Integrated and Joint Working' – see below

The team is a pharmacy-led partnership across all NW GP surgeries and a large number of community pharmacies. The small team working have been reviewing patients with a raised BP in their medical record who did not have a hypertension diagnosis. They offer further assessment via home BP monitoring or attending a community pharmacy, then review and diagnose where appropriate. The team will treat and review medication until the patient's BP is well under control in line with NICE guidance.



**Nottingham West PCN
Cardiology Team – Winners of
a PrescQIPP award for
integrated and joint working.**



In the first twelve months the PCN team:

Reviewed more than 3,250 patient records

Achieved a 25% hypertension diagnosis rate

Freed up 3,103 general practice appointments.

In line with UCL patterners predictions for well controlled hypertension across a population, this equates to prevention of 1.9 heart attacks and 2.8 strokes over the next three years for Nottingham West patients.

Caring

- ✓ **During 2023//24, PICS staff have continued to work hard to improve support to carers, both within our services and also for staff that have carer responsibilities outside of work.**

In addition to our previous achievements, PICS is now “Carer-friendly” accredited across the whole organisation, reflecting the “powerful, consistent and valuable contributions PICS teams in general practice, primary and community services make for carers in the communities it serves, and for its staff who are carers.” We have also trained our managers in carer awareness to enable them to better support staff who have carer commitments outside of their work life.

In June 2023 PICS held an event at Whyburn Medical Practice to mark carers week – see below.

During Carers Week in June 2023, Hucknall residents Marilyn and Nicola Clifton presented PICS with an Outstanding Achievement Award on behalf of Nottinghamshire Carers Association. The certificate of achievement was received by Karen Frankland, PICS Managing Director on behalf of the organisation. The event brought together staff from Nottinghamshire Carers Association, PICS staff (including carers champions) and local residents with past or present caring responsibilities to celebrate, share good practice and hear from those with lived experience.



PICS
Supports
Carers



- ✓ **PICS supports the implementation of the PNA role as outlined by the Chief Nursing Officer Ruth May.**

During 2023/24 PICS have continued the roll out of the Professional Nurse Advocate (PNA) strategy and we now have a total of three qualified PNAs. The PNA role will support the nursing workforce at PICS by providing restorative supervision which is evidenced to reduce stress and burnout and increase emotional well-being and quality of care.

Responsive

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

Specifically, the pain service has been working with patients and specialists around learning disability and autism. Based on feedback from those with neurodiversity in the young people's pain pathway, changes have been made to how the pain programme is delivered for certain groups. This includes sessions being shorter, with less written material. The team also engage with the local Neurodevelopmental Specialist Services (NeSS) team for specialist guidance and sharing of information.

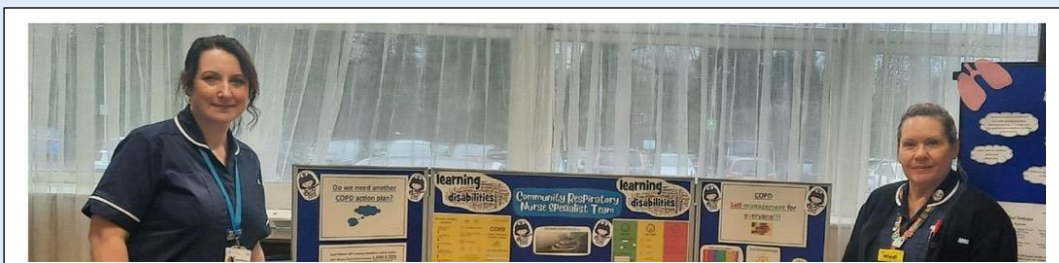
Gynaecology have been undertaking an audit to collect data on ethnicity of those referred to the menopause clinic to assess if there are any concerns regarding the referral of black, Asian and minority ethnic women as there is evidence to suggest that nationally, black and minoritized women reported increased rates of delayed diagnosis and lower rates of HRT uptake.

In addition PICS staff have:

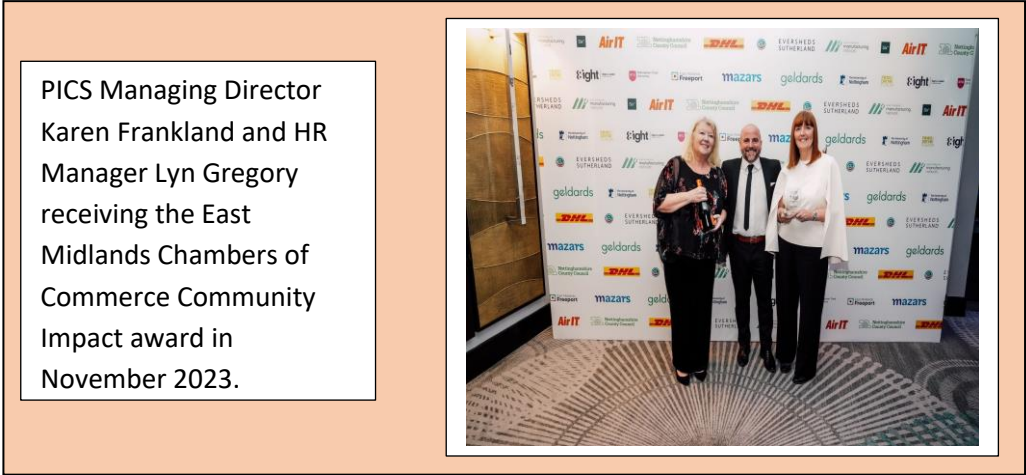
- ✓ Been key in facilitating workshops for people with learning disabilities (LD) in Nottingham West PCN
- ✓ Been a partner in the award-winning Community Care Transition Programme, enabling local professionals to design and deliver programmes responsive to local need. All the projects aim to improve independence by supporting physical, mental and social needs.
- ✓ Been involved in the facilitation of a successful personalised care pilot in elective surgery patients, focussing on patients being better prepared for surgery, reduction in cancelled operations and reducing health inequalities.
- ✓ Been improving the care for patients living with an LD in Mid Nottinghamshire through the employment of an LD Nurse Practitioner. More information can be found below.



PICS PCN LD Nurse Practitioner Sarah Atkinson has had another very busy and successful year supporting the care of those people with learning disability. This has included working on a personalised care planning project for those LD patients with COPD (below), supporting LD patients with diabetes at an event at Oakwood surgery (left) and breaking down barriers to healthcare and promoting annual health checks at a local care home with a fun 70s disco.



In addition to the above, PICS won the East Midlands Chambers of Commerce Community Impact award for work on reducing health inequalities, strengthening the local economy, providing innovative and creative services and working with partners.



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

- PICS supports the implementation of new innovative services that support primary care and the wider health community.**

PICS now employ many staff and deliver numerous services on behalf of Nottinghamshire PCNs. Many of these roles are part of the Additional Roles Reimbursement Scheme (ARRS), introduced by the government in 2019 to improve access to general practice. Through this scheme, PICS has employed Mental Health Occupation Therapists (OTs) to work alongside general practice to deliver first contact assessments, brief interventions self-care advice and onward referrals where needed for patients presenting with mental health distress. Nottinghamshire is one of the first areas to use the mental health skills of OTs in general practice and in February 2024, the innovative service received a visit from HRH The Princess Royal who is Patron of the Royal College of Occupational therapists – see below.

HRH The Princess Royal launches PICS new group therapy intervention.



Catherine Seals, (picture second left) Mental Health Occupational Therapist for Nottingham West Primary Care Network invited The Princess Royal to launch a new group-therapy choice for residents that promotes conversations about mental health and offers practical, personalised steps to help keep well. Catherine said ‘we’re thrilled Her Royal Highness chose to visit us in Eastwood and see how improved mental health enables people to be more independent and feel more in control of daily life’.

In addition to the many new PCN roles/services, PICS is also involved in facilitating pilot projects. During 23/24 PICS has:

- Provided clinical input(through a Diabetes Specialist Nurse) to an ICS pilot identifying patients with Type 2 Diabetes to be referred to a total diet replacement intervention. During the pilot, 50 out of a potential 254 patients were referred to the evidence based high impact intervention. Type-2 Diabetes morbidity disproportionately impacts the most socioeconomically deprived 20% of England and therefore this pilot evaluation supports the notion that this type of agile proactive care intervention may be used to alleviate health inequalities.
- Supported the wider healthcare system to reduce the backlog of spirometry testing used to diagnose and monitor certain lung health problems. PICS employed a Specialist Nurse to undertake spirometry on behalf of general practices to help alleviate waiting times for this diagnostic test – see page below.
- Been commissioned to deliver a 12-month pilot project for asthma diagnosis in children through setting up a diagnostic hub and delivery of a nurse led spirometry service. There are estimated to be 4000 undiagnosed children in Nottinghamshire and the pilot is aimed at increasing the diagnosis in children where there is uncertainty and will be overseen by a Respiratory Consultant.

Briony Warren, PICS Spirometry Nurse, met Prime Minister Rishi Sunak and the Secretary of State for Health and Social Care Steve Barclay earlier this week.

They were visiting Nottingham to launch a national programme of Lung Health Checks, based on a local pilot from the Integrated Care Board. Briony wore her Targeted Lung Health Check hat for this visit, but was able to explain the benefits of both this project and the PICS Spirometry program for residents of Mid Nottinghamshire.

Prime Minister welcomed to Nottinghamshire by PICS Respiratory Nurse



Well led

- **We have continued our commitment to the armed forces community, supporting patients, staff and the wider community.**

During quarter four of 2023, we submitted our application for the Defence Employer Recognition Scheme silver award and were delighted to be awarded this accolade in June 2023 -see below.



Having received the announcement that PICS had been awarded the Defence Employer Recognition Scheme silver award in June 2023, Emma Alder (pictured), Quality and Clinical Governance Lead Nurse/Named Nurse for Safeguarding, attended the formal awards evening on 28 September. She said: “It was an honour to attend the award ceremony at The National Space Centre to accept the Defence Employers Recognition Scheme silver award on behalf of PICS. We are proud to support the armed forces community and pledged our commitment through signing the Armed Forces Covenant in March 2022.

“Receiving this award recognises our ongoing support in employing veterans, reservists, and family members of serving personnel. We truly value the diverse skills they bring to our organisation, and we proudly offer our ongoing commitment to them.”



In addition to receiving the silver award PICS staff have been supporting the armed forces community by:

- Assisting veterans to identify themselves and be recorded as military veterans within their general practice record.
- Promoting the veteran friendly scheme to other practices within the Primary Care Networks and encouraging them to sign up.
- Supporting local veteran walks, Armed Forces Day and Armistice Day - see below.

Pictured right are Rose Severn and Kirstie Worboys from the PICS Mansfield North Social Prescribing team, assisting with poppy sales in support of Armistice Day.



Picture left are a collection serving and ex-military personnel enjoying a veterans walk, supported by the Social Prescribing Link Workers. These walks reduce social isolation and boost both mental and physical well-being.

- **PICS will undertake additional staff feedback through use of Pulse surveys.**

Unfortunately, due to the timing of the staff survey and Best Companies survey in 2023/24, we haven't had the opportunity to undertake additional pulse surveys. Our staff survey results from November 2023 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 staff workshops and develop an action plan based on the views of our staff. The staff survey will be completed again in quarter three of 2024/25 and we will review the need for and implement additional surveys if we think they will be of use.

5.0 Priorities for improvement 2024/25

Building on achievements from 2023/24 and to address areas that require improvement, the following are our priorities for 2024/25

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

NHS England have launched learning in the form of the patient safety syllabus. It is their ambition that all NHS staff undertake at least level 1. As part of our PSIRP, the decision has been made that all staff working for PICS will undertake patient safety syllabus training at level 1 and 2 through completion of the appropriate modules on e-learning for healthcare and this was launched in April 2024.

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

All PICS staff will undertake learning disability and autism training level 1 via Bluestream e-learning. Level 2 training will be accessed through the ICB. This will equip our workforce with a greater understanding of the needs of those people with learning disability and autism.

- **During 2024/25 we will submit an application for the 'Gold' award on the Defence Employer Recognition Scheme**

We will continue our work in supporting the armed forces and veterans in both our workforce and patient groups. Our lead and clinical champions will review evidence required and work towards the submission deadline in quarter 4 of 2025.

- **During 2024/25, we will have staff workshops to review our findings of the 2023 staff survey and produce an action plan.**

This work will be led by the HR team, bringing together staff from all services, managers, and the corporate team.

- **During 2024/25 we will improve the percentage of patients seen in the 18 week RTT for the community gynaecology clinic.**

We will produce an action plan and work with the ICB and our subcontractors to improve the waiting times for patient referred into this service.

6.0. Our Services

PICS provide 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's) 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 Advanced Nurse 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 City GP Alliance, Partners in Health and Nottingham University Hospitals NHS Trust (NUH). The service is Consultant led. 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/Chronic Fatigue

This community pathway service provides care to patients registered with a GP in Greater Nottinghamshire and Mid Nottinghamshire. During 2021/22, the pathway extended to some Offender Health settings. Further service expansion during 2022/23 has seen the service extend into the North Nottinghamshire area of Bassetlaw.

A multidisciplinary team of clinical specialists utilise a biopsychosocial model to help patients with persistent pain conditions and chronic fatigue syndrome (CFS and long covid). The service supports patients to get the right diagnosis and treatment 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 3 general practices (GPs) within Nottinghamshire:

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

Up until September 2023, we also managed a 4th practice which has now been taken over by another provider.

Commissioned through sub-contract arrangements

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

Cardiology

This Specialist Nurse-led service provides expert clinical management to heart failure and atrial fibrillation patients who are registered with GP Practices in Nottingham North and East (NNE) PCN's and Nottingham West (NW) PCN. The team work collaboratively with primary and secondary care colleagues to provide evidence-based care and treatment, optimising

heart and atrial fibrillation management. Data shows a significant improvement in the management of this cohort of patients and a reduction in hospital admissions. In addition to the Specialist Nurses, the service in NNE currently has support from a Clinical Pharmacist with the aim of reducing waiting lists by providing clinical care/review and optimisation of medications for patients with chronic heart failure. The Heart Failure Nurses also provide input to the local 'Heart to Heart' support group.

Proactive Care Service

This locality-based service works with General Practices across Nottingham West to support and co-ordinate care for patients and carers over 18 years old, particularly those with complex needs and frailty, enabling patients to live independently for longer and reduce avoidable hospital admissions. Working proactively with General Practice colleagues, a multidisciplinary team of Clinical Care Co-ordinators and Care Navigators identify patients at high risk of reduced independence or hospital admission. The team undertake patient centred, holistic care assessments to ensure the right care and services are in place to support patient independence. Onward referrals for additional services and support are made where needed.

Diabetes Service

This service operates across Nottingham West. Through an integrated clinical pathway, Specialist Diabetes Nurses work directly with general practices to help improve the provision of diabetes care across the area. Multidisciplinary support is provided by Nottingham University Hospitals Consultants. The service aims to support patients to optimise their glycaemic control and reduce complications of diabetes.

Respiratory Service

This service is provided to patients registered with a GP in Nottingham West PCN. The specialist nurse-led service focuses on the care and management of patients with chronic obstructive pulmonary disease (COPD), idiopathic pulmonary fibrosis, bronchiectasis and difficult asthma. Medicine optimisation, education, pulmonary rehabilitation and oxygen therapy monitoring form part of the care provision. The specialist nurses also actively participate in Consultant-led community clinics. Working with patients to provide individualised care and self-management is integral to the service model. They also champion the work of the British Lung Foundation and provide support and education to the local Breathe Easy support group.

Pulmonary Rehabilitation

The service provides pulmonary rehab in Nottingham West PCN. Pulmonary Rehabilitation (PR) is a multidisciplinary programme that promotes self-care and management for patients with chronic lung disease. The aim is for the individual to achieve their greatest physical, mental, social and vocational potential through completion of an individually tailored programme of exercise and education. The programme can prevent deconditioning, improve exercise capacity and desensitise the patient to breathlessness. Additionally, it helps the patient develop coping strategies, self-management skills and mastery of disease through promotion of long-term lifestyle changes.

Palliative Care Service – Nottingham West

Based on a case management approach provided by specialist nurses, this service is delivered to patients who are entering the palliative stage of their life, usually defined as the last 12 months. Working collaboratively with health, social and voluntary care sector colleagues, patients, their families and carers are supported with symptom management, advance care planning and interventions to support their care and comfort.

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 provide an outreach Specialist Palliative Care Nurse service and clinical triage.

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.

Care Navigation

PICS employ 8 Care Navigators; 6 Care Navigators cover Mid Nottinghamshire, equating to 1 per PCN and 2 cover Nottingham West. The Care Navigation Service provides daily operational MDT coordination to identify patients who are at risk or growing risk of loss of independence, admission or readmission to acute care and coordinate the appropriate support to the patient, carer and their families. The Care Navigators provide high quality non-clinical and administrative support and play a significant role in the on-going development and participation in GP multi-disciplinary team meetings. The Care Navigators are currently supporting several ICS Population Health Management projects which aims to reduce Healthcare Inequalities across the population.

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 Clinical Pharmacist Lead, supported by a small team of Senior Pharmacists. The clinical pharmacy team provide 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 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 well-being. 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 PCN's.

Extended Access

PICS administer this service on behalf of GP practices within 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 employ 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 Coach.

PICS Health and Wellbeing coach service has continued to grow over the last 12 months, with 13 coaches now in post. As a result of continued growth, the service structure has changed, and the team is now 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 provide 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.
- Improving 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 employ 12 paramedics on behalf of the PCNs and recruitment is ongoing to welcome more paramedics as part of the Additional Roles Reimbursement Scheme, (ARRS). 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 in order 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 12 MH OTs across mid and south Nottinghamshire including the two new innovative Band 6 Developmental First Contact MHOT posts. 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 a core member of the multidisciplinary team and being dual trained are able to 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. The MHOTs have a Clinical Lead supporting their professional development including completion of the Health Education England First Contact Practitioner Roadmap

Learning Disability Nurse Practitioner

PICS employ 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 their 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. Due to the success of this role, Mansfield North PCN have invested in the appointment of a Nurse Associate to support the LD Nurse Practitioner. This will increase capacity and provide further support direct to the PCN practices.

During 2023/24, the Learning Disability Nurse Practitioner helped the practices to achieve very high levels of annual reviews, with Mansfield North achieving 86% and Roundwood 88%. The LD Nurse Practitioner has shared their expertise in a number of ways. They have acted as an assessor for numerous Trainee Nurse Associates on placement, facilitated insight days for students, presented at an in-house conference for non-medical prescribers as well as presenting at conferences outside of our organisation. They are an excellent ambassador for learning disability nursing.

Dietitians

PICS employ four dietitians on behalf of the PCNs and recruitment is ongoing to welcome more dietitians as part of the Additional Roles Reimbursement Scheme, (ARRS). The Clinical Lead for the dietitians 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 in order to qualify as First Contact Practitioner Dietitians. Their 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 provide the EHCH service within Nottingham West PCN and Newark. The Enhanced Health in Care Homes (EHCH) Specification of the 2020/21 Primary Care Network (PCN) Direct Enhanced Service (DES) changed the way care to patients in residential and nursing homes was delivered. 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. A multidisciplinary team consisting of Clinical Care Home Leads, Occupational Therapists, Dietician, Care Coordinators and a Clinical Pharmacist provide support and care in the form of weekly home rounds, holistic assessments and targeted interventions where needed. They also provide personalised care plans for new residents, structured medication reviews and advance care planning.

Admiral Nurse

Admiral Nurses are registered nurses (RGNs) who specialise in dementia care, working holistically with families and people affected by the condition. During the past 12 months, PICS has supported both Nottingham West and Ashfield PCNs to provide this vital role through employment of two Admiral Nurses. As dementia specialists and supported by Dementia UK, Admiral Nurses help families manage complex needs, considering the person living with dementia and the people around them. Additionally, they support other health and social care professionals to provide care congruent with best practice.

Nurse Associates/Trainee Nurse Associates and PCN Practice Nurses

There has been a substantial growth in the number of nurses employed by PICS on behalf of PCNs. During 2023/24 an additional five Trainee Nurse Associates (TNA) have been recruited.

There are now 10 RGN nurses, four Nurse Associates and 11 Trainee Nurse Associates working across nine PCNs. Their roles include delivering primary care services to housebound patients, working directly in GP practices and supporting practices with delivering the enhanced health in care homes contract.

The Nurse Associate programme requires the TNAs to have an RGN nurse assessor and to experience a wide variety of nursing through placements and insight days. PICS nurses from a number of teams have been generous in giving their time to support the TNAs.

The PICS Lead Nurse for Primary Care provides management support to these nurses and acts as a clinical assessor for many of the TNAs. 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.

Prostate-Specific Antigen Monitoring Nurse

PICS employ a nurse 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

This year saw the first GP Assistants (GPA) employed by PICS on behalf of two PCNs. The four GPAs are based in 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.

GPs undertake a six-to-nine month university-based programme which requires them to complete a portfolio of evidence to demonstrate competencies in five areas: care, administration, clinical, communication and managing health records. They have a GP mentor who confirms they have achieved the competencies.

One GPA completed the training prior to appointment, two are enrolled on the course at Derby University and the final one will be commencing their studies soon.

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.

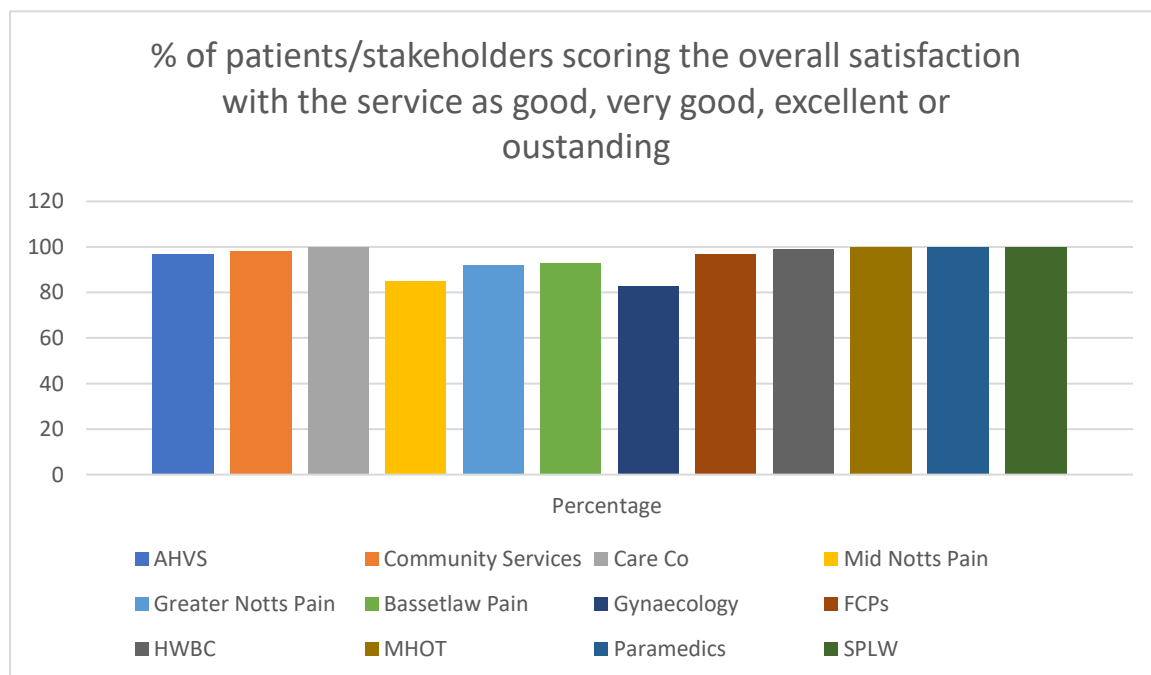


Figure 1 - patient feedback by service

PICS actively promote 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 on page 27 below.

In total, 259 pieces of feedback were received and uploaded to Datix between 1 April 2023 and 31 March 2024. 11 of these were rejected as duplicates leaving a total of 248, a decrease of 9% from the previous 12 months. These can be split into the following:

Compliments 110

Complaints 125
 Concerns 13
 Comments 0

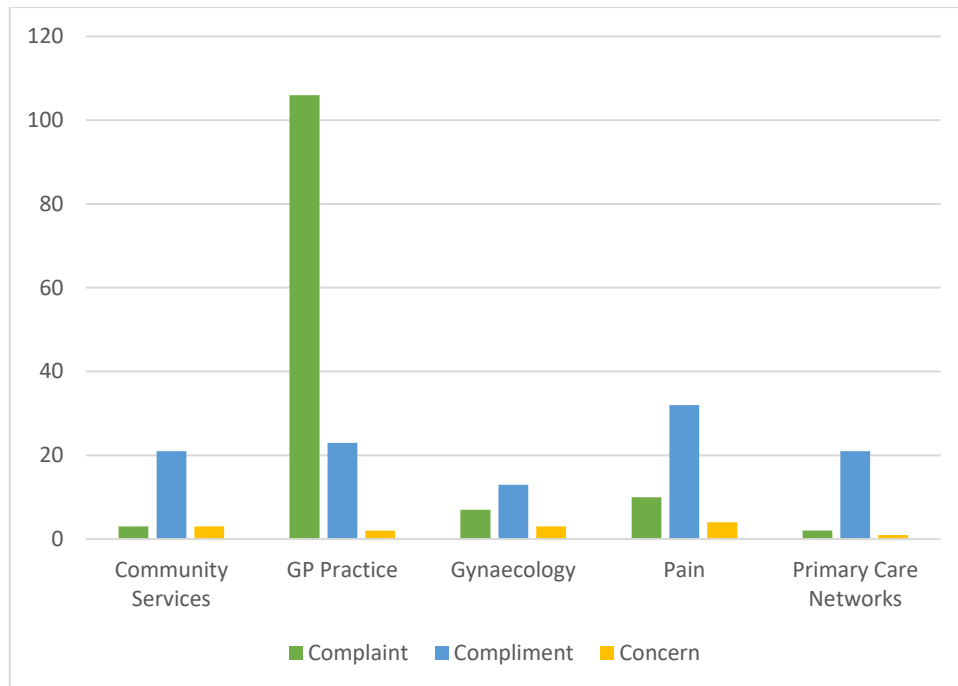


Figure 2. Feedback by type and department 1 April 2023- 31 March 2024

Overall, complaints have decreased by 1.5% from 2022/23 and compliments by 10%. Whilst there is currently no national 2023/24 data for comparison, NHS Digital (2023) reported a 4.6% increase in complaints between 2021/22 and 2022/23.

GP Practices received the highest number of complaints at 103, a significant increase from the previous 12 months when 76 were recorded. This is an increase of 35%. Whilst there is no comparable national data for the same period, NHS Digital noted that GP Practice complaints rose by almost 40% in 2021/22 and a further 4.6% in 2022/23. However NHS Digital also reported that 50% of the National GP complaints were not upheld; PICS did not uphold 62.5% of complaints.

The three largest complaint subjects were clinical treatment (33.6%), communication (29%) and attitudes and behaviour (19.2%) which is consistent with the findings from national primary care data (NHS Digital 2023). Communication was the biggest lesson learned at 19.2%. 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 learnt was staff training/education (4.8%) followed by clinical care (3.2%).

All complaints are reviewed and approved by the Clinical Governance Committee and any learning or positive feedback is disseminated throughout the organisation.

Themes from compliments were:

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

A quarterly feedback report containing both friends and family and Datix feedback is produced for Board. An annual review of complaints can be found in the annual Datix report in Appendix 2.

7.2 Patient Safety and Risk

For 2023/24 there were no reportable serious untoward incidents or never events. We are however assisting a local trust with a serious incident investigation that involved the patient being initially assessed by our service prior to onward referral. 196 significant events were recorded on Datix with eight being rejected as either a duplicate or did not meet the criteria. Therefore, a total of 188 were either approved or being approved, a 5% increase on 2022/23. Possible explanations for the increase could be expansion of PICS services and numbers of staff reporting, an increased awareness of reporting through training or an increase in incidents.

Figure 3 below shows significant events by department and category for 2023/24.

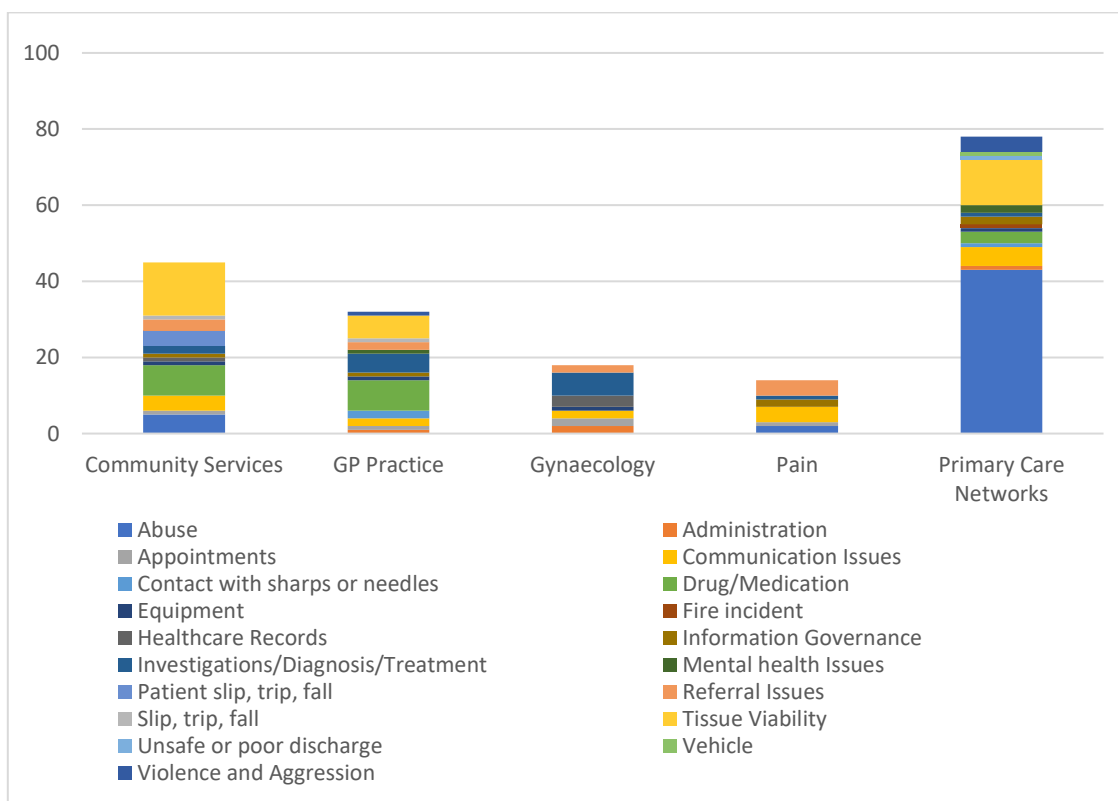


Figure 3. Significant events/incidents by departments and category

In contrast to 2021/22 and 2022/23 where Community Services reported the largest number of incidents with over a third being pressure ulcers, in 2023/24 PCN services were the biggest reporter with over half of their incidents being safeguarding concerns/referrals. Safeguarding concerns /referrals (under the category of abuse) was the largest category overall, accounting for 54 out of the 186 reported incidents. 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. 71% of the pressure ulcers reported were present on admission to a PICS service. Where they developed during provision of a service, they were found to be predominantly unavoidable and appropriate concise investigations were conducted for category 3-4, deep tissue injury and unstageable pressure ulcers. There were no new avoidable pressure ulcers identified during concise investigation for categories 3 and 4, indicating 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 2023/23, GP practices were the department with the third highest amount of reported incidents with 31. The three categories most commonly reported by GP practices were drug and medication (eight incidents), tissue viability (six incidents) and problems with investigations. diagnosis or treatment (five).

As can be seen from Figure 4 below, staff 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.

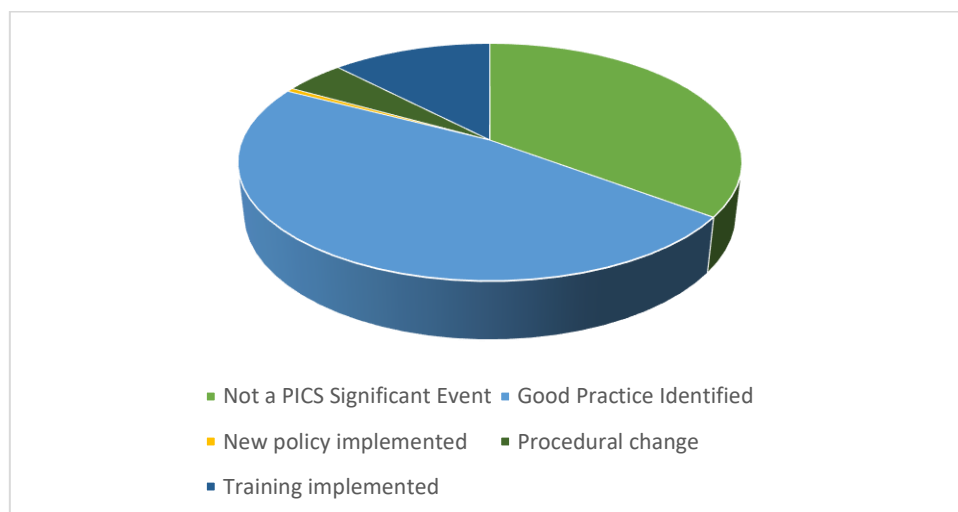


Figure 4 - Action taken as a result of a significant event.

8.0 What the CQC say about us

Currently PICS manages three General Practices; Meden Medical Practice, Whyburn Medical Practice and Hama Medical Practice.

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 have now altered the approach to their monitoring regime and have moved to a system whereby data is analysed remotely on a monthly basis. 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 at this time. 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 growing workforce. HR remain 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 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 to complete mandatory e-learning training within their induction period and given adequate time to complete this. In addition, face-to-face Basic Life Support and Fire training is organised ahead to enable new starters to complete this during induction.

In addition to our strong HR department, PICS has a Workforce and Development Lead to co-ordinate training and development and ensure our workforce is fit for purpose and equipped with the knowledge and skills to undertake the roles. We have developed a training needs analysis and work collaboratively with Nottinghamshire Alliance Training Hub (NATH) and other institutions to achieve this. During 2023/24 NATH have 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):

Roadmap to Practice

- ✓ Seven paramedics and three Community Occupational Therapists (OTs) and Physiotherapists to complete the course.
- ✓ A further one Dietitian and seven OTs are currently undertaking the Roadmap or awaiting results
- ✓ Our aim is for another four staff to complete the Roadmap during 2024/25

Non-medical prescribing qualification

- ✓ Five pharmacists, three FCPs, two nurses and one paramedic are currently studying to qualify as non-medical prescribers

Apprenticeships: PICS support

- ✓ 12 Trainee Nurse Associates on an apprenticeship via Derby/Nottingham
- ✓ Five other non-clinical staff on apprenticeships

Advanced Clinical Practice – Masters

- ✓ Two nurses and two physiotherapists (pain service) are currently undertaking advance practice study at masters level,

Masters Course

One member of staff continues to be supported with funding/time to complete master's course in Palliative Care.

Professional Nurse Advocates (PNA)

- ✓ One nurse qualified as a PNA taking the total number of trained PNAs at PICS to three.

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.

PICS was previously registered on the Care4Notts website for work experience applicants. As Care4Notts is longer in place, PICS workforce are supporting the work experience agenda and have accommodated three students during the past year.

We continue to have placements for nursing and physiotherapy 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. During 2023/24 PICS have had OT students on placement with our team of Social Prescribing Link Workers (SPLWs). This was the first placement for this kind and has been very positively evaluated.

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

- ✓ Working with the ICB scoping the roll out of the Oliver McGowan Learning Disability and Autism training which will be 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 2024/25.
- ✓ Promoting apprentices during apprenticeship week by producing videos and sharing stories.

PICS also ensures that appropriate supervision is in place where required to support specific educational requirements such as the Roadmap. This is provided collaboratively by PICS and the PCNs. 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 are higher than for the previous 12 months. However, PICS sickness and absence rates are consistently lower than the NHS average for England and the Midlands area (see table 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
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	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	No data

PICS have 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
- ✓ Staff conference aimed at connecting staff
- ✓ Restorative supervision for the nursing workforce, aligned to PNA strategy.

In addition to the above, the Chair of the PICS Board took on the role of Health and Wellbeing Guardian for the organisation during the summer of 2022.

In October 2022, PICS commenced work on the 'Health and Wellbeing Framework' (published by NHS England) to benchmark our health and wellbeing provision. The framework sets out the standards for supporting staff to feel well, healthy and happy at work. As part of a wellbeing framework, PICS has identified wellbeing champions across the organisation to support and signpost staff with their wellbeing.

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 2023/24; all results 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.

478 staff were surveyed with 294 responses received. This represents 61.5% of the workforce. Whilst this response rate is lower than the previous three years, it remains a good response rate when compared with the NHS Staff 2022 survey of 46%. (2023 results are not yet available.) The survey is not compulsory. We strongly encouraged participation and automated reminders were periodically issued by Survey Monkey and with regular monitoring and communication.

PICS were keen to support a charity once again this year by donating £100 each to a foodbank in both south and mid-Notts.

The highlights from the survey report can be seen in the table below. For comparison the some of the national NHS survey results from 2022 are included in brackets.

- 87.92% agree that care of patients is the organisation's top priority. (74%)
- 87.97% of staff said if a friend or relative needed treatment they would be happy with the standard of care provided by the organisation. (62.9%)
- 86.47% of staff say the organisation acts on concerns raised by patients/service users. (69.1%)
- 75.47% of staff would recommend the organisation as a place to work. (57.4%)
- Most staff (94.7%) know how to report concerns regarding unsafe clinical practice.
- 86.4% agree or strongly agree that the organisation encourages us to report errors, incidents or near misses.
- 92% of staff agree that they are trusted to do their job.
- 92.6% of respondents agree or strongly agree they feel their role makes a difference to patients/service users.
- Teamwork, support from colleagues, line managers and leaders all scored highly (as in previous years).
- 90.1% agree or strongly agree that the people they work with are understanding and kind to one another.
- 80% of staff stated that they can approach their line manager to talk about flexible working.

Figure 6 – Staff survey highlight

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 72% of staff say they achieve a good work life balance - 30% of respondents (89 people) reported feeling unwell due to work-related stress in last 12 months. 45%

of respondents said they had come to work despite not feeling well and 27% of staff said they find their work always or often emotionally exhausting.

- 71.5% of respondents said work either always, usually or sometimes frustrated them (65.5% in 2022).

Career Development and progression

- In terms of learning and development, scores were lower than in all previous surveys.
- Less than half the respondents (47%) were satisfied with their pay. This declined from 50.5% in the 2022 survey.
- 42 staff said they would probably look for a job in the next 12 months.

Safety at work

- Small increase in staff stating that they have personally experienced violence, harassment or abuse for reasons of discrimination at work (GP practices/PCNs).

The results were presented to staff at the all-staff conference in February 2022 and were also 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 are therefore aiming to run staff focus groups during 2024/25. These focus groups will be open to any member of staff within PICS and will focus on the following themes.

- Health, wellbeing and frustration at work
- Pay and reward
- Learning, development and career progression
- Zero tolerance to abuse/ freedom to speak up

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, taking into account 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. 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 to operationally manage. Overarching support and leadership is provided by PICS corporate management team. The Deputy Medical Director, Dr Kerri Sallis, provides medical oversight across the Practices. Dr Sallis and the Quality and Clinical Governance Lead 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.

Safe and effective services

All of the practices that PICS currently manage 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 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 5 on the page below.

Additional audits were undertaken across the three practice sites:

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

Practice Nursing Audits 2023-24

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 on the whole these were done as per protocol.

Infection Control – Audits took place across all practices by the Infection Control Leads.

Cytology audit - Specifically, the audit looked at uptake rates, cervical screen sampler data and training records. Results were good demonstrating that uptake rates for all practices were higher than the ICB average and training was completed as required. There were some minor sampling issues such as being inadequate, but these were minimal and did not cause concern.

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.

Quality Improvement

All PICS practices have faced significant challenges with their QoF achievement, with some nursing staff leaving us and in one case returning, as well as dealing with the closure of Riverbank Practice and the transfer of just over 4,000 patients to Meden Medical Services, with a number having complex long term condition needs. It has been an extremely difficult year for each of the practice sites for different reasons, and it's a credit to each staff member who worked tirelessly to achieve the best result possible.

Despite these challenges, all of the team has pulled together to provide the best care possible. This included utilising PCN resource and monies to enlist the help and support from Interface Pharmacy teams to help with reviews. We have already put plans in place for this year's requirements with a Population Health Management and Nursing strategy afternoon planned for July. The aim of this session is to co-create and design the strategy for QoF achievement for this year and future years.

Our plan will be to not only achieve maximum points within the QoF structure but to improve the long term condition management of our patients.

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. A full report of Datix incidents can be found in Appendix 2.

Patient Experience

All practices have established patient participation groups and we actively try to recruit additional patients.

Every year NHS Digital collects data on patient satisfaction with general practice. There is currently no data available for 2023/24. Data from 2022/23 is however available and comparison between the three PICS practices, national and local data can be seen in Appendix 3.

Whilst two out of the three PICS practices scored similarly to local and national data, one practice was 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:

- Salaried GPs have been employed to replace locums. This should enable better continuity with clinical care and choice of clinician
- Implement a new telephone system to improve access and provide better information when booking appointments or making enquiries by telephone
- Improve communication and information around appointment booking, length of appointments, choice of clinician, including access to additional ARRS roles such as First Contact Practitioners
- Ensure extended access appointments are promoted and used to improve length of time waiting for an appointment and access for those patients that work
- Promote use of the NHS app to improve digital connectivity in harder to reach groups.

When available in July 2024, data for the 2023/24 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 6 below shows feedback by type and GP practice from 1 April 2023 to 31 March 2024. In addition to the three practices we currently manage, PICS managed Peacock Practice until 30 September 2023. As we no longer manage this practice, the data has not been included for this practice.

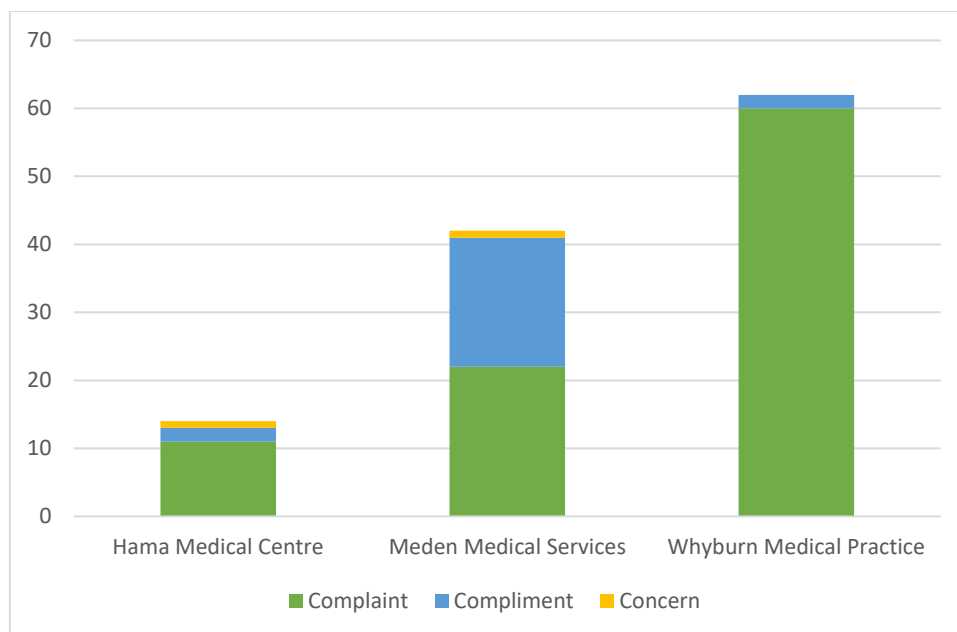


Figure 6 – Feedback by type and practice

Over the past year, across all our GP Practices we have received 23 compliments, two concerns and 103 complaints. 10 of these complaints were for Peacock Practice who we no longer manage. All feedback has increased from the previous 12 months; compliments by 9.5% and complaints by 35.5%. This mirrors the national picture of increased complaints in primary care.

Clinical treatment was the main theme of complaints followed by communication, dates for appointments and attitude and behaviour. These themes, as previously mentioned, correlate with the findings of national primary care data (NHS Digital, 2022) and research published in the BMJ (2017).

Communication and clinical practice were the biggest lessons learned. Most complaints have been actioned and closed by the Clinical Governance Committee with the exception of 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 four 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 (NCPP).

The interdisciplinary approach to pain management enables patients presenting with complex and persistent pain to receive individualised care and management plans in the community, which may include de-prescribing of high dose opioid medication via a safe

pathway. In addition, a service is offered to those with chronic fatigue and Long COVID. The team operate within a cognitive behavioural framework, underpinned by a bio-psychosocial approach. 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 patient's 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 of:

- Clinical Leads (1 for Nottinghamshire and 1 for Bassetlaw)
- Clinical Nurse Specialists
- Extended Scope Physiotherapists
- Cognitive Behavioural Therapist
- Clinical Psychologist
- Assistant Psychologist
- Well-being practitioners
- Specialist Clinical Pharmacist

Audit

No audits were undertaken in 2023/24; a hand hygiene audit and a non-medical prescribing audit are scheduled for quarter 1-2 of 2024/25.

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 within 2023/24, with an average of 97.9%.

Compliments, Complaints, Comments and Concerns

49 pieces of feedback were received for the pain service during 2023/24. 1 of these was rejected as a duplicate. The remaining 48 were divided into feedback type as below

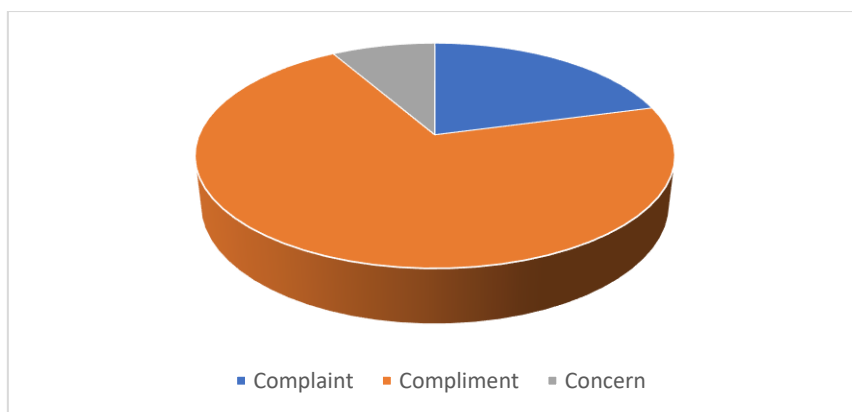


Figure 7 – Pain feedback by type

Compliments was the largest category at 34, followed by complaints at 10 and concerns at 4. The largest themes for pain complaints were attitudes and behaviour, clinical treatment and communication. Themes around lessons learned were largely, communication, training, and delivery of care. All pain service complaints for 2023/24 have been actioned and approved following resolution with the patient. Lessons learned were disseminated via clinical team meetings and appropriate actions taken where needed.

Incidents

18 incidents/events have been reported during 2023/24 for the pain service, of which themes of communication, delay in appointments or onward referrals and information governance issues. 3 of the events were safeguarding referrals made by a pain clinician, evidencing good practice. 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 skill 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 2023/24 figures can be seen below.

	Q1 Apr - Jun 23/24	Q2 Jul - Sept 23/24	Q3 Oct – Dec 23/24	Q4 Jan – Mar 23/24
Appraisals	98%	100%	100%	93%
Sickness	2.9%	4%	4.4%	2.4%
Vacancies	1	5%	3%	4%
Mandatory Training	95%	95%	92%	89%
NMC / AHP revalidation	100%	100%	100%	100%

Agency / Bank usage	0%	0%	0%	0%
Prevent Training Compliance	95%	97.3%	98%	93%
Safeguarding Adults	96%	95.3%	95%	96%
Safeguarding Children	99%	99.3%	100%	100%

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 quarter 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 2023/24. Changes to the NHS quality contract has seen increased quality reporting to the ICB during 23/24.

Quality Improvement/ Excellence

- Improvements have been made to the young persons pain pathway based on feedback from services users and those with lived experience.
- Members of the team have been recognised for their clinical expertise and have been invited to present at the British Pain Society Annual Scientific meeting in June 24. A further member of staff has had an article published in the international Journal of Patient Education and Counselling

Quality Improvement for 23/24

- 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 City GP Alliance, Partners in health and Nottingham University Hospitals NHS Trust (NUH). NUH provide a Medical Consultant as Service Lead.

The overarching service aim is to provide an accessible and clinically excellent service, through education and training to GPs to enable enhanced and improved gynaecology

community care. Commissioned from September 2019, the service is provided for patients in the Greater Nottinghamshire area.

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. The impact of COVID 19 significantly impacted the delivery of community gynaecology clinics during the period 20/21 and 21/22. A post COVID recovery plan was successfully implemented during 22/23 with many additional clinics being run to address the waiting list. This resulted in the achievement of the RTT target of 92% of patients being seen within 18 weeks by Q4 of 22/23. However the impact of industrial action by junior doctors and consultants and increased referral rates has resulted in many cancelled clinics and has again increased waiting times beyond 18 weeks for some patients – see below table. PICS meet with the ICB monthly to review the key performance indicators and discuss issues with service delivery.

	April 23	May 23	Jun 23	July 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23	Jan 24	Feb 24	Mar 24
% of patients treated in month against the 18 week target	94	96	92	90	82	74	59	63	69	65	63	54

Complaints, Compliments, Comments and Concerns

There have been 22 pieces of feedback received and recorded for the gynaecology service during the past 12 months and can be broken down to 7 complaints, 12 compliments and 3 concerns.

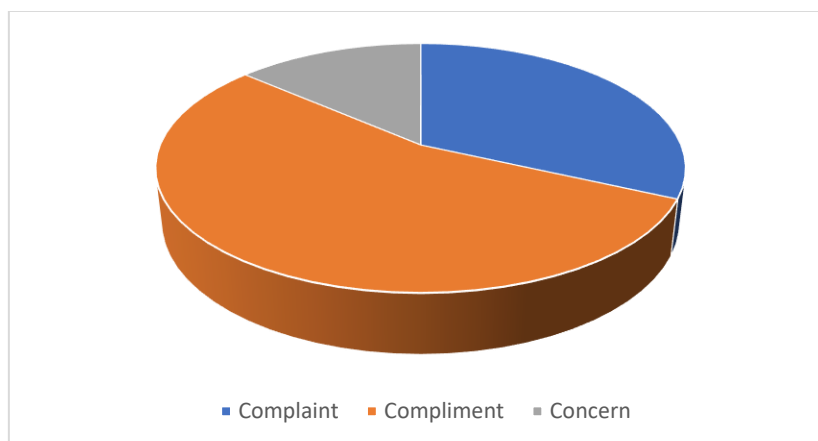


Figure 8 – Gynaecology feedback by type

The main theme from complaints were communication, staff attitude and behaviour, clinical treatment and appointment dates. Learning outcomes included the importance of good communications with patients around consultations and delivery of care. All complaints have been dealt with in accordance with PICS policy and resolved satisfactorily with lessons and actions shared with the clinical teams.

Incidents

18 incidents have been reported during April 23-March 24. As can be seen from Figure 9 below incidents around investigations/diagnosis/treatment accounted for 33%. Themes for learning included staff training and education, diligence and communication and action taken included training.

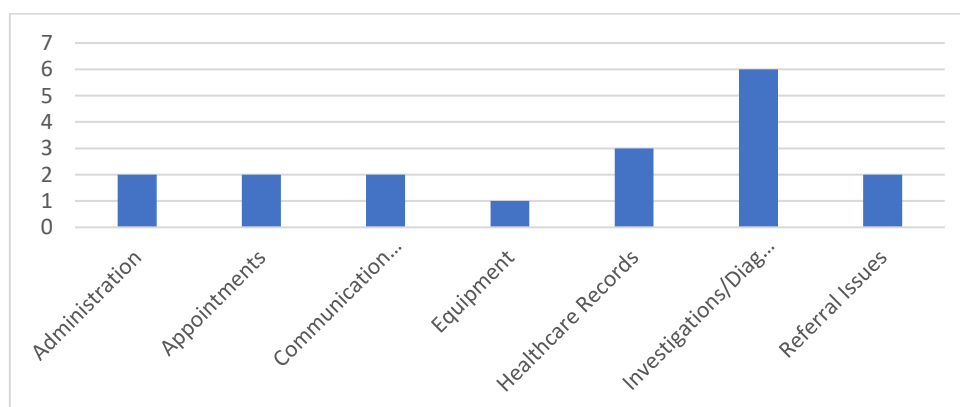


Figure 9 – Gynaecology significant events by category

Workforce

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

	Q1 Apr - Jun 2023/2024	Q2 Jul - Sept 2023/2024	Q3 Oct – Dec 2023/2024	Q4 Jan – Mar 2023/2024
Appraisals	100%	100%	100%	100%
Sickness	0%	3%	4.12%	2.2%
Vacancies	5%	0%	29%	0%
Mandatory Training	69.5%	79.3%	85%	73%
NMC / AHP revalidation	N/A	N/A	N/A	N/A

Agency / Bank usage	0%	0%	0%	0%
Prevent Training Compliance	64%	74.3%	100%	100%
Safeguarding Adults	70%	74.3%	100%	100%
Safeguarding Children	65%	90.3%	100%	100%

Due to ongoing pressures within the gynae service with increased referrals and industrial action, less time has been available to allocate for mandatory training. This will be addressed during 24/25.

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

Significant Quality Improvements made in 2023/2024 are;

- ✓ 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.

Quality Improvement aims for 22/23

- To improve mandatory training achievement against PICS target of 90%
- To continue to undertake quality improvement work around patients experiencing health inequalities as per quality contract requirements.
- Improve clinic waiting lists in line with contractual requirements.

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 GP's; 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-ordinate on-going care with community and primary care colleagues. 9731 visits were made during 2023/24.

Safe and effective

To ensure the service provides responsive, safe and timely interventions for patients with an acute care need, all referrals and 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 2023/24 it was estimated that 3449 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 have the opportunity to attend the twice yearly non-medical prescribing forum. 1 of the Advanced Nurse practitioners within the services is a qualified PNA and can deliver restorative supervision to the team.

Clinical Audit

During 2023/24, 2 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 2 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 2 complaint regarding clinical care, neither of them were upheld, 4 compliments and 1 concern were also received. The complaints were actioned as per complaints policy and resolved satisfactorily.

Incidents

As can be seen from figure 10 below, there were 14 incidents reported by the AVS team during 2023/24 which is 9 less than the previous 12 months. 4 AVS incidents were for reported safeguarding of alleged abuse which evidenced good practice; 2 incidents were attributed to a third party. All learning was shared via team meetings and across the organisation where appropriate.

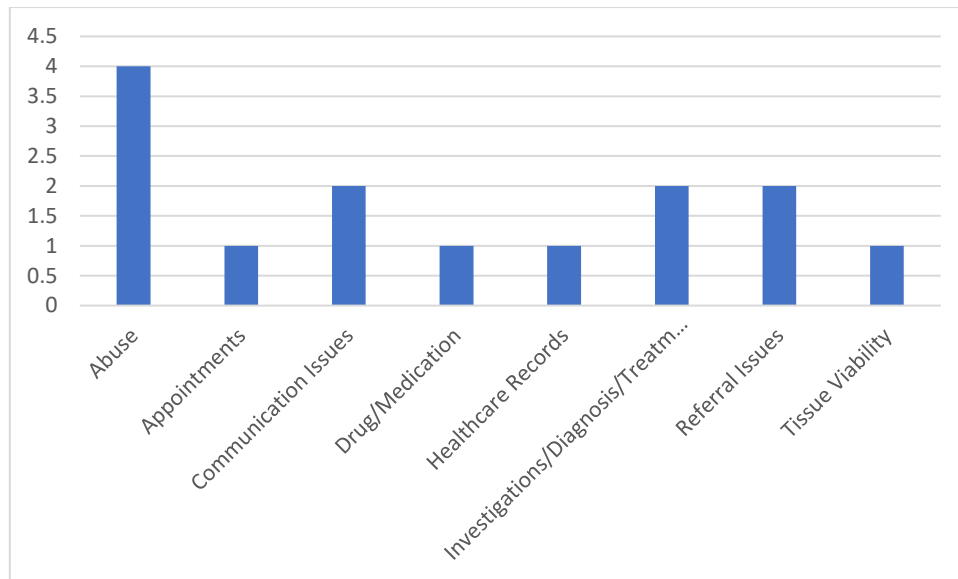


Figure 10 – AVS incidents by category

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 2023/24:

- ✓ 9731 visits were carried out
- ✓ 3449 resulted in hospital admission avoidance, equating to 34.25% of all visits undertaken
- ✓ 1658 referrals were declined due to no capacity within the service.
- ✓ 298 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.

12.0 - Sub-contracted services

Clinical Effective / Audit

Within all the subcontracted services, audits were undertaken in documentation, hand hygiene and non-medical prescribing against standards for best practice; results were good and previous improvements to safety netting advice through template use within SystmOne was sustained.

Performance

Service output measures are in place via the quality dashboard to monitor service activity

levels, GP visits avoided, hospital admissions avoided and caseload numbers. Figures from 2023/24 are below. Whilst there is some month-to-month variation, figures have been calculated as a monthly average. Please note that direct comparison cannot be made between services due to differing resources, geography of service area and service specification.

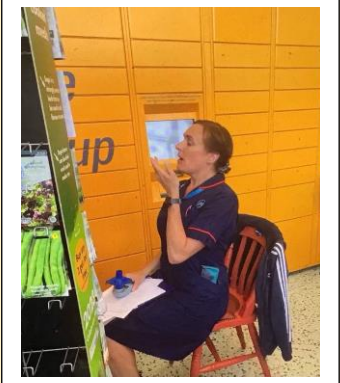
Service	Contacts	GP visit avoided	Hospital admission avoided
Respiratory	2963	1234	285
Cardiology NNE	2112	1311	349
Cardiology NW	2768	2597	903
Palliative Care NW	1312	740	783

In addition, quality indicators are reported for sickness/absence, compliance with mandatory training targets, appraisal targets and use of agency staff. This data is collated and reviewed quarterly by the Board.

Quality Improvement/Achievements in 23/24


- ✓ During 23/24 some of the achievements/quality improvements in the subcontracted services are listed below Continued support of local self-help and support groups such as Heart 2 Heart and Breathe Easy.
- ✓ Implementation of the Community Nursing Safer Staffing Tool 3 of the subcontracted services. This involved training staff and conducting 2 census weeks.
- ✓ Staff within some of the subcontracted services have been involved in pilots and community initiatives that have improved access to diagnostics and treatments such as spirometry work and the low-calorie diet project – see page below

PICS Respiratory Nurses support diagnosis of chronic lung conditions



During 2023/24, PICS Respiratory Nurses have supported ‘help find the missing millions’ of people with undiagnosed COPD. In addition to delivering spirometry clinics in general practices, they have supported community events by conducting breathing tests in a local supermarket and where needed making onward referrals to GPs for further tests. Pictured left, Sonia Hutchby, PICS Respiratory Nurse at a local supermarket undertaking breathing tests.

- ✓ Raised awareness of palliative care and supported conversations about dying through an event that took place during Dying Matters week – see below.



Dying Matters is a campaign organised by Hospice UK to encourage discussion about dying and what matters to people at the end of their life. PICS Specialist Palliative Care Nurses supported this campaign by running a drop in event at a local health centre to encourage discussion and raise awareness with both the public and other health care professionals.

Supporting 'Dying Matters' awareness week

Data on patient feedback and significant events is included in the main discussion in Section 7. All subcontracted services have patient feedback on Survey Monkey (or paper-based alternatives). Subcontracted services all use Datix for reporting of significant events, including safeguarding and pressure ulcers. Staff receive safety alerts where appropriate and feedback from clinical governance committee on significant events/complaints via team meetings and dissemination of emails.

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, Dietitian and Nurses services. 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 22/23, 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 24/25. An example of an audit completed across the practices with involvement from Clinical Pharmacists was safe prescribing Diazepam for patients with diagnosed dementia. Where needed patients have been reviewed and medication amended.

Patient Safety

Incident reporting and risk management has been considered for all PCN services as part of the governance framework and a protocol is in place to guide staff to the correct process for

their service. All PCN services either report directly to Datix or through the General Practice system they are based in. This will change for 2024/25 and all services will report through Datix as part of the plan for implementing PSIRF. All PCN staff have their own specific governance meetings monthly, where learning is shared to improve patient safety and experience.

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 well-being coach service.

Social Prescribing Link Workers (SPLW) KPI Data

PICS employ SPLW in both Nottingham West and Mid Notts area on behalf of the PCNs. Data collection has continued to 2023/24 and can be seen below. Please note direct comparison cannot be made between Mid Notts and Nottingham West due to differences in geographical size and commission between the 2 areas.

Nottingham West	Q1	Q2	Q3	Q4
Number of people referred for self-management support	94	44	96	Data not yet available
Number of referrals made to community based support	493	455	488	Data not yet available
Number of people completing a personalised care and support plan	497	786	806	Data not yet available
Mid Notts	Q1	Q2	Q3	Q4
Number of people referred for self-management support	454	548	401	Data not yet available
Number of referrals made to community based support	2012	1911	1758	Data not yet available
Number of people completing a personalised care and support plan	2188	1920	7376	Data not yet available

Health and Well-being Coaches

PICS employs Health and Well-being 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	110	66	97	139
NEWARK PCN	41	34	28	25
NOTTINGHAM WEST PCN	74	167	36	58
ROSEWOOD PCN	90	105	78	104
SHERWOOD PCN	51	16	38	68

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.

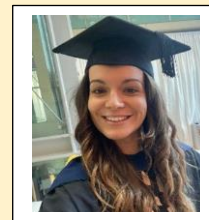
Quality Improvement / Excellent Practice

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 form the past 12 months.

PICS continue to support education and career development for PCN staff.

- 3 of the PCN RGNs are undertaking the non-medical prescribing course to develop their knowledge and skills and enhance their role.
 - Another RGN has secured a General Practice Nurse Mid-Career fellowship which will Give her the skills and resources to undertake a service development project.
- ✓ 3 of the 11 trainee Nurse Associates have qualified during 2023/24 – see below

Congratulations go to Pam Topley, Sophie Jackson and Caroline Ingham who have all successfully completed their 2-year foundation degree and qualified as Nurse Associates. They have been supported through the course by their manager and assessor Hazel Firmin, Lead Nurse for Primary Care and many other PICS nurses who have facilitated their learning. Picture below, left to right, Pam Topley and Sophie Jackson.



At PICS we like to lead the way and we have had one of the first Mental Health Occupational Therapists (MHOT) and Clinical Care Home Leads to successfully complete the First Contact Practitioner Roadmap - see below



Primary Integrated
Community Services Ltd

CONGRATULATIONS ON SUCCESSFUL COMPLETION OF THE NHS ENGLAND FIRST CONTACT PRACTITIONER ROADMAP

GP owned
NHS provider

At PICS we have one of the first Mental Health Occupational Therapists and Clinical Care Home Lead successfully complete the FCP Roadmap at the University of Salford. Our successful PICSies are: Tracey Evans, MHOT (Rosewood PCN), Naomi Cummins CCHL and Catherine Seals MHOT (Nottingham West PCN)

Social Prescribing Link Workers have had another successful year. They have increased awareness of the role through holding drop in sessions in libraries, worked alongside other health and social care professionals to deliver sessions supporting those with mental health issues, limited mobility and those wanting to have a healthier life style. They have also run

craft sessions, hosted celebration events and chair based exercises through co-production with local volunteers.

In addition the Ashfield North Social Prescribing team recently applied for and were awarded a grant for a wellbeing afternoon for their patient group – see below.

The Ashfield North team has been running its own monthly patient group since November 2021. This group is for socially isolated older patients in the Ashfield North area who are invited to attend for a social get together, tea, biscuits, and a relatable guest speaker.



The team (picture above) recently applied for and were awarded a grant to fund a wellbeing afternoon which took place in January, which saw the team take our patient group on the road to Ashfield Voluntary Action. Transport was provided and a delicious afternoon tea and each attendee was given a wellness bag. We used part of the funding for Opus Music to attend, they provided music for wellbeing through listening or participating in playing instruments and singing songs which had a therapeutic effect on the group (picture left).



14.0 Statement from Nottingham and Nottinghamshire Integrated Care Board

Primary Integrated Care Services (PICS) Quality Account 2023-24 NNICB Corroborative Statement

Introduction

1.1 In July 2022 the Integrated Care Board was established in line with the Health and Social Care Act.¹ As such, Nottingham & Nottinghamshire ICB (NNICB) has a statutory duty to secure continuous improvement in the quality of services; and in the outcomes for people using those services. The first year of the NNICB has coincided with an exceptionally demanding system landscape with ongoing recovery from the Covid

pandemic and additional challenges of clinical demand and industrial action which continued through 2023.

1.2 NNICB has continued to work with Primary Integrated Care Services (PICS) in pursuit of the monitoring and continuous improvement of services during 2023/24, in accordance with the statutory functions of the ICB described above.

1.3 The intention for 2023/24 was for NNICB and PICS to continue fostering and developing collaborative and systems-based working, and this statement provides a reflection of progress.

Quality Visits

2.1 There have been multiple discussions, meetings, and touchpoints with PICS during 23/24. PICS has continued to develop services across the wider system including areas within Bassetlaw. This work focuses on 4 main pillars GP Practice, Community services, Out of Hospital services, and PCN services. PICS have received and maintained an overall Good rating with no concerns raised from CQC inspections.

2.2 Frequent contract review meetings have been undertaken with NNICB and PICS to facilitate system-level support and insight. Services have been responsive to local need, focusing on reducing waiting times and widening access. These aspects have been identified in independent service review and improvement programmes.

2.3 Transparent communication, streamlined workflows, and evidenced-based practices are all aimed at promoting the well-being of patients and staff. Further developments have been made with expansion of the Professional Nurse Advocate Role.

3. Working as system partners

3.1 Recovery of services continues. Access to training and the monitoring of training needs is clearly evident with the development of Learning From Patient Safety Events (LFPSE). This forms part of the implementation and development of the work plan for the mandated Patient Safety Incident Response Framework (PSIRF). There has been positive engagement in system groups including shared learning during this development phase with other providers. System work regarding clinical governance also is strengthened with the links to the Primary Care Networks (PCN) and the single point of access to policies which are reviewed and monitored through a rigorous governance process.

3.2 Tackling inequality and supporting recovery plans across the system is clearly a key driver to the development of services. Awareness and involvement in services that

ensure patients are cared for close to home and where possible in their own homes with support has further supported a reduction of pressure in other areas of our system, seen through tracking admission avoidance data. This has included social prescribing link worker roles and improved access to diagnostics and evidence-based health care.

3.3 Further to the work undertaken around feedback PICS has also ensured that a route is available to allow communication from the frontline to board members. This is supported by the freedom to speak up policy recently ratified and now developed through training.

4. Looking forward to 24/25

4.1 PICS are developing their approach to the implementation of the Patient Safety Incident Response Framework and developing training programmes to support this. In turn this will positively impact the adoption of a just culture for patients and staff and enable resources to be focused on learning from incidents and quality improvement.

4.2 Collaboration with system partners in the development of the local Quality Schedule and adoption of nationally recommended quality improvement initiatives continue. This will include the continued development and review of culture and values to strategically support staff to provide services.

¹ <https://www.legislation.gov.uk/ukpga/2022/31/part/1/crossheading/integrated-care-boards-functions/enacted>

² <https://www.england.nhs.uk/patient-safety/incident-response-framework/>

15.0 Appendices

Appendix 1 – Annual Safeguarding Report 2023/2024



PICS%20annual%20safeguarding%20report

Appendix 2 - PICS Datix Incident and Complaints 2023/2024



Datix%20significant%20events%20and%20complaints

Appendix 3 – GP survey data 2023/24



GP%20survey%20res
ults%2023.docx

References

[Data on Written Complaints in the NHS, 2021-22 - NDRS \(digital.nhs.uk\)](#)

[communication-complaint-types-and-contributory-factors-report_pdf-80571206.pdf \(gmc-uk.org\)](#)