



Annual Quality Account 2023-24

About Annual Quality Accounts

Quality Accounts, which are produced by providers of NHS funded healthcare, focus on the quality of the services they provide.

They look at:

- Where an organisation is performing well and where they need to make improvements.
- Progress against quality priorities set previously and new priorities for the following year.
- How the public, patients, carers and staff were involved in decisions on these priorities.



If you would like this information in another language or format such as large print, please contact: **0115 883 9654**

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Introduction

“ We are proud to present our Annual Quality Account for 2023-24, which gives us all an opportunity to reflect on our progress and where there is more work to do. It describes our patients’ experiences of our services and how we have progressed against our quality priorities. ”

We continued work on our three current priorities, which are:

- Patient engagement – diversity and health inequalities
- Patient safety – a just culture and learning
- Stop the pressure – skin tone

And we have introduced a new priority around reducing falls.

A huge amount of work has been done to address health inequalities, including introducing a Cultural Guide to support colleagues working with Nottingham’s diverse and vibrant communities.

We organised our first Race Health Inequalities Conference and are planning a similar event for 2024-25 so we can continue to promote conversations across health and social care. We have also worked with our staff network groups to ensure we give everyone a voice within CityCare and we can reduce barriers to accessing our services.

Over the year, our Freedom to Speak Up Guardian has developed a growing team of champions who work as a network across the organisation. We have promoted their work widely as we know a Just Culture and an environment where colleagues feel able to speak up plays an important role in patient safety.

To reduce pressure ulcers, we have adopted a skin tone tool that is available to all staff and a best-practice document is used in all tissue viability training. Dark skin models have been acquired for training to reflect the ethnicity of our communities.

Our focus for 2024-25 will be prevention of falls, engaging with staff, the public and patients through training, falls link workers and our Patient Experience Group.

We are also proud to see how much of our work is delivered in partnership with colleagues across Nottingham and Nottinghamshire, especially with our integrated care system partners.

As a Board we are committed to ensuring we listen to our patients and staff and will continue to use their feedback to inform the development of CityCare to ensure we remain staff and patient centred and we are making a difference every day to the communities we serve.

We hope you find this account informative and that it demonstrates how our patients are very much at the centre of everything our colleagues at CityCare do. We would like to thank all teams at CityCare for their continuing dedication and compassion.

To the best of our knowledge, the information in this document is accurate and a true account of the quality of our services.



Sherry Malik



Lou Bainbridge

Sherry Malik, Chair, and Lou Bainbridge, Chief Executive, on behalf of the Board

About CityCare

Nottingham CityCare Partnership, the largest provider of NHS community services in Nottingham, offers a range of services for both adults and children. We have a workforce of more than 1,200 and our clinical colleagues have contact with more than 38,000 patients every month.



Children's Services

Our Children's Public Health 0-19 Nursing Service works closely with other services, including Midwifery, GPs, Early Help, Schools and Children's services, to develop an integrated approach to enable families to receive the right support, at the right time, from the right person.

This integrated approach optimises children's physical, emotional, cognitive and social development, creating the foundation for every child to reach their full potential in childhood and beyond.

Working in partnership with families, we aim to reduce inequalities in child development across Nottingham.

Care and support from the Children's Public Health 0-19 Nursing Service starts at 28 weeks of pregnancy and continues through a child's early years.

The team consists of:

- Health visitors and family nurses, who have specialist knowledge of under 5s
- School nurses and registered nurses
- Other experienced practitioners who have had specialist public health training in working with children and families.

They support families to give their child the best start in life by supporting them with breastfeeding, assessing the health, wellbeing and development of their child and providing public health support and advice at key stages of each child's life.

We also provide the Child Health Information Service, ensuring that each child and young person in Nottingham City has an active care record, supporting the delivery of clinical services.

Other services provide specialist advice on diet and nutrition and continence.

 <https://youtu.be/Ek37KoOuqa8>

Adult Services

Our adult community services provide care from nursing and allied health professionals in the patient's own home, clinical settings or through our outreach team.

With increasing health inequalities, education to both prevent and enable self-management of long-term conditions is provided working alongside other health, social care and voluntary organisations.

We support the national agenda to increase out-of-hospital care by working in partnership with organisations across Nottingham and Nottinghamshire to provide appropriate and high-quality healthcare services in the community.

We also develop programmes of care to address the often-complex needs of our patients, while working to limit pressure on acute services.



<https://youtu.be/83axumSViRI>

Urgent Care

Our Urgent Community Response (UCR) service supports people who are in crisis, with a consistent offer across Nottingham and Nottinghamshire.

The service was introduced in response to NHS England's national mandate to accelerate the treatment of urgent care needs closer to home and prevent avoidable hospital admissions. The countywide UCR service provides a two-hour response to support a person who is at risk of admission or re-admission to hospital due to a crisis and is likely to attend hospital within the next 2 to 24 hours.

The multi-disciplinary team offers:

- Patient-focused assessments, aiming to either maintain or improve the individuals' independence
- Rehabilitation
- Equipment and short-term rehabilitation goals
- Regular reviews and onward referrals.

The aim is to prevent further deterioration and to keep them safe at home.



<https://youtu.be/VOpZ24Kz2ws>
https://youtu.be/9a100CiW5_U
https://youtu.be/m_iOnt68oag

Urgent Treatment Centre

The Urgent Treatment Centre (UTC) provides assessments and treatment for health problems that are urgent but not life-threatening.

It is open every day between 7am and 7pm, with no appointment needed (although they can be booked through NHS 111). It receives more than 5,000 attendances each month.

It provides care for health conditions such as minor burns or scalds, minor injuries or illnesses and eye and skin infections.

The centre has an X-ray service available, which means it can also treat patients with suspected broken bones, sprains and strains, alleviating pressure on the local Emergency Department.



A spotlight on the Small Steps, Big Changes Programme

Small Steps Big Changes (SSBC) is one of five National Lottery Community Fund (TNLCF) A Better Start (ABS) sites. Hosted by CityCare, the programme is a partnership committed to improving three core child development outcomes from pregnancy to four years old:

- **Improving children's diet and nutrition**
- **Supporting children's social and emotional skills**
- **Helping children develop language and communication skills**
- **Bringing about 'systems change' – in how services work with parents and communities**

The Programme received £45 million of funding over 10 years to 'test and learn', evaluate and then embed new approaches.

SSBC has commissioned evidence based, co-designed services, workforce training, public health campaigns, and developed resources in four wards of the city. Some of the Programme activity has been delivered across the city and wider system.

Since the start of the Programme in 2015, SSBC has commissioned 46 services and activities, designed, and delivered four public health campaigns, and funded the creation of over 80 new living wage/apprentice levels roles, creating wider social value.

The portfolio of services and activities have as of March 2024 reached at least 82.1% of the eligible children, with 6,000 eligible children accessing the Family Mentor Service.

The Programme currently commissions the Healthy Lifestyle Pathway Service delivered by CityCare 0-19, funded additional Family Nurse Partnership nurses and piloted 'Stay One Step Ahead', a home safety intervention to reduce avoidable and preventable injuries in 0-4's – delivered by CityCare 0-19 and other partners.

This is alongside commissioning an infant mental health service, an award-winning speech and language service, and purchasing 133 recliner chairs for maternity wards to support early attachment and father inclusive practice.



Kindness, Respect, Honesty, Trust

Impact

SSBC is evaluating the impact of its services and approaches, TNLCF has also commissioned an evaluation and shared learning partner, who is supporting the fund to evidence the impact of early intervention, prevention and influence policy nationally. Nottingham Trent University (NTU) was commissioned to lead the local evaluation from 2018 to 2023 and the programme now has other evaluations in place.

Findings to date show a positive impact on children's outcomes, alongside rich qualitative evidence:

There was a statistically significant difference in mean vocabulary scores between SSBC children and non-SSBC children. This finding suggests that overall engagement with the SSBC programme is linked to better vocabulary scores.

Children from SSBC wards who participated in the programme for 18 months or more had the highest mean 24-Month assessment of social quality (ASQ) scores (excluding problem-solving domain) and overall scores.

Parents reported improvements in wellbeing and confidence, children eating healthier food options, improvements in sleeping routines and behaviours.

Reports are available on the SSBC website in the knowledge hub section.

With less than a year until the end of the funding, the programme is now focused on legacy, sustainability and sharing the learning.



Targeted Healthy Lifestyle Team supports mum and child to improve their diet and lose weight

Food and nutrition advice and support for a mother with an eighteen-month-old child has helped the family learn about healthy and unhealthy food choices and changed the way they think about food.

Nottingham CityCare's Targeted Healthy Lifestyle team, commissioned through SSBC, supported Charmaine and her children by offering nutrition and healthy eating sessions, which helped the family to lose more than a stone (6.3kg) in weight in the process.

Sessions offered nutritional information, food-related games for the children, and support for the whole family.

Charmaine, a permanent makeup artist based in Nottingham and her 18-month-old son were referred for sessions with the Targeted Healthy Lifestyle team after taking her son for growth measurement checkups. The results showed her 18-month-old had grown rapidly in a short amount of time.



The team visited the family's home in Wilford, Nottingham, to host sessions on topics such as salt quantities in food, sugars, and helping them to differentiate between healthy and unhealthy foods.

Not only did the children learn from the sessions, but mum Charmaine says it completely changed the way she thought about food, the contents of food she prepared, and the portion sizes of meals she cooks for her family.

"I thought I knew a lot about food, but the sessions completely changed my perception," said Charmaine.

"It changed the way I shop for food, as well as the view I had on certain foods that I thought were good for us."

"While the sessions were for my 18-month-old, they impacted the whole family and all the foods we now eat. My three-year-old also joined in with the games, and now talks about what is a healthy food"

Six months after the final sessions with the Targeted Healthy Lifestyle team, Charmaine has lost weight and her youngest child now has healthier growth patterns thanks to the advice, support and education provided by the team.

Find out more at
www.nottinghamcitycare.nhs.uk/our-services/targeted-healthy-lifestyle-pilot





Sharing quality lessons internationally

In 2023, eight fourth-year nursing students from the Luther College, USA made a three-week visit to CityCare. Eighteen CityCare services, both adults and 0-19 services, provided placements, offering three consecutive days of observation experience for a student. The feedback we received included:

“CityCare Nurses are invested in patient lives. This allows them to teach in a manner that is personal and effective to each individual patient.”

“What really stuck out to us was that the NHS nurses prioritise preventative medicine - quite different to the US system, which manages problems after they have occurred. For example, during the diabetes placement I attended the Desmond (Diabetes Education and Self Management for Ongoing and Newly Diagnosed) classes which empowered and educated the patient with goals to prevent hospital admissions.”

“While I’ve been here, it has been amazing to see how in depth personal care can be. The NHS doesn’t just focus on one thing. They look at everything to do with the patient to perform holistic care.”

“Some would fear that universal healthcare would cause lower quality healthcare, but it was the exact opposite that I saw during my time in the UK.”

“There are so many different speciality clinics throughout the city that serve the communities within Nottingham so there is a lot of access to multiple services. The clinics allow more people to access care easier.”

“ It is amazing to see so many patients being so well taken care of who do not have the ability to come into a clinic. ”

Listening to patient and service user voices

Engaging our patients and service users

We continue to involve patients and service users in helping us improve and develop our services through ongoing feedback and engagement opportunities. Throughout 2023-24 our Patient Experience Group (PEG) met online and in person, and members continued to be involved in a wide range of different activities, including:

- Giving feedback on new leaflets, advising whether they were clear, concise, and written in plain English
- Providing insight, discussion and feedback for staff involved in research
- Contributing to the suggested priorities for the annual quality account (AQA)
- Representation on our Equality, Diversity and Inclusion Committee and the Patient and Public Committee
- Forming part of the review team for quality visits.



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Patient and Public Committee

The Patient and Public Committee (PPC) continued to meet throughout the year, regularly reviewing and supporting the specific areas of focus identified by the committee, including:

- Reviewing the feedback we received from service users of various protected groups to ensure access to our services and overall experience is accessible and equitable
- Advising on approaches to better communicate service changes to our patients and service users.

Children's Services Improvement Group (CSIG)

Further recruitment to the group took place throughout the year and the membership now includes parents, carers and representatives from local community groups and organisations that represent young people across Nottingham. Members of the group contributed to the suggested priorities in the AQA.

Moving forward, the function of the PPC will now be undertaken by the new Community Engagement Assurance Committee (CEAC) and our service user groups will be relaunched in the next 12 months.

Cultural Guide

We launched a new version of our Cultural Awareness Guide for all CityCare colleagues to support them as they interact with each other, our partner organisations, and Nottingham's diverse communities.

Engaging effectively with all our population will help ensure everyone has equal access to our services and receives the same quality and experience of care. The 96-page guide will help us all treat everyone with understanding and respect so we can better understand and match our care with their needs.

Although there are various dimensions and elements that contribute to an individual's culture, the guide focuses on characteristics based on religious beliefs and ethnic heritage. The guide is divided into three main sections, which cover areas such as cultural religious practices, dietary requirements, dress and modesty, holy days and festivals, and geographic location.

Developing a diverse, inclusive and culturally skilled workforce will create an environment where everyone's voice is heard, and everyone feels valued and respected, leading to the delivery of more effective and efficient care to all the communities we serve.

Our workforce is committed to increasing their knowledge and understanding of the different cultures in Nottingham.

This guide is a tool to support individuals, giving them an overview of some of the diverse cultures within both CityCare and across the population. With increased knowledge and awareness, colleagues will be better equipped to understand how best to tailor their support to the needs of each individual patient.

The guide has been shared with our ICS partners as an example of good practice and will support our ambitions to work collaboratively to better meet the needs of our Nottingham and Nottinghamshire citizens.



Patient and service user satisfaction

We ask people about their experience of our services on an ongoing basis. **We are pleased that in 2023-24...**

We have continued to achieve high levels of satisfaction, with the total number of patient survey responses at

5,694
compared with **5,833** in 2022-23
and **3,744** in 2021-22

84%

Survey results show that **84%** of service users rated our services as **Very Good** or **Good** overall (all questionnaires).



Satisfaction within all groups

It is important that our services meet the needs of particular groups and people with protected characteristics as defined in the Equality Act 2010. Our surveys include monitoring forms enabling us to analyse this. In response to the question: **“How well did the service meet your overall satisfaction?”**

694

patients/service users from **minoritised ethnic groups** answered this question and of these

585

84% rated the service as **very good** or **good**

1,391

patients/service users who consider themselves to have a **disability** answered this question and of these

1,259

91% rated the service as **very good** or **good**

310

patients/service users who identified as being **Lesbian, Gay, Bisexual** or **Other** answered this question, and of these

255

82% rated the service as **very good** or **good**

A range of comments from patients/service users are shared on a quarterly basis with the CityCare board and commissioners in line with our contracting requirements. Details regarding complaints are also provided. No complaints were raised in relation to equality issues or discrimination in 2023-24.

Managing complaints

When people have a less positive experience regarding our services, we are keen to listen, reflect and take action to put things right.

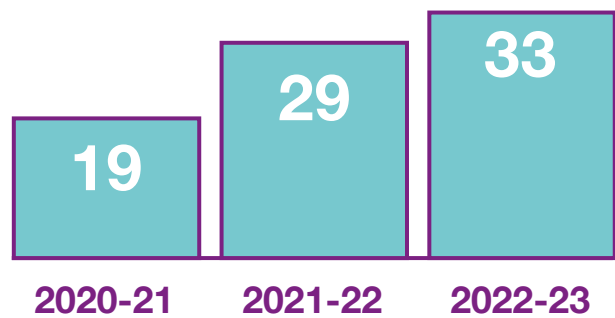
Our dedicated Customer Care Team receives complaints and acts as a main point of contact. As a provider of NHS and local authority funded services we comply with the NHS and local authority social services regulations and if people are not happy with the outcome of their complaint, they are able to ask the Parliamentary and Health Service Ombudsman (PHSO) for a review.



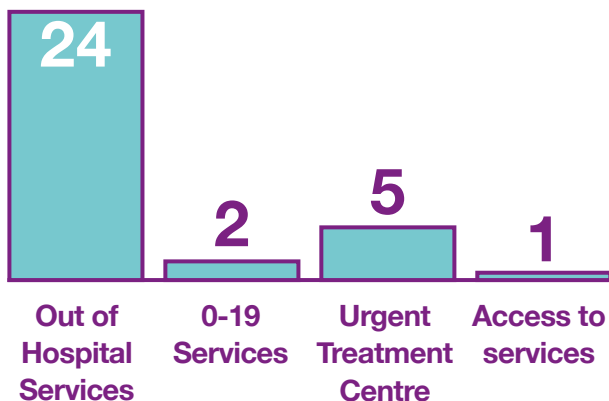
In 2023-24 the ombudsman asked to review one complaint handled by CityCare. The complainant was found not to have followed the correct process before contacting the PHSO, therefore the PHSO referred the complainant back to CityCare.

CityCare received 32 new complaints within the year. CityCare closed 32 complaints over the year. 2 complaints were upheld, 18 were partly upheld, 6 were not upheld, 1 was withdrawn, 5 had no findings.

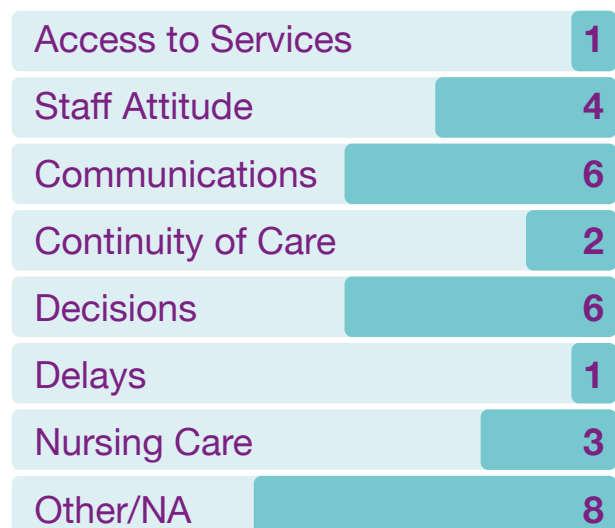
Year on year comparison



New complaints received within the year led by CityCare services:



Complaints by issue



Learning from complaints and feedback

Below are examples of how we have responded to complaints and feedback in 2023-24

| Service | Issue Raised |
|---|---|
| Children's Public Health 0-19 Nursing Service | The mother of a baby feels that reflux and tongue tie could have been picked up earlier by professionals. |
| The changes we made | |
| The nutritional problems in infants and children training was not part of staff essential training and was part of optional CPD (continuing personal development) training. Going forward, this will become essential training for any staff member who runs a well-baby clinic and is visiting a child under the age of one at home. | |
| People benefiting from the change | All 0-19 service users |

| Service | Issue Raised |
|--|---|
| MOSAIC Musculoskeletal Physiotherapy and Occupational Therapy Service | A patient reported that he was able to self-refer to MOSAIC through the website form. However, he later found that his GP practice is not a provider that can use MOSAIC. |
| The changes we made | |
| The Service manager apologised to and thanked the patient concerned. We reviewed and updated the online referral form to ensure only patients from relevant GP practices could self-refer. | |
| People benefiting from the change | Patients using the self-referral system. |

| Service | Issue Raised |
|---|--|
| MOSAIC Musculoskeletal Physiotherapy and Occupational Therapy Service | Concerns and feedback received from MOSAIC patients identified challenges for them accessing the service in a timely manner. |
| The changes we made | |
| In August 2023, we launched our new triage process for patients referring to our MSK pathway, which reduced our median waiting time from 51 days to 15 days. In addition, the proportion of patients being seen within 30 days has increased from 33% to 84% (as of April 2024). Previously, all patients who self-referred into our service for Physiotherapy and Occupational Therapy were placed straight on to our waiting list without review. Now, with our new triage process and enhanced self-management resources, our experienced clinicians can triage patients into the right pathway, with the right care at the right time. Since its implementation, an average of 30% of patients have been able to self-manage their conditions without coming into clinic, resulting in more capacity to see those patients with urgent needs. | |
| People benefiting from the change | All MOSAIC patients. |

Comments - Adult Services

"Staff all very friendly and helpful, knowledgeable, and happy to answer all questions. Put my dad at ease especially as he also has dementia".

Integrated Reablement Service
- House visit to bed bound father.

"My cardiac nurse was brilliant. She was very friendly, helpful and gave me plenty of advice. She listened and helped me through a very low period and helped me laugh again".

Primary Care Cardiac Service

"Your team of nurses were really nice, punctual, friendly and professional. When I had a question that they didn't know they asked for me".

Community Nursing

"Looked after from start to finish, and on time with pleasant and informative staff".

Community Nursing

"Physiotherapist put me at ease, assisted in getting exercises right for me. Was friendly, explained things well and discussed targets".

MOSAIC

"Extensive advice regarding my condition, physiotherapist answered my all questions, very pleasant and caring specialist".

MOSAIC

Comments - 0-19, Children's Services

"Coming around every week helped us stay in routine. Always asks if we have any concerns with baby and always patient with explaining things with me and partner. Furthermore, helped us understand things with baby before he was even born with things like body language and social cues and been a really big help".

Family Nurse Partnership

"Helps me when I'm struggling with my mental health which is regular. Is always there when I have a question about my daughter".

Family Nurse Partnership

"You make me laugh a lot. You are good with my child, and he likes you visiting".

Health Visiting

"Health visiting team is always on hand to provide help and support whenever requested".

Health Visiting

"I enjoy the visits, interesting things to talk about on how to care for baby and advice is great on my mental health and relationship".

Family Nurse Partnership

"Great advice and information about first foods and weaning".

Nutrition Peer Support



Comments – Urgent Treatment Centre

“From diagnosis to treatment, every step was excellent”.

“Every time I come the person who I see is amazing and the service is second to none. They always make me feel reassured and are very helpful”.

“Great explanation of what was going to happen, what I needed to do as the patient and what would happen next”.

“The nurse practitioner was excellent. Very positive and welcoming. Did a thorough examination and provided a lot of reassurance”.

“

“Staff were wonderful, kind, efficient and very caring”.

”

“

“The clinicians saw me very quickly, diagnosed and treated me extremely efficiently. They were very kind and considerate and treated the situation swiftly. I have healed from it now due to their advice and I cannot recommend their services enough”.

”



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Review of quality performance 2023-24

In this part of the report, we look back at the progress made against the quality priorities we set for 2023-24.

In the document we have explained where we have not achieved our goals and what we are going to do to continue to make improvements. It also sets out the priorities we have agreed for the coming year and how we intend to achieve them and track progress throughout the year. While good progress has been made on many of the Quality Priorities for 2023-24, progress on others has been slower than planned due to operational pressures.

These priorities together address the three domains of **quality**; patient safety, patient experience and clinical effectiveness. For more information on the background to these priorities, click [here](#) to read last year's report.





Priority 1

Patient engagement - diversity and health inequalities

Health inequalities are unfair and include avoidable differences in health across the population and between different groups in society. They arise because of the conditions in which we are born, grow, live, work and age. These conditions influence how we think, feel and act and can impact both our physical and mental health and wellbeing. In this wider context, healthcare inequalities are about the access people have to health services and their experience and outcomes.

The CityCare Three Year Strategy (2022-2025) includes a strategic aim to work in partnership to deliver better outcomes. We have committed to achieving it through co-designing and co-producing our services with our communities. To achieve this aim, we should work with community user groups to deliver services in ways most appropriate for, and valued by, our communities with a clearer focus on improving equality of access and inclusion to reduce health inequalities, which were highlighted more than ever during the COVID-19 pandemic.



What we said we would do

Attend three community user groups to discuss CityCare services, how they access healthcare and potential barriers to our services.

Identify three protected characteristics relevant to Nottingham CityCare service delivery and our user group demographics (minoritised ethnic groups).

Identify one action from each community group that would support their users accessing and engaging with CityCare services.



What we have achieved so far

In 2023-24 we developed a new health inequalities framework that will support our community engagement.

We conducted focus groups with service users in our Integrated Reablement care home beds and patients in our Pulmonary Rehabilitation Service to learn how we can better focus our engagement offer.

We attended Health and Wellbeing Community Events in Bulwell and St Ann's to promote our services in local communities.





Priority 1 (continued)

Patient engagement - diversity and health inequalities



Priority 1
new actions for 2024-25



**What do we plan
to achieve?**

- Relaunch of Patient Experience Group with a focus on broadening our offer to patient representatives.
- Develop and begin implementation our new Patient Experience and Engagement Strategy.



Health Inequalities Framework

The CityCare Health Inequalities Framework was ratified in April 2024. The new framework outlines our ambition to play an active role in reducing health inequalities across our communities. The CityCare 2022-25 Strategy highlights within all key aims, the ambition to have a positive impact on the long-term health and wellbeing of our communities. Therefore, the framework serves as a documented plan to bring those elements out of each aim together. This document was formulated following collaboration with stakeholders from Public Health and the Integrated Care Board and uses population data. As a result, it will enable our workforce to recognise the role they can play in impacting better, longer term health outcomes.

The Health Inequalities Framework provides guidance for staff on a revised approach to service review. It highlights how by engaging with the population data held regarding the make-up of the people we care for, we can focus on ways to address identified gaps in access to healthcare. It will also motivate our workforce to work with their communities to hear what would work best for them.

This new approach puts patient engagement high on the agenda and will guide and support staff to engage with their service users and use feedback to develop new approaches to service delivery.

Supporting documents are currently being devised to support the formal launch of this new framework in autumn 2024.



Priority 2

Patient safety

- a just culture and learning

This priority focuses on patient safety and aims to further embed behaviours of an effective and compassionate patient safety reporting, learning and quality improvement system. This will be underpinned by openness and transparency within a just culture.

It builds on the roll-out of our Patient Safety Incident Response Framework (PSIRF). The priority will involve all CityCare teams and we will work as part of the Integrated Care System (ICS) in partnership with the overarching priority. The fair treatment of staff supports a culture of fairness, openness and learning in the NHS by making staff feel confident to speak up when things go wrong, rather than fearing blame.

This priority will continue throughout 2024-25 as the PSIRF is implemented. The transition phase commenced on 1 April 2024 and will run for 12-18 months. An audit tool will be developed and used to measure the use of PSIRF and we expect to evaluate this every quarter with a full audit every six months to check on which areas are working and where we may need to make changes to strengthen the process.



What we said we would do

Increase engagement in the response to patient safety incidents by all staff.



What we have achieved so far

Patient and public involvement has been reviewed and we are looking at the scope of the patient safety partners in conjunction with the ICB and academic health networks.

PSII (Patient Safety Investigation Incident) training has started and cohort one has received training. Operational training to ensure CityCare's compliance with the PSIRF Learning Response toolkit is under way led by the PSIRF transition lead and delivered at local team meetings throughout March, April and May 2024.

E-learning from patient safety training level 1 for all staff and level 2 for band 6 and above. We have increased the number of safety huddles and we are looking at terms of reference for these.

Training for all staff will continue throughout 2024-25.





Priority 2 (continued) Patient safety - a just culture and learning



What we said we would do

Compassionate treatment of staff following a patient safety incident.

As part of quality improvement, to share examples of excellent care delivery.



What we have achieved so far

Training for PSIRF has been commissioned. 12 staff will be taking part in Patient Safety Incident Investigation (PSII) training, which is based on SEIPS (System Engineering Initiative for Patient Safety) and 25 staff will be completing Patient Safety Response (PSR) training.

As we move away from the serious incident framework the majority of CityCare incidents will be investigated as a Rapid Learning review or After Action Review rather than PSII.

Engaging with families training has also been commissioned.

SEIPS asking better questions resource has been developed, aligned to the Health Services Safety Investigations Body's educational resources.

Co-production of final templates/learning resources has been achieved with the members of the PSIRF transition stakeholder group and has been tested throughout March 2024 by the PSII Triage Panel pilot sites – Infection Prevention and Control, Primary Care Networks 6 and 8 and Children's Services.



What we said we would do

Develop Patient Safety Champions in teams to lead patient safety huddles and/or following action reviews.



What we have achieved so far

Staff who attend the PSR training will also be able to be patient safety champions, leading on and championing PSII Triage Panels.

Safety huddles have been piloted as a response to investigating two pressure ulcer serious incidents. This involved the team who cared for the patients discussing safety improvements and improved ways of working to prevent the same incidents happening again. This involved them in developing the learning across the team in an open discussion which they found very beneficial.

The weekly Patient Safety Incident Triage Panels are now contributing to safety huddles.



Priority 2 (continued) Patient safety - a just culture and learning



Priority 2 new actions for 2024-25



What do we plan to achieve?

Compliance with PSIRF Standards - establish a Patient Safety Partners model.



What do we plan to achieve?

Ensure there is organisation wide understanding of the PSIRF and what it means to CityCare.



How do we plan to achieve it?

CityCare will develop an organisational approach to recruiting, working with and supporting Patient Safety Partners (PSPs): PSPs will be recruited from a diverse range of communities and specific lived or previous work experience for involvement in patient safety improvement projects. A training needs analysis will be undertaken to support induction and ongoing training for PSPs.



How do we plan to achieve it?

Training sessions have been rolled out throughout March, April and May 2024 to ensure Care Groups and local teams have a robust understanding of the four principles of PSIRF, how these relate to safety in CityCare and have confidence to apply tools that support these principles in practice.



What do we plan to achieve?

Establish a professional panel of PSII SEIPS trained investigators to ensure learning from Patient Safety Events (SEIPS trained investigators)



How do we plan to achieve it?

Training sessions and learning response drop-in clinics will be mobilised throughout May 2024 and will run on Thursday mornings hosted by one of the Patient Safety Specialists.





Priority 3

Stop the pressure - skin tone

We are committed to preventing the skin damage caused by pressure ulcers, which occur when people have reduced movement and stay in one position for too long (either sitting or lying). This skin damage can be much more severe if people are poorly and malnourished. Nottingham City has a diverse population and often the signs to look for when this skin damage starts is more difficult to see in dark skin and most training in healthcare centres is around what to look for in pale skin tones. This means the early signs of skin damage can be overlooked in dark skin potentially delaying preventative action.

This priority is focused on patient safety and avoidance of patient harm. Skin damage has a significant effect on patients and causes serious medical and psychological problems if pressure ulcers develop. The priority builds on the national best practice statement that the CityCare tissue viability lead helped to develop. Skin tone stickers have also been developed using a skin tone scale.

Following discussions during our quality account engagement, we will extend this priority next year to include other relevant areas.



What we said we would do

Roll out of the skin tone tool to all services.



What we have achieved so far

Skin tone stickers have been distributed and the skin tone best practice document has been adopted by CityCare and is available to all staff. The document has been adopted in all tissue viability training and dark skin models have been acquired for training.

Tissue Viability team members attended the equality and diversity conference and discussed skin tone and will develop the conversations around research and practice development.

Teaching regarding skin tone is in all our pressure ulcer training and in the category training.





Priority 3 (continued) Stop the pressure - skin tone



What we said we would do

Have skin tone recorded on patient electronic record.



What we said we would do

Discuss skin tone identification and pressure ulcer as issues in patient safety investigations when assessing patient incidents.



What we have achieved so far

We met the tissue viability lead from Sussex who has a skin tone tool on SystmOne and has given us permission to use it. We are contacting their digital lead to obtain the tool and then have it customised for use in CityCare via our digital team. This is planned to be rolled out with a new pressure ulcer risk assessment.

We will develop a tool for SystmOne for the core generic assessment rather than just pressure ulcer documentation.



What we have achieved so far

At present this is not a factor recorded on inphase although ethnicity is on the contact details. This will be further discussed with the quality and safety team.

The weekly Patient Safety Incident Triage Panels are now contributing to safety huddles.



Priority 3 new actions for 2024-25



What do we plan to achieve?

- Roll out the skin tone tool to all services with a new pressure ulcer risk assessment tool by March 2025. This will record skin tone in the patient record.
- Work with CityCare's digital team to customise and implement the SystmOne tool.

3

Priorities for quality improvement **2024-25**

In addition to continuing work on the three priorities already outlined, one new additional priority has been set for 2024-25.



Priority 4 Falls



Due to a high risk of morbidity and mortality and increased frailty of our vulnerable patients, we will focus on falls assessments and reduction. We will make falls prevention a priority within all services working with over 65s. We will engage with staff and the public/patients through training, falls link workers and PSIRF triage panels, and through the patient experience group.



What do we plan to achieve?

A Swarm huddle to be undertaken for all falls incidents reported, this a form of safety incident huddle that takes place as close as possible in time and place to the incident.



How do we plan to achieve it?

Early identification of falls via local risk management system.

Falls lead and champions to be trained in Swarm methodology.



How will we measure/ evaluate our progress and success?

Swarm to be initiated and findings shared at triage panel within one month.

Quarterly report to quality and safety group on learning and improvements implemented.



What do we plan to achieve?

Clear and consistent falls assessments across community services working with over 65s.



How do we plan to achieve it?

Templates to be reviewed to ensure that falls assessments are clear.



How will we measure/ evaluate our progress and success?

Template update implemented across generalist community services (UCR/reablement, community beds, rehabilitation and falls, integrated care homes team).

4

Board assurance

The Board is accountable for our Annual Quality Account and has assured itself that the information presented in this report is accurate.

Review of services

CityCare continues to provide community NHS services under our contracts with the ICB and local authority.

During 2023-24, CityCare provided and/or sub-contracted 35 NHS services. CityCare has reviewed all the data available to us on the quality of care in all these NHS services.

The income generated by the NHS services reviewed in 2023-24 represents 100 per cent of the total income generated from the provision of NHS services by CityCare for 2023-24.



Participation in clinical audits

During 2023-24, three national clinical audits and no national confidential enquiries covered NHS services CityCare provides.

During that period CityCare participated in 100% of those national clinical audits it was eligible to participate in.

The national clinical audits and national confidential enquiries that CityCare participated in, and for which data collection was completed during 2023-24, are listed below alongside the number of cases submitted to each audit or inquiry as a percentage of the number of registered cases required by the terms of that audit or inquiry.



National Respiratory Audit

100%



Sentinel Stroke National Audit Programme

100%



National Audit of Cardiac Rehabilitation

100%

The reports of **30** local clinical audits were received in 2023-24 and Nottingham CityCare intends to take the following actions to improve the quality of healthcare provided:

| Clinical audit project | Key actions/learning |
|--|---|
| Record Keeping Audits 2023-24 (Separate projects by 21 teams) | Services have their own action plans. CityCare-wide themes identified for improvement will be discussed at the Records Management Group. |
| Bone Health IV Zoledronic Acid Audit 2022-2023 | Due to the low number of participants this audit is not necessarily an accurate reflection of the service during this time and we will work hard in the coming year to ensure we are able to provide evidence and assurances of safe practice. |
| Controlled Drugs Audit 2022-23 | There were areas of good practice that were identified from those services or teams who are involved with controlled drugs. There were some areas for improvement requiring action. There are no patient safety concerns and no immediate risks identified. |
| Desmond Injectable Therapies Clinical Audit 2023 | Positive results for participant empowerment and awareness, resulting in improved diabetes control. Lack of follow up care and medication review identified. Further awareness needed in primary care of the benefit of structured education - protected learning time and toolkit to be developed. Also identified need to review the competencies of educators, exploring independent peer review. |
| Eating and drinking with acknowledged risks clinical audit 2022-23 | Fewer patients than anticipated had a ReSPECT form in place, and specific reference to decisions around eating and drinking recorded on that form. Capacity assessments were considered/carried out with all patients where these decisions were appropriate. |
| Respiratory Infection Prescribing in the Urgent Treatment Centre 2023 | Clinicians were good at documenting constituent parts of the FeverPAIN but need to calculate and document FeverPAIN scores in clinical notes. 99% of patients with a FeverPAIN score of 0-1 and 4 or greater were treated appropriately, however clinicians need to better adhere to guidelines for those with a FeverPAIN score 2-3. Staff have been reminded of guidelines. |
| Safeguarding Clinical Audit 2022-23 | More staff are accessing Safeguarding Updates, web pages and supervision and find these beneficial to practice. Staff understand their safeguarding responsibility and are aware of signs and indicators of domestic abuse. In Adult Services, staff are less confident in asking about domestic abuse. 20% of adult staff did not know how to make a Safeguarding Adults referral and fewer than half reported a definite awareness of the Escalation Procedure. Work is under way to update and promote the Safeguarding Adult SOP (standard operating procedure) and escalation procedure but further work is needed to promote Safeguarding web pages among Adult Services, and targeted Bitesize and Safeguarding Champions training to promote confidence in responding to concerns about domestic abuse. |
| Safeguarding Multi-agency Audit 2022-23: Children subject to more than one Child Protection plan for neglect | For health organisations, this identified comprehensive record keeping, good multi-agency working practice in regard to meetings and signs of safety scores, and clear plans of action for children and families. Further work is needed to embed and identify use of the neglect toolkit, and to ensure we are capturing a child's lived experience to put their individual needs first. |
| Safeguarding records dip-test clinical audit 2020-22 | Improved use of analysis and action plans, giving assurance of positive change through learning. Identified need for further work around staff understanding and use of the supervision process and further exploration and analysis of the response to domestic abuse. |
| Stroke Assistant Practitioner (AP) Assessment clinical audit 2022-23 | A new stroke specific assessment template for Assistant Practitioners has been developed and audited. The audit identified changes needed to reduce duplication of information, improve efficiency of completing the assessment and increase ease of use for APs. A digital version of the template has now been formatted and is in use. |

Participation in clinical research

We merged the activities of Clinical Audit, Research, and Evaluation to form the umbrella term, CARE. The CARE belief is that we contribute to the organisational mission of making a difference to the health and wellbeing of our communities by meeting the strategic and challenging goals that we have set ourselves.

1. Externally showcase 15 CARE projects
2. Provide rewarding working lives and careers by establishing a whole organisational CARE culture
3. Create long term sustainable improvement in the community by developing high quality collaborative CARE activities.

By comparison with 2022-23, progress has continued in 2023-24

| | 2022-23 | 2023-24 |
|---|---------|---------|
| Active service evaluations | 6 | 7 |
| Completed service evaluations | 2 | 12 |
| Service evaluation participants recruited | 193 | 274 |
| Active research studies | 5 | 6 |
| Completed research studies | 2 | 4 |
| Portfolio research participants recruited | 95 | 195 |
| Non-portfolio participants recruited | 35 | 36 |

We continue to be supported by the Clinical Regional Network East Midlands. During the reporting period we had various success stories. In April, the Pulmonary Rehabilitation modalities project was showcased at the Association of Physiotherapists in Respiratory Care conference. In July, we presented Nordic Walking in the presence of Parkinson's Disease at the Royal Society. This was also presented alongside a systematic review of dual tasking for falls prevention at the National Rehabilitation Centre's research showcase in July. In November, both the findings from the Fibromyalgia dance group and dealing with uncertainty as a first contact practitioner service evaluations were presented to the Chartered Society of Physiotherapy annual conference.

Also in November, we presented findings to the UNICEF Conference from Feed Your Way: A co-produced public health breastfeeding campaign. Finally, in March, a submission for presentation of Research capacity optimisation in a small community social enterprise: a novel case study was accepted at RDF 24, the Annual Conference of the Research and Development Forum.



We have successfully evaluated the feasibility of providing virtual exergaming (exercise video games) and have performed a research study into the use of technology to prevent night-time falls. These are set to form the basis of our work over the next period. To ensure that we continue on our journey to meet our ambitious goals, our CARE Operational Group has reviewed progress against the strategy in September 2023 and we are on target to meet the set goals.

Statement on Care Quality Commission (CQC) registration

CityCare is required to register with the Care Quality Commission (CQC) and is currently registered with no conditions. The Care Quality Commission has not taken enforcement action against CityCare.

Data quality

CityCare's Business Intelligence Team works closely with clinical services to address the quality of information entered into clinical systems. The Business Intelligence Team has continued to develop reports and tools for colleagues across the organisation, such as current waiting lists at a patient level, to ensure that appointments and activity are recorded correctly. An additional Business Intelligence Co-ordinator has also been recruited into the team, which has allowed for more one-on-one training, as well as the development of bespoke service user guides to support staff in recording information.

NHS Number and General Medical Practice Code Validity

As a community service provider, CityCare submits information against the national Community Services Data Set (CSDS) for contacts with community services and the Mental Health Services Data Set (MHSDS). In addition, CityCare also submits information as Emergency Care Data Set (ECDS) for attendances at the Urgent Treatment Centre.

For the reporting period 2023-24, CityCare data reported 99.63% of referrals with a valid NHS Number. Over the next year, CityCare will also be working closely with national teams to embed the Faster Data Flows (FDF) data submission.

Data Security and Protection Toolkit attainment levels

The requirements of the Data Security and Protection Toolkit (DSPT) are designed to encompass the National Data Guardian review's 10 data security standards and support key information governance requirements under current data protection legislation such as the Data Protection Act and General Data Protection Regulation (GDPR).

It draws together the legal rules and central guidance set out by Department of Health and Social Care policy and presents them as a single set of information governance requirements.

This is CityCare's fifth submission under the DSPT. The DSPT is an online self-assessment tool that enables CityCare to measure performance against 10 national data security standards comprising 35 assertions.

The standards are:

- Personal confidential data
- Staff responsibilities
- Training
- Managing data access
- Process reviews
- Responding to incidents
- Continuity planning
- Unsupported systems
- IT protection
- Accountable suppliers.

Within these assertions there are currently 42 mandatory evidence requirements.

CityCare's Data Security and Protection Toolkit for 2022-23 was judged to be compliant. The toolkit for 2023-24 has been submitted and maintained 'standards met' certification.

Clinical coding error rate

As a community service provider, CityCare is not subject to clinical coding for Payment by Results and, therefore, will not be involved in the audit for 2023-24.

Incident reporting

There were 1,877 incidents reported compared to 1,776 reported in the previous 12 months. Of the incidents reported, 292 patient safety incidents were categorised as moderate harm incidents compared to 249 in the previous year. We are in the process of our transition to PSIRF (Patient Safety Incident Response Framework).

As a result of our work we have identified the top incident profiles:

- Pressure ulcers
- Falls
- Medication incidents.

As part of our transition to PSIRF we have seen a reduction in the number of serious incidents. We reported four, compared to 18 the previous year. PSIRF replaces the Serious Incident Framework (SIF) (2015) and makes no distinction between patient safety incidents and Serious Incidents and provides the opportunity to focus more on learning responses and immediate safety improvement as we continue to foster a sound safety culture.

Over the past few years, CityCare and other health and care organisations across Nottingham and Nottinghamshire have increasingly worked together to make sure the experience of local people using services is more joined-up and better suited to their individual needs. This way of working is based on the priorities and outcomes that matter to local communities, ensuring we work together to improve health and wellbeing. A focus going forward will be on inequalities and ensuring access for all those who need it.

We have piloted our triage panels and included learning from these as we move forward with implementing our triage panels in Care Groups 1 and 2.

We continue to have a dedicated training session for managers as part of our management training programme to support managers to undertake investigations using recognised methodology.

Never Events

'Never Events' are a sub-set of serious incidents and are defined as largely preventable patient safety incidents that should not occur if the available preventative measures have been implemented by healthcare providers. We are pleased to report that there have been no Never Events reported in CityCare in 2023-24.

Learning from deaths

Since 2017-18, there has been a national drive to improve the processes that organisations have in place for identifying, investigating and learning from deaths. Most deaths are unavoidable and would be considered to be expected and we remain committed to continuously seeking ways to strengthen our governance and quality improvement initiatives to support the learning from deaths framework. To learn from deaths and improve the quality of the care we provide, we recognise that it is vital that we have a robust process for reviewing the care received by our patients at the end of their life. All unexpected deaths were reviewed at our CityCare holistic incident review panel.

Freedom to speak up

The standard NHS contract requires that organisations employ a Freedom to Speak Up (FTSU) Guardian. The purpose of creating a speaking up culture is to keep our patients safe, improve the working environment of staff and to promote learning, and improvement remains the ongoing driver for developing a speak up culture. In May 2023, there was a change in the FTSU Guardian at CityCare and immediately work began to build on the foundations put in place by the outgoing Guardian.

To support the change, an extensive awareness campaign was launched. This included:

- Notifications in Cascade.
- An article from the new Guardian highlighting their ambitions for the organisation.
- A computer screensaver with a picture and how to contact the new Guardian.

This helped our colleagues put a face to the name and create a sense of familiarity.

The National Guardian Office guidance advises that every board should seek assurance that their organisation's FTSU culture is healthy and effective, subject to assessment under the CQC's well-led domain of inspection. In line with this, a regular slot was created for the Guardian to attend the organisational board meeting and provide written reports in relation to activity across the organisation, learning from cases as well as activity being undertaken to raise the profile of Freedom to Speak Up.

This enabled discussions about how learning was being incorporated into existing training, for example, the Managers Development Programme. Quarterly meetings have also taken place through 2023-24 between the FTSU Guardian and the Chief Executive, the organisational Chair and the identified Non-Executive Director for CityCare. These meetings have ensured key individuals in the organisation are abreast of any organisational challenges and barriers to staff speaking up and ensure that appropriate support is available for the Guardian.



Raising awareness of speaking up to all our people has continued to be a focus of the FTSU champion team. Monthly meetings are used to share learning from the cases brought to the Guardian, insights into best approaches for supporting staff and innovative ways to raise the profile of FTSU. Initiatives led by the champions have included attendance at the staff induction market place so that they can meet staff and share how FTSU can support them in their new roles; and quarterly coffee-and-chat sessions at CityCare bases where they meet staff, both to introduce themselves and to raise the profile of FTSU.

During October's Speak up Month the whole team carried out visits to bases leaving copies of their first newsletter sharing some positive outcomes as a result of speaking up as well as signposting to the intranet page where further information is made available regarding access to the FTSU Guardian and Champions.

Champions have a FTSU lanyard and T-shirt to ensure that they are easily recognisable when undertaking FTSU work. Our champions have grown in numbers over the year and now boast a wide range of roles which are far more relatable to a broader number of staff members. They continue to work as a network across the organisation to promote the FTSU programme, talk to colleagues and support people to raise concerns.

Freedom to speak up

Staff can speak up about anything that affects them or gets in the way of providing good care to patients/service users. Whether it be to raise a concern, suggest an improvement, or simply ask a question.

The Freedom to Speak Up Guardians will:

- treat your concern confidentially unless otherwise agreed
- ensure you receive timely support to progress your concern
- ensure you have access to personal support
- ensure you receive timely feedback on how your concern is being dealt with
- escalate to the Board any indications if you received significant adverse impact as a result of

The Freedom to Speak Up Champions will:

- raise awareness of the Freedom to Speak Up Team
- support you to raise your concern and signpost you to alternative support services



Champions are now asked to complete FTSU training to ensure that they are fully aligned with the principles of fostering a healthy speak up culture and are also encouraged to share a picture and profile including why they wanted to become a FTSU Champion which is added to the intranet page dedicated to FTSU. This allows staff with a concern to connect with a champion they feel confident talking to if they don't want to speak to the Guardian.

A further initiative has been to support the roll out of FTSU training for all staff across the organisation with an additional module for staff with line management responsibilities. A communications plan has now been completed and the launch on ESR is now imminent. In readiness for this, during a board development session, the board attended FTSU Follow Up training which enabled members to reflect on how they bring FTSU into their everyday business and recognise how important it is to follow up when a concern is shared.

Attendance at the regional forum meetings for FTSU Guardians has continued alongside meetings set up among FTSU Guardians across Nottingham and Nottinghamshire for peer support.

Areas covered this year have included:

- Sharing learning from cases (anonymised). Areas covered include detriment experienced by some staff speaking up and the introduction of an NHS-wide support scheme for staff who report having experiencing detriment
- Feedback to staff reporting concerns and support given to the FTSU Guardians in their role
- Training
- Dealing with anonymous reporting
- Triangulating feedback from FTSU concerns with other organisational data
- Review of the Lucy Letby case and why listening when staff members are speaking up is important
- Impartiality and objectivity of Guardian role.

Plans are being developed to identify the priorities for further strengthening FTSU at CityCare across 2024-25 and these will be detailed in our new FTSU Strategy.



5

Other quality measures

Infection Prevention and Control (IPC)

- Zero Tolerance to Avoidable Infections

IPC has continued to be a high priority for CityCare during 2023-24 and gains assurance that it is meeting its requirements under the Health and Social Care Act by monitoring progress against the national Infection Prevention and Control Board Assurance Framework.

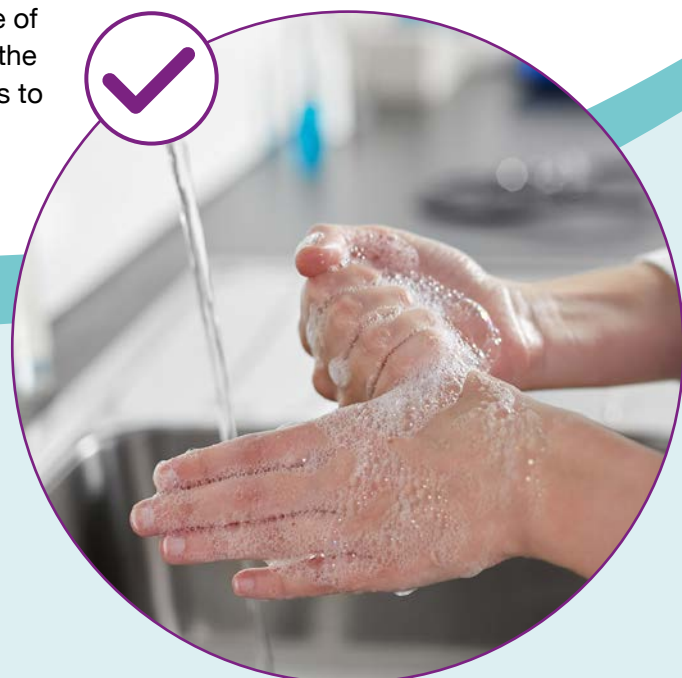
Key areas have been:

- Protecting staff and patients with supporting guidance and education, particularly following the pandemic to ensure appropriate use of PPE
- Responding to any national changes in guidance to implement safe systems of working within CityCare and across care home and GP settings
- Ongoing surveillance and monitoring of alert organisms – MRSA, PVL, E.coli and Group A Strep and C.diff
- Ongoing monitoring and management of outbreaks
- Supporting the wider system work in relation to IPC, antimicrobial stewardship and implementation of the Patient Safety Incident Response Framework (PSIRF) to ensure learning is shared across the system
- Progress with the IPC annual programme of work with quarterly updates provided to the Quality and Safety Group and escalations to the Quality Committee and the Board.

During 2023 the organisation's IPC Board Assurance Framework was assessed by 360 assurance, external auditors, and received significant assurance following this review. Respiratory infections have continued to circulate although not to the same extent as during the pandemic but have remained at a higher baseline level than prior to the pandemic.

The IPC team has supported the wider health and social care system by monitoring and reviewing 61 outbreaks over 2023-24. Thirty eight of the sixty-one outbreaks were due to respiratory infections such as Flu A, Covid and RSV (Respiratory Syncytial Virus). Nineteen were due to diarrhoea and vomiting, 3 scabies and 1 Group A strep.

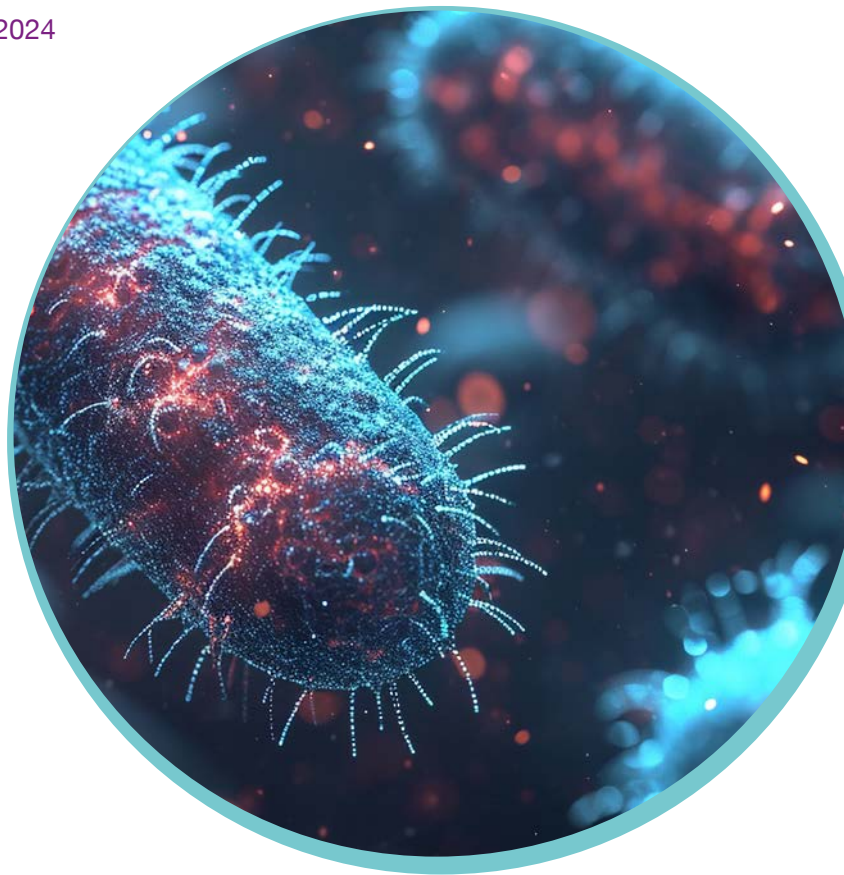
Training for clinical staff has been reviewed by the organisation and is now an e-learning package that they are expected to undertake yearly. IPC further supplements this training by providing three-yearly essential training in relation to commonly encountered infections in community settings. Non-clinical staff undertake a national level 1 e-learning package, every three years in line with national recommendations.



Monitoring other infections

Over 2023-24, targets for minimising Clostridioides infections and gram-negative bloodstream infections (E. coli, Klebsiella and Pseudomonas) to support early diagnosis and appropriate treatment have been in place.

Within primary care, the targets are not organisation-specific but instead reflect ICB geographies with the aim of having a system-wide approach to reducing infection, to benefit both patient outcomes and service demand. Locally, the Nottingham and Nottinghamshire ICB targets were as follows:



| | C.difficile | E.coli | Pseudomonas Aeruginosa | Klebsiella Species |
|------------------------------------|-------------|--------|------------------------|--------------------|
| Nottingham and Nottinghamshire ICB | 272 | 877 | 81 | 255 |
| Final totals | 321 | 1083 | 101 | 296 |

CityCare’s IPC team reviews all the standard alert organisms for any patient registered with a Nottingham City GP. The standard alert organisms are:

- MRSA
- Clostridioides Infection
- E.coli bloodstream infections
- Group A Streptococcus in wounds
- Panton Valentine Leukocidin.

The reason for the review of cases is to ensure the patient and the clinicians involved are aware of the positive results and how they can best prevent any further spread and transmission to others. Using the PSIRF, the IPC service is reviewing surveillance data to establish if there are any areas of learning to prevent such infections occurring in the future.

- The IPC team reviewed one MRSA blood stream infection within the City against a total of nine across the ICB area. The review was undertaken in conjunction with the GP practice. In this case, there was no learning identified for CityCare or the GP practice as the patient had had no prior input from health care and presented at the GP with a two-day history of illness
- All cases of C.difficile deemed to be community acquired are reviewed to further develop an understanding of the risk factors for infection. The IPC team undertook 33 reviews and eight were deemed to have a lapse in care. Four of the eight lapses involved CityCare services. The first was an individual who had relapsed three times and was nursed in bed by family with a social care package and care from the Community Nursing Service.

The need to undertake cleaning with sporicidal wipes in his own home to prevent re-infection was identified. The last three cases have involved patients who were discharged into the Community Beds Service and who developed diarrhoea, but samples were not sent in a timely manner hence a delay in diagnosis and treatment. An after-action review is being held across all the community bed areas to identify the system issues which are preventing communication relating to relapses of C.difficile infection on discharge

- E.coli blood stream infection surveillance identified 1,083 blood stream infections attributed to Nottingham and Nottinghamshire ICB out of a target of 877. These include those acquired in secondary care as well as in the community.

Of the community acquired cases across Nottingham City, 152 were found to have healthcare-acquired risk factors. These have been further reviewed to identify if there have been any lapses in care and eight had lapses identified. Only one involved a CityCare service and the result of the review indicated that the blood stream infection would not have been prevented but it did highlight a missed visit due to how patients are allocated on a waiting list in the electronic record SystemOne.

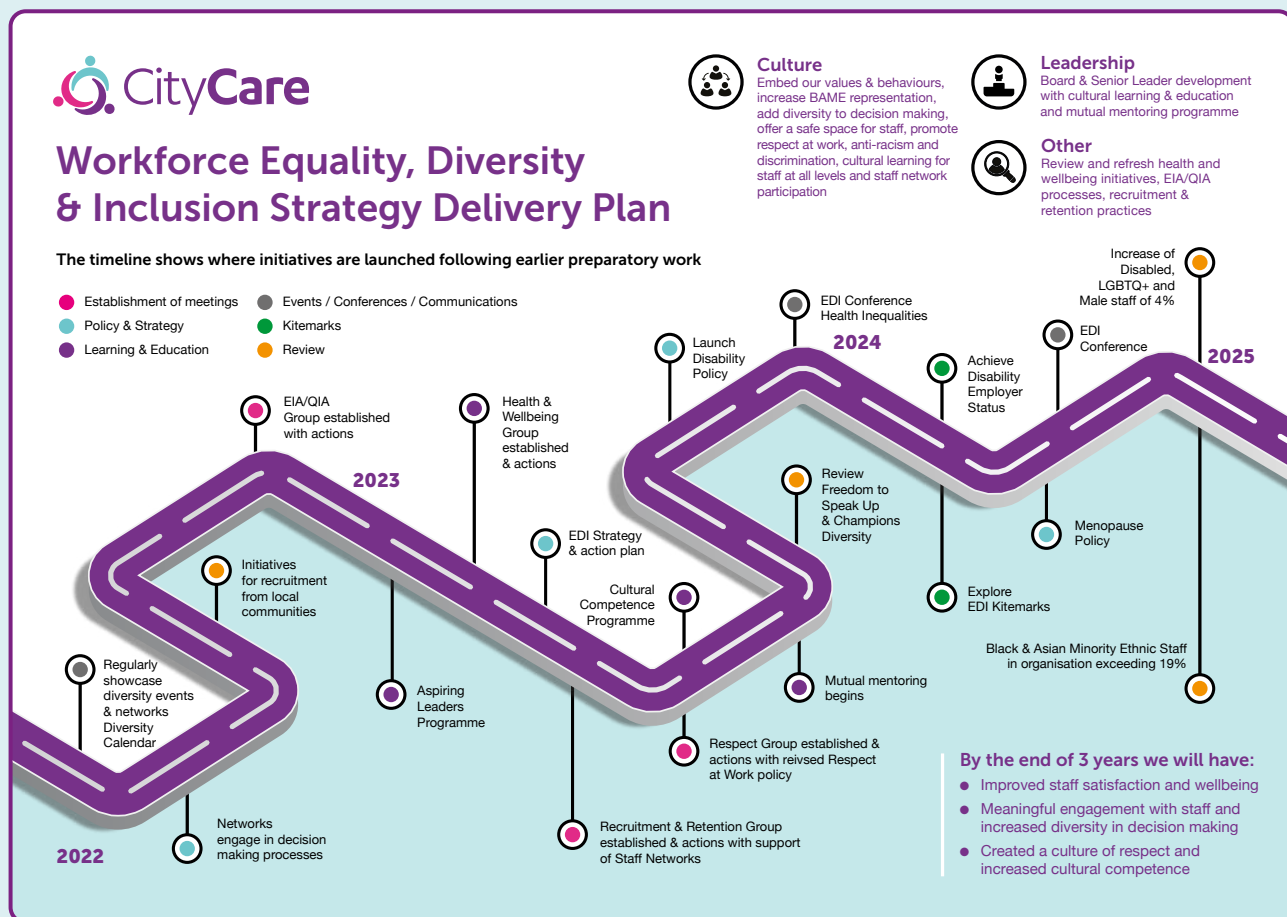
As a result, the system has been reviewed and individuals now need to be assigned to a caseload which should prevent this occurring in future. The largest source for E.coli blood stream infections are urinary tract infections (UTI). Therefore the IPC teams across the healthcare system are developing a UTI strategy to support further work into the E.coli bloodstream infections.

Equality, Diversity and Inclusion

During 2023 we continued to meet actions identified against the Workforce Equality, Diversity and Inclusion Strategy.

We are promoting equal opportunities, eliminating unlawful discrimination and harassment and promoting positive attitudes towards disadvantaged groups. To achieve this, we are working towards removing barriers to opportunities and narrowing the gap between the disadvantaged and others. We are working with our stakeholders to identify health inequalities, monitor and develop our services and agree future plans to further support our ambition to deliver equity and inclusion.





Highlighted achievements from the strategy include:

- Production of a workforce disability policy, the introduction of disability leave and health and wellness passports
- Achieving Disability Confident Employer status
- Holding our first Reducing Race Inequalities Conference in September 2023
- Monthly big conversation sessions about race
- Launch of the CityCare Cultural Awareness Guide for staff
- Leadership development programmes with cohorts for minoritised ethnic group staff
- A reverse mentoring programme for senior managers and staff from under-represented protected characteristic groups
- The introduction of disability training
- The introduction of LGBTQ+ training
- The establishment of a Recruitment and Retention Group which includes focus on inclusive recruitment with supportive guidance and training
- The introduction of the Respect at Work Group with revised policy, training and action plan
- We have regularly highlighted events from our diversity calendar
- The Equality Impact Assessment Group (EIA) was established with revised governance arrangements and refresh of the EIA guidance and forms
- The Health and Wellbeing Group was established and an action plan drawn up
- The Freedom to Speak Up Guardian is championing and increasing diversity within the FTSU champions.

Supporting for our workforce



We are committed to supporting colleagues from under-represented groups with Staff Network Groups including the Disability, Ability and Wellness Network, the Ethnic Equality Network, the Menopause Network, the Unpaid Carers Network and the Lesbian, Gay, Bisexual, Trans+ (LGBTQ+) Network.

The networks provide a safe space for staff to share experience and their members advocate for under-represented groups. They raise awareness of new initiatives to improve staff experience, highlight and celebrate events within the diversity calendar and add diversity to decision-making by contributing to strategy and policy, process and the development of educational tools. We also work with our partner organisations in the ICS to support actions to improve staff experience across the system. The networks play a key role in supporting the annual NHS Staff Survey and the Workforce Race and Workforce Disability Equality Standards.

The networks have contributed to our recruitment and retention processes, raising awareness during history months with newsletters and articles and encouraging and supporting staff to add their personal data to our Electronic Staff Record.

Networks have supported the introduction of our Aspiring Leaders Programme for minoritised ethnic group colleagues, and the cultural competence and mutual mentoring programmes. We have achieved Disability Confident Employer status this year. We have produced a workforce disability policy, introduced disability leave and a health and wellness passport for staff. We are working towards a menopause policy over the next year and becoming a Menopause Friendly organisation. We are planning to produce an Unpaid Carers policy and work towards becoming an unpaid carers friendly organisation. A celebration event was held to highlight Carers Week in June 2023.

We have developed actions to support our LGBTQ+ colleagues including collaborating with our ICS partners to contribute to an anthology of poems and short stories, highlighting the importance of preferred pronouns on email signatures and name badges. The LGBTQ+ network will support CityCare's attendance at Nottingham Pride in July 2024 to promote inclusion for our workforce and our patient population.






Join a Staff Network

Our Staff Networks support staff and provide a safe space to share experiences

They also:

- help make CityCare a fairer and more inclusive place to work for our diverse staff
- tackle issues and empower people who are underrepresented and/or disadvantaged
- contribute to organisational decisions and shape our culture to create a sustainable future
- influence our strategies and policies to improve the staff experience for everyone



Our five Staff Networks are:

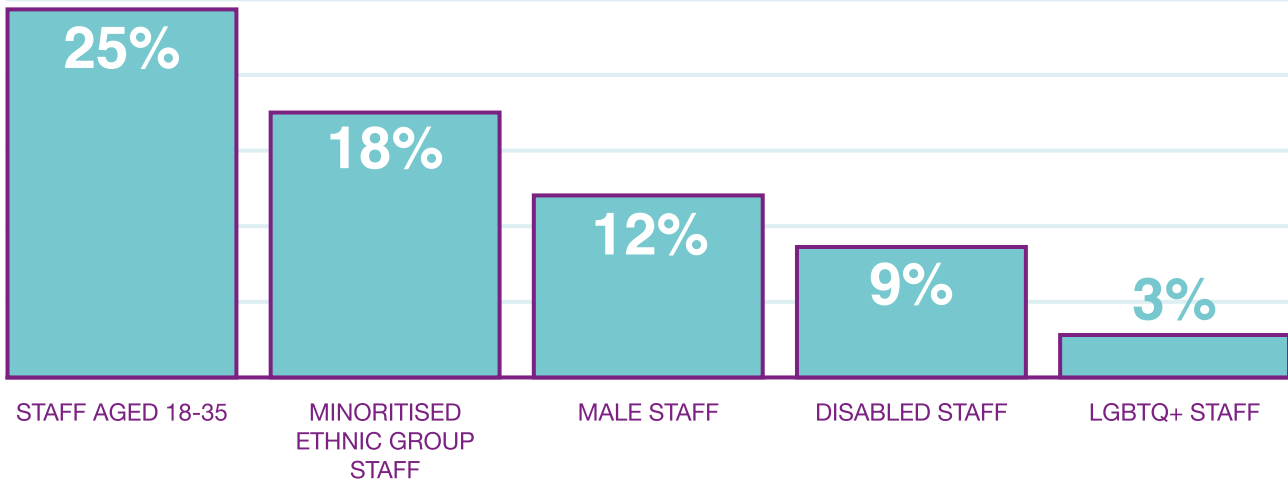
1. **Disability, Ability & Wellness Network:** ncp.dawn@nhs.net
2. **Ethnic Equality Network:** ncp.ethnicequalitynetwork@nhs.net
3. **LGBTQ+ Network:** ncp.lgbtqnetwork@nhs.net
4. **Menopause Network:** ncp.menopause@nhs.net
5. **Unpaid Carers Network:** ncp.unpaidcarersnetwork@nhs.net

Sign up today!

Visit our Staff Intranet to find out more

Protected characteristic workforce data

In April 2024 our workforce data for under-represented groups shows:



Compared to the previous year there is increase across all the under-represented groups:

- An increase of **1.83%** in disabled staff
- An increase of **1.29%** in our younger staff group aged 18-35 years
- An increase of **0.8%** in male staff
- An increase of **0.68%** in LGBTQ+ staff
- An increase of **0.6%** in minoritised ethnic group staff

To support the increase in diversity within our workforce at all levels, we have reviewed our inclusive recruitment process with our staff networks, used positive action to support recruitment and promotion practices, and we are reaching into our communities with initiatives such as mentoring in schools and community groups. Our aim is to increase diversity across protected characteristics by 4% by April 2025 and the diversity within our decision-making forums such as committees of the board. Further initiatives will be undertaken through our newly established Recruitment and Retention Group.

Respect at work

We have undertaken an in-depth bullying and harassment survey which is under review with our staff networks. We have launched the Respect at Work policy and training to staff. We are working to increase the diversity in our Freedom to Speak Up Champions through our staff networks. We continue to address actions undertaken within our Respect at Work Group.



Equality Diversity and Inclusion Learning and Education

We have reviewed and refreshed our training offer to address discrimination and promote equality, diversity and inclusion (EDI). EDI mandatory training has been increased from once (when people join CityCare) to every three years. A Reducing Race Health Inequalities conference was held in September 2023, which launched monthly big conversations open to all staff to discuss race.

We have run Leadership Development Programme cohorts for our colleagues. This is open to minoritised ethnic group staff at all levels in the organisation who are in leadership or management roles or those who aspire to be. We have done this as positive action to give opportunity for personal development and to maximise opportunity and develop diversity within CityCare's leadership.

We have completed our first cohort of reverse mentoring, a process to enable people in senior positions to learn from and understand issues from the perspective of people in less senior roles from under-represented groups. Dedicated equality pages are available on our intranet, with resources to support staff and patients, links to protected employees network groups and the diversity calendar with updates for employees on significant dates and local cultural festivals.

We have engaged with our ICS partner organisations to deliver virtual EDI celebration events to share information, stories, resources and connections across Nottingham and Nottinghamshire. These have included Black History Month and Disability History Month. We continue to engage with our partners in ICS Networks to promote and embed actions to support staff for disability, race equality and sexual orientation and gender identity.



CityCare

CityCare Leadership Development Programme

For Black and Asian Colleagues → → →



Workforce Race Equality Standard (WRES) April 2023 report

The WRES compares the experience of minoritised ethnic group colleagues with that of white staff within CityCare. Data taken in April 2023 compared to the previous year showed an increase in the number of minoritised ethnic group staff in the organisation.

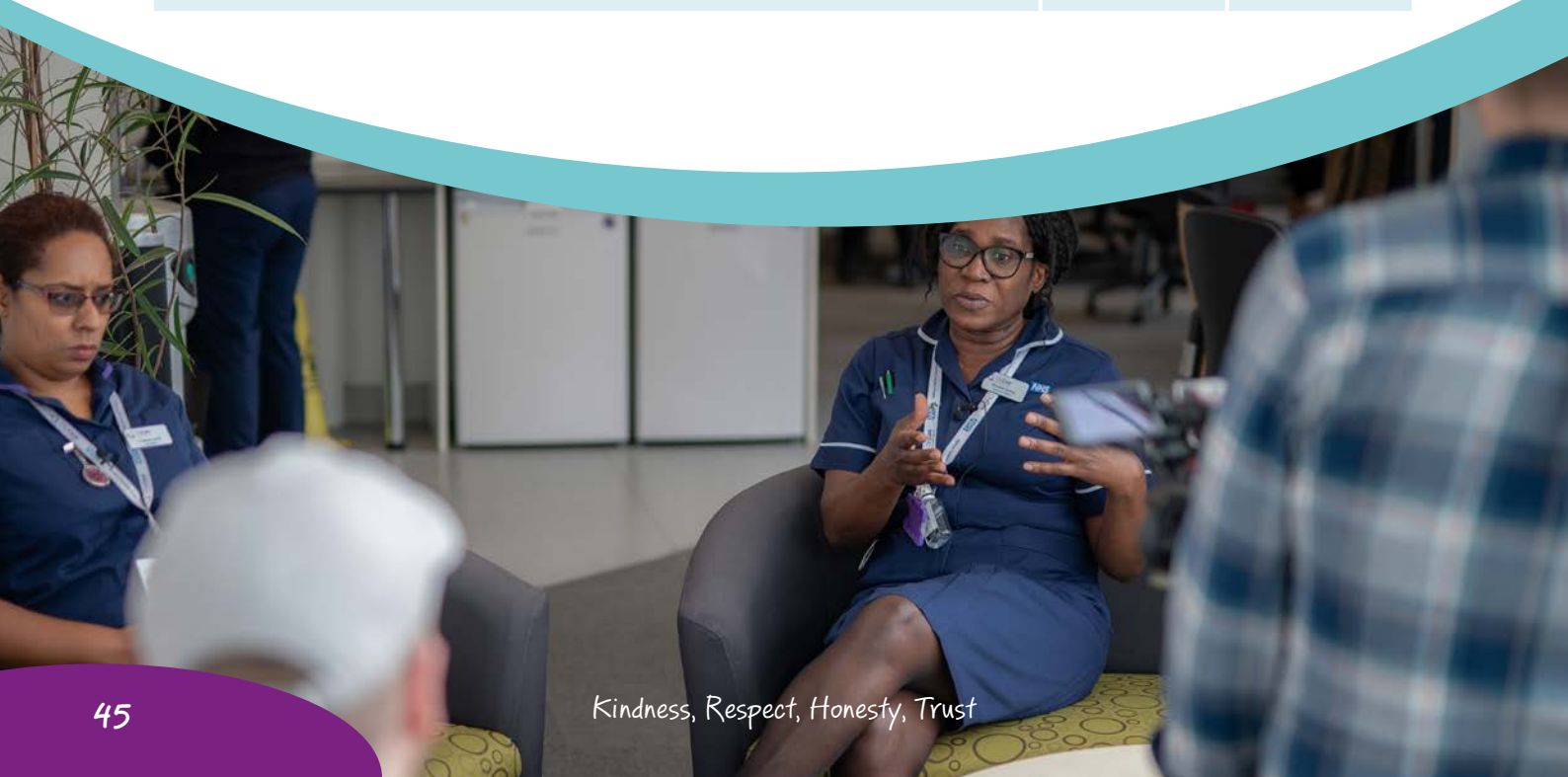
There was more positive response in the appointment of minoritised ethnic group candidates being appointed from shortlisting at 64%, and staff believing the organisation provides equal opportunities in career progression increased for minoritised ethnic group staff by 2%.

Once again, no minoritised ethnic group staff entered the formal disciplinary process during the year.

Bullying and harassment increased for minoritised ethnic group staff by 3% from patients, 2% from the public and 6% by colleagues. On reviewing the data, priority actions were agreed to address the increase in bullying and harassment. We worked with our Ethnic Equality Network agreeing and completing actions, including review of the recruitment and retention process, increasing diverse representation on interview panels, big conversations about race, introduction of reverse mentoring, Respect at Work policy and training and working with Freedom to Speak Up to increase diversity of FTSU Champions.

CityCare breakdown by ethnicity Workforce Race Equality Standard April 2023 data

| | White ethnicity | Minoritised ethnic group |
|---|-----------------|--------------------------|
| Experienced harassment, bullying or abuse from patients/public | 18% | 22% |
| Experienced harassment, bullying or abuse from staff | 10% | 27% |
| Believes organisation acts fairly in career progression/promotion | 61% | 45% |
| Experienced discrimination from colleagues | 5% | 18% |



Workforce Disability Equality Standard (WDES) April 2023 Report

The WDES compares the experience of Disabled staff compared to non-Disabled staff within the organisation.

The WDES report data was taken in April 2023 and showed an increase in the number of staff self-reporting, and a further increase in the proportion of disabled candidates being appointed from shortlisting with 85% of disabled candidates being appointed.

No disabled staff entered the formal capability process during this period, there was less bullying and harassment from the public and from colleagues, and fewer disabled staff felt pressure to come to work from their manager when not feeling well at 27%.

There was an improvement in the percentage of disabled staff saying they had received adequate adjustments to do their job, rising by 4.5% to 77.5%.

There has been a less positive response for disabled staff in bullying and harassment from managers, which has increased by 4%. Similarly, the proportion believing the organisation provides equal opportunities for career progression has fallen by 3% to 53%.

CityCare breakdown by ethnicity Workforce Disability Equality Standard April 2023 data

| | Non-Disabled Staff | Disabled Staff |
|---|--------------------|----------------|
| Experienced harassment, bullying or abuse from patients/public | 17% | 21% |
| Experienced harassment, bullying or abuse from staff | 8% | 19% |
| Believes organisation acts fairly in career progression/promotion | 63% | 53% |
| Employer made adequate adjustments to enable them to carry out their work | - | 77% |
| Felt pressure from your manager to come to work despite not feeling well enough to perform duties | 19% | 27% |
| Satisfied with the extent to which their organisation values their work | 50% | 38% |

We worked with our Disability, Ability and Wellness Staff Network (DAWN) and have achieved our actions including review of inclusive recruitment and retention practices, obtaining Disability Confident Employer Status, producing and embedding a Disability Policy and disability leave, bullying and harassment, reasonable adjustments and training for managers, health and wellbeing passport and tools to assist in conversations about Disability.

Accessible Information Standard

The Accessible Information Standard (AIS) ensures that disabled patients, service users, carers and parents receive information in formats they can understand and that they receive the appropriate support to help them to communicate.

CityCare has resources including patient experience videos and e-learning modules to support employees. Patient information and leaflets contain a statement with a freephone number, informing them how to receive information in alternative formats if required. Monitoring of the AIS is provided through the Equality, Diversity and Inclusion Committee.

A snapshot review was undertaken in April 2023, which scoped services on their understanding of accessibility, the standard, and their awareness of the option for information to be received in different formats. While staff were confident in their understanding of the principles of the AIS, there was less confidence from respondents in how best to incorporate good practice into their everyday communications with patients and their carers. One of the recommendations from the review was to undertake a scoping exercise on training opportunities moving forward. A new online training module has been identified, which is due to be incorporated into mandatory training for all staff in 2024-25.

Data from 2023-24 shows satisfaction levels across our services for people describing themselves as having a disability remain high.

Asked as part of CityCare's Feedback Survey: **"Overall, how was your experience of our service?"**, 1,392 patients/service users who considered themselves to have a disability answered with **91% (1,260) rating the service as very good or good.**

Throughout 2023-24, we also asked our patients/service users who considered themselves to have a long-term condition to rate their experience.

We asked the question: **"If you have a long-term condition, do you feel the advice and support you have received has helped you to manage better?"** Of the 3,471 patients/service users who considered themselves to have a long-term condition, **2,525 (73%) said the support they had received had helped them to manage better.**

No incidents of being unable to meet a specific communication need have been logged in 2023-24.

When a complaint is made, the complainant's preferred method of communication is established with them at the outset.

Sexual Orientation Monitoring standard (SOM)

The Healthwatch report on LGB peoples' experiences of healthcare informed the national Sexual Orientation Standard Monitoring Standard (SOM). The standard demonstrates equitable access for LGB people, helps us have an improved understanding of the impact of health inequalities and improves access for LGB service users.

CityCare teams/services collate the sexual orientation of patients/service users aged 16 and over to establish if they are accessing our services or if there are gaps which need to be addressed. We have updated the sexual orientation categories on our demographic data collation forms and our electronic recording systems in line with the standard, and training has been developed and rolled out to employees with bespoke team/service briefings. Guidance is available to support in sensitively collating this data.

Our LGBTQ+ staff network supports actions in raising awareness to staff and reviewing actions to support our LGBTQ+ community. We are working with our ICS partner organisations to further understand our LGBTQ+ population barriers to healthcare and continue to explore improving data recording.



Staff survey results

Evidence shows that there is a strong link between organisational performance, patient experience and employee engagement and job satisfaction. CityCare is committed to providing rewarding working lives and careers of its employees as set out within the organisational strategy.

The National Staff Survey provides the organisation with feedback from staff about their experiences as an employee and gives an overall measure of staff satisfaction and engagement. The results of the survey for 2023 were published in March 2024.

The survey was carried out between September and November 2023 by Picker. CityCare offered 666 survey responses equating to 57% of the workforce, a noticeable and significant improvement on the previous year where 468 (44%) had been received.

Since 2021, the survey questions have been aligned to the NHS People Promise. This sets out, in the words of NHS staff, the things that would most improve their working experience. The results are measured against the seven People Promise elements and against two of the themes reported in previous years (staff engagement and morale). The reporting also includes sub-scores, which feed into the People Promise elements and themes.

Key highlights from the report for CityCare

In the 2023 report and going into 2024 CityCare has much to celebrate in terms of pace of organisational and cultural change and more to do.

The organisation can demonstrate positive scoring and feedback across all of the seven People Promise themes in terms of sustainable cultural change based on mutuality of change and improvement between leaders, managers and their colleagues rather than commanding change and improvement.

82%

of respondents said that care of patients is the organisation's top priority

77%

of respondents said that they would be happy for a relative or friend to be cared for by the organisation

64%

of our colleagues would recommend CityCare as an organisation to work for

Where CityCare has seen significant positive change reported:

Increasing reporting of adverse events, increase in enthusiasm about the job, a better balance of home and work life, fewer people exhausted by the end of the working day and more staff to do the job properly.

In 2024 there has been a stated commitment to continue to work through the findings of the survey within the Leadership Council, looking particularly at leaders' and managers' approaches to appraisal and annual review and how disability and reasonable adjustments are viewed and deployed. In addition, the support to manage and prioritise heavy workloads was seen as an area that requires discussion across the whole organisation.

6

What our stakeholders think

Statement from the Nottingham City Council Health and Adult Social Care Scrutiny Committee

The Health and Adult Social Care Scrutiny Committee welcomed the opportunity to review the Nottingham CityCare Partnership's Quality Account for 2023-24 and is pleased to be able to comment.

The Committee has not met with CityCare directly to discuss its service provision during the 2023-24 period. However, it is supportive of the work being carried out by CityCare as established in the latest Quality Account and takes the following assurance:

- The inclusion of a learning from complaints section is welcome and it is a positive step to see these details set out
- Setting out the reflections on last year's priorities is positive, as is the highlighting of learning that has been taken from other providers
- The focus on what is being done to address health inequalities is very welcome
- It is extremely important that there is a strong focus on learning from deaths – though the assurance given in this area could be enhanced by setting out what learning has arisen from the review of all unexpected deaths by the Holistic Incident Review Panel and the changes made as a result.

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Healthwatch Nottingham and Nottinghamshire

Healthwatch Nottingham and Nottinghamshire took the decision last year that going forward it would not be able to provide a statement to NHS organisation quality accounts, which is a voluntary rather than mandatory requirement. This is due to the additional roles and requirements of Healthwatch in the Integrated Care System which it needs to deliver within existing resources. We were delighted that Healthwatch were able to meet with us to discuss a specific area of focus relating to patient feedback and we will be taking this forward in our quality priorities.

Statement the Nottingham and Nottinghamshire Integrated Care Board

Introduction

1. Nottingham and Nottinghamshire ICB has continued to work with Nottingham CityCare Partnership in pursuit of the monitoring and continuous improvement of services during 2023/24, in accordance with the statutory functions of the ICB.
2. The intention for 2023/24 was for Nottingham and Nottinghamshire ICB and with Nottingham CityCare to continue fostering and developing collaborative and systems-based working, and this statement provides a reflection of progress.
3. The Nottingham CityCare Quality Account for 2023/24 illustrates the scope of work undertaken in the last year and an organisation that continues to develop.
4. Key achievements include:
 - a) Developing a new Health Inequalities Framework that will support engagement work.
 - b) Building a framework to support the transition to the Patient Safety Incident Response Framework (PSIRF), including creation of a Patient Safety Incident Response Plan (PSIRP).
 - c) Scoping a suitable skin tone tool to support staff identify signs of damage in darker skin.
 - d) Achieving 100% compliance in three national audits.
 - e) Achieving Disability Confident Employer status.

Quality Visits

5. Two quality visits were made during 2023/24, the first in May 2023 to Community Nursing team, Primary Care Network (PCN), and the second in September 2023 to MOSAIC, with Nottingham CityCare's Musculoskeletal Physiotherapy and Occupational Therapy Service.
6. Nottingham and Nottinghamshire ICB staff also visited the Community Bed services at Clifton View, Connect House, and Wollaton View to speak to patients and their families about their experiences. This will inform the transformation work around Community Beds for 2024/25.
7. All visits were positive, with staff demonstrating caring attitudes toward their patients and a clear aim to deliver quality intervention. Feedback was warmly welcomed.

Working as system partners

8. Nottingham CityCare has active membership of the Partner Quality Assurance & Improvement Group (PQAIG), and the over-arching System Quality Group.
9. Nottingham CityCare have been key partners in the implementation and development of the work plan for the mandated PSIRF. There has been engagement in system groups including shared learning during the development phase with other providers.
10. Nottingham CityCare is also actively involved in the system improvement groups attending meetings and engaging in improvement workstreams around Tissue Viability and Falls.

11. The ICB Quality team are working directly with CityCare to support improvement activity in the adult community service, and to build assurance and confidence with the management of safety incidents during the transition to PSIRF.
12. Nottingham and Nottinghamshire ICB colleagues are routinely invited to key quality meetings including the CityCare Holistic Incident Review Panel, the Serious Incidents and Learning Lessons Group, Quality and Patient Safety Quality Group, and Quality Committee. Partnership working continues to be fostered in this environment with input invited and valued from all attendees.

Looking forward to 2024/2025

13. Nottingham CityCare is continuing work on their three current priorities and have included a new priority around reducing falls.
14. There is a commitment to developing and implementing a new Patient Experience and Engagement Strategy which will ensure the voices of those from the diverse population CityCare serves are heard – including those experiencing health inequalities.
15. They are developing their approach to the implementation of the PSIRF which 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. Over the next year, the focus is on recruiting, working with and supporting Patient Safety Partners, establishing a panel of appropriately trained investigators, and building the required skill set for staff to embed the local patient safety triage panels within the Care Groups.
16. Developments in quality and safety arrangements are anticipated as a new clinical leadership team is established, with a focus on evaluating impacts and sharing learning through the system quality partnership facilitated by the ICB.

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

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Listening to feedback on this report

We would like to thank all the stakeholders, patient and community groups who gave their feedback and suggestions for the content of this report. We would also like to thank all the staff involved in producing this document.

If you would like to give us your thoughts on this report, or get involved in the development of next year's report, please:

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