

Appendix 1: Excerpt from the NHS Leeds CCG annual report 2018-19

2.8 Delivering the Leeds health and wellbeing strategy 2016-2021

We have consulted with members of the Health and Wellbeing Board before completing and submitting this section of our annual report. This included an agenda item at the Health and Wellbeing Board meeting [on 25 April 2019](#) as well as additional consultation with members on the draft text before final submission. Evidence of our attendance at the meeting is [available online + link](#)

The Health and Wellbeing Board has prioritised improving the health of the poorest the fastest and has an ambition to be the best city for health and care. The Health and Wellbeing Strategy is rooted in connecting people, communities and places and a social model of health. This means that in Leeds we recognise the role of the wider determinants of health alongside the need for excellent health services.

The CCG plays a key role in delivering the Health and Wellbeing Strategy. Since becoming a single CCG we have strengthened partnerships with a greater focus on prevention, early support and care closer to where people live where appropriate to do so. We support and lead on a number of local programmes that link in with the recently published NHS Long Term Plan – for example developing the embryonic local care partnerships – and we have part funded the city’s neighbourhood networks and older people’s networks in the community. Together with Leeds City Council, we are commissioning services in an integrated way, have several joint appointments and our working cultures and practices are increasingly aligned.

In keeping with our role in delivering the strategy, we ensure our work contributes to the Health and Wellbeing Strategy’s vision of “improving the health of the poorest the fastest” by ensuring that tackling health inequalities is embodied in our commissioning strategy and supported by the CCG Governing Body – there is more information about this area of our work in [section 2.5](#). We have also nominated and employed staff to specific roles within the organisation to support this area of work, including a specific clinical lead GP role for health inequalities and named leadership within strategy and planning. The CCG has signed up to actions aligned to the Strategy and the Leeds Health and Care Plan, some examples of which are outlined below.

2.8.1 A child friendly city and the best start in life

Over 10,000 babies are born in Leeds every year. Making the most of every child's potential is an important goal in Leeds – we all want the best for our children to help them be happy, healthy and reach their potential. From conception to the age of two is a very important time as it makes the biggest difference to a baby's future. We work with families and services to help all babies get the best start in life. In this regard, the citywide maternity strategy has achieved the following in 2018-2019:

Perinatal mental health problems can have significant and long lasting effects on the woman and her family. Our perinatal mental health pathway, which covers a range of services, has been evaluated and updated together with families in Leeds; resulting actions have included a new communications and training plan, including delivering training to all GPs around how to detect and address perinatal mental health issues.

Young parents are often disproportionately affected by adversity. To address this we have worked collaboratively to produce a pathway of services together with young parents. Where necessary we have changed services to provide more consistent relationships between young parents and their professionals, as well as developing specific MindMate content to support young parents with mental health problems.

We have worked collaboratively to develop plans to give women and families more continuity of carer through their pregnancy and beyond, and to encourage families to be empowered to make their own choices throughout the perinatal period. We have developed relationships across West Yorkshire and Harrogate in a local maternity system, providing more seamless pathways of care for families. We have also introduced electronic patient records for families going through maternity services, making services safer and helping families feel listened to rather than repeating their stories.

During the year, we carried out engagements on a range of issues including support for parents of children with autism, home birth, neonatal outpatient services and maternity pathways for young people. The results of these engagements are used by commissioners to plan and improve services that will give children born in Leeds the best start in life. For example, we have jointly commissioned an infant mental health service to promote positive attachment and have led on delivering an integrated perinatal mental health pathway. We are also piloting a new child family hub in Pudsey, which aims to improve access to

specialist children's doctors for families by bringing hospital-based paediatricians into the community.

For older children and young people, we have continued to develop the Future in Mind strategy, particularly through our award winning MindMate resource (www.mindmate.org.uk), which helps promote wellbeing and emotional resilience. During 2018-19, we invested in a major campaign to raise awareness of both young people's mental health issues and the resources available to help them.

2.8.2 An age friendly city where people age well

We share a vision that Leeds will be the best city in the UK in which to grow old and appreciate that physical health is only one aspect of aging well. Anyone can access our social prescribing services however some of the community-based services that social prescribing link workers refer to are of particular benefit to older people, who are more likely to experience social isolation and loneliness, which can have a significant impact on both physical and mental health and wellbeing.

In 2018, we asked people living with frailty and their carers what mattered to them and their feedback is being used to help shape a citywide approach to supporting people who are medically described as being frail. Our feedback showed us that people feel strongly about being called frail and this is something that we will look to address as part of our work with health and care professionals.

We have also worked with local GP practices and Leeds Community Healthcare NHS Trust (LCH) to pilot a 'leg club,' in Otley, which at the time was the first of its kind to open in the north of England. The club is a health and social group that follows a model developed by former district nurse Ellie Lindsay OBE, which sees patients treated by nurses in community settings. The leg club atmosphere encourages people with ulcers and other medical conditions to take more interest in their care and treatment, and when their legs heal, to keep them well and healthy. An important aspect of the club is the social element – as leg problems can limit mobility, being supported to attend every week help reduce social isolation.

To further tackle the problem of loneliness, during the year, we worked with our colleagues in the West Yorkshire and Harrogate Health and Care Partnership on its first regional campaign, "looking out for our neighbours." The campaign, which launched in March,

encourages people to connect with their neighbours in a bid to reduce the problems caused by social isolation. People can download resources so that they too can contribute to increased social connections within their communities www.ourneighbours.org.uk

2.8.3 Strong, engaged and well-connected communities

Leeds is home to vibrant and diverse communities, well-established networks and a thriving third sector. It's vital that we work together to keep our communities strong as they are essential for individual health and wellbeing.

We, alongside Leeds City Council, continued our commitment to fund the city's neighbourhood and older people's networks with an announcement in September confirming arrangements for a five year funding settlement. The Neighbourhood Networks support around 20,000 older people around the city, delivering support which helps reduce pressures on statutory health and care services, as well as enabling local people to get involved in using community assets in ways local people want. All of the Neighbourhood Network schemes are governed by local people who represent the communities they serve. These people steer the organisations so they best meet outcomes local older people want. The grants total value is £15,009,450 over the initial five years, with an annual value of £3,001,890.

We are playing a lead role in setting up local care partnerships; leadership teams are in place and are helping deliver new ways of working in local communities, built around the needs of local populations. For example in the Armley and Lower Wortley area, professionals from a range of agencies are working together to improve mental health support within these communities.

Our third sector grants final round has funded a diverse range of health projects aimed at improving health outcomes and build capacity in order to relieve pressure or demand elsewhere in the health system. A total of £2.3m funding was distributed through the health grants programme between 2015 and 2018. The time-limited funding was provided by the three former Leeds CCGs with a particular focus on the north and south and east of the city. The grants programme may have come to an end; however the evaluation shows that local community groups benefitted from both the financial support but also by developing a better understanding of how to work with statutory bodies. We have also established a new fund for patient participation groups (PPGs) at GP practices to apply to for developing

new health lifestyle projects or increased connections between the GP practice and its local community.

To encourage people take an active role in their health and care, we worked closely with colleagues from Healthwatch Leeds, Leeds City Council, NHS providers and the wider third sector to organise the Big Leeds Chat. This was the first 'one system' citywide engagement event in Leeds. It brought around 500 local people together with key decision makers and leaders, to have a conversation about what matters to them and to better understand their needs and preferences. We also carried out a number of engagements throughout the year, including on maternity services, urgent treatment centres, mental health services, local care partnerships, community respite care services and weight management services. More details on our engagement activity can be found in [section 2.4](#)

Less formally, we involved local communities in activities to mark the 70th anniversary of the NHS, and our Big Thank You campaign encouraged Leeds residents to thank their winter hero for this or previous winters. The winter hero could be anyone from all walks of life, such as unpaid carers and community groups supporting people every day. The campaign was a partnership approach involving the city's NHS organisations, Leeds City Council, West Yorkshire Police (Leeds District), British Transport Police and community and voluntary organisations who are recognising the dedication and hard work that staff do every year to help people through winter.

2.8.4 Get more people, more physically active, more often

We share an ambition for Leeds to be the most active big city in England. As well as supporting Public Health England campaigns such as One You, Active 10 and Change4Life. We have promoted One You Leeds, most recently as part of a West Yorkshire and Harrogate healthy hearts initiative, which aims to reduce the incidence of cardiovascular disease in the region.

We have also invested in further capacity in pulmonary rehabilitation, aimed at encouraging people to walk more and be more active, and we continue to support 'Breathe Easy' groups, which help people with respiratory conditions in some of the city's most deprived areas.

2.8.5 Maximise the benefits of information and technology

New technology can give people more control of their health and care and enable more coordinated working between organisations. The Leeds Care Record continues to be rolled out and has been firmly established in the city allowing health and care professionals to access records. This is reducing the need for duplication, especially from a patient's perspective, who no longer are asked the same questions by different people looking after them. This is a joined up, digital care record that enables clinical and care staff to view real time health and care information across care providers and between different systems.

Work continues on the person held records (HELM) project, giving people a chance to access personal information on health as well as council services.

All GP practices now have free patient wifi, and an increasing number are using social media to engage with patients. During the year, we provided training to help them do this more effectively.

Our continuing care team have worked to eliminate the need for 'wet' signatures for most hospices and GPs by designing electronic referral forms. You can find out more about how this works at <https://rebrand.ly/DARTFeb2019>

Along with colleagues at Leeds Teaching Hospitals NHS Trust (LTHT) and the Leeds Cancer Programme, we have helped develop a teledermatology service for patients with skin lesions or moles that could indicate the presence of cancer. The service allows a GP to take a photo on a smartphone and send it to hospital consultants who can then assess whether a patient needs to be triaged to a clinic for a further assessment. You can find out more about this and other innovations in [section 2.9.11](#)

2.8.6 A stronger focus on prevention

Targeting specific areas such as obesity, smoking, and harmful drinking can make a really big difference to preventing ill health. In 2018, we ran the #NoRegrets campaign with colleagues in public health (Leeds City Council) and Forward Leeds - noregretsleeds.co.uk. This online campaign aimed at encouraging sensible drinking in 18-25 year olds was launched at the beginning of Alcohol Awareness Week in November and ran throughout the festive season. By the end of January 2019, almost two thousand individuals had accessed the site, with some blogs on the site having been viewed hundreds of times.

Recognising that health and wellbeing are determined by many factors, we have continued to develop our social prescribing service. Over 5,000 people have accessed services that support them to meet their personal goals in their own neighbourhoods. In 2018-2019 we worked on developing a citywide service moving from the previous model set up by the three predecessor CCGs in the city. It's anticipated that the service will be running from April 2019. There's more about the scheme in [section 2.5.5](#)

Reducing incidence of cardiovascular disease is a national, regional and local priority; however, we know that far more people are at risk than realise it, and engaging with some of the most at risk isn't straightforward. We have worked with the British Heart Foundation to test a community based approach to identify raised blood pressure in addition to increasing accessibility to blood pressure testing and lifestyle support. The project is targeting front-line council employees as well as people served by six community pharmacies in the 10% most deprived areas of the city. To date, there have been approximately 1,000 blood pressure tests undertaken and learning from this project will help shape future programmes. We have also worked with 35 community pharmacies to offer blood pressure checks. In addition, the NHS health check programme has been re-procured and will be delivered by the Leeds GP Confederation from April 2019.

Embedding this important service within general practice, with extended access and out of hours hubs, will make it more accessible to people who may be less likely to access prevention services.

Raising awareness of how people can stay well and protect themselves from ill health is a key part of our prevention work. We have delivered campaigns to encourage people to take up cancer screening such as cervical smears and bowel cancer tests. We have also continued to develop our nationally-recognised 'Seriously Resistant' campaign to raise awareness of the risks of overuse of antibiotics. In 2019, we will be launching a new phase of the campaign, which will target parents and carers of young children, older people and health care professionals. We are also supporting Leeds City Council's healthy schools team by providing Seriously materials to use in the classroom.

2.8.7 Support self-care, with more people managing their own conditions

Long term conditions are the leading causes of death and disability in Leeds and account for most of our health and care spending, so it's vital that we support people to maintain independence and wellbeing within local communities for as long as possible.

With diabetes affecting around 44,000 in Leeds, and a further 32,000 at high risk of developing it, developing a system-wide diabetes strategy has been a priority this year. The strategy has been co-produced with diabetes professionals from across the NHS, council and third sector, as well as people with the condition and carers. It will be published over summer 2019. During the year, we also developed a range of resources to help people with diabetes take better care of their feet, in order to reduce the risk of amputation. Completion of the diabetes structured education (Type 2) course has continued to be above target (77% against a target of 60%). People are reporting an improved confidence in self-managing their condition, sustained at 100%. GP practices continue to be involved in referrals to the NHS diabetes prevention programme.

Along with colleagues in Community Pharmacy West Yorkshire, we have introduced free inhaler checks in 50 pharmacies across the city. The service is about making sure people with asthma and COPD are able to use their inhalers in the correct way and that they are appropriate for them. In Leeds we have recognised that some people with asthma or COPD have been prescribed an inhaler that they might find difficult to use. Unfortunately this can affect how well their respiratory condition is controlled. The community pharmacies help patients have easier access to inhaler checks, to ensure they are getting the most from their inhalers and that their asthma or COPD is well controlled. To further help people with respiratory problems better manage their conditions, 10 integrated Breathe Easy groups are now established, with a particular focus on disadvantaged groups and areas with high prevalence of COPD to promote independence and living a good life.

Use of collaborative care and support planning has continued within the city. The number of people having a collaborative care support plan (CSSP) has continued to increase, which is helping them manage their own condition by focusing on "what is important to them" with people working with their GPs to develop goals to work towards for 12 months before their next annual review.

2.8.8 Promote mental and physical health equally

The city's ambitions for mental health are crucial for reducing health inequalities, and throughout the year, we have continued to fund and develop mental health services and resources.

MindMate - www.mindmate.org.uk - the online resource for young people, has continued to grow, and last summer, we delivered a major campaign aimed at raising awareness both of the resources available and of mental health issues affecting young people. For World Mental Health day, we partnered with British Transport Police and the local universities to further raise awareness. In addition, we have funded services such as Teen Connect to support children and young people in distress and there is now a single point of access to simplify referrals.

For adults, the MindWell website - www.mindwell-leeds.org.uk - has continued to be developed and has recorded 100,000 visitors since it launched. We have also evaluated and updated our perinatal mental health pathway together with families in Leeds. We contributed to the Yorkshire Evening Post 'Speak Your Mind' campaign, including a recent piece on looking after your mental health at Christmas and promotion of mental health drop-in sessions for the public across Leeds.

We are also making headway with a national initiative called STOMP which aims to stop the over medication of people with a learning disability, autism or both. We commissioned a STOMP team who have worked closely with GP practice, patients and their carers. To make sure people get the right medicine for when they really need it.

There's more information about mental health services in [section 2.5.6](#)

2.8.9 A valued, well trained and supported workforce

In common with our NHS, council and third sector partners, we have a highly motivated, creative and caring workforce, who are working hard to deliver high quality care. We are a founding partner of Leeds Academic Health Partnership (see [section 2.9.10](#)), which, through innovation and collaboration, is helping to ensure that Leeds is one of the best places in the UK to work in health and social care.

Following the creation of a single CCG, we have worked hard to engage our staff in a number of ways, including all staff events, professional and personal development opportunities and recognition events linked to NHS70. In a similar vein but for all partners, we helped develop the Big Thank You campaign – bigthankyouleeds.co.uk – which encouraged people across the city to say thank you to their winter heroes. At a time when frontline staff are under great pressure, this has been a very popular way to show how appreciated they are.

We have also invested in developing the primary care workforce, both with practical training and leadership development, and our safeguarding team continue to offer training, support and advice to primary care.

Over the coming 12 months we will support colleagues at Leeds Academic Health Partnership and those working on the Leeds Health and Care Plan to continue work on the 'one workforce' programme.

2.8.10 The best care, in the right place, at the right time

To help develop more effective, efficient health and care in the community, we have supported the establishment of local care partnership leadership teams, which are developing new ways of working locally, based on the needs of their local populations.

During 2018-19, the first urgent treatment centre was designated at St George's Centre, aimed at reducing the number of people going to A&E. The mandate for establishing urgent treatment centres (UTC) across the country comes from NHS England as part of their drive to improve urgent and emergency care. UTCs help simplify the system, and we are currently carrying out an extensive engagement with local people to seek their views on proposals to expand the UTC offer in the city. As part of the UTC offer, direct booking has been tested. This allows NHS 111 to book an appointment at the UTC for the individual, therefore giving a better experience to the individual rather than having to wait their turn in the queue to be seen.

Since October 2018, all Leeds residents have had access to evening and weekend GP appointments, which will also help relieve pressures on other parts of the system. To further support this endeavour, we have run extensive awareness campaigns throughout the year aimed at encouraging people to cancel GP appointments if they no longer need them and to choose the right service, based on the national Help Us, Help You approach. In addition, we have helped new communities in Leeds to understand how to access healthcare in the city including working with the Migrant Access Partnership.

We have piloted the Leeds Clinical Assessment Service. This allows people (within the pilot scope) to receive clinical advice over the telephone via NHS 111, by a range of local health professionals (such as GP, nurse, musculoskeletal specialist, pharmacist). This has reduced the need for people to have to attend a face to face appointment, when it was identified that a phone call was clinically appropriate

2.8.11 Suggested priorities for our work against the priorities in 2019-20

We will continue to develop our approach to commissioning and delivering positive and enduring health and wellbeing outcomes for the people of Leeds. This includes sharing responsibility for outcomes and inequalities as a result of our health, care and support services and to work together to integrate care around population and community needs.

2.9 Working with our partners

2.9.1 Leeds GP Confederation

The Leeds GP Confederation is a 'not for profit organisation' working to improve the health and wellbeing of the people of Leeds. It does this by strengthening and sustaining primary care as well as working with the full health and care system to meet the objectives of the Health and Wellbeing Strategy 2016-2021.

The Confederation was established in March 2018 to represent the collective view of GP practices as providers in Leeds. It has evolved through shared working with the GP leadership and the existing three federations in Leeds. In October 2018, CCG staff working in the primary care development and clinical pharmacy teams became embedded within the Confederation and other staff from the CCG provide support as needed.

The Confederation aims to improve care in Leeds, principally through applying the local care partnership model in localities but also by helping spread best practice across the city. It exists to

- Help practices remain sustainable by building on the attributes of primary care
- Enable practices to play a full and active role in quality improvement, service integration and pathway development, aligned with the local care partnership vision.
- Create a governance system that enables practices be active in contributing to both local and citywide strategy.
- Create an organisational structure which is able to hold contracts and deliver services across general practice in Leeds and in partnership with other providers in the city.
- Listen and act.

During the past year, the Confederation has developed governance, leadership and staffing structures to meet its purpose; for example, contracts for extended access to GP

services and NHS health checks are held by the Confederation. The Confederation has been key in the ongoing development of primary care networks, integrated nursing and digital developments. It has also engaged extensively with member practices about how the Confederation can support them with their priorities. This work has been developed to take into account the changing local and national context including the review of the Leeds plan, workforce issues, new five year GP contract and the NHS long term plan, particularly around the development of primary care networks. A new 'offer' is currently being developed to help mitigate risks and manage the workload of the new networks that will enhance the work the Confederation is already doing to support practices and localities.

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