Building the Houses of Leeds

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Question 1

What percentage of clinicians feel they involve patients in decisions about their healthcare?

a) 30%
b) 50%
c) 65%
d) 85%
Question 2

What percentage of patients report feeling involved in decisions about their healthcare?

a) 30%
b) 50%
c) 65%
d) 85%

Question 3

What proportion of people feel confident that they can manage their health?

a) 40%
b) 50%
c) 60%
d) 70%
Question 4

What proportion of their time do most people with LTCs spend with healthcare professionals?

a) 0.1%  
b) 1%  
c) 5%  
d) 10%

Long term conditions are different

Hours with healthcare professional  
= 4 hours in a year

Self-management  
= 8756 hours in a year
This is Leeds

- Second largest city in England - **751,485**.
- **141,771** people from BME communities living in the city
- **164,000** people in Leeds who live in areas that are ranked amongst the most deprived 10% nationally.
- **150,000** Over 60 year olds
- **233,000** people living with at least one Long Term Condition
- **74,000** carers

Complexity of Leeds

Leeds CCGs, Community Committees, GP practices
Hatched area within most deprived 10% in England
GOVERNANCE - UNDER THE HSC TRANSFORMATION PROGRAMME

Engaged, informed patient

HCP committed to partnership working

Organisational processes

Collaborative care planning consultation

Commissioning - The foundation
What people would like to see

I have choice and control over the services I get

Services see and treat me as an individual

I can get the support I need to manage my own condition

Formal services help me to make good use of everyday, community services and support

I know who to go to if I need to discuss my support
People with LTC feel supported and confident to self-manage their condition.

**Support**

<table>
<thead>
<tr>
<th>Ed &amp; Training</th>
<th>Culture/Community</th>
<th>Impact approach on Health/Care Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self Help Resources</td>
<td>Community Peers</td>
<td>Apps, Leaflet, Structured Education program</td>
</tr>
<tr>
<td>Systems and processes</td>
<td>Care Plans, Health Coaching</td>
<td>IT/Web, Apps, Peer Group/Support Groups</td>
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</tbody>
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**Confidence**

<table>
<thead>
<tr>
<th>Confidence for Carers</th>
<th>Community Connectivity</th>
<th>Standardised diabetes education pathway</th>
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</thead>
<tbody>
<tr>
<td>Plans, Pathways, Tools e.g.</td>
<td>Education, Support</td>
<td>Tele world, Info Prescriptions/etc</td>
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</table>

**Health Care Professional**

<table>
<thead>
<tr>
<th>Other Support People</th>
<th>Self Help Resources</th>
<th>Knowledge, Application, Skills, Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community, Teams</td>
<td>Apps, Leaflet, Structured Education program</td>
<td>Directory Self Management, Self Management Steering Group under ICP programme</td>
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**Cost and Value**

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<thead>
<tr>
<th>Quality improvement</th>
<th>Cost reduction</th>
<th>Value for Money</th>
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</thead>
<tbody>
<tr>
<td>Improved patient outcomes</td>
<td>Reduced healthcare costs</td>
<td>Enhanced satisfaction</td>
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**Organisational Processes**

- Self-management steering group under ICP programme of the Transformation Board led by Public Health with reps from health and social care, patients
- All 3 CCG buy into the year of care approach and commitment to roll it out
- Development of a city wide IT system to capture data and share results and care plans with patients and voluntary sector

**Engaged Informed Patient**

- Review of structured self-management courses
- Pilot of a 9 month menu-based structured education programme for people with LTC’s
- Pilot of a 12 month South Asian diabetes education programme
- Roll-out of Integrated Breathe easy groups for people living with respiratory disease
- Carers’ wellbeing
- Apps

**Collaborative Conversation**

- Year of care approach in Primary care
- Health Coaching
- Motivational Interview training
- Patient Activation Measure – to support practitioners in using different coaching strategies depending on level of activation

**Commissioning**

- Patient engagement project to understand the needs of people living with LTC’s
- Social prescribing – 3 models
- Research into available and recommended diabetes apps
- Re procurement of healthy living services

**The Leeds House of Care**

The Leeds House of Care is a comprehensive approach to managing long-term conditions. It involves patients, carers, and professionals to ensure a coordinated care plan. The approach focuses on empowering patients to manage their conditions effectively, with support from healthcare providers. The diagram illustrates various components such as self-management, education, support, and technology, all designed to enhance patient confidence and self-management skills. The diagram also highlights the collaborative nature of the approach, involving all stakeholders in the delivery of care. The goal is to provide a personalized care plan that addresses the unique needs of each individual, promoting better health outcomes and quality of life.
The Year of Care in Practice

Between visits
- Information gathering
- Information sharing
- Consultation and joint decision making
- Agreed and shared goals and actions (care plan)

2nd visit
- HCA performs annual review tests
- Sent to patient > 1 week before consultation; with agenda setting prompts
- Prepared HCP and patient
- Resultant care plan shared with patient, immediately or by post

Roy

Web link
The Leeds Tool box of support

Structured education –
generic, condition
specific

Social Prescribing

The Leeds
Directory

Promotion of
accessible apps

Decision
aids

Peer support
groups

Integrated healthy living

Our Mickey
Mouse
Co-Producing support

Diabetes may be known as the silent killer but thanks to a Public Health funded programme delivered by health organisation Touchstone, one of the groups most at risk are benefiting from practical education and advice.

Waseem Ahmed (Chair of the Al-Khairat Day Centre Executive Committee) said:

“I am delighted with what has been a really hands-on course that has encouraged people to think more about healthy eating and the impact this can have on their diabetes.”

Email: newsdesk.lds@yorkshirereporter.co.uk

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DIABETES EDUCATION PROGRAMME A BIG HIT

Councillor Davey with community members who took part in the course and some of the organise enjoying the healthy food they had prepared.