

# 2022/23 Service Value Report

NHS Midlands and Lancashire Commissioning Support Unit

April 2023

# NHS Midlands and Lancashire CSU

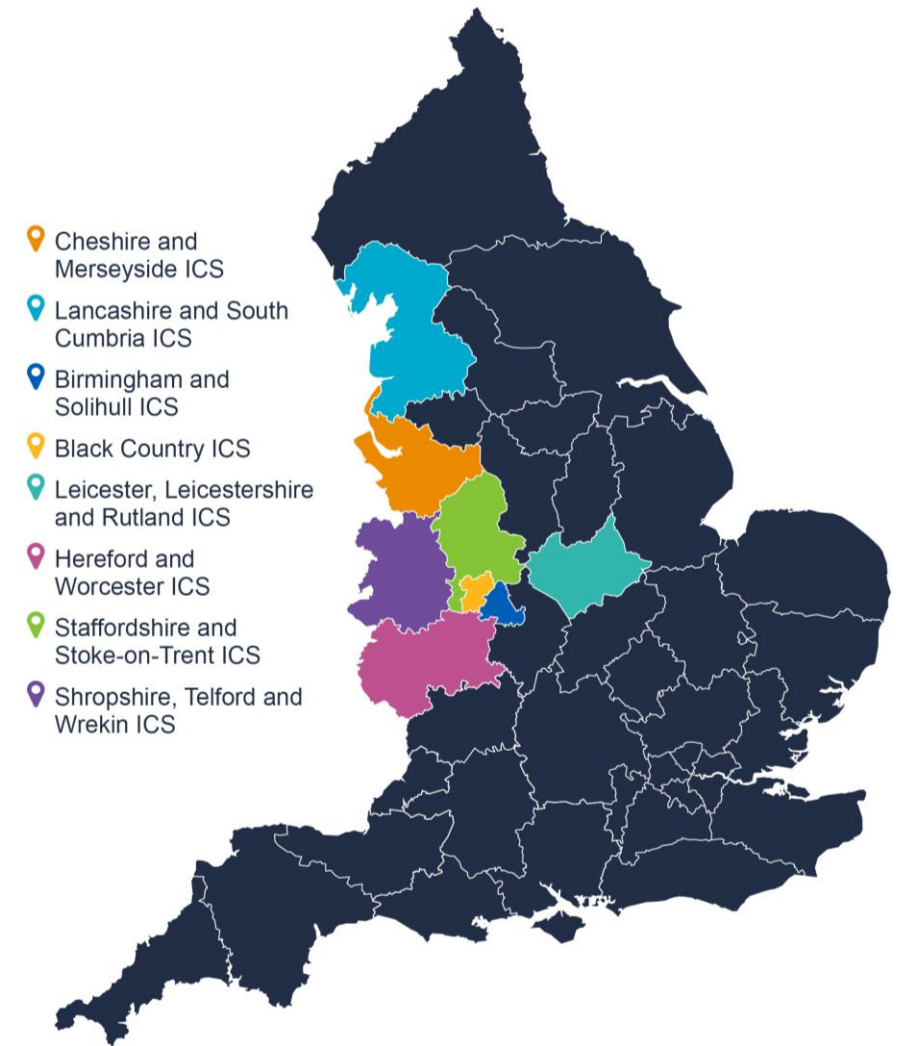
**We are part of the NHS family, being both 'of' and 'for' the NHS.**

Our vision is to be pivotal in supporting major improvements in health and wellbeing for organisations across our partner Integrated Care Systems (ICSs). We are integral to the healthcare systems we work in partnership with, and our philosophy is to face every new challenge and opportunity together with our partners.

We have unparalleled experience across a wide range of areas that positions us as a market leader of professional support services, transformational and clinical support services to ICSs.

We:

- work across health and care systems
- have a track record of innovation
- see business continuity as a priority
- are a leader in cyber security with strong governance
- have leadership at every level.



# About NHS Midlands and Lancashire CSU



Midlands and Lancashire  
Commissioning Support Unit



## Customers and Systems



### Lead CSU for 8 integrated care systems

Plus diverse clients from NHSE/I, ICSs and ICBs, trusts, primary care and local authorities.



With a total healthcare spend of **£14.9bn**



Of the NHS, for the NHS



**"A valued strategic partner"**  
Lancashire and South Cumbria ICS

**Customer satisfaction:**  
98% of customers 'satisfied' or higher



## Finance



**£108m**  
Annual turnover



**£35m**  
Generated in new business



## Workforce



**1900+**  
Staff, including leaders in their field



**28**  
established supply chain partners adding expertise



**Towards Excellence**  
Level 3 Accredited



## Innovation



**Awards in 2021**

**3**  
Won

**8**  
Shortlisted



Leading digital transformation programmes for Digital First projects



TALENTone, flexible resourcing providing skills and capacity



Mobilising a "Gold Command Room" to ease system pressure



MDL mobile app making it easy to stay up to date with MLCSU

# 2022/23 Service Value Summary

## **We have great pleasure in presenting our 2022/23 Midlands and Lancashire Commissioning Support Unit (MLCSU) Value Report.**

This sets out the breadth and depth of our services, showing the impact we have had for partner organisations, as well as partner feedback during 2022/23.

2022/23 has been a pivotal year in which we have further deepened our relationship with our partners. There has been collaborative working to tackle the impact of COVID-19, we have supported systems to deliver on key priorities and recovery targets, and supported designing the future landscape architecture as systems transition from clinical commissioning groups (CCGs) to integrated care boards (ICBs) as part of a wider integrated care system (ICS).

We want to continue to provide our partners with high-quality, innovative, efficient, value-for-money services. So, having considered the future needs of ICSs and ICBs, we have redesigned our service offers in collaboration with CSU partners into system value propositions reflecting the future requirements we feel each system will have.

## **During 2022/23 we:**

- provided high-quality, strategic planning and programme support to enable the design and progression of ICB development
- delivered highly specialised, innovative business intelligence to enable data intelligence-driven strategic and operational system level decision making
- provided subject matter experts to work with ICB executives to design future functions, enabling ICBs to operate with a 'one team' approach
- provided high quality resource to system programmes to enable rigorous set-up, progression and delivery
- flexibly deployed resource to priority areas to enable rapid response to projects, ensuring resource was used in an optimum way, adding value and minimising waste.



# Contents

<a href="#">Business Intelligence</a>	6	<a href="#">Equality, Inclusion and Human Rights</a>	22	<a href="#">Personalised Healthcare Commissioning</a>	40
<a href="#">Communications and Engagement</a>	8	<a href="#">Health Economics Unit</a>	24	<a href="#">Procurement</a>	42
<a href="#">Contract Management</a>	10	<a href="#">Health, Safety, Fire and Security</a>	26	<a href="#">Quality and Performance Assurance</a>	44
<a href="#">Customer Finance</a>	12	<a href="#">The Improvement Unit</a>	28	<a href="#">Referral Management</a>	46
<a href="#">Delivery Unit</a>	14	<a href="#">Individual Funding Requests and Clinical Commissioning Policy</a>	30	<a href="#">Risk Management, Serious Incidents and Governance</a>	48
<a href="#">Digital: Corporate and General Practice IT</a>	16	<a href="#">Information Governance and FOI/SAR</a>	32	<a href="#">The Strategy Unit</a>	50
<a href="#">Digital: Transformation and Programme Management</a>	18	<a href="#">Medicines Management and Optimisation</a>	34	<a href="#">System Control Centre</a>	52
<a href="#">Emergency Preparedness, Resilience &amp; Response (EPRR) and Business Continuity</a>	20	<a href="#">Patient Experience Team</a>	36	<a href="#">The Transformation Unit</a>	54
		<a href="#">People Services</a>	38	<a href="#">Nursing and Urgent Care</a>	56



# Business Intelligence

## Service summary

The Business Intelligence (BI) function uses data, intelligence and insight to support data-driven, evidence-based decision making across the ICBs and place-based partnerships.

The team provides insights to:

- understand the quality and performance of health services and support actions for improvements for patients
- provide capacity and demand analysis and scenario modelling to support strategic and operational planning
- support Population Health Management (PHM) through the use of segmentation tools and analytical insights to identify opportunities to improve the health and wellbeing of patient cohorts and individuals
- develop BI products which support health inequalities programmes exploring opportunities identified by the work of the Health Equity Commission to help reduce unfair and avoidable differences in the health and wellbeing of the population
- support Primary Care Networks (PCNs) in identifying priority areas for the Investment and Impact Fund to help maximise the improvement of services for their patients
- provide near real time reporting and insight to the System Control Centre to support data driven operational management and decision making.

## Key benefits of the CSU service

- Product/report development – at scale delivery drawing on cutting edge technology to enable wider/near real-time data flows and enhanced reporting tools to support high end analytics aligned to ICB ambitions. Continued development and rollout of health, wellbeing and care reporting tools.
- In 2022, more than 1,650 Aristotle users (including ICB, CCG, GP/PCN and CSU aligned) accessed tools and resources more than 29,000 times.
- Responsive, rapid report development to meet the needs of ICB programmes and workstreams.
- Highly experienced BI specialists providing analysis and insight to support ICB decision making in relation to strategic planning, operational delivery, service design, quality and assurance and improving population health.
- Subject matter experts providing advice and guidance, consultancy and best in class analytics tools, products and services.



# Business Intelligence

**For further information please contact:**  
Hina Naik, Assistant Chief Information Officer  
[hina.naik@nhs.net](mailto:hina.naik@nhs.net)

## Research and innovation

- Through collaboration with University of Manchester, MLCSU has secured funding for a PhD student to undertake research into 'the application of novel scheduling algorithms within primary care settings'. PhD recruitment taking place with work due to start in September.
- Excellence in Informatics Level 1 achieved during 22/23. Level 2 Excellence in Informatics assessment session scheduled for July 2023.
- One of 12 organisations nationally to be an early adopter of the NHSE BI Competency Framework. This will support staff and service development in a number of new and increasingly important areas e.g. Data science.
- MLCSU's Chief Analyst is on the board of AphA (Association of Professional Healthcare Analysts) and is aiding the development of the training endorsement and accreditation programme – supporting the identification of high quality training aligned to competency areas defined in the national framework.



## Testimonials, recognition and awards

"The health inequalities tool enables me to identify clinical areas where the inequalities are widest...this can help target interventions. The tool works well with the other PHM and PCN dashboards to provide a holistic picture of local health outcomes."

*Vicky Hepworth-Putt, Acting Consultant in Public Health, Cumbria County Council*

"The training was extremely informative allowing the team to connect data sources and then create Power BI dashboards. The team were shown how to create bespoke reports using both Analysis Services and SQL queries and how to write DAX queries to create additional content".

*Mike Alldis, Head of Information Services, University Hospitals of North Midlands (testimonial in relation to recent Power BI training delivered).*



# Communications and Engagement

**For further information please contact:**

Elise Bethancourt, Head of Service

[elise.bethancourt@nhs.net](mailto:elise.bethancourt@nhs.net)

## Service summary

MLCSU's Communications and Engagement team provides strategic, professional support to manage client risks and reputation. The team can help to troubleshoot immediate needs and plan strategically for long-term communications and their flexible approach enables partners to pick and choose communications support on a project or retained basis.

MLCSU's experts support partners to improve communication with key stakeholders, including patients and other organisations. Projects vary from crisis management and web development to marketing campaigns, developing strategies and bespoke engagement work.

Communication and Engagement is made up of several components:

- Strategic consultancy
- Embedded Communication and Engagement experts
- Three defined at-scale teams
- Campaigns, Creative and Digital
- Communications and Media
- Engagement, Insight and Consultation
- End-to-end Communications and Engagement Solutions.

The team supports partners to engage with their patients and other key stakeholders to ensure that the services they commission or deliver meet patient needs. We keep our customers safe and maintain their positive reputation, whilst ensuring that they meet their statutory obligations.

## Key benefits of the CSU service

- Core contract Key Performance Indicators (KPIs) always met with very rare exception.
- All exceptions escalated and dealt with quickly.
- Monthly at-scale delivery compliance reports and annual account close down reports.
- Exceptional customer feedback, including exiting accounts who couldn't fault the CSU service.
- Regular internal Return on Investment (ROI) assessments to ensure customers continue to receive good value for money.
- Ongoing competitor analysis for continual competitive edge and value.
- Ability to scale up and down at pace.
- Ability to access niche, skilled expertise without the need to employ staff directly
- Ability to flex resources which ensures customers aren't paying during dips in demand, helping us to balance back to an overall cost saving.
- Shared licence fees reduce non-pay cost to customer.
- Investment in specialist skills development centrally.
- Access to a broad spectrum of expertise to help them to advise and deliver.
- Ability to manage and deliver remotely, helping to reduce customer estate costs.
- Ability to bring the perfect mix of specialist skills to the table at the most appropriate time.





# Communications and Engagement

**For further information please contact:**

Elise Bethancourt, Head of Service

[elise.bethancourt@nhs.net](mailto:elise.bethancourt@nhs.net)

## Research and innovation

- Remain up to date with statutory duties and national priorities.
- Regularly review our competitors to benchmark our products and services against competitor offers, ensuring we offer high quality and good value for money.
- PrimaryWeb: A digital solution that allows Primary Care providers to build a cost effective and accessibility compliant websites.
- Behavioural insights: To understand why people behave the way they do, helping us influence positive change.
- Communications and engagement for service redesign.
- Exploring the possibilities of automation via Artificial Intelligence (AI) and advanced data modelling to introduce further efficiencies.



## Testimonials, recognition and awards

"Just wanted to say a massive 'Thank You' for all your support with the PVAS Network- it's been such an amazing learning opportunity and it has been a real pleasure working with you. We will definitely highly recommend you both to internal/external colleagues."

*Kath Marginson, Senior Project Manager, NHS England*



# Contract Management

**For further information please contact:**  
Stephen Newton, Head of Contract Management  
[stephennewton@nhs.net](mailto:stephennewton@nhs.net)

## Service summary

MLCSU's Contract Management function delivers provider management and contract support that is patient focussed, collaborative, and meets the ambition of each partner organisation within an ICS.

The service offers contract management across all sectors including; acute, community, mental health, ambulance, primary care, voluntary, independent and local authority.

Provision includes supporting ICSs to procure services by working with partners to refine specifications, draft contracts, evaluate bids, manage contract negotiations and mobilise new contracts.

Our teams offer effective analysis of provider and system level performance and manage the delivery of improvement measures.

The service works in collaboration with Multidisciplinary Team (MDT) partners in assuring timely and valued interventions with providers

## Key benefits of the CSU service

- Strong local knowledge of provider markets and established provider relationships.
- Expertise of different contracts including NHS Standard Contract, Alternative Provider Medical Services (APMS) and Any Qualified Provider (AQP).
- Multi-disciplinary approach to aligning the contracts to system needs.
- Resilience and knowledge shared across the MLCSU footprint.
- Coordinating procurement, business intelligence and contract management expertise to support ICS partners to have meaningful conversations regarding delivery and planning.
- Specialist primary care contracting expertise; during 2022/23, the team issued over 760 contracts, interacted with 450 providers, processed over 14,000 payments and worked across 95 service specifications.
- Management and oversight of community equipment contracts within two geographies. Clearing inherited backlogs, managing the prescribers forum and streamlining processes.
- Directly supported NHS Planning Priorities for 2022/23 as part of NHS England's Elective Care Recovery Programme through creating an Independent Sector Coordination role to effectively utilise Independent Sector hospital capacity. Successfully diverting up to 200 patients per month for some Trusts.
- Strong record management and document control for all contracts, including electronic contract management system.



# Contract Management

**For further information please contact:**  
Stephen Newton, Head of Contract Management  
[stephennewton@nhs.net](mailto:stephennewton@nhs.net)

## Research and innovation

Within the North West, the team are addressing challenges around balancing patient choice and cost control, liaising at a regional level via a Getting it Right First Time (GIRFT team) and working with NHS national legal teams.

The service are developing a new innovative electronic contract management system to drive efficiency and promote automation within the service.

The team are continually monitoring and preparing a range of contract forms to support the evolution of provider collaboratives and innovative ways of working.



## Testimonials, recognition and awards

“Your approach and expertise has been invaluable to us all. This wasn’t just an MDT, it was also an opportunity for us all to learn and develop our contracting knowledge enabled by a fantastic working culture we all worked hard to develop.”

*Simon Runnett, Senior Commissioning Manager, Staffordshire and Stoke-on-Trent ICB*

**The function is a finalist for the prestigious GO Awards for the Contract and Supplier Management Award for its work in coordinating activity for the Independent Sector late last year into this year.**



# Customer Finance

**For further information please contact:**

Jules Harrhy, Deputy Director of Finance

[julie.harrhy@nhs.net](mailto:julie.harrhy@nhs.net)

## Service summary

The MLCSU Finance team provides high-quality financial services through a Centres of Excellence model. There are three at-scale hubs specialising in Procure to Pay, Order to Cash and Individual Patient Activity, (CHC, NCA and PHB audits). We also have more senior staff and associates for project work, enabling us to meet temporary requirements

The Finance team works with our own Innovation Unit on various automation solutions to deliver efficiencies and has published Innovations on One Finance. We have LEAN and Prince2 qualified staff available for process reviews (currently working with a number of Trusts) and staff with the Better Business Case accreditation required by NHSE.

Services are delivered to both ICB and ICS partners.

Exemplary processes and controls in place, as verified by annual independent Service Auditor Reports (SARS).

## Key benefits of the CSU service

- Over 10 years' experience delivering at scale finance services to the NHS.
- The service is comprised of a large team and can offer flexibility, multi skilled and specialist staff across all AfC bands.
- The service has been appointed by NHSE to provide subject matter expertise to seven ICBs until May 2024 to implement ISFE2.
- Due to size, the team is highly resilient and can work flexibly to meet the evolving needs of NHS partners.
- As part of the CCG close down in 2022/23, our team supported statutory accounts across 19 CCGs – all were closed down successfully with zero adverse audit queries.
- In 2022/23, MLCSU's finance services migrated 19 CCG ledgers across to four ICBs.
- The service is an early adopter of automated processing – reducing resource costs, offering efficiencies to partners and supporting partners to identify and implement automated processes.



# Customer Finance

**For further information please contact:**

Jules Harrhy, Deputy Director of Finance

[julie.harrhy@nhs.net](mailto:julie.harrhy@nhs.net)

## Research and innovation

MLCSU's Customer Finance service funded an innovation team to investigate internal efficiencies and to support NHS partners to identify opportunities for efficiencies within their own organisations.

MLCSU was the first commissioning support unit to purchase and embed a Bot, working with our Digital Innovation Unit to evidence proof of concept. The majority of the team's ISFE ledger work is now automated.



## Testimonials, recognition and awards

"The finance team have always been diligent, approachable and very responsive to the changing requirements within the NHS".

*David Skelton, Financial Controller, Staffordshire and Stoke-on-Trent ICB*

**Won HFMA Finance Team of the Year Award 2021 (Midlands) and runner up for National HFMA Award Finance Team of the Year 2021.**

Only **Level 3 FSD accredited finance service** in the Midlands or South of England. MLCSU is working with other organisations to support them to achieve this accreditation.

Our customer finance team has been **awarded the globally recognised ISO 27001 and ISO 9001 accreditations**, demonstrating their commitment to exceptional quality and robust information security management.





# Delivery Unit

**For further information please contact:**  
Jackie Hadwen, Head of Service, MLCSU Delivery Unit  
[jackie.hadwen2@nhs.net](mailto:jackie.hadwen2@nhs.net)

## Service summary

The Delivery Unit provides agile, professional and cost-effective delivery support to health and care organisations.

The Unit combines programme management and subject-matter expertise in blended teams to organise and make change happen.

The team was established in November 2022. Recent work has included assisting an NHS organisation with business critical capacity, acute improvement support and providing programme management and business case support to a range of clients.

There is a wealth of experience and expertise in strategy, planning and transformation in the team including:

- Delivery diagnostic – identifying the gaps, risks and opportunities for action and associated priorities across a range of services.
- End-to-end collaborative programme and project management service.
- Business case development.
- Commissioning/decommissioning management.
- Service mobilisation/implementation support.
- Post project evaluation.
- System and service redesign support and delivery.

## Key benefits of the CSU service

- Bespoke delivery support based on what you need, when you need it.
- Professional, responsive and collaborative approach.
- Highly skilled and experienced personnel from a wide range of backgrounds, all with NHS experience.
- Project professionals and subject matter experts able to work alongside and with your team.
- Experienced in multi-organisational project and programme delivery,
- The ability to break problems down in order to navigate and propose solutions.
- An unerring focus on outputs and benefits for patients.
- Of the NHS for the NHS and it's partners.
- Delivering Value for Money.



# Delivery Unit

**For further information please contact:**  
Jackie Hadwen, Head of Service, MLCSU Delivery Unit  
[jackie.hadwen2@nhs.net](mailto:jackie.hadwen2@nhs.net)

## Research and innovation

**National Digital Weight Management programme** - MLCSU have led on the implementation of this for NHSE for the past two years and now operate the service.

**Elective Care Planning Support programme** – MLCSU were able to facilitate consultancy firms to deliver planning support services to every ICS in the country throughout February and March 2022. This was a vital step towards meeting NHS England's elective recovery target.

Members of the team regularly horizon scan for best practice within their programmes and specialist areas as well as anticipating legislative changes and seeking out learning from other regions.



## Testimonials, recognition and awards

MLCSU supported the development of a new health and wellbeing hub in Shrewsbury by designing integrated care models based on best practice for frailty, long-term conditions, peri-operative care and discharge.

"CSU colleagues successfully delivered a high-level future service model with pathways and demand modelling informed by public engagement and provider stakeholder engagement. MLCSU were excellent to work with and very organised and structured in their approach".

*Emma Pyrah, Associate Director of Primary Care, NHS Shrewsbury, Telford and Wrekin ICB*

MLCSU supported the set up and roll out of the NHSE planning support programme at pace for the post-pandemic national elective care recovery.

"There was significant complexity and challenge in delivering aspects of the programme, and they not only recognised key risks and issues but proactively identified solutions and resolved issues."

"Without the support of MLCSU, we would not have successfully delivered the programme, and we were very satisfied with the service that was provided."

*Elective Recovery and Performance Team, NHS England*

"I can highly recommend the professional service provided by C. An experienced and effective NHS senior programme manager, C's impressive relationship management skills and delivery focus have been instrumental in propelling the LSC Diagnostic Imaging Network work programme forward with stakeholders to deliver benefits to patients, staff and the health economy."

*Jack Smith, Director, Diagnostic Portfolio, LSC Provider Collaborative*



# Digital: Corporate and General Practice IT

**For further information please contact:**  
Ian Hart, Assistant Director of IT Operations  
[ian.hart@nhs.net](mailto:ian.hart@nhs.net)

## Service summary

MLCSU's Information Technology services offer both Corporate IT and General Practice IT support to meet day-to-day operational needs.

The team's innovative solutions can strengthen IT planning, procurement, data security, IT support and training.

Services include:

- comprehensive IT health checks and reporting
- support to plan IT requirements and to procure the most suitable products and services
- design, build and maintenance of IT infrastructure to ensure each organisation can operate effectively and flexibly
- storage and management of data so that it meets NHS data security guidelines
- ensuring equipment, network, data, email and websites have continuous protection from unintended or unauthorised access, change or destruction
- fast and friendly IT support desk
- disaster recovery and business continuity support.

## Key benefits of the CSU service

- Cloud solutions and virtual server provision so that office documents are securely available at any time, in any place.
- Providing end-to-end stable, flexible and scalable IT infrastructure.
- Ensuring equipment, data, network, emails and websites are secure 24 hours a day, seven days a week.
- Data control, management and NHS data security compliance.
- Procurement of IT equipment and asset management.
- Capacity planning, IT health checks and reporting.
- IT training utilising different learning approaches including classroom-based, one-to-one or group sessions, on-site training using our remote training solution, webinar-style sessions and e-learning.
- Comprehensive IT health checks and reporting can help identify and mitigate any potential risks to IT systems and the organisation.
- For clinicians, MLCSU have experience of delivering training on clinical computer systems, patient administration and electronic patient record systems, like SystmOne, EMIS Web and Summary Care Records.
- Training on systems like Choose and Book and Map of Medicine.



# Digital: Corporate and General Practice IT

For further information please contact:  
Ian Hart, Assistant Director of IT Operations  
[ian.hart@nhs.net](mailto:ian.hart@nhs.net)

## Research and innovation

During 22/23, MLCSU's GP Data Quality services were approached to help develop smart pathways in primary care to reduce the volume of referrals to secondary care and to improve the quality of referrals. The client had been looking at existing tools available however opted to develop a bespoke solution.

MLCSU worked with clinicians to develop streamlined data templates within EMIS to capture key information to guide primary care clinicians to available local resources to signpost the patient, alternative community pathways and gather information required to make a good quality, pre populated referral at the required stage.

The solution has been piloted across various MSK specialties and breast pain pathways for the Cancer Alliance. Positive feedback from practices has been received and the process continues to evolve.



## Testimonials, recognition and awards

Our award-winning information management and technology training team has a wealth of experience across the NHS and in commercial environments and can offer a wide range of courses from basic IT skills through to advanced Microsoft applications, clinical systems and soft skills training.

MLCSU are **accredited to offer the leading IT certification in the world**, Microsoft Office Specialist (MOS), and for two years have received a centre of excellence award in recognition of our work.



# Digital: Transformation and Programme Management

**For further information please contact:**  
Stephen McMullin, Head of Digital Transformation  
[stephennewton@nhs.net](mailto:stephennewton@nhs.net)

## Service summary

Digital Transformation enables sustainable digital change programmes for health and care partners.

Services range from one-off consultancy assignments to system-wide technology implementation.

.The service provides transformational services, ranging from one-off consultancy assignments to system-wide technology implementations.

The Digital Innovations Unit is a multi-award-winning team of highly skilled professionals with extensive experience of the NHS, Social Care, Academia and Industry. The team's focus is to assist clients to transform services through (digital) innovation, research and design by offering a unique blend of services; software development, TECS (Technology Enabled Care Service), digital developments, Robotic Process Automation (RPA), Artificial Intelligence (AI), consultancy and clinical research.

MLCSU are also delivering the Green Plan analysis of over 250 NHS organisations.

## Key benefits of the CSU service

- Over 160 highly competent subject matter experts with a deep understanding of the digital challenges faced by the NHS.
- Experience supporting ICBs to develop their digital strategies.
- Advanced business case development expertise, resulting in successful bids for ICBs.
- At the forefront of automation and chatbot technology in healthcare. Our specialist teams have deployed chatbots to help successfully manage trust waiting lists, saving valuable resources. In 2022/23, across four trusts, over 55,000 patients were contacted and waiting lists reduced by 10%.
- MLCSU are commissioned by NHSE to develop a referral Hub to provide a single point of access to manage patient referrals to the NHS Digital Weight Management Programme. As of March 2023, over 220,000 referrals have been processed.
- MLCSU's Digital Innovation Unit is supporting the delivery of an ICS's ambition to be recognised as a centre of excellence for innovations in rural healthcare by creating a digital innovation hub.
- MLCSU's managed service for remote monitoring - early statistics demonstrate a significant reduction in clinical hours spent, length of stay and the number of A&E / paediatric assessment unit visits. In 2022/23 the innovation had supported 246 patients, with 14 virtual beds and 158 additional inpatient bed-day capacity created.





# Digital: Transformation and Programme Management

For further information please contact:  
Stephen McMullin, Head of Digital Transformation  
[stephennewton@nhs.net](mailto:stephennewton@nhs.net)

## Research and innovation

MLCSU's Digital Innovation Unit's focus has been to identify digital and technological solutions that could add value to health and care services through bespoke solutions and strategic innovations that can drive service improvement, efficiencies and improved patient care at ICS level.



## Testimonials, recognition and awards

"Lancashire and South Cumbria ICB has been working with MLCSU and its partner Digital Space to implement the Automated Patient Validation technology. The programme has been a great success thus far, with over 11% of patients contacted indicating that they wish to be removed from our trust waiting lists, and that it is safe and appropriate to do so."

*Dr Wendy Craig, University Hospitals of Morecambe Bay NHS Foundation Trust*

**Shortlisted to the 2022 Nursing Times Awards for MLCSU's contribution to the Dudley Group Foundation Trust paediatric virtual ward.**

**HSJ Partnership Awards nominee 2023 for Automated Waiting List Validation work with Lancashire & South Cumbria ICS.**



# Emergency Preparedness, Resilience & Response (EPRR) and Business Continuity

For further information please contact:  
Andy Collins, Resilience and Estates Lead  
[andy.collins1@nhs.net](mailto:andy.collins1@nhs.net)

## Service summary

This service delivers leading business continuity methodology to ensure MLCSU's partners have effective, coordinated structures in place to plan, prepare and rehearse tactical and operational response arrangements.

The Business Continuity team support partners by establishing their most critical recovery needs. Disruptions can come in many guises, such as floods, power outages or worse, but the expectation is to be prepared and continue, when working remotely or within an office environment.

The Business Continuity team provides a tailored service to enable partners to respond to any situation, effectively, safely, and efficiently. And thus, providing assurance to patients and board members, that it is prepared.

Our service works with clients to produce policies, assess how resilient these policies are and provide a gap analysis so each organisation can become more resilient, year on year.

## Key benefits of the CSU service

- The COVID-19 pandemic demonstrated the importance of planning and preparing for disruption and the necessity to ensure you have the level of maturity in your organisation, to prepare for those times.
- At scale delivery enables partners to benefit from a broad range of experience and specialist skills from our team within an efficient cost envelope compared with establishing a local team.
- The MLCSU team provide innovative solutions at the forefront of establishing quicker, innovative, and real-time business continuity assessments.
- MLCSU's service can support organisations to plan for a range of new business continuity challenges posed through remote working.
- Access to our Primary Care business continuity assessment tool.



# Emergency Preparedness, Resilience & Response (EPRR) and Business Continuity

For further information please contact:  
Andy Collins, Resilience and Estates Lead  
[andy.collins1@nhs.net](mailto:andy.collins1@nhs.net)

## Research and innovation

The service has developed specialist remote working business continuity knowledge, including MLCSU's cyber security expertise, to support our partners in the move to longer-term remote working options.

MLCSU's service have developed the Primary Care Assurance Framework for PCNs. This allows a PCN to self-assess their effectiveness in health and safety and business continuity through a scoring mechanism to demonstrate the level of maturity of that practice, or the PCN as a whole. It's a reasonably priced system that demonstrates and provides good practice, allowing the users mature.



## Testimonials, recognition and awards

MLCSU have developed the Primary Care Assurance Framework for PCNs. It's a cost-effective system that has been piloted across one of our footprints and received praise for its output.



# Equality, Inclusion and Human Rights

**For further information please contact:**

Tim Waldron, Head of Service

[equality.inclusion@nhs.net](mailto:equality.inclusion@nhs.net)

## Service summary

The Equality, Diversity and Inclusion (EDI) service guides and supports ICSs to meet their Equality, Diversity, Inclusion and Human Rights duties and requirements. The legal duties we support include: The Equality Act 2010; The Human Rights Act 1998; The Health and Social Care Act 2012; The Social Value Act 2012; The Modern Slavery Act 2015.

Through our engagement activities, we give local communities the opportunity to feedback on project planning and service delivery.

The team is a preferred provider for NHSE and the delivery partner for EDI services to many ICS regions with strong links nationally, regionally and locally.

Senior leadership and oversight delivered by the Head of Service provides legal guidance, strategic direction, support on complex issues and ensures service delivery planning and day to day management of the service.

Our EDI service continues to be market leaders and innovators providing the core EDI service to the NHSE COVID-19 Vaccination Programme and other regional and national programmes.

## Key benefits of the CSU service

- As EDI specialists, the team have a proven track record of developing national, regional and local policy and turning theory, policy and strategy into practice.
- Bespoke reporting to support partners to meet their duties in relation to EDI legislation.
- Specialist training offers, such as 'unconscious bias'.
- Experts in sourcing current community and health inequality data and turning it into useable intelligence.
- Customers benefit from a named EDI Business Partner and access to a wide pool of 15 EDI experts that offer a broad range of skills, knowledge, expertise, specialisms, and resource.
- Flexibility, adaptability and added value of a larger team ensuring continuity during times of absence and the ability to meet peaks and troughs in demand.
- Our U-Assure online Equality, Health Inequality Impact and Risk Assessment toolkit is nationally recognised.
- Outsourced model provides an additional layer of independent scrutiny and challenge.



# Equality, Inclusion and Human Rights

For further information please contact:

Tim Waldron, Head of Service

[equality.inclusion@nhs.net](mailto:equality.inclusion@nhs.net)

## Research and innovation

We have undertaken a major geographic and demographic profiling exercise in order to provide usable intelligence to support newly formed ICSs understand local health inequalities.

U-Assure is our online Equality, Health Inequality, Impact and Risk Assessment (EHIRA) platform, it provides the ICB with the means to collect and demonstrate across the whole organisation how it is meeting its legal duties and has the potential to scale up to the entire ICS region.

MLCSU's EDI team have been part of NHSE's Equality Delivery System pilot.



## Testimonials, recognition and awards

"The expertise and knowledge which the team consistently share can range from undertaking board level development sessions to working with individual team members to ensure that they continue to adhere to best practice."

*Karen Tordoff, Head of Service Redesign, West Lancashire CCG*

Expert support from MLCSU's Staffordshire Equality, Inclusion and Human Rights lead assisted the Staffordshire and Stoke on Trent ICB to be the first ICB in the country to be awarded the **RACE Equality Code Quality Mark** in June 2023.





# Health Economics Unit

**For further information please contact:**

Tim Shaw, Deputy Head of Strategy

[tim.shaw@nhs.net](mailto:tim.shaw@nhs.net)

## Service summary

MLCSU's health economics service helps partners generate evidence for the adoption of innovations and supports system leaders and budget holders in allocating resources most effectively.

The team works with partners to learn more about how effective and efficient healthcare services are, identifying areas for potential improvement to patient care.

Services include:

- evaluating the effectiveness of interventions
- comparing the health benefits and costs of the options 'on the table'
- matching capacity to demand
- understanding the local population and the opportunities to improve health and wellbeing (PHM)
- a range of advanced techniques and technologies to underpin our work, ensuring quality and ongoing improvement.

## Key benefits of the CSU service

The team enable system leaders and decision-makers to make evidence based decisions by:

- defining the scope of a problem and establishing the best ways to answer it
- building evidence, using our advanced economic and analytical techniques, to understand the possible solutions
- producing high-quality, actionable outputs to identify and implement successful change
- building capacity for longer-term improvement across systems by delivering training and consultancy.

Our passionate team has significant breadth of experience, with the skills needed to develop models and evaluations, to generate evidence from integrated, real-world datasets to inform complex health decisions, and to create positive change across health systems.

The Health Economics Unit's team of experts enable health systems and industry leaders to make the best decisions, designing the highest quality, most efficient and innovative services, ultimately improving the health of communities.



# Health Economics Unit

For further information please contact:

Tim Shaw, Deputy Head of Strategy

[tim.shaw@nhs.net](mailto:tim.shaw@nhs.net)

## Research and innovation

The team of experts has collectively had over 70 journal publications during their career.

The Smarter Spending in Population Health (SSPH) programme supports ICSs in finding the most impactful areas to focus resources and make those changes happen. Our Health Economics Unit are analysing COPD data from the largest surveys of its kind and a full report will be published in Spring 2023.



## Testimonials, recognition and awards

“HEU have helped us further strengthen our focus on improving the detection of cancers early in the Midlands. They have provided specialist expertise and insight to bring data together and present it meaningfully for our clinicians and partners”.

*Nighat Hussein, NHS England and Improvement*

“This analysis of the relationship between length of stay and readmissions is just one example of how their work has helped us shape the future of hospital modelling and investment.”

*Janos Suto, Director of Analytics, New Hospital Programme, Department of Health*



# Health, Safety, Fire and Security

**For further information please contact:**  
Andy Collins – Resilience and Estates Lead  
[andy.collins1@nhs.net](mailto:andy.collins1@nhs.net)

## Service summary

MLCSU's Health, Safety, Fire and Security Service enables customers to be compliant with the Health and Safety at Work Act and associated legislation. Working with customers, we enable a robust health and safety management system allowing a strategic, and hands on approach to all health and safety matters.

The team employs subject matter experts, providing the role of 'competent person', to meet the requirement under the Management of Health and Safety at Work Regulations.

We employ trained NHS Security Management Specialists, who provide expert advice and guidance on matter such as theft, abuse, and threats of violence toward NHS staff, by providing policy, and risk assessment support so that customers can better protect their staff.

The team are fully trained in investigating accidents and incidents, seeking solutions, and mitigation when incidents occur.

## Key benefits of the CSU service

- There is always someone available from our at scale team to provide our partners with advice, guidance, and support. So, when you need us most, we are here to help.
- Our partners benefit from a range of policies, risk assessments, auditing, fire risk assessments and supporting staff working from home with specialist advice.
- Compiling all reporting requirements under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).
- The Health and Safety team will provide customers with an annual report to the governing body, designed to show the level of maturity an organisation has in managing the health, safety and security of its employees, and those it may affect by its undertaking.
- Quarterly written audit reports produced for Health, Safety, Fire and Security inspections of customer building with action plan. The reports allow the customer to monitor the effectiveness of their health and safety and monitor the effectiveness of policy and procedures.
- Supporting customers rolling out NHS England's 'Violence, Prevention and Reduction Standards'.



# Health, Safety, Fire and Security

**For further information please contact:**  
Andy Collins – Resilience and Estates Lead  
[andy.collins1@nhs.net](mailto:andy.collins1@nhs.net)

## Research and innovation

Supporting customers during the COVID-19 pandemic proved a busy time for the health and safety team. We delivered support to Cheshire CCG to enable staff to return to the office safely. Fire training was provided over Microsoft Teams, enabling staff to return safely.



## Testimonials, recognition and awards

“The organisation would have been unable to re-open and operate the bases should the support from the CSU not taken place and it has resulted in a robust health and safety offer for all staff.”

*Lucy Andrews, Assistant Estates and Capital Analyst*



# The Improvement Unit

For further information please contact:

Alison Davies, Head of Service

[alison.davies10@nhs.net](mailto:alison.davies10@nhs.net)

## Service summary

Our Improvement Unit helps wider health and care organisations including NHS trusts, independent providers, Integrated Care Boards, Integrated Care Systems, GP practices and PCNs with a range of programme management and change expertise.

Strategic service transformation, process and performance improvement, workforce development, lean working and crisis response operations are just some solutions we can provide.

The team have an established track record of achieving excellent outcomes for our clients. We support effective cross-organisational and cross-sector collaboration by working with clients to fully understand their needs and developing tailored solutions to improve patient care and experience, while driving down costs.

## Key benefits of the CSU service

- Support programmes of varying sizes, ranging from management of small, bespoke interventions to major change and improvement strategies or nationwide initiatives that involve many stakeholders.
- Industry-leading expertise including: 'lean' service redesign, 'plan, do, study, act' continuous improvement, stakeholder management, agile and Prince2 project management, and process re-engineering.
- During 2022/23 the Improvement Unit worked across 44 Project and Programmes, delivering services to 23 different local, regional or national clients.
- Recent projects and programmes have covered a broad spectrum of specialties including Mental Health, Learning Disabilities and Autism, Health Inequalities, Maternity, System Development (ICB), National NHSE Programmes and Delegated Functions, Prevention, and more, developing a strong knowledge base and expertise in these areas.
- Being of the NHS, for the NHS, there are inherent benefits in using us: our focus is on creating value – not profits – and delivering competitively priced, effective support at scale.
- Our NHS experience and health system relationships are unparalleled.





# The Improvement Unit

For further information please contact:

Alison Davies, Head of Service

[alison.davies10@nhs.net](mailto:alison.davies10@nhs.net)

## Recognition and awards

The Improvement Unit supported the UK-wide COVID-19 Oxygen, Ventilation, Medical Devices and Clinical Consumables Programme during the Coronavirus pandemic. The programme won the '**One Civil Service**' award at the Civil Service Awards for 'excellent collaboration that spans the boundaries between administrations, government departments, agencies and bodies'.



## Testimonials, recognition and awards

"Thankful to the team for their professionalism, responses to questions and for the creation of the slides and EASY Read materials for the Learning Disability Health and Wellbeing conference."

*Helen Dickenson, Lead for the NW LDA Screening Programme*

"The team are providing excellent support to the national Ockenden programme, going above and beyond expectations and being key to managing and navigating sensitivities in this area and ensuring the programme stays on track."

*Sascha Wells-Munro, Deputy Chief Midwife leading the Ockenden Programme*

"Professionalism and helpfulness, giving confidence in the project management support provided, emphasising the effective teamwork."

*Taryn Harding, Lead for the NHSE Delegated Commissioning Programme*



# Individual Funding Requests and Clinical Commissioning Policy

For further information please contact:  
Debbie Lowe, Head of Service IFR and Clinical Policy  
[debbielowe@nhs.net](mailto:debbielowe@nhs.net)

## Service summary

The **Individual Funding Request** (IFR) service supports partners to meet their legal duties set out in the NHS Constitution, designed to address the differing needs of individual patients outside of the decisions and priorities set, to meet the needs of the majority of patients.

MLCSU employ an expert IFR team who scrutinise and consider evidence received from treating clinicians, along with public health research, to consider whether a patient should be funded for treatment as an exception to local commissioning arrangements. The team support these difficult funding decisions, present research evidence to assess the exceptionality of a patient and highlight gaps in commissioning arrangements.

MLCSU's **Policy Implementation Service** is designed to ensure clinical policy adherence, managing the Prior Approval Scheme on behalf of our clients. The aim of the scheme is to manage demand for healthcare, enable the tracking of high-cost treatments during the financial year, ensure compliance with policy and promote safe and effective treatments.

Our **Clinical Commissioning Policy** service provides a planned approach to the development, review and harmonisation of clinical commissioning policies. The service aims to reduce differences in health care provision between geographical areas, often referred to as 'healthcare post-code lottery'. The team also link with key stakeholders and clinical networks to support the production process.

## Key benefits of the CSU service

- The IFR team consists of experienced and expert administrators, healthcare registered public health consultants, GPs, Nurse advisers and Medicines Management
- Our 'at-scale' service provides a resilient operational model that can flex to demand and capacity to ensure fast, efficient and robust decision making is maintained across the client footprint
- Systems and processes are able to stand up to legal challenge that aim to ensure a positive patient journey based on fair and ethical decision making, equity, clinical effectiveness, cost effectiveness and affordability
- Moving to an 'at-scale' model for IFR Panels, we replaced multiple resource intensive place-based panels with one ICB Panel, releasing valuable clinical, commissioner and administrative resources.

### During 2022/23, the teams have managed:

- 1,500 IFR applications
- 5,000 Prior Approval decisions
- £3.5m associated cost deflection (applications declined)
- 630 responses to information requests and process challenges
- 37 Freedom of Information or Subject Access Requests
- 517 funding and pathway enquiries resolved
- 220 activity and performance reports produced
- 1340 clinical commissioning policy positions mapped across 9 places, to understand variation and harmonisation
- Over 160 evidence reviews completed to support clinical policy harmonisation and IFR decision making.



# Individual Funding Requests and Clinical Commissioning Policy

For further information please contact:  
Debbie Lowe, Head of Service IFR and Clinical Policy  
[debbielowe@nhs.net](mailto:debbielowe@nhs.net)

## Research and innovation

Our public health consultants have undertaken policy reviews in collaboration with clinical specialists, including:

- a review of pinnaplasty procedures in conjunction with a surgeon from Alder Hey;
- several policies on pain management, for example, ganglion impar, written in conjunction with a pain consultant;
- developing the policy for cataracts with significant input from several ophthalmologists throughout the region; and
- reviewing a policy for abdominoplasty which received significant scrutiny from a bariatric surgeon and plastic surgeon.



## Testimonials, recognition and awards

"It's a pleasure to work with the IFR Team and I have valued all the work that has been done."

*Hilary Fordham, Chief Operating Officer, Morecambe Bay CCG*

"...an outstanding piece of work... ."

*Natalia Armes, SRO for the Clinical Commissioning Policies Harmonisation work for Cheshire and Merseyside*



# Information Governance and FOI/SAR

For further information please contact:

Charlotte Mountford, IG Lead  
[charlotte.mountford@nhs.net](mailto:charlotte.mountford@nhs.net)

## Service summary

The Information Governance (IG) service enables and ensures our partners meet their legal requirements in relation to the Data Protection Act 2018 by delivering the following:

- completion of annual Data Security and Protection Toolkit (DSPT) assessment
- ensure policies and procedures remain relevant and up to date
- development and delivery of general IG and specialist training
- Information Risk Work Program: Support delivery of Information Asset Registers, Data Flow Mapping, Business Continuity, Systems and Software Assessments, Data Protection Impact Assessments
- management of Data Protection breaches
- general advice and guidance in respect of Information Governance
- Data Protection Officer (DPO) service
- IG Strategy development
- Freedom of Information and Subject Access Requests.

The support provided by the IG team has ensured organisations are confident they are meeting their data controller responsibilities, as required by Data Protection Law, the National Data Guardian and the Caldicott Principles.

The team ensure all data is processed in accordance with citizens' rights which influences the general public's confidence in these projects.

## Key benefits of the CSU service

During 2022/23, MLCSU's IG team have undertaken 8,500 new pieces of work, provided IG input to 800 projects, supported over 350 data breaches, handled over 1,450 Freedom of Information Requests, helped 1,000 organisations complete their mandated DSPT and published over 30 specialist IG newsletters and customer briefings.

MLCSU's primary care Primary Point portal provides approved users with a 'one stop shop' to share best practice, exemplar materials and guidance at a time and place that is convenient for them. The portal includes:

- A suite of IG policies and standard operating procedures
- Template documents including data protection agreements and privacy notices
- Guidance Area in relation to the latest legislative changes
- Evidence available to download from the portal to support practices with their DSPT Compliance
- Standardisation of Freedom of Information (FOI) responses across regional areas.

During 2022/23, MLCSU supported all our ICB partners in the successful closedown of the CCGs by developing Information Risk Work Programmes, migrations to N365 Tenants, submitting DSPTs and supporting on ICS Digital and Data Strategy development.



# Information Governance and FOI/SAR

For further information please contact:

Charlotte Mountford, IG Lead  
[charlotte.mountford@nhs.net](mailto:charlotte.mountford@nhs.net)

## Research and innovation

MLCSU's IG team attend Regional SIGN groups on behalf of their ICB and GP customers, as well as National ICB/ICS networking groups. They also actively participate in NHSE forms relating to ICB/ICS IG data, DPO webinars and feedback national guidance back to customers.



## Testimonials, recognition and awards

"Thank you for all your work over the past few weeks supporting the Cloud Team with the ECNT DPIA and DPA. ECNT are also very appreciative of the work you've done to deliver the documentation within a short timescale."

*Neil Sansom Cloud Implementation Manager*



# Medicines Management and Optimisation

**For further information please contact:**  
Paula Wilson, Associate Director of Pharmacy  
[paula.wilson9@nhs.net](mailto:paula.wilson9@nhs.net)

## Service summary

The Medicines, Management and Optimisation (MMO) team employs pharmacists, pharmacy technicians, medicine coordinators, administrators, and project managers. The team work closely with a range of other CSU departments to bring the right solutions and skills for our clients and partners.

M LCSU's MMO services have been developed over 10 years to provide a wide range of outputs for the NHS, local authorities and non-NHS organisations. The team works collaboratively with our three partner CSUs to bring seamless and innovative national at-scale solutions.

Our services include:

- Clinical support for optimising the use of medicines within GP practices, PCNs and Quality, Innovation, Productivity and Prevention (QIPP) delivery
- At-scale support for ICSs including establishing and managing Integrated Medicines Optimisation Groups
- Prescribing data analytics and formulary
- Bespoke projects including service evaluation, implementation, and consultancy
- MLCSU provide clinical patient-facing services, working in GP practices and care homes, to optimise patient safety, improve patient medicines care and save GP time.

## Key benefits of the CSU service

Our experience delivering whole system reviews, spanning across ICSs, GP practices, NHSE and local authorities, enables us to operate strategically, by identifying solutions and sharing best practice.

The team appoint key account leads to ensure our products and services produce the best possible outcomes. We recently supported one of our ICB partners to harmonise a suite of over 100 policies.

Through at-scale delivery, our services release capacity within the ICS place-based teams. Services such as rebates, Non-Medical Prescribers monitoring, high-cost drug analysis and safety tool kit are supported by a 'do-once' approach and minimise the need for place-based teams to manage these processes individually.

Working with our clients, we have supported Area Prescribing Committees and developed specialist clinical polypharmacy review services, frailty medication reviews, integrated multi-disciplinary teams and assess the potential impact of new medicines on the healthcare system.





# Medicines Management and Optimisation

**For further information please contact:**  
Paula Wilson, Associate Director of Pharmacy  
[paula.wilson9@nhs.net](mailto:paula.wilson9@nhs.net)

## Research and innovation

Being the lead partner for NHSE Pharmacy Integration Fund, the MLCSU team leads on the evaluation and implementation of pilot projects for new pharmacy services nationally.

We have supported the delivery of the NHS Community Pharmacy Contraception Service Pilot since 2021 and the NHS Community Pharmacy Smoking Cessation Service (SCS) from its pilot stage to its national roll-out.

MLCSU work with partners, such as AHSNs, to deliver projects testing novel approaches within the medicines arena, an example includes our lipid medication review service.

MLCSU's team used a personalised approach to undertake over 1,300 reviews in patients at high risk of cardio-vascular disease. Patients have experienced improvement in their access to primary care services and treatment of patients with raised lipid levels has been optimised where appropriate, leading to improved outcomes and a reduction in avoidable hospital admissions associated with cardiovascular disease.

MLCSU has been commissioned by the Black Country ICB to increase referrals to the National Diabetes Prevention Programme. MLCSU provided a clinical system search for practices to identify eligible patients. MLCSU then contacted patients to provide a motivational discussion to encourage referral. Over the last three years, 3,369 patients have been contacted with 1,953 agreeing to referral.



## Testimonials, recognition and awards

"The development of an IMOC is unprecedented territory, and with the support of the CSU, the complex challenges were proactively targeted. Successful focus, task and finish groups set up by the CSU managed multiple stakeholder relations and communications to support the progress of the IMOC formation".

*Hemant Patel, Black Country ICB*

"The MLCSU team have supported the Pan Mersey APC from its inception... They bring an attention to detail that is necessary to make sure that decisions are robust, and outputs like summaries and guidance meet the needs of clinicians across the Pan Mersey footprint".

*Peter Johnstone, Liverpool Place Medicines Lead*

**HSJ awards finalist: Smoking Cessation Pilot Greater Manchester Collaboration**



# Patient Experience Team

## *Complaints, PALS and MP Correspondence*

For further information please contact:

Michelle Kiernan

[Michelle.kiernan@nhs.net](mailto:Michelle.kiernan@nhs.net)

### Service summary

The Patient Experience team is responsible for managing and responding to all complaints received, including correspondence from Members of Parliament (MPs), and provides a Patient Advice and Liaison (PALS) service.

The PALS service offers support and advice to members of the public, professionals, carers and care homes, aiming to resolve informal concerns quickly without the requirement of a full investigation and written response.

Where MLCSU is commissioned to provide the full end-to-end complaints process on behalf of the responsible organisation, MLCSU in line with the Complaints Regulations, will review the complaint received, identify the organisations involved in the complaint and manage the complaint with each of the organisations involved, following receipt of the necessary consent from the complainant.

MLCSU collates each response, ensuring one cohesive response is compiled for the complainant, that it is authorised by the relevant ICB and that it is sent out in their name.

The team also collects and responds to all the feedback received from the Primary Health Care (PHC) patient experience surveys.

### Key benefits of the CSU service

Quarterly reports are submitted to the PHC Performance and Quality Assurance Audit Group that detail:

- the number of complaints, MP enquiries, and PALS enquiries
- the number of pieces of feedback closed, the average handling time and the outcomes
- compliments
- feedback received from the PHC surveys by geographical areas
- identified learning from feedback received
- any exceptions, escalations and delays, including Parliamentary and Health Service Ombudsman contact.



# Patient Experience Team

## *Complaints, PALS and MP Correspondence*

For further information please contact:

Michelle Kiernan

[Michelle.kiernan@nhs.net](mailto:Michelle.kiernan@nhs.net)

### Research and innovation

Launch of electronic PHC feedback surveys to collate service user feedback. The results are used to inform, develop and shape PHC services.



### Testimonials, recognition and awards

“Thank you for everything I really appreciate your time and you being so kind to me.”

*Cheshire and Mersey Service User*

“I thank you once again for all your help, it's been a lifeline knowing someone is willing to listen and help.”

*Cheshire and Mersey Service User*

“Many thanks for what I consider has been a thorough investigation into the issues I raised. I am very satisfied that everything possible has been done to improve things and I thank you for your quick responses and for taking the matter seriously.”

*Lancashire and South Cumbria Service User*



# People Services (HR and Organisational Development)

**For further information please contact:**  
Cath Owen, Head of People Services (Client Delivery)  
[Cath.owen@nhs.net](mailto:Cath.owen@nhs.net)

## Service summary

We deliver services through a range of qualified, experienced HR and Organisational Development (OD) Business Partners, at-scale transactional services and expert associates. We offer an integrated strategic people management service that delivers tailored solutions.

Our flexible staffing service, TalentOne, enables us to support our partners and the wider NHS landscape with their short-term resourcing needs.

We can shape, develop and deliver bespoke high quality services to enable you to:

- develop as a high-performing, values-based organisation that can adapt flexibly within the context in which you work
- develop and grow the skills and people you need – now and in the future
- become an employer of choice where the development and wellbeing of staff is a key focus and contributor to bottom line performance
- manage end-to-end recruitment, including third party providers, such as Occupational Health and Disclosure and Barring Services
- resolve conflict through accredited mediation and conciliation services
- mobilise high-quality, expertly skilled resource quickly and efficiently
- access to specialist advice and support on an ad hoc basis to manage any changes to the workforce (including transition to/from other organisations and appropriate application of TUPE).

## Key benefits of the CSU service

Through a blended HR business partner and at-scale model, we are able to provide tailored support to deliver the objectives and direction of clients in respect of their workforce strategy, whilst ensuring that transactional activity is provided in a straightforward and cost-effective way that doesn't detract from key workforce plans and strategies.

The team is able to provide additional resource where needed from our programmes and consultancy unit which provides flexible resource to meet either specific additional ad hoc requests or to manage increased activity volumes as part of normal business.

During 2022/23, the team supported the transfer of over 3,000 staff across five systems in the transition from CCGs to ICB organisations.

The team provides regular key metrics demonstrating the quality of provision delivered, including Workforce Information Reports and dashboards.

MLCSU employs a range of HR specialists across the organisation to ensure we have appropriate skills to meet the diverse needs of our partner organisations and to help partners leverage maximum efficiencies and benefits from ICS HR systems to support streamlining and enhancing people processes.

The team can act as 'Independent Brokers', providing additional objectivity.



# People Services (HR and Organisational Development)

**For further information please contact:**  
Cath Owen, Head of People Services (Client Delivery)  
[Cath.owen@nhs.net](mailto:Cath.owen@nhs.net)

## Research and innovation

The service regularly horizon scans for best practice and comparative practice across different organisations, as well as anticipating legislative changes and learning from other geographies.

The team is undertaking a review of Senior Remuneration with an ICB annual benchmarking report in development for the ICBs we support.

The People Services team have recently launched a consultancy arm to enable swift and tailored support.



## Testimonials, recognition and awards

MLCSU's internal strategy for Health and Wellbeing Strategy has been positively recognised, which strengthens our position in providing these types of services to our partners.



# Personalised Healthcare Commissioning

**For further information please contact:**

Dr. Sam Gower, Clinical Director for Personalised Healthcare Commissioning  
[sam.gower@nhs.net](mailto:sam.gower@nhs.net)

## Service summary

Our team aims to deliver the best possible experience of assessment, review and care planning for people with continuing and complex healthcare needs, in a way that ensures commissioners are compliant, assured and offer value for money. Our service is led by expert clinical and commissioning staff who are experienced in delivering to the national frameworks and supporting patients and their families.

The teams work closely with healthcare providers, local authorities and other partners to ensure patient safety and experience is at the heart of the process. Our partnerships with legal advisors can provide easy access to support if this is required.

Services MLCSU offers include:

- mental health treatment or placements
- complex healthcare for children
- packages of care, jointly funded with the local authority, for adults and children
- assessment and reviews for funding NHS continuing healthcare or NHS-funded nursing care
- retrospective reviews and appeals of NHS continuing healthcare eligibility decisions
- individual funding requests
- complaints and Patient Advice and Liaison Service (PALS)
- Market management and care sector market stimulation.

## Key benefits of the CSU service

- Services focus on the personalisation of care, giving patients choice and control over their mental and physical health.
- Ensures a robust governance framework is in place to guarantee compliance with statutory requirements and reduce the risk of poor decision-making and appeals.
- Improves patient satisfaction by establishing mechanisms that ensure effective communication with patients and their families, and enable you to make funding decisions quickly.
- Rigorously monitors and assures service delivery and provides regular, accurate reports to identify any issues, allowing for better financial forecasting and budget control.
- Trains ICB staff on how to complete continuing healthcare checklists and the screening process.
- MLCSU's expertise in health and social care integration enables partners to benefit from collaborative working across their local area to achieve consistency and economies of scale.
- We can help develop joint protocols, for example in relation to safeguarding and dispute resolution.





# Personalised Healthcare Commissioning

**For further information please contact:**

Dr. Sam Gower, Clinical Director for Personalised Healthcare Commissioning  
[sam.gower@nhs.net](mailto:sam.gower@nhs.net)

## Research and innovation

Dynamic purchasing system - secures the best quality nursing home placements at the best price. Pre-approved care homes, within the area required by the patient, are invited to tender based on specific care requirements.

Experience has shown that commissioners are better aware of market capacity, are able to place people at a faster rate and are paying less than previously to do so.



## Testimonials, recognition and awards

Our participation in local, regional and national continuing healthcare networks also enables us to share our knowledge of system engagement and best practice.



# Procurement

**For further information please contact:**

Bev Thomas, Head of Procurement and Corporate Services

[beverley.thomas7@nhs.net](mailto:beverley.thomas7@nhs.net)

## Service summary

The Procurement service provides a professional support that enables ICBs to commission services according to current legislation. The service is delivered by an experienced, qualified, and award-winning team which has established, and externally evaluated, processes in place for a wide range of procurement activities.

MLCSU's procurement service is integrated with our other services to support the overall objectives of the ICBs and has a high success rate in delivering positive outcomes.

The team works in partnership with ICBs, supporting organisational compliance and ensuring they remain within their Standing Financial Instructions.

Staff are trained in ethical sourcing and supplier management, and have adopted ethical values in how we source and manage suppliers.

MLCSU's procurement service delivers healthcare procurement projects, transactional procurement and the procurement of IT equipment.

Our approach enables us to take wider learning from other areas / legal teams and translate them into innovation models of service delivery.

## Key benefits of the CSU service

Key achievements during 2022/23 include:

- delivery of system-wide procurements, for example, Bariatric Service for Lancashire and South Cumbria (LSC) and Cheshire and Merseyside (C&M) ICSs and Occupational Health service for Staffordshire and Stoke-on-Trent (SSOT) ICS
- 62 Healthcare projects, all delivered (or being delivered) remotely using our best in class eEvaluation software (AWARD)
- purchased a significant amount of IT equipment despite international supply chain shortages
- 4,175 purchase orders raised (Jan to end Nov) for our partners
- 1,411 supplier set ups processed (Jan to end Nov) for our partners
- supporting organisations to transition safely from CCGs to ICBs with their commissioning decisions and assisting them to secure post COVID-19 and elective recovery services.

Team members routinely discuss any lessons learnt and are able to transfer this into good practice when working on other projects.

The way in which the team is structured enables it to flex and meet our customers varying levels of demand across the year.

The team have extensive experience working collaboratively across organisations and geographies on large scale projects.



# Procurement

## Research and innovation

The Procurement team are working with other CSUs to research procurement processes that will allow the team to innovate and develop best practice.

The team is an active collaborative member of the North Midlands and Black Country Procurement Group.

**For further information please contact:**  
Bev Thomas, Head of Procurement and Corporate Services  
[beverley.thomas7@nhs.net](mailto:beverley.thomas7@nhs.net)



## Testimonials, recognition and awards

**Awarded CIPS Procurement Excellence** which is an award given to businesses that have implemented comprehensive procurement policies and processes that meet international standards and best practice.

**Secured CIPS Corporate Ethics award** which demonstrates our commitment to ethical sourcing and supplier management and have taken proactive steps to safeguard against unethical conduct.



# Quality and Performance Assurance

For further information please contact:

Andrew Regan, Clinical Lead

[andrew.regan@nhs.net](mailto:andrew.regan@nhs.net)

## Service summary

MLCSU's clinical quality and performance team provides bespoke, proactive quality and safety monitoring to improve patient care. The team has years of clinical experience and expertise to deliver the support needed, driving continuous improvement in healthcare providers in response to the Francis Inquiry.

Whilst the team looks to maximise the benefits of system working, we never lose sight of the importance of local delivery and provide visible clinical and professional staff, proven methods and the ability to respond quickly and efficiently to deliver excellent service.

The Quality Team works in a matrix style with ICB partners in order to provide at-scale quality and performance assurance for multiple providers of varying size and scale, for both the NHS and independent sector.

Delivering in this style across the ICB allows cross geographical working and sharing of expertise and best practice.

## Key benefits of the CSU service

- The Quality Team has positive impact through providing quality assurance data, analysis and providing recommendations and outcomes.
- Improvements in patient safety through serious incident and harm reviews.
- Gaining assurance to providers and boards through high level reporting and analysis of quality KPIs.
- Provision of soft intelligence, follow up and escalation.
- Deliver consistent, high quality clinical accuracy to exceed service standards.
- Supply objective clinical scrutiny and challenges for providers and the wider system.
- Support policy development and provide expert advice in response to new guidance and regulations.
- Ensure commissioned care is effective, high quality and provides value.
- Develop detailed informative reports, across all aspects of quality, safety and patient experience.
- Create systems based on best clinical evidence.



# Quality and Performance Assurance

## Research and innovation

Support to System Oversight Framework (SOF) 3 and 4 organisations, ensuring progress against exit criteria has robust governance and monitoring arrangements in place. Supportive work has provided the ICB and NHSE assurance to support the move from SOF4 to SOF3.

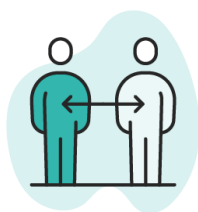


## Testimonials, recognition and awards

“Thank you to each and every one of you for all the work you have done and continue to do to keep our populations safe.

I really appreciate you keeping the wheels turning and I know at times it will have felt frustrating. It is noticed and I am truly grateful.”

*K . Lord LSC ICB Director Quality and Safety*



# Referral Management

**For further information please contact:**  
Gemma Cowley, Head of Referral Management  
[gemma.cowley7@nhs.net](mailto:gemma.cowley7@nhs.net)

## Service summary

MLCSU's Referral Management Centre offers patients independent choice and booking of GP. The team has expertise in navigating patients through their care pathway, ensuring they are booked into the right place first time-

The CSU delivers this service at-scale and has dedicated trainers and GP Practice support staff to enable the smooth running of the service.

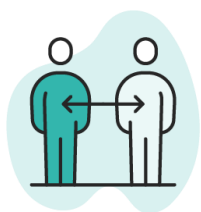
Our service offer includes completing Waiting List Validations and working with our Digital Innovation Unit to roll out innovative technology, such as Chat Bots. This, alongside our expert call handlers, take patients through a series of questions to understand their current health status and whether appointments are still required from the Trust.

MLCSU's Referral Management Centre leads on the National Digital Weight Management Programme on behalf of NHSE/I. We provide support and guidance to GP practices around the referral process, deal with queries and exceptions, as well as driving innovative technological advances in the programme to broaden the service to include self referrals and elective care.

## Key benefits of the CSU service

- Patients are offered a fair choice of provider for their care needs meeting the NHSE/I Choice Mandate. Patients are able to select a convenient place and time for their secondary care appointments, reducing the volume of did not attend (DNA) appointments and maximising NHS resources.
- The Waiting List Validation work has seen the service contact over 65,000 patients since we started in 2021, with Lancashire and South Cumbria ICS expecting to put a further 144,000 patients through our chatbot/RMC function in 2023/24.
- Average of 10% removal rate following waiting list validation, enabling the Trusts to focus on patients still requiring appointments and highlight patients requiring additional clinical validation due to their condition changing whilst waiting for their appointment.
- Operating at-scale results in an efficient service with expertise spanning different geographies and understanding systems, patient pathways and engagement with stakeholders across each place. One of our partners is transferring their Single Point of Access team to the CSU which will save the ICS over £250,000 in 2023/24.
- The Referral Management Centre is often the first point of contact for our ICS Place colleagues who require an understanding and navigation of clinics and set up in both the E-Referral and Gateway systems.
- Our calls are monitored for training, quality and improvement purposes using innovative call handling technology.





# Referral Management

**For further information please contact:**  
Gemma Cowley, Head of Referral Management  
[gemma.cowley7@nhs.net](mailto:gemma.cowley7@nhs.net)

## Research and innovation

During 2022/23, the Referral Management Centre has implemented Chatbot functionality for both waiting list validations and Digital Weight Management Programme, allowing patients to be taken through a series of questions without intervention from a human operator, unless required.

- Over 80% of those with validated numbers have been successfully contacted.
- 10% of patients indicated that they wished to come off the waiting list.
- Of those wanting to come off the waiting list, almost 60% have indicated that they have received treatment elsewhere.



## Testimonials, recognition and awards

Our NHSE/I Digital Weight Management Programme has been hugely successful with the team receiving praise for the work delivered setting up the programme, supporting practices and dealing with an unexpected volume of work

MLCSU's Waiting List Validation is recognised nationally through promotion of the work undertaken with the North West Trusts and the value demonstrated through reduced waiting lists, patient removal rates and high contact success rates.

**The team is a finalist for this years HSJ awards alongside the Digital Innovation Unit and our digital partner (Digital Space) for work on Elective Care Recovery for Waiting List Validations.**



# Risk Management, Serious Incidents and Governance

For further information please contact:  
Elizabeth Dalton, Head of Governance & Compliance  
[elizabethdalton@nhs.net](mailto:elizabethdalton@nhs.net)

## Service summary

MLCSU's Governance and Compliance team offers a range of services, such as risk management solutions, serious incident management and corporate governance and compliance services using our Insight system (Ulysses).

### Serious Incidents

The management of serious incidents and risk management involves monitoring compliance and timescales for the timely reporting of serious incidents and providing non-clinical quality review Root Cause Analysis reports. The team drafts and reviews Serious Incident Reporting Policies in line with current NHS England Serious Incident and Never Event Framework and update the national reporting system (STEIS), ensuring lessons learned are captured.

### Risk Management

The risk management service helps partners to develop Board Assurance Frameworks, capturing the key objectives, principal risks, controls in place and an assessment of the effectiveness of those controls, allowing them to identify gaps and action plans to fill those identified. The team conduct annual reviews of all risk management policies and procedures to ensure compliance with statutory requirements.

## Key benefits of the CSU service

The Governance and Compliance team has a partnership approach to managing serious incidents and risk management. The service is delivered at-scale, tailoring support to the needs of each ICB or Trust. This model provides flexibility and adaptability, ensuring continuity in times of absence, the ability to meet peaks and troughs in demand and access to subject matter experts when required across MLCSU's footprint.

As a third party, the team provides an additional layer of independent scrutiny and challenge.

Daily and weekly reports are prepared on an agreed basis, from daily new SI notifications to weekly summaries and monthly trend identification reports.

Partners benefit from an electronic risk management system to record and report on risks and the team trains key staff in corporate risk management to ensure the risk assessment processes are embedded into day-to-day activities.



# Risk Management, Serious Incidents and Governance

**For further information please contact:**  
Elizabeth Dalton, Head of Governance & Compliance  
[elizabethdalton@nhs.net](mailto:elizabethdalton@nhs.net)

## Research and innovation

The Governance and Compliance team reviews the national requirements for serious incident reporting and evolve the system to ensure the service delivery reflects any national changes in reporting.

The Governance and Compliance team, in conjunction with the Insight team, developed the serious incident reporting module so that it meets with the reporting requirements of the ICB.



## Testimonials, recognition and awards

During 2022/23, MLCSU were approached by an ICB to provide specialist support to an acute trust which had received a 'Requires Improvement' notice following a Care Quality Commission (CQC) visit.

The team developed a comprehensive Risk Training programme, reduced the number of open risks through data cleanse, risk reviewed and identified actions to mitigate or close risks, and reduced the departmental level of risk through a review of risk registers. They also provided assurance of quality of the Board Assurance Framework through a review against best practice, made recommendations on improved risk management processes and supporting risk management in Datixm, and developed a risk dashboard for divisions enabling the flow of information to executive level to provide clear executive direction and oversight.



# The Strategy Unit

For further information please contact:

David Frith

[strategy.unit@nhs.net](mailto:strategy.unit@nhs.net)

## Service summary

The Strategy Unit (SU) supports transformation locally, regionally and nationally, and is renowned for combining its substantial analytical expertise with real-world practical action.

Clients trust us to provide impartial advice, based on clear thinking and rigorous analysis, and our work as a partner to systems to support the development of local competencies and to be a catalyst for, and coordinator of, collaborative decision-making processes.

The Strategy Unit focuses on the application of high-quality, multi-disciplinary analytical work, broadly defined, that is driven by a public value ethos and enabled through a funding model based on securing client commissions. We bring together specialist teams in analytics and modelling, research and policy, evidence and knowledge mobilisation, strategy and change, data science, and evaluation.

Our focus is on the impact of our work on decision-making, especially as this contributes to improving outcomes and reducing inequity, and to building enabling capabilities in local systems.

The unit delivers the Midlands Decision Support Network (MSDN) which brings together integrated intelligence functions from across the region to share great practice, exchange knowledge and collaborate with one another.

## Key benefits of the CSU service

Application of critical thinking and structured analysis in high-quality processes, helping the health and care system to make better decisions, improve services and achieve practical benefits for population health and wellbeing.

The SU takes a 'systems' view of organisations, their opportunities and challenges, and uses tools and approaches rooted in various branches of systems theory.

MDSN, and similar mechanisms, bring scale benefits through enabling the collaboration of ICSs around key analytical questions and around developing the local skills that can improve the quality of decision making.

The team is enabling the collaboration of provider clinicians and ICSs in the Midlands around a range of specialty challenges and opportunities (for example, paediatric surgery, cardiac and more).

The SU wrote the national toolkit for establishing ICS Intelligence Functions and have been building the demand and capacity model for the New Hospitals Programme.



# The Strategy Unit

For further information please contact:

David Frith

[strategy.unit@nhs.net](mailto:strategy.unit@nhs.net)

## Research and innovation

A significant proportion of the team's work is research based, openly sharing the outcomes via [the Strategy Unit website](#) and social media.

The unit works regularly as part of academic or Think Tank research teams, working on specific grants.

A Data Science team has been recently added which will bring innovation to how we work through enhancing the skills in local systems.



## Testimonials, recognition and awards

"I would like to congratulate the team for producing such a clear and pragmatic analysis-in-action report and look forward to seeing these strategies implemented."

*Dr Bola Owolabi – Director, Healthcare Inequalities, NHS England*

Several analytical reports have been published in peer reviewed journals (including; Lancet Europe; BMJ open and more).



# System Control Centre

For further information please contact:

David Hutton

[david.hutton2@nhs.net](mailto:david.hutton2@nhs.net)

## Service summary

The Resilience Hub was originally conceived and implemented in October 2020 in response to COVID-19 and the anticipated increased winter pressures that ICSs were facing.

As winter progressed, the benefits of the Resilience Hub to the whole system became evident. In early 2021, it was agreed by both the ICS Board and Provider Collaborative Board that the Resilience Hub (GOLD) was needed as a permanent and integral part of the Lancashire and South Cumbria health system.

In November 2002, NHSE mandated the formation of System Control Centres (SCC). The resilience hub already met and exceeded this service specification, making for a simple transition in Lancashire and South Cumbria.

Services include:

- whole system tactical planning, response and improvement (short, medium and long-term)
- identifying themes and trends for robust planning, learning and continuous improvement – ‘closing the loop’ and embedding change
- coordinating mutual aid / achievement of recovery plans
- provision of specialist advice, expertise and support through integration with the Nursing and Urgent Care Team, with clear routes for clinical advice as required.

## Key benefits of the CSU service

The System Control Centre (SCC) works at-scale, facilitating system working and thinking. It is seen as a critical friend and honest broker in a way that any individual organisation would find very difficult.

The SCC has been established based on the following guiding principles:

- agnostic to the whole system
- tactical not operational: operational responsibility stays with providers
- promotes system working, partnership, transparency and collective ownership
- is a critical friend, using BI to inform collaboration
- the hub will act as a single source of the truth
- arbiter: “casting vote”
- acts as a patient advocate.

In conjunction with BI, a number of intelligence tools have been developed to ensure that all decision making is based upon facts and intelligence.

These tools have been enhanced to provide operational, tactical and insight reporting for the system that facilitates system thinking and development.



# System Control Centre

For further information please contact:

David Hutton

[david.hutton2@nhs.net](mailto:david.hutton2@nhs.net)

## Research and innovation

The Resilience Hub, and subsequently SCC, has brought a new approach to collaborative working across systems which is patient focussed and facilitates all stakeholders working together to maximise flow and ensure patient safety



## Testimonials, recognition and awards

“The cell has mobilised at pace during the pandemic to provide resilience by helping to manage daily operational activities. The cell is efficient and focused on patient care and makes a positive contribution to UEC delivery across Lancashire and South Cumbria, coordinating mutual aid and mobilising staff to focus on challenges in the system.”

*Dr Amanda Doyle, Regional Director, NHSEI North West*





# Transformation Unit

For further information please contact:

Charley Ward, Deputy Director

[charley.ward@nhs.net](mailto:charley.ward@nhs.net)

## Service summary

The [NHS Transformation Unit](#) (TU) specialises in the transformation of health and care. The team are proud to be part of the NHS and are hosted by NHS Midlands and Lancashire Commissioning Support Unit.

The unit offers support over the whole cycle of transformation – preparing for, designing, mobilising and implementing change.

The team works in partnership with health and care clients, to transform health and care outcomes for people and communities, by empowering change from within.

The TU make complex change simple by offering a range of services tailored to the needs of organisations we work with.

The team of skilled transformation professionals are passionate about making a real difference and drive forward new thinking in how health and care services can be delivered differently to be safer, more equitable and more sustainable to achieve better health outcomes for the populations they serve.

## Key benefits of the CSU service

**Stakeholder engagement:** including: interactive workshops, online surveys, outreach engagement; equality impact assessments, accessible engagement activities, focused workshops to test and challenge, and compliance with the duty to consult.

**Transformational finance:** support at a system level and programme level.

**System development:** co-production of key documents, co-design new operating models, develop and mature collaborative working arrangements, and leadership support.

**Digital solutions:** development of digital transformation strategy, aligned to clinical transformation strategy through stakeholder engagement, the production of HM Treasury compliant business cases, design and implementation of care pathways and co-design of digital and data operating models.

**Analytics:** use geospatial data, impact of local deprivation and demographics, analyse impact of redesign, model elective revert and explore future demands.

**Workforce:** planning, modelling new models of care, staff engagement and co-design and workforce transformation expertise.

**Programme and project management:** based upon recognised methodologies such as Managing Successful Programmes (MSP) and PRINCE2.

**Service redesign:** across all settings, for immediate or long term outcomes, and across large and small areas.



# Transformation Unit

**For further information please contact:**  
Charley Ward, Deputy Director  
[charley.ward@nhs.net](mailto:charley.ward@nhs.net)

## Research and innovation

NHS Transformation Unit has been shortlisted for HSJ Partnership Awards 2023 under the Most Effective Contribution to Clinical Redesign. The project shortlisted is for a gynaecological cancer services review in Cheshire and Merseyside delivered on behalf of Cheshire and Merseyside Cancer Alliance.



## Testimonials, recognition and awards

“Our new operating model is an important development...It was vital that the work was co-produced with system partners and led by teams working in the functions concerned; ensuring implementation of the resulting model is owned by staff and has partner buy-in. The development process in itself has accelerated the building of relationships and new ways of working across system partners. The resulting operating model is of exceptional detail, covers a diverse set of functions and provides the blueprint for how we will operate in the new world. The support provided by Prospect and NHS Transformation Unit was key to challenging our thinking, brokering conversations, and supporting our teams to follow a well-structured process.”

*Michael Pantlin, ICS Chief People and Digital Officer, NHS Surrey Heartlands*



# Nursing and Urgent Care

**For further information please contact:**  
Allison Cape, Deputy Director of Nursing and Urgent Care  
[allison.cape@nhs.net](mailto:allison.cape@nhs.net)

## Service summary

The Nursing and Urgent Care Team (NUCT) provides specialist clinical and analytical advice, insight and support in various domains including key strategic, tactical and operational forums.

The team act as an enabler to improve urgent care pathways, support evidence-based understanding and decision making, and provide insight, assurance and advise at trust, system and regional level.

The team's integration with the Strategic Control Centre function brings together wider urgent care clinical expertise, system insight and advocating for patients to support decision making both at system and place levels.

With a customer-focused approach, the team establish and maintain effective professional working relationships. Our work includes:

- Driving forward quality improvement and patient safety activities across provider services by supporting place-based partnerships to deliver a wide variety of quality improvements
- Working with other internal and external teams, leading the development and implementation of appropriate tools, systems, and processes to support operational delivery
- Safety Siren allowed focus on safe and effective care during the pandemic.

## Key benefits of the CSU service

The team works at-scale, supporting multiple systems across the North West and Midlands therefore delivering significant benefits through bringing together wider NUCT insight, experience and learning.

Our clinical and analytical insight, alongside the specific tools we use, provides a unique view of UEC care pathways and processes, not available through other sources and used by systems in various ways to improve flow, productivity, patient outcomes.

The NUCT offers system-wide access to the EMS+ escalation management tool, which provides live information on escalation triggers and key NUCT metrics. The wraparound insight, reporting, expertise and support we provide aids effective, evidence-based understanding and decision making for improved flow, pathway development and delivery, and patient outcomes.

The EMS+ dashboard in Aristotle provides an enhanced, real time view of emergency department attendances, admissions and discharges.

Weekly GP reports include a summary of escalations levels and reasons, user and service user training, and involvement in EMS trigger reviews.

Access to Aristotle, including OTiS strategic, tactical and operational, provides a unique set of information relating to NUCT in a live environment, whereas previous analyses for tactical and strategic decision making had a lag time of several weeks.



# Nursing and Urgent Care

**For further information please contact:**  
Allison Cape, Deputy Director of Nursing and Urgent Care  
[allison.cape@nhs.net](mailto:allison.cape@nhs.net)

## Research and innovation

In order to provide insight, the team conducts research in multiple areas across the Urgent Care pathway, for example, understanding and demonstrating the seasonal pattern of beds in use across different respiratory conditions and age groups for the Lancashire and South Cumbria Respiratory Network and analysing the flow of patients through the Emergency Department, into Same Day Emergency Care and then Inpatient beds for an acute Trust.

In 2022/23, the team conducted in-depth research on the impact of COVID-19 on acute systems across the North West for NHSE North West



## Testimonials, recognition and awards

“NUCT provides comprehensive and understandable data that clearly shows the way issues and pressures affected the Staffordshire system throughout the winter period. This data is crucial in enabling Midlands Partnership Foundation Trust (MPFT) to analyse their urgent care performance in this context, facilitating pro-active discussion about the effectiveness of their winter plans and supporting organisational decision-making and strategy for plans for the following winter. Without this data, there would be no understanding of the ‘bigger picture’ in which MPFT services operate and ultimately a lack of knowledge that enables MPFT to make informed decisions to improve people’s lives.”

*NHS Midlands Partnership Foundation Trust*