

## **Adults and Communities Scrutiny Committee: 7 March 2022**

**Provide an update on the progress with the  
development of the Leicester, Leicestershire  
and Rutland Care Record**

**Jon Wilson, Director of Adults and Communities**

Leicester, Leicestershire and Rutland Integrated Care System (LLR ICS) entered a partnership with the Yorkshire and Humber Care Record (YHCR) in 2021.

The LLR Care Record purpose is to provide the right information, to the right person, at the right time to improve the health and wellbeing of people across LLR, safely and securely.

The integration of records will cover 1.1 million people and involve two phases:

Phase 1 covers GP's, UHL, LPT, Rutland CC, Leicester City Council, LCC.

Phase 2 extend to community pharmacies, EMAS, NHS 111, care homes and local hospices.

Other Intended Extensions

East Midlands One Care (EMOC)

National Care Record

- Sharing an electronic record of information from encounters in any health and care setting  
(For the purposes of direct care rather than for analytics and secondary uses)
- Enhanced data provision from social care providers  
(Mandate that local authorities are connected to their local shared care record by no later than September 2022)
- Shared care plans alongside shared care records  
(Integrated Care Systems (ICS's) are required to develop plans to incorporate person-centred care plans into their shared care records)
- Align to LLR priorities

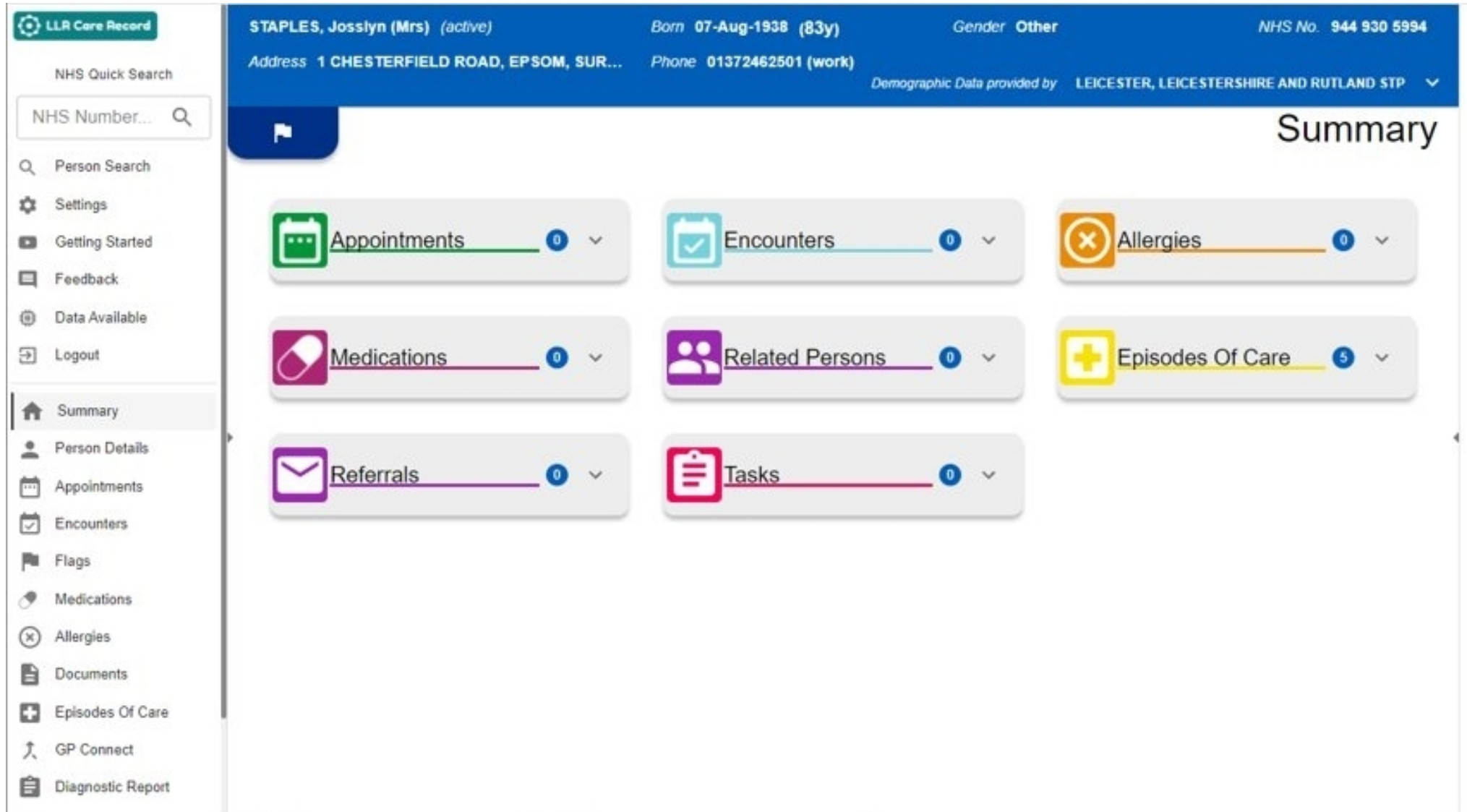
Allows staff involved in providing direct care to access individual's health and social care records safely and securely so that they can provide better joined-up care as individual's move between different parts of the health and social care system.

When individuals are at their most vulnerable providing health and care staff access to records allows them to understand the individual's needs and make the best decisions with them, and for them.

In Practice : At a local level this means that adult social care workers will be able to use a portal to enquire whether the person that they are working with is, or has been, receiving services from Health partners rather than phoning round District Nurses and GP practices etc. In turn, this means less time trying to contact colleagues, leading to time savings and quicker decision making and planning.

- Read only portal for health and social care professionals
- Accessible from existing systems (single sign on, contextual launch)
- Information from different care settings displayed in one place.

# What does it look like?



The screenshot displays the 'LLR Core Record' interface for a patient named Mrs Josslyn Staples. The top navigation bar includes the patient's name, status (active), birth date (07-Aug-1938, 83y), gender (Other), and NHS number (944 930 5994). Below this, the patient's address and work phone are listed, along with the demographic data provider (Leicester, Leicestershire and Rutland STP). The main content area is titled 'Summary' and features a grid of seven summary cards: Appointments (0), Encounters (0), Allergies (0), Medications (0), Related Persons (0), Episodes Of Care (5), and Referrals (0). A left-hand sidebar contains a search bar and a menu with options like Person Search, Settings, Getting Started, Feedback, Data Available, Logout, and various clinical data categories.

**LLR Core Record**

NHS Quick Search

NHS Number... 🔍

Person Search  
Settings  
Getting Started  
Feedback  
Data Available  
Logout

Summary  
Person Details  
Appointments  
Encounters  
Flags  
Medications  
Allergies  
Documents  
Episodes Of Care  
GP Connect  
Diagnostic Report

**STAPLES, Josslyn (Mrs) (active)** Born **07-Aug-1938 (83y)** Gender **Other** NHS No. **944 930 5994**

Address **1 CHESTERFIELD ROAD, EPSOM, SUR...** Phone **01372462501 (work)**

Demographic Data provided by **LEICESTER, LEICESTERSHIRE AND RUTLAND STP**

## Summary

- Appointments 0
- Encounters 0
- Allergies 0
- Medications 0
- Related Persons 0
- Episodes Of Care 5
- Referrals 0
- Tasks 0

## For Health and Social Care colleagues

- Reduction in requests for data for both Health and Social Care colleagues. Staff can focus on providing care.
- Staff will be able to spend more time using data to do their jobs than collecting it.
- Eliminate duplication, as staff have the right data they need for the health and care system to work at its best.
- Access to the data allow staff to monitor and provide high quality and safe care to people at home reducing the likelihood of admission to hospital.
- Professionals can know about any existing conditions and medications. It could stop a person receiving another drug that might react badly with what they have already taken.
- Professionals are alerted to important information that may need swift action.
- Health and Social Care staff can provide care in the place that is right for the individual knowing that they will always have the up to date information that they need.

## For people

- Sharing information improves people's outcomes. An example of this could be hospital staff being able to access a person's social care information to understand what kind of support they need while in hospital.
- Sharing health and social care information ensures that professionals can access relevant information in a timely manner, such as hospital discharges and admissions, diagnoses and contact details of other professionals involved in an individual's care.
- If people need urgent help, they do not have to remember all their care details, as these can be accessed by professionals.
- People have stated they do not want to have to repeat their story each time they receive care from a different organisation. Bringing together information held by different services means they will no longer have to do this, as their up-to-date details will be immediately available to any professional directly involved in their care.

Status

**GREEN**

## Key Milestones Achieved

EHRIA Completed

Information Governance review and processes completed

Technical configuration established, data transfer tested successfully and passed assurance

Support model in place

## Next Steps

Identify pilot teams from LCC to use the product before wider launch

Programme is preparing communications plan for all parties and is linked with LCC comms team

Programme is preparing benefits mapping to track benefits across LLR once live

On target for April 2022 to have model in place



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