

QUALITY ACCOUNT

WORKING ACROSS THE COMMUNITY
TO IMPROVE PATIENT CARE



2023/24

CONTENTS

02 About BEMS

03 Aims, & Objectives,
and Values

04 Statement from Chief
Executive Officer

05 Part 1 - Our Services

11 Part 2 - Quality Assurance:
Governance, Safeguarding,
Incident Management &
Patient Experience

22 Part 3 - Clinical &
Non-Clinical Audits

26 Part 4 - Looking back:
Review of Priorities in
2023/24

32 Part 5 - Priorities for
2024/25

36 Comment from
BSW ICB

38 Contact Us



ABOUT BEMS

02

Banes Enhanced Medical Services (BEMS+) is a local not-for-profit GP Federation, working across the community to improve patient care. We provide high quality community based clinical services and support Primary Care through a range of clinical, workforce, training and educational services.

Based in the local community and owned by our members who include all local practices, local GPs, Practice Managers, our staff, patients and the public, we were formed in 2004 when the three local Out-of-Hours GP services combined.

Our services provided in 2023/24 included the Covid Medicine Delivery Unit, Dermatology Clinics, DVT Diagnostics, Enhanced Access Services, Fracture and Soft Tissue Clinics, Home Visiting, Housebound Vaccinations, Paediatric Urgent Service Hubs, Rapid Diagnostic Services and GPs for the local Urgent Treatment Centre.

During 2023/24, BEMS continued to employ a number of Additional Roles Reimbursement Scheme (ARRS) staff on behalf of our member Practices. We worked closely with all the GP practices on Primary Care workforce development, including Clinical Pharmacists, Pharmacy Technicians, First Contact Practitioner Physiotherapists, Physicians Associates and Nurse Associates for the facilitation of more collaborative working. Having employed ARRS staff since the scheme inception in 2018, we worked closely with Primary Care Networks (PCN) in BaNES to transfer some of these staff across, to be employed directly by Practices and PCNs.

Providing the service at PCN level has given these Practices more flexibility in service provision, as they could adapt the workload of their staff to suit their local needs.

We actively participate in many important system-level meetings, which allows us to represent primary care perspectives and advocate for the needs of our community. However, BEMS are not purely a health organisation, and as a not-for-profit organisation, are also an active member of 3SG and the third sector in BaNES. During 2023/24, BEMS have worked closely with our partners in the health sector and third sector to influence and support the ongoing Integrated Community Based Care Programme (ICBC).

All that we do is part of General Practice preparing for the challenges ahead in terms of higher patient clinical need, moving services from hospitals into the community and practices working more closely together. This collaborative effort is key to building resilient, healthy communities and improving overall public health outcomes, with our organisation ensuring that primary care remains at the forefront of these transformative changes.

As the 'voice' of primary care in B&NES we have the ability to influence and support the development and implementation of new Health and Social Care initiatives to ensure they are fully embedded in primary care and will maximise the benefit to the residents of B&NES.



AIMS & OBJECTIVES

- Delivering services directly to the patients registered with our member practices
- Delivering services and functions to support our member practices
- Developing the primary care workforce
- Representation of the collective voice of General Practice

VALUES

- Trusted and respected leadership
- Responsiveness
- Quality
- Efficiency
- Clear purpose
- Local focus
- Openness and Transparency
- Being a good partner



STATEMENT FROM BEMS CHIEF EXECUTIVE OFFICER

04

Our Quality Account provides us with the opportunity to report on the progress we have made last year and our plans to improve the quality of the services we provide. We are pleased with our progress last year and aim to carry on this continuous quality improvement next year. We continued to expand our existing services, working from new sites and in innovative ways, as well as delivering new services, all to support patients during this difficult time. We acknowledge that we would not have achieved this without the dedication and professionalism of all our staff.

We are not complacent, there is always more to be done to improve the overall patient experience. As a primary care organisation with close working relationships with community services, secondary care services and the third sector, we recognise the current pressures across the healthcare system. In the spirit of increasing integration, BEMS is leading work with other local providers to redesign outpatient services that are cost effective, future-facing, located closer to patients and which utilise a broad clinician skill mix. These contribute to the BEMS ethos of high-quality patient care, whilst protecting hospital capacity for those patients who require high-intensity specialist services.

As part of the ICBC programme, we collaborate closely with third sector partners to ensure the effective re-design of community services. This partnership leverages the unique strengths and insights of third sector organisations, which are deeply embedded in the community and often have direct experience with the populations we serve. Through this integrated approach, we aim to create a more holistic, patient-centred healthcare system that not only meets the immediate health needs of our community but also addresses broader social determinants of health.

From reading this quality account, we hope you will get a sense that we are an organisation which listens to what our patients and staff tell us and use this feedback to improve the quality of the care we provide. Sharing, openly and honestly, issues of the quality of care at BEMS, both with staff and patients is a cornerstone to this work. Encouraging all staff to report incidents that could have resulted in harm, as well as those that may have done so, is an essential starting point to enable learning and change to occur.

Staff working in frontline services including General Practitioners, nurses, health care assistants and receptionists, BEMS Head Office staff including Operational Management and Project Management, BEMS Management Executive Committee and Council and users of our services have all been involved in the writing of this report.



Julia Griffith
Chief Executive Officer



PART 1 - OUR SERVICES

05



DERMATOLOGY SERVICE

The community-based Dermatology Service sees patients with a wide range of skin conditions who have been referred to the service by their GP. The team of Dermatology Specialist Doctors and Nurses assess the skin condition and decides what further treatment is required. The service offers a 'one stop shop' and should the condition require removal, biopsy or further tests we can do them there and then. The Dermatology Nurse supports the team of Doctors, reviewing patients with specific conditions to improve clinical outcomes and quality of life for people suffering with chronic conditions. They also support the management of patients on systemic medications / treatments which require frequent monitoring.

During 2023/24, BEMS continued to provide the Isotretinoin service, initiating patients on the medication for acne, with monthly consultant supervision from the local acute hospital, the RUH. This service offers these patients a location closer to home for commencing the treatment and the regular follow-ups, preventing them having to attend the RUH. 1,999 appointments were provided throughout 2023/24, 544 of which were patients seen in our Isotretinoin service. This is over 154 more patient contacts than 2022/23.

In line with updated NICE guidance, BEMS undertook a full review of the Isotretinoin process to incorporate the introduction of new safety measures, including improved assessment and monitoring of mental health and sexual function issues.

New risk minimisation materials including the Acknowledgement of Risk Form and a Patient Reminder Card have been incorporated into BEMS Isotretinoin pathway and clinical practice. Moreover, PHQ-9 and GAD-7 mental health questionnaires are completed prior to medication being started and the BEMS administrators now send these questionnaires where possible, via an SMS message to patients, with results automatically input onto their medical record.



DEEP VEIN THROMBOSIS (DVT)

The community based DVT service sees patients referred by their GP or the hospital who might have a DVT. Patients will ideally have an ultrasound of the swollen leg at our community clinic within 36 hours of referral (including weekends). Patients are started on anticoagulant treatment by their own GP, although BEMS can provide this if it is required on a weekend clinic. If the scan confirms a DVT then the patient is treated by their GP for a minimum of three months.

During 2023/24, the service scanned on average 54 patients per month. This is the same as the previous year and is a very stable service.

A new ultrasound machine was purchased this year. This improves the quality of image and speed of scan, to improve the experience for our patients and diagnostic capability.

BEMS also worked with our colleagues in the Non-Emergency Patient Transport Services team, to improve the process for booking transport for eligible patients. BEMS now have access to an updated online booking system, that gives real-time updates on where the transport is, allowing us to keep patients and our Vascular Scientists up to date.

At the end of the year, BEMS began to work closely with the Bath, Swindon and Wiltshire Integrated Care Board (BSW ICB) Medicine's Optimisation team, and the three local acute hospitals, to adapt the anti-coagulation guidance for the treatment of DVTs across all BSW providers. All clinical guidance will be amended and shared with BaNES General Practice's in 2024/25.

This is the first full year we have provided the service since being commissioned directly from Primary Care Networks. BEMS provided over 6,900 GP appointments and over 5,600 nurse appointments.

The service was able to expand its nurse offering this year and are now able to provide key additional services such as NHS Health Checks, cervical screening, B12 injections and ECGs.



COVID MEDICINE DELIVERY UNIT (CMDU)

In May 2023, BEMS were commissioned to provide a Covid Medicine Delivery Unit across BaNES, Swindon and Wiltshire. Working alongside colleagues at Sarum Trinity PCN, BEMS provided this remote service for high-risk, non-hospitalised patients with Covid-19. CMDU gives new COVID-19 treatments for patients, who are at the highest risk in the community. These treatments involve prescribing oral antiviral treatments or referring for intravenous infusion of neutralising monoclonal antibodies.

During 2023/24, BEMS consulted with 1,130 patients, and prescribed medication for 488 patients. 23 patients were referred for intravenous infusion therapy.

Prior to BEMS being commissioned, prescriptions were provided and dispensed by the local acute hospitals. As part of the service transfer to BEMS, we worked with commissioners and local pharmacies across BaNES, Swindon and Wiltshire to establish a process for patients nominated pharmacies to order and dispense the required oral antiviral medication. This ensured patients could receive their medication promptly, close to home.



ENHANCED ACCESS (EA)

During 2023/24, BEMS continued to provide the Enhanced Access Service on behalf of three Primary Care Networks in BaNES, offering patients a mixture of routine, pre-bookable and same-day General Practice appointments with a GP or nurse. The service is designed to provide GP Practices with an additional option for their patients who may benefit from an evening or weekend appointment.

The service operates Monday to Saturday from six sites across Bath, Paulton and Radstock. An additional site was added this year, allowing BEMS to provide the service in the area of highest deprivation in BEMS, increasing utilisation of patients within this geography.



FRACTURE AND SOFT TISSUE INJURY CLINIC

This community-based Fracture and Soft Tissue Injury Service is for patients with a range of injuries who have been referred to the service by their GP, A&E or the Minor Injuries Unit. We offer a complete follow-up service that includes expert medical advice, physiotherapy, plaster application and removal and X-rays where needed. Onward tests can be requested including urgent MRI scans and direct referral into acute fracture teams at the RUH.

BEMS provided over 2,000 appointments, throughout the year, over 400 more than in 2022/23. Over 560 patients who required physiotherapy were able to have an appointment immediately after their Specialist GP consultation, with a physiotherapist on-site. This is 130 more physiotherapy sessions provided on the day, than in 2022/23.

The service is provided at two local hospitals and a local GP Surgery. At Sulis Hospital Bath and Paulton Memorial Community Hospital, we are able to provide x-ray services. During 2023/24, BEMS also set-up a new Soft Tissue only service, from a GP Surgery host site in Bath City centre. This has expanded our capacity to manage the consistent increase in workload. Patients are triaged by our experienced team to ensure soft tissue injuries only are seen in this service. The service takes place at the start of the week so that if x-ray is necessary, they can be booked into a Paulton Hospital or Sulis Hospital clinic within the same week. This has reduced wait times for patients and expanded our geographical offering.

INTRODUCED
NEW SOFT
TISSUE INJURY
CLINIC

2000
APPOINTMENTS
PROVIDED

560
ABLE TO SEE
ON-SITE PHYSIO

07



HOME VISITING SERVICE

BEMS provided the Home Visiting Service for three Primary Care Networks until October 2023, at which point BEMS assisted in transferring provision of the service to the PCNs. The aim of this service was to see patients who are at risk of admission to the local hospital earlier in the morning and either treat them at home or admit them earlier. This enabled observations and tests to be performed earlier in the hospital and hopefully send them home later that day, avoiding unnecessary overnight stays. This service was staffed by Specialist Paramedics and Advanced Nurse Practitioners.

BEMS supported the Practices of the three PCNs to take on their own Home Visiting staff and in some cases, set-up a same-day urgent care service across their PCN footprint. Providing the service at PCN level gave the Practices more flexibility in service provision, as they could adapt the workload of their staff to suit their local needs, rather than sharing a resource across multiple PCNs and Practices.

Throughout this 6-month period, BEMS completed 877 visits to patients, and successfully kept 77% patients at home, providing them a suitable treatment plan or referring to another organisation for follow-up at home.



HOUSEBOUND VACCINATIONS

08

Between April 2023 – June 2023, BEMS delivered a Housebound Vaccination service, for patients eligible for the Covid-19 Spring Booster. This service provided a local primary care-led vaccination service on behalf of all six Primary Care Networks in BaNES, in collaboration with the Bath Racecourse Vaccination Team.

1200
PATIENTS VACCINATED

In total, BEMS delivered 1,200 Covid-19 Spring Boosters for housebound patients.

The vaccination team consisted of Nurses from BEMS and bank staff supplied by the Royal United Hospital Covid-19 Vaccination Workforce. This team was supported by a fantastic group of volunteers, who generously came forward to do what they could to help.

For the Autumn 2023 campaign and Spring 2024 campaign, BEMS supported the BSW Health Community by continuing to provide much needed accommodation in B&NES for this outreach service utilising BEMS HQ at Corston.

BEMS set-up the service within two weeks, as it was the third time BEMS have been asked to set-up this seasonal service. The service ran from 4th December 2023 to 31st March 2024. Outcomes from the service highlight that it benefitted secondary care by managing the increase in demand from this cohort of patients through planned availability of urgent, same day face to face appointments. Thereby reducing the fluctuations in demand on urgent and emergency department services within secondary care.

The increased capacity of appointments benefitted primary care by managing the daily demand for appointments in a cohort of patients who require a face-to-face assessment and whose condition can deteriorate very quickly. The service also benefitted patient care and experience as the timely assessment of patients under 11 years of age can reduce parental concern and anxiety, potentially further reducing the demand on secondary care services.

BEMS provided an additional 1,305 appointments over this period, 650 more appointments than the PUSH service we provided January – March 2023. GPs contacted the RUH Paediatric team via the agreed telephone number directly for 34 patients, avoiding potential admission.



PAEDIATRIC URGENT HUB SERVICE (PUSH)

In November 2023, BaNES, Swindon and Wiltshire Integrated Care Board commissioned BEMS to provide a hub for urgent same day care for all feverish children under 11. This was to alleviate additional pressure on primary and secondary care and in turn reduce hospital admissions during the winter months.

1305
Same-day
appointments



650 additional
appointments
than in 2022/23



RAPID DIAGNOSTIC SERVICE (RDS)

Since 2021, BEMS have been working with two local Primary Care Networks (Keynsham and Minerva) to run a Rapid Diagnostic Service pilot. This pilot continued during 2023/24 and came to an end on 31st March 2024. The service was for patients who did not meet the usual two week wait (2WW) referral criteria, but for whom cancer may be suspected. This service allowed for earlier testing, to diagnose the cause and allow treatment to be started sooner. The patient is seen in the service within one week of receiving the referral.

During 2023/24, the service provided over 450 appointments across the two pilot sites, offering rapid access to a Specialist GP appointment and referrals for rapid CT scans, MRI scans, ultrasound, endoscopy and colonoscopy. As well as assisting with faster diagnosis of cancer conditions, the service was also able to diagnose other serious conditions.

The pilot ended on 31st March 2024, as the local Integrated Care Board made the decision to commission Rapid Diagnostic Services from local acute hospitals to aid with even greater access and interpretation of diagnostic testing. At the end of the pilot, BEMS ensured that patients seen within our service had any referrals completed and actioned, and patients were under the care of a clinician either at the local acute hospital, or with their usual GP.



URGENT TREATMENT CENTRE

BEMS provide the GP workforce for the Urgent Care Centre (UCC) based in the Royal United Hospital (RUH). The Urgent Care Centre is for patients who have an urgent need to see a GP or nurse but whose illness or injury is not life-threatening.



During 2023/24, BEMS provided 3,561 hours of General Practitioner time within the service. This is 196 hours more than in 2022/23.

A Service Development Improvement Plan has been drafted this year, to be implemented in 2024/25, jointly with the RUH. This plan is focused on the quality of the service provided within the UCC environment and will allow the Clinical Governance team to focus on quality improvement work in key areas such as: IT, estates, medicine management, and the process of clinical streaming. Clinical streaming to the UCC, which is a co-located primary care services within the Emergency Department, helps to ensure patients see the right person, first time.





TRAINING – NURSE AND HCA FORUMS

BEMS support the Training Hub work programme for the Bath and North East Somerset locality. We continue to develop GPs with Extended roles, support specialist staff working in GP practices like Clinical Pharmacists and Paramedics, promote student placements and run the Practice Nurse and Health Care Assistant forums.

During 2023/24, BEMS ran nine Nurse and HCA forums, with topics such as sepsis, vaccination and immunisation, infection control, the use of technology within Primary Care. BEMS also ran a Community Nurse Conference in June 2023, delivered with other community healthcare providers; HCRG Care Group, Dorothy House and Nursing Home representatives. The purpose was to celebrate nursing and promote integrated working among the BaNES nursing community. Topic specific workshops focused on case studies following patient healthcare journeys. 100% of respondents said they would like to attend again in future and BEMS are helping to plan a conference for 2024.

BEMS also run a quarterly Deputy Practice Manager network, and had four sessions with topics such as health inequalities, MMR risk assessments, Locally Commissioned Services, supply of flu vaccination stock, SystmOne reporting.



PRACTICE SUPPORT

During 2023/24, BEMS initiated a Practice Support project. This project supported our practices with many different aspects of running their business. The project helps with operational queries and uses our knowledge to signpost practices to the right place for a response. BEMS offer support with quality improvement, health and wellbeing, and provide a programme of support to new members of staff. We also produce best-practice resources shared on our Practice Support TeamNet page to enable sharing of learning. Key achievements so far include:

- Practice website reviews undertaken for six practices, providing action plan to improve website accessibility and functionality.
- Health and Wellbeing Survey completed for each Practice within a Primary Care Network, to inform PCN-wide action plan.
- Health and Wellbeing Strategy shared with Practices to utilise, complete with suggestions of activities already undertaken by BEMS.
- Administrator and Receptionist Network created and ran by BEMS, to help support and develop this important role, and focus on sharing best practice.



PART 2 – QUALITY ASSURANCE: GOVERNANCE, SAFEGUARDING, INCIDENT MANAGEMENT & PATIENT EXPERIENCE

BEMS has a robust governance framework in place, incorporating quality assurance for every area of service being provided. This quality assurance encompasses the activities and series of measures that are designed to ensure continuous improvement in the quality of health care services.

MANAGEMENT EXECUTIVE COMMITTEE

The Management Executive Committee (MEC) is made up of the Directors of BEMS, and includes local GPs, Practice Managers and experienced BEMS management staff. The MEC meets on a monthly basis to manage the day-to-day responsibilities of the organisation, monitoring services against key performance indicators and driving service improvement.

CLINICAL GOVERNANCE COMMITTEE

The Clinical Governance Committee is a quarterly committee meeting, led by the Quality and Clinical Governance Director, and attended by BEMS CEO, Operations Director, Practice Manager Director, Senior Project Manager and Lead Nurse for Quality and Compliance. The committee provides clinical oversight for MEC and the BEMS Council, ensuring that governance, quality, productivity and operational decisions relevant to clinical practice meet the highest standards. The committee reviews data on incidents, safeguarding, audits and patient and staff feedback. Incidents and complaints are reviewed in detail across all services, to maximise learning opportunities, agree actions and ongoing monitoring requirements.

BEMS COUNCIL

The BEMS Council is an advisory group to the Management Executive Committee. It is made up of Clinical Directors from each Primary Care Network in BaNES, representing their locality, as well as a Practice Manager, Nurse Practitioner and Patient Representative from across BaNES. Most of the Board members are from local practices and have first-hand experience of patients' challenges. The group meets quarterly to provide strategic oversight on direction of travel for the organisation, quality, workforce and finance.



CQC REPORT

13

BEMS were inspected by CQC for the first time in May 2019. We are proud to say that we were rated 'Good' in the areas of Safe, Effective, Caring and Responsive. We were rated 'Outstanding' in the area Well-led.

As part of the full report, here are the key observations made by the CQC:

- BEMS was an integral part of the local community and actively promoted the health of the population.
- Feedback from patients was consistently positive about the service they received from BEMS.
- The culture of BEMS and the way it was led and managed drove the delivery and improvement of high-quality, person-centred care.
- Leaders had an inspiring shared purpose, striving to deliver and motivate staff to succeed. There was a strong culture of continuous improvement.

During 2023/24, BEMS reviewed the new CQC Quality Statements approach to visits. This review has resulted in a quality improvement plan, that is being reviewed at the Clinical Governance Committee on a quarterly basis. Key themes of actions undertaken include:

- Amending HR policies and procedures to accurately reflect current working processes.
- Codifying auditing processes, and ensuring consistency across different services.
- Ensuring contracts and service level agreements with host sites accurately reflect the services being provided by the site, with clear guidance on roles and responsibilities of all parties.
- Ensuring Learning Disability and Autism resources are available for all services, and easily accessible for staff and patients via BEMS website.

The full CQC assessment from 2019 can be found [here](#).

Overall
Good

Safe

Good ●

Effective

Good ●

Caring

Good ●

Responsive

Good ●

Well-led

Outstanding ☆

SAFEGUARDING

Protecting people's health and wellbeing, respecting human rights and ensuring that no harm will occur to any service user or staff as a result of contact with BEMS is of the upmost importance to BEMS.

The Safeguarding Team is made up of Dr Charles Bleakley (Safeguarding Lead & Quality and Clinical Governance Director) and Rebecca Battagel (Safeguarding Support and Lead Nurse for Quality and Compliance). The team are responsible for training compliance and ensuring that BEMS processes are clear and safe. As well as that, the team follow up on the outcome of any referrals made, to ensure that good quality feedback is provided to our colleagues.

In 2023/24, no safeguarding referrals were made.

Work undertaken during 2023/24 includes:

- The Bath, Swindon and Wiltshire Integrated Care Board (BSW ICB) Safeguarding TeamNet page for BaNES has been added to the SystmOne toolbar, to improve ease of access to BSW ICB policy documents, safeguarding contacts and training opportunities.
- The Safeguarding Lead and Lead Nurse Quality and Compliance continues to attend relevant safeguarding sessions at a strategic level.
- Safer recruitment training was completed by BEMS HR Manager and HR Assistant resulting in a review of the BEMS Recruitment Policy to ensure it reflects safer recruitment guidance and processes.

- The Lead Nurse for Quality and Compliance has attended ICB safeguarding multidisciplinary meetings to gain an overview of national guidelines and initiatives and be aware of local and national safeguarding reviews and themes. Relevant information from the safeguarding adult reviews have been shared with all staff.
- Audits of clinical consultation documentation within Enhanced Access and Paediatric Urgent Service Hub (PUSH) clinics demonstrate compliance with recording 'safeguarding' or 'no safeguarding concerns' on the BEMS templates.
- The BEMS Was Not Brought Policy and protocol for children and vulnerable adults was implemented in March 2022. The 2023/24 audit confirms the BEMS Was Not Brought Policy and Protocol continues to be implemented effectively by clinicians and administrators working within BEMS community clinics. The BEMS Was Not Brought policy remains an important contribution to the process of identifying children with possible safeguarding concerns who are not brought to clinic appointments.
- Continued vigilance for children who are not brought (WNB) to the Enhanced Access, PUSH and Fracture and Soft Tissue Injury Clinics is maintained via a daily search that informs their registered General Practitioner



- The first BEMS staff safeguarding survey was completed in 2023/24 to evaluate the impact of safeguarding training for staff within all BEMS clinical services. The audit aim was to gather baseline data to understand how staff access safeguarding training and how confident they feel to recognise and report safeguarding concerns. Implementing the survey action plan is part of the BEMS safeguarding improvement action plan for 2024/25 and includes:

- o Developing a two-page poster to enhance communication with all BEMS staff regarding safeguarding training requirements and avenues to access training.

- o BEMS Urgent Care Centre (UCC) service lead has started to network with the RUH safeguarding team to understand the RUH safeguarding process and protocols and develop a robust induction that links in with the RUH safeguarding training and teams.

- Safeguarding remains an agenda item on all quarterly clinical governance meetings and all staff are reminded about the policies and tool kit.



INCIDENT REPORTING

BEMS has an incident reporting policy that is annually reviewed in light of best practice and contracting requirements. BEMS has a culture of encouraging the reporting of incidents so that we can continually learn from them and improve services for patients.

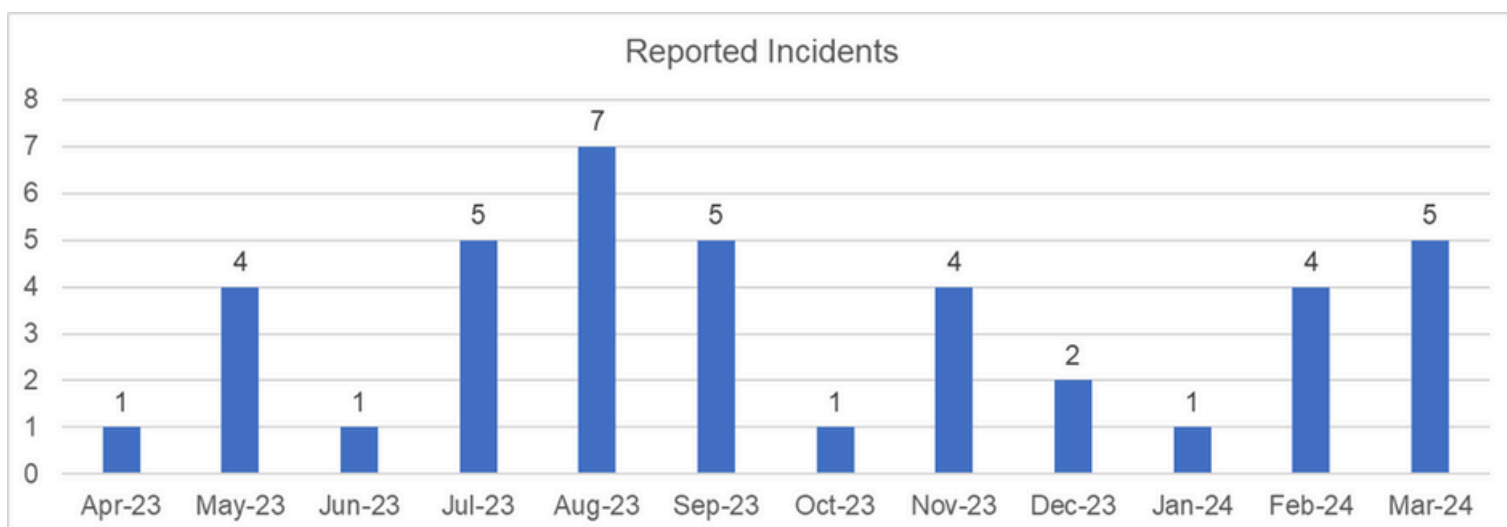
Effective incident management allows for proactive risk identification, assessment, and mitigation. By promptly addressing incidents and implementing preventative measures, BEMS can reduce the likelihood of future occurrences and minimise harm to patients.

Whenever a staff member reports an incident, it is recorded electronically in our incident reporting matrix. Any incident identified as high-risk is escalated for discussion with the Quality and Clinical Governance Director, Operations Director, and if appropriate, Service Clinical Lead, for immediate implementation of necessary actions or mitigations.

As reflected in our staff survey results, BEMS has a strong reporting culture, and as such, most incidents are classified as low risk and result in learning points shared with team members or fed back to external organisations. Where themes are identified, the Clinical Governance Committee review and action changes to improve, share learning and reinforce best practice.

All incidents recorded are reported to the Integrated Care Board on a quarterly basis.

From April 2023 to March 2024, 40 incidents were reported in total, with no Serious Incidents recorded. This is 17 fewer incidents that recorded in 2022/23.



In 2023 the Serious Incident framework was replaced by The Patient Safety Incident Response Framework (PSIRF). PSIRF fundamentally shifts how the NHS responds to patient safety incidents for learning and improvement. PSIRF is not an investigation framework that prescribes what to investigate, instead, PSIRF advocates a co-ordinated and data-driven approach to patient safety incidents. During 2023/24, BEMS began work to create a new Patient Safety Incident Response Policy, created a new Patient Safety Incident Response Plan, established a clear process for reporting patient safety incident via LFPSE, and updated our Incident Reporting Policy.

COMPLAINTS MANAGEMENT

Making a complaint is one way in which service users can make their views known that their expectations have not been met. BEMS takes complaints seriously and recognises that they provide valuable opportunities to learn, and to improve the service provided.

BEMS respects the rights of users to express dissatisfaction and equally recognises that members of staff who are the subject of complaints have a vital role and are engaged in the process in an open and supportive manner.

BEMS has multiple methods for a complaint to be made. In the first instance it is encouraged for any complaints to be discussed with a member of staff at the time. If a complainant does not wish to raise their complaint with the staff involved, or this is not appropriate or possible to do so, then a complaint can be made in the following ways:

- Telephone: A verbal complaint can be made to a member of the team on 01225 560806
- Email: Email the team directly at bems.adminoffice@nhs.net
- Post: Address your letter of complaint to: Complaints Manager, B&NES Enhanced Medical Services, Unit 13a Church Farm Business Park, Corston, Bath, BA2 9AP

During 2023/24, three complaints were received. All complaints were dealt with within the agreed timeframe specified in the BEMS Complaints Policy. Anonymised details of the complaint are included within the incident reports that BEMS share with the Integrated Care Board.

PATIENT FEEDBACK

BEMS strive to ask all patients' to complete questionnaires to gather feedback on their experiences of our services. We utilise an electronic pathway so that feedback forms can be sent to patients, via a text. We also offer paper copies to patients who do not want to receive this via a text.

Return rates for 2023/24 were as follows:

2023/24	2022/23	
12%	29%	Dermatology Clinic
29%	25%	DVT Service
10%	14%	Enhanced Access Service
15%	25%	Fracture and Soft Tissue Injury Clinic
9%	13%	Paediatric Urgent Service Hub
10%	13%	Rapid Diagnostic Service

BEMS acknowledge the reduction in return rates across most of our services. As part of our priorities for 2024/25, we aim to assess and adapt our current models of collection, to encourage improved response rates.

PATIENT SATISFACTION BY SERVICE:



BEMS ACTIONS

The actions taken by BEMS as a result of patient feedback included:

- Diary event made for Service Delivery Manager to contact all Enhanced Access sites in March and August each year, to find out what plans they have for flu or covid clinics, so appropriate mitigation can be implemented to reduce impact on Enhanced Access patients.
- Booking template on SystmOne for Enhanced Access appointments, that GP staff use to book an appointment with BEMS, amended to include a notification to inform patients that for a telephone appointment, the call may come from a withheld number. BEMS are limited to the telephony systems of host-sites, most of which hide the telephone number.
- Sign created and taken to Soft Tissue Injury Clinic at Widcombe, to better identify that patients are in the correct waiting area, and the BEMS GPwER will collect them.
- BEMS are running an increased number of clinics, and some extended clinics, within the Fracture and Soft Tissue Injury Clinic, to increase patient choice and reduce wait times. BEMS now have a site in Bath City for a Soft Tissue Injury Service. Patients are triaged to ensure soft tissue injuries only are seen in this service. This is reducing wait times for patients and expanding our geographical offering.
- Fed back to host site that a patient had an issue utilising their on-site wheelchair as the Practice team were unsure of the location of the key to the lock. Practice site confirmed they have changed their process and informed their team to mitigate against the repetition of this issue.



COMPLIMENTS

BEMS recognises the importance of collecting positive feedback, and its valuable contribution in assisting us to better understand the patient experience, and to influence any future service changes. Whilst incidents and complaints provide valuable opportunities for learning, compliments also allow us to grow and develop by reinforcing the positive aspects from which to build upon. All positive feedback received is shared directly with the relevant team members, their line manager as well as via BEMS intranet to be shared across the organisation.

During 2023/24 we had 267 compliments. These were via the phone, emails and patient surveys. This is 56 more compliments received than in 2022/23.

COMPLIMENTS INCLUDE:

"The Doctor was thorough, informative and incredibly knowledgeable. He explained everything in great detail and supplied various options moving forward."

"The procedure was explained clearly, consent form given which reiterated what was verbally explained & after care verbally explained followed by information sheet in case I forgot what was said!"

"A great appointment. So convenient to be able to go in the evening, meaning I did not have to take time off work. The nurse was able to see me ten minutes early so there was no waiting around. Absolutely brilliant."

"I was very impressed with the surgery and the efficiency of the staff. Very warm welcome, highly professional. The appointment times were convenient and timely. The staff were outstanding."

"I found the entire process extremely professional and welcoming from start to finish. Staff were very friendly and efficient even though it was quite late in the evening and I was their last patient. I would definitely recommend."

"The Doctor was very friendly and professional. He immediately put me at ease and explained the implications of my fractured foot. I even got to see my x-ray! He clearly excels in his work and is a credit to the service."

"Excellent experience and checked both legs for DVT which was very helpful as it saved a second visit, which is difficult to arrange for me due to time off work needed for family members. Hugely appreciated and fantastic service from start to finish."

STAFF FEEDBACK

The results of the staff survey, undertaken in 2023, were reviewed by the Management Executive Committee to formulate, assess, analyse and to set the initial action plan based on the results. BEMS Operations Director took the results to relevant staff meetings, to share the results and the live action tracker. This is reviewed at the Management Executive Committee on a quarterly basis and updates provided at the bi-monthly staff meeting.



100%

100% staff agree that care of patients is the top priority for BEMS.

STAFF SURVEY SUMMARY:

- **95%** staff always or often feel enthusiastic about their job
- **92%** staff feel that they can make suggestions about the way that their team works
- **100%** responses indicated that they would recommend BEMS as a place to work
- **95%** staff agree that BEMS encourages the reporting of errors
- **100%** staff agree that BEMS managers make every effort to maintain patient confidentiality
- **95%** agree that managers take a positive interest in staff health and wellbeing
- **95%** believe that BEMS as an organisation take positive action on staff health and wellbeing
- **98%** strongly agree BEMS promotes a culture of health & safety for staff and patients
- **100%** staff believe that BEMS acts fairly about career progression and training*

0 20 40 60 80 100

*regardless of gender, ethnicity, religion, sexual orientation, disability or age.

2022/23

2023/24

An improved response rate of 65% compared to 34% in 2022.

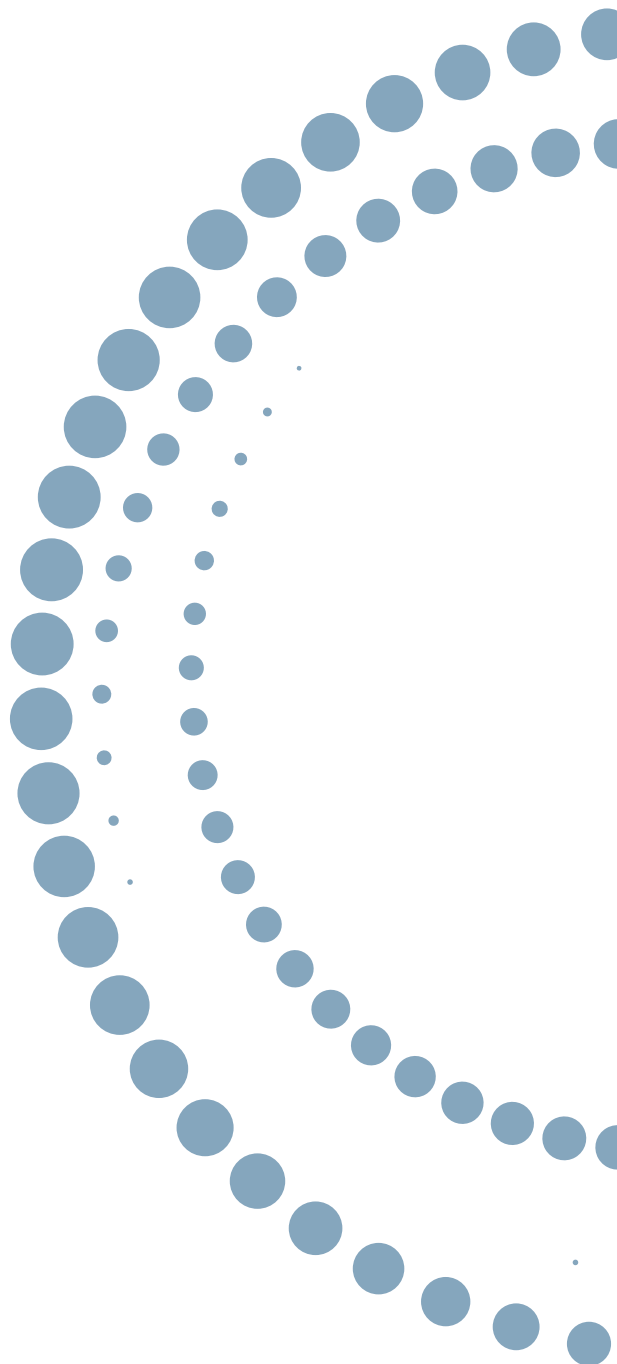
ACTION PLAN

CATEGORY	ACTION	LEAD	COMPLETION DATE	STATUS
SENIOR MANAGEMENT	Continue to share and update the new Key Roles document so staff are aware of who the Senior Management team are, what roles they have, and how to contact them.	Operations Director	Quarterly	Completed
	To include the Key Roles document in induction paperwork.	Practice Manager Director	December 2023	In progress
	Plan at least two staff meeting dates throughout the year when all attendees of MEC can join.	Operations Director	Spring and Autumn 2024	In progress
INCIDENT REPORTING	Include 'you said, we did' section in internal newsletter, focusing on learning from incidents.	Operations Director	Quarterly starting April 2024	Completed
	Utilise internal newsletter to highlight the reason for incident reporting and the value it adds through service improvement. To move away from any perception of blame culture.	Operations Director	April 2024	Completed
CLINICAL PRACTICE	Quality and Clinical Governance Director to visit all BEMS clinical services.	Quality and Clinical Governance Director	January 2024 – April 2024	In Progress
	Have a non-clinical member of the Freedom to Speak Up Guardian Team, to aid non-clinical staff in the raising of concerns.	Practice Manager Director	April 2024 – September 2024	Completed
STAFF HEALTH AND WELLBEING	Formalise BEMS health and wellbeing workstream. To update staff at the staff meeting and have as an agenda item.	Operations Director, Practice Manager Director	January 2024 and update quarterly	Completed
WORKING ENVIRONMENT	Amend questionnaire next year to include more detail on what staff's regular working environment is, to inform potential actions that may need to be taken by MEC.	Operations Director, Practice Manager Director	September 2024	In Progress
	All staff to utilise meeting rooms in the office for confidential meetings. Reminder to be sent to staff.	Operations Director	December 2023	Completed

NHS DATA SECURITY AND PROTECTION TOOLKIT

The NHS Data Security and Protection Toolkit was completed, meeting the standards set. During 2023/24, an Information Governance action plan was developed, to comply with the Data Security and Protection Toolkit standards, and the General Data Protection Regulations. The action plan is reviewed quarterly by the Clinical Governance Committee, and included:

- Implementing a 'Bring Your Own Device' policy, providing guidance for staff who use their own smartphones, tablets, laptops and desktop PCs to access work information.
- Arranged for our external Data Protection Officer Service to create an interactive, face-to-face Information Governance training session for BEMS staff, which took place in February 2024.
- Updated Information Governance guidance specifically for those staff who remote work, sharing policy updates and helpful hints and tips.
- Trained the new Quality and Clinical Governance Director to undertake the role of Caldicott Guardian for the organisation, an important role responsible for protecting the confidentiality of people's health and care information and making sure it is used properly.
- Updated BEMS core information governance policies and procedures to reflect current guidance and best Practice.
- Key staff undertook Information Asset Owner training, ensuring the competency of staff who have duties for the safe and secure handling and management of sensitive data and systems.



PART 3 - CLINICAL & NON-CLINICAL AUDITS

22

BEMS continues to seek to improve patient care and outcomes through systematic reviews and audits. BEMS works towards achieving Key Performance Indicators (KPIs) as agreed by the service contract as well as each service continuing to have its own audit programme. Local and national guidance relating to each service is reviewed and audits structured to ensure that the service meets or exceeds this guidance.

A clinical audit programme is implemented and developed across all BEMS services throughout the year. BEMS encourage individual service teams to review local and national guidance to highlight and bring forward any audit they feel should be completed.

All clinical audits carried out continue to be assessed by the Clinical Governance Director who is responsible for ensuring that the proposed audits are ethical and that any findings that are identified and any learning or training requirements are fully explored to ensure that local and national guidance is being followed.

Reports are shared and reviewed regularly at the quarterly Clinical Governance Committee, for group discussion and review with representatives from all areas of the organisation.



Service specific local audits completed during 2023/24 include:

COVID MEDICINES DELIVERY UNIT (CMDU) SERVICE

Consultation audit – June 2023

- **Objective:** To assess the quality of clinical triage and assessment against eligibility criteria, and to assess the prescribing of covid-19 antiviral medication against National Institute for Health and Care Excellence (NICE) guidance
- **Outcome:** All clinical assessments and prescribed covid-19 antiviral medications were managed within national and local recommendations and guidelines. Variation in documentation of renal or liver disease or confirming 'no medication interaction'.
- **Action:** BEMS created a CMDU specific template on SystmOne to quickly and accurately document positive and negative findings of clinical assessment and prescribing.

DERMATOLOGY SERVICE

Psoriasis Screening Tool Audit – June 2023

- **Objective:** To identify the baseline use of validated screening tools in patients with psoriasis treated in BEMS Dermatology service
- **Outcome:** PASI, DLQI and PEST scores were completed with varying use across all clinicians.
- **Action:** Amended the BEMS dermatology template to add quick links to the relevant screening tools, and prompt for completion of the scores at first presentation and at specified times to evaluate efficacy of treatment along the pathway.

Isotretinoin Audit – March 2024

- **Objective:** To evidence the effectiveness of the BEMS Isotretinoin pathway and ensure all existing and new monitoring requirements were completed. This included, benchmarking BEMS assessment and monitoring of patients prescribed Isotretinoin against national The British Association of Dermatologists Isotretinoin Audit Standards and new Medicines & Healthcare products Regulatory Agency (MHRA) safety measures recommended in October 2023.
- **Outcome:** The results demonstrate the BEMS Isotretinoin clinic continues to provide a safe and effective service as defined by national guidelines and standards. 100% of women enter the Pregnancy Prevention Programme (PPP) prior to treatment and no pregnancies occurred during or after treatment. MHRA introduced the Isotretinoin Acknowledgement of Risk form and Patient Reminder Cards as compulsory risk minimisation materials for all patients when initiating Isotretinoin. The Isotretinoin Risk Acknowledgement Form has been utilised for female patients as it contains the PPP. However, it was not completed for any male patients who started Isotretinoin after October 2023.
- **Action:** Process changed and now using the Isotretinoin Acknowledgement of Risk Form and Patient Reminder Cards for all patients when initiating Isotretinoin.

DVT SERVICE

Positive deep vein thrombosis (DVT) and anti-coagulation status at referral – November 2023

- **Objective:** The audit was planned to review the prevalence of patients with a positive DVT scan who were not prescribed anti-coagulation medication when referred to the BEMS DVT clinic.

- **Outcome:** A high level of anti-coagulation prescribing at referral is evidenced in this audit. The rationale for not prescribing anti-coagulation at referral were appropriate based on the GP's clinical assessment of the presenting complaint; the risk and benefits of not prescribing for the patient and patient choice.
- **Action:** Share the audit results with BaNES practices to: evidence appropriate prescribing, ensure best practice guidance is implemented and review the safe and effective patient care via the BEMS DVT pathway.

FRACTURE AND SOFT TISSUE INJURY SERVICE

Corticosteroid Joint Injection Audit – June 2023

- **Objective:** The objective was to ensure that corticosteroid joint injections are safe, effective and administered for clinical indications as recommended by The Primary Care Rheumatology and Musculoskeletal Medicine Society (PCRMM).
- **Outcome:** The audit demonstrated the administration of corticosteroid joint injections in the BEMS fracture and soft-tissue community clinic is a safe and effective service that benefits patients by reducing pain, improving joint function and mobility whilst reducing referrals to secondary care services. 100% of injections are administered in line with defined indications. 89% of patients had full documentation of consent, aseptic no-touch technique and batch number/expiry date of medications within their SystmOne records.
- **Action:** Reviewed the BEMS fracture and soft tissue clinic template to increase documentation of consent aseptic no-touch technique and batch number/expiry date of medications within SystmOne, aiming for 100% at re-audit.

- **Objective:** The aim was to assess people who attend for one consultation as a potential cohort who may not be an appropriate referral to BEMS Fracture and Soft Tissue clinic.
- **Outcome:** The audit demonstrated that patients are referred to BEMS Fracture and Soft Tissue clinic after a consultation within General Practice, Minor Injury Unit or Emergency Department. Therefore, these single attendances are the patient's second consultation and affords an opportunity for the history, diagnosis, investigations and treatment plan to be reviewed by a specialist GP.
- **Action:** Shared the audit with BEMS Fracture and Soft Tissue clinic GP's. Discussed the audit outcome at the next service clinical governance meeting. Any referrals a clinician feels are inappropriate should be communicated to the BEMS administration team to log and collect data and note any patterns.

ENHANCED ACCESS SERVICE

Clinical Consultation Audit – September 2023

- **Objective:** Measure the standard of clinical consultations and documentation against the accepted standards defined in the Royal College of General Practitioners (RCGP) (2010) Universal Urgent and Emergency Care Clinical Audit Tool. Review prescribing decisions against local formulary and national guidance.
- **Outcome:** 91% of consultations were green / excellent. 9% were amber / good. Less than 1% (one consultation) scored 67% reflecting briefer documentation and some limited rationale.
- **Action:** Once cases have been reviewed, emails are automatically sent directly to the clinician to see the score and the feedback provided. Any concerns are raised directly with the auditing team, which is then passed to the Clinical Lead GP and Quality and Clinical Governance Director, for further follow up with the clinician involved.

Cervical Screening Audit – February 2024

- **Objective:** A retrospective review of patients who attended for cervical screening from October 2023 to January 2024 was completed to assess the quality of cervical screening samples taken by BEMS EA nursing staff.
- **Outcome:** The audit identified 24 patients had attended for cervical screening. Of these: 96% had HPV negative result with routine or cease recall follow-up, 4% had HPV positive and referred to colposcopy for low grade dyskaryosis. All had TZ cells present. Nil inadequate results.
- **Action:** Disseminated results to BEMS Enhanced Access nurses. Plan to repeat audit quarterly

PAEDIATRIC URGENT SERVICE HUB

Paediatric Urgent Service Hub Outcomes Audit – March 2024

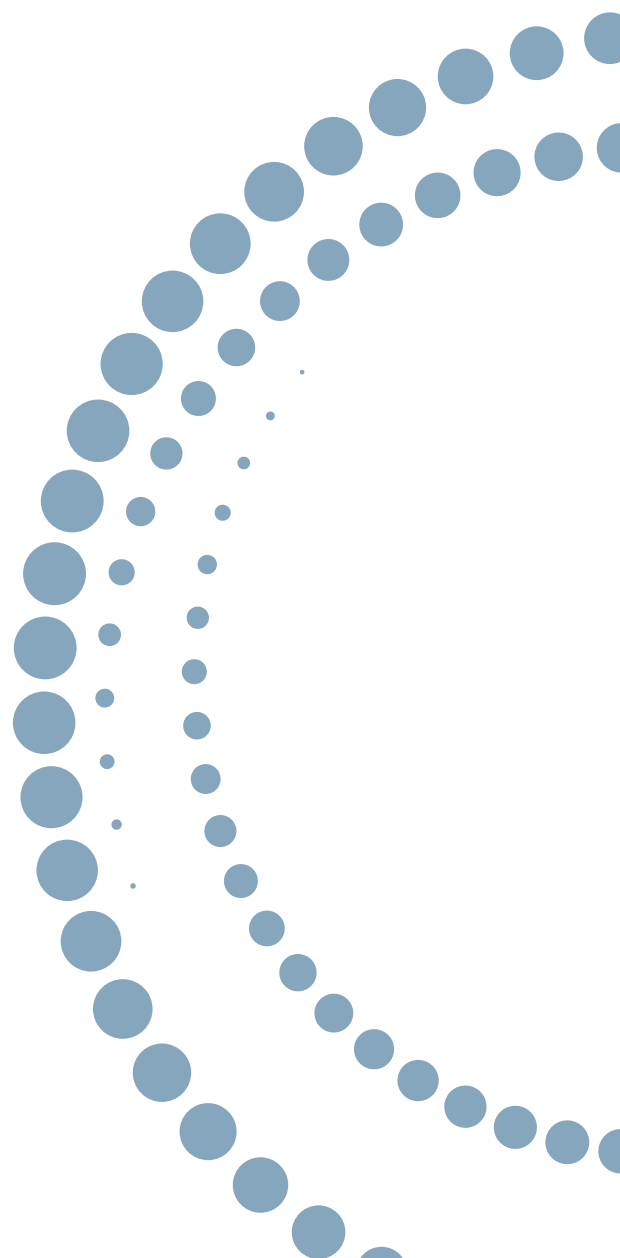
- **Objective:** The audit was required to review data on the safety and effectiveness of PUSH consultation outcomes. Key objectives: To review the diagnosis and treatment options and antibiotic prescribing, identify the rates of RUH ED attendance after the PUSH consultation and the follow-up of patients who do not attend with consideration of Was Not Brought Policy
- **Outcome:** This audit provides evidence that children assessed and treated in the BEMS PUSH clinic during received timely, face to face assessments in primary care and were managed appropriately. Of those prescribed medication, most were antibiotics for respiratory tract infection, tonsillitis, otitis media, skin infection and scarlet fever with appropriate prescribing first and second line as per local BSW ICB formulary guidance.

BEMS PUSH consultations continued to generate a low rate of follow-up consultations within general practice or the RUH emergency department.

- **Action:** Review the actioning of swab results taken in PUSH to ensure timely and appropriate follow-up.

ADDITIONAL SURVEYS/AUDIT

- **NICE compliance:** NICE guidance is reviewed, disseminated to service leads and discussed. Services are sent guidelines that affect their service.
- **Record keeping:** All records across all services had patients name, date of birth and NHS number.
- **Premises:** Health and Safety & DDA audit completed on all premises where BEMS carry out services,



PART 4 - LOOKING BACK: REVIEW OF PRIORITIES IN 2023/24

26

1. Increase the workforce skill mix throughout our Clinical Services, to ensure that we can offer patients the best appointment for them, first time.

During 2023, BEMS started running a soft tissue-only service from a GP Surgery site in Bath City, to provide additional capacity supporting the wider Fracture and Soft Tissue Injury Service. Providing a soft tissue-only service has allowed us to ensure the appointments held at sites with x-ray and plaster technician services are utilised for the most appropriate cohort of patients. Due to the success of these soft tissue only clinics, with positive patient feedback, during 2024 BEMS plan to explore physiotherapist first options.

During 2024, BEMS wrote a business case to the commissioners of our Enhanced Access Service, to consider provision of healthcare assistant appointments for blood tests, allowing BEMS to better utilise the appointments offered in our experienced nurse clinics. This would free up nursing staff to provide more complex appointments for patients, and support the best appointment for patients, first time. BEMS will adapt the service as required once a decision has been made by our commissioners.

2. Continue to explore new technologies, either administrative or clinical, that improve patient care and workforce management.

During 2023/24, BEMS continued to explore new technologies, and how best to utilise existing technology to its full potential. A number of improvements have been made this year including:

- Giving access to GPs within the Fracture and Soft Tissue Injury Service to be able to complete Statement of Fitness for Work Med3 certificates electronically on SystmOne. This reduces the administrative workload of the task for the GPs, and provides a safer, more secure system for patients to receive these important certificates.
- Completed the IT configuration required by NHS Digital, for nurses working in our Enhanced Access Service to be able to use the new Cervical Screening Management System. This is a new cloud-based system will replace the current process whereby the patients Practice have to part complete a PDF form and save it on the patient record. The new process will empower our team to complete all of the task, saving administrative workload for the Practices booking the appointments.
- Began working with Urgent Care Centre in RUH to allow access to BEMS referrals forms for the clinical system used in the Emergency Department. This will improve access to BEMS DVT and Fracture and Soft Tissue services for Emergency Department and Urgent Care Centre clinicians, offering greater choice for patients.
- Implemented a new system in our Dermatology Service, sending mandatory mental health questionnaires to patients. Questionnaires are sent via an SMS message to patients, to be completed, and results are automatically input onto their SystmOne record. This reduces time needed within the appointment and increases accessibility for patients.

1. Benchmark more of our services against similar community-based services.

The purpose of benchmarking in healthcare is to improve efficiency, quality of care, patient safety, patient satisfaction and benefit from sharing best practice. The process involves looking at standards, best practice, and evidence-based practice and then identifying potential areas of improvement.

During 2023/24, BEMS undertook benchmarking exercises for our Fracture and Soft Tissue Injury Service, our Community DVT Service and the Covid Medicine Delivery Unit.

The benchmarking exercise with a Wiltshire-based Community Fracture Clinic allowed us to compare referral pathways, workforce models, key performance indicators and audits. The exercise highlighted the key differences in our services with relation to staffing model, as their service has separate fracture, soft tissue and orthopaedic interface pathways, and clinics staffed by Advanced Physiotherapy Practitioners (APPs) and First Contact Practitioners (FCPs). As competency in clinical skills varies between these multi-disciplinary practitioners, treatments like steroid injections are provided in the orthopaedic interface clinic only. All BEMS fracture and soft tissue clinics are staffed by GPs with specialist interest (GPwER), so all can provide steroid injections and request and review x-rays. Having recently set-up a Soft Tissue-only clinic as part of our service, it was beneficial to learn about their triage model for ensuring patients go to the right clinic, first time. The service also indicated they carry out frequent audits on x-ray use, to ensure appropriate clinical assessment and requesting of x-rays is achieved. BEMS carry this out annually for MRI requests, but not for x-rays, therefore this has been added to our 2024/25 audit planner.

BEMS also met with a local service provider of DVT scanning services. BEMS and the provider undertook a full review of the referral and treatment pathway. This review highlighted different models of care for pre-scan and post-scan. BEMS model is unique as the General Practices in BaNES who refer into the service are subcontracted to provide the initial DVT risk assessment consultation, as well as post-scan clinical care and prescribing of anti-coagulation if required. BEMS and the provider agreed to work together in 2024/25 to align referral pathways, and explore the expansion of a community-based model like BEMS within their geography.

After the CMDU service began in 2024, BEMS arranged an external review of consultation notes with the three acute providers who previously prescribed this anti-viral medication. Clinical analysis from a team of consultants and pharmacists highlighted that all clinical assessments and prescribed covid-19 antiviral medications were managed within national and local recommendations and guidelines. BEMS service provided consistency of provision and referral onwards for IV therapy, compared to the three acutes that all had separate pathways. This ensures an equity of offering for all patients across BaNES, Swindon and Wiltshire.

Also, as a continued member of the Association of Surgeons in Primary Care, we monitor our post-procedure infection rates in the Community Dermatology Service and compare with the national data.

2. Continue to carry out infection control visits of all sites in light of changing Covid-19 requirements and incorporation of the National Standards of Healthcare Cleanliness 2021.

The impact of Covid-19 on infection prevention and control has been significant and BEMS continued to focus on this during 2023/24. As the national guidance has changed, BEMS Infection Control Lead has reviewed and amended BEMS policies, which have been shared with all staff.

BEMS provides clinical services within host sites including General Practice surgeries and community hospitals. An annual IPC risk assessment and audit of premises hosting BEMS clinical services is completed to ensure appropriate standards of environmental cleanliness and IPC procedures are evident and maintained. During 2023/24, BEMS visited all 11 sites that we use. An audit report was written for each host site with an action plan and review date set and shared with the host site Infection Control lead.

During 2023/24, the United Kingdom Health Security Agency (UKHSA) declared a national incident following an outbreak of measles in the West Midlands. BEMS implemented the IPC priority actions to reduce the risk of measles transmission within BEMS clinical services. This included a measles risk assessment and identification of engineering / administration controls and provision of respiratory PPE. An action plan was implemented:

- All patient facing staff were asked to provide evidence of MMR vaccination or immunity to measles as per national guidance.
- Completed risk assessments for specific staff who may be immunocompromised or pregnant as per national guidance.

- Communicated to Paediatric Urgent Service Hub and Enhanced Access GPs regarding clinical and epidemiological features of measles; IPC measures and procedures for managing patients with a fever and rash and how to notify the South West Health Protection Team of a suspected measles case.
- All relevant local and national guidelines circulated to clinicians.
- BEMS Enhanced Access receptionists briefed on the procedure for their site on what side room is to be used in the unlikely event a patient with a fever and rash is booked into the clinic.
- Standard Operating Procedure (SOP) developed for PUSH: The booking practices asked to include in the booking appointment if the patient has a rash and fever, a contact number and tell them that a member of the BEMS team will phone them to advise where to wait. Initial Triage by the BEMS administrator who will telephone the parent, check the child's MMR vaccination status and advise the parent where to wait at the specific PUSH site
- PPE provided for airborne transmission-based precautions in line with national guidance.
- BEMS Project Manager completed FFp3 mask fit test training.

3. Carry out learning disability and autism reviews for all BEMS services, to ensure reasonable adjustments are made to reduce potential health inequalities for this cohort of patients

During 2023/24, BEMS completed a project to ensure that any patients with a learning disability have the opportunity to access reasonable adjustments. This is to make sure people with a learning disability can use our services in the same way as others and helps to safeguard equity of access, experiences and outcomes. The plan implemented this year included:

- Creation of easy read leaflets for each service with additional leaflets for more complex services this allows patients to know what to expect all the way through their journey within BEMS services. We now have the following leaflets available to patients: Fracture and Soft Tissue - what to expect at appointment, x-ray, physiotherapy, steroid injections & plaster. Dermatology - What to expect at appointment. DVT- What to expect at your appointment.
- Presentation to all the BEMS administrative team which can be used again whenever we have a new member of staff. This explains about what making a reasonable adjustment is and what kind of things we can offer to patients i.e. offering double appointments, giving the patients a choice about how they would find it easier to be contacted, taking the time to explain and make sure patients understand, making patients aware that they are welcome to bring someone along to appointment with them.
- Patients now have the option to email us to book an appointment if they prefer not to speak on the phone or respond to SMS.

All these materials have been shared and implemented with the clinical and administrative teams of all services.

BEMS continue to review useful tools and literature, and ensure that Learning Disability and Autism Awareness is an agenda item at all quarterly Service Clinical Governance meetings.

1. Work with different teams and professions across BaNES to improve access to BEMS services, offering greater variety of locations and appointment options in response to Core20PLUS5 health inequality data.

A core aim of BEMS has always been moving services from hospitals into the community and footprint of General Practice. Utilising local population health management data and working with partners in other healthcare and third sector organisations, BEMS seek to increase choice for patients where it can make the biggest difference, and reduce reliance on acute care services.

BEMS started providing Enhanced Access from a surgery in Bath that had low usage, partly due to high levels of deprivation, and transport barriers to the usual Bath sites. This has increased usage by this Practice from an average of 9 bookings per month, to an average of 48 bookings per month. This increased usage of the service continued when the service moved to another location for three months. BEMS have also started running our Fracture and Soft Tissue Injury Service from a GP Surgery in Bath City centre. The service stopped providing clinics in Bath after we had to leave our old Bath site, and both remaining sites were outside of Bath. This new site gives equity of access to patients in Bath that cannot easily access services outside of Bath due to transport links and costs.

Moreover, BEMS were asked to provide a Paediatric Urgent Service Hub, for the third year in a row. This year, BEMS increased sites from three to seven and included two sites based in Practices with the highest levels of deprivation.

BEMS also focused on a specific health inequality project in 2023/24, running two outreach health and wellbeing sessions at an assisted living facility in an area of deprivation, in Bath.

These were set up as a collaboration between BEMS, a local GP Surgery, the Public Health team, B&NES vaccination team, and a local charity. The sessions offered a range of services to those residing on site who may be visually impaired, deaf, and have learning disabilities. The aim was to encourage the uptake of vaccinations, cancer screening, learning disability health checks and healthy lifestyle advice in a safe and welcoming environment. Across both events, many vaccinations and health checks were completed, along with cancer screening arranged.

2. Align our Primary Care services, such as Enhanced Access and Home Visiting, more closely with the core offering of General Practice.

During 2023/24, BEMS stopped providing the Home Visiting Service, helping the Practices in BaNES develop their own models of care.

However, within the Enhanced Access Service, BEMS have endeavoured to develop the skillset and competencies of staff, to expand the offering of appointment types to mirror core General Practice.

BEMS are now providing cervical screening and B12 injections within the Enhanced Access service with our nursing team, expanding the offering to Practices and patients within these out of hours timeslots. BEMS continue to work with NHS Digital to access the new Cervical Screening Management System when it is introduced during 2024, to improve the efficiency of undertaking cervical screening within Enhanced Access.

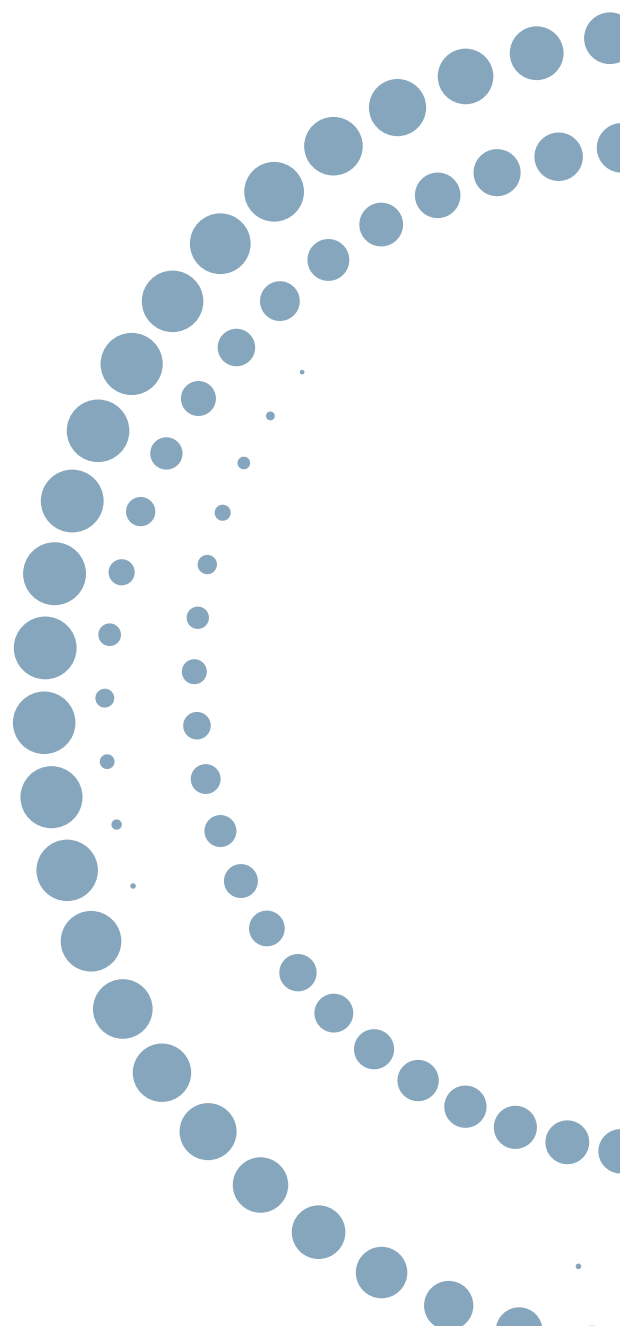
3. Work collaboratively with primary care, secondary care the third sector and community colleagues to improve the experiences of patients living with cancer, and those primary care staff caring for cancer patients.

BEMS have been working this year to ensure the delivery of the NHS England personalised care and support agenda by developing, delivering and promoting a package of support and education for RUH-facing BSW primary care to improve quality of life outcomes for patients diagnosed with cancer. This supports practice staff to maximise the opportunity during cancer care reviews with their patients.

During 2023/24, BEMS Cancer Care Facilitator developed a presentation for Practices and Primary Care Networks, which has been delivered to 13 out of 20 Practices in BaNES. BEMS have also compiled a resource pack to support Practices in implementing quality improvement for their Cancer reviews, incorporating personalised care initiatives. This includes a cancer care postcard with links to the BEMS cancer information website, so all the information on cancer support will be available for patients at this point of their care.

A benchmarking exercise was also undertaken with the Cheshire and Merseyside Cancer Alliance, sharing information and receiving valuable resources and data from Liverpool area, to inform BaNES projects.

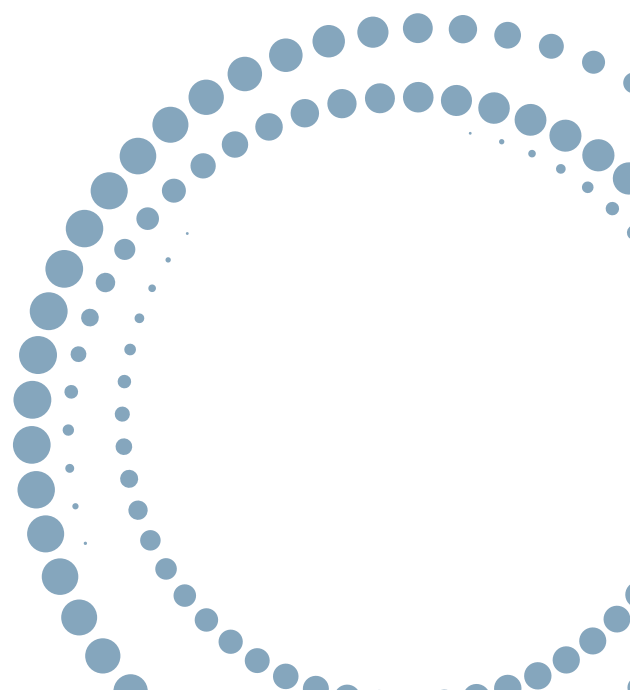
The Cancer Care Facilitator role has liaised closely with our local acute hospital Cancer Support teams, and attended monthly hospital-led health and wellbeing events. This allows BEMS to share information on the continuing support from primary care, community and volunteer sector for patients after transferring from hospital care.





PART 5 – PRIORITIES FOR 2024/25

Our priorities for 2024/25 have been identified by taking into account feedback from patients, service users, staff, commissioners and stakeholders. Some of the priorities we agreed in 2023/24 were not met in full. However, we believe that these priorities are still important, so some have been carried forward into 2024/25.



1) Adapt BEMS policies and procedures for incident management, in line with the Patient Safety Incident Response Framework.

PSIRF fundamentally shifts how the NHS responds to patient safety incidents for learning and improvement. PSIRF is not an investigation framework that prescribes what to investigate, instead, PSIRF:

- advocates a co-ordinated and data-driven approach to patient safety incidents.
- response that prioritises compassionate engagement with those affected
- embeds patient safety incident response within a wider system of improvement.
- prompts a significant cultural shift towards systematic patient safety management.

To support these changes, BEMS will:

- Create a new Patient Safety Incident Response Policy
- Create a new Patient Safety Incident Response Plan
- Establish a clear process for reporting patient safety incident via LFPSE
- Update the Adverse Incident Reporting, Investigation and Learning Policy

2) In light of the Safeguarding Survey action plan results, BEMS will review and revamp our safeguarding processes. This will ensure there is a robust understanding of safeguarding and the correct processes throughout the referral procedure and eliminate any barriers to identifying and actioning safeguarding events.

Key areas that we will be focusing on during 2024/25 will be:

- Developing a two-page poster to enhance communication with all BEMS staff regarding safeguarding training requirements and avenues to access training.
- Working with RUH safeguarding team to better understand the RUH safeguarding process and protocols and develop a robust induction for Urgent Care Centre staff that links in with the RUH safeguarding training and teams.

- Continue to audit clinical consultation documentation for all services to monitor compliance with recording 'safeguarding' or 'no safeguarding concerns' on the BEMS templates, and compliance with BEMS Was Not Brought Policy.

1)Continue to explore new technologies, either administrative or clinical, that improve patient care and workforce management.

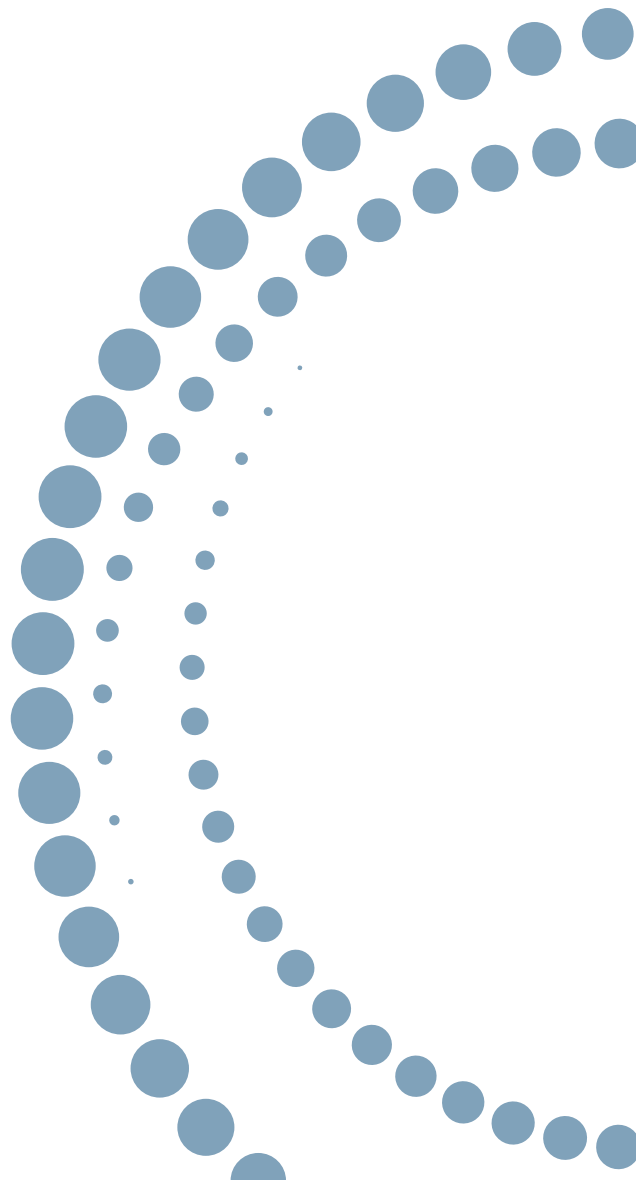
BEMS are keen to utilise new technology to improve the experience of our services for both patients and staff.

Key areas that we will be focusing on during 2024/25 will be:

- Reviewing online booking and cancellation options, and integration with the rollout of expanded NHS App functions.
- Focusing on the use of Clarity TeamNet to support HR, finance and governance functions, as well as its use as a portal to share key information with our General Practice members and Primary Care Networks.
- Continued exploration into online tools that support back-office functions and increase efficiency. Share learning with our General Practice members.

2)Benchmark more of our services against similar community-based services.

The purpose of benchmarking in healthcare is to improve efficiency, quality of care, patient safety and patient satisfaction. The process involves looking at standards, best practice, and evidence-based practice and then identifying potential areas of improvement.



1) Work with different teams and professions across BaNES to improve access to BEMS services, in response to Core20PLUS5 health inequality data.

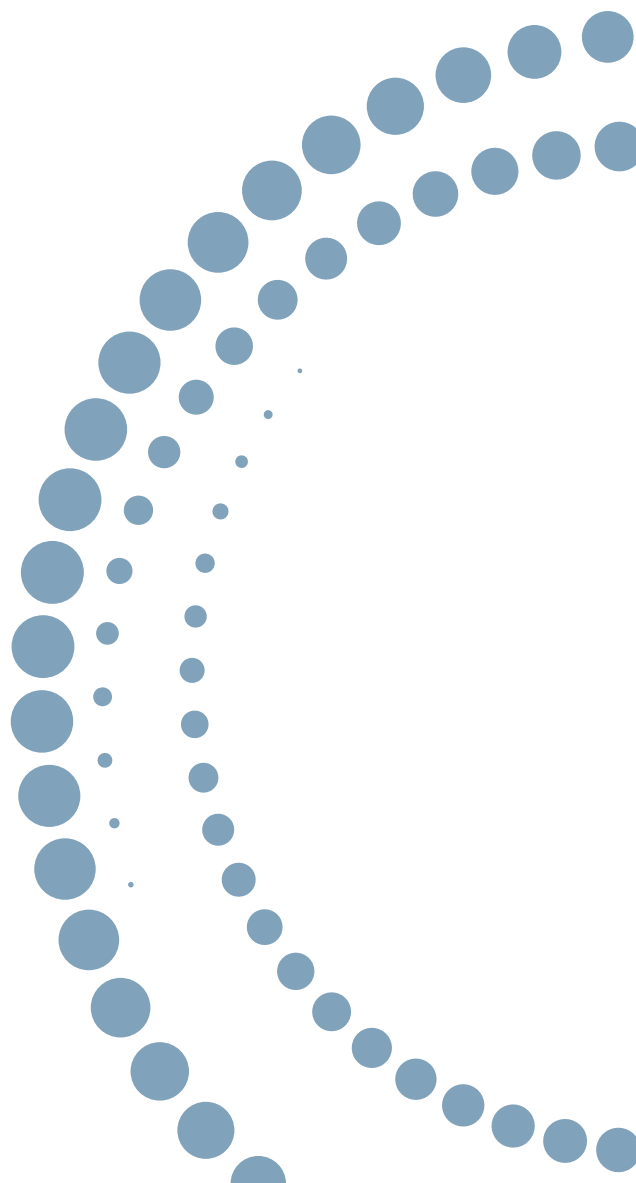
A core aim of BEMS has always been moving services from hospitals into the community and footprint of General Practice. It is a system priority to utilise local population health management data, and work with partners in other healthcare and third sector organisations. To support this, BEMS will seek to increase choice for patients where it can make the biggest difference and reduce reliance on acute care services, working with partners to set-up outreach clinics where appropriate.

2) Work collaboratively with primary care, secondary care the third sector and community colleagues to improve the experiences of patients living with cancer, and those primary care staff caring for cancer patients.

Help ensure the delivery of the NHS England personalised care and support agenda by developing, delivering and promoting a package of support and education for RUH-facing BSW primary care to improve quality of life outcomes for patients diagnosed with cancer. This will help support practice staff to maximise the opportunity during cancer care reviews with their patients.

3) Utilise BEMS formal position as part of the BaNES Place-based Integrated Care Alliance to ensure patient experience is at the heart of community services re-design.

Ensure a focus on partnership working and integration with local health and social care providers, and the third sector. Putting patient experience first and working to improve pathways and reduce barriers to care, for new and existing services, including preventative care.



STATEMENT FROM BSW ICB ON BEMS 2023/24 QUALITY ACCOUNT

36

NHS Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board (ICB) welcome the opportunity to review and comment on the BEMS Quality Account for 2023/ 2024. In so far as the ICB has been able to check the factual details, the view is that the Quality Account is materially accurate in line with information presented to the ICB via contractual monitoring and quality visits and is presented in the format required by NHSE/I presentation guidance.

It is the view of the ICB that the Quality Account reflects BEMS' on-going commitment to quality improvement and addressing key issues in a focused and innovative way. BEMS has been able to make achievements against all their priorities for 2023/24 including:

:

PATIENT SAFETY

- Increasing the workforce skill mix throughout Clinical Services, to ensure patients are offered the best appointment for them, first time.
- Continuing to explore new technologies, either administrative or clinical, that improve patient care and workforce management.

CLINICAL EFFECTIVENESS

- Benchmarking BEMS services against similar community-based services.
- Continuation of infection prevention and control visits of all sites, which the ICB recognises will need to be in line with The National Infection Prevention and Control Manual and the National Cleanliness Standards 2022.

- Carrying out learning disability and autism reviews for all BEMS services, ensuring reasonable adjustments are made to reduce potential health inequalities for this cohort of patients.

PATIENT EXPERIENCE

- Working with different teams and professions across BaNES to improve access to BEMS services, offering greater variety of locations and appointment options in response to Core20PLUS5 health inequality data.
- Aligning Primary Care services, such as Enhanced Access and Home Visiting, more closely with the core offering of General Practice.
- Working collaboratively with primary care, secondary care the third sector and community colleagues to improve the experiences of patients living with cancer, and those primary care staff caring for cancer patients.

The ICB also notes the identified Quality Priorities for 2024/2025, which include:

- The alignment of BEMS policies and procedures for incident management with the new national Patient Safety Incident Response Framework
- Further improving access to BEMS services in response to health inequalities data
- Continued collaboration with services within primary care, secondary care, the third sector and the community, aimed at improving the experiences of people living with cancer

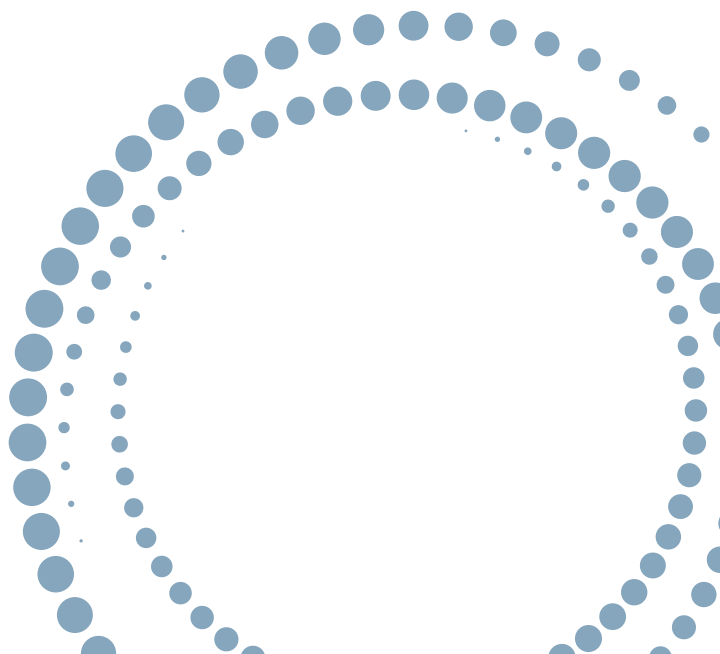
We look forward to seeing progress with the quality priorities identified in this Quality Account in conjunction with the continued transition to PSIRF and the implementation of the organisation's Patient Safety Incident Response Plans (PSIRPs).

NHS Bath and North East Somerset, Swindon and Wiltshire ICB are committed to sustaining strong working relationships with BEMS, and together with wider stakeholders, will continue to work collaboratively to achieve our shared priorities as the Integrated Care System further develops in 2024/25.

Yours sincerely



Gill May
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BSW ICB





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