



## Leading the Way for Change Award

**Services who have identified and filled a gap that has had a positive impact on those they support.**

### **Amanda Chalmers, Trauma Informed Practice Lead, Middlesbrough Council**

Amanda has been nominated by Richie Andrew who works alongside Amanda in the Public Health South Tees service. Amanda joined the service in the last couple of years, appointed as the Trauma Informed Practice Lead, funded through Changing Futures programme. This new role became about growing a new movement to embrace values of trauma informed and enable more work within our communities to not just operate in a more trauma informed way but adopt new therapeutic approaches, entirely different to what has been attempted before.

Amanda has been engaging with a variety of in-house services, external anchor institutions and targeted VCS organisations who work with the most vulnerable people experiencing domestic violence, homelessness or addiction. Her approach has been at scale, to raise awareness within organisational practice, individual practice and strategically for what good trauma informed practice looks like and how to do it. What is different about the work she has done, is difficult to summarise in a few words. She is happy to roll up her sleeves and demonstrate, challenge and thus inspire others to become the change makers towards trauma informed. She has listened to organisational needs and responded by provided hands on guidance, extensive training that she has coordinated or delivered herself (including a formal trauma informed practitioners programme to nearly 60 key workers locally) and forging her own network of local gatekeepers to system change in some of the most important corners of our communities. She has also created a new Trauma informed champions network of practitioners who will now serve as an 'army' of sorts to push and nudge for change right across the system.



### **Andrea McGloughlin, Suicide Prevention, Middlesbrough Council**

Andrea has been nominated by colleague Richie. Andrea leads right across the Tees wide patch on preventing suicide, taking lead from national, regional and local insights to further the work to prevent the high number of suicides we experience locally.

Andrea's work is broad but specific to the area of preventing suicide within the Tees area. A combination of factors including the update of the National Suicide prevention strategy, refresh of the Tees suicide prevention taskforces plan, local insights from a variety of reports and partners and being spurred by members insights from the South Tees Wellbeing Network, to focus on more exploration and action on this topic area. Andrea's response has been multi-faceted, engagement with lived experience groups, partnership for mental health and her own suicide prevention taskforce has elicited a next phase in this important work, which in terms of my awareness has seen 3 major pieces of work occur that combine to really drive forward this work.

The pieces of work include supporting a pilot to look at the unseen and unrecorded suicide prevention that happens, often in the voluntary sector quote away from the police, local authority or NHS. Secondly, she has fully refreshed the suspected suicide data and worked hard to get the implications of this data into the hands of those that can make good use of it, and thirdly, the incredibly high quality 2023 Tees wide suicide prevention conference to align work across the sector towards the new national strategy and seek input and feedback directly from stakeholders to shape the new local plan. There is little doubt in my mind that the event was attended by the vast majority of key stakeholders and that the new plan, is a solid representation of needs locally.

### **Enhancing Physical Health Team, TEWV NHS Trust**

The Enhancing Physical health team for people with learning disabilities - TEWV adult LD has been nominated by Vicki Spall.

This service is to be recognised to increase our support into primary services and enable good health outcomes for all patients with a learning disability. LEDER highlights that the physical health of people with a learning disability is poorer than those of the general population and we are highly passionate about changing that. We want to prioritise improving physical health in all services, whether this be, patients own home, care homes, residential setting and day service provisions. We need to make physical health a number one priority, we are going to reduce the number of preventable deaths, we are going to improve



health care access and we are going to increase reasonable adjustments where necessary, we will continue to fight for our Learning disability population.

Our aim is to upskill all professionals, even without a learning disability background, to understand the needs and complications when working with people with learning disabilities. And our aim is to put ourselves out of a job, because our aim is to not be needed due to our population of people are receiving the health care they deserve and they are listened to, and understood.

We go above and beyond working outside our working hours to meet the needs of services, GP's and hospital appointments – although we do not see this as going above and beyond, we see this as doing our job properly. We make good working relationships with our patients, we gain trust and respect.

We provide health promotional sessions to all day service provisions, which is not part of our commissioning, however we believe this will help improve health outcomes, improve knowledge and improve uptake of health screenings and annual health checks, if carers/parents/ service users are aware of what they are entitled to, then they are more inclined to complete, and we will support further if necessary.

### **Reach and Respond, Beyond Housing**

Reach & Respond, nominated by Laura Harrison, provides a range of services helping people stay happy, healthy and independent in their own homes. Our services range from technology solutions to welfare calls/visits. We provide customers and their family with the reassurance that no matter what the emergency or when it happens, someone will be there to help. With just the push of a button, our response team are here 24/7, 365 days a year. Independence is something we all cherish and want to keep as long as possible. When circumstances change, some extra support to stay safe while living independently may be needed.

Reach & Respond have delivered major transformation through an approach encompassing education, technology, processes, and insights. Our active participation in various events signifies a commitment to knowledge-sharing and community engagement. By educating others on the importance of digital readiness in the context of the impending transition from analogue phone lines to digital systems, we have helped lay the groundwork for broader awareness and preparedness. The transformation has had profound effects on people's lives, measurable through various indicators such as community satisfaction, tangible



savings, and overall outcomes. One key measure of success lies in the heightened awareness and understanding of being digitally ready among people impacted by the digital switch. The educational initiatives undertaken at events have contributed to an informed and empowered community, fostering a sense of preparedness.

### **Sarah Winspear & Laura Paterson, RCBC & South Tees Hospitals NHS Foundation Trust**

This nomination has been submitted by Fiona Oliver the Service Manager for the Health Visiting Service in Redcar and Cleveland and line manages Sarah Winspear. Sarah is our Health Visitor Infant Feeding Lead within RCBC, who works collaboratively with her counterpart Laura Paterson – Infant Feeding Midwife at James Cook University Hospital. Sarah and Laura support mothers with complex breastfeeding issues. The Family Hub Transformation funding enabled Sarah and Laura Paterson to undertake the training to be able to assess and undertake the tongue-tie division.

Tongue-tie (frenulotomy) is when the strip of tissue attaching to the tongue to the floor of the mouth is shorter than normal. It can make it harder for mothers to breastfeed their babies by preventing them from latching on properly which can then lead to sore or cracked nipples. Our breastfeeding lactation consultant, Sarah had been trained to assess babies for tongue tie and then was able to refer to acute hospital settings for a tongue-tie division. However, these clinics were at the RVI, Newcastle; Sunderland & Darlington. Mothers and babies had to travel, many using public transport to be able to access the clinic which is a significant distance and cost. Sarah and Laura identified this as a gap in the availability and accessibility of a local service for babies and their mothers. Additionally, there was a waiting list for this clinic as it was a regional clinic, often waiting a further 6 weeks after assessment for the procedure. This impacted upon the baby's feeding, growth as latching on was impeded due to the tongue tie. The Family Hub Transformation funding enabled Sarah and Laura Paterson to undertake the training to be able to assess and undertake the tongue-tie division. Whilst undertaking the training, Sarah and Laura commenced the process of developing and presenting a business case to South Tees NHS Foundation Trust to collaboratively set up a local tongue tie clinic. Their business case was devised to provide a tongue tie service whereby assessment and frenulotomy would be undertaken alongside breastfeeding support. Each client would be offered a 60 minute appointment slot, whereby a breastfeeding assessment and tongue tie



assessment would be completed. If a frenulotomy were to be required, it would be offered and completed there and then. Consent was to be obtained from the person with parental responsibility and all risks discussed. Following the approval of the business case Sarah and Laura were good to go and their first clinic was held on 18th January 2024. Their first clinic held at James Cook Hospital was fully booked.

The first two weekly clinics resulted in 11 referrals into the service, consisting mainly of the babies who were identified in November and December 2023 – of which 6 babies had the division completed and 5 babies were provided with additional breastfeeding support. Currently the weekly clinic has worked through the initial waiting list and now babies and their mothers are seen within 2 weeks of referral. The setting up of this service, has provided babies and their mothers with a locally accessible solution, very timely from referral to completion, therefore improving the likelihood of breastfeeding being sustained. The development of a high quality, evidence-based service for our area is a big win win! The motivation and enthusiasm of Sarah and Laura to pursue their vision has ensured that it has become a reality to the benefit of breastfeeding babies and their mothers in South Tees – well done – fantastic achievement!

### **Tees Valley Targeted Lung Health Check (TLHC) Programme, South Tees Hospitals NHS Foundation Trust**

This team has been nominated by Ellen Castling, the operational lead for the Tees Valley Targeted Lung Health Check (TLHC). The team consists of 10 people who work across 3 trusts (NTees, STees & CDDFT) to deliver the TLHC service to patients across the Tees Valley.

The team go above and beyond to deliver the programme, identifying lung cancer early and supporting patients through the process, from initial appointment, diagnosis and treatment; contributing to the overall Long Term Plan early diagnosis of cancer ambition.

The TLHC programme started off as a pilot and is now a national programme which offers people aged 55 to 74 who have never smoked the opportunity to have a lung health check; and for those at risk of lung cancer, a referral to lung cancer screening with a low-dose computed tomography (LDCT) scan of the chest. The programme contributes to the overall Long Term Plan early diagnosis of cancer ambition, stating that by 2028 the proportion of cancers diagnosed at stage one and two will rise to three quarters of cancer patients.



The team have been delivering the TLHC service for 18 months and have so far completed 9868 CT scans and identified 116 lung cancers, 73% of these are stage 1 or 2. We've also incidentally identified other cancers and healthcare needs which would have otherwise been left undetected until they developed into a significant health concern, highly likely placing additional pressure on secondary care.

The team go the extra mile to ensure any health inequalities are addressed and the programme can support the needs of the patients. The clinicians support the programme by attending MDTs and ensuring clinical pathways are in place to support clinical investigation and treatment. The cancer care coordinators provide continuity in the communication of information and are a single point of contact so they can be responsive to the needs of the patient throughout the process. They've received excellent feedback from patients.

Because of this we have excellent uptake rates for the programme, at 69% this is way above the national average of 44% and patients have agreed to go on Look North in support of the programme and give personal thanks to the team, encouraging others to take up the offer.

The team also supports making every contact count, encouraging uptake to other available screening programmes, smoking cessation and encouraging patients to do everything possible to be proactive with their own health and wellbeing.

### **The Home First Team (Tees Community), South Tees Hospitals NHS Foundation Trust**

This team has been nominated by their service manager, Rebecca Shea, for going above and beyond in developing a brand-new service for the local population.

The team have sped up discharge out of hospital for patients who need support in their own homes. The service did not exist up until 18 months ago. They have cut down the length of hospital stays. The patient then gets to be treated in their own home by a dedicated team of professionals who help enable people to improve their own health and their wellbeing. The team has dramatically changed the lives of many people- they have reduced pressures on social care systems by working with patients to make them more independent.

This project started as a pilot and due to its success became permanent. Over 50% of the patients who have been on the service in recent months have not needed ongoing support on discharge from this service. The team have cut down lengthy processes and streamlined services to enable more people to be seen

and are committed to improving patient journeys further. The patient and carer feedback received has been outstanding. I am very proud of the journey so far.

