# Appendix A

#### **APPENDIX A**

#### LINCOLNSHIRE INTEGRATED HEALTH PROTECTION FRAMEWORK 2023/24

#### 1. Introduction

The 2022 Health and Care Act introduced new legislative measures that aim to make it easier for health and care organisations to deliver joined-up care for people who rely on multiple different services. The introduction of ICPs and ICBs means the health and care system is facing momentous change, strengthening partnerships between the NHS, local authorities, and other local partners, including groups representing the public and patient perspective, the voluntary sector, and wider public service provision.

In line with the shift towards greater collaboration and integrated working, the Integrated Health Protection Framework sets out the arrangements in place to strengthen strategic, tactical, and operational cooperation between system partners, to optimise delivery and/or assurance on the following key Health Protection areas:

- Infection Prevention & Control (IPC) in health and care settings of healthcare acquired infections (HCAI).
- Communicable Diseases Incident and Outbreak Management, including Tuberculosis & Hepatitis.

The framework sets out the core principles for integrated working across the Health and Care system to deliver against the key Health Protection areas outlined above. The framework demonstrates a common desire of the system Health Protection functions to create a more effective integrated partnership working arrangement through:

- Developing joint priorities for health protection activities across health and care organisations locally
- Agreeing a system Health Protection Strategy with shared strategic objectives.

Each constituent organisation within this Framework remains responsible and accountable for the delivery of their Health Protection functions in accordance with their relevant statutory duties. Formal consultation of the newly developed framework is underway with system partners currently.

#### 2. What does this mean in principle?

This framework demonstrates a common desire of the system Health Protection functions to create a more effective integrated partnership working arrangement through:

- Joint priorities for health protection activities across health and care organisations.
- Agreeing a system Health Protection Strategy with shared strategic objectives.

# 3. Operational Delivery and Administration

The operational delivery of work undertaken within the scope of this framework will be led by the Integrated Health Protection Working Group (IHPWG). The Terms of Reference for IHPWG will be ratified by Health Protection Board. The administrative duties to support the effective running of the IHPWG will be shared between LCC and LICB on a rotational basis.

# 4. Health Protection Integrated Pathways

The following tables identify each organisations' core workstreams and the opportunities for integrated working within the identified Health Protection areas:

### IP&C

LCC core work	Integrated working opportunities	LICB core work
<ul> <li>IP&amp;C QA and support to LCC commissioned services including outbreak oversight and support.</li> <li>Delivery of Adult Social Care IP&amp;C Link Practitioner programmes.</li> </ul>	<ul> <li>System IP&amp;C Group joint initiatives.</li> <li>Joint IP&amp;C Link Practitioner programmes and framework (to include all system partners).</li> <li>Core IPC Training/ CPD offer to include a range of common roles in health and care settings.</li> <li>Joint IP&amp;C promotional activities e.g. hand hygiene day and antibiotic awareness.</li> <li>Joint delivery of an annual IP&amp;C conference for Health and Care.</li> <li>Use of NHS Futures platform to share documentation and resources.</li> </ul>	<ul> <li>IP&amp;C QA and support to LICB commissioned services including outbreak oversight and support.</li> <li>Delivery of Primary Medical Care IP&amp;C Link Practitioner programmes (other Primary Care programmes to be added).</li> </ul>

### **CDC incidents and outbreaks**

LCC core work	Integrated working opportunities	LICB core work
Clinical support	Joint clinical CDC incident and outbreak	Coordination and/or
to outbreaks in	response function.	delivery of the CDC
Care Homes,	Having an awareness of each	Health response
Education and	organisations' legal duties under the Civil	including where
early years, and	Contingencies Act.	necessary mobilisation
Asylum Seeker	Winter preparedness and response	of additional health
Accommodation	arrangements.	resources.
settings. This		• Clinical team administer
includes		using PGDs where

## 5. Capacity Management

LCC's core permanent nursing model consists of:

- 3 x 1.0 WTE Senior Health Protection Nurses
- 1 x 0.6 WTE Senior Health Protection Nurse

For LCC to maintain its core function – which includes outbreak management and swabbing in care settings, schools and early years settings, and asylum accommodation settings – a minimum of two Senior Health Protection Nurses must be available and assigned to the duty desk during business working hours.

LICB's core permanent nursing model consists of:

- 1 x 1.0 WTE Lead Nurse
- 2 x 1.0 WTE Senior Health Protection Nurses
- 1 x 1.0 WTE Health Protection Practitioner (non-registered)

When LCC are operating with the full complement of nursing staff, support to LICB can be provided. When operating below the full complement of core nursing staff, support may not be available due to the impact this would have on LCC's ability to deliver its own service.

To ensure that LCC and LICB continue to deliver the minimum service requirements during periods of increased demand, support from the wider system will need to be requested. A clear process for escalation to the wider system is in place in the form of the Lincolnshire Health Response to Communicable Disease Outbreak. This Action Card is held by UKHSA and ICB commanders and outlines the process for mobilising system partners under their contractual agreement.

LICB also has access to a "rapid response team" consisting of registrants from the community vaccination team. The process to mobilise this team is detailed in the Lincolnshire NHS Health Protection Community Swabbing Pathway.

In the event of a Major Incident being declared, responsibility then falls to EPRR/LRF teams (under the Civil Contingencies Act 2004), and the Health Protection leads would be available to provide specialist advice.

# 6. Process for updates and reviews

Due to the ever-changing landscape of health and care, the framework will remain a dynamic document and can be updated and reviewed as needed.

## 7. Governance arrangements

The Integrated Health Protection Framework will be agreed and monitored via the Lincolnshire Health Protection Board and the NHS Lincolnshire ICB QPEC.

## 8. Next Steps

- This framework will be authorised and utilised jointly by Lincolnshire County Council and NHS Lincolnshire ICB as part of their respective system Health Protection functions.
- A plan of work will be devised showing integrated activities with responsibilities for tasks and timeframes identified.
- Review and evaluation of the framework will take place (annually).