

Governing Body meeting (held in public)

DATE: 21 July 2016

Title	Our Healthier South East London – programme update newsletters
This paper is for Information	
Recommended action for the Governing Body	<p>That the Governing Body:</p> <p>Note</p> <ol style="list-style-type: none"> 1. The contents of May and June editions of the new <i>Our Healthier South east London</i> programme update for stakeholders, entitled <i>Healthier</i>.
Potential areas for Conflicts of interest	None.
Executive summary	<p>The <i>Our Healthier South East London</i> programme consolidated its communication channels in October 2015 and since then has issued a monthly newsletter entitled <i>Healthier</i>. This superseded previous email updates that had been issued over differing timeframes.</p> <p><i>Healthier</i> is sent directly by the programme team to a number of key stakeholders. The CCG then sends to number of additional copies local stakeholders. It aims to bring stakeholders up-to-date with engagement activity and developments in the programme as well as focusing on specific areas of work and people involved with the programme.</p> <p>This report contains the editions published for May and June.</p> <p>The articles in the May edition were on:</p> <ul style="list-style-type: none"> • Impact of ideas for orthopaedic services on patients and residents • Patient voices - how feedback influences OHSEL plans • Change in action - better care for people with a learning disability and/or autism • Focus on cancer • An introduction to Dr Anthony Cunliffe, GP Lead – Transforming Cancer Services Team and Macmillan GP Adviser

Clinical Commissioning Group

	The articles in the June edition were on: <ul style="list-style-type: none"> • Sustainability and Transformation Plan –priorities for south east London • Elective orthopaedic centres – an update on timeline for possible public consultation • Developing the role of care navigators • A focus on urgent and emergency care • Change in action - Lewisham GP and pharmacist exchange programme shortlisted for HSJ award • An introduction to Dr Marc Rowland, GP and Chair of NHS Lewisham Clinical Commissioning Group 	
How does this paper support the CCGs objectives?	Patients:	Details work in partnership across SE London to improve the health and wellbeing of people in Bexley.
	People:	NHS Bexley CCG staff positively involved in many ways in OHSEL programme.
	Pounds:	The OHSLE programme assists the CCG being able to deliver on all of its statutory duties in an effective, efficient and economical way.
	Process:	The work described in the newsletters supports the CCG in commissioning safe, sustainable and equitable services which improve outcomes and patient experience.
What are the Organisational implications	Key risks	None specifically arising from this report.
	Equality	None specifically arising from this report.
	Financial	None specifically arising from this report.
	Data	None specifically arising from this report.
	Legal issues	None specifically arising from this report.
	NHS constitution	None specifically arising from this report.
Engagement	Communications and engagement is led by the Our Healthier South East London communications and engagement workstream, which the CCG is an active member.	
Audit trail	N/A	
Comms plan	Communications and engagement is led by the Our Healthier South East London communications and engagement workstream, which the CCG is an active member. The report details recent communication activity. The CCG assists in the sharing of the newsletter with stakeholders.	
Author: Jon Winter AD Communications	Clinical lead: Dr Nikita Kanani NHS Bexley CCG Chair	Executive sponsor: Sarah Blow Chief Officer

and Corporate Services		
Date	12 July 2016	



Healthier

Issue 9 | May 2016



[Twitter](#)

Welcome

This is the Our Healthier South East London monthly newsletter. Below you will find the latest news, updates and information on our five-year strategy to improve health and care services across Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark, as well as details of how you can get involved.

If there is anything you would like us to include in this newsletter, or if you have any feedback, please let us know – email us at ourhealthiersel@nhs.net

Latest news

Sustainability and Transformation Plan – what it means for our work to improve health and care services

We are continuing to finalise our Sustainability and Transformation Plan (STP). This plan describes how local health and social care organisations will work together to produce a population based strategy to deliver the vision laid out in NHS England's [Five Year Forward View](#) and ensure financial and clinical sustainability over the next five years.

In south east London, the aim of the STP and the Our Healthier South East London strategy are the same – to deliver safe, sustainable and high quality services. The difference is that the STP has a wider scope and the role of provider trusts and local authorities across south east London is enhanced. Moving forward our STP will be called Our Healthier South East London and will be a continuation of work to date.

There are several key features of the strategy:

Improving integrated community based care

Much of the STP builds on the strategy developed through Our Healthier South East London – the [models of care](#) developed through this programme are the product of several years of partnership working between clinicians, commissioners, council social care leads, local hospitals, and have been informed by wide engagement with local communities, patients and the public.

The focus here is on prevention as well as delivering better integrated care in the community. This is helping us make key improvements across six priority areas (children and young people, cancer, maternity, planned care, urgent and emergency care and community based care) and putting patients at the heart of health and care in the future.

NHS provider productivity and quality

Importantly, through the STP, the six provider NHS trusts in south east London are working together to deliver the [new models of care](#) in our strategy, and strengthen the financial sustainability of the local NHS. This programme is important as it will ensure that trusts offer the best possible services in the most cost-effective way in the future.

Transforming specialised services

There is potential for achieving quality improvement and better value for money in many specialist services – these are provided in relatively few hospitals and are accessed by comparatively smaller numbers of patients, for example, renal dialysis, treatments for rare cancers and life threatening genetic disorders. We're aiming to secure sustainable specialised services for residents in south east London and those coming into the area for specialist care (a third of all specialised activity is from the south of England).

Hospitals put forward initial suggestions for hosting a consolidated planned orthopaedic service

We are continuing to develop our proposals for [improving the way orthopaedic care is provided](#) in south east London by consolidating planned inpatient orthopaedic surgery into two elective orthopaedic centres.

We have mapped out a detailed patient pathway to describe the journey a patient would take and how they would be cared for in this model. Patients will continue to have their outpatient appointments, initial diagnostic tests and follow up care at their local hospital, with only the operation itself taking place at an elective centre. We have also been examining similar models elsewhere in the country and how they improve the experience of patients through things like dedicated transport services.

Before making any decisions on which sites will be considered there are a number of important steps we must take, such as a review of proposals by NHS England. Once final options are agreed, if they could result in a significant service change, a public consultation would be required. If necessary, this could happen towards the end of 2016.

You can [read more](#) about why we want to improve the care currently available – including tackling increasing demand for orthopaedic care and the variation in quality and outcomes. tell us what matters to you about local services – [find out how to get involved](#).



Learning from our neighbours – visit to South West London Elective Orthopaedic Centre

We want to learn from other areas that already use consolidated models of orthopaedic care. To help us better understand this from a patient perspective, members of our Patient and

Public Advisory Group visited the [South West London Elective Orthopaedic Centre](#). This NHS treatment centre provides elective orthopaedic surgery and is the largest joint replacement centre in the UK. The visit included a guided tour of the centre - its assessment suites, theatres and recovery suites - and an opportunity to test out the transport service. The centre's director answered questions on everything from the lower infection rates compared with general hospitals to the [step by step journey](#) for patients treated at the centre.

Frank King, from Greenwich, said: "I was extremely impressed by the centre. It didn't feel like a hospital and was more like a clinic with a good atmosphere for patients and staff.

"The patient transport vehicle was excellent and well equipped, and the staff were very helpful. I think it could be a good model to replicate in south east London because the experience for patients seems so much better."

Councillors scrutinise our plans

Local councillors from across south east London met at our third Joint Health Overview and Scrutiny Committee earlier this month. The committee review all aspects of our strategy, particularly the potential for a public consultation on our proposals to improve [elective orthopaedic care](#).

The committee heard the latest developments from our Urgent and Emergency Care Network. The network - made up of hospital doctors, GPs, nurses patient representatives and healthcare managers from across our area - is aiming to tackle the challenges facing urgent and emergency care services as a result of increasing patient demand. The inconsistent range of urgent care centres, walk in centres and minor injury units across south east London mean people can struggle to access the most appropriate care for their needs.

The [Healthy London Partnership](#) published an Urgent and Emergency Care (UEC) facilities specification in November 2015, which we are taking forward through our UEC Network. This aims to ensure that there is a coordinated, consistent and clear UEC offering in London, so that services work in the same way, building on and complying with the [London Quality Standards](#), with the same level of care available seven days a week. This will mean that people have a clear picture of what is on offer when they visit any service delivering urgent and emergency care in south east London, helping them understand where to go and which service to use.

The committee also heard the case for consolidating the delivery of planned inpatient [orthopaedic operations](#) to fewer sites. Once final proposals are agreed the committee will consider them to decide if a public consultation is required.



Change in action

Joining up patient care in Southwark and Lambeth

The [Local Care Record](#) is now linking up electronic patient records between all 91 GP practices in Southwark and Lambeth and King's College

Hospital, Guy's and St Thomas' and South London and Maudsley NHS Foundation Trusts, providing improved care and experience for patients.

Early indications show a 60-75% reduction in phone calls between GPs and hospitals to chase up information, a reduction in duplicate appointments and tests and better patient satisfaction. In April alone, nearly 20,000 patient records were viewed through the Local Care Record, and feedback from clinicians in all organisations has been overwhelmingly positive. A short film has been developed to help explain the Local Care Record, along with frequently asked questions, a map of where the system is in use and other information for patients. All materials are available on the [King's Health Partners website](#).



In focus

Building a workforce that is fit for the future

We know that to achieve the Our Healthier South East London vision for high quality, integrated and financially sustainable care, we need to develop a modern workforce. In our

strategy we outline a shift in the way care needs to be delivered. We are focusing on prevention, early intervention and keeping people healthy and out of hospital.

We recognise that the health and care workforce in south east London is our biggest asset and is crucial to achieving the aims of our strategy. We need a workforce that has the right skills to meet the changing needs of our population, as well as being resilient, responsive, diverse and healthy.

We are working collaboratively across south east London to address short and long term workforce challenges and to support staff so that they can deliver the care patients need now and into the future. We have developed a workforce strategic framework for south east London - a document that draws together our approach and priorities, some of which are outlined below.

We are working with [Healthy London Partnership](#) and [Health Education England](#) (South London) colleagues to build a picture of what our current workforce looks like in terms of numbers and skills in hospitals, general practice, community based care and social care. This will allow us to project our future workforce needs to make sure we can meet demand and deliver high quality and safe patient care.

We are co-ordinating the south London wide care navigator project to determine the competencies and career pathway for this role. This month we held our second workshop with education provider representatives to identify gaps in training provision and to inform development of the education curriculum. A project report will be published on our website in the coming weeks.

We have also reviewed the terms of reference for our south east London workforce strategy steering group. This includes the membership to make sure commissioners, local councils, the voluntary and community sector and patients are represented.

For more information about our workforce plans please contact Dr Kate Pavlidou at k.pavlidou@nhs.net



Introducing

Lyn Wheeler – Vice Chair of the Patient and Public Advisory Group for Our Healthier South East London

What is your role in the programme?

I am a retired civil servant and have controlled heart failure, atrial fibrillation (a heart condition that causes an irregular heart rate) and diabetes. I am also a carer to my husband who has cancer. As a member of the Patient and Public Advisory Group I take part in various events, workshops, and offer comments on the work of a programme from the perspective of a patient, carer and a Bromley resident. I am also part of the reading group, examining draft information papers

before they are sent out for public view to make sure residents have a clear understanding how the programme is trying to improve services.

What do you see as being the priorities for improving cancer care services in south east London?

The main challenges for people using frontline services are getting appointments with their GPs in good time, getting quick referrals for treatments and good community care following discharge from hospital. My day-to-day experiences as a carer allow me to see how care networks operate and there is still a lack of proactive care.

What are your hopes for the programme?

GP surgeries and local care services are not joined up and this may be due to a lack of communication between those involved, lack of staff or integrated ways of working. I really hope that by looking at the issues across the six boroughs it will be possible to encourage better services, faster appointments and follow-up care. An important part of this is seeing mental health problems on equal footing with physical health illnesses.

What would you like patients to say about the NHS in south east London in five years?

My wish is that in all six south east boroughs there will be good evidence of better planned care, more joined up and proactive community based care networks and more dynamic emergency care. I would also hope that all services for children and young people, maternity, cancer diagnoses and treatments, will have fast-stream practices in place.



A partnership of NHS providers and Clinical Commissioning Groups serving the boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark, with NHS England.

Healthier

Issue 10 | June 2016



[Twitter](#)

Welcome

This is the Our Healthier South East London monthly newsletter. Below you will find the latest news, updates and information on our five-year strategy to improve health and care services across Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark, as well as details of how you can get involved.

If there is anything you would like us to include in this newsletter, or if you have any feedback, please let us know – email us at ourhealthiersel@nhs.net

Latest news

Sustainability and Transformation Plan – our priorities for south east London

This month we are submitting our draft [Sustainability and Transformation Plan](#) (STP) to NHS England. The plan describes how local health and social care organisations will work together to produce a population based strategy to deliver the vision laid out in NHS England's [Five Year Forward View](#) and ensure financial and clinical sustainability over the next five years.

This work is being jointly carried out by south east London clinical commissioning groups, hospitals, community health services and mental health trusts, with the support of local councils and members of the public.

Last month we introduced some of the key features of our STP. Our five priorities are:

- Developing consistent and high quality community based care and prevention
- Improve quality and reducing variation across physical and mental health

- Reducing cost through provider collaboration
- Developing sustainable specialised services
- Changing how we work together to deliver the transformation

You can find out more about these priorities and how we are continuing to develop [our STP](#) on our website.

Elective orthopaedic centres – update on timeline for possible public consultation

In recent editions we have explained our proposals for [improving the way orthopaedic care is provided](#) in south east London by consolidating planned inpatient orthopaedic surgery into two elective orthopaedic centres.

The proposals, which have been developed with orthopaedic surgeons in south east London, have recently been reviewed by an independent panel of clinical experts from across the UK. They fed back that our model is well supported by clinicians and have recommended areas for us to develop with input from doctors and clinical teams. This report will soon be available on our website.

Hospital trusts that provide planned orthopaedic care have been working on their plans to describe how a consolidated service might work on their sites. This requires a large amount of complex modelling for comprehensive site proposals to be created and for us to refine our proposals accordingly. These proposals will then be evaluated and our Committee in Common will consider them in early November and make a decision on whether to proceed to consultation.

We will also soon be entering a pre-consultation period during which we will gather views from specific populations in relation to the proposals. This will help us make sure that plans for a possible consultation are focused on getting a wide range of responses from all groups of people who could be affected by a potential change to services.

We will continue to keep you updated on the timeline for this work through the newsletter and our website, where you can also read about why we think we need to change the way [orthopaedic care](#) is currently delivered.

Developing the role of care navigators

GP practices rely more and more on non-clinical staff - often known as care navigators - who help people manage their health and wellbeing, to address increasing workload and financial constraints. Training is often provided on the job, with little thought given to developing these people over time and offering them a career structure which would encourage them to stay within the NHS. Yet care navigators play a crucial role in supporting integrated care planning, earlier discharge from hospital, and better communication between healthcare professionals and patients.

Boroughs across south London are looking to introduce a number of different care navigation models. However, there is no common competency framework surrounding these, no defined career pathway, no mapping of training being delivered or any real understanding of the impact care navigation can have on the quality of healthcare.

The Our Healthier South East London workforce programme is leading the first project of its kind to develop and implement a career pathway for care navigators. Working with healthcare organisations and education providers, we reviewed over 40 care navigator job descriptions and have developed a competency framework and a modular training programme, aligned with apprenticeship training, which help non clinical staff to progress from administrative levels through to care navigation and into senior management. Our aim is to encourage recruitment and retention of increasingly skilled staff who could relieve the administrative burden from clinicians and improve patient experience.

We are now planning to use our competency framework to pilot the role of care navigator in primary care. Over an 18 month period we want to measure the impact on clinical workload and patient experience when care navigators benefit from the training curriculum and career pathway opportunities we have developed.

For more information contact Dr Kate Pavlidou at k.pavlidou@nhs.net



In focus

Urgent and emergency care

Emergency attendances, admissions, and calls to the ambulance service have risen significantly in the last decade. We expect demand to continue to increase, for instance with an increasing older population meaning more people attending with more complex and often multiple conditions.

We know that a large proportion of people who access urgent and emergency care could be seen in other settings, for instance by a GP or in primary care. Many emergency admissions could be avoided with better care planning and on-going support. There is a confusing range of urgent care services available, so that people in south east London are not always sure which is the most appropriate service or facility.

Commissioners, stakeholders, clinicians, managers, patients and the public have been working together since April 2014 to develop interventions that will allow us to address these issues and develop a high quality, sustainable urgent and emergency care service across south east London.

The interventions we have identified as having the biggest impact on urgent and emergency care are outlined below.

- **Rapid response teams** – this intervention sits within the [community based care](#) workstream, bringing more specialised care into community settings and into people’s homes. This intervention is fundamental to helping us manage the continued increase of attendances and admissions through urgent and emergency, and has the largest potential impact of all our planned interventions.
- **London Quality Standards** including the implementation of a 7-day service and the facilities specification, which sets out standards for each type of service, including emergency departments and urgent care centres.
- **Specialist Response Clinics** – these are specialist hospital clinics examination couches and tests available, such as x-ray, blood and urine tests, to provide specialist input without having to go through the emergency department or be admitted
- **Improved mental health interface** – this includes provision of 24/7 psychiatric liaison and meeting [new Government standards](#) known as ‘Core 24’.
- **Access to specialist advice** – more direct access from primary care to advice to reduce attends through urgent and emergency care and into hospital.
- **Discharge planning and consistency** – this also sits within the community based care workstream. The intervention will reduce length of stay in hospital and improve patient experience by ensuring that planning for discharge begins as early as possible.

Work is also underway in other areas, for instance front door streaming – a task and finish group has met several times to share information and is working to agree standards for front door streaming, including of paediatric cases.

We are now moving from a design to an implementation phase. This is reflected in the way this workstream is structured. A small executive group, which includes urgent and emergency care representatives from each provider trust working with CCG leads, meets regularly to agree the direction of work and make key recommendations.



Change in action

Lewisham GP and pharmacist exchange programme shortlisted for HSJ award

Lewisham’s ‘Walk in my shoes’ programme has been successfully shortlisted for a [HSJ Patient Safety Award](#) in the Improving Safety in Primary Care category. The programme was created and by NHS Lewisham

Clinical Commissioning Group to offer GPs and pharmacists the opportunity to experience life in primary care from a different perspective. It was also a chance to share learning and improve ways of working. GPs and community pharmacists visited each other to gain

practical insight into their working environment and how they could work together to improve the way patients experience their care.

42 general practices and 45 pharmacies took part and there were more than 160 exchange visits between GP practices and pharmacies. Each visit prompted a number of positive changes that have helped to improve patient experience, reduce the likelihood of errors, increase efficiency and support a reduction in medicine waste, which costs the NHS in south east London around £9 million every year.

Martin Wilkinson, Chief Officer at NHS Lewisham CCG, said: “Being shortlisted for this award is an honour. This was an innovative project and means we have been able to improve patient safety and patient experience, with better communications and more co-ordinated care across the GP and pharmacy services.”



Introducing

Dr Marc Rowland, GP and Chair of NHS Lewisham Clinical Commissioning Group

What is your role in the programme?

I have been involved in various roles from the start of Our Healthier South East London, mostly with a primary and community care focus. It has been very positive to see how we have grown in confidence and have developed a way of working together co-operatively but remaining mindful of local needs in each borough and including the voice of local residents at every level.

What do you see as being the priorities for improving health and care services in south east London?

The challenge to everybody is changing the way we think to get public health, individual health and social care working together across south east London. We want to help communities grow stronger and keep the very personal individual care given by so many health and social care workers. The best health improvements come through social changes and improving mental health will also improve physical health.

What are your hopes for the programme?

We need to keep working together across boundaries. If care is straightforward for patients it is usually better for the NHS as well. We need equal status for all levels of health care - primary, specialised and mental health.

What would you like patients to say about the NHS in south east London in five years?

I don't want patients to notice anything special, just that it works wonderfully when they need it.



A partnership of NHS providers and Clinical Commissioning Groups serving the boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark, with NHS England.