



East Sussex Community Education Provider Network

Operating Plan 2017-18

1. Executive Summary

- 1.1 The first phase of 'East Sussex Better Together' (ESBT) was a 150 week large scale change programme through which commissioners of health and social care services worked together with local people, providers and stakeholders to transform local services in a way to improve quality, provide services people want and need, and are sustainable in the long term.
- 1.2 The programme is now transitioning to a new ESBT Alliance arrangement with the aim of continuing to transform health and social care in East Sussex, bringing together prevention work, primary and community care, social care, mental health, acute and specialist care.
- 1.3 The Alliance is made up of five local partners Eastbourne, Hailsham and Seaford CCG, Hastings and Rother CCG, East Sussex County Council, East Sussex Healthcare NHS Trust and associate partner Sussex Partnership NHS Foundation Trust. The Alliance works closely with GP practices and other organisations providing health and care to our local populations.
- 1.4 The shared ambition is to develop a fully integrated health and social care system across the ESBT footprint, ensuring everyone enjoys proactive, joined up care that supports them to live as independently as possible and achieve the best possible health and well-being outcomes.
- 1.5 The ESBT Community Education Provider Network (CEPN) was established in 2016 with the support of Health Education England Kent, Surrey and Sussex (HEE KSS) to address challenges in primary care around recruitment, retention and workload, to support the enhancement of education, training and placements and to improve health and patient outcomes.
- 1.6 The function of the CEPN is to support the development and delivery of fully integrated health and social care services through the ongoing development of the primary care, community and when sufficiently mature, wider system workforce. This is to be achieved by:
 - developing and utilising workforce data to inform educational strategy, priorities and activities
 - increasing capacity for future workforce training in the community;
 - responding to and delivering national and STP workforce development strategies; and
 - development of the current workforce through commissioning/provision of educational activities

- 1.7 The three overarching priorities of CEPNs identified by HEE are:
- 1.7.1 Workforce planning and development to respond to local needs that enable the redesign of services within primary care and the community to better support general practice.
 - 1.7.2 Improved education capability and capacity in primary and community settings through the development of multi-professional educators and through the creation of additional learner placements.
 - 1.7.3 Improving education quality and governance (including where appropriate monitoring through quality control processes that regulatory / other frameworks provide) and by acting as a local coordinator of education and training for primary and community care to support general practice.
- 1.8 The CEPN mirrors the ESBT footprint and has in its first year of operation focused on the workforce planning needs of general practices. As the CEPN matures it will seek out further opportunities to support the development of the wider system workforce.
- 1.9 It is anticipated that this will also include provision and support to other local health and social care agencies such as care and nursing homes, Community Trusts, patients and carers. From the outset, the CEPN has recognised the importance of working with other partners involved in Primary Care education and training both in and out of hospital e.g. Public Health, the GP Staff Training Team, South East Coast Ambulance Service (SECAmb), NHS 111 service and others as well as the need to embed research and service evaluation in the collaborative ethos of the network.

2. Background

- 2.1 The key drivers influencing CEPN Workforce strategy include:
- Five Year Forward View (FYFV), particularly the FYFV for General Practice
 - Sussex and East Surrey Sustainability and Transformation Plan (STP) and the workforce strategy led by HEE via local Workforce Action Boards (LWABs) to support delivery of the STP
 - Care Act 2014
 - ESBT's Primary Care Workforce Plan (being delivered via the GP FYFV Implementation Plan) to address the currently recognised capacity crisis in Primary Care, in particular, the actions undertaken during 2016/17 and going forward, agreed priorities for 2017/18 through the CEPN and the GP FYFV Implementation group
 - ESBT provider stakeholders own organisational strategies, e.g. East Sussex Healthcare NHS Trust (ESHT) 2020 vision document and East Sussex County Council (ESCC) Plan
 - National workforce supply shortages across a range of professions
 - Development of new roles (e.g. Physician's Associate, Care Navigator, band 4 Associate Nurse)
 - National changes to non-medical education funding and commissioning and impact on role of Health Education England (HEE)

- A commitment to embedding prevention, self-care and asset-based approaches at the heart of health and care services.

2.2 The ESBT Alliance is committed to building a new model of Accountable Care that delivers fully integrated health and social care services. This will be achieved by promoting the following activities and where appropriate, through the support of the ESBT CEPN:

- System-wide planning for workforce across primary, community, acute, mental health and social care for the agreed ESBT priority work streams of Urgent Care, Primary Care and Integrated Locality teams.
- Role redesigns, including rational approaches to delegation and demarcation between roles
- Education, training and development opportunities such as the development of an apprenticeship model of educational reform to build an academic career structure for the support workforce and offer alternatives for all staff studying to level 6
- Organisational Development (OD) at a local, work stream and system wide level as set out in the ESBT OD plan.

3. Vision

3.1 The vision for ESBT CEPN was reviewed in a facilitated development workshop held on 8th June 2017 and agreed to be as follows for 2017/18 (drawn from the outcomes of the session which are pictorially shown in “wordart” format at Figure 1 below:

To work in partnership with a wide range of providers to develop an adaptive workforce to achieve the best possible health and well-being outcomes for local people.

Figure 1: Outcomes from CEPN Development Workshop on 8th June 2017



4 CEPN Business model

- 4.1 ESBT CEPN sits as a hosted 'not for profit' entity with Hastings and Rother CCG. Given the pace of change to strengthen the formal ESBT Alliance and the continued growth in developing integrated services, this arrangement continues to best meet the workforce development needs of ESBT.
- 4.2 The organisational structure may need to be reviewed in the future should the network mature sufficiently and require employing staff and the implications of this. When the need arises, the CEPN will seek advice and guidance from CCG Human Resources support, CCG Governance lead and from HEE.

5. CEPN resources to support the network and deliver the Operational Plan

- 5.1 The network's activities and functions will be carried out by existing HEE, CCG, General Practice and Pharmacy staff who are already engaged in the various CEPN initiatives (placements, nurse mentors, etc.).
- 5.2 The CCG has recognised the importance of the role of the Primary Care Workforce Tutor and have committed to fund the post beyond the current secondment arrangement with HEE.
- 5.3 The growing role of the CEPN during 2016/17 identified the need to source permanent support to ensure the smooth running of the network and compliance with governance issues. A CEPN Coordinator was therefore appointed in March 2017, funded by Hastings & Rother CCG.

6. CEPN Governance structure

- 6.1 The governance structure for the CEPN (within the context of the ESBT Strategic Workforce structure) is summarised in the diagram at Appendix 1.

7. Operating Structure

The CEPN has organised its operating structure into three tiers as described in the following paragraphs:

7.1. Tier 1: Strategic Direction – CEPN Delivery board

- 7.1.1 Setting the strategic direction for the CEPN, the responsibilities of the board are to
- Oversee the implementation of governance (See Governance Pack)
 - To ensure CEPN funds are managed, allocated and monitored accordingly
 - Drive the development of a multi-professional education network to support workforce development
 - To set objectives for the network
 - To review and monitor progress
 - On-going development of the network;
 - Review the quality and the range of educational and training activities provided
 - To share best practice
 - To actively market and promote the CEPN
 - To explore additional funding stream and initiatives to bring sustainability to the network

7.1.2 The Delivery Board overseeing the strategic direction of the CEPN includes:

Dr Lindsay Hadley (Chair)	ESBT Clinical Lead (Workforce)
Colleen Hart	Head of Workforce Planning, ESBT
Dee Kellett	Primary Care Workforce Tutor (H&R, E, H&S CCGs)
Dr Peter Williams	GP Tutor
Dr Mary Rose Shears	GP, Seaford Medical Practice, Associate Dean for East Sussex, Broad Based Training Programme Director, Lead for Induction and Refresher and Retention, Department of Postgraduate GP Education
Dr Craig Namvar	GP and GP Board member for H&R CCG
Eileen Callaghan	Head of Medicines Management/Deputy Director of Quality
Fiona Kellett	Head of Primary Care (H&R, EH&S CCGs)
Kirsten Adams	GP Federation representative
Karthiga Gengatharan	Local Medical Committee (LMC) Representative
Jerry Luke	Local Medical Committee (LMC) Representative
Samantha Williams	Asst. Director, Planning, Performance and Engagement, Adult Social Care, (East Sussex County Council)
To be confirmed	Asst. Director, Workforce Development (East Sussex Healthcare NHS Trust)
Claire Marr	Head of Operations, Education and Training (Sussex Partnership Foundation Trust)
Joanne Bernhaut	Consultant in Public Health (East Sussex County Council)
Mariann Cleverley	Out of Hours provider (IC24)
Dr Juliet Wright	Medical School, University of Brighton
Marian Willmer	Academic Lead Community Health, University of Brighton
To be confirmed	Canterbury Christchurch University
Sue Chambers	CEPN Coordinator
Nikki Stanley	Little Common Surgery Practice Manager representative
To be confirmed	Practice Nurse representative
To be confirmed	Student, trainees, learners representative
To be confirmed	Lay member/service user representative

7.2 Tier 2: ESBT CEPN Operational Network

7.2.1 The CEPN Operational Group will be responsible for implementing the CEPN operational plan. The group will report to the CEPN Delivery Board on a regular basis and is made up of the following members:

Colleen Hart (Chair)	ESBT Head of Workforce Planning
Dr Lindsay Hadley	ESBT Clinical Lead (Workforce)
Dee Kellett	Primary Care Workforce Tutor (H&R, E, H&S CCGs)
To be confirmed	ESBT Workforce Planning/Information Manager
Nic Hone	Primary Care Co-Commissioning Strategic Manager (H&R, E, HS CCGs)
Laurence Brice	Primary Care Co-Commissioning Manager (H&R EHS CCGs)
Dr Raya Aljawaheri	East Sussex GP training Programme Director
Dr Karen Skinner	East Sussex GP training Programme Director
Dr Alex Dale	GP Tutor
Vanessa Taylor	Medicines management representative Local Pharmaceutical Committee
Nicola Low	Allied Health Professional (AH) representative
Anne Watt	Learning and Development Manager (East Sussex Healthcare NHS Trust)
Barbara Gosden	Clinical Education Manager (East Sussex Healthcare NHS Trust)
Sara Lewis	Learning and Development Manager (Adult Social Care, East Sussex County Council)
Claire Marr	Head of Operations, Education and Training, Sussex Partnership Foundation Trust
Sue Chambers	CEPN Coordinator
To be confirmed	Practice Manager representative
To be confirmed	Practice Nurse representative

7.2.2 Please refer to the Network's Terms of Reference for information on the roles, remit and responsibilities of the CEPN Delivery Board and CEPN Operational Group.

7.3 Tier 3: ESBT CEPN day to day management arrangements

7.3.1 The day- to- day work of the network will be carried out by the following and will report to the CEPN Operational Group and CEPN Delivery board as and when necessary.

Colleen Hart	Head of Workforce Planning, ESBT
Dr Lindsay Hadley (Delivery Board Chair)	ESBT Clinical Lead (Workforce)
Dee Kellett	Primary Care Workforce Tutor
To be confirmed	ESBT Workforce Planning/Information role – <i>under discussion at time of publishing Operational Plan</i>
Sue Chambers	ESBT CEPN Coordinator

8. Governing responsibilities

- 8.1 Governing responsibilities (Finance, education and quality, risks etc.) are set out in the CEPN Delivery Board Terms of Reference and the relevant documents in the CEPN governance guidance pack.

9. Key Operating Principles

The network will:

- 9.1 Operate on a “Not for Profit basis” with any surplus or assets reinvested into the network.
- 9.2 Be designed to be flexible, collaborative, proactive, taking a whole systems approach to the education, training and placements which are developed, owned and delivered in the community.
- 9.3 As far as possible utilise existing resources within the CCGs’, HEE, Universities and in general practice to prevent the incurrence of unfunded liabilities.
- 9.4 Prioritise funding in accordance with contractual obligations.
- 9.5 Be committed to sharing educational and workforce data where reasonably practicable.
- 9.6 Produce an annual report for its stakeholders.
- 9.7 Provide services for **all** practices based within the network locality.
- 9.8 Declare any conflicts of interest.
- 9.9 Make decisions for the benefit of the workforce (and ultimately safe patient care) and not as individuals.
- 9.10 Be respectful to the views of others.
- 9.11 Ensure fair and equitable distribution of resources in a manner which is targeted to priority areas.
- 9.12 Monitor and evaluate activity.
- 9.13 Share best practice across the STP footprint CEPNs and also across the region to include Kent, and remaining parts of Surrey that are outside of the STP.
- 9.14 Proactively communicate the wide range of activity using a variety of platforms, combining traditional approaches and utilising social media to create open and two-way conversations.
- 9.15 Act as an enabler that overtly recognises the place of research and innovation as integral to the development of healthcare.
- 9.16 It is important that the members of the network are aware of these operating principles to promote transparency and trust.

10. Network Priorities (Year 2 and Year 3)

- 10.1 The CEPN priorities for 2017/18 and 2018/19 will be determined by the following 3 core functions.
 - 10.1.1 Workforce planning and development to respond to local needs that enable the redesign of services within primary care and the community to better support general practice
 - 10.1.2 Improved education capability and capacity in primary and community settings through the development of multi-professional educators and through the creation of additional learner placements.
 - 10.1.3 Improving education quality and governance (including where appropriate monitoring through quality control processes that regulatory / other frameworks provide) and by acting as a local coordinator of education and training for primary and community care to support general practice.
- 10.4 A summary of the activity against each of these core functions for 2017/8 and 2018/19 is summarised in the table at Appendix 2.

11. Resources Required (Year 2 and Year3 – 2017/18 and 2018/19)

- 11.1 The financial resources to be devolved by HEE to the CEPN will be that as currently provided through the CCG Learning and Development Agreements (LDAs) covering; workforce development (CPD), tariff and salary support. The current LDA covers the period April 2014-April 2017 and to begin with, will be the main education and training funding source and will inform the CEPN first set of deliverables. Going forward, HEE have advised that CEPNs will receive a limited CPD fund for 2018/19 which is to be used for a designated priority.
- 11.2 There is also the opportunity to apply for funding from the allocation set aside for CEPNs to support delivery of the Sussex and East Surrey Sustainability and Transformation Plan (STP) which is to be managed through the STP workforce governance structure. For example, CEPN initiatives that are innovative and help deliver the GP Five Year Forward View (GP FYFV) and where appropriate, having the potential to be scaled up across the STP.
- 11.3 In terms of the day to day running of the CEPN and maintaining governance arrangements, the CCG has provided funding for a CEPN Coordinator
- 11.4 The CEPN is to be managed on a day to day basis by the ESBT Head of Workforce Planning with the intended support of a Workforce Planning/Information Manager (although at the time of publication, this post is still under discussion).
- 11.5 This proposed new post will replace the Workforce Information Analyst post which was funded for 12 months in 2016 through monies provided by HEE KSS to support integrated working. Whilst discussions continue regarding funding and design of this role, it is recognised that there is a capacity gap regarding the producing of workforce information reports for the network. It is envisaged that this issue will be resolved late 2017.

12. Network Stakeholders (Year 2 and Year 3)

12.1 The list below represents current and future organisations and professionals that may be represented in or interface with the ESBT CEPN structure either at Board level or operationally through training and placement opportunities. The list is suggestive and not exhaustive. As the CEPN's core functions expand, the membership will need revision along with the implementation of a stakeholder strategy.

12.2 In the long term, ESBT CEPN wishes to engage with the entire care workforce offering education, training and placements across East Sussex.

12.2.1 General Practice Staff

- Training Programme Directors (TPD)
- GPs and GP Tutors (GPT)
- Nurses
- Practice Managers and Administrative staff
- Federation representatives
- Health Care Assistants
- Primary Care Workforce Tutors

12.2.2 East Sussex Better Together

- CEPN Operational Group Chair / Accountable Officer (ESBT Head of Workforce Planning)
- CEPN Delivery Board Chair/Clinical Workforce lead
- ESBT Workforce Planning Manager
- Primary Care Workforce Tutor
- Adult Social care representative

12.2.3 Education

- University of Brighton
- Canterbury Christchurch University
- Health Education England, Kent Surrey and Sussex
- Primary and Secondary Schools and colleges
- National Skills Agency

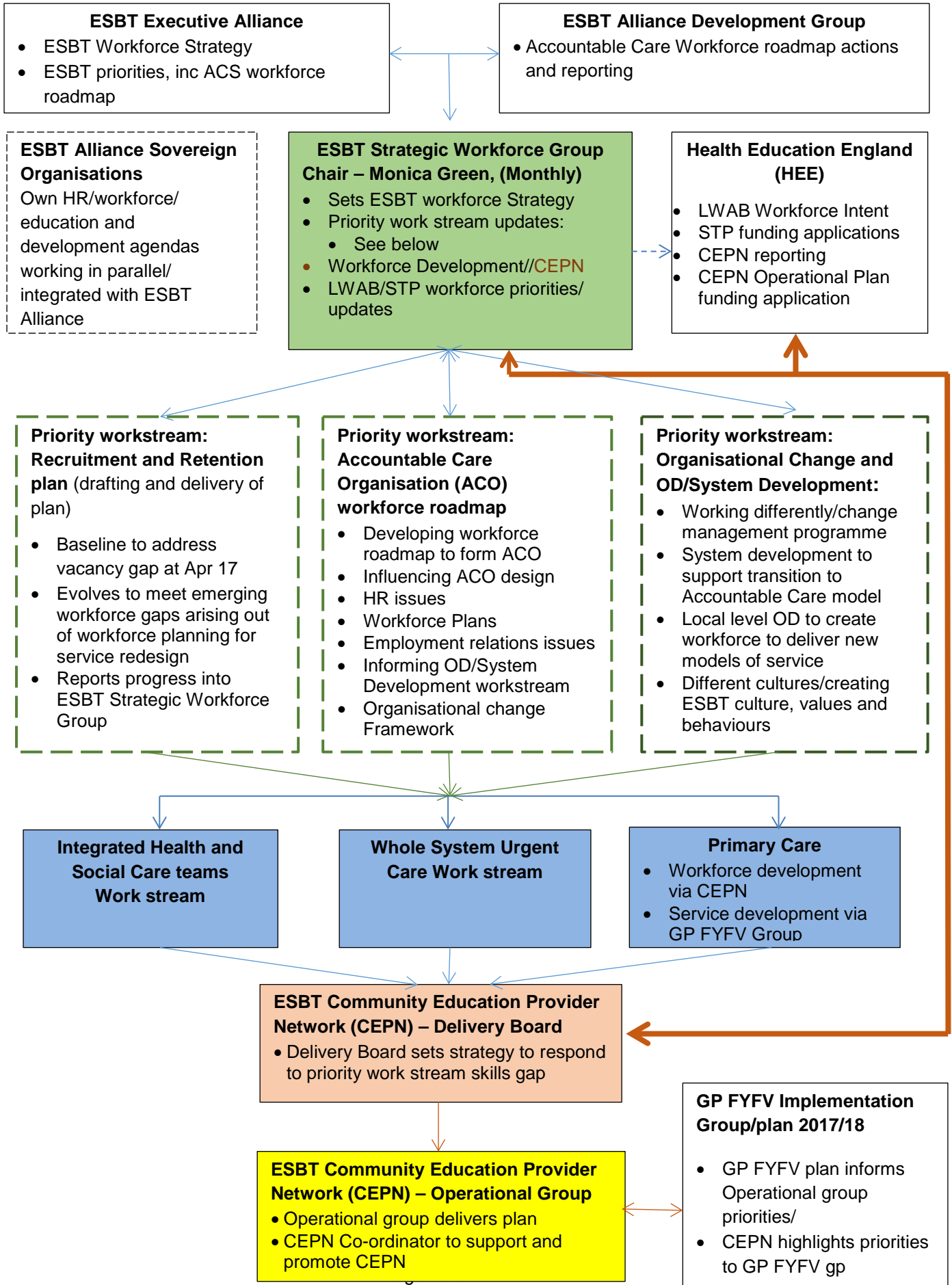
12.2.4 Subject / organisation specialists

- East Sussex Healthcare NHS Trust
- Sussex Partnership NHS Foundation Trust
- South East Coast Ambulance Service (SECAmb)
- Physician Associate representatives
- Pharmacy representatives
- Paramedic lead
- Local Medical Committee (LMC)
- NHS 111
- Out of Hours provider
- Public Health
- Other providers (new care models) which in time may include Social Care representation
- Care Home representatives
- Third Sector representatives

12.2.5 Service User Representatives

- Student focus groups
- Patient participation groups/lay member

Appendix 1: ESBT Workforce and CEPN Governance Structure October 2017



Appendix 2: Summary of CEPN priorities in relation to the three core functions plus communications and engagement activities to promote the work of the network.

Core function	Objective17/18	Initial Activities 17/18	Objective 18/19	Outcomes
<p>Workforce planning and development to respond to local needs that enable the redesign of services within primary care and the community to better support general practice.</p>	<p>To develop a care navigator role/ pathway which spans primary and community providers.</p>	<p>To meet with relevant stakeholders to identify</p> <ul style="list-style-type: none"> - Priority pathway - Existing working practices - Gaps in the service - Gaps in the skills set <p>Contract with providers to deliver training.</p> <p>Project plan to ensure effective implementation</p> <p>To identify a proposal for care navigator apprenticeship.</p>	<p>To identify a funding stream to expand the care navigator training provision to wider areas within the ESBT footprint.</p> <p>To share best practice with neighbouring CEPNs.</p>	<p>A defined and flexible programme which support's non-clinical staff to participate in care navigation training across the CEPN Locality.</p>
	<p>To establish a process for collating consistent workforce data across the locality given the loss of the ESBT Workforce Information Analyst post in August 2017.</p>	<p><i>Need to identify resource to provide this support</i></p>		<p>Meaningful and up to date primary care workforce information that identifies current and future skills gaps.</p>
	<p>To support the education needs within East Sussex Strategic Transformation Partnership (STP).</p>	<p>CEPN representation at key workforce meetings to ensure CEPN agenda supports implementation of the STP (e.g. Local Workforce Action Board, Sussex and East Surrey HRD forum.</p> <p>CEPN to Agree and apply for STP funding to appropriate initiatives.</p>	<p>To offer continued support to the ESBT Strategic Workforce group in respect of education and development required in delivering 18/19 STP workforce priorities.</p>	<p>Patients needs are being addressed through education and workforce development.</p>

Core function	Objective17/18	Initial Activities 17/18	Objective 18/19	Outcomes
<p>Improved education capability and capacity in primary and community settings through the development of multi-professional educators and through the creation of additional learner placements.</p>	<p>To increase the percentage of practices supporting student nurses to 60%.</p>	<p>To work with local universities and PCWTs to understand placement needs.</p>	<p>To increase the percentage of practices supporting student nurses to 65%.</p>	<p>To increase the percentage of practices supporting student nurses to 65%.</p>
	<p>To introduce and to facilitate paramedics, physician associates and pharmacists placements.</p>	<p>To investigate the viability of a hub and spoke model for delivery of multi-professional placements.</p> <p>To develop a campaign to promote the benefits of placements and support available.</p> <p>To investigate the governance/ quality implications.</p> <p>To investigate payment implications of multi-professional placements.</p> <p>To facilitate new placement processes.</p> <p>To identify practices that can pilot the concept.</p>	<p>To increase the number of practices supporting paramedics, physician associates and pharmacist's placements.</p> <p>To establish 2 Federation-wide offers of education placements</p>	<p>Multi-professional placements are a business as usual with 80% of the practices engaged in placement activity.</p> <p>Student numbers are enabling greater exposure to general practice.</p> <p>Increased recruitment and collaborative working across general practice and community providers.</p>
	<p>To introduce and facilitate practices to support band 1-4 on national apprenticeship scheme to grow; Associate Practitioners, Healthcare Support Workers and Senior Support Workers</p>	<p>Circulate concept, links and process of application</p> <p>Make one to one practice visits to help practice Managers and HCAs through the process</p> <p>Act as mediator/link between HCA and HEI if taking level 4 apprenticeship</p> <p>Offer ongoing support through the process until the concept is understood and recognised by all</p>	<p>Support access to level 4 Associate Practitioner/Nurse associate programme as they roll out at HEI</p> <p>Data collection of apprenticeships in action</p>	<p>Embed academic career progression for bands 1-4</p> <p>Increase quality non medical workforce to deliver high quality care to patients</p> <p>Support national targets</p> <p>All support workforce to hold current care certificate in line with NHS staff</p>

Core function	Objective17/18	Initial Activities 17/18	Objective 18/19	Outcomes
<p>Improved education capability and capacity in primary and community settings through the development of multi-professional educators and <u>through the creation of additional learner placements</u> <i>continued</i></p>		<p>Drive staff to complete the care certificate for quality assurance</p>		
	<p>Continuation of the GP Bursary scheme</p>	<p>To promote 10 bursaries available in 2017/18</p> <p>To introduce a robust governance process to fairly manage the scheme</p>	<p>To promote 10 bursaries available in 2018/19 taking account of lessons learnt in 2017/18</p>	
	<p>GP Portfolio Fellowship roles</p>	<p>To recruit 4 candidates to participate in the ESBT joint scheme with ESHT</p>	<p>Review success of the scheme and make recommendations (if appropriate) for continuation of the scheme in 2018/19</p>	
	<p>Physicians Associate portfolio roles</p>	<p>Seek agreement with ESHT to develop the scheme.</p> <p>Recruit agreed number of candidates ready to take up posts in 2018</p>	<p>Review success of the scheme and make recommendations (if appropriate) for continuation of the scheme in 19/20</p>	

Core function	Objective17/18	Initial Activities 17/18	Objective 18/19	Outcomes
<p>Improved education capability and capacity in primary and community settings through the development of multi-professional educators and <u>through the creation of additional learner placements.</u></p> <p><u>Continued</u></p>	To introduce mentoring roles/ clinical learning facilitators to retain the knowledge and expertise of GPs nearing retirement.	<p>To identify source of funding to enable 2 GPs that could support this role.</p> <p>To identify the necessary training and development required to undertake this role.</p>	<p>To secure a 2nd round of funding to support this position.</p> <p>To identify 4 GPs to take on this position.</p>	<p>Retention of experienced GPs</p> <p>Increased staff satisfaction.</p>
		To support Integrated Family Healthcare who are part of a pilot project for GP Plus which is considering a range of ways to offer greater flexibility and support for approximately 80 GPs to keep hold of the vital skills and experience of GPs on the verge of leaving general practice	To undertake a review of the pilot and consider if any initiatives could be shared.	Retention of experience GPs
	To support the implementation of the ten point action plan for General Practice Nursing	Scope out key priorities and obtain sign off from CEPN Operational Group plus identify any additional resources needed to undertake this piece.		
	To support integrated family healthcare in their bid to join a national pilot for MSK in primary healthcare			

Core function	Objective17/18	Initial Activities 17/18	Objective 18/19	Outcomes
<p>Improving education quality and governance (including where appropriate monitoring through quality control processes that regulatory / other frameworks are met) and by acting as a local coordinator of education and training for primary and community care to support general practice.</p>	<ol style="list-style-type: none"> 1. To offer preceptorship to all newly qualified practice nurses 2. To increase the number of Sign off Mentors who can support final placement pre-registration students and Return to Practice Students. 	<p>To develop and approve a set of preceptorship guidance and a package of support for newly qualified nurses.</p> <p>To identify practices with 3rd-year students to ensure the CEPN can provide support.</p> <p>To provide practice visits to informally evaluate the framework.</p>	<p>To share best practice with neighboring CEPNs.</p> <p>To proactively continue to work with newly qualified nurses and their practices.</p>	<p>Practices and nurses feel supported.</p> <p>Practices are made aware of the support the CEPN can offer.</p> <p>Increased retention of newly qualified nurses.</p>
	<p>Join a scheme commissioned by Public Health to promote healthy living via community pharmacists. To enable pharmacists and their staff to signpost the public to local services.</p>			
	<p>Prepare a bid to train clinical pharmacists to work in general practice</p>			

Core function	Objective17/18	Initial Activities 17/18	Objective 18/19	Outcomes
Communication and Engagement	For the CEPN operational group to develop greater working relationships with its members.	Attendance at <ul style="list-style-type: none"> - Practice Manager Forums - Locality meetings - Nurse Forums Regular CEPN updates via the CCG. Continued development of the CEPN website. Creation of a key contacts list.	To continue to develop and maintain effective working relationships with network members.	Greater awareness of the CEPNs functions and objectives amongst its members. Greater understanding of workforce needs. Increased organisations supporting placements. Increased communications across providers. Increased collaborative working.

Allied Healthcare professionals

