



**East Sussex Better Together
Community Education Provider Network**

ESBT ~ CEPN

Annual Report 2016/2017



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1. Executive Summary

Community Education Provider Networks (CEPN) are a localised approach to planning and delivering training for the primary care workforce in the community, encouraging collaborative working between partner organisations.

The primary aim is to develop the workforce to enable high quality and sustainable integrated care in the community.

ESBT CEPN was inaugurated in the summer of 2016 following the receipt of initial funding from Health Education England, Kent, Surrey and Sussex (HEE KSS) to pump prime the set-up of the network. The first meeting of the Delivery Board took place on 6 July 2016. Activity in the first year has focused on establishing the network and prioritising a small number of initiatives detailed in the CEPN's operational plan.

Progress has been made in respect of building links with partner organisations, developing work plans and contributing to GP recruitment.

A development day was held on 8 June to reflect on the vision and purpose of the network. The outcomes from this event will inform plans for our second year of operation.

Going forward, the CEPN also has a key role in supporting ESBT (as a recognised 'place-based plan') helping ESBT to achieve its goal of fully integrated health and social care services and thereby contribute to the delivery of the Sussex and East Surrey Sustainability and Transformation Partnership (STP). The coming year will therefore undoubtedly bring further challenges in sustaining the network and creating new opportunities to work with partners across the ESBT Alliance.

2. Background CEPN development:

ESBT CEPN was launched in July 2016 in response to an initiative by HEE KSS to set up education networks for primary care across the region.

The CEPN concept was nationally developed by Health Education England (HEE) following consideration of some of the existing challenges within the current health, education and training landscape:

- The majority of training traditionally takes place in a secondary care setting
- Strong alignment between medical schools and acute providers
- Single disciplinary focus within training pathways
- Separate delivery of training for health and social care
- Limited number and capacity of community training placements



- Lack of attractiveness of community-based careers
- Limited use of substitution roles and new roles including care navigators and physician's associates
- Limited scope to develop proactive care due to increasing workloads

There are also local workforce challenges within East Sussex to be addressed including:

- Difficulties in attracting and retaining staff to work in East Sussex given the poor transport infrastructure, and close proximity to London and Brighton (where staff can receive higher salaries).
- Areas of economic deprivation and challenging social issues that can deter people from choosing to work in these areas.
- Ageing workforce and high retirement risk amongst GPs, nurses and other registered professionals.

The CEPN concept has been adopted by the ESBT Alliance to help address local workforce challenges through education and development initiatives to upskill the workforce and address the vacancy gap in primary care. These underpinning aims are reflected in the CEPN's priorities outlined in the Operational Plan, which are designed to improve patient access and GP capacity.

When the CEPN was being established, three business model options were considered:

- CCG-hosted network
- Independent Community Interest Company (CIC)
- GP Federation hosted network

The hosted model was agreed upon by the ESBT Programme Board and thereafter, from the official inauguration in July 2016 has been hosted by Hastings & Rother CCG as a not for profit entity. The hosting arrangement will be reviewed as part of the general review of the CEPN in summer 2017.

The ESBT CEPN accrues the following benefits from being hosted by the CCG:

- Utilises existing governance structure and administrative services.
- Access to data and resources.
- The network's activities and functions are carried out by existing staff who are engaged in the CEPN initiatives.



3. Function of the CEPN

The initial functions of the CEPN are to support the achievement of the ESBT Programme outcomes particularly in relation to the primary care workforce. The key functions of the CEPN can be described as:

- To develop and utilise workforce data to inform educational strategy, priorities and activities.
- To increase capacity for future workforce training in the community.
- To respond to and deliver national and HEE workforce development strategies.
- To develop the current workforce through commissioning/provision of educational activities.

As the CEPN matures we expect it to evolve to serve a wider system role, working with ESBT Alliance stakeholders to develop roles that benefit ESBT service users as a whole.

4. Governance structure

The governance structure of the CEPN was agreed when developing the network's terms of reference and Operational Plan (a key part of completing the required HEE KSS CEPN governance pack) and can best be described as operating in three tiers:

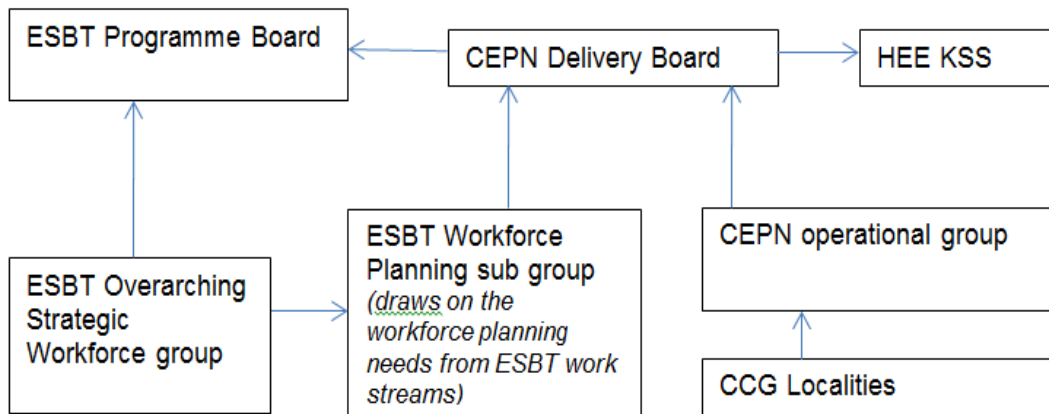
Tier One: Strategic direction – Oversight is provided by the CEPN Delivery Board. The board oversees the implementation of the governance arrangements; ensures that funds are managed and allocated; drives the development of a multi-professional education network to support workforce development; sets objectives; reviews and monitors progress; reviews the quality of educational and training activities provided; shares best practice; markets and promotes the CEPN and explores additional funding streams.

Tier Two: Operational network – this group is responsible for implementing the CEPN operational plan. They report to the board on a quarterly basis.

Tier Three: Day to day work of the network – During 2016/17, the day to day work of the CEPN was carried out by CCG staff: Colleen Hart, ESBT Head of Workforce Planning, Lindsay Hadley, ESBT Clinical Lead (Workforce) Marian Guerges, ESBT Workforce Information Analyst. Tara Humphrey and her associate Wendy Milligan provided project support until March 2017. Sue Chambers was appointed as ESBT CEPN coordinator from 1 March 2017.

The governance structure for 2016/17 is also shown in figure 1 below:

Figure 1: CEPN governance structure for 2016/17



5. CEPN objectives

Three priorities for 2016/17 along with the network’s communication and engagement plan were set out in the Operational Plan as summarised 1-4 below:

- 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.
- 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.
- 3) 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.
- 4) Communications and Engagement

The CEPN activities that have contributed to achieving the above priorities during the first year of operation are described in section 7 below.

6. Developing ESBT CEPN during 2016/17

ESBT CEPN is committed to maximising opportunities to develop the network and enable it to respond to the evolving health and social care workforce agenda. This is demonstrated by the engagement of key CEPN members attending a range of development events throughout 2016/17 and the following paragraphs provide a summary of these development opportunities.



During 2016/17, HEE arranged several CEPN development days for CEPN staff across the region. These are a valuable resource providing networking and learning opportunities.

The first was held on 17 November 2016 for which a video promoting the CEPN was developed. It was at this development day that the introduction was made to Rebekah Giffney, Chartered Occupational Psychologist. Rebekah Giffney shared information about Collective Leadership Competencies and Collective Leadership behaviours and made the offer to support the development of CEPN networks. ESBT took up this offer and a workshop designed and facilitated by Rebekah Giffney was held on 8 June 2017. Attendees included GP tutors, GP programme directors, representatives from ESHT, SPFT, Brighton University and CCG staff to share and explore the collective understanding of the purpose and vision of the CEPN and to explore ways of working together.

For example, the group agreed that there should be more information sharing across and between organisations regarding the CEPN's aims and objectives. It was also recognised that greater impact is required regarding the development of the existing workforce and the aim of developing new roles. This is to be achieved by greater use of social media including Twitter and Facebook.

Members of the ESBT CEPN also attended a development day on 19 May 2017: 'Leading Change – Working in Complex Adaptive Systems', presented by Paul E. Plsek, an internationally recognised advisor and researcher on leadership, innovation, creativity and the management of change in complex systems. The day provided background information on change in complex systems and why it is difficult to succeed. Members agreed that the development day was useful and thought provoking, and cited the following as key learning outcomes:

- What large scale change actually is what is required to achieve it and that it is essential to adapt as the transformation proceeds to achieve the new vision.
- Three key elements working in harmony are required to achieve effective organisational change: Organisational structures to support the change; local processes to implement the organisational change needed; and behavioural change.
- In order to achieve change you should consider people's values and what drives them. Once you have established their values use different strategies to motivate them to accept what you are trying to achieve.
- Challenge the traditional method of change management – i.e. there are no 'resistors', just leave them and focus on those early adopters and others who are keen – go where the energy is.
- Start small, give staff freedom to be creative and then replicate the positive outcomes. Large scale change often fails simply due to the overwhelming task and lack of resources.
- Thinking outside the box – who said there is a box? Take the sides away and think of other ways of doing things. Consider bringing concepts and/or services that already work well individually together and apply them to a new service redesign.



The CEPN is very much looking forward to seeking out further opportunities to develop in 2017-18, building on the success of the support from HEE KSS, Tara Humphrey and Rebekah Giffney.

7. CEPN activities – linked to the core functions and overarching priorities for 2016/17

7.1 Workforce planning and development initiatives

7.1.1 Care Navigators

Members of the ESBT CEPN visited vanguard initiatives based in Whitstable and Broadstairs in Kent to learn about new roles that have been developed to enhance patient care. For example, Care Navigators and Care Coordinators are beginning to make a positive difference in providing patients with more information about local health and well-being services offering them 'choice not triage' to access the most appropriate service – which may not always be their GP.

The operational group considered how these roles could be introduced in the ESBT area and to whom the training could be offered. It was agreed that Care Navigator training would be the priority and could include reception staff in GP surgeries, 'front of house' staff at Accident & Emergency departments, and integrated support workers in the community.

A working group, led by the ESBT Head of Workforce Planning (Colleen Hart), was set up to implement the roll out of the Care Navigation training with a view to the training being provided by September 2017. However, at the time of finalising this annual report, discussions with the training provider (West Wakefield Health & Wellbeing) have revealed the extent of the work to be undertaken. West Wakefield Health & Wellbeing have also confirmed that, due to demand, they may not have capacity to provide the training until January 2018, although this may be brought forward if circumstances allow. The revised implementation date for Care Navigators within ESBT is therefore, Spring 2018.

7.1.2 Care Coordinators

This is a role to provide support to a caseload of patients who require coordinated care for complicated health and social care needs. They listen to non-medical concerns and signpost people to sources of appropriate support.

The operational group considered the job description and concept document drafted by Dee Kellett. The idea has been discussed with several practice managers who are interested in developing the role. The group has agreed not to take this initiative forward until the Care Navigators programme is underway. At the time of implementation, the CEPN will also liaise with Public Health colleagues to ensure the Care Navigator and Care Coordinator roles are developed taking account of the Link Worker role within the Integrated Locality Team framework.

7.1.3 Collating consistent workforce data process

Marian Guerges was appointed as ESBT Workforce Information Analyst in October 2017 and since that time has been working directly with the CEPN to maximise the functionality of the GP workforce tool. The CEPN now has access to primary care workforce data such



as the following and provides projections on the number of GPs and practice nurses we need to recruit in the future to ensure primary care is able to meet demand:

- Vacancies
- Age demographics
- Retirement risk

However, due to Marian securing a role in another NHS organisation, there is a risk that this progress will be lost due to lack of capacity within ESBT workforce and CCG Primary care teams.

7.1.4 International GP recruitment

Although work started on this initiative towards the end of 2016/17 to help address GP recruitment issues, due to delays nationally in publishing the revised NHS England scheme guidance, it has been necessary for the CEPN to pause developing this activity. Once the guidance is published (expected Autumn 2017) then the CEPN will review the situation and work with GP federation representatives to agree the way forward.

7.1.5 The GP Fellowship scheme

Working in partnership with East Sussex Healthcare NHS Trust, the CEPN, led by Dr Lindsay Hadley, has developed a GP Portfolio Fellowship scheme which involves the creation of a two-year post where GPs work four sessions a week in primary care, four sessions a week in a specialty and undertake a postgraduate certificate in Health and Wellbeing at Canterbury Christ Church University. The aim of this two-year scheme is to recruit and retain GPs in the area and to develop them into local GP leaders who will help take forward ESBT initiatives and act as links between primary and secondary care.

7.1.6 Paramedic Practitioners in GP Practices

We've had conversations with staff at South East Coast Ambulance Service (SECAmb) with the intention of working together to recruit and retain Paramedic Practitioners across East Sussex. The benefits of employing Paramedic Practitioners in GP practices are well known locally, to the extent that SECAmb at one point suspended practitioner training as the vast majority of those completing the course later chose to resign their positions and join a GP practice. This position is not sustainable for ESBT as a system so throughout 2017/18 further discussions will take place to agree a solution that will benefit both SECAmb and primary care, whilst also improving access to services and freeing up GP capacity.

7.2 Improved education capability and capacity in primary and community settings

7.2.1 Workflow redirection training

Practices across the ESBT footprint were invited to take part in workflow redirection training to reduce unnecessary admin for GPs. Training was offered in two parts and several practices took part. We anticipate that it will take time to embed the new processes but initial feedback from practices participating in the scheme has been positive, with GPs reporting they have seen a reduction in unnecessary clinical letters for processing. A second round of training will be offered and any lessons learnt from the first wave will be shared.



7.2.2 Improve the percentage of practices supporting pre-registration student nurses.

Dee Kellett (Primary Care Workforce Tutor) has worked with practice managers to increase the number of places available, having achieved 28 of 47 practices audited as ready to host pre-registration student nurses. However, some practices in Hastings and Rother CCG are currently deemed unsuitable learning environments and this is reflected in the capacity the CCG is able to offer. Therefore, an increase in the number alongside sustaining the flow of practices hosting pre-registration nurse students is vital if we are to achieve our aim of increasing workforce and succession planning for the predicted retirement of Practice Nurses over the next five years.

7.2.3 To provide conferences for ESBT nursing staff

Two conferences have taken place during the year as summarised below:

- The ESBT nurses conference on 19th October 2016; which was titled: Celebrating the Value of Nurses in East Sussex and considered the value and difference that nurses bring.
- The primary aim was: *For nurses to challenge their thinking and explore how they may do things differently in the fast changing environment of the NHS*
- Keynote speaker: Miles Hilton-Barber on *how we can challenge ourselves and take risks to deliver effective and high quality services*

and

- Sussex and East Surrey wide General Practice Nurse Conference held on 22nd June 2017. This conference was very well received by the delegates who appreciated a day focusing specifically on primary care nursing. Participants particularly found the focus on the changing landscape within primary care helpful. Attendance from H&R and EHS CCGs was lower than other CCG areas and therefore going forward consideration is to be given to greater promotion of these events, emphasising the importance of protected time for nurses given the value of nurses coming together and the learning gained from these events that will benefit their practices and patients.

7.3 Improving education quality and governance.

7.3.1 Offer a preceptorship to all newly qualified practice staff.

This has been developed and is marketed via the mentor bulletin and the GP newsletter. In summary, the preceptorship framework has supported three newly qualified nurses in Eastbourne, Hailsham & Seaford CCG. Feedback provided on the framework has been positive, indicating that it was a helpful resource and helped the practices to understand the role of newly qualified nurses. All three nurses have now enrolled onto the Introduction to Practice Nursing module to further enhance their learning and fast track the skills required to be a fully functioning practice nurse.



8. Additional Tasks Undertaken

8.1 GP Five Year Forward View (GP FYFV)

The CEPN is supporting the CCGs' service redesign fund which was launched in March 2017. Practices are being invited to bid for funding from the CCG for initiatives that will improve GP capacity and access for patients. This may include the introduction of new roles/upskilling of staff (e.g. the medical assistant role, nurse prescribers, etc.) which would then create a role for the CEPN in terms of the learning and development needed to ensure successful implementation of the agreed initiative.

8.2 GP bursary scheme

An ongoing activity for the CEPN is management of the bursary scheme that is funded by the CCG. The scheme makes £5,000 available to newly recruited GPs to enable them to continue with their career development and encourage them to remain working in East Sussex.

8.3 Local careers events

Given the lack of return on investment during 2016/17 in attending national careers events, the CEPN has decided to participate in local career events only as these events have been much more worthwhile in attracting and retaining GPs and other health professionals in the area.

The CEPN also welcomes the opportunity to work with the HEE Health and Social Care Pre-employment Coordinator for Sussex, working in partnership to fulfil long term recruitment plans by engaging with young people as they make their career choices for the future.

8.4 Development of apprenticeships

With the introduction of the apprenticeship levy and the withdrawal of the training bursary for nursing and other health professional degree courses, the apprenticeship route is going to be a key component of the ESBT recruitment and retention plan, including where opportunities arise for primary care. Standards are being developed for registered Occupational Therapist, Physiotherapist and nursing roles and provide a new career pathway for those interested in a health or social care profession who, for whatever reason, prefer not to take the degree route. Apprenticeships should also enable ESBT employers to 'grow their own' staff and fill much needed skills gaps.

8.5 Working in partnership to increase number of registered student placements

The CEPN has amongst its membership representatives of local Higher Education Institutes (HEIs) and through these relationships the CEPN is seeking solutions to meeting the need for an increase in registered student placements. This approach is in response to the well documented national workforce supply issues across many professions whilst looking at ways of making this education route attractive to potential students, given the withdrawal of the bursary scheme.

9. Other achievements and recognition

As a result of all the good work undertaken during 2016/17, our very own Primary Care Workforce Tutor, Dee Kellett, was awarded the title, Queen's Nurse. Given by the [Queen's Nursing Institute \(QNI\)](#), the title recognises a commitment to providing the best care for patients, being a role model for colleagues, and promoting care in the home and community.

At the time, Dee said: "I am delighted and proud – I am passionate to encourage all our nurses with their educational development, in turn providing excellent quality and best care for patients. I strive to act as a positive and effective role model to my colleagues, and I would encourage all nurses who meet the criteria by showing leadership qualities to apply to become a Queen's Nurse."

Earlier in the year Dee was also named as a finalist in the Leading and Developing People category in the Kent Surrey Sussex Leadership and Innovation Awards that took place in March 2017.





10. CEPN funding for 2016/17

The CEPN finances are governed by the CEPN Finance Policy which forms part of the CEPN governance pack.

10.1 Funding allocations to fulfill CEPN objectives

The CEPN has been allocated funding through various HEE KSS allocations and are summarised below.

10.1.1 HEE KSS Start up funding

In order to support the setting up of the CEPN and the work required to complete the governance pack, HEE KSS provided funding of £50k. A large proportion of these funds were used to commission Tara Humphrey Consulting to project manage the setting up of the CEPN. Tara Humphrey had wide experience of supporting workforce transformation in primary care and had previously been commissioned to set up CEPNs in Kent and south London, which was invaluable in developing the CEPN's first operational plan.

A small amount of these monies remains unspent which will be used during 2017/18 to develop the CEPN, making it more meaningful and able to respond to primary care workforce needs.

10.1.2 Sussex & East Surrey STP

The CEPN has been allocated £95,000 via HEE KSS from STP funds to develop initiatives that support the delivery of the Sussex and East Surrey Sustainably Transformation Partnership. Several applications to access these funds have been made but have not been successful. HEE KSS have provided initial advice on how to access the funds. It is also anticipated that further direction will be made available in 2017-18.



10.1.3 Continuous Professional Development allocation

HEE provides direct CPD funding through the annual Learning and Development Agreement (LDA) Trust funding.

Direct funding is supporting local service transformation, particularly in the context of our local Sustainability and Transformation Partnerships (STPs).

Our local improvement priorities supported to date with the direct funding includes the following:

- Two day travel health
- Two day telephone triage for clinical staff
- Physical assessment of adult Level 6 module
- Frailty module
- Respiratory care module

Looking forward the CEPN, via the Practice Workforce Tutor, is planning to deliver spirometry modules to align our staff to the Association for Respiratory Technology and Physiology (ARTI) register at foundation and full registration levels. This development initiative is currently being scoped.

10.2 Other funding sources

It is anticipated that in the future the CEPN will be able to apply for project funding from other sources.

11. Communications and engagement

The CEPN operational group is striving to develop greater working relationships with its members. All members are asked to commit to meetings and to share information about ESBT CEPN as much as possible.

Representatives of the CEPN regularly attend locality meetings in the six localities within the ESBT footprint. This provides an opportunity to share information with GPs and practice staff and to answer any queries they may have.

Representatives of the CEPN have attended meetings with the Rural Rother Federation.

Engagement takes place with practice staff at the MELE events organised by the CCGs.

The CEPN continues to provide updates to GPs and nurses via their dedicated newsletters.

There is a CEPN web page on the ESBT website setting out information and contact details. There is a link to the ESBT CEPN video. We hope to use the ESBT newsletter in the future to publicise developments for patients and service users.



12. CEPN – Reflections and looking forward to 2017/18

The first year of the CEPN has been about building links with the primary care community. We have worked in partnership with the Primary Care Workforce Tutor who has been inspirational in working to encourage practices across the ESBT footprint to take student nurses and to develop the healthcare assistants.

The CEPN is increasingly working with the GP FYFV group in developing projects including the Care Navigators and in developing a bid to NHS England for international GPs.

GP Portfolio Fellowship roles have been developed by Lindsay Hadley in partnership with ESHT. Two newly qualified GPs have been appointed to the roles and a further round of recruitment is taking place.

This innovative approach to joint working for GPs is likely to inform initiatives for other professional groups and/or new roles such as the Physician Associate (PA). Discussions have already begun with ESHT regarding a portfolio approach to local PA students across acute, hospice and primary care for when they have completed their qualification.

Greater involvement of practice staff in the CEPN will be sought in the second year. It is hoped that the development of new roles that support primary care, particularly Care Navigators, will encourage more practices to take an active role in the CEPN. The CEPN will also be striving for greater LMC and federation level involvement.

ESBT CEPN are grateful to Hastings & Rother CCG for its support in hosting the network and providing staff time to develop the CEPN, ensuring that it is sustainable for the foreseeable future.

13. Definitions / Glossary

- CCG - Clinical Commissioning Group
- CEPN - Community Education Provider Network
- ESBT - East Sussex Better Together - which is the name given to a joint health and social care transformation programme led by Hastings and Rother CCG, Eastbourne, Hailsham and Seaford CCG, East Sussex Healthcare NHS Trust, Sussex Partnership Foundation NHS Trust and East Sussex County Council. ESBT is a recognised 'place based' area within the STP for Sussex and East Surrey.
- ESHT - East Sussex Healthcare NHS Trust
- GP FYFV – GP Five Year Forward View is a wide-ranging strategy for the NHS in England published in October 2014. It covers a number of themes, including the importance of public health and ill-health prevention, empowering patients and communities, strengthening primary care and making further efficiencies within the health service.



- HEE KSS - the Kent, Surrey and Sussex local office of Health Education England
- Host arrangement is with Hastings and Rother CCG on behalf of the five sovereign organisations that make up ESBT. Host means an organisation who has entered into an agreement with HEE KSS and the CEPN to enable any such financial and organisational processes as are required for the CEPN to discharge its functions
- LMC – Local Medical Committees
- MELE – Membership Education and Learning Events
- SECamb – South East Coast Ambulance Service
- STP - Sustainability and Transformation Partnership – Sussex and East Surrey