



*Hastings and Rother Clinical Commissioning Group  
Eastbourne, Hailsham and Seaford Clinical Commissioning Group*

# East Sussex Learning Together CEPN Annual Report

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2018

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## CEPN Annual Report 2017-18

### Foreword

Welcome to East Sussex Learning Together CEPN annual report which I hope you enjoy reading. This is our second annual report, with our CEPN having been launched in July 2016 and with our first report being published in Autumn 2017.

Over the past year our network has strengthened and our team has developed and diversified. Working with our network, we have been able to focus on supporting the expanding primary care workforce to become more resilient and effective.

There are some notable achievements in a year which has seen both the CCGs and East Sussex Healthcare NHS Trust budget significantly squeezed. We have introduced care navigation to General practice which has facilitated joint working with some of our community services and supported the patient and public communications strategy 'Right Person First'. We have supported the new roles in General Practice through placements for paramedics, physicians' associates and pharmacists in training and we have continued to help our workforce to develop through apprenticeships and leadership courses.

In the year ahead, in line with the CCGs' primary care strategy, we intend to further increase the educational capacity in primary care as we view this as key to delivering the future workforce.

Our CEPN sits within the Sussex and East Surrey Sustainability Partnership (SES STP) and therefore we aim to align our plans to STP initiatives. For example, we hope to also look at developing and sustaining portfolio roles to improve integrated care, improve retention and start to break down some of the boundaries between primary and secondary care and health and social care.

***Lindsay Hadley FRCGP MSc***

Chair of East Sussex Learning Together CEPN



## **Introduction**

The drafting of this annual report began on 5 July 2018 – the 70th Birthday of the NHS. The celebrations have served as a reminder of the changes that have taken place in patient care during the last 70 years including the change from hospital to community care and involving people in decisions about their care.

We have seen an increase in life expectancy, people living with numerous long-term medical conditions, medical advances and developments in technology.

In order to provide high quality care for local people which is ‘person centred’ and located as close to their homes as possible a proficient, adaptable and skilled workforce in primary care needs to be nurtured and developed.

GP practices are providing a wider range of patient services with an increasing number of healthcare professionals delivering care and this is likely to gather pace, to provide for the ever-growing needs of our local population.

The CEPN is committed to maximising opportunities to develop the local workforce with the skills required to provide care to all our patients, many of whom have long term conditions or co-morbidities. Our aim is to enhance the health and well-being of the population.

We are also committed to developing our network to include representatives from health and social care provision across the area to enable it to respond to the evolving health and social care workforce agenda. This approach, we believe, means the CEPN is well placed to respond to policies developed by the Sussex and East Surrey Sustainable Transformation Partnership (SES STP).

## **Our Vision**

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

## **Values**

The CEPN acknowledges the principles of the NHS Constitution, in particular that we are ‘working together for patients’. The CEPN membership is drawn from an ever widening range of organisations across the ESBT footprint working together to create a multi-disciplinary workforce to provide care to meet the needs of our diverse population.



## Who are we?

The East Sussex Learning Together Community Education Provider Network (ESLT 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.

From the beginning it was envisaged that the network would represent the interests of primary care and our wider ESBT system with the membership including representatives of each of the ESBT Alliance members, general practice (including a representative from the Local Medical Committee – LMC) plus other key local education and training stakeholders.

It is through this system-wide lens that the CEPN fulfils its main function which 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 continues 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

During 2017/18, the strategic direction and business of the CEPN was managed through a three tier model as described below:

**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 group** – during 2017/18 the governance of the CEPN included a formal operational group that was responsible for implementing the CEPN operational plan, reporting quarterly to the Delivery Board on progress against the CEPN Operational plan.

**Tier Three: Day to day management and work of the network** – The core team that manages the day to day work of the CEPN at the time of publishing this annual report are:

- Lindsay Hadley, ESBT Clinical Lead (Workforce) and Chair of the CEPN
- Colleen Hart, ESBT Head of Workforce Planning and operational lead for the CEPN
- Sue Chambers, ESLT CEPN Coordinator
- Dee Kellett, Primary Care Workforce Tutor
- Stuart Large, Primary Care Workforce Planning Manager

This operating structure is due for review as part of the annual review of the CEPNs governance arrangements being undertaken with the final structure being confirmed in the CEPN's governance pack, due to be published in Autumn 2018.





**Colleen Hart**

ESBT Head of Workforce Planning and CEPN Operational Lead



**Dee Kellett**

Primary Care Workforce Tutor



**Stuart Large**

Workforce Planning Manager – Primary Care



**Sue Chambers**

CEPN Coordinator



## Equality Diversity and Inclusion

The CEPN is committed to promoting inclusivity, equality and diversity in its work and strives to seek the views of patients and service users in the development of our programmes. This has included undertaking a privacy impact assessment and equality impact assessment for the care navigation programme and taking note of views expressed at Shaping Health and Care events. We have recruited lived experience advisors to reflect service user / patient views on our initiatives to develop the workforce.

## CEPN Development 2017-18

### New initiatives

During the year we have taken opportunities to work with colleagues in partner organisations across the ESBT footprint in the statutory and voluntary sector to test out and implement a range of initiatives outlined below.

### Care Navigation

Care Navigation is a person-centred approach which uses signposting and information to help primary care patients move through the health and social care system.

Funding for this initiative was provided by CCG GP Forward View (GPFV) funds and training was commissioned from West Wakefield Health and Well-Being who, as a vanguard site, have led the way in care navigation.

Our original intention was to organise a pilot programme for around ten practices across the area and then 'roll-out' the programme across the ESBT footprint. Interest was greater than anticipated with representatives from twenty one practices attending workshops and completing online training.





A care navigation template has been developed by the CCG IM&T team, following workshops with senior staff from participating practices, which enables practice staff to signpost patients to appropriate alternative services.

The current template includes information about Health and Social Care Connect, Emergency Dentist, Minor Eye Conditions, Southdown Community Connectors, Health in Mind, and Community Pharmacy.

Practice staff can also navigate to alternative 'in-house' resources including paramedics and practice nurses.

Our ultimate aim is to provide information to all patients wishing to make a GP appointment, whether in person, on the telephone or online, with information about alternative health and social care services which can provide assistance with their immediate need. This will be achieved by working with the CCG's Communications and Engagement team to develop the 'Right Person First' initiative.

Members of Patient Participation Groups (PPGs) were invited to attend the training days to provide them with information about care navigation - to help inform patients about care navigation.

This proved to be successful with PPG representatives asking questions from the patient viewpoint and variously confirming that they would be sharing information with their 'waiting room visitors' to share with patients, providing articles for practice newsletters and obtaining a wider view of how patients perceive the wider range of services now available via their practices.

The CCG communications team developed a communication toolkit to be shared with participating practices which included posters, website information and a suggested telephone message.

Practices were able to start using the care navigation template from early May 2018.

Early indications show that practices which have begun care navigation have been able to direct patients to alternative services and free-up GP appointments for others.

*"We introduced care navigation in our practice as soon as the scheme was launched, having already undertaken a pilot of the scheme we were keen to get started. The system is working well with patients being navigated to alternative services leaving more appointments available for those who have urgent need. We have found message recorded on our phone system from one of our senior GPs explaining why additional information is being requested by the Care Navigation team particularly helpful, with patients now very keen to give the team reason for their call. We do feel the calls take longer at the moment but we think this will improve with patients becoming more aware of the other services available other than a GP"*







Example of a practice notice board

*“Our reception staff took part in the online training and attended the workshops to learn about care navigation. Initially some staff were reluctant with the new way of working but once they got started they are enjoying the enhanced role of providing information and assistance to the patients. On the whole patients have been supportive. We have informed our patients about the care navigation by obtaining a banner and having posters in the waiting room. We have also put information on our website”*

### GP Fellows

Three GP Fellows were appointed in September 2017 as a result of investment by the CCGs through the GPFV 2017/18 funding allocation. Each GP Fellow undertakes four sessions each week in primary care, four sessions in a speciality area and are completing a post graduate certificate in Health and Wellbeing at Canterbury Christchurch University. One works in mental health, one in emergency care and the other with the public health department at East Sussex County Council.

Many young doctors are interested in this way of working and the fellowship enables them to:

- have time to choose a the type of career they want and to understand the local area;
- feel valued, through developing valuable skills in a speciality of their choice;
- forge better working relationships with secondary care;
- work in a variety of posts making them less likely to burnout; and
- access some HEE funding towards completing their Masters Qualification.

One fellow has provided this summary of her fellowship year

*“As a GP fellow I have had the opportunity to undertake a PG Cert in Health and Wellbeing organised by the University of Canterbury. I found all three modules very interesting and relevant to my day to day practice. I have been able to reflect on what is health. And review ways of practising seeing my role as GP more in health promotion and prevention rather than focusing on sickness and disease. Undertaking this course has been a great opportunity to enhance my skills in leadership and reflect on my career as a whole”.*

## **GP Bursaries**

During 2017-18 the CEPN took over the role of administering the GP bursary scheme which offered newly qualified GPs 'first fives' the opportunity to apply for a bursary of £5,000 to enable them to undertake a post graduate certificate in a specialty area.

Originally bursaries were funded by the CCG GPFV funds. Later in 2017-18 the CEPN, as part of the funded operational plan, extended the scheme with bursaries being offered to fund the development in a chosen specialist subject that met a local service need e.g. enhancing leadership, the delivery of the Diabetic programme and dementia services. One recipient has commented

*"I was awarded an ESBT post-certification bursary to study for a post-graduate certificate in Dementia Studies at University of Bradford. This has had a massive impact on my role as a GP, as I feel so much more confident in assessing and managing dementia patients. I have more insight into their experience. Overall this has been a brilliant learning experience, which I feel will have a great impact on the care my patients receive".*

## **International GP Recruitment**

Members of the CEPN have been working with partner organisations to deliver larger scale projects. The first example of this is the delivery of the International GP Recruitment Programme (IGPR) promoted by NHS England (NHSE). A joint bid, led by High Weald, Lewes and Havens CCG was prepared in partnership by CCGs across the SES STP footprint during the autumn of 2017 to be part of the NHSE scheme. A working group has been formed and work is currently underway to implement the first phase. This has included a training day for GP practices interested in hosting an international GP. It is hoped that this initiative will have the added benefit of encouraging additional practices to become training practices. An engagement and selection/interview event is planned for autumn 2018 and the first cohort of international GPs should arrive in early 2019.

## **Workforce development:**

### **Non-Medical Workforce**

Since the launch of the General Practice Nursing 10 point action plan efforts have been focused the identified priorities for 2017-18 which are mentorship and pre-registration nursing. This has generated an additional six nurses to uptake Nursing and Midwifery Council (NMC) mentorship training and of our 46 practices, 45 have at least one mentor within their nursing teams. We have developed six sign off mentors to sustain pre-registration and additional work streams that will complement supporting learners.

With the Advanced Clinical Practice (ACP) agenda, we have been supporting nurses with level 7 modules to enable them to credential onto the Royal College of Nursing (RCN) register as an ACP. Four of our Nurse Practitioners took this offer during 2017-18 and we expect more to request support in 2018-19 together with the emerging paramedic practitioners in GP Practice.



The focus for workforce development has made a further shift this year with an increasing number of paramedics being recruited into General Practice, reception staff taking on care navigation and the development of the Physician Associate role.

Regulation of the support workforce is being tightened through increased academic apprenticeship training. The Primary Care Workforce Tutor (PCWT) has focused on ensuring the quality of patient experience and patient outcome continues to be of high quality expected from our practices as new roles emerge and clinical non-medical practitioners advanced skills expand.

Paramedics who meet the stringent entry criteria are now able to take the independent prescribing module and our local university is able to accommodate this. Practices are willing to self-invest in the independent prescribing module to upskill their paramedics. The PCWT is working with paramedics to explore their current levels of education and identify further training requirements to enable them to become advanced practitioners. It is hoped that in the future our paramedics will be able to become ACPs. This initiative will support the standardisation we must achieve in our non-medical workforce.

Healthcare Support Workers working in General Practice are integral part in our primary care teams and the Royal College of Nursing (RCN) have stated that all health care support workers (HCSWs) should be regulated in the interest of public protection.

In light of the apprenticeship standards, we have been encouraging practices to fund and support apprenticeship training. A cohort of eight apprentices started training in June for an eighteen month programme which will include Action Learning Sets and support visits.

### **Increasing scope of practice with radiology**

One aspect of the modernisation of the NHS has been the increase of extended roles for non-medical healthcare professionals such as nurses, allied health professionals and paramedics and this increasingly includes requesting diagnostic procedures such as imaging examinations including X-rays. This does not form part of the standard training for non-medically qualified healthcare professionals and historically our CCGs have had a haphazard arrangement with secondary care regarding eligibility to request X-ray.

The RCN has collaborated with the Royal College of Radiologists (2008) to produce guidance that supports imaging staff to accept requests for clinical imaging from nurses and other non-medical professionals. If Nurse Practitioners and Paramedics, who now form an important element of primary care service across our area were able to routinely request diagnostic imaging, this would enhance their roles and allow greater collaborative working. Our PCWT has been working with the Radiology consultant at our 2 local hospitals to develop a Radiological Imaging policy and structure which will enable free flow for Nurse Practitioner and Paramedics to request both x-rays and ultrasound scanning. A robust training and competency framework will be put in place which will include an annual audit to review competence and an accurate database of clinicians will be held by the Trust and the CCGs. We expect the training to be completed over the summer and that around forty staff will have secured the increased skills to request, review and manage self-generated referrals.

It is hoped that this protocol can be shared with colleagues across the SES STP to encourage secondary care providers to adopt this shift in service delivery.



## Value of Nurse Placements

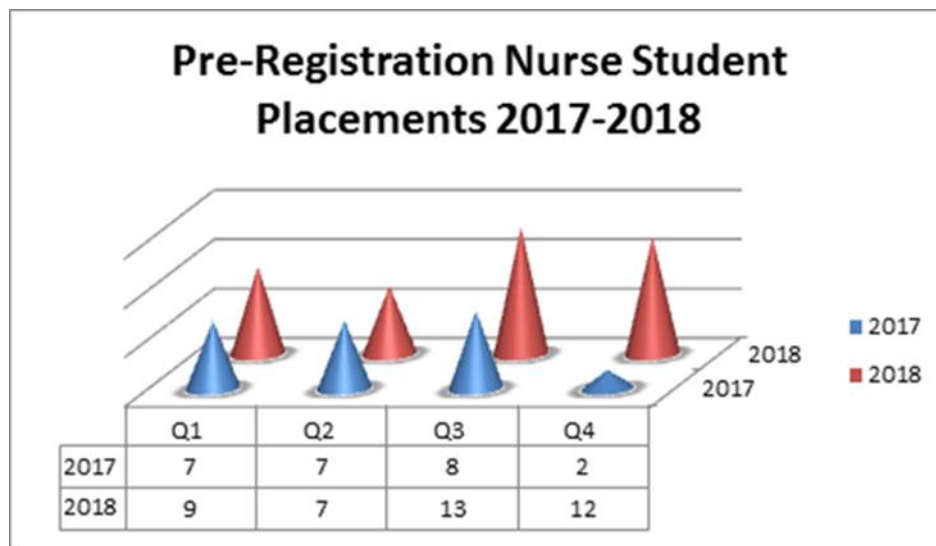
A Third Year pre-registration nurse has provided this evaluation of a placement

*“This was my best placement experience to date. Every member of staff was so welcoming and supportive throughout the experience. I was able to get involved in every aspect of the practice nurse experience and even given the opportunity to run my own clinics under supervision. All staff members were there to support and guide me through everything; I felt like a valued member of the team right from the offset and always felt comfortable and confident in every clinical experience. Everyone I worked with was simply amazing and provided me with role models to aspire to in my nursing practice. I would certainly recommend this placement to every student, and feel it has greatly benefited me in achieving and maintaining my nursing skills.”*

A practice nurse lead has provided this insight into the value of hosting students in GP practices

*“We have hosted five students over the last year and one nurse returning to practice. Initially there was some uncertainty from my colleagues as they didn't feel there would be much the students could do. They quickly realised, with my support, that this was a fantastic learning environment and that they could also learn from the students. I personally have enjoyed having them, seeing them grow in confidence, to the point where they are running a clinic with minimal supervision (practice nurse present of course). They have had the opportunity to develop and consolidate essential clinical skills. At least three students were interested in Practice Nursing as a career as a result of the placements. One student is returning to undertake her management placement. It has certainly made all of us brush up on our knowledge!”*

The number of pre-registration nurse placements has increased during 2018 across both CCG areas and we hope to place forty five student nurses in the coming year.



## Leadership

Leadership is an influential factor in shaping organisational culture and our CEPN focused on strengthening nurse leadership across our primary care. Senior nurses have been encouraged to take a leadership course

through the NHS Leadership Academy, others have been supported to take a level 7 leadership module at University of Brighton which will further enable them to credential onto the ACP register.

## **Development of Pharmacy Services**

### **Clinical Pharmacists in General Practice**

Clinical pharmacists work as part of the general practice team, assisting in the management of long-term conditions, conducting medication reviews, managing prescription requests and queries and managing reconciliation of discharge medication.

Eight of our practices have employed clinical pharmacists of which seven are on the national training pathway for Clinical pharmacists in General Practice. All of the practices report the positive impact of the new roles and three of the practices have now recruited a second pharmacist. There are plans for a further seven pharmacists to be employed in general practice. By the end of 2018 we will have greater than the NHSE target ratio of 1 pharmacist to 30,000 patients.

### **Vocational Training Programme**

Funding has been secured from Health Education England to become a pilot site for vocational pharmacy training. The basic grade pharmacists will spend 2 years developing competencies across the ESHT, General practice/CCG, Mental Health and Care home service. The scheme has successfully recruited its first four recruits who will start the programme in October 2018.

### **Healthy Living Pharmacy Training for Community pharmacy**

The Healthy Living Pharmacy (HLP) framework aims to achieve consistent delivery of a broad range of high quality services through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities.

In East Sussex 104 Pharmacies achieved HLP level 1 accreditation (96%) and a further 23 pharmacies in our deprived communities have applied to be accredited at Level 2. ESCC has organised additional training that will equip these pharmacists with the skills to provide enhanced health and well-being services for their communities. This has included health check training, Stop Smoking advisor training and support for community pharmacists to integrate healthy living pharmacy and build relationships with GP practices as part of the local healthcare system.

### **New Faces**

Nicola Low, Senior Practitioner Occupational Therapy (Development & Training) at East Sussex County Council has been involved in the development of degree level apprenticeships for Occupational Therapists (OTs) with representatives from local NHS and community trusts and University of Brighton. Nicola has joined the CEPN to provide insight to potential role of Allied Health Professionals (AHPs) in primary care and their potential to deliver new ways of working / new models of care. Nicola has shared her enthusiasm for encouraging training in new ways – she arranged a presentation to the network by Paul Chapman National Lead for Return to Practice (HEE) encouraging Allied Health Professionals and Healthcare Scientists back into the workplace. She is currently working with the PCWT and the University of Brighton to enable



the placement of final year OT students into GP practices to support inter-professional collaboration and to build links between allied health professionals' training and primary care.

It is envisaged that health and social care Occupational Therapy teams will continue to work towards integration, aligning working practices to provide a more seamless service. The CEPN is providing support to the ESCC OT conference taking place on 1st November 2018 to raise awareness of occupational therapy and how therapists can improve the lives of local people

In September 2017 we contacted all GP practices across the ESBT footprint inviting GP practice managers to join the group to provide insight into our plans. We were delighted that Nikki Stanley, practice manager at Little Common and Bexhill Old Town joined us in November. Nikki has provided input regarding the adoption of new ways of working in GP practices.

Links have been established with Skills East Sussex (SES) which is the county's strategic body for facilitating initiatives that help ensure the county has the skills needed, including health and social work skills. It agrees and sets priorities, and provides direction for the county's approach to employment and skill development. The aim is to work with partner organisations and to lobby councillors and local MPs to improve access to training and employment opportunities.

We were pleased to welcome Vanessa Taylor from the Community Pharmacy Team to the CEPN operational group— her enthusiasm for the group and partnership working was encouraging to us all! Vanessa has now retired and her place taken by Hinal Patel who provided valuable input in the care navigation training.

The CEPN has been active in seeking out partnership working across the ESBT footprint. One ESBT workstream has developed a Frailty Strategy led by Bill Hargood, project manager in the joint commissioning team, who was a member of the CEPN during 2017-18. One focus of which is to improve advance care planning and support wider services to increase skills of care home staff in engaging in discussions with people's wishes for future care.

Funding was secured from the SES STP central funds for interactive workshops to be provided to care home staff by a team from the local hospices. The workshops are being coordinate by ESCC training team and have been arranged over six months until March 2019.

It has always been the intention to recruit lived experience advisors to provide a patient voice to the network. We enlisted the help of the CCGs' Communications and Engagement team who publicised the opportunity and three advisors were recruited – two are significant users of primary care and the third is a chair of a Patient Participation Group for a local GP practice and has a career background in primary care. We look forward to their input during 2018-19.

### **Development Opportunities for our CEPN**

Several events have been held during the year – by our CEPN, regional and national events.





## Local CEPN Development - ESBT CEPN Development Day 23 November 2018

We held a development day for our CEPN in November 2017 which included an update on the progress of the ESBT Alliance from Paula Gorvett, Delegates had opportunity to focus on the journey made so far by the CEPN and future development of key priorities which included the development of new roles across the system to support the primary care workforce.

## Local CEPN Development – ESBT CEPN Development Day 18 July 2018.

During the second development day, members considered the shared purpose of our work with that of our partners in the primary care team and helped develop a shared understanding of our plans and how the CEPN can support the delivery of the primary care strategy.

## Regional CEPN Development

Two development events were arranged for the Kent Surrey and Sussex region. These events provide an opportunity to meet with colleagues from other CEPNs and share experiences. We prepared a poster about our care navigation for the May event.

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

**Supporting primary care with the Right Person First Campaign**  
Aimed at enabling patients to seek help from a broader range of services bringing closer links to the community and supporting the extension of the practice team

**See the Right Person First**  
Help us to help you

- Health and Social Care Connect
- Pharmacist
- Health in Mind
- Emergency Dentist
- Minor Eye Conditions
- Social Prescribing

**Trained 283 receptionists in care navigation skills in 18 practices with 16 Patient Participation Groups reps. Second Wave planned for November 2018**

**Pre-qualification Physician Associate placements Post qualification PA community rotation**

**Developing relationships with community pharmacists**

**Minor eye conditions service**

**Rolling out social prescribing in all practices**

**The Education Incentive Scheme**

- Supporting practices that have never hosted learners to start training nursing and medical undergraduates
- Supporting practices to take on more learners and facilitate multi-professional learning and teaching by other learners
- Supporting practices to develop apprentices in clinical and non clinical roles
- Supporting training practices to develop learning sets and CPD for clinicians new to the area and those in new roles
- Supporting practices to work together to overcome the challenges of limited space and time
- Supporting practices to share their teaching and learning expertise

**Qualified Pharmacists on the national programme for Clinical Pharmacists in GP practice**

**Pharmacy pre-registration students 2019/20 2 practices in H&R and SDHC Federation are submitting expressions of interest.**

**Paramedics in GP expanding numbers**

**Undergraduate paramedic placements in conjunction with St Georges from 2018**

**Developing General Practice Nurses with advanced skills**

- BSc and MSc courses as well as individual modules
- physical assessment of adults
- minor illness
- independent prescribing
- interpreting blood results
- Spirometry

**First contact physios in 2 practices with numbers to increase**

- OT undergraduate training
- AHP return to practice initiative

Information is shared about future work that CEPNs can be expected to be involved in – for example at the November event information about funding for mental health projects was provided.

## National Events

An event in London in February was attended by delegates from CEPNs across the country, some of which are more developed than SES STP, giving delegates the opportunity to learn from their experiences, particularly in respect of primary care having more of a presence and influence at STP level.



**East Sussex Learning Together**

**At the heart of ESLT CEPN is... the workforce**

**OUR VISION** 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.

**OUR AIM** - Seeking the best for patients, service users and their families through developing those supporting them

<p><b>Supporting GP Recruitment &amp; Retention</b></p> <p><b>Portfolio GP fellowships</b> Three fellowships in adult services, one in the mental health trust and one in public health with the local authority – each organisation a member of the ESST Alliance. Each works two days a week in primary care, two days a week in their specialty and one day a week undertaking a Post Graduate Certificate at Canterbury Christ Church University in Health and Well being. Undertaking projects that underpin the ESST work streams in urgent care, mental health and proactive care. Employed by the acute trust and subsidised by the CCGs through GP Forward View funding. We are looking to recruit a further 4 in 2018/19.</p> <p><b>Bursaries</b> Five bursaries offered each year to pay for a medical (or) qualification in a medical speciality or leadership. <b>International Medical Recruitment</b> We have taken part in a bid for international GPs and aim to support them post appointment with learning aids. <b>Careers fairs</b> We have worked with the acute trust at welcome events for foundation doctors and presented at local and national careers fairs.</p>	<p><b>Supporting the extended Primary Care team</b></p> <p><b>Care Navigation</b> The CEPN is developing care navigators in GP practices to guide patients to appropriate services. 28 out of 48 practices have signed up in the pilot phase which goes live in April 2018. Care navigation is an essential part of changing models of care and is underpinning the diversification of the primary care team.</p> <p><b>Pharmacists in general practice</b> Patrols bids for NHS England initiative. <b>Paramedic Practitioners working in Primary care</b> - Patrols bid. Negotiations with the Ambulance Trust (SSC&amp;M) over joint training. <b>See and treat Physiotherapists</b> - HST follow working on Primary care first contact physio. <b>Physician associates in primary care.</b> Developing a post qualification rotation for PAs to prepare them for general practice.</p>
<p><b>Supporting Pharmacists</b></p> <p><b>Vocational Pharmacy Training</b> - Foundation Pharmacists to be rotated between partner organisations to become Advanced Pharmacists.</p> <p><b>Community Pharmacists</b> - Promoting healthy lifestyles and signposting people to the health and well being service.</p>	<p><b>Supporting the Nursing team</b></p> <p><b>Supporting our existing workforce</b> Supporting Health Care Support Workers (HCSWs) incentives for practices to enrol their HCSWs on apprenticeship schemes. <b>Supporting Nurse leadership programmes</b> Wrap around Edward Jenner programme. <b>To support Advanced Clinical Practice</b> <b>Developing a future workforce</b> We have hosted 44 students placements within primary care in 2017. We have 4 new sign off mentors leading to 4 newly qualified nurses choosing a career in Primary Care and supported this with a mentorship framework. An introductory training bundle for newly qualified and now general practice nurses to fast track core skill development.</p>
<p><b>Next Steps</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Scoping Care Coordinator role</li> <li><input type="checkbox"/> Scoping induction requirements for new roles</li> <li><input type="checkbox"/> Collate consistent workforce data</li> <li><input type="checkbox"/> The Education Incentive Scheme</li> </ul>	

<http://news.eastsussex.gov.uk/east-sussex-better-together/what-improving/esst-community-education-provide-network/>

There was a message from the centre that CEPNs needed to embrace the new roles and to find their own ways to meet the local workforce shortages.

Several workshops were held including First Point of Contact Physiotherapists, Physician’s Associates in primary care – it was apparent that this new role is developing quickly and we aim to take this work forward in our area in the coming year .

An event in London on 2 May focussed on the Development of a multi-disciplinary Workforce

The group shared initiatives which had been used in their local areas and it was agreed that for future initiatives to be sustainable there would need to be consistency across the SES STP area.

**Funding**

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

Funding allocations to fulfil CEPN objectives during 2017/18 were from several sources and are summarised below.

## HEE KSS Funding

In 2016/17, HEE KSS providing initial funding of £50,000 to set up the CEPN and develop the required governance pack which was achieved with the support of Tara Humphrey Consulting.

HEE KSS funding to CEPNs during 2017/18 was an allocation provided to deliver a set of initiatives set out in the CEPN's operational plan for that period. . Our CEPN was successful in securing an allocation of £87,098 which was to be used to support implementation of the following initiatives:

Educational Grants to GP diabetes lead and GP fellows	£11,000
GPN Development Package	£17,800
Care Navigation Development	£20,000
Educational Incentive Scheme	£18,000
CEPN Administrator	£17,500
Medicines management Initiative	£2,798

HEE KSS also provided funding for three nurse practitioners to study for a BSc and for two advanced nurse practitioners

Funds are provided for CPD training for use on courses provided by local higher education institutions including University of Brighton and Canterbury Christchurch University for specialities such as wound care, advanced respiratory care, diabetes care and physical assessment of adults.

## CCG/GPFV funding

The Care Navigation pilot was supported by the CCG as part of the GPFV implementation plans in improving patient access whilst increasing GP capacity.

The GP Portfolio Fellows described above were also funded by the CCGs through the 2017/18 GPFV allocation.

Additional funding was also provided by the CCGs from GPFV funds to provide CPD training.

## Mental Health Initiative Funding

In March 2018 the CEPN was allocated £8,500 to be spent on a primary care mental health project. The project will include simulation training CAMHS issues for local mental health leads and final year local GPRs to improve local expertise around CAMHS presentations and create a cohort of GPs to become local champions in children and young people's mental health. In addition development of an online mental health management resource for local GPs and the primary care workforce which will include training content, provision of information on guidelines, local referral pathways.

Work on this initiative has started and it is hoped to hold the simulation event in the autumn.



## **Future Developments**

### **Educational Incentive Scheme**

This initiative aims to incentivize all practices to become involved in educating their current and future workforce to equip them with the skills to care for patients going forwards and to ensure a stable flexible and motivated primary care workforce. Some practices are not involved in any training and as a consequence find recruitment more difficult. The scheme would incentivise all practices to come into education – possibly starting with one undergraduate nurse or paramedic.

The larger practices could offer learning sets to some new roles – for example the first contact physios.

### **Care Navigation – Second Wave**

Planning for further care navigation training is underway and it is anticipated that training will be offered to those practices not involved in the first wave, the development of a larger care navigation template to offer additional services to patients and additional training for super-users to maximise the benefits of care navigation to practices.

### **Development of General Practice 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 CEPN is hoping to develop a care coordinator role for general practice – this will involve scoping out different options for the role and what training would be required.

### **Physicians Associates**

We hope to support four newly qualified physicians' associates gain employment in local GP practices by facilitating the uptake of the HEE preceptorship and funding further study for them at Canterbury Christchurch University.

### **Undergraduate Paramedic Placements**

To complement a focus on our paramedic colleagues in Primary Care, the PCWT has been working with St Georges/Kingston University and the local ambulance trust – South East Coast Ambulance NHS Trust (SECAmb) to create opportunities for pre-registration paramedic students to take primary care placements. One week placements will be hosted in October, November and May 2019.

### **Social Prescribing**

To improve their health and wellbeing patients benefit from access to a whole range of services in the community. Referral into these services rather than for clinical interventions is known as social prescribing. The CEPN will be working with partner organisations and colleagues in the CCG to further develop social prescribing in the ESBT footprint.



## **Occupational Therapy**

With a shift to a multi-professional workforce in general practice, work has been undertaken with Occupational Therapist (OT) colleagues to create an opportunity to sample a student OT placement in General Practice. The holistic and patient focused benefits have been applauded in a trial in Wessex and there is real scope and opportunity to expand our offer to patients with complex medical conditions. Negotiations are currently taking place and we hope to offer a placement during 2019.

## **Reflections**

The CEPN has widened its scope this year with a development in partnership working at different levels.

Nationally we have attended meetings for representatives of CEPNs across the country and been able to learn from others' initiatives.

We have become more engaged with the SES STP working in partnership to prepare the bid to NHS England to take part in the international GP recruitment programme. We are now working with local partners to develop the programme in our area.

The Care Navigation programme involved us working with service providers across the ESBT footprint including Health and Social Care Connect, Southdown, Health in Mind, Minor Eye Conditions Service, One You, East Sussex Falls Service, Care for the Carers, Physio First and Community Pharmacy. Not all these services were included on the care navigation template but valuable links were made for future working.

The CEPN has benefited from working directly with GP practices and federation representatives – senior practice staff were involved in the development of the care navigation template and numerous reception staff attended the training workshops.

The PCWT has continued to work directly with practices but her role has widened as the GPN plans develop and the development of the Advanced Clinical Practitioners and the increasing role played by paramedics in primary care.

As we begin our third year as a network that is evolving and growing in importance in addressing the workforce capacity and skills gap issues within East Sussex, the CEPN will be reflecting on how it can operate more effectively and make better use of its members valuable time. In this respect, a review of governance arrangements is underway and consideration being given to a more flexible and agile structure that involves Task and Finish groups being the norm to progress specific CEPN initiatives (building on the success of the Care Navigation Task and Finish group model) rather than having a formal second tier (operational group).

The final CEPN governance structure will be confirmed in the revised Governance Pack due to be published Autumn 2018.



## **Definitions / Glossary**

ACP - Advanced Clinical Practitioners

AHP – Allied Health Professionals

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.

ESLT – East Sussex Learning Together

ESCC – East Sussex County Council

ESHT - East Sussex Healthcare NHS Trust

GPFV – GP 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.

HCSW - Healthcare Support Workers

HEE KSS - the Kent, Surrey and Sussex local office of Health Education England

LMC – Local Medical Committees

MELE – Membership Education and Learning Events

NHS E – NHS England

NMC - Nursing and Midwifery Council

OT – Occupational Therapist

PPG – Patient Participation Group

PCWT - Primary Care Workforce Tutor

SECAMB – South East Coast Ambulance Service NHS Foundation Trust

SES – Skills East Sussex



SES STP - Sussex and East Surrey Sustainability and Transformation Partnership

