



East Sussex Learning Together Community Education Provider Network

Operating Plan 2018-19

Version History		
No	Date	Changes Made
1	26.10.2016	Version approved by Delivery Board on 20.10.16
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3.1	August 2018	Annual review
3.2	October 2018	Operating structure following governance review at Delivery Board and Operational Group meeting held on 11/10/18

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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 ESBT Alliance arrangement aims to continue the transformation of 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 Following discussions at a CEPN Development Event and later confirmed by the Board it was agreed to change the name to 'East Sussex Learning Together' to reflect the education and training work of the CEPN.
- 1.7 From the beginning it was envisaged that the network would represent the ESBT system with the membership including representatives of each of the ESBT Alliance members plus other key local education and training stakeholders.
- 1.8 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 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;
 - leading on or supporting specific recruitment and retention initiatives to address the skills gap in primary care
 - responding to and delivering national and STP workforce development strategies; and
 - development of the current workforce through commissioning/provision of educational activities

- 1.9 The three overarching priorities of CEPNs identified by HEE are:
- 1.9.1 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.
 - 1.9.2 Improved education capability and capacity in primary and community settings through the development of more educators including multi-professional educators and through the creation of additional learner placements.
 - 1.9.3 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.
- 1.10 Our operational plan for 2018/19 is designed to support these three overarching priorities and is summarised at Appendix 2, although it should be recognised that this is a snapshot at the date of publication as the plan will evolve during the year and in response to funding opportunities.
- 1.11 Delivery of the CEPN's operational plan is managed through the governance structure given at Appendix 1.

2. Background

- 2.1 The key drivers influencing CEPN Workforce strategy include:
- GP Forward View (GPFV),
 - General Practice Nurse – Ten Point Action Plan
 - Sussex and East Surrey Sustainability and Transformation Partnership's (SES STP) evolving clinical strategy
 - SES STP workforce strategy (currently a workforce statement of intent developed by the SES STP HR Director network) which is expected to be reviewed upon appointment of the SES STP Workforce Lead in Autumn 2018.
 - CEPNs role in supporting the delivery of Local Workforce Action Board (LWAB) objectives which underpin SES STP ambitions
 - Care Act 2014
 - ESBT's Primary Care Strategy (under development), in particular primary care workforce plans arising out of the strategy to address the currently recognised capacity crisis in Primary Care
 - 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 including doctors.
 - Development of new roles (e.g. Physician's Associate, Care Navigator, band 4 Assistant Practitioners and Nurse Associates, Advanced Clinical Practitioners)
 - National changes to non-medical education funding and commissioning and impact on the changing 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.

5. CEPN resources to lead and support the network, including delivery of the network's Operational Plan

- 5.1 The CEPN is led strategically by its Chair, currently Dr Lindsay Hadley, whose role is funded by the CCGs.
- 5.2 The CCG also supports operational leadership to the CEPN via time being given to CEPN developments by the ESBT Head of Workforce Planning.
- 5.3 The smooth running of the network is paramount to its success and therefore a CEPN Coordinator was appointed by the CCGs in March 2017. This role also ensures the network remains compliant with CEPN policies and governance issues (as set out in the CEPN Governance Pack).
- 5.4 The CCG has recognised the importance of the role of the Primary Care Workforce Tutor and has committed to fund the post beyond the current secondment arrangement with HEE and will therefore be employed by the CCGs from September 2018.
- 5.4 There has also been a recognition by the GP Forward View Implementation group of the need for primary care workforce information and planning. The CCG therefore approved funding for a Primary Care Workforce Planning role, which was appointed to on a fixed term basis for two years, commencing 1st May 2018.
- 5.5 The network's activities and functions for 2018/19 will be carried out by existing CCG, Adult Social Care, General Practice and Pharmacy staff who are already engaged in the various CEPN initiatives (placements, nurse mentors, etc.) with support from CEPN members from ESBT partner organisations and HEE.

6. ESLT 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

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

7.1. Tier 1: Strategic Direction – ESLT 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)
 - Ensure CEPN funds are managed, allocated and monitored accordingly
 - Drive the development of a multi-professional education network to support workforce development
 - Set objectives for the network
 - Review and monitor progress
 - Promote on-going development of the network;
 - Review the quality and the range of educational and training activities provided

- Share best practice
- Actively market and promote the CEPN
- 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 is led by Dr Lindsay Hadley as Chair and with support from a system wide membership, including the following representatives:

ESBT Clinical Lead (Workforce)
Head of Workforce Planning, ESBT
Primary Care Workforce Tutor (H&R, EHS CCGs)
GP Tutors
Associate Dean for East Sussex,
Head of Medicines Management/Deputy Director of Quality
H&R, EHS CCGs Primary Care Team
GP Federation representative
Local Medical Committee (LMC) Representative
Planning, Performance and Engagement, Adult Social Care, (East Sussex County Council)
Workforce Development (East Sussex Healthcare NHS Trust)
Education and Training (Sussex Partnership Foundation Trust)
Consultant in Public Health (East Sussex County Council)
Out of Hours provider (IC24)
Brighton and Sussex Medical School
University of Brighton
Canterbury Christchurch University
CEPN Coordinator
Practice Manager representative
Lived Experience /service user representative
Practice Nurse representative (aspiration going forward)
Physicians Associate representative (aspiration going forward)
Paramedic representative (aspiration going forward)
Student, trainees, learners representative (aspiration going forward)

7.1.3 Please refer to the Delivery Board's Terms of Reference for information on the roles, remit and responsibilities of the Board which is available in the CEPN Governance pack or by request from the CEPN Coordinator.

7.2 Tier 2: ESLT CEPN Operational Task and Finish Groups

7.2.1 Delivery of the CEPN Operational Plan is to be via specifically set up Task and Finish groups, whose membership will be dependent upon the knowledge, skills and experience needed to deliver a chosen CEPN initiative and therefore, will be drawn from the wider ESBT system as well as from within the network. .

7.2.2 Task and Finish groups will report on progress on a quarterly basis, thereby meeting ES LT CEPN Delivery Board reporting requirements and that of HEE KSS (for HEE funded projects).

7.2.3 The coordination and oversight of the Task and Finish groups will be the responsibility of the CEPN Operational lead, currently the ESBT Head of Workforce Planning, supported by the CEPN Coordinator and CEPN Administrator.

7.3 Tier 3: ES LT CEPN day to day management arrangements

7.3.1 The day- to- day management of the network is made possible through the support of the CCG in allocating the following resources to carry out the necessary tasks:

Colleen Hart	Head of Workforce Planning, ESBT (CEPN Operational Lead)
Dr Lindsay Hadley (Delivery Board Chair)	ESBT Clinical Lead (Workforce)
Dee Kellett	Primary Care Workforce Tutor
Stuart Large	ESBT Workforce Planning/Information Manager
Sue Chambers	ESLT CEPN Coordinator
Chris Knight	ESBT Workforce and CEPN Administrator (6 month secondment from 12 th November 2018)

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 available from the CEPN Coordinator.

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** General 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 at all levels (within the SES STP, across the HEE South region and nationally).
- 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

- 10.1 ESLT CEPN priorities for 2018/19 will be aligned to the three overarching CEPN priorities as defined by HEE KSS:
 - 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 more educators including 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 overarching priorities for 2017/8 and 2018/19 are summarised in the table at Appendix 2, although it should be recognised that this is a snapshot at the date of publication as the plan will evolve during the year and in response to funding opportunities.

11. Resources required to deliver the ESLT Operational Plan 2018/19 (*taking into account the impact of 2017/18 funding decisions*)

- 11.1 The financial resources 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 2018-April 2019 and is managed by the CEPN Primary Care Workforce Tutor. This funding is separate to that provided by HEE KSS to CEPNs to deliver their Operational Plans.
- 11.2 In this respect, in autumn 2017 HEE KSS advised the CEPN that additional funding would be provided to fund an operating plan to be used for designated priorities. This was successfully applied for and funding received from HEE KSS to deliver on an approved costed plan for 2017/18, with headline priorities such as:
- provide additional bursaries for specialist GPs,
 - ongoing support to GP Fellows with their academic fees (the CEPN has funded the academic course fees for one of the 2017/18 GP Fellows who did not attract HEE KSS funding)
 - contributing to the course fees of 5 x GPs undertaking a Post Graduate Certificate in Diabetes;
 - to provide an educational programme for practice nurses;
 - to enhance the care navigation programme; and
 - developing an Educational Incentive scheme to encourage practices to be more involved in training.
- 11.3 Given the 2017/18 HEE KSS funding was not received until January 2018, agreement was secured with the CCGs for the balance at 1st April 2018 to be carried forward with several of the above initiatives continuing to be progressed into 2018/19.
- 11.4 Additional funds were provided however by HEE KSS, for a mental health project being implemented in 2018/19.
- 11.5 At the time of publication of ESLT CEPN's updated Operational Plan, clarification is being sought from HEE KSS as to the opportunities for operational plan funding for 2018/19.
- 11.6 Similarly, it is currently unclear if there are to be opportunities for the remainder of 2018/19, to apply for funding from the allocation set aside for CEPNs to support delivery of the Sussex and East Surrey Sustainability and Transformation Partnership (SES STP). This is due to a review of the STP workforce governance structure, including the role and membership of the Local Workforce Action Board (LWAB) as well as the imminent appointment of a Director for Workforce for the SES STP.
- 11.7 Another source of funding during 2017/18 was the CCGs to enable the CEPN to progress initiatives that would support implementation of the GP Forward View (GPFV) such as introducing the GP Portfolio Fellowship roles in an effort to attract and retain GPs to East Sussex. The CCG funds allocated (based on a business case) enabled the fellows to work in a chosen setting in addition to their sessions in general practice. The CEPN also provides support for all three fellows on the current scheme through ongoing supervision. Although the CCG has made a commitment to continue to support this first pilot throughout 2018/19, resources for a second pilot of the scheme in 2018/19 are not forthcoming given the CCGs financial position and review of GPFV funding.

- 11.8 The CCGs' GPFV plan also provided funding for the Care Navigation pilot implemented in 2017/18. The success of this pilot resulted in more practices than expected wishing to introduce care navigation and therefore, increased costs were managed partly through additional CCG GPFV funding. More recently however, given the 2018/19 financial position, Care Navigation has been progressed using HEE KSS operational plan monies made available in late 2017 (see paragraph 11.4 above).
- 11.9 In terms of resources to manage the CEPN on a day to day basis, please see paragraph 7.3 above.

12. Network Stakeholders

- 12.1 The list below represents current and future organisations and professionals that may be represented in or interface with the ESMT 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, ESMT 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
- Health Care Support Workers
- Practice Managers and Administrative staff
- In practice new roles such as pharmacists, paramedics, first contact physios and mental health workers
- Federation representatives
- Health Care Assistants
- Primary Care Workforce Tutors

12.2.2 East Sussex Better Together

- Director for Localities and Primary Care (CCGs)
- CEPN Operational Group Chair / Accountable Officer (ESBT Head of Workforce Planning)
- CEPN Delivery Board Chair/Clinical Workforce lead
- Primary Care 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
- Skills East Sussex
- Independent providers

12.2.4 Subject / organisation specialists – current and future aspirations

- East Sussex Healthcare NHS Trust
- Sussex Partnership NHS Foundation Trust
- South East Coast Ambulance Service (SECamb)
- Community Pharmacy Surrey & Sussex Pharmacy representatives
- Local Medical Committee (LMC)
- NHS 111
- Out of Hours provider
- Public Health

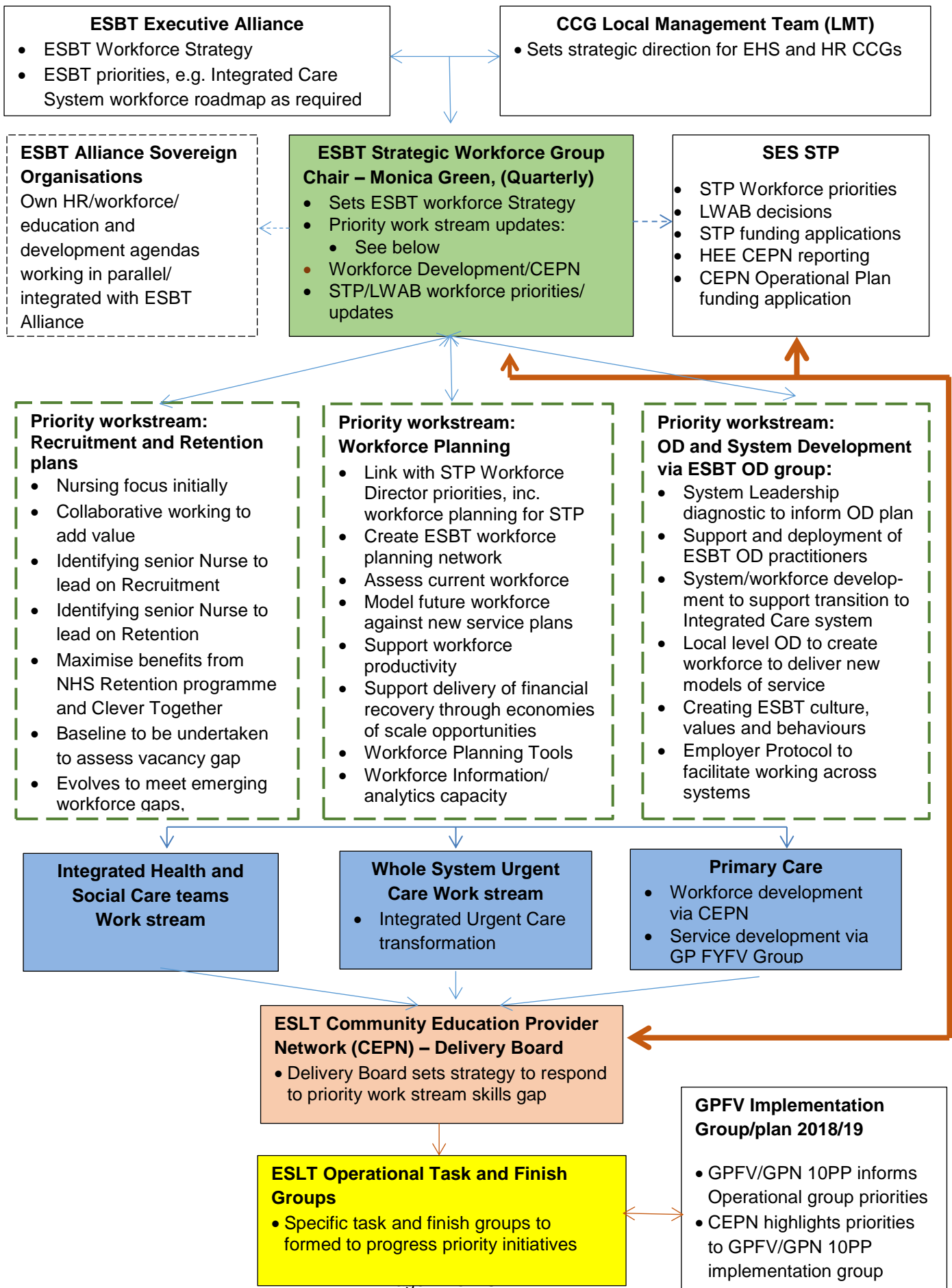
Future aspiration to have representation from:

- Physician Associate representatives
- Paramedic lead
- 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

- Patient participation groups/lay member
- Student focus groups (future aspiration)

Appendix 1: ESBT Workforce and CEPN Governance Structure October 2018



Appendix 2

East Sussex Learning Together Community Education Network Operational Plan 2017/18 and 2018/19

The CEPN three overarching priorities are:

1. Support for 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. Improve education capability and capacity in primary and community settings through the development of multi-professional educators, and the creation of additional learner placements.	3. Improve education quality and governance and act as a local coordinator of education and training for primary and community care to support general practice
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Theme	Objectives	Outcome on completion	CEPN Priorities cross reference	Lead	Implementation Date
Education, Learning and Development	Develop Education Incentive Scheme to host learners in GP practices	Establishment of a hub and spoke training network for practices across the ESBT area	1, 2, 3	LH	
	Non-Medical Prescribing Medical Supervisors	To support clinical staff working outside general practice to become non-medical prescribers	1, 2, 3	EC	
	To coordinate placement of undergraduate paramedics	To establish the ESBT footprint as a host area for undergraduate paramedics	1, 2, 3	DK	October 2018
	To enhance the role of paramedic practitioners in GP practices	To upskill paramedics so they will be able to take a level seven course and access prescribing courses	1, 2, 3	DK	Active and ongoing

Education, Learning and Development	To provide opportunities for paramedic and nurse practitioners to take prescribing courses	To provide support for Practice Nurses and Paramedics working in General Practice to undertake the Non-Medical/Independent prescribing course (V300)	1, 2, 3	DK	Active and ongoing for 2018-19
	To work in partnership with STP partners to deliver an international GP recruitment scheme	To recruit and support as many international GPs as are allocated to our area.	1	SL	From September 2017, first cohort not expected until January 2019
	To provide bursaries to 2017-18 GP Fellows to progress their studies in (currently relates to 1 x GP Fellow as other two fellows on 27/18 scheme course fees being funded by HEE KSS)	That all three GP Fellows are able to complete their post-graduate studies irrespective of funding source	3	LH	From September 2018 and ongoing
	In collaboration with Radiography, develop a pathway and protocol / policy for Paramedic Practitioners and Nurse Practitioners to request X-ray and ultrasound imaging via the ICE system in EDGH and Conquest Hospital	<p>That the protocol/policy is approved with radiology and embedded in practice</p> <p>IR(me)R training will be available for all staff requesting the rights to refer and support the process of application to radiology</p> <p>To ensure a live database is developed holding every referrers details and to be kept up to date with the requirements set out in the policy Document</p> <p>To ensure the audit requirements are met within the policy and returned to Radiology annually</p>	1	DK	June 2018

Education, Learning and Development	To provide a bursary to the CCG Diabetes Lead to complete a Masters degree in Diabetes and Leadership	That the diabetes lead will have completed his masters degree	1,2,3	LH	From March 2018 and ongoing
New Roles	To develop and establish a care navigator role in GP practices	That the care navigation role will be established in 75% of practices in the ESBT area by March 2019	3	SC	From May 2018 for wave one. From October 2018 for wave 2
	To coordinate placement of OT students in general practice	To establish the ESBT footprint as a host area for undergraduate OTs	2, 3	DK / NL	From May 2019
	To develop and support employment for newly qualified Physician's Associates within ESBT footprint/general practice	That PAs have been employed within primary care.	1, 3	LH	From September 2018
	To support an integrated medicines management programme of training for non-registered health workers	To deliver an integrated medicines support service to patients in the community	1, 2, 3	LH	Project not going ahead
	Advance Care Planning for Care Home Staff	To provide Advance Care Planning training for up to 170 staff working in residential care homes to involve older people living in residential care homes in decisions about their future needs and care	1, 2, 3	BH	From July 2018
	Develop a Care Coordinator Role	Further consideration to be given to taking this initiative forward following evaluation of the care navigation programme	1	DK	From January 2019

Nursing	Deliver the General Practice Nursing Ten Point Plan	To have delivered against the 10 actions by 2020	1, 2, 3	DK	From October 2017 and ongoing through 2018/19
	Provide a General Practice Nurse introductory package	To support newly qualified nurses, those new to general practice and those who have not previously accessed recognised practice nurse training	1,2,3		From April 2018 and ongoing
	Develop Practice Nurse Leadership Skills	To formalise leadership skills of GPNs who have been leading teams for a minimum of two years	123	DK	From April 2018 and ongoing
	To develop advanced clinical practice (ACP) via MSc To develop Community Specialist Practice – GPN via BSc (Hons)	That three practice nurses or paramedics complete MSc courses to be ACPs and two Practice Nurses complete BSc courses.	1, 2, 3	DK	From September 2018
	To develop the Healthcare Support Workforce through apprenticeships	To provide training for 10 HCSW to achieve apprenticeships	2	DK	From June 2018
	Provide Student Nurse placements	Future proofing practice nursing	2	DK	Active work stream and ongoing

Pharmacy	Vocational Pharmacy Training	Pilot scheme for foundation pharmacists to be rotated between organisations and become 'advanced pharmacists'	1, 2, 3	EC	
	Clinical Pharmacists in General practice	Implementation of the NHE scheme for clinical pharmacists in GP practices	1, 2, 3	EC	
	Healthy Living Pharmacy Training for Community pharmacy	That accredited pharmacies are equipped with the skills to provide enhanced health and wellbeing advice for their communities	1, 2	EC / J Rittman	

Mental Health	CYP Simulation Training	Delivery of 'Early Intervention and Prevention in Children's Mental Health' one-day simulation training to 12 mental health leads or final year GPRs working in East Sussex.	1 3	LH	From April 2018
	Development of content for online resource aimed at primary care professionals	To include information about mental health training and education opportunities, teaching videos, information on GPs wellbeing services and support and a directory of services within psychiatry and mental health referral pathways	1 3	LH	From April 2018
Comms and engagement	Commission a ESLT Logo	To have a logo to help brand identity			From June 2018
	Establish an ESLT CEPN quarterly newsletter	To provide information about our activities to stakeholders			From June 2018
	Develop an ESLT Website	To promote the activities of the CEPN and allow nursing staff to book onto courses			From October 2018
	Collaborate with colleagues in the CCG comms team in the development of a wide comms plan 'Right Person First'				Completed