

## EAST MIDLANDS CLINICAL NETWORKS AND CLINICAL SENATE BRIEFING FOR NOTTINGHAM CITY HEALTH AND WELLBEING BOARD JANUARY 2016

### INTRODUCTION

This paper provides the Nottingham City Health & Wellbeing Board with information about the role and function of the East Midlands Clinical Networks and Clinical Senate and an update on progress against the business plan for 2015/16. It also provides an opportunity to brief colleagues on the current national review of improvement and leadership development across the health and care system.

### NATIONAL REVIEW OF IMPROVEMENT AND LEADERSHIP DEVELOPMENT

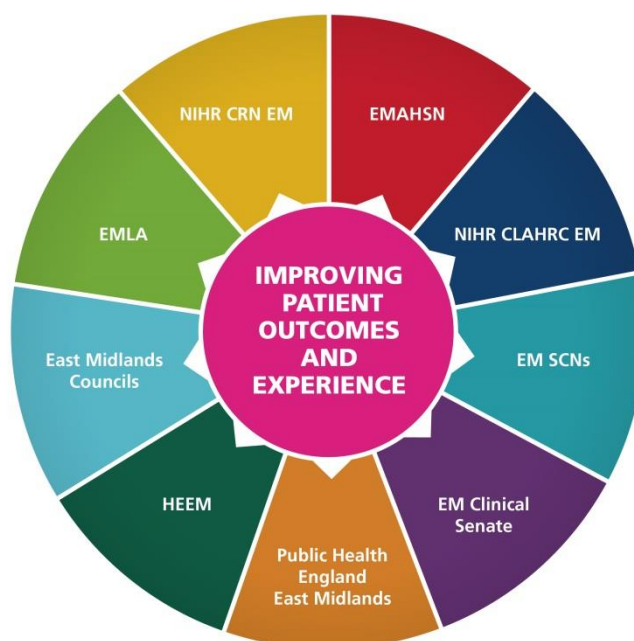
There has been a national review of improvement and leadership development, the recommendations of which were published in July 2016, and confirmed the roles for both the clinical networks and the clinical senates moving forward, supporting health economies to improve health outcomes.

### PARTNERSHIP WORKING IN THE EAST MIDLANDS

Within the East Midlands there are a number of organisations with the same region-wide footprint; whilst our remits are different we share a collective aim: to serve the East Midlands' 4.5m residents, improving health outcomes for patients and the public. A formal partnership agreement reinforces this commitment and collaborating to explore all opportunities to share resources, develop joint projects and reduce the risk of duplication. We are pleased to confirm that East Midlands Councils have recently confirmed their commitment to the partnership.

Where joint priorities (currently cancer, stroke, diabetes and mental health) exist between the Clinical Networks and the Academic Health Science Network, we are committed to aligning our work programmes and resources to maximise impact. During 2015-6 the activities, engagement and collaborative approaches above continue to be developed in order to maximise the levers for change across the East Midlands. We:

- Operate in partnership
- Avoid duplication
- Work collaboratively, not competitively
- Share knowledge through open and honest communication
- Represent each other positively



The Network and Senate team also works closely with specialised commissioning to offer support and clinical expertise into a range of programmes. We are actively supporting work programmes for the initial priorities of the East Midlands collaborative commissioning group to address whole pathways of care across specialised commissioners and CCGs.

Following a request from the East Midlands CCG Congress and with support from the Acute Chief Executives group, we are co-ordinating a mapping exercise as part of a collaborative **sustainable services review**. A number of recent issues (e.g. dermatology, spinal and breast cancer services) have highlighted that, despite significant transformational and QIPP plans within each area, there are some services where there is a significant risk to quality and sustainability and where the impact extends beyond a single CCG, provider or unit of planning.

It is recognised that we, as a system, usually have the information about current and future service pressures, but we do not always bring this together to enable a planned, proactive, timely response. This review, therefore, aims to bring this intelligence together from across multiple perspectives (within and across health organisations) to inform the agreement of appropriate joint solutions to ensure the continued delivery of affordable, high quality care. A facilitative event is planned for January 2016, where we plan to share the results of the current information sharing phase and agree priorities and an initial road map for action.

#### **EAST MIDLANDS CLINICAL NETWORKS**

The role of the Clinical Networks is to support health systems to **improve the health outcomes** of our local communities by connecting commissioners, providers, professionals, patients and the public across a pathway of care to share best practice and innovation, measure and benchmark quality and outcomes, and drive improvement.

The core offers from the Clinical Networks are to:

- **Enable clinical and patient engagement** to inform commissioning decisions
- **Define and drive quality improvements** across complex pathways of care
- **Coordinate and support commissioners and providers** to reduce unwarranted variation, improve cohesion and ensure sustainable services within a single pathway of care

The Networks focus on four core disease and population groupings: **cardiovascular (stroke, renal, diabetes, vascular and cardiology), cancer, maternity and children and mental health, dementia and neurology**. They also respond to local priorities for improvement programmes, which this year include respiratory and end of life care.

The Clinical Networks and the Clinical Senate cover the East Midlands geography of Lincolnshire, Nottinghamshire, Derbyshire, Leicestershire, Rutland and Northamptonshire.

#### **MENTAL HEALTH, DEMENTIA AND NEUROLOGY NETWORK**

The Mental Health Network has convened the first ever East Midlands **crisis concordat** event, benchmarked the provision of section 136 facilities and laterally established an East Midlands clinical network group.

The Network is also supporting commissioners with the national target ambition for **Dementia Diagnosis**. We have provided clinical and advice on best practice to all health communities. Specific support to clinical commissioning groups in Leicestershire increased dementia diagnosis rates by 10% through case finding in long term care homes. This project is now being rolled out in Lincolnshire, with a view to wider spread across the East Midlands.

The parity of esteem work programme provided two innovation funds to pilot new models of working to increase parity of esteem between mental and physical health, for people with **severe mental illness (SMI) and Dementia**. The funds have been made available to commissioners and providers to allow them to trial or pump prime new models of working that sought to reduce premature mortality rates for patients with SMI and to improve the support offered to patients with dementia e.g. hospital avoidance schemes. All projects will be submitting evaluation data in December 2015, with a final report produced in March 2016.

The network identified and benchmarked services against regional consensus-based top ten best practice indicators for **Parity of esteem**. Results have been shared with all nine East Midlands health and well-being boards with an offer to assist developing action plans for improvement.

The network has supported the review of nine local authority **learning disability self-assessment framework** submissions to ensure learning disability specialist providers shared East Midlands' best practice. Support has also been provided to the progression of the East Midlands learning Disability Network.

Clinical advice has been provided to the NHS assurance processes in relation to **Improving access to psychological therapies** (IAPT) targets for access and recovery rates. In conjunction with Health Education East Midlands, completed training needs analysis for psychological therapists and provided workshops facilitated by national team for optimum IAPT staffing models.

Guidelines for commissioning community **rehabilitation services for people with long term neurological conditions** have been developed by the East Midlands Neurological Clinical Advisory Group.

## **CARDIOVASCULAR DISEASE NETWORK**

The Cardiovascular Disease Network has made the case for change and engaged 19 East Midlands CCGs to deliver improvements in the **identification and management of common cardiovascular disease conditions within primary care**. All 19 EM CCGs have implemented atrial fibrillation upskilling programmes and 7 a heart failure upskilling programme, improving GP diagnosis and management of these conditions. It is anticipated that there will be 983 fewer strokes and 325 fewer deaths each year and stroke related hospital admission costs could be reduced by £14.7m, as a result.

The Network is specifically supporting a **diabetes prevention programme** across all 19 CCGs. This includes improving the robustness of primary care registers for people at high risk of diabetes and implementing a systematic diabetes prevention pathway to facilitate referral of patients onto existing lifestyle services or the national diabetes prevention programme and systems for recall of at risk patients. This will include provision of brief

advice and standardised written information for patients on their risk of diabetes using a standardised information booklet.

All these programmes should have a direct impact on reducing referrals into secondary care.

The East Midlands **Renal Transplantation** Improvement Group is collaborating with the CVD network on an improvement programme. This will achieve consistency of access to transplantation, patient pathways and experience, and identify areas of significant variation that impact on patient outcomes across Leicester and Nottingham renal transplant centres.

The CVD network is further collaborating with clinicians, provider organisations and both specialist and CCG commissioners to scope and undertake stocktake exercises of both Vascular and Cardiac care. These stocktakes will describe the current structure and capacity of services, with the aim of supporting the health system to meet future demand.

### **CHILDREN AND MATERNITY NETWORK**

A **CAMHS** mapping exercise was undertaken to identify gaps and variation in the current provision of CAMHS services. A self-assessment tool and user-guide for Future in Mind, have been developed by the Children's Reference Group, to support improvement in CAMHS services and disseminated nationally. The Network has supported the agreement of CAMHS as a priority for the East Midlands Collaborative Commissioning Group, and provided clinical advice to inform the CAMHS local transformation panels. We have just confirmed our engagement with the national children and young people mental health transformation programme, which we plan to progress in conjunction with local authority Directors of Children's Services in order to ensure appropriate advice across health and social care.

The Children and Maternity Network has been facilitating joint activities across Nottingham University Hospitals NHS Trust and University Hospitals Leicester NHS Trust to improve **specialised care for children and young people** within the East Midlands, including new solutions for paediatric transport. This has complemented reviews of **general paediatric surgery**, resulting in Trust-specific reports, and publication of NICE accredited guidance in conjunction with the Royal College of Surgeons for appendicectomy and orchidopexy, with work now started for testicular torsion.

A programme, has been initiated, to link data to identify pregnant and postpartum women with serious mental illness who are not being referred into **perinatal mental health services**. This will support the development of specialised services to improve access for all women to perinatal mental health care who require it, in line with national standards

### **CANCER NETWORK**

During 2015/16 the Cancer Network has focused on **cancer waiting times improvement** by shaping and providing service-specific and clinical advice to the 62 day cancer waiting times assurance process working collaboratively with NHS England assurance and delivery colleagues, locality directors, TDA, Monitor and intensive support teams.

The network identified over £1m estimated potential savings through development of [upper gastrointestinal cancer care pathway](#) and commissioning guidance, ensuring consistent

high quality care for all patients timed pathways are also being developed for prostate, lung and colorectal cancers tumour sites. There are work programmes to improve outcomes in diagnostic services and support a reduction in emergency admissions.

264 GP trainers, appraisers and observers have been trained in **early diagnosis of cancer** resources - finalist at the 2014 Health Service Journal awards and commenced **emergency presentation** work with two areas identified to carry out audits (lung and brain) to identify key issues and address challenges.

There is also a work programme to **improve outcomes in diagnostic** working collaboratively across the East Midlands with a specific focus on radiology. Health Education East Midlands has committed to increase training numbers for radiology; however, significant further progress is required to identify and embed sustainable solutions for the delivery of this specialty across the East Midlands, working closely with the Vanguard East Midlands Radiology Consortium (EMRAD).

## CLINICAL SENATE

The East Midlands Clinical Senate provides independent strategic advice to commissioners and other stakeholders to support them in making the best decisions about health care for their populations. They do this by bringing together a range of health and social care professionals, with patient representatives. More specifically the Clinical Senate can:

- Provide clinical advice, act as an honest broker and, if required, undertake reviews to areas where there may be lack of consensus in the local health system
- Provide independent clinical advice to commissioners, in respect of major change programmes, to inform the NHS England service change assurance process. For example, during the summer of 2015 the Clinical Senate undertook a 3 day clinical review of the **Leicester, Leicestershire and Rutland Better Care Together Programme** and their advice is being used to further shape the plans.
- Work with stakeholders to identify aspects of health care where there is potential to improve outcomes and value. Provide proactive advice about the areas for inquiry or collaboration, and the areas for further analysis of current evidence and practice

As well as responding to requests for reviews, the Clinical Senate has published three reports for commissioners of health and social care services:

- **Meeting the needs of an ageing population:** written in conjunction with the Royal College of Surgeons and with the support of the Academic Health Science Network: [commissioning services for an ageing population and those living with frailty](#) summarises recent national publications with guidance on delivering services for older people and those living with frailty.
- **Using exercise as treatment:** the [report on physical activity and exercise medicine](#), written in conjunction with Public Health England, looks at physical activity and the benefits through its use in prevention of ill health, risk reduction and as an active treatment.
- The Clinical Senate has worked with Public Health England to [develop a report in respect of prevention](#) and an East Midlands specific response to the Five Year Forward View.

### **2015/16 BUSINESS PLAN**

The Clinical Networks online [business plan for 2015/16](#) provides more in depth detail about our work programmes

We are currently commencing our business planning process for 2016/17 taking due consideration of national, regional and local priorities.

### **2014/15 ANNUAL REPORT**

The [Annual report for 2014/15](#) contains details of the range of programmes worked on throughout the previous year

### **ACTIONS**

Nottingham City Health and Wellbeing Board is asked to:

- note the briefing on the East Midlands Clinical Networks and the Clinical Senate
- identify if there are any local priorities for health and well-being, which are not included within the current business plan, which the Clinical Networks or Clinical Senate should consider within their 2016/17 business plan

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