



South East
Clinical Networks

South East (Kent Surrey Sussex) Clinical Networks Annual Achievements 2017/18

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Foreword

Dr James Thallon, Medical Director NHS England South East (Kent Surrey Sussex)



It has been another complex and challenging year for the clinical networks in the South East (KSS). The achievements recorded in this report are all the more remarkable considering the uncertainties faced by the teams for (I think) the fourth successive year, and it is a tribute to the professionalism of the staff and the leadership of the senior management that performance has remained so strong.

As we move forward into a world of STPs and closer working with NHS Improvement, retaining the skills underpinning these achievements will be a key priority for the Medical Directorate as we seek to reconcile the conflicting demands of important national programmes and STP led local initiatives. My thanks go to all of you that have worked so hard in the last year and whose achievements are chronicled below, and I commend the report to you.

Introduction

Jackie Huddleston, Associate Director - South East Clinical Networks (KSS)



The SECN impact and achievements over 2017/18 have been considerable with some key deliverables and interventions outlined within this achievements document. This is not an exhaustive list but is intended to generate an understanding of the team's focus, intent and ongoing added value to the wider system.

The key aim of the SECN team has been the continuation of the implementation and delivery support of the Five Year Forward View clinical priority programmes at a local level, with a primary focus on cancer, maternity, mental health and diabetes. In addition, the urgent and emergency care agenda has continued to be supported with ongoing oversight and input into the stroke service reviews.

The SECN team have progressed their improvement support model over the last year to one where there is close collaboration with the three Sustainability and Transformation Partnerships (STPs) across the South East (KSS) geography, namely Kent & Medway, Sussex & East Surrey and Surrey Heartlands. This collaboration has taken differing approaches depending upon the requirements of each STP, with some staff aligned and embedded within individual STPs or providing bespoke support on an ad hoc basis in addition to the maintenance of a strategic approach across all STPs.

Maintaining effective working relationships with national and regional teams, whilst being a conduit of both information and assurance reporting requirements to STPs and Clinical Commissioning Groups (CCGs) has proved challenging at times. On balance the SECN team have handled this well and are seen as a key support and critical friend to all. This has worked particularly well within the mental health programme where there has been the need to balance ongoing assurance against targeted improvement support, to ensure that system and local transformation continues at pace and that the required national standards are met.

Introduction continued

The balance of assurance reporting against improvement support has also been experienced by the diabetes team. They took on a new assurance role to ensure delivery of the Treatment and Care Programme according to individual STP bid key milestones, with the related financial spend of their allocated proportion of the national Diabetes Transformation Fund. This has required careful balancing from the team members concerned between both assurance conversations and improvement support, a process which has required considerable tact and focus.

The KSS cancer network created in 2013 was dissolved in September 2017 following the successful development and implementation of the 2 Cancer Alliances across KSS, namely Kent & Medway and Surrey & Sussex. Although this was a difficult process and left a sense of loss for some of those involved it should ultimately lead to improved cancer care for patients through closer local collaboration and operational working by the Alliances.

The 2 year clinical network national programme budget allocation has enabled recruitment until March 2019. During 2017/18 we welcomed 5 new members to the team although capacity issues still exist with ongoing staff alignment to STPs and secondment to the Kent & Medway Cancer Alliance. Our clinical leads have also continued to play a key role in supporting transformation and improvement support, specifically within mental health, dementia, diabetes, stroke and maternity. The clinical leadership model is now evolving further with a gradual transition to supporting clinical leadership at a local level within the STPs and individual groups/networks e.g. Local Maternity Systems and Perinatal Mental Health Networks.

I continue to be proud of the achievements of this small team but am very conscious that there is always more to do and that additional capacity may be required to further support the increasing workload of the STPs and national/regional requirements.

Diabetes



Diabetes Clinical Lead Overview - Dr David Lipscomb



Our success

- Through leading the establishment of STP Delivery and Oversight Groups for Diabetes, the Clinical Network programme has supported the improvement of services for people at risk of diabetes and people with diabetes across all three STPs.

Leading change

- Leadership is provided through translating national policy direction and listening to our stakeholders to develop a collaborative approach. This enables continued improvement and delivery of locally identified and nationally specified improvements in diabetes care.

Collaborative care

- The programme approach relies on excellent engagement with the national and regional team, STPs, CCGs, providers, Arms Length Bodies and people with diabetes.

Diabetes : achievements against 2017/18 deliverables

Abbey Kitt – Senior Quality Improvement Lead

Stephanie Millichope – Quality Improvement Lead



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
NHS Diabetes Prevention Programme (NHS DPP)	<ul style="list-style-type: none"> Co-ordinated the implementation of the NHS DPP across the 20 CCGs and 6 Local Authorities. 	<ul style="list-style-type: none"> Kent, Surrey and Sussex have referred 13,035 people at risk of diabetes and 5,396 people have now started the prevention programme. Each STP now has a named lead for the programme. Led on Medway CCG transition of programme to a new national provider.
Treatment and Care	<ul style="list-style-type: none"> Supported implementation of successful diabetes transformation funding bids at STP level. 	<ul style="list-style-type: none"> Established Diabetes Delivery and Oversight Groups in each STP. Aligned members of the Clinical Network team to each STP. Provided each STP with data and information on their current progress and shared learning support. Specific support and staffing has been provided to Surrey and Sussex STP to support delivery of the diabetes transformation fund plan whilst posts have been recruited to. Led on the achievement of QISMET certification for all SE programmes.
National Diabetes Audit (NDA) /CCG Improvement and Assessment Framework (CCG IAF)	<ul style="list-style-type: none"> Increased NDA participation. Supported the improvement of the 2 CCG IAF indicators for diabetes. 	<ul style="list-style-type: none"> Achieved improved participation rate in National Diabetes Audit from 82.4% in 2015/16 to 96% in 2016/17 through running teleconferences, producing reports and addressing issues. Led on published guidance on improved data capture in collaboration with the national team and Diabetes UK. This helped to achieve 16 out of 20 CCGs to improve their attendance at structured education with 50% of CCGs performing above the national average.

Diabetes : achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
Foot care	<ul style="list-style-type: none"> Foot care pathways in place to enable early referrals and improved participation in the National Diabetes Foot Audit. 	<ul style="list-style-type: none"> Produced the 4th clinical network annual survey of gaps in foot care against the NICE criteria with the data report presented to the Clinical Network Foot Care Network. By providing funding and staff to Sussex & East Surrey STP establishment of the Transformation Project across 8 Multi Disciplinary Foot Care Teams has been achieved. Collaboration with the Vascular Networks to embed diabetes foot care pathways within vascular reconfiguration planning. Excellent clinical and commissioner participation and engagement in the Clinical Network foot care subgroup. Contributed to the publication of the College of Podiatry economic case for diabetic foot services (https://www.scpod.org/contact-us/press/press-releases/foot-health-experts-call-for-end-to-avoidable-amputations)
Assurance	<ul style="list-style-type: none"> Mid year additional role identified for the Clinical Network to provide the assurance role for the Diabetes Programme, including Transformation Fund, NDPP and CCGIAF. 	<ul style="list-style-type: none"> In collaboration with our regional colleagues, designed and implemented the new diabetes assurance process for KSS. Recruited and introduced a new member of staff to the Clinical Network team to deliver the diabetes assurance programme. Achieved retention of 100% of Diabetes Transformation Funding by all three STP bid sites.

Diabetes : achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
Wider programme delivery	<ul style="list-style-type: none">• Continue to provide the links, through our Clinical Advisory Group to several other organisations including the South East and London CYP Diabetes Network, HEEKSS and the AHSN.	<ul style="list-style-type: none">• Led on telephone conferences to inform CCGs of the new London and South East Commissioning guidance for CYP Diabetes which the Clinical Network contributed to.• Ongoing collaboration with the Kent, Surrey and Sussex AHSN with the aim of reducing variation in the access to type 1 medical technology, including new guidance on Flash monitoring.

Stroke

South East Clinical Networks (Kent Surrey Sussex)



Stroke Clinical Lead Overview - Dr David Hargroves



Our success

- Led a review of stroke pathway services within the East Surrey and West Sussex geography in collaboration with the National Clinical Director for Stroke, and made a number of recommendations for improvement across both acute and community services. Subsequently supported and monitored delivery and achievement of the majority of the recommendations.
- Life after stroke and stroke rehabilitation commissioning guidance shared and adopted nationally through the national stroke leads NHSE network.

Leading change

- Ongoing support for whole pathway stroke service redesign across KSS through provision of expert clinical advice and leadership.
- Surrey Heartlands STP model implemented with close monitoring and oversight through the Surrey Stroke Oversight Group.
- Kent and Medway STP completed public consultation with a decision on the final preferred option for a 3 site co-located HASU/ASU model due later in 2018.
- Commenced a commissioning advice review of spasticity services for stroke survivors due autumn 2018.
- Commenced discussions to develop an innovative networked solution for provision of thrombectomy to KSS.

Collaborative care

- Worked with KSS AHSN to deliver refreshed metric dashboards which will be ready for sharing in early 18/19.
- Encouraged user engagement with >15% of network clinical reference group being stroke survivors.

Stroke : achievements against 2017/18 deliverables

Jackie Huddleston – Associate Director

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
To support delivery of improved stroke services across the South East to ensure measurable improvement in patient outcomes	<ul style="list-style-type: none">• Maintained oversight of all stroke service reviews across KSS through attendance at all stroke programme boards and oversight groups.• Provided clinical leadership and bespoke advice into all STP stroke service reviews.• Coordinated and clinically led reviews into acute and community stroke services within the SaSH system.• Provided regular stroke dashboards (SSNAP and activity).• Initiated a stroke spasticity task and finish group to produce guidance on care and management.	<ul style="list-style-type: none">• Kent and Medway system progressed to public consultation stage on stroke services.• Surrey established a county wide stroke oversight group to realign all STP reviews impacting on Surrey services.• Conducted 2 stroke service reviews in collaboration with the National Clinical Director for Stroke of acute and community pathways within the SaSH system with production of written reports and recommendations.• All recommendations from SaSH stroke pathway reviews driven forward through the system stroke programme board.• Four monthly stroke dashboards produced on SSNAP and activity.• Stroke spasticity task and finish group established and produced draft flow charts for review and agreement.

Maternity and Perinatal Mental Health

South East Clinical Networks (Kent Surrey Sussex)



Maternity Clinical Lead Overview - Jenny Cleary



Our success

- Three Local Maternity Systems (LMS) have been formed within Kent, Surrey and Sussex coterminous with the STP footprints, and have appropriate governance and structures in place.

Leading change

- LMS Transformation Plans agreed regionally and nationally and teams working towards implementing plan in line with the recommendations within 'Better Births'.

Collaborative care

- Each LMS has relied primarily on local leadership and action, with a multidisciplinary approach. The South East (KSS) Maternity Clinical Network has worked collaboratively to bring together commissioners, providers and service users to support them to establish Local Maternity Systems, share learning and reduce duplication of work. This has enabled them to develop and subsequently implement local transformation of maternity services. We hope to see this success continue as LMS Plans are delivered over the next 5 years.

Maternity: achievements against 2017/18 deliverables

Laura Ansboro – Clinical Network Manager

Amanda Price-Davey – Quality Improvement Lead



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>Provide system leadership to support the development of the Local Maternity Systems (LMS)</p>	<ul style="list-style-type: none"> • Provided targeted improvement support as the key communication link between the LMS's and NHS England, regionally and nationally. 	<ul style="list-style-type: none"> • Local maternity systems are in place. • Each LMS is coterminous with their STP footprint. • Clear governance structures in place across all.
<p>Provide Systems Leadership to the newly formed local maternity systems across Kent, Surrey and Sussex, to implement the National Maternity Transformation Programme</p>	<ul style="list-style-type: none"> • Support to all 3 Local Maternity Systems (KSS) to develop and submit transformation plans in line with national timescales. • Continued attendance and leadership within each LMS, providing regional and national guidance on priorities, funding and assurance of plans and to ensure LMS's are on track to meet the NHSE deliverables. 	<ul style="list-style-type: none"> • All 3 South East (KSS) LMS plans were submitted on time and assessed as green. • All plans were approved both regionally and nationally, ensuring the release of funds to the LMS's from the national team.

Maternity: achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
Implementation of maternity transformation plans	<ul style="list-style-type: none"> • ‘Saving Babies Lives’ care bundle surveys 7, 8 and 9 disseminated to all acute trusts in the South East. • Support the nine work streams of the maternity transformation programme with targeted support to the national priorities; safety and continuity of care. • Represent the South East (KSS) on the regional Maternity Programme Board. 	<ul style="list-style-type: none"> • Close working relationships with the Heads of Midwifery has ensured strong compliance, with survey 9 achieving 100% response rate. • Work stream leads now identified, targeted support has achieved sign off of all plans at national level.
Align LMS with STPs across Kent, Surrey and Sussex	<ul style="list-style-type: none"> • Support LMS to establish relationships with STPs across KSS to link LMS and STP workstreams and ensure governance structures are established. 	<ul style="list-style-type: none"> • This is a work in progress, where these are established, there has been a markedly reduced repetition of work, excellent shared learning practices and good governance structures.

Maternity and Perinatal Mental Health: achievements against 2017/18 deliverables

Jo Gavins – Quality Improvement Lead



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
Foster the development of a learning culture	<ul style="list-style-type: none"> Worked collaboratively with other organisations and initiatives, such as the Maternity and Neonatal Safety Collaborative, AHSN and HEE. Planned and hosted bi-annual Maternity and annual PMH Learning and Sharing Events, with representatives from all LMS's and PNMH Networks. 	<ul style="list-style-type: none"> Shared learning achieved across the LMS within the South East. Key learnings from each PNMH Network and from other CSDF wave 1 sites has been shared across the South East to ensure reduction in duplication.
Provide support, resources and system leadership across the South East (Kent, Surrey and Sussex)	<ul style="list-style-type: none"> Held monthly calls with Perinatal MH Networks to share learning across South East. Continued provision of bi-monthly South East Clinical Network Maternity Commissioners Forum. Held joint quarterly meeting with Commissioners and HOMS. Supported PNMH Networks with CSDF wave 1 and wave 2 bids 	<ul style="list-style-type: none"> The SE PMH Networks event brought together all three PMH Networks to share their learning and best practice from within their specialist services. The Maternity Commissioners forum has been successful in bringing together key individuals to advise on what good services look like and pivotal in the development of transformation plans with agreement at national level. PNMH Networks received CSDF wave 1 and wave 2 funding to set up specialist services.

Cancer

South East Clinical Networks (Kent Surrey Sussex)



Cancer: achievements against 2017/18 deliverables

Ian Vousden – Cancer Network Manager (Kent & Medway Cancer Alliance Manager from 10/17)



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>Provide system leadership to support the development of the Cancer Alliances across the South East</p>	<ul style="list-style-type: none"> Led and facilitated discussions with key stakeholders across the SE to agree cancer alliance footprints, leadership and hosting arrangements. Hosted and subsequently allocated core funding to each Cancer Alliance during set up. Primary support given to the establishment and set up of the Kent & Medway Cancer Alliance. Initial oversight and guidance also given to the Surrey & Sussex Cancer Alliance before their hosting was established through the Royal Surrey County Hospital., Guildford. Planned for the dissolving of the Cancer Network from October 2017. 	<ul style="list-style-type: none"> Two Cancer Alliances are now in place across Kent & Medway, Surrey & Sussex, with clear governance structures, delivery plans and core teams appointed. Cancer Alliances were fully established and hosting arrangements agreed through regional and national colleagues. Kent & Medway Cancer Alliance fully aligned with the Kent & Medway STP. Surrey & Sussex Cancer Alliance established effective reporting arrangements across the 3 relevant STPs in that area. Successfully dissolved the South East (KSS) Cancer Network in September 2017.

Mental Health

Adult Mental Health

Children and young people's mental health



Adult Mental Health Clinical Lead Overview - Dr Katrina Lake



Our success

- Through delivering the programme, we have supported the improvement of services for people accessing IAPT, EIP, acute and crisis services, as well as delivering improvements to suicide prevention and physical health checks for people with Serious Mental Illness (SMI).

Leading change

- Running networks to facilitate working together across systems, learning as well as best practice. I am hugely proud of the progress that we have made as a team over the course of the last year. We are looking forward to further developing the programme of work over the next year.

Collaborative care

- We have had excellent engagement with STPs, CCGs, providers, arms length bodies and people with lived experience.

Mental Health : achievements against 2017/18 deliverables

Michelle Vassallo – Senior Quality Improvement Lead

George Chapman – Quality Improvement Lead



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>System leadership and improvement support across the Mental Health programme</p>	<ul style="list-style-type: none"> Establishment of the South East (KSS) Joint Working Group bringing together NHS England, NHS Improvement, local Arms Length Bodies as well as STP Mental Health Leads. Clinical Network staff alignment to STP Mental Health programmes. Interpretation of national and regional asks. 	<ul style="list-style-type: none"> Better collaborative working, improved relationships, shared knowledge, ownership and support of STP Mental Health Delivery. A dedicated point of contact for STPs to access improvement support and advice. South East (KSS) stakeholders are kept up-to-date with the latest policy, guidance, funding opportunities and shared learning across health economies.
<p>System leadership and improvement support across the Mental Health programme - Adult Mental Health programme</p>	<ul style="list-style-type: none"> Provision of 3 Adult Mental Health Commissioners Forums - themed discussions focused on Acute and Crisis Care, Workforce, Return on Investment and STP relationships. Facilitation of regular communication between NHS England national team, STP Mental Health Leads, CCG Commissioners and Service Providers. Key component working as one team with NHS England Operations and Delivery on reviewing mental health delivery plans and funding applications. Funded 6 communities across the KSS area to attend the Kings' Fund Learning Network on Integrating Physical and Mental Health. 	<ul style="list-style-type: none"> Provided commissioners with a safe space to share best practice and lessons learnt, which in turn has been incorporated into commissioning intentions. Improved quality of mental health plans and bids prior to regional submission resulting in successful funding applications for Wave 2 IAPT Long Term Conditions and Wave 1 and 2 Mental Health Liaison sites. Influenced stakeholder decision-making on differing service models which is being incorporated into STP Mental Health Delivery Plans.

Adult Mental Health : achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
Improving Access to Psychological Therapies (IAPT)	<ul style="list-style-type: none"> • Provision of 3 IAPT Clinical Network Forums with themed discussions on improving IAPT recovery rates, sharing lessons learnt from Wave 1 and 2 IAPT Long Term Condition and Employment advisor early implementer sites and understanding workforce implications. • Provision of an IAPT Data Analyst Programme across KSS specifically for Commissioners, Providers and Data Analysts. • Instrumental in organising the Older Adults (Hard-to- Reach) IAPT Forum across the South region. • Provision of specific improvement support offered through site visits and presentations delivered to Diabetes teams. 	<ul style="list-style-type: none"> • Through sharing lessons learnt and the provision of the Data Analyst programme, the South East (KSS) region exceeded the IAPT recovery and waiting times standards. • STP Leads, Commissioners and providers used lessons learnt from Long Term Conditions and Employment Advisors early-implementers sites to assist in developing their IAPT action plans. • Raised the profile of the Mental Health Five Year Forward View within physical health to improve better collaborative working.
Early Intervention in Psychosis (EIP)	<ul style="list-style-type: none"> • Provision of 3 EIP Clinical Network Forums which supported the KSS region to: <ul style="list-style-type: none"> • develop and share Service Development Improvement and Workforce Plans. • share best practice from outside the KSS region on the provision of Physical Health Checks. 	<ul style="list-style-type: none"> • Shared lessons learnt with the NHS England policy team to influence change for over 35's service provision. • Improved adherence to EIP NICE concordance. • More robust EIP workforce plan within the wider STP Mental Health Workforce Plan.

Adult Mental Health : achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>Acute and Crisis Care</p> <ul style="list-style-type: none"> • Mental Health Liaison • Crisis Response and Home Treatment Teams • Out of Area Placements 	<ul style="list-style-type: none"> • Launched the first Adult Mental Health: Acute and Crisis Care Mental Health Clinical Network Forum. • Provision of local improvement support through attendance at Crisis Care Concordat meetings and other local forums across KSS. 	<ul style="list-style-type: none"> • Developed a new platform which enabled sharing and learning across a wide stakeholder group (not just NHS). • Positive feedback from stakeholders, measured by evaluation forms with a request for future events on this subject area.

CYP Mental Health Clinical Lead Overview - Dr Ann York



Our success

- We have worked with our partners and driven forward the national workforce agenda. Kent, Surrey and Sussex now have a CYP Workforce Strategy and we are presently auditing the entire workforce so as to understand the current and future workforce requirements to 2021 across the system, in terms of number, skill mix, competencies, roles, location and training needs.

Leading change

- Children and young people increasingly have access to swifter evidence based care, including those in vulnerable situations, in crisis and with eating disorders. Local Transformation Plans are actively engaging young people, families and the third sector, so valued by young people. We are proud that several services have received national awards for innovation.

Collaborative care

- Working with our commissioners, providers, health and justice colleagues, national team colleagues and various arms length bodies through our forums and groups, has meant as a team we have been able to really support transformation of care for the young people in our area.

CYP : achievements against 2017/18 deliverables

Alec Renmant – Senior Quality Improvement Lead

Claire Scott – Quality Improvement Lead



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>System leadership and support in implementing the “Future in Mind” CYP MH Strategy and delivering increased access to evidence based MH interventions</p>	<ul style="list-style-type: none"> Commissioned an independent review of South East Local Transformation Plans (LTP) which provided bespoke feedback to Commissioners on their LTP. Developed a Master Class for commissioners from across the 6 LTP partnerships allowing for an informed process for the LTP refresh. 	<ul style="list-style-type: none"> The 6 LTPs appropriately reflected transformation of services across Kent, Surrey and Sussex. All LTPs were successfully assured showing improvement across all 6 LTP areas and have subsequently been aligned to STP work streams.
<p>To support the provision of a competent and capable CYP MH workforce</p>	<ul style="list-style-type: none"> To ensure the provision of a CYP mental health and emotional wellbeing workforce with the right number of people, with right skills, deployed in the right place through whole system transformation, the Clinical Network supported CYP Commissioners in the development of a CYP workforce joint approach. 	<ul style="list-style-type: none"> The Clinical Network supported the employment of a Workforce Project Management team by the commissioners and a 2 year workforce project was launched. Working across the system with local Health Education England colleagues from each STP area, the project team have identified the needs, have produced 3 STP area workforce strategies and are rolling out a bespoke audit tool for the wider network of providers looking to address the local CYP MH workforce issues.

CYP : achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>Increased access to evidence based treatment for CYP: Ensure that an additional 49,000 children and young people receive treatment from NHS-commissioned community services nationally</p>	<ul style="list-style-type: none"> Supported the development of high quality care pathways by providing themed Transformation Steering Groups identifying areas of blockage to data flow and resolution focussed sessions for accurate and complete data flow to MHSDS. Worked alongside Assurance, National and Regional colleagues to support the design of recovery plans to address the data flow shortfall. 	<ul style="list-style-type: none"> Designed and co-ordinated a bespoke Access Data Workshop for those providers' flowing data to MHSDS which was completed in March 2018. Working with both providers and commissioners, this workshop identified the next steps required to improve data functions and processes.

Dementia

South East Clinical Networks (Kent Surrey Sussex)



Dementia: achievements against 2017/18 deliverables

Jo Gavins – Quality Improvement Lead



Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>System leadership and support to achieve and maintain the Dementia Diagnosis Rate standard of 67%</p>	<ul style="list-style-type: none"> • Provision of bi-monthly forums focusing on dementia diagnosis and the ‘well pathway’ to help share best practice and support STPs with local challenges to help improve their DDR and undertake care home case findings. • Supported system to understand the new DDR prevalence by producing guidance and forums on prevalence calculations. • Provided targeted support to low performing CCGs including visits from NHSI/IST team and Professor Alistair Burns to better understanding of what further interventions are required. • Commissioned evaluation of the Primary Care led Memory Assessment Service (MAS) in East Sussex. Overseen and co-ordinated by Clinical Networks with findings presented at event and disseminated to South East commissioners and clinical leads. 	<ul style="list-style-type: none"> • Data harmonisation guides which CCGs and clinical leads can use to help improve read coding within primary care. • Care home case finding focused work by GPs/ mental health practitioners to help improve DDR within care homes. • Improved understanding of new DDR calculation and why certain CCGs figures have significantly decreased with presentation from analysts from regional team. • CCGs/STPs reviewed their referral and diagnosis pathways to improve their DDR and reduce variation in waiting times from referral to diagnosis. • Evaluation produced and published widely.

Dementia: achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>Support to increase the number of people being diagnosed with dementia within six weeks from referral to diagnosis, in order to reduce variation in the service and achieve the forthcoming standard</p>	<ul style="list-style-type: none"> • Supporting and advising Commissioners, Clinical Leads and STP MH Leads on the 'well pathway' including post diagnosis support. • Provided advice and support to STP leads on development of STP Delivery Plans to develop and deliver their Dementia Strategy. • Held regular clinically led learning and sharing events across the South East to share best practice. • Medway care home case finding focused work to review and diagnose patients within care homes. • Funded Brighton & Hove CCG for additional nurse support within their MAS to help reduce number of patients waiting for diagnosis and treatment. • Bespoke targeted support for STPs and CCGs with lowest DDR. 	<ul style="list-style-type: none"> • CCGs/STPs put specific plans in place to achieve a target of 67% and to reduce the variation in their dementia service in order to meet six weeks waiting times from referral to diagnosis and treatment. • STP Delivery Plans included targeted work to increase DDR and reduce waiting times by working closely with clinical leads and providers to improve their care pathway. • STPs have improved engagement with their clinical leads and MAS providers to improve pathways and reduce waiting times within MAS. • Early discussions held on how to reduce waiting times from referral to diagnosis in readiness for forthcoming standard of six weeks from referral to diagnosis and treatment.

Dementia: achievements against 2017/18 deliverables

Deliverable	CN Interventions - what we did	Outcomes - what we achieved
<p>Support to primary care to initiate and manage dementia prescribing within primary care in readiness for new NICE guidelines and to give more capacity to secondary care to deal with more complex cases</p>	<ul style="list-style-type: none"> • Overseeing and managing Clinical Networks funded pilot in Sussex to develop primary care training programme of videos to upskill GPs to monitor and initiate dementia medication more confidently within primary care so that secondary care can focus on more complex patients. • Prescribing video pilot held in Whitstable practice in Kent in PLT GP session in preparedness for cascading to South East area and beyond. • A training programme was launched at a recent Dementia Clinical Networks event and disseminated to all lead Commissioners and clinical leads across the South East. • Hosted forum for regional analysts to present DDR prevalence calculation. 	<ul style="list-style-type: none"> • Training videos have been developed for primary care to upskill GPs with initiating and monitoring dementia medication within primary care. • Feedback from pilot was excellent and GPs who attended pilot felt more empowered to understand benefits of dementia diagnosis and use of dementia medication within primary care. Clinical lead who supported session was pivotal to its success. • Significant interest from both commissioners and clinical leads in using the videos across all three STPs, with two PLT sessions booked to deliver training videos in the forthcoming months.

Business Support

South East Clinical Networks (Kent, Surrey & Sussex)



Business Support Team

Rosa Taylor - Senior Business Support

Jackie Nash – Business Support Administrator



Maintained 148 separate groups and distribution lists across Kent, Surrey & Sussex

Acted as key first contact for all stakeholders

Managed the SECN business office function and provided effective admin support to all programmes

Supported over 40 external conferences and forums

PA function for Associate Director



Assisted with maintaining SECN contacts list of 3,500 people made up of 148 separate groups across Kent, Surrey & Sussex



Managed financial controls process through SBS

Get in touch

South East Clinical Networks

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