

South East (Kent Surrey Sussex) Clinical Networks 2 Year Business Plan 17/19 Refresh for 2018/19

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Introduction

Focus : The South East (KSS) Clinical Networks (SECN) refreshed 2 year business plan for 2018/19 remains focused on delivery support of the national priority clinical programmes within the Five Year Forward View - primarily mental health, diabetes and maternity. The SECNs have a key role in supporting local delivery of these transformation programmes through the 3 STPs - Surrey Heartlands, Sussex & East Surrey and Kent & Medway. The provision of clinical leadership and advice aligned to the priority programmes remains core to this approach although the focus has moved to supporting and developing this at a local level as far as possible.

The SECNs support the required continuous improvement and transformational change required to deliver high quality patient outcomes at both CCG and STP level through:

- Provision of targeted improvement support and clinical advice.
- Identifying opportunities for improvement.
- Facilitation of sharing and learning from best practice.
- A combination of differing approaches including acting as an honest broker, trouble shooter and/or critical friend where appropriate.
- Enabling and promoting clinical and patient/carer engagement to inform commissioning decisions and transformational change.

Cancer: Cancer has moved fully under the auspices of the Cancer Alliances although the Kent & Medway Cancer Alliance is hosted by the CN.

STP: Ongoing discussions on NHSE/I integration and STP resource requirements may impact upon alignment of staff to STPs and future ways of working. The CN team are committed to delivering the programmes set out in the business plan, however, ongoing review and refreshing of our activities and resources will be maintained recognising the changing environment and progression of STPs and local need.

Caveats

The following should be noted at the time of writing this business plan:

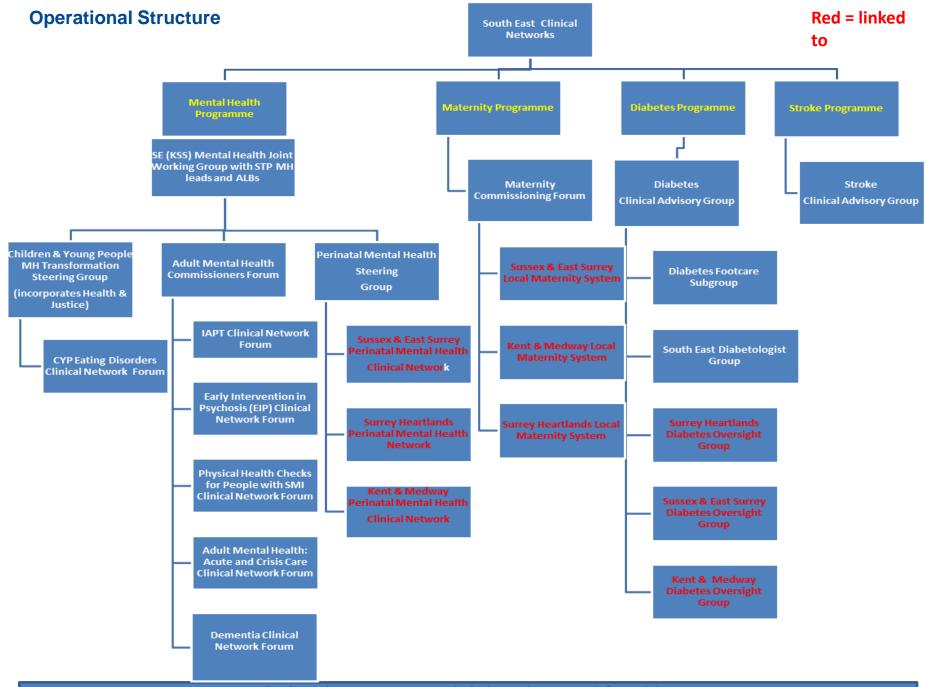
- The programme budget has not been fully confirmed at the time of writing this plan and any unknown reductions ,may impact upon delivery.
- The functions mapping exercise may lead to a CN team hosting arrangement or full STP alignment in-year.
- The business plan and related programme delivery is wholly dependant upon available staff resources and successful recruitment to fixed term posts.
- The South regional split and NHSE/I alignment may further affect the current South Region Programme Boards for diabetes and maternity and therefore the ways of working and reporting.
- Accountability for delivery and reporting on all programmes may fully move to STPs.
- The programme approaches and deliverables are based upon the national priority clinical programmes and delivery across and through the STPs. Any additional local requirements which may emerge through the STP process are likely to need additional resourcing and the ability to support will be dependent upon overall team capacity.
- The cancer network was dissolved in September 2017 with the 2 Cancer Alliances now leading on cancer transformation delivery across their geographical footprints. The CN team will not be supporting cancer programme delivery in 2018/19 although will continue to host the Kent & Medway team until a future model is agreed.
- The transfer of Surrey Heath CCG to Hampshire Thames Valley (HTV) DCO may impact on resource allocation (although unlikely to for CNs).
- It should be noted that this business plan does not include End of Life Care, which has been led the KSS AHSN for the last 3 years and is likely to continue to be so in 2018/19.



Governance and Accountability

It is recognised that accountability may further change during 2018/19.

- NHSE South East (KSS) DCO approval of CN refreshed business plan, ensuring alignment and "one team" mental health approach with Operations & Delivery team.
- Responsibility for monitoring and delivery of the clinical network objectives against agreed milestones to lie with the South East (KSS) DCO.
- Reporting of progress and milestone achievement to South/South East Region through the Regional Programme Boards and related PMO.
- Programme specific highlight reports will be shared with the STPs and related groups where applicable to ensure understanding of progress.
- Accountability through Associate Director to DCO Medical Director for programme delivery.
- All programmes will have a governance structure relevant to the individual programme requirements although increasingly this is moving to STP based accountability and leadership e.g. Local Maternity Systems (LMS), STP Diabetes Oversight Groups and STP Mental Health Programme Boards.
- The Kent & Medway Cancer Alliance operational accountability sits with the CEO of the STP but the CN Associate Director will still retain line management HR responsibility for the staff with budgetary responsibility and accountability until future organsiational hosting arrangements are resolved.



Other bespoke Groups as required which may be on a Task & Finish basis

Operational Delivery Model

During 2018/19, it is proposed that staff working within the NHS England South East (KSS) Clinical Network team will:

- Align to the STP mental health & dementia, diabetes and maternity & PMH programmes to provide advice, guidance and support in delivering their programmes in line with the Five Year Forward View and their local STP plans.
- Attend all relevant STP led groups including Mental Health Programme Boards, Stroke Programme Boards, Diabetes Oversight Groups, LMS or PMH Network meetings; providing focused improvement support as able, escalating any queries, risks and issues as required. The STP based groups will be the key delivery vehicles and drivers of the clinical transformation programmes.
- Provide programme aligned specific events/forums/bespoke pieces of work in accordance with STP and NHSE requirements and requests.

The South East (KSS) Clinical Networks team will:

- Continue to run both regular KSS wide forums and one-off events as a means of bringing STP leads, commissioners, providers and Arms Length bodies together to share best practice and support quality improvement initiatives to promotet STP delivery.
- Respond to regional and national reporting requirements (both regular and ad-hoc).
- Be flexible as far as possible to respond to in-year deliverable requests and/or changes.
- Contribute to the assurance process through clinical and subject matter expert (SME) review of all relevant CCG/STP/LTP/LMS plans and provision of targeted improvement support where required and agreed.
- Work in close partnership with all regional/national teams and ALBs to promote a joint approach to improvement and support.
- Continue to host the Kent & Medway Cancer Alliance budget and staff although a potential transfer to the host STP organisation will be worked through in early 18/19.

Operational Delivery Model for Mental Health – DCO One Team Approach

	Clinical Network	NHSE South East (KSS) Assurance and Delivery	
All-age Mental Health	 1.0 WTE 8c All-age Mental Health Network Manager (fully aligned to Sussex and East Surrey STP) 	 1.0 WTE Band 8b Operations and Delivery Manager (Adult and CYP Mental Health) 0.6 WTE Band 6 Operations and Delivery Coordinator 	
Adult Mental Health	 1.0 WTE Band 8b Senior Quality Improvement Lead (Maternity cover will be required from May 2018) 1.0 WTE Band 8a Quality Improvement Lead 0.3 WTE Clinical Lead for Adult Mental Health 	See all-age Mental Health	
CYP Mental Health	 1.0 WTE Band 8b Senior Quality Improvement Lead 1.0 WTE Band 7 Quality Improvement Lead 0.2 WTE Clinical Lead for CYP Mental Health Unable to recruit to Local Authority Advisor post despite numerous attempts 	 0.5 WTE Band 8b Operations and Delivery Manager CYP Mental Health 	
Perinatal Mental Health and Dementia	 0.8 WTE Band & Network Manager for Maternity and Perinatal Mental Health 1.0 WTE Band & Quality Improvement Lead Clinical Leadership funded sourced from STP footprints e.g. PNMH Networks 	See all-age Mental Health	

Operational Delivery Model - Maternity and Diabetes

	Clinical Network	NHSE Assurance	STP
Maternity	 0.8 WTE Band & Network Manager for Maternity & Perinatal Mental Health 1.0 WTE Band & Quality Improvement Lead Provision of funding for LMS Clinical Leads 	Link closely with NHSE Nursing Team	3 Local Maternity Systems (LMS) on STP footprints Clinical leads in place within all LMS
Perinatal Mental Health	1.0 WTE Band 8a Quality Improvement Lead (covering dementia as well) Provision of funding for PMH Networks Clinical Leads	Covered by 1.0 WTE 8b Operations and Delivery Manager (Adult and CYP Mental Health)	3 PMH Networks on STP footprints Clinical leads in place within all PMH Networks
Diabetes	0.8 WTE Band 8b Senior Quality Improvement Lead Clinical Lead 2 PAs/week (also funded as Clinical Lead for Sussex & East Surrey STP)	1 x 7 WTE Quality Improvement Lead employed through Clinical Network Team	3 STP Diabetes Oversight Groups

Staff Alignment to STPs

Programme	Surrey Heartlands STP	Sussex and East Surrey STP	Kent and Medway STP
Diabetes	Stephanie Millichope Quality Improvement Lead	David Lipscomb Diabetes Clinical lead (Clinical Lead for Sussex & East Surrey STP as well which we fund)	Abigail Kitt Senior Quality Improvement Lead
Maternity	<	Laura Ansboro Network Manager Amanda Price-Davey Quality Improvement Lead	
Stroke and UEC components of cardiovascular disease	•	Jackie Huddleston Associate Director	

Staff Alignment to STPs - Mental Health One Team Approach

	Surrey Heartlands STP	Sussex and East Surrey STP	Kent and Medway STP
NHS England staff	Michelle Vassallo Senior Quality Improvement Lead (until May 2018) Jo Gavins Quality Improvement Lead	Charlotte Clow Network Manager Alec Renmant Senior Quality Improvement George Chapman Quality Improvement Lead Lead	Tracey Tipping Operations and Delivery Manager

Surrey Heartlands STP

• This STP is a Wave 1 ICS site, therefore also qualifies for NHS England national support.

Sussex and East Surrey STP

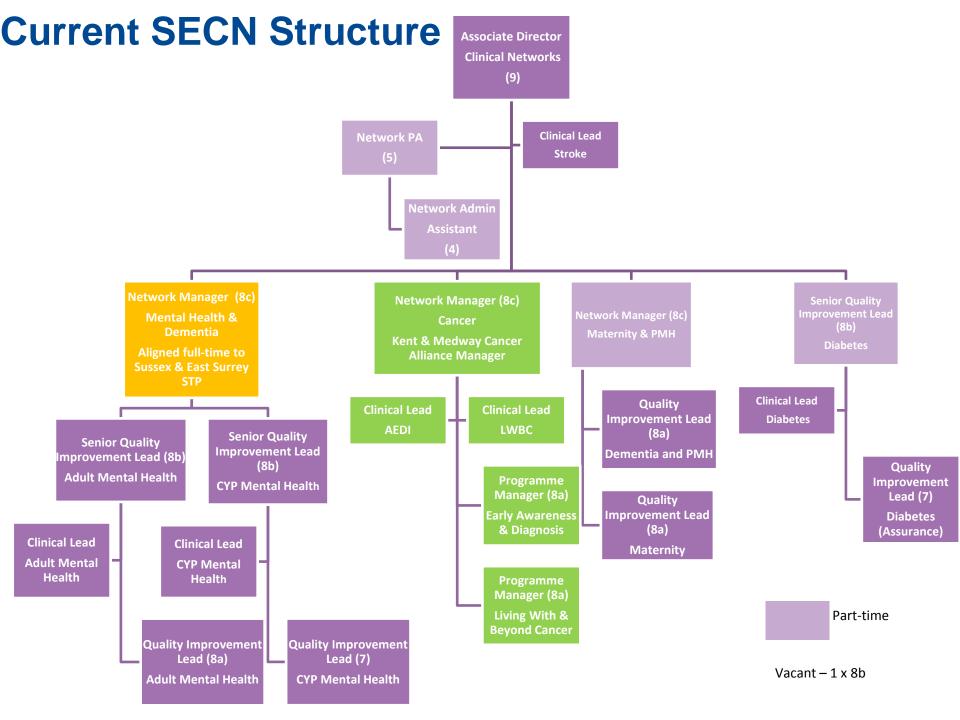
• Charlotte Clow (8c Network Manager) is currently aligned on a full-time basis to support the Sussex & East Surrey STP mental health programme as their Programme Manager.

Frimley Health STP

• Currently take part in Frimley STP Matrix calls to ensure that we are linked into these calls to cover Surrey Heath CCG although this will cease with the transfer of the CCG to HTV DCO team.

Quality Improvement Support for STPs

• Will further review quality improvement support across all the STPs. This is for both existing staff as well as any new staff that may commence in post to ensure full team alignment across all STPs.



Staffing and Recruitment

This recruitment plan is caveated against any further STP alignment and change in operational delivery model.

- One band 8c is on full time secondment to the Kent & Medway Cancer Alliance Manager post until March 2019 within a separate budget code. The 8a Alliance programme manager posts are also within this separate budget code.
- One band 8c is on full time alignment to Sussex & East Surrey STP as their mental health programme lead.
- The remaining 8c is the maternity & PMH Network Manager who takes an operational lead for the networks and acts as the Associate Director deputy.
- The maternity band 8c and adult mental health band 8b will both start maternity leave in May 2018.
- An band 8b has been appointed on secondment to provide cover for the adult mental health programme and commences in post on 7th May until 31st March 2019.
- The band 8c post is being re-advertised after Easter due to unsuccessful recruitment but this leaves the team without a band 8c at this time.
- A part-time band 8a post has been recruited to who will provide support to the Clinical Senate until 31st March 2019.
- It is hoped that those staff in programme budget who are on fixed term contracts until 31st March 2019 can have contract extensions agreed but this will need resolving during 2018/19 and is dependent upon programme budget availability post March 2019 and STP alignment agreements.
- Forms will be submitted to REAP as per NHSE process for any additional posts identified as essentiation for programme delivery.

South East (Kent Surrey Sussex) Clinical Networks Plan on a Page 2018/19

Partnership working with STPs, CCGs, regional and national teams and ALBS to ensure bespoke and targeted improvement support Close collaborative working with SE (KSS) Operations & Delivery Team to support and deliver the assurance process of all programmes

1. Mental Health & Dementia	2. Diabetes	3. Maternity & Perinatal Mental Health	4. UEC CVD
Provision of improvement support to STPs and CCGs to support delivery of all Mental Health programmes within the wider NHSE Mental Health Delivery Plan for 2018/19: Deliverables:	Provision of improvement support to STPs and CCGs to support delivery of the NHSE diabetes plan and STP Diabetes Aide-Memoire to improve patient outcomes: Deliverables:	Provision of improvement support to STPs through the Local Maternity Systems (LMS) and Perinatal Mental Health (PMH) Networks to support delivery of the national Maternity Transformation Plan: Deliverables:	Provision of improvement support to STPs to support delivery of improved stroke services to ensure measurable improvement in patient outcomes: Deliverables:
 Lead the SE (KSS) Mental Health Joint Working Group Support STPs and CCGs to expand access to treatment in CYPMH, IAPT and EIP in accordance with required standards Support progress of transformation of CYPMH services Support transformation of Crisis and eating disorder services Support improvement plans for the physical health of those with SMI In partnership with ALBs support improvement in suicide prevention, workforce and data Support reduction in OAPs and improvements in Individual Placement Services (IPS) Ensure submission of data from all providers to MHSDS Support STPs and CCGs to achieve and maintain the DDR standard of 67% and implement post diagnostic care pathways 	 Support achievement of the CCGIAF diabetes indicators Increase participation in the Diabetes National Audits Support delivery of the Diabetes Transformation Fund plans through the STPs Monitor delivery of the STP Diabetes Transformation Fund plans through establishment of a robust assurance programme Support improvements in access to and attendance at structured education including digital programmes Support CCG achievement of the 3 treatment targets in primary care through sharing of best practice and data Support improvements in footcare to reduce amputation rates by ensuring services meet the NICE standard Support improvements in inpatient care for patients with diabetes through identification on admission Support delivery of the NHS Diabetes Prevention Programme (NDPP) and ensure readiness for re-procurement of provider in 19/20 on STP footprints 	 Provide system leadership to the LMSs to implement the national Maternity Transformation Programme and deliver their local plans Support improvement in safety to reduce stillbirth, neonatal deaths, maternal death and brain injuries including implementation of the Saving Babies Lives Care Bundle by March 2019 Support LMSs to develop plans to increase the number of women receiving continuity of carer to 20% of those booked from March 2019 Support increased access to evidence based specialist PMH care through the development of specialist community services and inpatient Mother and Baby Units (MBU) across integrated pathways of care 	 Provide system leadership and advice to the stroke service reviews and reconfigurations across the 3 STPs Develop clinical guidance as required through use of the Clinical Advisory Group to support the service reviews Provide advice and guidance on the future location of thrombectomy services Support access and compliance with the 4 priority standards for 7 day services for UEC stroke and heart attack care Provideclinical leadership to the KSS UEC programme and re-procurement of 111 services

South East (KSS) Adult Mental Health Programme - Plan on a Page 2018-19

STP and CCG Commissioner Mental Health Delivery Improvement Support

Adult Mental Health Delivery Improvement Support

- IAPT/IAPT-LTC
- Liaison Mental Health
- Out of Area Placements
- Crisis Response and Home
 Treatment Teams
- EIP
- IPS
- Physical Health Checks for People with SMI
- Dementia

All-age Mental Health Delivery Support

- Suicide Reduction
- Finance
- Data
- Workforce

Mental Health Reporting to NHS England South East Region

- Provision of improvement support to STP and CCG Commissioner Mental Health Leads across Kent, Surrey and Sussex to support delivery of the Adult Mental Health programmes within the wider NHS England Mental Health Delivery Plan for 2018/19
- Provision of improvement support to STP and CCG Commissioning Leads and appropriate providers to ensure KSS meet the national KPIs outlined in the 2018/19 Mental Health Delivery Plan
- Provision of face-to-face best practice/improvement forums to enable STP Leads, commissioners and providers from across KSS to come together to highlight challenges, work together to identify solutions and hear about best practice from other areas.
- Highlight issues identified through improvement support with CCGs and providers and ensure that these are escalated appropriately
- Support STPs to achieve and maintain the Dementia Diagnosis Rate standard of 67%
- Support STPs to ensure delivery of improved post diagnostic treatment and support for people living with dementia and their carers
- Work alongside Public Health England South East and Health Education England (Kent, Surrey and Sussex) to offer improvement support to STP and CCG Commissioning Leads and appropriate providers to ensure KSS meet the national KPIs outlined in the 2018/19 Mental Health Delivery Plan
- Highlight issues identified through improvement support with CCGs and providers and ensure that these are escalated appropriately
- Prepare highlight reports and attend South East Mental Health Programme Boards to highlight improvement support offered across KSS to support delivery of the Adult Mental Health programmes within the wider NHS England Mental Health Delivery Plan for 2018/19
- Prepare evidence and attend South East Region mental health deep dive on a quarterly basis.

Mental Health Network Manager: Vacant (covered by Jackie Huddleston) Adult Mental Health Senior Quality Improvement Lead: Michelle Vassallo Quality Improvement Leads : George Chapman and Joanna Gavins Adult Mental Health Clinical Lead: Dr Katrina Lake

Deliverable/s	Objective/s	Output	By When
1. STP Mental Health Delivery Improvement Support	To support Surrey Heartlands, Sussex & East Surrey and Kent & Medway STP Mental Health programmes deliver against the Mental Health Delivery Plan for 2018/19	1.1. Host the SE (KSS) Mental Health Joint Working Group to bring STP Mental Health Leads together to highlight support offer provided, risks and issues identified as well as to encourage peer support and sharing of best practice/information.	Ongoing until March 2019
		1.2 Attend local STP Mental Health meetings e.g. Programme Board, workshops , conferences	Ongoing until March 2019
		1.3 Provide advice and guidance to ensure that STPs are on track to meet the NHS England national Mental Health Delivery and Workforce Plan	Ongoing until March 2019
		1.4 Provide improvement support during NHSE investment bidding process	Applicable during bidding rounds
2. CCG Commissioner Mental Health Delivery Improvement Support	To support CCG commissioners working across KSS to deliver against the Mental Health Delivery Plan for 2018/19	2.1 Regular communication with Adult Mental Health Commissioners and Clinical Leads to ensure that they are kept informed of new NHS England guidance, upcoming national webinars as well as being available for ad-hoc advice and support.	Ongoing until March 2019
		2.2 Host bi-annual South East (KSS) wide Adult Mental Health Commissioners Forums in association with Operations and Delivery and relevant Arms-Length bodies to share lessons learnt, best practice and to support delivery	May 2018 and November 2018

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Deliverable/s	Objective/s	Output	By When
3. IAPT /IAPT LTC Programme Delivery	To offer improvement support to STPs, CCG commissioners and providers across KSS to meet the IAPT core performance standards and meet IAPT expansion requirements	3.1. Host bi-annual South East (KSS) wide IAPT Clinical Network Forums , including a breakout session for IAPT data analysts to bring together STP Mental Health Leads, CCG commissioners, IAPT providers and local Arms Length Bodies to share lessons learnt, best practice and to support delivery	June 2018 and December 2018
		3.2. Work with NHSE colleagues across the South Region to host an Improvement within IAPT event	ТВС
		3.3. Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery and HEE KSS	Ongoing until March 2019
		3.4. Support STPs where requested in hosting IAPT LTC expansion events to support delivery	As requested
		3.5 Support and fund STPs in undertaking a review of core IAPT service provision and support associated improvement initiatives in line with the NHS England IAPT Manual	Ongoing until March 2019

Mental Health Network Manager: Vacant (covered by Jackie Huddleston) Senior Quality Improvement Lead: Michelle Vassallo Quality Improvement Leads : George Chapman and Joanna Gavins Adult Mental Health Clinical Lead: Dr Katrina Lake

Deliverable/s	Objective/s	Output	By When
4. Liaison Mental Health Programme DeliveryTo offer improvement support to STPs, CCG Commissioners and providers across KSS to ensure that all acute hospitals have mental health liaison services that meet the needs of people of all ages and deliver Core 24	4.1. Host bi-annual South East (KSS) wide Acute and Crisis Mental Health Clinical Network Forums to bring together STP Mental Health Leads, CCG commissioners, providers and local Arms Length Bodies to share lessons learnt, best practice and to support delivery.	October 2018 and March 2019	
	mental health liaison standards for adults in nearly 50% of acute hospitals.	4.2. Support all liaison mental health services to ensure that services move towards meeting benchmarks set out in the <u>national implementation guidance</u> .	Ongoing until March 2019
		4.3. Offer improvement support to systems in receipt of Wave 1 and 2 transformation funding to support delivery	Ongoing until March 2019
		4.4 Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery and HEE KSS	Ongoing until March 2019
5. Out of Area Placement and Crisis	To offer improvement support to STPs, CCG Commissioners and providers across KSS to	5.1. Please refer to point 4.1 above	October 2018 and March 2019
Resolution and Home Treatment (CRHT) team programme		5.2. To offer improvement support to STPs through attendance at local Crisis Care Concordats	Ongoing until March 2019
delivery	livery To offer improvement support to STPs, CCG commissioners and providers across KSS to increase investment for CRHT teams	5.3. To work with the NHS England national team to ensure that STPs are accessing the national OAPs support offer	Ongoing until March 2019
(CRHTTs) to meet the ambition of all areas providing CRHTTs resourced to operate in line with recognised best practice by 2020/21.	5.4. Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery and HEE KSS	Ongoing until March 2019	

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Deliverable/s	Objective/s	Output	By When
6. EIP programme delivery	To offer improvement support to STPs, CCG Commissioners and providers across KSS to ensure that 53% of patients requiring early intervention for psychosis receive NICE concordant care within two weeks.	6.1. Host bi-annual South East (KSS) wide EIP Clinical Network Forums to bring together STP Mental Health Leads, CCG commissioners, IAPT providers and local Arms Length Bodies to share lessons learnt, best practice and to support delivery	July 2018 and January 2019
		6.2. Attend bi-monthly South East (KSS) EIP Clinical Lead webex calls to offer improvement support.	Bi-monthly
		6.3. Link with the South Region EIP Preparedness Programme to offer joined-up improvement support across the KSS region e.g. attendance at local EIP Service Development and Improvement meetings	Ongoing until March 2019
		6.4. Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery and HEE KSS	Ongoing until March 2019
7. IPS programme delivery	To offer improvement support to STPs, CCG Commissioners and providers across KSS to	7.1. Offer improvement support to systems in receipt of Wave 1 transformation funding to support delivery	Ongoing until March 2019
	provide a 25% increase nationally on 2017/18 baseline in access to Individual Placement and Support services.	7.2. Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery and HEE KSS	Ongoing until March 2019
		7.3 Offer improvement support to STPs not in receipt of Wave 1 transformation funding to prepare STPs for the planned Wave 2 of funding intended for set up of new IPS services from 2019/20 onwards.	Ongoing until March 2019

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Deliverable/s	Objective/s	Output	By When
8. Physical health checks for people with SMI programme delivery	To offer improvement support to STPs, CCG commissioners and providers across KSS to ensure delivery of annual physical health checks and interventions, in line with guidance, to at least 280,000 people with a severe mental health illness (or 60% of	8.1 Host bi-annual South East (KSS) wide Physical Health and SMI Clinical Network Forums in association with HEE KSS to bring together STP Mental Health Leads, CCG commissioners, IAPT providers and local Arms Length Bodies to share lessons learnt, best practice and to support delivery	September 2018 and February 2019
	those on the SMI register).	8.2 Working alongside the Darzi Fellows to offer improvement support to STPs, CCGs, Mental Health providers and primary care to ensure annual physical health checks and follow-up care are delivered in line with <u>published guidance</u> .	Ongoing until March 2019
		8.3 Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery and HEE KSS	Ongoing until March 2019
9. Suicide reduction (all age) programme delivery	To work alongside Public Health England South East to offer improvement support to STPs, CCG commissioners and providers across Kent, Surrey and Sussex in delivering against multi-agency suicide prevention plans, working towards a national 10%	9.1. Host a South East (KSS) wide Suicide Prevention event in collaboration with Public Health England South East to bring together STP Mental Health Leads, CCG and LA Commissioners (including Public Health), providers and local Arms Length Bodies to share lessons learnt, best practice and to support delivery	April 2018
	reduction in suicide rate by 2020/21.	9.2. To offer improvement support to STPs and CCG Commissioners through attendance at local Crisis Care Concordats	Ongoing until March 2019

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Deliverable/s	Objective/s	Output	By When
10. Support STPS's to achieve and maintain the Dementia	 haintain leadership and support STPs to achieve and maintain the DDR standard of 67% and delivery of improved post diagnostic support for people living with dementia and their carers. 	10.1 Engage with each STP in Kent, Surrey and Sussex to offer improvement support regarding DDR	April 2018
Diagnosis Rate standard of 67% And improve Post Diagnostic Support for Dementia		 10.2 Support STPs with advice on reviewing and monitoring: How diagnosis in care homes take place Referrals to memory clinics 	On-going March 2019
		10.3 Support STPs by sharing of best practice and advice on improving post diagnostic treatment and support, including the 'Well Pathway' guidance and 'Good Care Planning Guidance'.	On-going March 2019
11. Finance (all age)	To offer improvement support to STPs, CCG Commissioners and providers across Kent, Surrey and Sussex to ensure that CCG meets the Mental Health Investment Standard (MHIS).	11.1. Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery	Ongoing until March 2019

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Deliverable/s	Objective/s	Output	By When
12. Data	To offer improvement support to STPs, CCG commissioners and providers across KSS to ensure that all in-scope commissioned activity is recorded and reported through	12.1. Highlight issues identified through improvement support with CCG and providers and ensure that these are escalated appropriately to NHSE Operations and Delivery	Ongoing until March 2019
	the Mental Health Services Dataset.	12.2. Work alongside the Mental Health IST in providing data quality improvement support where required	Ongoing until March 2019
13. Workforce (all age)	To offer improvement support to STPs, CCG commissioners and providers across KKSS to ensure delivery of mental health workforce expansion as set out in the HEE workforce plan, supported by STP-level plans.	13.1. Highlight issues identified through improvement support are escalated appropriately to STP Mental Health Leads, Health Education England (KSS) and Operations and Delivery	Ongoing until March 2019

STP and CCG commissioner Mental Health Delivery Improvement Support Provision of improvement support to STP and CCG commissioner Mental Health
 Leads across Kent, Surrey and Sussex to support delivery of the CYP Mental
 Health programme within the wider NHS England Mental Health Delivery Plan
 for 2018/19

CYP Mental Health Delivery Improvement Support

- Increased access to evidence based treatment for CYP
- CYP Eating Disorders
- Crisis
- Specialised Commissioning

- Delivery of a South East (Kent, Surrey & Sussex) Mental Health Transformation Steering Group for commissioners, STP MH Leads and providers.
- Provide improvement support to LTP's.
- Support the development of Workforce Plans across Kent, Surrey & Sussex for the CYP programme.
- Support LTP's with accurate data flow (KPI) for the Increased Access to evidence based treatment for CYP.
- Support roll out of CYP IAPT ensuring principals are embedded in service and staff access training.
- Support appropriate CYP Eating Disorders service provision including data flow (KPI)
- Support roll out of New Models of Care (NMoC)
- In partnership with Health & Justice colleagues assist in the development of a Health & Justice Pathway
- Assist in the development of appropriate CYPMH Urgent & Emergency Care systems

Deliverable/s	Objective/s	Outputs	By When
1. Increased access to evidence based treatment for CYP	Delivery of Transformation Steering Group	1.1 Lead a South East (KSS) Mental Health Transformation Steering Group TSG) for commissioners, STP MH Leads and providers. Attendees will set a focus on relevant topical themes with steer from CN CYP MH Team (including the Clinical Lead) looking to align with LTP/STP work streams. It will provide the opportunity to review and discuss the challenges, opportunities and emerging national priorities for commissioning CYP mental health services.	On-going to March 2019
	Support LTPs	1.2 Attendance at all LTP meetings across the 6 LTP footprints in the South East, to provide bespoke support, advice, leadership, sharing of best practice and maintain focus on delivery.	On-going to March 2019
		1.3 Provide a critical review function and suggest improvements as a part of the LTP refresh process led by Operation and Delivery identifying those areas that require support to meet the standard set in the key lines of enquiry (KLoE)	Oct 2018
	Support STPs	1.4 Support LTP areas to engage with STPs ensuring that transformation goals are adopted and supported by the STP. Working proactively with STP MH Leads in the SE (KSS) Joint Working Group making sure they understand the CYP Transforming care agenda and aligning these with the STP plans.	On-going to March 2019

Deliverable/s	Objective/s	Outputs	By When
1. Increased access to evidence based treatment for	Support the development of Workforce Plans	1.5 Support the delivery of the identified CYP Workforce Planning project across KSS by funding the project in partnership with HEE and CCGs.	On-going to March 2019
CYP (cont.)		1.6 Support the onward discussion and sharing of good practice in the Transformation Steering Group (TSG) and facilitate discussion with wider stakeholders.	On-going to March 2019
		1.7 Support STP MH Leads and HEE (KSS) in the development of a comprehensive long-term Workforce Strategy that provides innovative and affordable creative solutions to bridge the workforce gaps identified in each STP geographical area.	On-going to March 2019
	Increased Access to evidence based treatment for CYP including data flow (KPI)1.8 Provide improvement support to CCG commissioners enabling them to develop appropriate services that will allow an additional 49,000 children and young people receive treatment from NHS-commissioned community services (32% above the 2014/15 baseline) by review and sharing of best practice examples.		On-going to March 2019
		1.9 Provision of themed Transformation Steering Group and/or bespoke workshops around access to services by working with CCG's to identify areas of blockage to data flow and allowing for accurate and complete data flow to MHSDS	On-going to March 2019

Deliverable/s	Objective/s	Outputs	By When
1. Increased access to evidence based treatment for CYP (cont.)	Roll out of CYP IAPT	1.10 Attendance at CYP IAPT Boards of all 3 localities in Kent, Surrey and Sussex to support roll out of CYP IAPT ensuring principals are embedded in service and staff access training.	On-going to March 2019
2. CYP Eating Disorders	Support appropriate service provision	2.1 Provision of a quarterly CYP Eating Disorder Clinical Network Forum to share best practice and inform Operations and Delivery of any issues with the delivery of waiting times standard.	On-going to March 2019
including data flow (KPI)	2.2 Working with providers In the CYP Eating Disorder Clinical Network Forum towards delivering the 2020/21 waiting time standards for children and young people's eating disorder services of 95% of patient receiving first definitive treatment within four weeks for routine cases and within one week for urgent cases.	On-going to March 2019	
		2.3 Support locally based services in identifying collection systems for appropriate data capture	Oct 2018



Deliverable/s	Objective/s	Outputs	By When
3. Specialised Commissioning			On-going to March 2019
		3.2 Bring together local commissioning and Specialised Commissioning within the Transformation Steering Group ensuring appropriate data is reviewed and process is fully informed	On-going to March 2019
	Assist in the development of a Health & Justice3.3. In partnership with Health & Justice Commissioning Team ensure provision of a quarterly CYP Mental Health & Justice Collaborative Network to develop pathways for CYP transitioning into or out of the CYP secure estate either on youth justice or welfare grounds.		On-going to March 2019
	Assist in the development of appropriate Urgent & Emergency Care systems	3.4 Assist local health system in the development of bids against CYP Crisis Funding and support services by ensuring they are based on best available evidence to ensure quality, improved outcomes and most effective use of resources	On-going to March 2019



South East (KSS) Maternity and Perinatal Mental Health Programme Plan on a Page 2018-19

- Ensure best practice and shared learning of maternity transformation by providing support, resources and system leadership across the South East (Kent, Surrey & Sussex).
- Provide opportunities to foster the development of a learning culture, through the ongoing delivery of regional Maternity and Perinatal Mental Health (PMH) Learning and Sharing Events.
- Provide system leadership to implement the national Maternity Transformation Programme (including the NHSE Saving Lives Stillbirth Care Bundle) across Kent, Surrey and Sussex, supporting the nine work streams set out within 'Better Births'.
- Provide targeted improvement support and system leadership as the key communication link between Local Maternity Systems (LMS's) and PMH Networks and NHS England regionally and nationally.
- Support STP'S across Kent, Surrey & Sussex to achieve national NHSE targets related to the national Maternity Transformation Programme and to encourage STP's to reflect this within their Delivery Plans.
- Support the provision of clinical leadership for maternity and perinatal mental health to each STP, via each LMS and PMH Network for Kent, Surrey and Sussex.
- Monitor and support the implementation of LMS Transformation Plans and advise on adjustments as required to ensure deliverables are met.
- Support the provision of a Clinical Network Maternity Safety Champion to support the National Maternity Safety Champions as regional champions for the maternity safety ambition.
- Increase access to evidence based specialist PMH care through the development of specialist community services and inpatient Mother and Baby Units that work in partnership across integrated pathways of care and engage with PMH networks to support best practice.

Maternity and Perinatal Mental Health Programme

Clinical Network Manager: Laura Ansboro Quality Improvement Leads : Amanda Price- Davey and Joanna Gavins

Deliverable/s	Objective/s	Output	By When
Maternity and Perinatal Mental Health	maternity transformation by providing support, resources and system leadership across the South East (Kent, Surrey & Sussex).Commissioners Heads of Midwife1.2. Continued Network1.2. Continued NetworkNetwork Per 	1.1.Continued provision of bi-monthly South East Maternity Commissioners Forum sharing quarterly meetings with Heads of Midwifery Group.	March 2019
		1.2. Continued provision of monthly South East Clinical Network Perinatal Mental Health Networks Forum./Teleconference.	March 2019
	2. Provide opportunities to foster the development of a learning culture, through the ongoing delivery of regional Maternity and Perinatal Mental Health (PMH) Learning and Sharing Events.	2.1. Host bi-annual Maternity Learning and Sharing Events, to include representatives from the 3 LMS's in Kent, Surrey and Sussex.	Ongoing – next events September 2018
		2.2. Host bi-annual PMH Learning and Sharing Events, to include representatives from the 3 PMH Networks in Kent, Surrey and Sussex.	
	3. Provide system leadership to implement the national Maternity Transformation Programme (including the NHSE Saving Lives Stillbirth Care Bundle) across KSS, supporting the nine work streams set out within 'Better Births'.	 3.1. Supporting local transformation 3.2. Safety 3.3. Choice and personalisation 3.4. Perinatal mental health 3.5. Transforming the workforce 3.6. Data and information sharing 3.7. Technology 3.8. Payment system 3.9. Prevention and public health 	March 2019



Clinical Network Manager: Laura Ansboro Quality Improvement Leads : Amanda Price- Davey and Joanna Gavins

Deliverable/s	Objective/s	Output	By When
Maternity and Perinatal Mental Health	4. Provide targeted improvement support and system leadership as the key communication link between Local Maternity Systems (LMSs) and PMH Networks NHS England regionally and	4.1 Represent South East (KSS) on the Regional Maternity Programme Board (MPB) which provide assurance to the regional SMT and National Maternity Transformation Board that progress is being made and challenges addressed as outlined within 'Better Births'.	March 2019
	nationally.	4.2 Produce quarterly reports for Regional MPB and support all 3 South East LMS's produce monthly highlight reports for Regional MPB.	
		4.3 Representation at national meetings for maternity and perinatal mental health as and when required.	
		4.4 Disseminate relevant updates and information to LMS's, PMH Networks and Maternity and PMH stakeholders when required.	
	5. Engage and support STPS across KSS to achieve national NHSE targets related to the national Maternity Transformation Programme and to reflect this within their Delivery Plans.	 5.1. Representation at STP meetings , including Clinical Boards as and when applicable to provide regional and national insight into national maternity transformation programme and LMS development. 5.2. Engage with key STP colleagues and provide advice, subject matter expertise's and support development of STP Delivery Plan in relation to maternity and perinatal mental health. 	Ongoing until March 2019
	6. Support the provision of clinical leadership for maternity and perinatal mental health to each STP, via each LMS and PMH Network for KSS.	6.1. Allocate non recurrent funding to Sussex & East Surrey LMS, Surrey Heartlands LMS and Kent & Medway LMS for the provision of clinical leadership to enable to the implementation of LMS Plans.	April 2018
		6.2. Allocate non recurrent funding to the 3 South East PMH Networks (based on the STP footprints) for the provision of clinical leadership to support the delivery of the national clinical priority programme for PMH.	April 2018

Clinical Network Manager: Laura Ansboro

Quality Improvement Leads : Amanda Price- Davey and Joanna Gavins

Deliverable/s	Objective/s	Output	By When
Maternity and Perinatal Mental Health	7. Monitor and support the implementation of LMS Transformation Plans and advise on adjustments as required to ensure deliverables are met.	7.1. Attendance at each LMS meeting for Sussex & East Surrey, Surrey Heartlands and Kent & Medway LMSs, 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.	March 2019
		7.2. Attendance at Regional Maternity Programme Board and national Clinical Network meetings to provide updates and assurance of South East LMS implementation.	Monthly until March 2019
		7.3. Host bi-annual Maternity Learning and Sharing Events, to include representatives from the 3 LMSs in KSS.	Next Event Sept 2018
	8. Support the provision of a Clinical Network Maternity Safety Champion to support the National Maternity Safety Champions as regional champions for the maternity safety ambition.	Supporting the Safety Workstream within each LMS across Kent, Surrey and Sussex, spearheading the focus on maternity safety and continuing to build the momentum generated by the Maternity Transformation Programme and the national ambition.	March 2019
		Providing visible leadership and acting as a change agent amongst maternity services and the health professionals and commissioners working to deliver those services.	April 2018
		Fostering collaborative working with maternity and neonatal care providers across the South East and with Neonatal Operational Delivery Networks to develop care pathways that are responsive to the needs of their local populations.	March 2019



Clinical Network Manager: Laura Ansboro Quality Improvement Leads : Amanda Price- Davey and Joanna Gavins

Deliverable/s	Objective/s	Outputs	By When
Maternity and Perinatal Mental Health	9. Increase access to evidence based specialist perinatal mental health care through the development of specialist community services and inpatient	9.1 Support and advise each PMH Network to deliver against agreed Wave 1 and Wave 2 funding work programme plans in line with national objectives.	Ongoing until March 2019
	Mother and Baby Units that work in partnership across integrated pathways of care and engage with PMH networks to support best practice.	9.2 Attendance at and active engagement with all 3 Locality PMH CNs, providing the bridge between local direction and national priorities and guidance and providing advice and leadership to support timely delivery on identified work programmes	Ongoing until March 2019
		9.3. Monitor MOU with SABP (in partnership with Surrey Heartlands STP) for the roll out a one year pilot to develop wider service development and roll out across the Surrey PMH Network and ensure timely delivery of outcome measures and evaluation.	March 2018 – March 1019
		9.4 Support MBU development in Dartford, Kent including attendance at MBU Steering Group and share best practice across all 3 PMH Networks as well as providing updates locally, regionally and nationally when required.	July 2018



South East (KSS) Diabetes Programme Plan on a Page 2018-19

STP Delivery Support	 Support the STPs to develop Diabetes STP Oversight Groups, the delivery of the STP Diabetes Aide Memoire and provide strategic commissioning advice. Work in collaboration with regional diabetes PMO and National Diabetes Programme Board. Provide targeted support to improvement of the diabetes CCGIAF indicators. Share best practice across the network, STPs, regionally and nationally. To link and support communication flow with the London & SE Diabetes CYP Network. To lead the DCO assurance process for diabetes and report to STP/Region/DCO/National teams. Identify and support funding opportunities to support diabetes initiatives, e.g. test beds. Increase participation in the National Diabetes Audits.
Treatment and Care Programme (Transformation Fund) • 3 treatment targets • Inpatient care • Foot care • Structured patient education	 Support implementation of STP diabetes Transformation Fund Projects. Provide information, advice and the sharing of best practice to address current gaps. Support delivery of an additional 10% of newly diagnosed people with diabetes attending structured education per year. Support improved achievement of the three NICE-recommended diabetes treatment targets (HbA1c <=58mmol/mol (7.5%); Cholesterol <5mmol/L; Blood pressure <=140/80 mmHg).(only HbA1c for children). Support reducing foot ulceration and amputation rates by identifying gaps in service. Support CCGs and STPs to ensure that all secondary care providers have inpatient specialist teams to assess and help manage inpatients with diabetes in alignment with the GIRFT programme.
NHS Diabetes Prevention Programme (NDPP)	 Support delivery of the NHS DPP for people at risk of Type 2 Diabetes. Report and share learning locally, regionally and nationally. Support the national process of re-procurement of the provider for 19/20.

Deliverable/s	Objective/s	Output	By When
1. STP Delivery Improvement Support	To support the development of Diabetes STP Oversight Groups and STP Aide Memoire	1.1 Support communication and alignment across the NHSE/I diabetes support agencies.	March 2019
	Delivery	1.2 Attendance and support the development of the Diabetes STP Oversight Groups	
		1.3 Provide information and strategic commissioning advice to STPs	
		1.4 To manage the STP assurance process and reporting to STP/DCO/Regional and National teams	
		1.5 Support sharing and where appropriate collaboration across STPs through the Diabetes CAG, Diabetes Foot Care Group and Clinical Network Diabetologist Group.	
2. NHS Diabetes Prevention Programme	To support STP leadership of the NDPP across KSS with achievement of required referral numbers and Initial assessments	2.1 Monitor referral numbers via primary care and NHS Healthchecks at 2250 referrals pa (500:100,000) and include monitoring of IAs(Initial Assessments) from March 2018	March 2019
		2.2 Support the implementation for the transfer of contract for Medway CCG in 2018	
		2.3 Support the STP extension of contracts to March 2019	
		2.4 Support STP re-procurement of NDPP for new contract in March 2019	
		2.5 Support STP leads with sharing of practice and learning	*

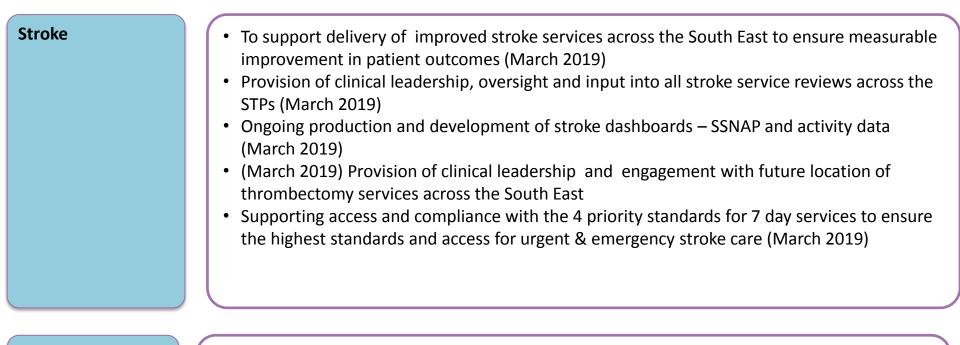
Project	Objective/s	Output	By When
3. STP Treatment & Care Transformation Fund	To support implementation of successful diabetes transformation funding bids in line with the actions and key milestones set out	3.1 To work with STP leads of successful bids to support development and delivery of relevant programme/project plans	March 2019
	within them	3.2 To deliver the assurance process for the Transformation Funded bids to include milestone delivery, activity and financial spend	
		3.3 To encourage submission of data to the national dashboard through Unify, including sites that did not achieve funding	
		3.4 To provide targeted support to areas that require improvement but were not in receipt of additional funding.	
4. National Diabetes Audit (NDA)	To increase NDA participation across all CCGs To support the increase of NDA participation	4.1 Production of NDA Participation reports and Telephone conferences	September 2018
	for Specialist submissions	4.2 Report on key information from the NDA audits to the Diabetes CAG and the STP Diabetes Oversight Groups	
		4.3 Support improving participation in Specialist and Foot Care audits	



Project	Objective/s	Output	By When	
5. Treatment Targets	To Improve achievement of the treatment targets across every CCG and each STP	5.1 Provide information to CCGs to target key gaps which are preventing them from achieving the targets, particularly to prioritise type 1 targets	March 2019	
		5.2 To provide shared learning		
6. Footcare	Footcare pathways in place to enable early referrals for people at risk of diabetic foot disease to foot protection teams Improved participation in National Diabetes Footcare Audit (NDFA)	6.1 Maintain South East (KSS) Foot Care Network to share information and best practice in closing gaps in the foot care pathway	March 2019	
		6.2 Conduct the 5 th gap analyses to support STPs/CCGs to identify gaps against the NICE foot care guidance and support shared learning		
		6.3 To produce an annual foot care report for STPs to track improvements in patient outcomes		
		6.4 Provision of targeted support to STPs in relation to supporting delivery of any successful foot care transformation bids		
		6.5 To influence and support any required STP vascular reconfigurations to ensure appropriate foot care is planned for		
		6.6 Ensure that learning from the 2 KSS MDFT Transformation Funded projects are shared through the foot care group		
		6.7 To support national projects to improve foot care working through the group (i.e the development of national commissioning guidance, a national foot care network)		

Project	Objective/s	Output	By When	
6. Structured Patient Education	To support achievement of an additional 10% of newly diagnosed people with diabetes attending structured education per year	6.1To share learning and best practice on data collection and improvements in uptake across STPs	March 2019	
		6.2 To support STPs awarded Transformation Funding for Structured Education and targeted support for SES STP who did not get Structured Education funding support		
		6.3 To identify funding opportunities to support digital structured education development.		
7. Inpatient Care	To ensure that all patients with diabetes are identified on admission to hospital and are monitored whilst an inpatient	7.1 To work with the GIRFT team to identify and support gaps in inpatient diabetes care.	March 2019	
8. CYP	Provision of the communication link between the South East & London Diabetes Paediatric Network and the South East Diabetes CAG	8.1 To support linking and communication between the Paediatric Network and the Diabetes CAG	March 2019 March 2019	
		8.2 Link to the AHSN/CN project on access to devices and support implementation of guidance		
9. Improve Variation of Access to Device for Type 1	Collaborative Project with KSS AHSN to develop improved information and access to Insulin pump and CGM uptake across KSS	9.1 Provide the link to the Diabetes Commissioners through the Diabetes CAG	September 2018	
		9.2 Provide expertise and device to the delivery of the programme		
		9.3 Provide Clinical sponsorship of the Darzi Fellow supporting the programme		

South East (KSS) Urgent & Emergency Care Programme Plan on a Page 2018-19



UEC

- Provision of clinical advice and leadership to the Urgent and Emergency Care Networks, for clinical areas of stroke, vascular, and cardiac (March 2019)
- Provision of clinical capacity and expertise to the U&EC Networks and STPs to support the development of strategic plans for transforming care for service areas: stroke, vascular and cardiac, based on evidence, national professional guidance and a local understanding (March 2019)
- Supporting access and compliance with the 4 priority standards for 7 day services to ensure the highest standards and access for urgent & emergency heart attack care (March 2019)
- Provision of clinical leadership to the KSS UEC programme and re-procurement of 111 services (March 2019)

Deliverables – Urgent & Emergency Care Programme

Associate Director: Jackie Huddleston Stroke Clinical Lead: Dr David Hargroves UEC Clinical Lead: Dr Peter Stott

Deliverable/s	Objective/s	Output	By When
1. Stroke Services	To support delivery of improved stroke services across the South East to ensure measurable improvement in patient outcomes	1.1 Completion of all stroke reviews with clear recommendations identified	September 2017
		1.2 New models commissioned and implemented	Ongoing to March 2019
		1.3 Provision of clinical leadership and advice into the process	Ongoing to March 2019
		1.4 Stroke dashboards (SSNAP and activity) maintained and reviewed for continuation into 18/19	March 2018
		1.5 Thrombectomy service locations agreed across the south east	March 2018
2. Cardiovascular	To provide clinical advice and leadership to the Urgent and Emergency Care Networks, for clinical areas of stroke, vascular, cardiac	2.1 Provision of clinical capacity and expertise to the U&EC Networks to support the development of strategic plans and delivery of 7 day service standards.	March 2018 and ongoing to March 2019
		2.2 Clinical advice to support the development of any networks of care that may be required to improve outcomes, and advise on reconfiguration and designation of services e.g. vascular surgery centres and STEMI heart attack centres.	March 2018 and ongoing to March 2019
		2.3 Advice as required on common protocols for direct conveyance, inter-hospital transfer and repatriation.	March 2018 and ongoing to March 2019
		2.4 Establish strong relationships between CNs and the regional U&EC PMOs to ensure effective clinical leadership, managerial and administrative support is available to the U&EC Networks. 39	March 2018 and ongoing to March 2019

Clinical Leadership Model

- The SECN reduced clinical leadership within the CNs during 17/18.
- A few specific clinical leads will be retained in 18/19 namely adult mental health, CYP mental health, diabetes and stroke.
- The focus has shifted to supporting and enabling clinical leadership within the STPs and related groups.
- Specific funding has been provided by the SECN to support this clinical leadership within STP based networks e.g. PMH Networks and LMSs.
- The diabetes clinical lead is also funded as the Sussex & east Surrey STP Diabetes Clinical Lead.
- Indicative cost from the programme budget is likely to be circa £150k per anum.
- The SECN also fund clinical leadership for the KSS UEC programme.



Clinical Leadership Structure (as at 03/18)

Programme	Leadership for:	PAs/days per week or month	Funding Source	In Post
Mental Health	СҮР	1 day/week	Programme budget	Dr Ann York
	Adult	1.5 days/week	Programme budget	Dr Katrina Lake
Diabetes	Diabetes Cinical Lead and SES STP Diabetes Clinical Lead	2 PA/week	Programme budget	Dr David Lipscomb
	Diabetes Footcare clinical Lead	2 days/month	Programme budget	Alistair McInnes
Stroke	Stroke	2 PA/month	Programme budget	Dr David Hargroves
UEC	Urgent & Emergency Care	1 day/week	Programme budget	Dr Peter Stott

Budget Allocations

Total Allocated Budget	
£466,423	
£859,989	
£1,326,412	
Programme Budget Allocation	
£859,989	
£120,000	
£171,988	
£214,997 £91,200 (assurance post additional)	
£1,458,174	
£1,924,597	
£671,000	5
	£466,423 £859,989 £1,326,412 Programme Budget Allocation £859,989 £120,000 £171,988 £214,997 £91,200 (assurance post additional) £1,458,174 £1,924,597

Get in touch

South East Clinical Networks

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