Severn and Peninsula Urgent and Emergency Care Networks

Jonathan Jeanes

Programme Manager – Peninsula UECNs

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Why am I here today?

- Firstly, I'm representing both UECNs …

- Here to explain:
  - Background to creation of UECNs
  - Vision and purpose
  - Achievements to date and future work planned

- Here to consider how UECNs could support the outcomes from EGS Review

Background

- As a key requirement from the extensive 'Keogh Review' of UEC …

- Summer 2015 - NHS England asked that UECNs be created, based on the footprints of the Trauma Networks

- Peninsula and Severn UECNs were launched on 11 September 2015 … covering whole of South West

- A comprehensive governance framework was developed to enable the establishment of this brand new arrangement/way of working

NHS England – <u>Initial</u> Defined Purpose of UECNs…

- They will provide "strategic oversight" of UEC on a regional footprint;

- They are expected to develop a "regional response" to the Keogh UEC review, with constituent SRGs being responsible for delivery;

- They will aim to improve the consistency and quality of UEC by bringing together SRG members and other stakeholders to address challenges that are greater than a single SRG can solve in isolation, e.g. repatriation

UECNs Vision (i.e. where are the UECNs heading?) …

We will have aligned plans and priorities across the UECN

"Local where possible, regional where advantageous"

UECNs Purpose Summary (i.e. why are the UECNs here?)…

To provide advice, support and leadership to enable delivery of the UEC component of the Sustainability and Transformation Plans

Work we've undertaken to date includes …

- **Supporting the UEC element of STPs (x6)**

- Undertook national stocktake analysis

- Focused pan-UECN work around 'Reconfiguring Community Urgent Care', integrating with primary care

- Led the process for a single digital service search application (MiDoS)

- Leading creation of single Repatriation Policy

- Supporting the 7DS workstream and the recent £516m UEC capital funding process

- Trialing of Integrated Clinical Hub model in Wiltshire

- **And ...**

UECN Planning

- Created Five Year Delivery Plans

- Prioritised this into UECN Year One Delivery Plans, with a key focus around Integrated Urgent Care-related work

- NHS England 3 key 'asks':
  - **Integrated Urgent Care**
  - **7 day hospital services**
  - **Extended access to primary care**

Year One Delivery Plan

Work Area	Work Area
IUC Workforce	Direct Booking
Consistent Clinical Pathways	Reconfiguring Community Urgent Care (incl. GIS mapping)
Enhanced SCR	Mental Health Crisis
IT System Interoperability	Self Management
Enhanced 111 being the "smart call to make"	Community Pharmacy
DoS	Extended Hours Primary Care
Integrated Urgent Care Clinical Assessment Service	7 Day Hospital Services (including repatriation)
Direct Referrals	Aligning UECN Delivery Plan with STPs, two year operational plans, and A&E Improvement Plans
Supporting new funding opportunities (e.g. capital)	

Supporting the Emergency General Surgery Review

- Invited here today to consider how UECNs can support the outcomes of the EGS Review

- At present, national/regional review to consider role of UECNs in light of STPs and A&E Delivery Boards

- Will discuss today options for how UECNs can potentially the EGS Review … will then discuss back with UECN Steering Group

- Areas could include:
  - Sharing/facilitating best practice discussions
  - Linking into 7 Day Hospital Services work
  - South West 'rolling audit' work
  - Supporting discussions around creation of Educational Network

Thanks for Listening!

Any Questions?

SPARE SLIDES

Five Year and
One Year Delivery Plans

- **In everything they do** the UECNs aspire to:
  - Add value to the UEC system
  - Ensure no duplication of effort with other groups/organisations
  - Make sure all concerned know what it is doing, why and when

- The starting point to everything UECNs plan to do = undertake a comprehensive baseline assessment of who is already doing what

- Where possible, using existing people in the system to lead workstreams

System Fit – with STPs

- UECN adds significant value through strategic planning work at a 'beyond STP level', e.g. development of DoS, repatriation of patients, workforce, and seven day hospital services

- The added value can be seen through …
  - Often issues will be similar for all STPs/CCGs so sensible to do on a multiple STP/CCG basis (or even pan-UECN for some work areas)
  - Reducing duplication of effort across STP/CCG areas
  - Sharing of best practice over a wider footprint
  - Over past year, UECNs have already demonstrated the benefits of system-level working beyond a single STP/CCG area

System Fit – with STPs Ctd …

- A 'bigger voice' to raise the profile of key issues nationally and regionally

- Offering fora for wider strategic conversations and debate, e.g. with national UEC leads

- Ease of linking to groups/services/organisations that sit across a wider geography, e.g. Health Education England, Strategic Clinical Networks, AHSNs, and NHS England primary care commissioning

- Supporting prioritisation work within what is a very complex and politically sensitive national, regional and local agenda

How do UECNs link into/support A&E Delivery Boards?

- Members of the A&E Delivery Boards sit on UECN Steering Groups

- UECN visions are to ensure there are aligned plans and priorities across the UEC system … this needs to include A&E Improvement Plans

- Support A&E Delivery Boards by providing help in the development of plans and priorities, including:
  - Providing expert advice around UEC guidance and national direction of travel
  - Links into what else is going on across UECN areas
  - Links into best practice (regionally and nationally)

Key risks of not working together

- Our plans might not align, and so potentially negatively impact on delivery

- There may be duplication of effort

- There could be a lack of strategic cohesion

- We may miss a great opportunity to support each other and share best practice