



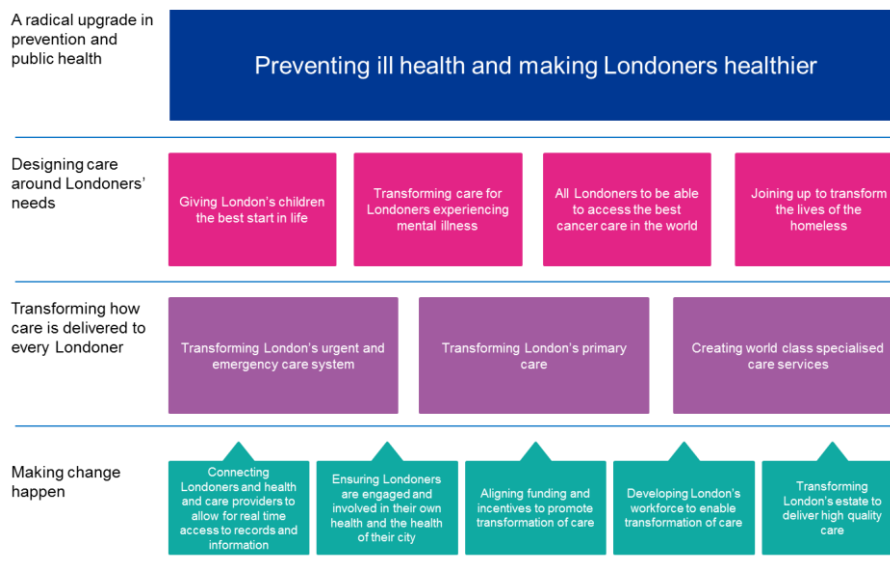
# Healthy London Partnership - Progress report

July – September, 2015

As we reach the six-month mark of the Healthy London Partnership, we are delighted to share our second progress report with you.

This report highlights how the programmes have built on the work of the first three months to further progress their deliverables and commitments. A key priority for the 13 programmes (Figure 1) has been continued engagement and collaboration with a wide range of stakeholders through events, consultation and regular communications. This has been fundamental to ensuring that the work at pan-London level supports and complements activity at local level. The programmes have also begun to plan their activities, deliverables and required resources for FY16/17 to secure on-going support towards the goal of transforming London into the world's healthiest major global city.

**Figure 1. Priority programmes in FY15/16**



The portfolio team has progressed governance arrangements, assessed programme interdependencies and supported programmes in mapping their activities to wider population and system benefits. The team is also driving the strategic development of Healthy London Partnership priorities for FY16/17, responding to developments in the wider health economy. It is likely that this will give rise to some new priority areas while some existing programmes transfer to local level delivery.

We would like to thank the large number of stakeholders who have committed their time and expertise to the partnership through events, board membership, working groups, meetings and

feedback. This contribution has been invaluable in progressing the work of the programmes to deliver whole system change.

We set out with the intention of delivering informative progress reports each quarter. This report outlines each programme's progress and key events for the period July to September 2015. We welcome your views on the format, content or frequency of these reports.

Please get in touch with questions, feedback or suggestions by emailing [england.healthy london@nhs.net](mailto:england.healthy london@nhs.net) so that we can ensure our communications are useful and engaging.

**Dr Naz Jivani (LTG Co-Chair)**  
**Chair, Kingston CCG**

**Anne Rainsberry (LTG Co-Chair)**  
**Regional Director (London)**  
**NHS England**

## Executive Summary

Healthy London Partnership (HLP) programmes have continued to make progress towards their goals since the first quarterly report was published at the end of June. This is the second quarterly report and provides insight into the range of activities, events, stakeholder engagement and outcomes that programmes have delivered between July and September 2015.

### **Progress across HLP**

Governance structures have been reviewed and revised to ensure the patient and public voice is central to developments and decision making through additional representation on the London Transformation Group and their ongoing role defined; to ensure the integrity of clinical commissioning and clinical cohesion across programmes a Clinical Oversight Group is also being formed.

Beyond governance arrangements good progress has been made by programmes in engaging a wide range of stakeholders in developments. In addition, a communications and engagement strategy with supporting templates and materials has been developed by the newly established London Communications Network, bringing together CCG communications leads and Healthy London Partnership. Part of the strategy includes achieving greater public exposure working with TalkLondon - Greater London Authority's online community - to grow the number of people participating in online debates about health issues and the development of a crowdsourcing website to measure commitment from Londoners and continue to gauge the relevance of our 10 aspirations.

Programmes have been mapping expected benefits to ensure alignment to local visions and the aspirations of *Better Health for London: Next Steps* as well as mapping the interdependencies between programmes to ensure they support and enable local delivery effectively. This will inform planning for next year, FY 16-17, which is currently underway and ensure programmes fit together to support whole system transformation.

### **Programme progress**

Whilst establishing robust governance, building awareness and engagement across the stakeholder landscape, programmes have kept their focus on carrying out the deliverables that support their programme's vision. This report provides a summary of each programme, focusing on progress over the last three months, what is coming up in the next three months, and their plans for further ahead. Reflecting on the past three months each programme has identified their biggest achievement, outlined here:

- **Prevention:** Engaging stakeholders in the programme's vision and working together in partnership to deliver the programme's aims. The Prevention Board will be an exemplar for partnership working between HLP, NHSE, PHE, London Councils, London CCGs and boroughs. This will also be the first time that the hospital charities have worked together, setting a precedent for future ways of working across organisations.
- **Children and Young People:** Publishing acute care and asthma standards for children and young people. These collated the huge number of existing standards into easier to digest documents to enable commissioners and providers to develop and improve their services locally. They will provide a focus for the programme's work in transforming acute services and in engaging with CCGs. They will also provide CCGs with the tools to commission safe, effective high quality services for their local population.
- **Cancer:** Leading the implementation of NICE guidelines for suspected cancer referrals across London in partnership with Integrated Cancer Systems, CCGs and primary care. This has included agreeing to revise and embed referral forms on all GP systems,

updating current patient information, producing an education and training resource pack for GPs and Cancer Leads, and working with CCGs and providers to assess capacity challenges and to implement service changes.

- **Homeless:** Appointing Lambeth and Central London CCGs as Lead Commissioners under a collaborative 'combined' commissioning model approach. The commissioning model will be an enabler towards improving health outcomes for homeless people by minimising fragmentation and improving quality and accessibility of services.
- **Urgent and Emergency Care:** Engaging a wide range of stakeholders in shaping the U&EC facilities and system specifications, including senior clinical leaders and patient representation from across London. The specifications aim to provide clarity and consistency across London to eradicate public confusion and enable the development of a seamless system that is greater than the sum of its parts. Specifications will be further refined by incorporating the outcomes of research into patients' expectations when accessing the U&EC system to ensure the system responds. For **NHS 111** the 111 Patient Relationship Manager Pilot has the potential to significantly improve patient outcomes through, for example, providing clinicians with real-time access to crisis / care plan information to support decision making, providing ambulance crews with crisis information en route or at scene, improving patient personalisation ensuring patient's care requirements are fulfilled and facilitating commissioners and EPRR to monitor 111 performance in real-time. Following the completion of the pilot's Alpha phase, the next phase of implementation and mobilisation across London is about to commence.
- **Mental Health Crisis Care** (part of Urgent and Emergency Care and Mental Health programmes): Recommendations were recently developed focussing on increasing the transparency and connectivity across the crisis care system as well as pan-London actions to support the system to meet the mental health crisis commissioning standards. The recommendations were developed through an extensive engagement process involving a wide range of stakeholders including CCG and SPG leads.
- **Mental Health:** The Early Intervention in Psychosis London Programme is helping to prepare London's commissioners and providers for the introduction of a new access and waiting time standard for Early Intervention in Psychosis. The Programme has been coordinating the work across CCGs, mental health providers, GPs, local authorities, higher education institutions and other key players within the mental health and social care sectors to build system capacity and ensure service readiness.
- **Primary Care:** Bringing together over 140 attendees at a provider event to share transformation experiences and lessons from working at scale in primary care across London. The output from rich discussions led to the development of a provider development support workstream within the Primary Care Programme to further support the implementation of the primary care framework.
- **Specialised Commissioning:** Agreeing criteria for the prioritisation of services for review / transformation and applying these to specialised services. This ensures a joined up approach to collaborative commissioning of these services, and significantly enhances the influence of CCGs over their delivery.
- **Estates:** Bringing together key stakeholders from CCG, Providers and Local Authorities at SPG Estates workshops. This is helping to identify estates opportunities through joint working and supports the development of CCGs' local estates strategy to support implementation of local clinical strategies.
- **Payments and Funding:** Ensuring ongoing robust governance arrangements of the transformation fund and supporting the development and progress of the HLP programmes by ensuring they build robust business cases and achieve value for money.

- **Workforce:** Developing a methodology that has resonated with CCG Chair, Chief Officer and Workforce groups, conducting a comprehensive analysis of London workforce challenges, which is providing a foundation from which to gain consensus on a number of emerging workforce priority themes, and supporting HLP Programmes to identify and shape their existing workforce challenges and priorities for the future.
- **Interoperability:** Defining 'a crisis care plan data standard' and achieving agreement for London to act as sponsor nationally for the accelerated development. This is a key achievement in supporting new models of urgent and emergency care.
- **Personalisation and Participation:** Developing a strong and effective working relationship with London ADASS in order to learn important lessons from borough experiences. These lessons include advice on successfully 'unblocking' block contacts and empowering people to have more choice, control and to self-manage their own care.

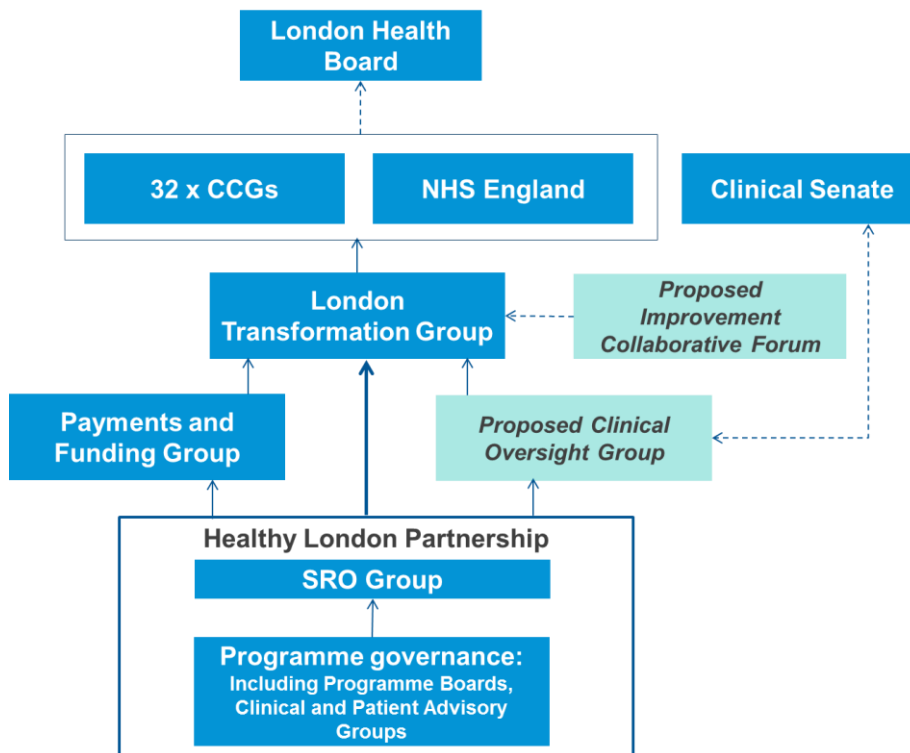
## Progress across HLP

While the programme teams have been driving their deliverables forward over the last three months, a number of activities have progressed at portfolio level to support the work of the programmes. These efforts have aimed to ensure robust and appropriate governance and reporting. They have also supported programmes to build their collaboration and engagement, understand interdependencies with other programmes and stakeholders, communicate more effectively, and deliver timely and robust planning to secure on-going support.

### 1. Governance

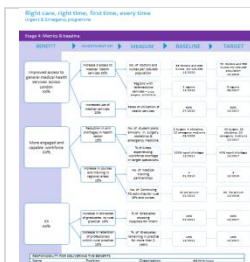
Robust governance is important to ensure clear accountability to CCGs and NHS England. In July, the London Transformation Group (LTG) considered the governance arrangements necessary to support HLP and its programmes as they mature and develop. We are now implementing the agreed proposal for on-going governance (Figure 2).

*Figure 2. On-going governance of HLP*



- **Programme Governance:** each of the programmes has established a programme board which is co-chaired by Joint CCG and NHS England (London) senior responsible officers (SROs) and informed by clinical and working groups, where appropriate.
- **Payments and Funding Group:** the Payments and Funding programme has transitioned to an administrative body for the remaining programmes. The group now ensures robust financial governance of the transformation fund, provides technical oversight to the management of the fund and holds programme SROs to account for delivery of programmes within the agreed financial envelope.
- **London Transformation Group:** formerly the Interim London Transformation Group, this group has provided strategic direction and oversight of programme delivery since





**Stage 4: Metrics & baseline**  
 This stage defines the metrics and quantifiable baselines that will be used to measure the benefits.

### 3. Engagement

Good progress has been made by programmes in engaging key stakeholders from across CCGs, SPGs, provider organisations, citizens, the Greater London Authority, Public Health England, London Councils, and the London Health Board.

On-going work is needed to maintain stakeholders' engagement with and understanding of the work of the programmes as they become more established and complex. All programmes recognise that this engagement is critical to their success and to securing on-going support. In September, the LTG agreed principles for programmes to build their engagement, including:

- Inviting a representative from each of the target groups to get involved in the work of the programme (on working groups and/or boards or through targeted engagement such as meetings, workshops, events)
- Sharing key decisions and actions from Programme Boards (or equivalent) with CCGs
- Developing bespoke engagement approaches, sponsored by Programme Boards for engaging a wide range of CCG stakeholders
- Creating a central resource to support programmes by providing guidance / examples for use when developing a tailored engagement approach.

Programmes will act on these principles in the coming months to build on their existing progress with engagement.

### 4. Planning

The transformation priorities for FY15/16 were formed in response to the *Better Health for London* recommendations, *NHS Five Year Forward View* and key areas of importance identified by CCGs and NHS England (London). Many of these priorities will continue to be relevant for planning in FY16/17. However, there may be additional priorities to consider and there will also be programmes that can transition into an alternative form of delivery.

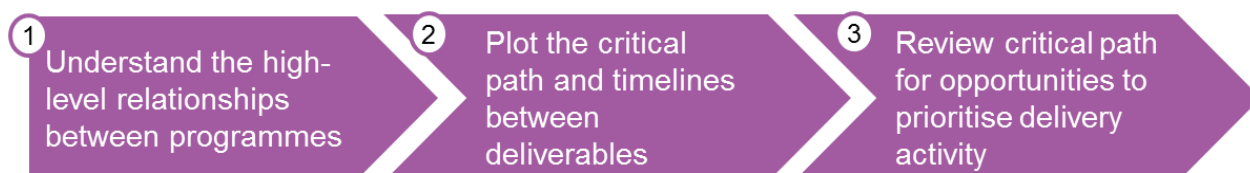
We have defined a planning process and timetable to allow a robust review of programmes, consideration of potential new programmes, and agreement on FY16/17 priorities by relevant bodies. We are assessing progress on the first six months of planned deliverables for each programme to inform these decisions.

Programmes have also begun to define their plans for FY16/17 supported by a thorough understanding of the milestones involved in achieving CCG sign-off. This forward planning is essential in order to present plans at January/February CCG governing body meetings and NHS England to secure on-going support for programme's activities and resource requirements.



## 5. Interdependencies

As part of the planning process, programme teams were involved in an interdependencies workshop in August 2015. This aimed to understand the linkages and opportunities for collaborative working but also to identify areas where programmes are reliant on each other to deliver their objectives. The feedback was very positive, with all attendees agreeing that further work was needed to define the critical path within the portfolio of transformation programmes. To support programmes in this, further workshops will be held in the coming months to facilitate the process outlined below. Further work will also take place to elucidate the linkages between transformation programmes and CCG level action.



## 6. Communications

Over the past three months the Communications team has been developing the tools that programmes and CCGs need to communicate about HLP activity. This has included:

- A fortnightly HLP e-news providing an update from across the programmes
- A plain English summary of HLP programmes distributed to CCG communications colleagues
- An 'In brief: Healthy London Partnership' quick reference guide for CCG colleagues and NHS England London Directors to use when discussing HLP topics with stakeholders
- Website pages for all programmes on [myhealth.london@nhs.uk](mailto:myhealth.london@nhs.uk) to act as a hub for programmes to publish relevant public material

To further support the programmes with their day to day activity, the team has also provided a public engagement framework, a best practice communications strategy for tailoring and a suite of branded templates including reports, presentations and activity planning. A pan-London Communications Network has also been established where CCG comms leads meet to discuss Healthy London Partnership activities and to share learning and insight from a local perspective.

To strengthen relations with London Heath Board partners and achieve greater public exposure the team has been working with TalkLondon - Greater London Authority's online community – to promote HLP activity and grow the number of people participating in online debate about health issues. A crowdsourcing website is also in development to measure commitment from Londoners and continue to gauge the relevance of the 10 aspirations.

A significant event on the horizon is the 'London: One year on event' which will take place on 21<sup>st</sup> October. The communications team has been working closely with the London Health Board to plan the event which will provide a forum to assess progress since the publication of the *NHS Five Year Forward View* and *Better Health for London*, to discuss the next steps, and to reinvigorate the energy needed by all stakeholders to improve health in London. Further information is provided in Appendix 2. The Crowdsourcing website and Better Health for London Next Steps report will be launched at the event.

## **7. Finances**

London CCGs and NHS England (London) established a transformation fund to support the delivery of agreed Healthy London Partnership programmes. On 31st March, the Interim London Transformation Group (ILTG) agreed the proposed principles and governance arrangements for the transformation fund and the terms of reference for the Payments and Funding Group. The fund is administered through the Payments and Funding Group and is accountable, as are all the programmes, to the Interim London Transformation Group.

Every London CCG made a contribution of 0.15% of their 2015/16 allocation towards the fund. The fund was further supported by pooling existing NHS England (London) resources, creating a combined fund of £17.2m. As the programmes are large scale transformation schemes, the first year has seen different rates of initiation. For example, some recruitment has taken longer than anticipated resulting in slippage in programme plans. The fund is subject to regular review with any contribution reimbursement to be made to CCGs and NHS England during the last quarter of 2015/16. Current forecasts suggest the overall fund will be underspent by 35% (£6.1m) in 2015/16.

# Programme Progress

## **1. Prevention**

### *Preventing ill health and making Londoners healthier*

#### **Progress over the last three months**

- Mobilisation and prioritisation: Significant engagement has taken place to align the programme scope to other work and priorities at London and national levels including strengthened partnership working with the GLA, PHE, SCNs and boroughs, and a CCG engagement session to review the programme deliverables. The London Prevention Board had its inaugural meeting in September to confirm the scope and programme priorities and undertake a deep-dive on the issue of childhood obesity.
- Workplace Health: The programme has encouraged larger NHS organisations in London to sign up to the GLA's Healthy Workplace Charter by March 2016, and promote healthy initiatives in the workplace. Engagement and collaboration has begun with management and trade unions, London NHS HR Directors network, London-wide LMC, and London's hospital charities. HLP are developing proposals to trial mental health training for line managers, embedding NHS health checks in the workplace and developing health ambassadors.
- Forming innovative partnerships: The programme has worked with London's professional football clubs and Deloitte Digital to develop the 'FanActiv' campaign. This will use competition and incentive-based behavioural interventions to encourage healthier choices and physical activity in football fans, specifically targeting men aged over 35. The programme has also been working with Transport for London to incentivise physical activity through mechanisms such as a walking map of London's tube stations.

#### **Coming up in the next three months**

- Healthy Steps Together: Three demonstrator sites will be chosen in London to embed health and wellbeing in primary care, housing and schools and reduce the incidence of obesity. These will be supported to test co-production with communities and behavioural insight techniques in order to encourage staff, adults, children, patients and carers to make healthier choices. Expressions of interest will be invited to select the sites.
- Obesity: The London Obesity Leadership Group will be launched in October, bringing together expert leaders and partners such as the Jamie Oliver Foundation to support collective action in London on obesity.
- Workplace Health: Crowdsourcing will be used to engage NHS staff and gather ideas about reducing barriers to health at work, being more active, improving nutrition and supporting mental wellbeing. A workshop is planned in November to share good practice and provide more information on the Healthy Workplace Charter.
- Funding prevention: A London Health and Care Integrated Collaborative event on prevention will take place in December. The event will share learning and case studies around commissioning prevention-based initiatives and return on investment, and practical sessions to demonstrate the range of available tools to guide future commissioning decisions.

## Looking further ahead

- Sharing case studies of best practice related to workplace health.
- Sharing early findings from the Healthy Steps Together projects related to schools, housing and primary care that can inform the development of new models of care.
- Developing health as a social movement by engaging Londoners in a conversation about obesity and sugar.
- Exploring opportunities related to social investment, corporate social responsibility and EU funding to underpin widespread social action.

### **Biggest achievement**

The biggest achievement has been the positive engagement and commitment from stakeholders to the programme's vision and working together in partnership to deliver against the aims. The Prevention Board will be an exemplar for partnership working between HLP, NHSE, PHE, London Councils, London CCGs and boroughs. This will also be the first time that the hospital charities have worked together; setting a precedent for future ways of working across organisations.

## 2. Children and Young People (CYP)

### *Giving London's children the best start in life*

#### Progress over the last three months

- Developing population based networks: South West London has established the first population based health network, co-chaired by a paediatrician and director of children's social services. Learning has been shared with London SPG leads and South East London may be interested in becoming an early adopter.
- Reducing variation in services: Intensive work to support CCGs in developing CAMHS transformation plans has been in progress. Lead CAMHS commissioners have been identified in each geographical area of London Regular teleconferences have been organised by HLP to enable collaborative working between CCGs, local authorities and specialised commissioning in plan development. A document describing emerging findings around mental health crisis care for CYP has been drafted and distributed. A final workshop to support CCGs in developing plans will take place on 2<sup>nd</sup> October. The team is also working with the London commissioning and operations directorate to support assurance of transformation plans.
- Integrating Care across public health and primary and secondary healthcare services: A group looking at models of care for CYP in out of hospital care settings has formed and priorities agreed. This will focus particularly on acute care for CYP outside in patient settings. A GP lead has been appointed to support this process.
- Effective Commissioning of CYP services: Funding has been awarded by Health Education England to run the first cohort of the CYP commissioning development programme. A procurement process will be undertaken to find a programme provider, and the first cohort will be recruited once this is completed.
- Improving Access to Health Services for CYP: A number of engagement activities have been undertaken with CYP. A CYP steering group is being established to ensure the voices of CYP are actively incorporated into the programme.
- Programme governance: The programme board has now been formally established and governance refined. All SPG leads have now been identified and an initial workshop has been run to embed them within the programme. The clinical leadership Group membership has been refreshed and the group is highly engaged.
- Education and awareness: An eight week community pharmacy public health campaign has been undertaken to raise awareness of asthma in CYP and undertake a baseline audit of current management. An education approach for recognition and monitoring/management of the acutely unwell child has been agreed.
- Standards around the provision of High Dependency Care (HDU) for CYP in DGHs have been drafted and distributed widely for comment. These are based on the national recommendations around provision of HDU in DGH settings
- A revised urgent and emergency care specification which includes CYP specific requirements has been drafted in collaboration with the Urgent & Emergency Care programme.
- HLP, diabetes UK and the five London networks have launched a 'Diabetes in school' policy consultation.

### Coming up in the next three months

- Formal launch of the HLP CYP programme (6<sup>th</sup> November)
- Determining what priorities from CCG CAMHS transformation plans will need support as implementation progresses
- Working with commissioners to include CYP deliverables in commissioning intentions for FY16/17 and determining how HLP can support CCGs to deliver these standards
- Formally launching the asthma standards at a “transforming asthma” event (14<sup>th</sup> October)
- Finalising the emergency surgery network standards pilot in SW London and developing a Surgical Network Directory of Services
- Analysing Child Death Overview Panel (CDOP) data submission
- Continuing to collate evidence and best practice for initial CYP Acute Out of Hospital Care Models and for Paediatric Assessment Unit Models
- Launching the diabetes in schools policy on 11<sup>th</sup> December.

### Looking further ahead

- Continuing to monitor the progress of SWL CYP network and surgical network pilot and supporting potential roll out across London.
- Publishing critical care (HDU) standards and continuing work on the development of out of hospital care standards.
- Disseminating schools policies for asthma and diabetes.
- Procuring and launching the CYP commissioning development and leadership programme

#### **Biggest achievement**

Acute care and asthma standards have been published for children and young people. These collated the huge number of existing standards into easier to digest documents to enable commissioners and providers to develop and improve their services locally. They will provide a focus for our work going forward in transforming acute services and in engaging with CCGs. They will provide CCGs with the tools to commission safe, effective high quality services for their local population.

### **3. Cancer**

*All Londoners to be able to access the best cancer care in the world*

#### **Progress over the last three months**

The programme has:

- Completed a gap analysis of the 96 recommendations outlined in the 'Achieving World-Class Cancer Outcomes: A Strategy for England 2015 – 2020'
- Worked with Tripartite and CCGs to agree recovery plans against cancer waiting time standards
- Collaborated with NHS England and the Integrated Cancer Systems to implement changes to prostate and lower GI cancer pathways to support achievement of cancer waiting time standards and to assure trust delivery plans for trusts to achieve these standards
- Produced pan-London endoscopy clinical guidelines and recommendations in collaboration with the Integrated Cancer Systems and gained agreement for their adoption by the London colorectal pathway boards
- Developed a pan-London familial breast cancer specification and clinical guidelines for moderate risk women and high risk women with no known genetic mutation in primary and secondary care
- Published joint commissioning guidance with the Mental Health Strategic Clinical Network
- Secured sign-off of the pan-London Cancer Commissioning Intentions for 2016/17 at the Cancer Commissioning Board
- Shared the vision and approach for long-term conditions support and follow-up for cancer patients in primary care with every London sector
- Secured support from cancer charities to set up a charity partnership led by the Cancer Programme
- Received approval of a business case for investment in analytics to make best use of cancer information available through the National Cancer Registration Service. This will enable the provision of data for each cancer patient on the quality of treatment, use of health resources and outcomes by stage
- Worked to ensure representation from all five SPGs and ADASS on the Living With and Beyond Cancer Board

Two New Models of Acute Care Collaboration (Vanguard) bids submitted from University College Hospital and The Royal Marsden Hospital were well received regarding their content and ambition. These bids are being supported along with a submission from Manchester Cancer. South East London has agreed to develop an integrated whole system model with an agreed set of cancer priorities focussed on population based outcomes.

Key Events:

- NICE Guidance Clinical Reference Workshop 7 July 2015
- Publication of 'Achieving World-Class Cancer Outcomes: A Strategy for England 2015 – 2020'
- Cancer Clinical Leadership Group 1 September 2015 (National Clinical Director attended)
- Cancer Commissioning Board 29 September 2015

## Coming up in the next three months

- Achieving World-Class Cancer Outcomes: A strategy for England 2015 – 2020 – report of the independent taskforce: taking stock of the new national cancer strategy and recommendations
- Cancer Waiting Time Standards: Increasing focus of the Transforming Cancer Services Team on the cancer waiting time standards and return to target
- Earlier Detection and Awareness: Enhancing delivery of the 'Be Clear on Cancer over 70's Breast Campaign' across London; delivering Talk Cancer workshops to Health Care Assistants in 13 CCGs; disseminating Practice Profiles Plus across 13 CCGs in NELondon; developing endoscopy clinical guidelines. A bowel screening task and finish group has been set up with the remit to improve the uptake of bowel screening across London. A process is now in place for sending out information and invitation letters and work is being carried out regarding the introduction of the Faecal Immunochemical Test.supporting SELondon in the development of proposals for setting up a multi-diagnostic centre.
- Reducing Variation and Service Consolidation: Supporting the development of national service specifications for breast and colorectal cancers; developing commissioning intentions and quality requirements to tackle areas of largest variation in breast and colorectal cancers. Supporting NELondon and Ealing CCGs to develop compliant services for breast, colorectal and lung cancers.
- Living With and Beyond Cancer: Developing guidance to support commissioners and providers to embed treatment summaries into existing practice. Evaluating the pilot phase of the holistic follow-up model in primary care for men with stable prostate cancer two years after diagnosis in Croydon. CCGs have taken the decision to continue the incentive scheme; a number of CCGs would like to take this model forward in 2016/17.
- Supporting Commissioning and Contracting: Establishing a baseline against NICE requirements for cancer services in 2014/15 and reflecting this in commissioning intentions for 2016/17; collaborating with SPGs to ensure the strategy is reflected in their commissioning plans.
- Improving Patient Experience: Producing and implementing cancer user involvement specification to drive user recruitment; developing and circulating a pan-London directory of cancer users and projects.

## Looking further ahead

- Early Detection and Awareness: Undertaking a diagnostic capacity review to facilitate implementation of the NICE Referral Guidelines
- Reducing Variation and Service Consolidation: Developing quality standards and audit requirements for the use of endobronchial ultrasound in lung cancer; develop models of system-wide leadership following surgical reconfiguration
- Living With and Beyond Cancer: Producing a commissioning guide for holistic cancer care reviews; identifying principles for the safe transfer of care between hospital and community
- Supporting Commissioning and Contracting: Developing commissioning intentions for 2017/18; developing a dashboard to assess progress against the quality requirements.



### **Biggest achievement**

NICE guidelines for suspected cancer referrals were updated in June 2015. Implementation of the guidelines will improve the detection and diagnosis of earlier stage cancer by the primary care team and will help support fewer cancers being diagnosed via the emergency route.

The Cancer programme is leading consistent implementation across London, working in partnership with both Integrated Cancer Systems, CCGs and primary care. A clinical workshop held in July secured agreement to revise and embed referral forms on all GP systems, update current patient information and translate it into 11 languages for publication on the website in October 2015.

A programme resource pack has been produced that collates materials for GPs and Cancer Leads to use for education and training. The programme is working with CCGs and providers to assess challenges of capacity and providing support to implement service changes.

## 4. Homeless health services

### *Joining up to transform the lives of the homeless*

#### Progress over the last three months

- Lambeth and Central London CCGs have been jointly appointed as Lead Commissioners under a collaborative 'combined' commissioning model approach. The Lead Commissioners will build upon existing local good practice and make commissioning decisions on behalf of London's CCGs to improve health outcomes for London's homeless population. The Lead Commissioners will be taking forward the stakeholder engagement and management of existing forums, alongside the design and implementation of the commissioning model.
- A Commissioning Lead has been recruited to support the work of the Lead Commissioners. The Commissioning Lead will review and present options for next steps regarding management of NHS England contracts with specialist practices (primary care). This will feed into an options appraisal for the pan-London commissioning model.
- The financial model has been quality assured by the NHS England finance team and tested internally against different scenarios.

#### Coming up in the next three months

- The Lead Commissioners will work with the Commissioning Lead and team to undertake significant engagement with the NHS England Primary Care Commissioning Team and London's specialist practices to ensure that services continue to be provided during the design of the pan-London commissioning model. Upcoming milestones will align with the commissioning cycle and include stakeholder engagement, understanding the current complex commissioning landscape, and undertaking a London-wide needs analysis.

#### Looking further ahead

- The Lead Commissioners will design and implement the pan-London commissioning model from April 2016. Local commissioning decisions will continue to be made by CCGs and local authorities, but these will be underpinned by agreed aspirational pan-London commissioning outcomes, with an emphasis on outcome-focused commissioning as the mechanism for service improvement.
- The priority areas of work will include: health intelligence; to gather data to understand pan-London needs for this vulnerable population, service improvement; to identify good practice and mainstream care as much as possible, and data sharing and informatics; to improve interoperability of systems to share clinical data.
- Some services may be commissioned on a pan-London basis to maximise benefits across London.

#### **Biggest achievement**

The joint appointment of Lambeth and Central London CCGs as Lead Commissioners under a collaborative 'combined' commissioning model approach is a significant milestone for the programme. The commissioning model will be an enabler towards improving health outcomes for homeless people by minimising fragmentation and improving quality and accessibility of services.

## 5. Urgent and Emergency Care

### *Transforming London's urgent and emergency care system*

#### Progress over the last three months

- Refined the U&EC facilities specification following engagement with SPG leads, CCGs, Strategic Clinical Networks and Senates, the U&EC Clinical Leadership Group and the Senate Forum (including senior health professionals and patient representatives). A number of key areas were identified for consideration during implementation.
- Undertook a network stocktake across all five networks to understand current U&EC service provision. This revealed wide variation in the delivery of U&EC services and will be used to support the development of network delivery plans.
- Completed a survey of 1000 Londoners and interviews with patients to understand patient expectations when accessing the U&EC system. The results will influence implementation plans across London.
- Secured support from NHS England and Monitor for two pilot sites for new payment models within U&EC systems.
- Supported development of network delivery plans by the five networks, all of which are established and will have held their first network meetings by October.

#### Coming up in the next three months

- Research into patient behaviours when accessing the U&EC system will be completed and inform the further refinement of the U&EC facilities specification.
- The U&EC facilities specification will be finalised and a London-wide event will be held during November to share the vision for U&EC services and what patients have told us about their expectations of care.
- Development of network plans will continue across London, supported by the HLP team and shared with the U&EC Board. Pan-London support will include consideration of workforce, interoperability, governance, payment implications across networks, and continued public engagement across London regarding the implementation of the U&EC vision.
- Support will be provided to U&EC networks to initiate the designation of U&EC facilities, in collaboration with CCGs, within their footprint.

#### Looking further ahead

- The development of payments and funding pilots across the U&EC networks will continue to be supported, ensuring that learning is shared across all.
- The support of development of network delivery plans will continue and themes that require a consistent approach across London will be identified, such as the development of specific pathways of care.
- Enabler programmes will continue to be developed and shared priorities will be identified.

#### **Biggest achievement**

A wide range of stakeholder engagement was undertaken in the shaping of the U&EC facilities specification. This included input from senior clinical leaders and patient representation from across London and will be further refined by incorporating the outcomes of research into patient's behaviours when accessing the U&EC system. A Clinical Senate Forum event was

dedicated to discussing the development of the specification with over 90 stakeholders in attendance. This has ensured that the facilities and system specifications are owned and refined by experts from across London, and that clinical and patient views are reflected in the final agreed specification.

## 5a. NHS 111

### Progress over the last three months

- The 111 Patient Relationship Manager (PRM) is a pioneering digital cloud solution that will enable 111 services to retrieve and transfer patient crisis and care planning information from multiple suppliers for use during 111 clinical decision-making. Patients calling back 111 will not be asked to repeat information given in previous calls, and ambulance crews will be able to access crisis information from 111 referrals, en-route or at scene, via the ambulance mobile data terminals. The solution will also support London's wider UEC system by providing real-time reporting, syndromic health surveillance and call balancing capability.
- Over the summer the PRM pilot successfully completed Alpha testing, and we conducted a procurement process to select the mobilisation partner for the Beta phase. Redwood Technologies were selected and Beta implementation began in September 2015 using Agile Project Management techniques. Aligning multiple sources of patient information simultaneously is a significant challenge, and we also established an Information Governance Panel with national and local experts to manage the governance, patient confidentiality and technological demands of this pilot.
- Newcastle University (the pilot's formal evaluation partner during Alpha phase) have highlighted the immense potential of this programme: "Greater access to real-time client data was viewed as delivering substantial benefits to NHS 111... enabling more accurate assessment of patient risk by clinicians; supporting greater continuity of care; facilitating better management of fluctuations in service demand; and improving the NHS 111 experience overall for some of the services most vulnerable and sensitive clients".
- The HLP 111 Programme Team continues to support local CCG and CSU colleagues in the procurement of Integrated Urgent Care Services in London. This includes:
  - Hosting the London Integrated Urgent Care Roadshow in September 2015, bringing together over 150 commissioners, clinicians and providers with national and local UEC leaders
  - Supporting the development of pan-London Pharmacy and dental specifications – a key component of the "Clinical Hub" in the future Integrated Urgent Care model
  - Working with London and national NHS England colleagues to shape the new national Integrated Urgent Care commissioning standards and KPIs.
- We continue to work with London partners to improve and expand the DoS as the single source of service access information. This includes profiling over 500 pharmacies participating in the 111 Pharmacy Urgent Repeat Medication service, Mental Health crisis services and rapid response community services.
- The footprint of MiDoS – a mobile DoS search tool – is expanding, and is now available in 132 UEC services across London including EDs, UCC, WIC, MIU, GP OOH, NHS 111, LAS and Healthwatch. Search usage is rising, with GP Bypass numbers the most frequent information requested by clinicians in all settings. The "SearchLDN" crowd sourcing platform was also launched, allowing clinicians from across London to contribute to improving referral pathways using the DoS. So far clinicians have prioritised DoS profiling to refer patients for services for the management of wounds, victims of domestic violence, community palliative care and falls services.
- The HLP 111 Programme Team's transformational activities also continue to support London's UEC Networks. For example, clinical assessment of 111 calls requiring a low urgency "green" ambulance is resulting in 800 fewer ambulance referrals per week from

111 to LAS 999 (37,000 fewer since Nov 2014), and the London 111 Pharmacy Hub manages 80 medication enquiries per day (weekends and BH) with pharmacists closing 95% of cases over the phone, reducing pressure on GPOOHs and 111 clinicians. These initiatives were introduced as pilots during winter 2014-15 and have since been implemented as part of London's regular 111 service, as well as influencing the new national commissioning standards for Integrated Urgent Care.

### Coming up in the next three months

- Following the publication of the national Integrated Urgent Care commissioning standards, the HLP 111 Programme Team will continue to support London CCGs and NHS England in the procurement process and the incorporation of best practice into local procurement plans. We will work with CCGs to support implementation of the emerging national Integrated Urgent Care KPIs and national UEC Payment Models.
- The 111 Patient Relationship Manager pilot will be mobilised during autumn, providing 111 with patient crisis and care plan information to support clinical decision making and support surge leads with real time call balancing and reporting capabilities (including syndromic health surveillance). Agile Project Management techniques – including daily stand up calls – are being used to drive the iterative implementation process behind the pilot. Discussions will continue with colleagues in the three London CLAHRCs to formally evaluate the pilot programme.
- The HLP 111 Programme Team will continue to develop the London DoS, with a focus on improving 111 referral activity to rapid response community and social care services, and the strengthening of referral rights across UEC Networks. The London MiDoS roll-out will support profiling using clinical codes (SNOMEDCT) and prioritise increasing usage among clinicians in EDs, UCCs and LAS, in particular through improving access information on IAPT and Mental Health crisis services.
- To support London UEC Networks, and drive London's alignment to the new national Integrated Urgent Care commissioning standards, the Programme Team will work collaboratively with London SRGs, clinical leaders, providers and commissioners to:
  - Review and improve green ambulance re-assessment rates to further reduce ED & Ambulance referrals
  - Expand the London Pharmacy Hub service to include minor ailments
  - Increase the use of the Pharmacy Urgent Repeat Medication service to reduce pressure on GPOOH services, instead referring callers directly to community pharmacists
  - Establish 111 phones in ED & UCCs for urgent repeat medication and dental “walk-ins”
  - Introduce pain management advice via the Pharmacy Hub to the London OOH Urgent Dental Nurse Triage service
- London will also be one of two regions piloting the new on-line ‘Digital 111’ platform, which will help the public to assess and self-manage their urgent health needs. A key component of NHS England's “Call, Click or Come-in” strategy for Integrated Urgent Care services.

#### **Biggest achievement**

The cloud-based 111 Patient Relationship Manager Pilot has the potential to significantly improve patient outcomes across London's UEC Networks:

- Clinicians in 111 will see in real time crisis / care plan information\* to support their clinical decision making, information will be presented as part of the 111 call.
- The PRM will provide an improved level of 'personalisation' ensuring patient's care requirements are fulfilled, speaking directly to a clinician who is following the agreed plan of care.
- Patients calling back 111 will not be asked to repeat information given in previous calls.
- Ambulance crews will be able to access crisis information from 111 referrals, en-route or at scene, via the ambulance mobile data terminals.
- Commissioners and EPRR will be able to monitor 111 performance in real time; supporting more resilient system management and introduction of early warning on system demand (including syndromic surveillance)

Since July 2015 the pilot has finished the Alpha testing phase, completed the procurement phase, and has commenced Beta implementation and mobilisation across London.

\*includes end of life, complex, long-term conditions, mental health crisis, vulnerable children/adults

## 6. Mental Health Crisis Care

Crisis care is a joint effort between Mental Health and the Urgent and Emergency Care programmes.

### Progress over the last three months

- An audit was sent to London's Emergency Departments within acute trusts to understand London's current position in relation to the mental health crisis commissioning standards. The results provided a clear picture of current service provision and the barriers preventing Emergency Departments from meeting the commissioning standards.
- A dedicated crisis care subgroup was established which is clinically led and includes representatives from across the crisis care system (e.g. the Met Police and LAS). The subgroup will support pan-London actions particularly focussed on the interface between crisis care and Emergency Departments to enable the system to meet the crisis commissioning standards. The group will also provide guidance to other transformation deliverables impacting the crisis care system and the HLP enabler programmes.
- Following extensive engagement across the crisis care system, recommendations based on improving London's crisis care system were presented to the Mental Health Transformation Board. These focussed on increasing transparency and coordination across the crisis care system and addressing specific issues that can benefit from a pan-London approach. All recommendations were approved at the Board meeting in September.
- Specific actions were proposed to be led by the crisis care subgroup, focussing on Health Based Places of Safety (at both Emergency Departments and Mental Health Trusts) and the mental health crisis pathway and its interface with Emergency Departments.

### Coming up in the next three months

- Establishing the new governance structures which include an overarching coordination group to increase connectivity across London's crisis care work programmes, as well as a bi-annual London-wide forum with those leading London's crisis care concordat plans to share learning and continue to build momentum in local areas.
- Continuing to collect data on London's crisis system to support the work going forward. This includes identifying current HBPOS service provision and processes across London and how this maps to the demand of mental health crisis services, and identifying patient transfer routes and wait times to receive crisis care in London.
- Gathering and reviewing previous guidance that attempts to outline the role and responsibility of HBPOS' and staff groups within the mental health crisis pathway, including the clinical and legal roles of all those involved.

#### **Biggest achievement**

The development of the mental health crisis care recommendations which occurred through an extensive engagement process, involving key discussions with a wide range of stakeholders from across the system including commissioners, clinicians, provider Trusts (acute and mental health) and external stakeholders. This process ensured the recommendations were essentially developed by the system leading to suitable and necessary actions being approved at the Transformation Board. It also ensures sufficient buy-in going forward when implementing the actions.



## **7. Mental Health**

### *Transforming care for Londoners experiencing mental illness*

#### **Progress over the last three months**

- The Early Intervention in Psychosis London Programme has established a team to prepare London for a new national access and waiting time standard for early intervention in psychosis (see box below for further detail).
- A task and finish group for perinatal mental health commissioning has been established and a workshop for commissioners to share learning and promote perinatal mental health services has been held.
- A project to respond to the 'stolen years' – the premature mortality gap for people with serious mental illness in London – has been established. In partnership with Public Health England, the programme has examined current practice, undertaken a literature review and developed a data set to inform on-going work.
- A commissioning work stream has been established to strengthen the capacity and capability of commissioners to further improve the strategic commissioning of mental health to enable benchmarking and added value in London.
- A primary care work programme has been endorsed which will build capacity, confidence and capability of the mental health primary care workforce. A mapping exercise of existing education and training opportunities in primary care has been undertaken.
- A lead commissioner (Tower Hamlets CCG) for the digital mental wellbeing pilot project has been appointed. Plans are now in place for specification development, user engagement, stakeholder engagement, communications, and marketing.

#### **Coming up in the next three months**

- Commencing procurement for a provider of the London digital mental wellbeing pilot.
- Publishing the data set and London benchmark on physical health of people with serious mental illness.
- Developing and publishing a commissioning guidance for perinatal mental health and appropriate mental health education and training for primary care staff.
- Establishing a strategic Mental Health Commissioning Group to support the new commissioning work stream.
- Establishing a crisis care implementation and coordination group to take forward the agreed London crisis care action plan. The group will bring together the range of pan London work to oversee progress and reduce duplication and gaps.

#### **Looking further ahead**

- Preparing London for the launch of the early intervention in psychosis national access standards in April 2016.
- Bi-annual London wide forum with those leading London's crisis care concordat plans to share learning and continue to build momentum in local areas.
- Consulting with CCGs and clinicians to agree detailed delivery plans for the primary care, 'stolen years' and mental health commissioning work streams.

- Responding to recommendations from the National Mental Health Taskforce report and opportunities arising from implementation of the *NHS Five Year Forward View*.

### **Biggest achievement**

The Early Intervention in Psychosis London Programme is helping to prepare London's commissioners and providers for the introduction of a new access and waiting time standard for Early Intervention in Psychosis. The Programme has been coordinating the work across CCGs, mental health providers, GPs, local authorities, higher education institutions and other key players within the mental health and social care sectors to build system capacity and ensure service readiness.

A clinical reference group has been established, four local preparedness workshops have been held in London for commissioners and providers and a shadow go-live date of 1<sup>st</sup> November 2015 has been agreed. Additional work has been commissioned to benchmark workforce requirements in London and a project manager is working with providers to assess their readiness for the new standard using a preparedness tool. Workforce planning in partnership with Health Education England has also begun.

## 8. Primary Care

### *Transforming London's primary care*

#### Progress over the last three months

- Supported CCGs and SPGs to develop plans for how the primary care specification will be delivered across London
- Created a draft delivery assessment across London, to identify when the vision of high quality primary care for all will be available across the capital
- Developed a provider support package that will be provided as a 'menu' of development options for local areas
- Held dedicated commissioner and provider events to discuss what is needed to deliver the primary care framework.
- Continued broad engagement with the LMC, Local Councils, LETBs and other partners.
- Held a positively received Strategic Oversight Group meeting which focused on proactive care measures
- Measures and Outcomes workshop to define success and develop metrics to monitor progress

#### Coming up in the next three months

- Further developing delivery plans, including establishing a baseline of activity.
- Clarifying the definition and measures of success
- Launching the provider support package
- Supporting CCGs to move to delegated commissioning, aiding applications for April 2016.

#### Looking further ahead

- Supporting local areas flexibly through pan-London support and tailored local support
- Delivering additional events on co-ordinated and proactive care and local provider support events
- Supporting local areas to resolve implementation challenges
- Appointing a learning and evaluation partner to proliferate learning
- Monitoring progress against robust delivery plans

#### **Biggest achievement**

Through working extensively with Strategic Planning Groups we now have a delivery roadmap for implementation of the primary care specification. To support the primary care workforce to achieve the ambition of the specification, we held a provider event in July bringing over 140 attendees to share transformation experiences and lessons from working at scale in primary care across London. The output from rich discussions led to us developing a provider development support workstream within the Primary Care Programme to support the implementation of the framework. We have two further events planned centred on Access and Provider Development which we have received high interest.

## 9. Specialised Commissioning

### *Creating world class specialised care services*

#### Progress over the last three months

- Agreed priority specialised services for review/transformation
- Produced a report on neuro-rehabilitation services across London

#### Coming up in the next three months

- Submitting programme PID and resource bids
- Supporting the alignment of SPG and NHS England commissioning plans for specialised services
- Launching service review programme
- Recruiting patient/public representation to programme board

#### Looking further ahead

- Supporting the transition of adult morbid obesity surgery from NHS England to CCGs

#### **Biggest achievement**

The agreement of criteria for prioritisation of services for review/transformation, and application of these to specialised services was a key achievement. This ensures a joined up approach to collaborative commissioning of these services, and significantly enhances the influence of CCGs over their delivery.

## 10. **Estates**

### *Transforming London's estate to deliver high quality care*

#### **Progress over the last three months**

- A London-wide NHS Estates Database has been developed and circulated. The latest version was issued to SPG leads in July 2015 such that all SPGs now have asset registers.
- Formal links to the London Land Commission have been established (set up by Mayor of London and Minister for Housing), with Anne Rainsberry now a standing member.
- SPG Estates Strategy workshops are being delivered in September and October 2015.
- Roles and responsibilities for the Estates programme have been clarified at CCG, SPG and London levels to support decision making.
- Meetings have been held with key stakeholders including the London Land Commission, GLA, DH, NHS PS, CHP, LIFT Council, British Property Federation, Primary Healthcare Ltd and District Valuation Office.

#### **Coming up in the next three months**

- Arranging NHSPS, CHP and SPG support to help delivery of CCG Local Estate Strategies by end of December 2015.

#### **Looking further ahead**

- Supporting the development of SPG 5 Year Strategies for Estates by March 2016 by arranging estates expertise to support SPGs and CCGs.
- Continuing work with the London Land Commission to identify estate opportunities for the NHS.

#### **Biggest achievement**

Estates work represents a significant opportunity in meeting the financial challenge faced by the NHS and Local Authorities. SPG Estates Workshops have been bringing together key stakeholders from CCG, Providers and Local Authorities. This is helping to identify estates opportunities through joint working and supports development of the CCGs local estates strategy. The first workshop was held in North Central London, where all key stakeholders including providers, CCGs and boroughs contributed and agreed to a governance approach.

## **10. Payments and Funding**

### *Aligning funding and incentives to promote transformation of care*

#### **Progress over the last three months**

As the suite of transformation programmes has developed the role of the Payments and Funding programme has shifted to a financial and governance support function for the other programmes. The function currently ensures that programmes build robust business cases and Programme Initiation documents that support strategic goals and ensure value for money. This is being achieved through the Payments and Funding Group which has been holding monthly meetings where financial arrangements and submitted business cases and PIDs are addressed. Based on these documents and working closely with programmes, the Payments and Funding Group has reviewed and made decisions on the release of funds for programmes.

The Group first met on 5 May, 2015 and has since has held three meetings at monthly intervals with an agenda prepared to address the financial arrangements of the partnership and business cases from the programmes and overarching portfolio level, against a back drop of submitted PIDs. In this period 14 business cases have been considered, with 9 agreed, and 9 PIDs have been approved.

The Group has established the hosts of each programme and signed off the 2015/16 budget. The Group has further recommended that HLP should be extended for a further two years and this is currently being considered by individual CCG GBs and NHS England (London).

#### **On-going activities**

The Group will continue to hold regular meetings to review PIDs and business cases from the HLP programmes. The Group will also continue to engage with other programmes, particularly Urgent & Emergency Care and Personalisation, to understand how it can support the development of new payment mechanisms and incentives. The membership of the board is shown below, and there are regular reviews to ensure a broad representation and necessary expertise.

David Slegg, Director of Finance, NHS England (London) (Co-chair)
Alison Blair, Islington CCG (Co-chair)
Ahmet Koray, CFO, Islington CCG
Peter Kohn, Director of Office of CCGs
Stuart Saw, Director of Financial Strategy, NHS England (London)
Hardev Virdee, CFO, Wandsworth CCG
Theresa Osborne, CFO, Bexley CCG
Tom Challoner, NWL representative
Henry Black, CFO, Tower Hamlets CCG
Patrice Donnelly, Head of Service Redesign, Healthy London Partnership
Shaun Danielli, Transformation Director, Healthy London Partnership
Richard Jeffery, Director of Financial Management, NHS England (London)
Tom Travers, CFO, BHR CCG
Christine Caton, CFO, Lambeth CCG
Philippa Lowe, NEL rep
Caroline Bailey, NWL rep

## 11. Workforce

### Developing London's workforce to enable transformation of care

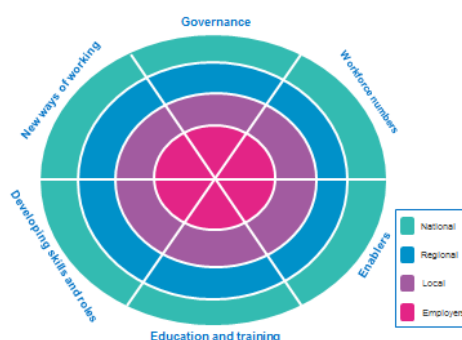
#### Progress over the last three months

- The London Transformation Group endorsed the programmes revised approach to work in collaboration with Local Health Economies, CCGs / SPGs, and London-wide stakeholders and partners to form a strategic view of London's workforce priorities and challenges. As part of this broad stakeholder engagement, the programme has been speaking directly with Commissioners, HR Directors, Directors of Nursing and Trade Unions from across the capital to identify and address those workforce priorities which will deliver the most value to them.



- A consistent methodology has been established to determine the workforce implications of future models of care and identify where actions to support implementation can be most effectively taken. The shaping of priority areas of focus is being achieved in collaboration with established clinical leadership advisory groups embedded within existing Healthy London Partnership governance, with additional input and challenge from local SPG and CCG governance groups.

#### Workforce spheres of influence methodology



- Collaborative engagement and governance arrangements have been established with key stakeholders from across the capital. This includes a Workforce Delivery Group to provide a forum where connections can be made between London wide and local SPG / CCG workforce activities; a London Workforce Senate which will provide a system perspective on London wide workforce priorities; and a Workforce Programme Board which provides the programme team with strategic leadership, oversight, and guidance in the development of London-wide workforce priorities.
- An extension of our support to other Healthy London Partnership transformation programmes in their development of workforce plans has occurred. This will identify initiatives that can alleviate current workforce challenges in specific programmes, pathways, and population segments.
- The evidence base to identify the workforce implications of delivering new models of care across London has been developed. This included review and analysis of:

- SPG / CCG workforce priorities and existing streams of work across the capital
- The impact of planned pan-London transformation programmes for Primary Care; Cancer; Mental Health; Urgent & Emergency Care; and Children & Young People
- The workforce implication of recommendations published in national independent and corporate reports, including the *NHS Five Year Forward View*, Lord Carter's efficiency review and Lord Rose' leadership review
- The workforce implications of relevant international models, such as the Buurtzorg self-managed nursing team model, the ChenMed primary care model and the New Zealand nursing development model

### Looking further ahead

- Our primary objective is to deliver a strategic workforce framework for London in March 2016 that defines and coordinates action to address the capital's priority workforce challenges. By gaining consensus across London on the key areas of focus for this strategic framework, clarity will be achieved on those coordinated actions that need to be taken in the short-term (1 – 2 years), and beyond (3 – 5+ years). These actions will ensure that London has the workforce it needs now and in the future.

### Biggest achievement

Our biggest achievements have been to: develop a methodology that has resonated with CCG Chair, Chief Officer and Workforce groups we have engaged to date; conduct a comprehensive analysis of London workforce challenges, which is providing a foundation from which to gain consensus on a number of emerging workforce priority themes; and add value to HLP Programmes by supporting them to identify and shape their existing workforce challenges and priorities for the future.



## 12. Interoperability

*Connecting Londoners and health and care providers to allow for real time access to records and information*

### Progress over the last three months

- Understanding of the existing interoperability landscape across London has progressed and priorities for development have been agreed both with SPGs and other programmes. This has reinforced the importance of interoperability for real-time information exchange to support transformation of Urgent & Emergency Care and to enable citizens to have a more active role in their healthcare. A record location 'service' using agreed standards, image exchange and pathway tracking through notifications and alerts are key to achieving this goal. In Primary Care, the requirements are to support SPG plans in the utilisation of digital channels as part of a strategic approach to digital maturity and examining new models of delivery.
- The team has increased support to NHS 111 and forged links with HSCIC and the Professional Records Standards Body to develop national standards for information exchange in crisis scenarios.

### Coming up in the next three months

- Setting up of a standards-based proof-of-concept system to demonstrate and test its use for exchanging crisis care information between CMC and NHS111 on demand.
- Developing national standards covering crisis information exchange.
- Conducting trial projects covering identity, consent, record location and pathway management.
- Developing Interoperability Enterprise Architecture for discussion with CCGs.
- Supporting SPGs in the coordination of CCG Digital Roadmaps in accordance with national timelines.

### Looking further ahead

- Developing a delivery strategy, roadmap, and business cases, to secure the capabilities to achieve the NIB aspirations for a connected, paperless NHS by 2020. This will include a record location service for implementation in 2017.

#### Biggest Achievement

The definition of 'a crisis care plan data standard' and the agreement by HSCIC and PRSB for London to act as sponsor for the accelerated development. This is a top priority in supporting new models of urgent and emergency care.

## 13. Personalisation and Participation

*Ensuring Londoners are engaged and involved in their own health and the health of their city*

### Progress over the last three months

- A coalition for action has been developed which has involved engaging SPGs and CCGs, recruiting a group of enthusiastic and committed leaders (including 5 clinical leads), agreeing a governance structure, and confirming the needs and priorities of health and care organisations, professionals and the public across London. The 'shadow' board has met three times, held a planning session and a formal launch event has taken place.
- The programme priorities and timelines have been amended following the engagement sessions, and the CCG Chief Officers' and Programme's away days. Greater emphasis will now be placed on developing the case for change. This will seek to answer the question: *"do more informed and enabled citizens coupled with more personalised models of service delivery, achieve better outcomes at lower costs and drive value based commissioning when implemented at scale?"*
- A 'Personal Health Budgets in London: Summary Report' has been published. This includes details of the support programme available and suggested communications lines to help local CCG teams to respond to recent media activity
- New commissioning intentions for 2016/17 and CCG guidance has been developed by the programme to support negotiations with community and mental health providers.
- Action learning sets started in September for local CCG leads to help them plan for the wider expansion of Personal Health Budgets beyond NHS Continuing Healthcare

### Coming up in the next three months

- Recruiting clinical leads, user and carer representatives from all SPG areas, local authority partners, voluntary, community and statutory sector providers to the Design Group to assure that the requirements and priorities of local communities are reflected in all programme design principles.
- Preparing recommendations on the future of myhealthlondon, including an option appraisal and business case
- Finalising the case for change for discussion at the London Transformation Group's meeting on 10 December

### Looking further ahead

- Undertaking crowdsourcing to communicate the value of personalisation and increasing participation to the frontline.
- Supporting SPGs and local teams to use new commissioning models to promote personalisation and participation, including contracting levers, financial incentives and risk sharing.

#### Biggest achievement

A significant achievement has been developing a strong and effective working relationship with London ADASS. Boroughs have been progressing the personalisation agenda for a decade and the NHS can learn important lessons from borough experiences. These include advice on successfully 'unblocking' block contacts and empowering people to have more choice, control and to self-manage their own care.

## Appendix 1. Past events

Programme	Date	Summary of event
<b>Transforming Cancer Services (TCS)</b>	27/04/2015 01/05/2015 09/06/2015 11/06/2015	<p><b>Cancer Waiting Times Capacity and Demand Workshops</b></p> <p>A series of 12 workshops (in collaboration with (NHS Intensive Support Team) to support trusts in achieving cancer waiting time standards and improving systems across London. Tools and techniques to undertake capacity and demand modelling and analysis within organisations were introduced. This built understanding of the relationship between capacity and demand with maximum sustainable waiting list size and backlog clearance, and improved skills in planning service capacity. For example participants have undertaken capacity and demand modelling on the two-week wait services for their organisation and presented this at subsequent workshops.</p> <p><b>Key contact:</b> Andy McMeeking, TCST Manager, <a href="mailto:andy.mcmeeking@nhs.net">andy.mcmeeking@nhs.net</a></p>
<b>Homeless Programme</b>	06/2015	<p><b>Healthy London Partnership 'Homeless Programme' Interoperability Requirements</b></p> <p>A requirements and benefits gathering workshop with Homeless Programme stakeholders including patients and the public. The event clarified the need for the citizen to play an active role in the control of their own safe care. Information exchange in a crisis emerged as the top priority, the learning from which can be applied to non-crisis situations. As a result, trials will be undertaken in various care settings to demonstrate technical and operational changes needed to fix current information flow problems. A series of similar workshops will be held with other HLP programmes including Cancer, U&amp;EC, Mental Health, Personalisation, Primary Care, Children &amp; Young People, and Specialised Commissioners.</p> <p><b>Key contact:</b> Mike Part, <a href="mailto:mike.part1@nhs.net">mike.part1@nhs.net</a></p>
<b>Interoperability Programme</b>	06/2015 to 07/2015	<p><b>Current Interoperability implementations across London</b></p> <p>The requirements from other programmes and the baseline survey contribute to the emerging pan-London strategy and the design of an overarching interoperability design. Specific trials are now being arranged to explore the best ways of providing access to the key 'missing' functionality that prevent us from sharing information in the way we would like (e.g. record location, consent and identity services). All CCGs and Trusts will be provided with opportunities to shape these trials so that we can reach a consensus on the best way to proceed.</p> <p><b>Key contact:</b> Mike Part, <a href="mailto:mike.part1@nhs.net">mike.part1@nhs.net</a></p>
<b>Workforce</b>	06/2015 to 08/2015	<p><b>Workforce Programme SPG &amp; local CCG engagement</b></p> <p>The Workforce programme team shared the scope of the Workforce Programme with CCG Chairs, Chief Officers and local Workforce steering group to raise local awareness of the programme's objectives and approach. Next steps will be further engagement across all CCGs to raise awareness of the programme, establish regular engagement mechanisms with CCG Chair / Chief Officer Groups &amp; specific local workforce steering groups, and to test emerging themes.</p> <p><b>Key contact:</b> James Crisp, <a href="mailto:james.crisp2@nhs.net">james.crisp2@nhs.net</a> 07940 907 330</p>
<b>Children and Young People's (CYP) and Mental Health</b>	16/06/2015 & 17/07/2015	<p><b>CAMHS Transformation Plans Workshops</b></p> <p>Two workshops organised to support commissioners transformation planning. The first supported CAMHS commissioners and clinicians to explore recommendations from the 'Future In Mind' Taskforce report, discuss children and young people's engagement, examine UK best practice examples, and develop transformation plans.</p> <p>The second workshop further supported transformation planning through discussion of national guidance and examination of CAMHS topics. Follow-up 'study clubs' led by identified commissioners will bring CCG, LA and specialised commissioners together via teleconference to discuss collaborative planning and to collate learning. A further workshop in October will follow to support further transformation planning before submission. NHS England (London Region) Ops and delivery will be engaged to assure the process for the CCG plans.</p> <p><b>Key contact:</b> Andy Martin, Senior Project Manager, <a href="mailto:andy.martin3@nhs.net">andy.martin3@nhs.net</a> 0113 807 0647</p>

<b>Personalisation with Prevention, Interoperability, Workforce, Primary Care, Urgent and Emergency Care, Funding &amp; Payments</b>	26/06/2015	<p><b>Improving Personalisation and Citizen Participation</b></p> <p>This event facilitated significant engagement with CCGs, councils, clinicians, user &amp; carer groups, statutory &amp; voluntary sector providers and national programmes to agree the priorities for action. Delegates identified areas including the opportunity to own their budget, information and access to wider people and community assets, citizen accounts, and a case for change to understand the offer, costs and benefits of personalisation. An away-day for the 'Shadow' Programme Board and carer representatives will be arranged to discuss the outputs, agree the governance, prioritise actions and develop the structure of the programme moving forward.</p> <p><b>Key contact:</b> Shaun Crowe, <a href="mailto:shaun.crowe@nhs.net">shaun.crowe@nhs.net</a></p>
<b>Transforming Primary Care Programme</b>	07/2015	<p><b>Primary Care Commissioner Workforce Workshop</b></p> <p>The Workforce programme shared their programme scope and captured Commissioner's perspectives on Primary Care workforce challenges that need to be investigated further. Outputs and conclusions will be shared and tested with the Transforming Primary Care Programme governance to confirm their highest priority workforce challenges. This feedback will inform a delivery plan for each agreed priority.</p> <p><b>Key contact:</b> James Crisp, <a href="mailto:james.crisp2@nhs.net">james.crisp2@nhs.net</a> 07940 907 330</p>
<b>Transforming Primary Care Programme</b>	03/07/2015	<p><b>Commissioners Workshop</b></p> <p>This workshop, attended by the SPG Chief Officers, the NHS England commissioning team and representatives from the LETBs, facilitated discussion on the opportunities to take the Transforming Primary Care agenda across London, focusing on the development and implementation of their commissioning strategies for the next five years. Discussion highlighted the priority areas and the sequence of local implementation thus informing local plans. Many areas identified that the access specifications would be delivered as the first priority. Group sessions explored how enabler programmes could support some of the specific commissioning challenges and these were brought to the programme's Strategic Oversight Group.</p> <p><b>Key contact:</b> <a href="mailto:england.londonprimarycaretransformation@nhs.net">england.londonprimarycaretransformation@nhs.net</a></p>
<b>Transforming Cancer Services (TCS)</b>	07/07/2015	<p><b>NICE Guidance Clinical Reference Workshop</b></p> <p>The workshop provided a forum for primary and secondary care clinicians to discuss updated NICE guidelines for suspected cancer referrals. There was agreement to:</p> <ul style="list-style-type: none"> <li>• Establish a Pan-London Operational Two-week Wait Group to revise the referral forms and cascade to CCGs between January and March 2016</li> <li>• Embed the revised forms on all GP systems</li> <li>• Update current patient information, translate into eleven languages and make available on the website by October 2015</li> <li>• Remain members of a tumour specific virtual clinical reference group until the two-week wait referral forms are finalised.</li> </ul> <p>A resource deck has been produced which collates materials for GPs and Cancer Leads to use for education and training purposes. Agreement of the clinical criteria through established governance routes will support consistency in two-week wait referral criteria across London.</p> <p><b>Key contact:</b> Julia Odzilli, TCST Senior Early Detection Lead, <a href="mailto:Julia.odzilli2@nhs.net">Julia.odzilli2@nhs.net</a></p>
<b>Mental Health</b>	08/07/2015	<p><b>Commissioning Perinatal Mental Health Services</b></p> <p>The event supported the Perinatal Mental Health Commissioning Projects' aim to influence and improve the commissioning of perinatal mental health services across London and the goal of ensuring that every CCG in London has perinatal mental health services as part of its commissioning intentions for 2016/2017. Commissioners of perinatal mental health and mental health services shared learning on how to commission quality perinatal mental health services.</p> <p><b>Key contact:</b> Temo Donovan, Project Manager, <a href="mailto:tdonovan@nhs.net">tdonovan@nhs.net</a></p>
<b>Urgent and</b>	09/07/2015	<b>London Clinical Senate Forum</b>

<b>Emergency Care</b>		<p>The forum facilitated feedback from senior clinical U&amp;EC leaders and patients on the draft U&amp;EC facilities and system specifications, the enablers for change, and the benefits and outcomes of transforming the U&amp;EC system. Recommendations from the group included considering particular areas in more detail in the development of specifications (including CYP care, community services, self-care and mental health), developing and testing IT, interoperability and data sharing (supported by aligning incentives and training the workforce), and embedding benefits measurement of transformation.</p> <p>As well as informing the work of the U&amp;EC programme the outputs from the forum highlighted the need for:</p> <ul style="list-style-type: none"> <li>• Engaging with mental health and children’s CLGs to continue the development of the system and facilities specification</li> <li>• Engaging patients via Talk London to feed into the design of the specification</li> <li>• Sharing forum outputs across the U&amp;EC programme governance for discussion and consideration</li> <li>• Sharing feedback on benefits and outcome measures with the national team to inform development of U&amp;EC system outcome measures</li> </ul> <p><i>Key contact:</i> <a href="mailto:england.londonclinicalsenate@nhs.net">england.londonclinicalsenate@nhs.net</a>.</p>
<b>Estates</b>	07/2015	<p><b>SPG inaugural Estates workshops in September</b></p> <p>The workshops concentrated on SPG level planning for the refreshed five year plans required by the end of March. The emphasis was on the need to work across organisational boundaries. Roles and responsibilities at each level were agreed.</p> <p><i>Key contact:</i> <i>Kohn Peter, <a href="mailto:peterkohn@nhs.net">peterkohn@nhs.net</a></i></p>
<b>Transforming Primary Care Programme</b>	15/07/2015	<p><b>Transforming Primary Care – Into Action</b></p> <p>Providers shared experiences of ways of working at scale and gave examples of practice innovations that improve outcomes for patients and staff. The CEO of the LMC asked providers to “lay down their arms”. Feedback was positive with requests for “more of the same”. The programme team are now working with national and local colleagues to develop a provider development support offer. The offer will be tailored to local needs and help at scale providers to develop in maturity and competitively tender for services, as well as to support commissioners to understand provider readiness.</p> <p><i>Key contact:</i> <a href="mailto:england.londonprimarycaretransformation@nhs.net">england.londonprimarycaretransformation@nhs.net</a></p>
<b>Children and Young People</b>	31/07/2015	<p><b>CYP Engagement Event Croydon</b></p> <p>The event, held in collaboration with Croydon Drop-in Centre, was led and designed by young people, and facilitated by Association for Young People’s Health. Young people reflected on their experiences of NHS services, voiced their expectations and articulated their vision of local health and CYP services. A report on outcomes and findings to be published in September / October will inform the programme’s work around innovative access.</p> <p><i>Key contact:</i> <i>Daryl Miller Project Manager, <a href="mailto:darymiller@nhs.net">darymiller@nhs.net</a> 01138 070931</i></p>
<b>Workforce with Urgent Care &amp; Emergency, Mental Health &amp; Cancer Programmes</b>	08/2015 to 09/2015	<p><b>Urgent Care &amp; Emergency, Mental Health and Cancer Workforce Implications Workshops</b></p> <p>The workshops supported priority HLP Programmes to identify their workforce challenges, and the workforce implications of each programme’s existing delivery plans and emerging specifications. The event was attended by programme teams and clinical and national representatives where available. The outputs of each session will be tested with existing clinical leadership groups, and HLP programme governance groups to inform the programme’s priorities.</p> <p><i>Key contact:</i> <i>James Crisp, <a href="mailto:james.crisp2@nhs.net">james.crisp2@nhs.net</a> 07940 907 330</i></p>
<b>Personalisation with Prevention, Interoperability, Workforce, Primary Care, Urgent and</b>	14/08/2015	<p><b>Personalisation and Participation Away-day</b></p> <p>The focus of the day was on candidate projects, governance arrangements, stakeholder identification, programme recruitment, and links with other transformation programmes. The programme will build on the event by developing the PID, recruiting to governance, building an editorial team to support the case for change, defining user requirements for citizen accounts, scoping how to mobilise people and community assets, and developing commissioning guidance to influence 2016/17 contracting round.</p> <p><i>Key contact:</i> <i>Shaun Crowe, <a href="mailto:shaun.crowe@nhs.net">shaun.crowe@nhs.net</a></i></p>

<b>Emergency Care, Payments and Funding</b>		
<b>Children and Young People</b>	19/08/2015	<p><b>Children and Young people (CYP) Strategic Planning Group (SPG) Leads meeting</b></p> <p>This event brought CYP SPG leads together to discuss future ways working and plans for CYP in their area. SWL presented learning and progress on their 6-month children and young people's population based network. Future meetings are being planned with south east London to drive the work of population based networks and paediatric assessment units</p> <p><b>Key contact:</b> Sara Nelson, <a href="mailto:sara.nelson@nhs.net">sara.nelson@nhs.net</a> 07960 046611</p>
<b>Urgent and Emergency Care (111)</b>	04/09/2015	<p><b>London Roadshow: Commissioning a Functionally Integrated Urgent Care Access, Treatment and Clinical Advice Service</b></p> <p>The roadshow brought together over 150 commissioners, clinicians, providers and service users from across the 111, GPOOH U&amp;EC system. The sessions focused on understanding the national and local vision for the commissioning and procurement of Integrated Urgent Care Services, learning from areas that have started to redesign services, influencing new commissioning standards, Integrated U&amp;EC KPIs and Integrated U&amp;EC Payment Models, exploring the impact on the U&amp;EC workforce, improving the Directory of Services, and participating in co-design workshops.</p> <p>Learning from the event will be fed back to the national team and circulated among London commissioners, clinicians, providers and patient representatives. The national Integrated Urgent Care commissioning standards will be published on 30<sup>th</sup> September 2015.</p> <p><b>Key contact:</b> <a href="mailto:england.nhs111submissions@nhs.net">england.nhs111submissions@nhs.net</a></p>
<b>Mental Health</b>	Multiple	<p><b>Early Intervention in Psychosis</b></p> <p>A series of workshops to ensure commissioners, mental health trusts, local authorities and many other key players within the health and social care sector are ready to meet the new early intervention in psychosis national access and waiting time standards in April 2016. Events included presentations from mental health trusts and CCGs on local solutions and challenges, and included an overview of education, training and data needs.</p> <p><b>Key contact:</b> EIP London Programme, <a href="mailto:info@eip.london">info@eip.london</a></p>

## Appendix 2. Upcoming events

Programme	Date	Summary of event
Estates	09/2015 - 10/2015	<p><b>SPG Estates Workshops</b></p> <p>These workshops will bring together key stakeholders from CCG, Providers, Local Authorities, with the aim of supporting local stakeholders to drive the estates planning work which will address the delivery of Better Health for London and the significant financial challenge being faced by the NHS. A national workshop on estates and guidance for years 2-4 of the Primary care investment fund will be held on 16th October. This will be linked to the SSDPs.</p> <p><b>Key contact:</b> Kohn Peter, <a href="mailto:peterkohn@nhs.net">peterkohn@nhs.net</a></p>
Specialised Commissioning	09/2015 - 11/2015	<p>Between September and November the Programme will be holding workshops with SPG leads on the priority service areas, including HIV and neuro-rehabilitation, to inform the detailed work on care pathways in each patch of London and London-wide.</p>
Workforce	10/2015	<p><b>London Workforce Senate</b></p> <p>The senate will provide a London wide forum for different stakeholders with an interest in workforce to; provide advice and challenge across the system on workforce matters; provide input, advice and challenge to the design and implementation plans associated with transformation programmes; act as ambassadors for the workforce programme within their own and other parts of the organisation; and provide system perspective on the consequences of proposed workforce design and implementation. Stakeholders include CCG Chairs &amp; Chief Officers, NHS Provider Chief Officers, NHS Employer representatives including Unions.</p> <p><b>Key contact:</b> James Crisp, <a href="mailto:james.crisp2@nhs.net">james.crisp2@nhs.net</a> 07940 907 330</p>
Transforming Primary Care	01/10/2015	<p><b>Transforming Primary Care - Access</b></p> <p>The event will support providers and commissioners across London to deliver the accessible care specifications. It will facilitate attendees to address what good access looks like for patients and the challenges of implementation. Delegates will gain inspiration from those who have delivered the access specification, learn lessons from the Prime Ministers Challenge Fund pilots, and debate the opportunities and challenges in making the vision of accessible care a reality.</p> <p><b>Key contact:</b> <a href="mailto:england.londonprimarycaretransformation@nhs.net">england.londonprimarycaretransformation@nhs.net</a></p>
Children and Young People	02/10/2015	<p><b>CAMHS Commissioning Event</b></p> <p>Building on the CAMHS Transformation Plans Workshops held in June and July, this event will provide commissioners from each area of London with face to face planning time before their transformation plans are submitted.</p> <p><b>Key contact:</b> Andy Martin, Senior Project Manager, <a href="mailto:andy.martin3@nhs.net">andy.martin3@nhs.net</a> 0113 807 0647</p>
Interoperability Programme	05, 08/10/2015	<p><b>CCG Digital Roadmap Workshops</b></p> <p>Each CCG is required to submit a Digital Roadmap to NHS England by 30 October 2015. This is intended to gain a picture of local initiatives, leadership and governance models in the progress towards 'paper free at the point of care'. The Interoperability Programme and SPGs will co-ordinate this process and support it with workshops in partnership with national colleagues. This reflects the pan-London work on interoperability and commissioner plans to make significant progress along the digital maturity index.</p> <p><b>Key contact:</b> Mike Part, <a href="mailto:mike.part1@nhs.net">mike.part1@nhs.net</a></p>
Personalisation and Primary Care	09/10/2015	<p><b>Citizen Account Workshop</b></p> <p>Following the Personalisation event at the Oval in June, this workshop is intended to define the requirements for the prototyping of an online citizen account. The citizen account aims to provide a 'single sign-on' process whereby citizens can access functionality such as booking a GP appointment,</p>

<b>Transformation</b>		viewing their medical records, uploading critical information to a crisis record, contributing to care plans and managing their personal health/ care budget. The outputs of the workshop will enable further work on testing, identity management and consent models. <b>Key contact:</b> Mike Part, <a href="mailto:mike.part1@nhs.net">mike.part1@nhs.net</a>
<b>Personalisation with Interoperability and Primary Care</b>	09/10/2015	<b>Defining User Requirements for Online Citizen Accounts Workshop</b> The Personalisation and Participation programme is exploring options around how myhealthlondon might be deployed to create greater levels of individual and collective participation. This workshop will explore the option of using myhealthlondon to help with the prototyping of citizen accounts and will be supported by SMEs recruited from the three participating programmes (Personalisation and Participation, Interoperability, and Primary Care). <b>Key contact:</b> Shaun Crowe, <a href="mailto:shaun.crowe@nhs.net">shaun.crowe@nhs.net</a>
<b>Mental Health</b>	13/10/2015	<b>London Mental Health Tariff Data Conference</b> The event will provide information and an update on the implementation of Mental Health Commissioning. There will be a focus on data including the use of the newest iteration of the Mental Health Minimum Data Set and the early intervention in psychosis benchmarking data. It will also provide an update on commissioning changes including contract monitoring metrics and e-learning support for accurate data recording. <b>Key contact:</b> London Mental Health Tariff Programme, <a href="mailto:Mbawuese.Yongo@candi.nhs.uk">Mbawuese.Yongo@candi.nhs.uk</a>
<b>Children and Young People</b>	14/10/2015	<b>Asthma Launch</b> This event is targeted at commissioners and providers of children and young people's asthma services and will formally launch the asthma standards and share best practice from across London and nationally around the implementation of the standards. The standards support the work of the programme to reduce variation in quality, outcomes, and experience for children and young people with asthma in London. This event is particularly valuable for those taking a lead in improving or providing asthma services for children and young people in London. It is aimed at Paediatricians, GP's, practice nurses, school nurses, ward and community nurses, school nurses, Clinical Commissioning Group children's leads, asthma leads, and managers.  If you are interested, register at: <a href="http://www.eventbrite.com/e/transforming-the-health-of-children-and-young-people-with-asthma-in-london-tickets-18261686195">http://www.eventbrite.com/e/transforming-the-health-of-children-and-young-people-with-asthma-in-london-tickets-18261686195</a> <b>Key contact:</b> Sara Nelson, <a href="mailto:sara.nelson@nhs.net">sara.nelson@nhs.net</a> ; 07960 046611
<b>Transforming Cancer Services (TCS)</b>	15/10/2015	<b>Cancer Interoperability Workshop</b> The development of effective technological solutions to communicate patient records and information between sites is essential in supporting the multi-organisational model of cancer care. The London-wide interoperability programme is looking to develop solutions to effectively transfer and share imaging, diagnostic and cancer-specific information to support the treatment pathway. This workshop will bring together a range of clinical and non-clinical attendees to review the requirements and support the design and proof of concept for pilot interoperability programmes. <b>Key contact:</b> Jason Petit, TCST Senior Cancer Intelligence Lead: <a href="mailto:jasonpetit@nhs.net">jasonpetit@nhs.net</a>
<b>Personalisation with Prevention</b>	16 or 19 /10/2015	<b>Scoping Mobilising People and Community Assets workshop</b> Closely linked to the 'Defining User Requirements for Online Citizen Accounts Workshop' (9 <sup>th</sup> October 2015), this requirements gathering session will explore the second option for developing myhealthlondon by promoting access and information to a wider range of people and community assets. This will involve working with clinical leaders, voluntary sector, ADASS and the prevention programme. Once both options have been explored, a recommendation and business case will be presented to the London Transformation Group. <b>Key contact:</b> Shaun Crowe, <a href="mailto:shaun.crowe@nhs.net">shaun.crowe@nhs.net</a>
<b>All</b>	21/10/2015	<b>London: One Year On Event</b>



programmes		<p>This event marks the one year anniversary of the London Health Commission's Better Health for London report and the NHS Five Year Forward View. It will be a chance to discuss the progress London is making towards becoming the world's healthiest city and the challenges that need to be tackled in the coming years. It will be an interactive day with a marketplace showcasing Healthy London Partnership achievements, local initiatives and an opportunity to hear from inspiring speakers from across NHS and industry sectors. There will also be panel discussions and opportunities for Q&amp;A.</p> <p><b>Key contact:</b> <i>Una Carney, <a href="mailto:una.carney@nhs.net">una.carney@nhs.net</a></i></p>
<b>Transforming Primary Care</b>	04/11/2015	<p><b>Provider Development Launch</b></p> <p>One of the key objectives of the programme is to deliver a support programme for clinical leadership and emerging organisations, adding value to local work and enhancing the existing ability of providers and commissioners across the capital to deliver primary care transformation. This event gathers providers and commissioners to launch the programme's Provider Development offer, discuss their local requirements and shape and tailor the offer to meet their local needs</p> <p><b>Key contact:</b> <i><a href="mailto:england.londonprimarycaretransformation@nhs.net">england.londonprimarycaretransformation@nhs.net</a></i></p>
<b>Children and Young People</b>	06/11/2015	<p><b>CYP Launch event</b></p> <p>This event will celebrate the launch of the HLP CYP transformation programme and will focus on outputs of the programme for CCGs.</p> <p><b>Key contact:</b> <i>Sara Nelson, <a href="mailto:sara.nelson@nhs.net">sara.nelson@nhs.net</a>; 07960 046611</i></p>
<b>Urgent and Emergency Care</b>	09/11/2015	<p><b>London Urgent and Emergency Care Event</b></p> <p>This event will launch the U&amp;EC facilities specification to an audience of stakeholders from across London's U&amp;EC system, including members of the 5 recently established networks. It will also include opportunity for continued patient engagement to understand how patient expectations of the U&amp;EC system influence the implementation of the facilities specification and design of services. Workshops will include discussing patient co-design, workforce, interoperability, and payments and funding. These will build understanding of the implementation challenges and key priorities within the networks and across London, allow sharing of good practice, and will shape the work of enabler programmes.</p> <p><b>Key contact:</b> <i><a href="mailto:england.serviceredesign@nhs.net">england.serviceredesign@nhs.net</a></i></p>
<b>Children and Young People</b>	13/11/2015	<p>Extensive engagement work is being undertaken with CYP stakeholders to incorporate their views into how the programme progresses. A number of events have been run for this purpose, facilitated by the Association of Young People's Health.</p> <p><b>CYP In-Patient Feedback Survey</b></p> <p>This is a combined event for London and the South East region and hosted in conjunction the Patient Experience Network (PEN). The event aims to present results from the recent CYP acute in-patient survey as well as showcasing other CYP engagement work.</p> <p><b>What Are Children and Young People Saying About Their Experience of Care and What Are We Doing About It?</b></p> <p>The event will showcase some of the latest national and local activities and initiatives relating to Children and Young People's experiences of care through presentations, posters, market stalls, and networking. The event will provide a unique opportunity to connect commissioners and providers nationally and regionally. The audience will therefore be a mix of CSUs, CCGs, providers and other organisations including local authorities, the voluntary sector, and Healthwatch, Attendees will gain an understanding of what is important for children and young people, explore some of the work happening in and around the region, and gain new ideas and thoughts about how to further improve the experience of care for and with children and young people in their local area.</p> <p><b>Key contact:</b> <i>Daryl Miller, Project Manager, <a href="mailto:darylmiller@nhs.net">darylmiller@nhs.net</a> 01138 070931</i></p>

<b>Prevention</b>	23/11/2015	<p><b>Realising the Workplace Charter in London's NHS</b></p> <p>HLP are working with the GLA, management and trade unions to deliver an interactive event to engage NHS organisations in workplace health. The event aims to increase the number of NHS organisations adopting and progressing the charter, and to facilitate sharing of good practice around creating a health-enhancing workplace. The GLA will introduce the Healthy Workplace Charter and sessions on health and wellbeing. Advanced booking is essential. Local SPG engagement sessions will be offered by the team as follow-up.</p> <p><b>Key contact:</b> Sarah Bowker, <a href="mailto:sarah.bowker1@nhs.net">sarah.bowker1@nhs.net</a> 011380 70107</p>
<b>Mental Health</b>	Multiple	<p><b>Strengthening Mental Health in Primary Care</b></p> <p>This series includes:</p> <ul style="list-style-type: none"> <li>• An event for mental health GP clinical leads to review the mapping of education and training for the primary care workforce in mental health; it will contribute to the development of training and education recommendations for CCGs with the aim of working with Health Education England to improve the uptake of mental health training across primary care</li> <li>• An event for mental health GP clinical area leads to determine how best to support and encourage innovative approaches to promoting primary care mental health within their local areas</li> </ul> <p><b>Key contact:</b> Claire Ruiz, Senior Project Manager, <a href="mailto:c.ruiz@nhs.net">c.ruiz@nhs.net</a></p>
<b>Transforming Cancer Services (TCS)</b>	TBC	<p><b>Cancer Commissioning Workshop</b></p> <p>The workshop aims to improve cancer commissioning processes across London. The resulting improvement in processes will facilitate timely attainment of the Five Year Cancer Commissioning Strategy deliverables and benefits and in particular will have a positive impact on reducing variation across London.</p> <p><b>Key contact:</b> Sue Maughn, TCST Clinical Advisor, <a href="mailto:sue.maughn@nhs.net">sue.maughn@nhs.net</a></p>
<b>Transforming Cancer Services (TCS)</b>	TBC	<p><b>Cancer Alliance Workshop</b></p> <p>'Achieving World-class Cancer Outcomes: A Strategy for England (July 2015)' included recommendations on the organisation of commissioning and provision of cancer services and the establishment of Cancer Alliances across the country by 2016. It is envisaged that the Cancer Alliances will bring together key partners for bi-monthly dialogue at a sub-regional level, including commissioners, providers and patients. These Alliances should 'own' local metrics, drive improvement, integrate care pathways and review performance. Our six SPG Leads will be invited to participate in the workshop – the remit of which will be to determine how London will organise itself to set up the Cancer Alliances.</p> <p><b>Key contact:</b> Julie Lees, TCST Pan-London Transformation Lead, <a href="mailto:julie.lees@nhs.net">julie.lees@nhs.net</a></p>
<b>Children and Young People</b>	TBC	<p><b>HLP CYP &amp; Redthread</b></p> <p>This will be an invite-only event for young people who have experienced trauma. Redthread is an organisation that works with young people in communities across South London. It specializes in youth work, healthcare and education, and supporting adolescents to improve their health and wellbeing through holistic and preventative methods and interventions.</p> <p><b>Key contact:</b> Daryl Miller, Project Manager, <a href="mailto:darylmiller@nhs.net">darylmiller@nhs.net</a> 01138 070931</p>

## Appendix 3: Healthy London Partnership Contact List

Programme	Programme Lead	Programme Lead Contact details
Transformation	Shaun Danielli	<a href="mailto:shaun.danielli@nhs.net">shaun.danielli@nhs.net</a>
Urgent & Emergency Care (and 111)	Patrice Donnelly (U&EC) / Eileen Sutton (111)	<a href="mailto:patrice.donnelly1@nhs.net">patrice.donnelly1@nhs.net</a> / <a href="mailto:eileensutton@nhs.net">eileensutton@nhs.net</a>
Children & Young People	Tracy Parr	<a href="mailto:tracyparr@nhs.net">tracyparr@nhs.net</a>
Mental health	Andrew Turnbull	<a href="mailto:andrew.turnbull@nhs.net">andrew.turnbull@nhs.net</a>
Cancer	Teresa Moss	<a href="mailto:teresamoss@nhs.net">teresamoss@nhs.net</a>
Prevention	Jemma Gilbert	<a href="mailto:jemma.gilbert2@nhs.net">jemma.gilbert2@nhs.net</a>
Health Services for Homeless People	Sheela Upadhyaya (Commissioning Lead)	<a href="mailto:sheela.upadhyaya@nhs.net">sheela.upadhyaya@nhs.net</a>
Specialised Commissioning	Will Huxter	<a href="mailto:will.huxter@nhs.net">will.huxter@nhs.net</a>
Primary care	Liz Wise	<a href="mailto:liz.wise1@nhs.net">liz.wise1@nhs.net</a>
Estates	Peter Kohn	<a href="mailto:peterkohn@nhs.net">peterkohn@nhs.net</a>
Workforce	Paul Roche	<a href="mailto:paul.roche@nhs.net">paul.roche@nhs.net</a>
Interoperability	Mike Part	<a href="mailto:mike.part1@nhs.net">mike.part1@nhs.net</a>
Payments & Funding	Stuart Saw	<a href="mailto:s.saw@nhs.net">s.saw@nhs.net</a>
Personalisation & Participation	Shaun Crowe	<a href="mailto:shaun.crowe@nhs.net">shaun.crowe@nhs.net</a>