

newsletter.

Winter 2017



Changes in General Practice

General Practice has changed so much over the past few years. When I joined my GP Practice in the late 1980s there were no computers and very few protocols for better patient care; there were none of the things we now take for granted like targets for treatment, NICE guidance and a much better culture of safety and learning. Since the 1980s General Practice has developed rapidly and today we have a highly complex but still a very efficient service.

Contrary to popular belief the Clinical Commissioning Group (CCG) doesn't ever want to save money. It wants to spend all of its money. But we want to spend it to achieve the best possible outcomes for patients and we don't want to waste a single pound.

General Practice, or primary care as we often call it, is now going through another big change. Within two or three years it will be expected to be providing routine appointments seven days a week and to be open from 8am to 8pm. Individual practices will not be able to do this on their own and primary care will have to come together

and organise itself to achieve this. GP surgeries will stay as individual practices for their patients but how they work together for better patient services is what needs to be described.

At the CCG we are helping primary care to do this. We are encouraging conversations between GPs in our towns to consider how it might happen. Also we want other community services such as nursing teams, mental health services and provision like community hospitals to be part of this primary care solution. We call it 'Communities of Practice' and we want it to achieve real cooperation and the working together of all of our primary care services.

With these new models of working within primary care, the extra efficiencies that we strive for can happen. This way our future patients and communities will continue to have the very best primary care we can give.

Dr Simon DeanClinical Director, HMS CCG



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Get help fast and Stay Well This Winter

GPs are urging people to get the right care – when and where they need it – from the NHS this winter, when it's #NotAnEmergency.

The winter months can be challenging across the NHS for both patients and those working hard to care for people in need – especially in an emergency.

If you need help fast, but it's #NotAnEmergency, Crawley Urgent Care Centre (open 24/7), or the minor injuries units in East Grinstead and Horsham treat most injuries that are urgent but not life threatening – including minor burns and scalds, limb injuries, cuts, grazes and more.

Dr Minesh Patel, CCG Clinical Chair and lead for urgent care, said: "This will allow A&E staff to concentrate on people with serious, life-threatening conditions and will save you a potentially long wait."

If you have a lung disease; kidney or heart disease; diabetes; another long term health condition or suffer from breathlessness, cold weather can make you more likely to ••••••



catch a winter illness that could become very serious. So even if it's just a cough or a cold – seek advice from your pharmacist before it gets more serious. Your local pharmacist can help with much more than you may think and there's a number of late night pharmacies in our area, so you can get help when you need it.

£2.1m revamp for **Crawley and Horsham** hospitals' muscle, bone and joint clinics

The musculoskeletal (MSK) departments at Crawley and Horsham Hospitals have undergone extensive refurbishment to allow patients to see a wider range of specialists and get a diagnosis and treatment more quickly and closer to home, in one visit.

The MSK service treats people with a wide range of muscle, bone and joint conditions, such as arthritis, back pain and sports injuries.

Across the two hospitals, 22 new treatment rooms have been created and an existing 23 refurbished along with other facilities.

In addition, a new bone density scanner has also been installed in the Crawley clinic. Patients no longer have to travel to Redhill for these scans, which are often used to diagnose osteoporosis. A new rheumatology infusion suite is also being opened at Horsham Hospital for patients who need treatment for arthritis, supported by the League of Friends.



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Ever since I joined the CCG the Clinicians and Commissioners have been working hard to improve the delivery of healthcare to the local population with the challenges of multiple healthcare providers and the inevitable financial constraints. Developments in care have shown

that focusing on the needs of a local area,

and delivering appropriate coordinated care closer to home is better for patients. Patients and their families have also told us they prefer to be at home with access to local services.

The local knowledge of GPs, Commissioners and providers is being used to develop 'Place-Based Plans' for our communities, where all organisations – community health, mental health, social care and third sector – will be working together in a more coordinated and focused way to deliver care for the community.

The proposal is to create clusters of General Practices serving populations of approximately 50k people to deliver this joined up care. There are 20 'care hubs' across the CSESA (Central Sussex and East Surrey Alliance) footprint; four in Horsham and Mid Sussex and two in Crawley. This new way of working known as a Multi-Specialty Community Provider (MCP) will be in place by 2020.

This new model of care is the main change that the CCG is proposing as part of the overall Sustainability and Transformation Plan. Please engage with the plans via our website and at upcoming local events and give feedback so that your views and suggestions can be used to develop the optimum final solution.

Finally, please look after yourself and keep an eye on your neighbours during the winter period.

Simon Chandler

Chair, Commissioning Patient Reference Group

Understanding the Place-Based Plan for Central Sussex and East Surrey

In November 2016 the Place-Based Plan for the Central Sussex and East Surrey Alliance (CSESA) was shared with patients and stakeholders. The plan represents one third of the total Sustainability and Transformation Plan footprint for the whole of Sussex and East Surrey; the other two plans within the region are Coastal Care for West Sussex and East Sussex Better Together.

What is it?

An accessible version of the plan is being produced to help people make more sense of what is being proposed. In essence it describes a new person-centred model of care with integration at its heart, one that provides better care and services out of the hospital setting and closer to home. This will be led by GP practices, which builds on the good work already in progress, promoting collaboration across health and social care. It is a five year strategy which speaks

to our local Five Communities Plan, designed to deliver services at scale using the resources and budgets we already have in the most efficient way. See link in the section below for more information.

We believe that the Multi-Speciality Community Provider (MCP) model is best placed to deliver that in our area. Noone would choose to recreate from scratch a divided NHS – the existing boundaries between GP services, community care, mental health, social care and acute hospitals make it harder to provide joined-up care that is preventative, high quality and efficient. The MCP model dissolves those boundaries. It is about redesigning care around the health of the population and creating a whole new system of care delivery. To be developed in close consultation with clinicians, the MCP(s) will incorporate the 20 existing care hubs across the patch arranged around a strongly connected network of hospitals.

What joined-up care looks like in Horsham and Mid Sussex

Identifying patients at risk through innovation and technology

The project, an innovative tool, has been developed by the CCGs in partnership with digital health solutions provider Docobo to consolidate medical data, identify complex patients at risk of hospital admission or social isolation and trigger proactive, coordinated care plans for those living with long term health conditions.

The ground-breaking technology integrates data across NHS and social care to create one of the first models capable of fully joining up patient care, offering huge potential to reduce demand on emergency and hospital care. Further advantages include collaborative working between health and social care professionals to care for the whole person (instead of by condition) based around the individual's needs, empowering them to take greater responsibility for their own wellbeing.

The project has won nearly £1 million in funding from the Small Business Research Initiative for Healthcare (SBRI Healthcare), an NHS England initiative championed by the Academic Health Science Networks (AHSNs), and received plaudits from Age UK and the Royal College of General Practitioners UK (RCGP), among others.

Have your say

Efforts to engage clinicians and the public across the CSESA footprint around the over-arching aims of the Sustainability and Transformation Plan (STP) and the Place-Based Plan are well underway and include presentations at our patient representative groups along with specific events where attendees can hear about the work in progress and have their say on how we move forward.

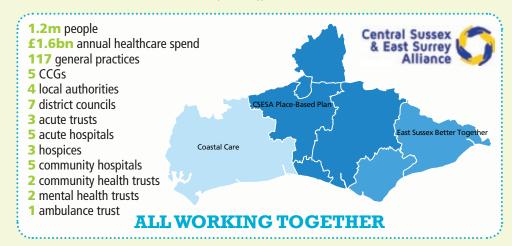
To read the complete plan, the STP, and a list of Frequently Asked Questions please visit our website:

www.horshamandmidsussexccg.nhs.uk/about-us/sustainability-and-transformation

Comments can also be directed to the CSESA Communications Lead, Caroline Sargent

(carolinesargent@nhs.net) T: 01293 600300 ext 3578, or via Healthwatch West Sussex on 0300 012 0122

www.healthwatchwestsussex.co.uk



The care hubs within the new MCP will focus on four clinical priority areas which will reduce demand for hospital based care:

- Prevention and education
- Better access to urgent care
- Long term conditions management in the community
- Coordinated care for frail and complex patients



Why join a PPG (Patient Participation Group)?

From April 2016, it has been a contractual requirement for all GP practices in England to form a patient participation group (PPG) and to make reasonable efforts for this to be representative of the practice population.

Generally made up of a group of volunteer patients, the practice manager and one or more of the GPs from the practice, they meet on a regular basis to discuss the services on offer, and how improvements can be made for the benefit of patients and the practice.

PPGs can play a number of roles, including:

- Advising the practice on the patient perspective
- Organising health promotion events
- Communicating with the wider patient body
- Running volunteer services and support groups to meet local needs
- Carrying out research into the views of those who use the practice (and their carers)
- Influencing the practice or the wider NHS to improve commissioning
- Fundraising to improve the services provided by the practice

The beauty of PPGs is that there is no set way in which they work – the aims and work of each group entirely depends on local needs – but they have the aim of making sure that their practice puts the patient, and improving health, at the heart of everything it does.

Across Crawley, Horsham and Mid Sussex there are 35 GP practices. Speak to your local surgery and ask for details of your PPG group to make a difference to your local community.

You can find more information on how to get involved on our website:

 www.horshamandmidsussexccg.nhs.uk/ get-involved

Improving your Stroke services

NHS organisations have been working together to review and improve stroke services for local people.

Clinicians have now recommended Brighton and Sussex University Hospitals NHS Trust (BSUH) centralise its emergency stroke services to a single location. This means that emergency stroke services would no longer be provided at the Princess Royal Hospital (PRH) in Haywards Heath, but at the Royal Sussex County Hospital (RSCH) in Brighton.

Evidence shows that centralising emergency stroke services in this way saves lives and improves patients' chances of making a full recovery. Patients will benefit from a higher level of expertise at any time of the day or night and have access to highly-specialised services which include the treatment of brain injury/trauma.

Before making a final decision on the recommendation, the CCGs are considering any further feedback from patients, carers and the public.

More detail about the improvements and why they have been recommended is set out in the review document, Improving Your Stroke Services, available on our website: see the Stroke Services section under the Get Involved tab, or by contacting our Engagement Team.

So, Vince (O'Mahoney, CCG Project Manager), why are you running the London Marathon again for the Multiple Sclerosis Society?

Vince: "Good question! Firstly, I'm running again for all those that are not as fortunate as me, to raise money, to help them. Secondly, to prove to myself that I can do this again after being diagnosed with Multiple Sclerosis 15 years ago.



"If you want to see just how very special this adventure is to me and how much

it means, watch this video **https://youtu.be/FqupgcpeRas** that I made with the MS Society."

Read more about Vince's inspiring story at his donation page: http://uk.virginmoneygiving.com/VINCENTOMAHONEY

Contact us







Email us at HSCCG.Contactus-horshamandmidsussexccg@nhs.net

Visit the Get Involved pages of our website at **horshamandmidsussexcca.nhs.uk**

Write to our postal address at:

Engagement Team, Horsham and Mid Sussex CCG, Lower Ground Floor, Crawley Hospital, West Green Drive, Crawley RH11 7DH Telephone us on 01293 600300 ext 4255

You can even join the conversation and share your thoughts and experiences of local care and services direct with us:



■ NHSHorshamandMidSussexCCG

Governing Body dates

Meetings are held in public, (1pm-4.30pm) **31 January 2017, 23 March 2017**. Meet and greet the members from 12.45pm. Location to be confirmed. To submit questions see contact info adjacent.

If you require this document to be translated into another language or would like an alternative format such as large print, Braille, audio or BSL, please contact the Communications & Engagement Team who will be happy to assist.