

Healthy London Partnership



HLP: 2015-2020

Highlights and Reflections

Working together to make London the healthiest global city

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About us

Healthy London Partnership (HLP) was launched in 2015 as a response to the NHS Five Year Forward View (FYFV) and Better Health for London, with the ambition to 'Make London the Healthiest Global City'. London leaders in health and care took the bold step to create a joint city-wide transformation unit. One that could bring together a wide range of innovative partnerships to make progress on London's specific population health challenges.

London's specific urban challenges and routes to solving them were surfaced in Better Health for London which identified 10 shared ambitions for the city. The challenges demanded engagement with Londoners, collective action, pooling resources to achieve more, facilitation across organisation borders, wider city collaborations and some shared capacity to deliver.

★ HLP brought together expertise in clinical leadership, city-wide transformation and service improvement, strategic planning, communications, social movements, analytics and programme management. Its operating model was designed to bring partners together to:

- Set strategic direction; focus on a specific issue; shine a light on the huge number of great things happening across the whole system and share lessons learnt; and provide a collective voice for London to create a stronger influence
- Deliver improvement and transformation activity that partners agreed was best delivered 'once for London' based on a principle of subsidiarity
- Ensure our ambition for London to be the healthiest global city was a thread through all activity

10 London aspirations as set out in the *Better Health for London, Next Steps*:



Give all London's children a healthy, happy start to life



Get London fitter with better food, more exercise and healthier living



Make work a healthy place to be in London



Help Londoners to kick unhealthy habits



Care for the most mentally ill in London so they live longer, healthier lives



Enable Londoners to do more to look after themselves



Ensure that every Londoner is able to see a GP when they need to and at a time that suits them



Create the best health and care services of any world city, throughout London and on every day



Fully engage and involve Londoners in the future health of their city



Put London at the centre of the global revolution in digital health

Working towards our collective ambition of making London the world's healthiest global city

HLP, working as part of, and on behalf of, health and care partners, was in a unique position to objectively understand all perspectives and draw together an integrated overview and provide system leadership in two main ways:

- Developing and delivering transformation programmes when partners articulated a need for something to be done 'once for London'. For example, the London Section 136 pathway was developed and agreed by all partners to meet the London-specific challenges service users faced. By developing a consistent pathway from when patients are picked up by the police to the completion of the Mental Health Act assessment we have seen fewer inpatient admissions following assessment, a reduction in the amount of time patients spend at the place of safety and a reduction in the number of patients needlessly attending A&E in the pilot implementation area
- Convening London-level conversations on system challenges and thereby enabling system leaders to articulate a collective response. Examples range from instigating and leading the development of the Health and Care Devolution Agreement for London and the recently refreshed London Vision, to the influential contribution of London partners to the Five Year Forward View and the NHS Long Term Plan in areas including mental health, prevention and health inequalities. Furthermore, it enabled a catalyst for mobilising the systems energy and resources, financial and otherwise, to address challenges such as Thrive LDN, empowering Londoners to improve our mental health, as individuals and communities



Partnership working

HLP, recognising that the system expertise was 'out there' not 'in here', prioritised engagement in all its activities, and specifically:

- Recognised that the outcomes Londoners expect from public health and care institutions are co-produced, with leadership from experts by experience in developing and delivering programmes to ensure activity was kept honest and focused on improving the lives of Londoners
- Benefited from working with London's extraordinary global expertise and clinical and professional leadership. The strength of these relationships was perhaps most clearly demonstrated by HLP's ability to rapidly convene leading clinicians and deploy London's mental health trauma response to the first London Bridge terrorist attack
- Facilitated connections across local systems through engagement and governance as well as with embedded staff in systems; this was a critical aspect of work producing a network of leaders and programme managers who shared learning and expertise and often using this insight to influence national developments

★ The original collaborative transformation programmes set up to support London's overarching goal to be the world's healthiest major global city, covered four key areas of action:

- A radical upgrade in prevention and public health
- Transforming care around Londoners' needs
- Transforming how care is delivered to every Londoner
- Making change happen.

The following chapters give highlights of how HLP has responded to the ambitions set out above.

A radical upgrade in prevention and public health

The future health of millions of children, the sustainability of the NHS, and the economic prosperity of Britain depends on a radical upgrade in prevention and public health. Londoners are experiencing significant levels of avoidable ill health and radical action is needed.

Preventing ill health and making Londoners healthier

Fire Safe and Well Project

There are close similarities between individuals who experience poor health and wellbeing and those who are most at risk from fire.

The Fire Safe and Well project, delivered by HLP and the London Fire Brigade (LFB), supported more than 1,250 vulnerable and hard to reach Londoners to improve their health and reduce their fire risk through proactive, preventative partnership working.

Addressing these risk areas early on helps to reduce the number of individuals needing to access health, care and fire services in the long term, and contributes to the ambition to reduce health inequalities that exist in London.



"To be honest, I originally thought this whole idea of referring to other services was great but a bit 'pie in the sky'. But all three of the services you mentioned have helped me enormously. It's a fantastic service all round."

Fire Safe and Well beneficiary

★ **Over 1,250 Fire Safe and Well visits** were completed across London resulting in 800 referrals to partner services offering **interventions for falls prevention, fuel poverty, smoking cessation and social isolation**

★ 90% of beneficiaries felt that their **safety had increased** as a result of Fire Safe and Well and onward input from partner organisations

★ The project won a National Energy Action 'Heat Heroes' award for going above and beyond the call of duty to tackle fuel poverty in the community

Reflections:

The project demonstrated the unique opportunity that the fire service has in identifying vulnerable, hard to reach people, and the value of applying person-centred approaches to assist individuals in accessing support that they may otherwise have not been aware of. A potential barrier to the scaling of the approach is the complexity and changeability of the health landscape across London. LFB is a pan-London organisation which requires consistency in pathways and procedures when crossing borough boundaries. Steps need to be taken to ensure that any future model is replicable and sustainable without the need for undue local variation.

Read the [evaluation of the fire safe and well project](#)

Fast Track Cities Initiative

London has a high proportion of the national HIV epidemic, with 43% of new diagnoses in England in 2017, being made in London. In 2017, around 36,500 people were living with diagnosed HIV in London, 35% higher than in 2008.

London is also the global leader in its response to HIV and could be the first city in the world to 'get to zero'. The Fast Track Cities Initiative (FTCI) brings the large and diverse HIV sector together for the first time to 'fast track' London's HIV response to achieve zero new HIV infections, zero preventable deaths and zero stigma, while supporting 100% of people living with HIV to live well.

"Having grown up with the fear of HIV and lived with the virus for nearly 30 years, it is thrilling to be so close to achieving zero HIV-related stigma, transmissions and deaths in London. The commitment from all the partners in the Fast-Track Cities initiative is crucial in getting us to zero and the work we are all doing will help us discover and demonstrate exactly how to get there for London, as well as share this with the rest of the UK and cities across the world."

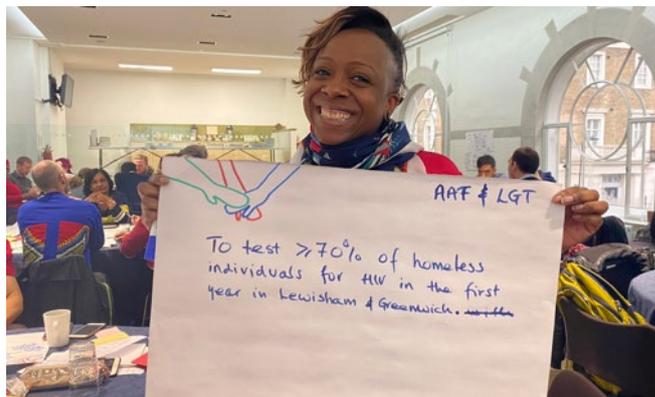
Garry Brough, from Camden, community representative for Fast-Track Cities London

Read the [public facing version of the FTCL Roadmap here](#)

Watch more about the Fast Track Cities Initiative



- ★ Through FTCL, London was the **first global city to exceed UNAID 95-95-95 ambitions** for 2030: 95% of people living with HIV knowing their HIV status, 95% of those people on treatment; and 95% of those on treatment with suppressed viral loads
- ★ London's Fast Track Cities Initiative is the first time **all key stakeholders in London's HIV sector have come together** to work more closely in achieving the last, hardest yards of 'getting to zero'
- ★ Funding has enabled new working partnerships between 22 voluntary organisations and nine NHS Trusts. These partnerships will be working to **reach the underserved and higher risk communities across London**



Reflections:

The HIV sector in London is extremely complex and has a fragmented commissioning model since changes to commissioning responsibilities in 2012. Bringing all partners together under the FTCL ambition has created a forum and mechanism for systems working on HIV which have never existed. The need for a neutral convener, transformation expertise and long-standing good working relationships with the wider London health system are important to maximise impact.

The partnership has enabled systems leadership, advocacy and influence on things that are important in London's HIV response.

Great Weight Debate (Child Obesity)

In 2016 London had more overweight and obese children than New York, Sydney, Paris or Madrid and a higher rate of child obesity than the rest of England.

HLP fully engaged Londoners to inform what action they wanted to prioritise and support in tackling child obesity. It was also a prevention intervention, raising the general public's awareness of child obesity in London.



- ★ The outcome has **impacted policy decisions** such as; advertising restrictions, a move towards water-only schools as well as the establishment of London's Child Obesity Taskforce
- ★ A wide variety of methods were used to engage directly with Londoners such as roadshows and extensive use of social media, with promotional campaigns launched on Facebook and Twitter, alongside local and regional TV, radio and press coverage

"The Great Weight Debate provided a real opportunity to speak with Londoners and experts and hear their views and recommendations for reducing levels of childhood obesity."

Yvonne Doyle, Public Health England

Read the [Great Weight Debate final report](#)

Highlights of work to prevent ill health and make Londoners healthier:

- Following on from the Great Weight Debate, HLP worked with fast food shops, businesses, charities and young people across London to pilot ideas for making high streets healthier for children and young people through the [Healthy High Streets Challenge](#). The findings informed the Mayor of London's policy to restrict the advertising of food and drink that is high in fat, sugar and salt across Transport for London's advertising estate
- In September 2016 and 2017 HLP facilitated [London's Healthy Living Week](#) which inspired more than 60 NHS organisations and over 120,000 London employees to improve their health and wellbeing. The campaign aimed to make workplaces in London healthy, engaged places to work, where staff can join with their colleagues to make being healthy a normal part of their day. Over 200 staff at 16 NHS organisations have now been trained as Healthy Living Ambassadors
- In 2015 HLP targeted London males aged 35+ who are inactive, overweight or obese to increase physical activity and healthy weight management. [FanActiv](#) transformed rivalries between football fans into healthy competition to engage men in physical interventions, community challenges, and health messaging.
- HLP is exploring the role of commissioning budgets, grants and repayable capital in developing [sustainable revenue models](#) for prevention services as well as sustaining and scaling services. Through this we are supporting three local areas to support people with low level mental health challenges and musculoskeletal conditions so they can return to or stay in work.

Designing care around Londoners' needs

Care needs to meet the needs of individual patients and communities, and the population is too diverse for a 'one size fits all' care model to apply everywhere. What works well in rural Cumbria or Devon won't necessarily work in inner cities and models of care need to be designed to meet the diverse needs of different patients and populations.



Giving London's children the best start in life

Improving asthma care for Londoners children and young people

Asthma is the most common long-term medical condition affecting children and young people. 1 in 10 children and young people are affected by the condition, meaning 240,000 have asthma in London, which in turn equates to 4,000 hospital admissions a year.

HLP developed a **vision**, as well as a set of whole-system **standards** alongside a **toolkit** to help organisations implement them. Self-assessment was undertaken in 2016 and a whole-system peer review in NCL in 2018 (to be rolled out across London in 2020). We have raised the profile of children and young people (CYP) asthma across the capital and there are now CYP asthma networks in development throughout all of London.

Reflections:

Prior to the NHS Long Term Plan, delivering a strategic vision for CYP was a real challenge. However, highly effective work was undertaken system-wide to identify issues and deliver solutions that could be used pan-London. Working with strong clinical leaders, ensuring communication was wide ranging and repeated at every opportunity has been instrumental to the success of the programme.

"HLP's asthma programme, standards and asthma toolkit have been instrumental in promoting collaborative work with our GPs & commissioners."

Rahul Chodhari, Paediatrician, Clinical Director, Royal Free, Barnet, Chase Farm

[Read more and access CYP asthma resources](#)

- ★ An effective awareness campaign, **#AskAboutAsthma**, focussing on 3 simple measures to improve asthma care, has run since 2017. In 2019 there has been **3000+ tweets, 750 contributors and 17.5 million impressions for #AskAboutAsthma campaign**
- ★ Islington (20%), Harrow (16%) and Tower Hamlets (22%) have seen **reductions in asthma admissions** over approximately 3 years
- ★ If a child has a personalised asthma action plan, they are four times less likely to have an asthma attack that requires emergency hospital treatment. London has seen a **significant increase in children and young people asthma action plans** e.g. 74% (extra 3,900) increase in NWL from 2017/18 – 2018/19

Asthma Rap Challenge (2018/19 campaign #AskAboutAsthma campaign)



Highlights of work to improve the lives of London's children and young people:

Our vision is of an integrated system for the health and care that promotes health and can be easily navigated by children and young people, their families and the health professionals delivering their care to achieve the best outcomes for these patients. Examples of work to achieve this include:

- [Acute care standards](#) for children and young people. To identify areas of good practice and suggested areas for improvement, a [peer review](#) was undertaken of London's 26 acute hospitals that provide acute care services for children and young people between July 2016 and March 2017
- [Guidance](#), including information and standards, for providing out-of-hospital care for London's CYP for commissioners and providers
- A set of resources designed to support [Primary Care Networks](#) looking to improve their offering to children and young people
- An online e-learning portal of resources for London's health professionals to support best practice [paediatric high-dependency care](#) and achieve the quality of care set out in the London's Paediatric Critical Care: Level 1 and 2 Standards

- In collaboration with BEAT, [CYP eating disorder guidelines for primary care professionals](#) and [educational professionals](#) to share advice about spotting the signs of eating disorders and when to refer CYP to community eating disorder services (CEDS) for specialist support
- Resources to help providers complete and submit accurate data to the [Mental Health Services Dataset \(MHSDS\)](#), including [videos about how to flow data to MHSDS](#) and [Rapid Review of Access audit](#)

Looking Ahead at CYP in London:



Child Death Review Programme (CDR)

Approximately 5,000 children in England die each year, a third from avoidable causes. Significant reforms to the statutory child death review (CDR) processes came into effect in September 2019, aiming to reduce overall child mortality.

The [HLP Child Death Review Programme](#) was established in 2016 to support London CDR 'systems' understand and transition to meet their new responsibilities, foster greater standardisation of practice and ensure high quality data to maximise the impact in the prevention of child deaths, and learn lessons to improve services for children and their families.

Read the [Child Death Review Programme resource](#)

- ★ London has rolled out e-CDOP, a child death review case management system which supports standardised data collection and processes to provide learning into what happened and why and contribute to **preventing future child deaths**
- ★ HLP facilitated a [memorandum of understanding](#) from the Coroner's officer pre-authorising certain processes after the death of a child; guidance for practitioners on statutory processes; and resources for bereavement support
- ★ The programme was shortlisted as a finalist for the 'Using Insight for Improvement category' of the [Patient Experience Network \(PEN\) Awards 2020](#) (winner announced 18th March)



Children and Young People’s Mental Health in Schools

1 in 10 children and young people aged between 5 and 15 years old have a diagnosable mental health disorder – that’s three in every school class, and more than 100,000 across London. Half of all mental health problems are established by the age of 14 years, which rises to 75% by the age of 24.

HLP has developed toolkits, a range of guidelines and resources, provided system benchmarking opportunities via self-assessment and convened system partners to enable shared learning.

Read more about [Children and young people’s mental health](#)

Watch more about Mental Health in schools’ trailblazers in London



“The CYP mental health resources have not only underpinned improvements in London services, but are a ‘must read’ for services and commissioners nationally. They are accessible, based on best evidence and very practical.”

Kathryn Pugh MBE, Deputy Head of Mental Health, Children and Young People’s Mental Health Programme Lead, NHS England and NHS Improvement

★ In London, HLP are supporting 7 trailblazer areas to:

- Establish new Mental Health Support Teams (MHSTs) to develop models of **early intervention** and **support staff in school settings**
- Trial a four-week waiting time for access to specialist NHS children and young people’s mental health services

★ The HLP **Mental Health in Schools Toolkit**, developed in partnership with the GLA, contains information and guidance on how to **promote emotional wellbeing and mental health within schools** for staff, health care professionals and commissioners. Since its launch in December 2018 the toolkit has been viewed 19,000+ times

★ HLP completed a Mental Health in Schools baseline to give an overview of provision for children in schools to support better understanding of current position across London. In collaboration with the Young Minds Amplified programme the programme published the **10 ways schools should support CYP in the future**



Reflections:

The key elements to achieve the best outcomes for children are having robust clinical and local authority advisors and having wide ranging communications to reach frontline staff.

Several national transformation priorities have been identified and although progress has been made across London, there is still some way to go and concerted action across the system is needed to deliver them.

Perinatal Mental Health

A wide range of mental health conditions can occur during the perinatal period, most commonly depression and anxiety. Research shows one in five women have a mental health problem during this time and that half of women with depression do not access treatment and support.

The programme focused on developing, recruiting, mobilising and training Community Perinatal Mental Health Teams (PMH).

The team established five PMH Networks across London bringing together over 350 key professionals across all sectors including people with lived experience. The outputs have included agreeing pathways; overseeing service expansion; sharing good practice; and creating a shared vision for women and families in their local areas.

- ★ By March 2019 all 32 boroughs had trust wide fully operational multidisciplinary Community PMH Teams, resulting in a **92% increase in the number of women accessing specialist services** from 2014 to 2019
- ★ HLP developed, commissioned, managed and monitored evidence-based **training plans for the full range of multidisciplinary practitioners** who work with women and their families during the perinatal period
- ★ More than **5,000 staff across London have received Perinatal Specific Training** including almost 3000 multi-professional and 3rd sector staff and more than 2000 GPs and Primary care practitioners via GP Spotlight Project
- ★ In 2019 the London Perinatal Networks were shortlisted for an HSJ Award under the Acute or Specialist Service redesign initiative category, recognising their outstanding contribution to healthcare

Read more about the [perinatal MH work](#)

"It is important to recognise the difference that the London Perinatal Mental Health Network is making to the lives of many children. With one in five mothers experiencing mental health difficulties during or following pregnancy, it is right that we embrace solutions to ensure that women receive care that is so vital for them and their families."

Sir David Sloman, regional director for the NHS in London

Building better perinatal mental health services



Reflections:

The scale of the change required and mobilisation at pace with limited workforce availability was a challenge. The number of organisations to link with meant establishing relations, networking and collaborative working were key to being successful. We learnt the value of engagement, the right membership of the networks and being connected required time, consistent coordination and persistence.

"It empowered me to feel less like a victim and more like a survivor, and as the process continued, we all turned from survivors into campaigners."

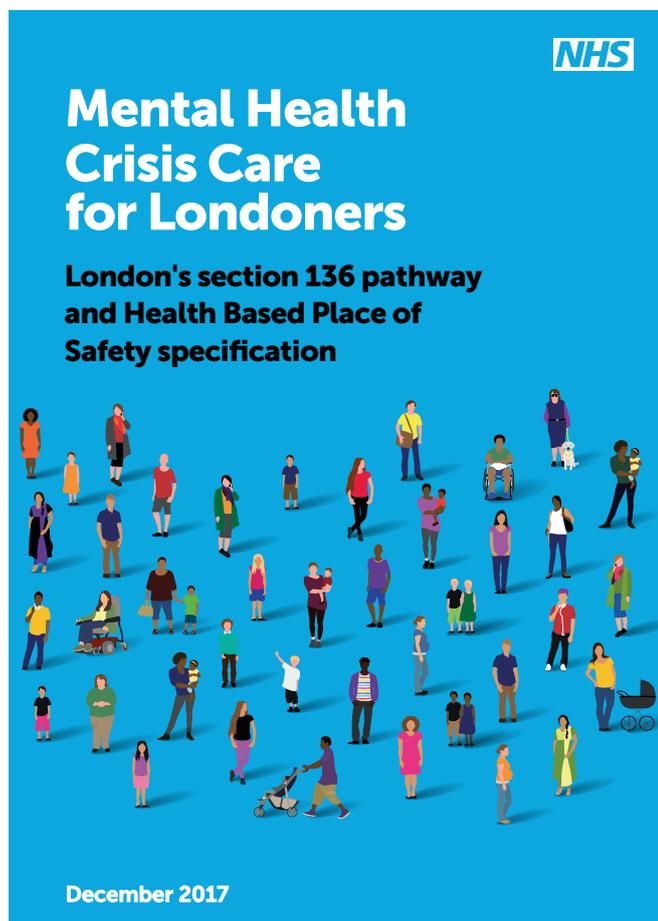
Cocoon client following her co-production experience

Section 136 (of the mental health act) pathway and health-based place of safety specification

More than 75% of s136 detentions in London occurred out of hours yet most sites did not have dedicated 24/7 staffing and almost two thirds of those detained under s136 did not feel safe once they arrive at a 'place of safety'.

London's crisis care programme in partnership with NHS Trusts, Police forces, local authorities, London Ambulance Service and service users developed a pan-London model of care for those detained under s136 of the Mental Health Act, this included a s136 pathway and Health-Based Place of Safety specification (HBPoS). Combined, they outline a consistent pathway from initial pick up by the police to the completion of the Mental Health Act assessment.

Read the [London section 136 pathway and HBPoS specification](#)



★ South London and Maudsley Mental Health Trust (SLaM) piloted the model of care, where four single occupancy place of safety sites were consolidated into one site with 24/7 dedicated staffing. Some impacts included:

- 18% fewer Inpatient admissions following a MH Act assessment at the place of safety
- 29% reduction in the amount of time patients spend at the HBPoS
- 5% reduction in patients attending A&E prior to the place of safety

Reflections:

Clinical leadership was critical to drive the case for change and mobilise the clinical voice from all parts of the system. Some challenges around the unusual role that HLP had within the health and social care system across London as it has influence and responsibilities, but no direct authority.

Notwithstanding the concerns about the programme's mandate and constraints, the evaluation was very positive specifically, around buy-in and approach to engagement and consultation.

Level of engagement during the project



"I think the new place is more calm and settling than the last 136 suites and dedicated staff spent time talking to me and actually listening to what I had to say."

Service user, 2017

Further highlights of how HLP has transformed care for Londoners experiencing mental health

- HLP developed the **London Mental Health Dashboard** as a strategic planning tool to support the development of integrated care systems by making a wide range of London's mental health, London Ambulance Service, police and social care data publicly accessible in one place, in an easy to use format. The dashboard has over 1,100 users who can access benchmarked data by place and trust, including on the prevalence and impact of mental illness and service demand, quality and outcomes
- HLPs **Early Intervention in Psychosis** team have developed a range of materials designed to support GPs if they suspect someone may be experiencing a first episode of psychosis. A peer support pack was co-produced with the EIP Clinical Reference Group (CRG) Lived Experience representative and funded through Health Education England as part of developing new roles initiative
- HLP developed the **Stolen Years online resource**, which includes tools, recommendations and information to support clinicians delivering improvements in the physical health of over 60,000 Londoners with severe mental illness
- In partnership with Mental Health Clinical Network, GP clinical leads and service users HLP is developing a set of guiding principles for commissioners and GPs for **improving mental healthcare in primary care**
- HLP has developed a **Mental Health in Integrated Care Systems (ICS) maturity matrix** 'strategic tool' sets out for London a clear vision and plan for how ICS development should incorporate MH. The maturity matrix supports systems with developing an ICS implementation plan including tools to monitor and track their progress over the next 1-5 years. The maturity matrix is expected to shape and inform the national work on Mental Health in Integrated Care Systems
- Almost 1000 mental health and acute trust staff, paramedics, police and local authority staff received Mental Health Act training through multiagency sessions. A **mental health crisis care training toolkit** has also been developed to enable staff to lead these sessions in-house
- Publication of **guidance** to develop accessible, consistent and effective care for **children and young people experiencing a mental health crisis**. The guidance has been used to benchmark services and pathways via **self-assessment** and **peer review**. The nine peer reviews provided positive feedback and recommendations for development

★ The **Young London Inspired** project, part of Thrive LDN and Team London, have offered grants totalling £500,000 to community groups and charities to develop their skills and confidence, build self-esteem and promote good mental health and emotional wellbeing in young people. **63% of those engaged reporting improvements in their wellbeing.**

Example of a Young London Inspired grant recipient.

Fitzrovia Youth in Action Peer Support

This project will upscale their existing peer mentoring programme. Over a 12-week period trained peer mentors will co facilitate group activities and provide 1-2-1 support to mentees drawing upon their lived experience. Mentoring sessions will be 'clinically supervised' with an aim to provide non-stigmatised early interventions to support wellbeing and emotional resilience of the mentored young people.

"We are pleased to be backing the 'Young London Inspired' programme. This programme reflects the Mayor of London's commitment to Thrive LDN's aspiration to encourage young people to lead initiatives and engage in mental health. The idea that there are models of care that are moving care into the community is excellent. We see the 'Young London Inspired' programme as part of a great vehicle to engage our community and our voluntary sector."

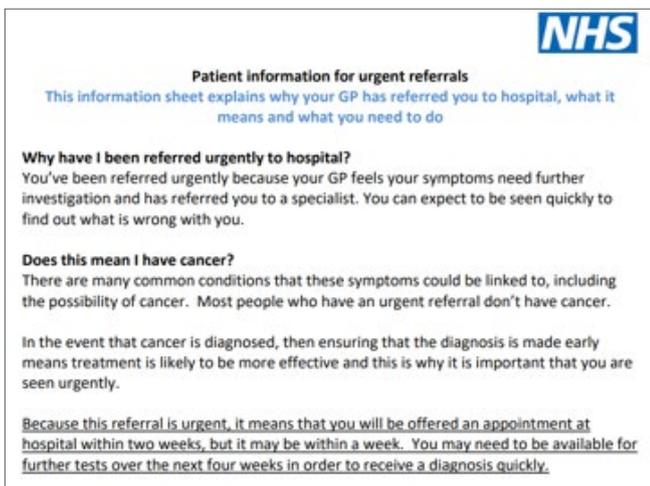
Dr Tom Coffey OBE, Mayoral Health Adviser, Mayor of London.

Pan London Suspected Cancer Referrals Project

Cancer remains the leading cause of premature death across the capital. As many as 1000 lives could be saved every year if London's cancer survival rates matched the best in Europe. Inconsistent referral approaches existed across London using different pathways and different referral forms including a high number of faxed referrals leading to unsafe practice. Furthermore, communication given to patients at the point of referral was often poor.

Pan London primary care suspected cancer referral criteria was rolled out, including updated referral forms which were fully integrated into all main GP IT systems. This resulted in better quality and more appropriate referrals which prevents patients not being referred into secondary care due to outdated criteria.

Snippet of Patient Information Leaflet:



NHS

Patient information for urgent referrals
This information sheet explains why your GP has referred you to hospital, what it means and what you need to do

Why have I been referred urgently to hospital?
You've been referred urgently because your GP feels your symptoms need further investigation and has referred you to a specialist. You can expect to be seen quickly to find out what is wrong with you.

Does this mean I have cancer?
There are many common conditions that these symptoms could be linked to, including the possibility of cancer. Most people who have an urgent referral don't have cancer.

In the event that cancer is diagnosed, then ensuring that the diagnosis is made early means treatment is likely to be more effective and this is why it is important that you are seen urgently.

Because this referral is urgent, it means that you will be offered an appointment at hospital within two weeks, but it may be within a week. You may need to be available for further tests over the next four weeks in order to receive a diagnosis quickly.

"The forms serve not only as a referral... but as a reminder to achieving an optimum patient's pathway, ensuring important areas such as safety netting and patient information and education on the two-week process are addressed by the clinician."

GP Cancer Lead, Bromley CCG

- ★ All 1500 GP practices in London refer all suspected cancer patients on a pan London Suspected Cancer Referral Form
- ★ Patient Information Leaflets were developed alongside the referral forms to support patients sent on a suspected cancer referral form pathway. To help to reduce inequality for non – English speaking patients they have been translated in 10 of the most spoken languages in London
- ★ The project was **nominated for an HSJ award** for the project in the Primary Care Innovation for Optimising Clinical Practice and Systems Category
- ★ Following the success of the publication of Nice NG12 Suspected Cancer guidelines in June 2015, the team developed **13 tumour specific referral forms integrated with GP software** for use by Primary Care clinicians. This was the first project of its kind to get the whole of London's population on the same guidelines and well as intelligent integrated software to **streamline referrals into secondary care**

Reflections:

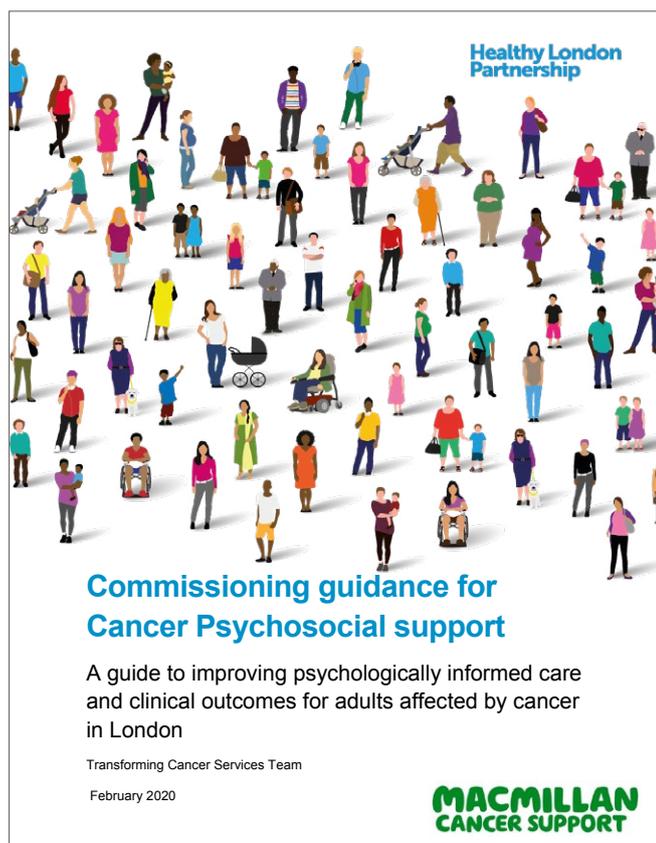
The challenges of bringing together such variation in processes across London was overcome by working collaboratively and engaging with a wide range of stakeholders across the health care and system. Specifically, being guided by strong clinical leads, patients and people with lived experience.

Read more about the [Pan London Suspected Cancer Referral Forms](#)

Psychosocial support for people affected by cancer

For some people, the personal impact of cancer and distress, dysfunction and poor health self-management will have a significant impact on the person's quality of life and on the lives of their families and carers. Additionally, psychosocial variables if not addressed, can impact on a person accessing tests, investigations, treatment adherence, engaging with rehabilitation and ultimately impact upon clinical outcomes.

HLP in partnership with Macmillan Cancer Support, produced a suite of documents including commissioning guidance, an integrated pathway, mapping of services and service specification. These, together with support from the team, have enabled commissioners and system leaders to improve the commissioning of psychosocial support services for people affected by cancer in London.



Read more about [Psychosocial Support](#)

"The guidance document offers the London cancer system clear guidelines on how a truly integrated approach can make a difference, including clarity on the referral criteria for both IAPT services and Psycho-oncology teams as well as encouraging service providers to work more collaboratively, sharing expertise and ultimately improving clinical outcomes, patient experience and quality of life for those affected by cancer."

Jonathan Bates, SWL STP SRO for cancer

- ★ Refreshed guidance documentation published in February 2020, includes an integrated pathway tailored for local use, a sample business case designed for system level change, service specification for psycho-oncology services and detailed mapping of psycho-oncology services and Cancer Information & Support Centres across London
- ★ The pathway model outlined in the commissioning guidance was co-designed with the perspective of commissioners, service providers and service users
- ★ The project won the Macmillan Professionals Awards for Excellence in Integration in 2019

Reflections:

The uncoordinated, disjointed and poorly understood services across London made it challenging to address the inequity in cancer psychosocial support. Furthermore, the integrated pathway model spans acute, primary care, community services and third sector which made it highly complex.

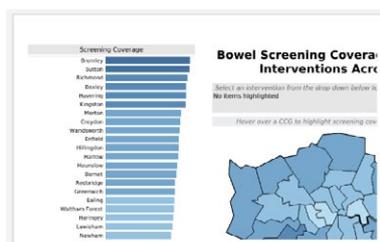
Stakeholder engagement and partnership work were essential to success. It was vital to engage service users, service providers and commissioners from the start and throughout the process to ensure maximise impact 'on the ground'.

"Thank you for the amazingly helpful document. I appreciate you didn't set off to create it for my benefit, but it has been very useful to add to the armoury required to keep pushing for a bit more investment in psychological resources dedicated to cancer services."

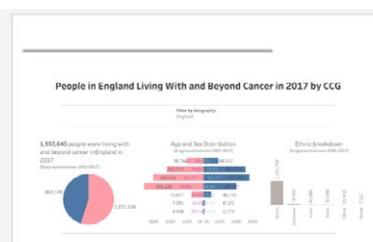
Consultant Clinical Psychologist, Manchester

Further examples of how HLP has helped deliver world class cancer care for Londoners:

- Developed a [cancer inequalities toolkit](#) to reduce inequalities in cancer care and improve outcomes for the most marginalised groups in London, such as people without homes, those in contact with the criminal justice system, sex workers, people with addiction or severe and enduring mental illness, and people in the LGBT+ community
- Collaborative working, supported by granular analytics has meant from 2016 to 2019, London performance in the 62-day [cancer waiting times](#) standard has moved from being the worst nationally to the best. The improvement work benefits 380,000 patients a year who are referred by GPs across London on suspicion of cancer
- Working with the National Cancer Registration and Analysis Service (NCRAS), HLP have analysed the extent to which Londoners diagnosed with cancer are affected by [more than one primary cancer](#). This is the first work done of its kind in London and has significant implications for care planning for those living with cancer and beyond
- Supported all London trusts to complete [demand and capacity modelling for imaging and endoscopy services](#) which supported delivery of national cancer targets and helped with local strategic planning
- In partnership with Cancer Research UK, HLP delivered '[Talk Cancer](#)' workshops for practice staff to increase awareness of the fears and fatalistic behaviours that may prevent early presentation and improve participants' confidence in cancer-related communication
- A [Primary Care Cancer Educational Toolkit](#) which provides a repository of online courses and resources for primary and community healthcare professionals was developed to highlight cancer training and education in London
- A handbook focusing on [five High Impact Change areas](#) was developed for radiology and endoscopy teams, delivering significant impacts on patient flow, capacity utilisation and the patient experience
- Supported the roll out of [Faecal Immunochemical Testing \(FIT\)](#) across London's primary care for low risk symptomatic patients including a Pan-London Business case and modelling helping to reduce demand for endoscopy services
- Supported roll out of [urgent direct access diagnostics](#) to improve management of cancer risk in primary care and avoidance of potentially unnecessary 2 week wait referrals
- In 2015/16, HLP worked with PHAST (Public Health Action Team) to do in-depth analysis of current positions and trends in [one-year cancer survival](#) for each area of London. Bespoke reports were produced and shared with local systems, along with red/amber/green (RAG) rated analysis of 33 key indicators relating to cancer survival. This supports decisions on which specific interventions are needed to improve cancer survival rates in local populations
- Using data analytics, the HLP team has [developed many interactive dashboards](#) to support local and regional systems to transform cancer services for Londoners. Examples include:
 - Index of cancer survival
 - Cancer prevalence dashboards
 - Breast, Cervical and Bowel cancer screening dashboards
 - National cancer experience survey dashboard
 - London urgent suspected referral analysis



Bowel screening dashboard
245 views



2017 England Prevalence Dashboard
1050 views

Transforming how care is delivered to every Londoner

To deliver transformed care for our population we will need to radically transform how it is provided. The FYFV signalled significant changes in the delivery system with a 'new deal' for general practice. It outlined investment and a commitment to developing wider primary care to support improved outcome; a vision for urgent and emergency care to be delivered in effective networks that ensure patients receive the right care, first time and consistently across the seven days of the week.



Transforming London's primary care

Extended Access for General Practice Services

General practice has delivered accessible, high quality, value-for-money care for over 60 years. Patients, however, are changing, both in the complexity of their conditions and in their expectations.

HLP has been leading the way to ensure every Londoner has easier and more convenient access to GP services, including appointments at evening and weekends. This involved the establishment of over 100 hubs across London, which provide additional GP, and in some cases other healthcare professional appointments, providing more flexibility for patients.



"The success of EPCS across London has been a real catalyst for successful working between practices and I believe has helped to underpin successful at-scale working."

Dr Siân Howell, GP in Southwark

- ★ London were the first region nationally to offer 8am – 8pm general practice appointments to its population which created over 90,000 extra appointments per month. It is estimated that **1 in 5 of these appointments led to an avoided A&E attendance reducing overall A&E activity**
- ★ All Londoners are now able to receive **direct appointments to GP Extended Access Hubs** through NHS 111/IUC services
- ★ The team negotiated a deal with national NHS England for funding to enable London to deliver accelerated extended access services using a different, unique model, better suited to London's population and infrastructure

Reflections:

To ensure the success of implementing large-scale change across London over a short time required establishing strong national and regional relationships, developing London forums, negotiating communications support and widespread on-the-ground research to gain insight into new solutions. Having a London-wide Access Delivery Group and sharing best practice, ensured a consistent offer to patients across multiple providers. We ensured direct ongoing support for local communication campaigns to highlight the increased offer of GP appointments for patients due to the complex provider landscape.

Read the [Top 10 considerations for maximizing the use of access in London](#)

Supporting at-scale working

There was a need to create a shared vision and guidance across London regarding strengthening general practice and improving collaborative working.

The team developed, engaged on and launched the 'Next Steps to the Strategic Commissioning Framework – a vision for strengthening general practice'. It contained a clear, achievable vision for how general practice organisations can work collaboratively at scale, commitments to provide the resources to support this change at Primary Care Networks (PCNs), and Larger-scale General Practice Organisations (LGPOs) levels.

- ★ 201 PCNs formed which includes 99% of practices in London with 100% patient coverage
- ★ London PCN Development Support Group helped resilience of PCNs by identifying what would be beneficial, sharing good practice, problem-solving challenges and implementing local and regional support



Read the [commissioning framework](#)

! Joining up to transform the lives of the homeless

My right to access healthcare cards

People experiencing homelessness often struggle to access primary health care in GP practices due to strict access requirements such as proof of address.

HLP sought to remove this barrier to improve access to primary care and improved health outcomes for some of our most vulnerable and isolated citizens. We have developed commissioning guidance, trained over 1,500 GP practice staff with an online training package and produced 'My right to access healthcare' cards.

● I do not need a fixed address.

● I do not need identification.

● My immigration status does not matter.

As stated in the Primary Medical Care Policy and Guidance.

If I have any issues registering or accessing a GP practice, my local **healthwatch** can direct me to advice

03000 68 3000

www.healthwatch.co.uk

- ★ 'My right to access healthcare' cards produced in partnership with Healthwatch London and Groundswell, with simple and clear messaging **to enable registration in general practice**
- ★ **75,000 cards have been distributed to services across London** since December 2016, including shelters, day centres, hostels, food banks and drop-in centres. Further cards have been produced to roll out in London and nationally
- ★ Highlighted by Equality and Human Rights Commission as an example of good practice
- ★ Winner, 2019 Homeless Link Excellence award 'communicating for change' category

Read more about ['My right to access healthcare' cards](#)

NHS 111 Starlines

In response to pressure across London's Urgent and Emergency Care (UEC) services, rising demand to the London Ambulance Service from care homes and difficulties for care home staff contacting a resident's GP when needed, the NHS 111 Starlines launched as a pilot in January 2017.

The NHS 111 Starlines service has provided healthcare professionals rapid access to senior clinical support 24/7 via NHS 111. It enables callers to use their phone keypad to connect quickly with a GP, Advanced Nurse Practitioner, Paramedic or Pharmacist within the NHS 111 call centre, with each team having their own dedicated line, London Ambulance Service (*5) Care Homes (*6) and Rapid Response (*7). The service demonstrated a significant reduction in avoidable ambulance conveyances and ED attendances.



Reflections:

The service was designed, tested and launched rapidly in response to a problem that was severely impacting emergency services and therefore minimal time for robust governance or engagement with users to ensure maximum effectiveness. This has since been addressed helped by an evaluation in 2019 and since we have seen a greater impact on reducing ambulance calls and emergency department attendances.

Read the [Starlines evaluation report](#)

- ★ Since its introduction there have been over 103,000 calls to the Starlines service with **61% of calls resolved by a GP**, compared to 14.3% of calls to the general NHS 111 service. The new pathway successfully **reduced pressures on the wider UEC system** and is now a 'standard' part of the London's IUC service
- ★ 77% of ambulance crews, 99% of Care homes, and 71% of rapid response and community teams said they would use the Starlines service again

"The Starlines calls has actually enabled the care home staff to seek support and help. Anything that gives you that support will make you feel more confident. You can't work on your own in any kind of care setting, but knowing that the Starline is readily available to give us the boost to promote the good care for the residents, with the right information and the right decision at the given time... there's nothing more that you can ask for!"

Marie Bannister, Care Home Manager, Sutton Court Care Home

111 Starline video conferencing case example:

Case Details	Outcome	Benefit
<p>Case 1 84 year old female Diarrhoea & Vomiting</p> <ul style="list-style-type: none"> The patient was tolerating fluids and passing urine regularly. She did not complain of any dizziness on standing or any abdominal pain. She was alert and orientated. Vital signs were done and were within normal limits. 	<ul style="list-style-type: none"> GP observed the colour of the urine sample over the video link. Dioralyte and buscopan was issued over the phone. 	<ul style="list-style-type: none"> Home visit / ambulance dispatch avoided. Routinely if the patient was vomiting then LAS would have been called to convey the patient to A&E due to risk of dehydration.
<p>Case 2 82 year old female Inflamed Rash</p> <ul style="list-style-type: none"> Cavilon (cream for use on intact or irritated skin) had not helped. The vital signs were within normal limits Patient had no recorded fever She did not complain of any disorientation or confusion 	<ul style="list-style-type: none"> Rash was observed on the video link –was moderately inflamed but no active bleeding observed. The nurses were reassured Timodine was prescribed. 	<ul style="list-style-type: none"> Home visit / ambulance dispatch avoided. Nurses were advised to monitor for a fever or worsening of the skin GP follow up in 1-2 days advised.

Enhanced Health in Care Homes (EHCH)

The EHCH programme introduced in 2017 supports embedding the EHCH framework to improve NHS support to care homes across London. The focus is to support local delivery enabling partnership working across health and care to proactively share good practice, implement new models of care and embrace digital technology as a core enabler to system-wide improvement. Activities included:

- Establishing a **London EHCH network** focusing on enabling stakeholders across London to share best practice to help locally embed the EHCH framework
- Supporting care homes in effectively managing seasonal operational demand, having created several resources in partnership with NHSE&I, PHE and local health and care colleagues, such as the **Standard Operating Procedure** for managing a flu outbreak in a care home
- Launching the roll out of **NHSmail** with a partnership Social Care Digital Discovery project. (see further details on the digital section)
- HLP commissioned London Purchased Health to develop an online Capacity Management System (CMS), **CarePulse** for all system partners to improve patient flow from acute settings to care homes and reduce Delayed Transfers of Care (DToC). Having visibility of care home bed capacity has been instrumental in establishing effective discharge pathways
- Rolling out the **Havering Care Home Trusted Assessor Model** to BHR which enabled local care home managers to be involved in designing a single assessment form, job descriptions and interview questions. This supported the safe and efficient discharge from acute beds and reducing length of stay in acute beds
- Supported London to roll out the **red bag scheme** which helps care home residents admitted to hospital be discharged quicker. They contain key paperwork, medication. Personal items like glasses, slippers and dentures, are handed to ambulance crews by carers and travel with patients to hospital where they are then handed to the doctor

Read more about [enhanced health in care homes](#)

- ★ Since the launch of CarePulse in January 2018, 36% of care homes are now regularly updating their bed capacity details, having a **significant impact on delayed transfers of care**
- ★ Improved communication using NHSmail are estimated at 260 hours per care home per year – based on 144 care homes actively using NHSmail now this equates to **37,440 hours of time to care for Londoners in Care Homes every year**
- ★ In partnership with North East London NHS Foundation Trust, **Significant 7 workforce training** has been delivered to over 40 care homes to increase staff confidence, identify early deterioration and **prevent unnecessary 999 calls, A&E attendances and emergency admissions**

Reflections:

The service was designed, tested and launched rapidly in response to a problem that was severely impacting emergency services and therefore minimal time for robust governance or engagement with users to ensure maximum effectiveness. This has since been addressed helped by an evaluation in 2019 and since we have seen a greater impact on reducing ambulance calls and ED attendances.



Further examples of how HLP has transformed London's UEC system:

- Supported **Multi Agency Discharge Events (MADE)** across London, bringing together local health and care system partners to deliver effective discharge pathways by improving patient flow and addressing blockages. Embedding long length of stay reviews in hospitals has had significant impacts, for example, sustained 30% reduction on the wards HLP supported
- Supported the training and roll out of **End PJ Paralysis**, a global social media campaign aimed at raising awareness of the risks to patient safety caused by long stays in hospital



- The **Acute Medical Pathway Programme (AMPP)** has been developed to reduce the number of patients with a length of stay between 1- 7 days by implementing an acute medical model to support flow from the Emergency Department (ED) and reduce unnecessary admissions into longer stay wards
- HLP, together with the Emergency Care and Intensive Support Team (ECIST), carried out **long length of stay reviews** to support Barking, Havering and Redbridge University Trust achieving a 25% reduction in patients staying in hospital for over 21 days and Barnet to achieve a sustained 30% reduction in long length of stay for patients
- Organised inspirational London-wide events – to share best practice within London's Urgent and Emergency Care **Improvement Collaborative**, running mental health delayed transfers of care seminars and supporting Social Care Services with delayed transfers of care road shows
- Launched a new single telephone number for police to access Mental Health advice, delivered through London's **Patient Relationship Manager** and providing a direct impact on mental health access for London's police

★ HLP, in collaboration with the London Ambulance Service and regional NHS commissioning and regulatory colleagues, has agreed an ambitious vision to deliver a single **London-wide integrated system of access to 111 and 999 urgent and emergency care services**, which:

- Integrates 999 and 111 call management and provides seamless access to clinical assessment, triage, onward referral and resolution
- Provides patients with the right care, first time and parity of NHS service provision regardless of how they first access that care
- Ensures patients have access to necessary downstream referral pathways to continue appropriate management of their care throughout the London health and care system

★ Pilots to date have seen significant impacts, **9% reduction in ambulance conveyance rates to ED, 42% reduction in ambulance dispatch for 999 category 5 cases** following a referral to the 111/IUC CAS and no complaints or reported clinical incidents

- London's award-winning **handover process** for voluntary mental health patients in A&E, developed with the Metropolitan Police, resulted in **83% fewer people in mental health crisis going missing from A&E** compared to the same period in the previous year
- Provided bid development support to London's NHS, supporting 17 A&Es to secure national funding to have specialist **liaison mental health services**. This funding means Londoners' mental health needs will be assessed and cared for 24/7

Making change happen

To make better health and better care a reality we will need to change how care is commissioned, how estate is utilised and transform our workforce. We also need to empower Londoners to make the easy choice the healthiest choice and make patients partners in their own care.



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

Youth Mental Health First Aid

One in eight 5 to 19-year olds had a mental disorder in 2017. Academic pressure, social media, bullying, poverty and lack of professional mental health support have all contribute to this epidemic of poor mental health in our young people.

Thrive LDN received funding from the Mayor's Young Londoners fund to roll out Youth Mental Health First Aid (MHFA) as part of a three-year commitment to improve the mental health and wellbeing of children and young people in London.

The aim was to ensure that all state-funded primary, secondary, special educational needs schools, sixth forms and further education colleges within London have access to a Youth Mental Health First Aider by March 2021.

Youth MHFA provides education staff with the knowledge, skills and confidence to identify and assist young people experiencing poor mental health.

"It's been such a great experience and it's just made me more keen and passionate to help young people in our society... I think it's so important that we have more of these programmes available to people and professionals. We need to help the young people of today because they're going to be our future adults."

Trained MH First Aider

Read more about [the youth MH First Aid programme](#)

- ★ Over 100 new Youth MHFA Instructors were trained during 2018/19, doubling the number of instructors in London and the South East and almost **2,000 education staff have been trained London-wide**
- ★ The national evaluation of MHFA training in schools and colleges found that after training, staff reported a **190% increase in confidence in the knowledge, skills, and awareness** to support a young person struggling with their mental health
- ★ Further funding awarded from the Mayor to expand the coverage of MHFA training to youth clubs, charities working with young Londoners and universities

Reflections:

There are multiple mental health initiatives at the same time targeted at education staff. We have had to work together with other initiatives with the shared goals like the mental health Trailblazer in South West London, to ensure schools were not getting overburdened with competing offers. The youth MHFA training here was used to upskill designated mental health leads and other staff.

Watch more about Youth Mental Health First Aid training



Thrive LDN Suicide Prevention Information Sharing Hub

Suicide is the leading cause of death in people aged between 15 and 24 and the biggest killer of men under 49. In 2018, 661 Londoners took their own lives; around 12 people every week. We do however know that suicides are not inevitable.

Thrive LDN and partners share the ultimate aspiration of making London a zero-suicide city. With the help of external partners, we developed the UK's first timely, multi-agency Suicide Prevention Information Sharing Hub (the Hub), allowing vital information to be securely shared across agencies. It will inform prevention strategies, increase understanding and knowledge for agencies involved and improve the consistency of bereavement support for those affected by suicide.

There is now an online database hosted by the Metropolitan Police Service, with key stakeholders sharing their own information of a suspected suicide. The database is available to all agencies involved in suicide prevention in London.

OVER 12 LONDONERS A WEEK TAKE THEIR OWN LIFE. IF SOMEONE WAS IN CRISIS, WOULD YOU KNOW WHAT TO SAY?

Take the training and learn life-saving skills today. It only **takes 20 minutes.**

#ZeroSuicideLDN
www.thrivedn.co.uk/zerosuicideldn

★ This was the **first digital data sharing platform of its type for multi-agency use.** e.g.

London Ambulance Service, organisations associated with London's rivers and railways, local authorities and third sector organisations

★ Thrive LDN is leading a campaign to get 100,000 (currently at 42,000) Londoners to take the **FREE online suicide prevention training** in partnership with the Zero

Suicide Alliance, which helps people **to identify warning signs and to feel comfortable having conversations about suicide**

★ Thrive LDN working with Papyrus UK have provided suicide prevention education to schools, colleges and London Universities

"A system that will improve the lives and prevent future suicides in London as well as improve the working for all emergency services."

Sergeant Peter Frost, Metropolitan Police

Reflections:

The topic of suicide is still a taboo and a stigmatised subject for many people. We are working to change the narrative, educate and inform Londoners to be able to identify warning signs and to feel comfortable having conversations about suicide.

Partnership working is essential to creating and driving meaningful change and therefore reducing the number of avoidable deaths to suicide. Thrive LDN has delivered this change at pace and at scale by prioritising campaigning and educating Londoners on how to identify warning signs and to feel comfortable having conversations about suicide.

More information about [suicide prevention training](#)

Save a life... 

Take the training

Highlights from Thrive LDN

Thrive LDN is supported by the Mayor of London and led by the London Health Board, in partnership with Greater London Authority, Healthy London Partnership, NHS England (London Region), Public Health England (London Region) and London Councils.

The movement brings together health and care leaders, residents, businesses and community and voluntary organisations to improve mental health and wellbeing in the capital.

- The **“Are we ok London?”** campaign opened the conversation with Londoners about mental health and wellbeing through online discussion, engaging with the public and a TFL poster campaign with a reach of over 1.5 million. The campaign culminated with a festival of cultural activity organised by young Londoners



- Working with Brixton Reel Film Festival through **film-based outreach projects**, Thrive LDN has worked with some of London’s most marginalised communities to create safe spaces, celebrate diversity and support strength and resilience. As part of Thrive LDN’s commitment to address **intersectionality**, we have worked with partners and over 2000 individuals from the Black LGBTQ+, Asian LGBTQ+, Latino LGBTQ+ and transgender communities
- As a result of the Thrive LDN 2019 **World Mental Health Day Festival**, a group of young Londoners have come together to develop and record a new podcast series called **“Act On”**, which focuses on issues facing young Londoners’ lives, such as inequality, loneliness and social media
- Thrive LDN is supporting an **Acts of Kindness Bench** pilot scheme across London to help combat loneliness and isolation



- In partnership with the London Mental Health & Employment Partnership we have established the **Thrive LDN Employment Network** to support London to increase the provision of Individual Placement & Support (IPS)
- Establishing over 100 **Thrive LDN Champions** – a diverse network of people across London who engage with their communities through activities and events, facilitate conversation about mental health, find creative ways to address stigma and discrimination, and support Thrive LDN’s aim of raising awareness of inequality and mental health
- In partnership with Team London, Thrive LDN has offered grants totalling £500,000 to community groups and charities to promote good mental health and emotional wellbeing in young people. This **Young London Inspired** project supports young people with an emphasis on how volunteering and social action can benefit resilience and mental health

Watch more about St Mary’s Secret Garden



- To celebrate World Book Day in March 2020, Thrive LDN live streamed an **immersive storytelling** performance of the children’s book Ruby’s Worry, open to primary schools. A perceptive and poignant story which aids discussing childhood worries and anxieties, no matter how big or small they may be.

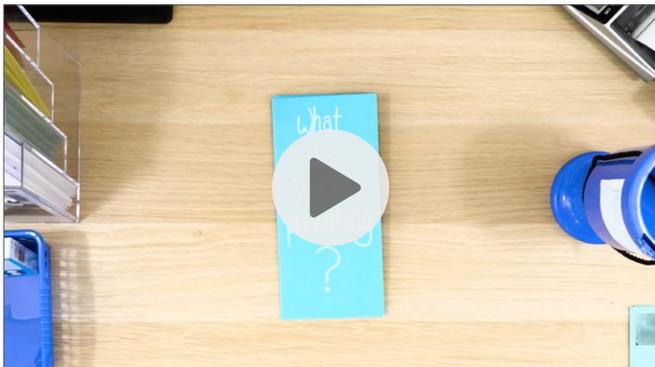


Social Prescribing

As many as 20% of GP appointments are for non-clinical issues. Loneliness is just as detrimental to health as smoking 15 cigarettes per day and you are 50% more likely to die prematurely than those with healthy social relationships. Social Prescribing can help address a range of non-medical issues by connecting people to activities they enjoy, and services that can help them, in their communities.

In 2017, less than half of London boroughs had some social prescribing service provision, but services were patchy and fragmented. HLP has provided practical support and tools to help build the case for investment and raised the profile of social prescribing amongst commissioners and healthcare system leaders. By March 2020 social prescribing was being delivered in all London boroughs.

What is Social Prescribing?



- ★ HLPs work on social prescribing, including building the evidence base, testing new models of care, engagement and supporting investment has contributed to Social Prescribing being mandated in the NHS Long-term plan, and a key ambition to the London Mayors Health Inequality strategy
- ★ Developed commissioning guidance and co-produced the 'Next Steps for Social Prescribing' report, to help achieve the ambition that more Londoners in vulnerable or deprived communities can benefit from social prescribing
- ★ Commissioned successful social prescribing pilots in London, Social prescribing in secondary care and a social prescribing champion model. Evaluations and 'how to' guides have been used to spread and scale social prescribing in London. Also, we developed an animation to raise awareness of Social Prescribing which is being played at GP surgeries nationally

Reflections:

Partnership working across sectors is key to embedding social prescribing successfully and co-production needs to be integral from the outset. Ensuring that the VCSE is supported and funded to be able to meet increased demand as a result of social prescribing is still a prevailing issue.

Minutes from Social Prescribing Conference





Developing London's workforce to enable transformation of care

Transforming Primary Care Workforce

GP headcount in London is rising but the number of hours worked is not rising at the same rate with GPs choosing to work fewer sessions or retire early. GP nursing numbers are falling whilst other roles are playing an increasing role in general practice. There are multiple factors that are known to have an impact on retention of the general practice workforce including workload, personal development, professional support, flexible careers and personal working patterns.

HLP is supporting and delivering work to strengthen the primary care workforce, increase the numbers of health professionals in general practice and support new ways of working and delivering care.

Read more about [the primary care workforce](#)

Clinical Pharmacists in General Practice



- ★ HLP with partners has developed **recruitment and retention** plans to maximise the numbers of GP trainees taking up substantive roles in general practice and retain more experienced GPs
- ★ Working with HEE we developed innovative procedures for **recruiting internationally**, with 25 GPs from Europe recruited to date
- ★ Delivered 27 GP **retention schemes** across London and supported close to 700 GPs in leadership training, personal resilience skills, coaching, mentoring, forums for sessional and locum GPs and training non-clinical staff to release GP time
- ★ HLP has shared best practice and promoted the value of **non-traditional roles** in general practice, resulting in an extra 200 FTE clinical pharmacists and 281 FTE Health Care Assistants for London



To further support London's workforce transformation HLP has worked collaboratively with partners to deliver:

- The [London Workforce Strategic Framework](#) in 2016. This together with online resources to support local implementation, highlighted the most pressing workforce challenges in London with solutions to transform health and social care services across the Capital
- **Primary Care workforce modelling** tools to baseline current and future workforce needs and test the impacts of different strategies locally before implementing them. These tools were used to support all of London's local workforce strategies
- An **Integrated Urgent Care provider landscape workforce strategy** with a focus on recruitment, health and wellbeing, learning and development to attract and retain a resilient, diverse workforce
- An economic modelling report around degree level **apprenticeships**, analysing costs and return on investment. In addition, an apprenticeship tool has been developed for providers to create specific workforce and financial models for their area to assess number of apprentices to recruit and train
- **Workforce Masterclasses** bringing stakeholders across London together in health and care to share best practice on topics such as, race and inequalities in the system and workforce dashboard and data scenario modelling following the implications in Brexit
- **The CapitalNurse Programme** – around 90 projects aiming to “get nursing right for London.” Since launch there has been a 2.58% improvement in retention of newly qualified nurses, over 150 nurses have accessed CapitalNurse system leadership programmes and over 100 urgent and emergency care nurses were trained for winter pressures 2018/19

Workforce for Children and Young People

- ★ HLP has worked to develop the workforce across London around the needs of children and young people. This has been achieved through engagement, events and by producing toolkits and other material to support commissioner and provider teams
- ★ **Workforce strategy** developed for CYPMH workforce included engagement with over 700 children, young people, parents and carers across London
- ★ Since launching in August 2018, over 800 professionals across all London's 30 acute paediatric hospital sites have registered to use the online eLearning portal – Paediatric Critical Care in Practice (PCCP)

Transforming London's estate to deliver high quality care

London has some of the world's most advanced health and care facilities, but at the same time, many of our health and care buildings need repair or are no longer fit for purpose.

Enabled by the London Health and Care Devolution act, HLPs London Estates Delivery Unit established the London Estates Board (LEB) in 2016 to address our estates challenge at a local level with health and care partners. This is the first time that we have an overarching view of NHS estates in London, helping leaders to better plan and utilise NHS building and land in a more transparent and collaborative way.

The board and the delivery unit enabled a wider partnership approach to estates, supporting investment into health through the One Public Estate programme – a national programme that focuses on getting more from the public sector's collective assets.

- ★ The London Health Board endorsed the [London Estates Health and Care Strategy](#), published July 2019 to meet the health needs of the growing population, improve health and care facilities, enhance working environments for staff and deliver improvements in value for money through lower estates maintenance costs
- ★ HLP, as part of the London Estates Delivery Unit, supported London systems to help **secure £150m NHS England funding and £3.8m of One Public Estate Funding**
- ★ HLP developed a prioritised and phased Capital Pipeline for London which included 500+ schemes, to support further funding from national funds going forward



NHSmail in Care Homes

In partnership with Accenture, HLP has been supporting care homes to get an NHSmail address, in order to add speedy communication with hospitals and GPs. This led to a 14-fold increase in the number of homes with one within six months and offered cost savings for the NHS through better coordination of care, time savings for care homes as staff no longer had to chase nurses and doctors by phone but could email them instead – and crucially expect to get a response, and ultimately helped to drive a more integrated health and social care system.

The team claimed the prestigious ‘Best Consultancy Partnership with the NHS’ prize in the HSJ Partnership Awards in February 2020.



“Care homes have always been important partners in our health systems, but not entirely part of them. The Enhanced Health in Care Homes network has provided the opportunity to share good, local practice as better links are built and initiated ‘once for London’ work to improve systems and processes for delivering better care for residents. The HLP team have been committed and creative throughout.”

Jane Clegg Director of Nursing
NHS E London Region

- ★ The average staff time saved in a care home is estimated at £5500 a year, while the NHS will have fewer missed or wasted appointments at £120 each, and GPs would also benefit from being able to send decisions remotely rather than visiting a care home
- ★ Improved communication using NHSmail are estimated at 260 hours per care home per year – based on 144 care homes actively using NHSmail currently in London, this equates to 37,440 hours of time to care for Londoners in Care Homes every year
- ★ The approach has been shared nationally, leading to an increase in care homes in England and Wales using NHSmail from 97 to over 1500 over six months

Primary Care Online Consultations

To enable Londoners to contact their GP practice without having to wait on the phone or take time out to go into the practice HLP has been supporting the roll out of online and video consultations systems.

London is on course to provide 78% of its population access to online consultations by March 2020 and we are currently working with local systems with at-scale models to achieve the 100% target of video consultations by April 2021. Thus, further improving access to care and making best use of clinicians’ time.

GP Online



Good Thinking

One in six adults in London experiences mental ill health each week. Discovery work with hundreds of Londoners highlighted a desire for non-traditional treatment options that were personalised, safe, anonymous and offered high-quality support that could be accessed 24/7, ideally for free.

Good Thinking, a major digital mental wellbeing service for London, promotes proactive self-care 24/7 for the four most common mental health conditions: anxiety, low mood, sleeping difficulties and stress. It uses social media marketing to find people looking online for mental health support and offers them personalised digital resources. It allows people to access support at a time and place that suits them and can help those who do not feel comfortable seeing a GP.

It was developed through a partnership of local authorities, London's NHS, Public Health England, and is supported by the Mayor of London. It is delivered by Healthy London Partnership.

stressed **anxious**
low **can't sleep**

On-demand, around-the-clock support for you

www.good-thinking.uk



Reflections:

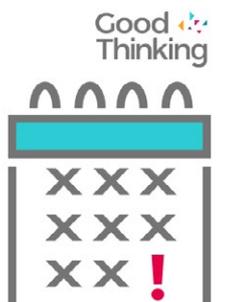
There have been a number of challenges including how best to position Good Thinking against the backdrop of other regional and national campaigns such as **Every Mind Matters**. The methodological approach to evaluating a dynamic and evolving digital proof of concept has also proved a challenge and will form a report to be published later in 2020.

Read the [evaluation report](#) to share learning from the development of Good Thinking

anxious

Feeling anxious about tomorrow?

www.good-thinking.uk



stressed

Good Thinking

Feeling the need to let off steam?

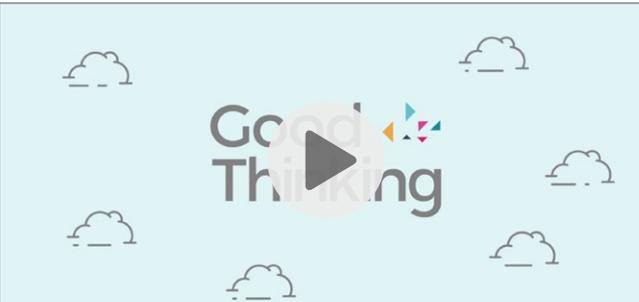


- ★ Good Thinking is the world's first digital city-wide mental wellbeing service. Since launching in November 2017 more than **300,000 Londoners** have accessed the service with over 100,000 repeat users. Most of the digital resources and apps are free for Londoners helping to reduce health inequalities
- ★ Users of **Be Mindful**, a mindfulness-based cognitive therapy app, have seen a 40% reduction in anxiety score, a **36% decrease** in average depression score and a 23% reduction in stress scoring
- ★ Good Thinking has been shortlisted as a finalist for the **British Medical Journal (BMJ) Awards 2020** in the Mental Health category (awards announced in April 2020)

"I prefer to use self-help tools because I am quite an independent, self-directive person, and I think you have more freedom of choice to explore what is out there and make your own decisions, with a self-help tool. It is less prescriptive."

Good Thinking service user

More information about Good Thinking



Further examples of how digital technology is improving lives for Londoners:

- In 2018 HLP supported NHSE London with technology transformation expertise to enable the NHS **e-Referral Service (e-RS)** to be fully rolled out in London with estimated savings of around £10m per year for the NHS in London
- Since the introduction of **NHS 111 Online** across London there has been an 8% shift from telephone services to online triage. This is an important step in helping to alleviate the stress on the telephony service and providing Londoners with easy, digital access to an NHS Pathways triage
- We have reduced demand into general practice and EDs by streamlining and integrating patient flows across primary and urgent care services. This was achieved via digitalising patient access to urgent care services, including delivery of **NHS 111 direct bookings** into extended access and electronic prescription services
- London's cloud-based system **Patient Relationship Manager** is linking patients calling NHS 111 to the right clinicians whilst redistributing calls at times of stress and helping London's achieve world class Integrated Urgent Care
- HLP has supported London systems to implement strategic recommendations to improve technical, operational and commissioning arrangements for **Coordinate My Care (CMC)** – a pan-London digital solution to support the creation & sharing of End of Life care records
- London's **Digital First** programme has supported accelerator sites across the Capital to understand the local landscape and wider system challenges by using patient pathway mapping to recognise constraints within our current "as-is" system, ahead of developing future "to-be" flows
- HLP has worked with a range of partner organisations to provide wider access to information about the NHS to support patient referrals to primary, community and unscheduled care services. Now with over 2 million patient accounts to **GP online services**, the NHS in London can expect non-cash releasing savings of over £4.2 million and time savings of over 400,000 working days per year



A blue banner for the 'NHS Go' app. On the left is the 'NHS go' logo. To the right, the text reads 'NHSGo' followed by 'NHSGo is a free health app designed for young people by young Londoners. Developed with and for children and young people (CYP), London's award winning NHSGo app has had just under 1 million individual page views of NHS health and wellbeing content, supported by a social media marketing campaign.' Below this, it says 'Endorsed by the mayor of London through correspondence with all headteachers in the capital it contains information on health and wellbeing, mental health, sex and relationships, healthy eating and puberty. It also allows individual London systems to tailor features of the app according to local need.'

Find out more about [NHS GO](#)

A valued asset for London

HLP is unique because it is embedded in the system and accountable to all London partners. It is the only improvement and transformation unit working on behalf of the GLA, PHE, London's NHS and local government collectively. It delivers engagement with Londoners, pooling resources to achieve more facilitation across organisational boundaries, wider city collaborations and provides essential shared capacity for transformation.

HLP's programmes continue to be funded from many sources, some significantly NHS-funded while others are mainly funded by wider partner organisations. HLP has been effective in securing 'match funding' and sourcing other funding streams in order to enable London to achieve more, collectively.

London-wide support for transformation typically evolves and reinvents itself every three to four years, responding to changes in structures and policy. The operating model was designed to support long-term strategic programmes of work, while providing that flexibility and adaptability for what is needed over time; whether reframing pan-London priorities or transitioning work towards more local place settings.

Adapting to changing needs

There has, and likely always will be, a need for pan-London transformation work. Whether that be in creating enablers that are best developed once, for issues requiring political leverage, for partnerships with London-wide agencies or for distinct populations such as the homeless.

Health and care in London have been the subject of many large-scale and in-depth reviews over the last century. While the social and political context has changed alongside the delivery of healthcare, most notably with the birth of the NHS itself in 1948, and quality and access to healthcare in London has improved significantly, many issues and problems first highlighted over 100 years ago persist today. Health inequalities across London remain and increased collaboration across health and social care is needed.



Two key changes are likely to influence the shape of pan-London programmes going forward. Firstly, the need to continue to enable partnership working to deliver the priorities for London set out in Our Vision for London: The next steps on our journey to becoming the healthiest global city. Secondly, an increasing opportunity to devolve pan-London transformation activity locally. As we move towards more population health-based models of care, local systems have been establishing relationships for transforming care on larger footprints, with greater provider leadership as part of integrated care systems.

However, many population health challenges continue to be restricted by capacity, resources and capability. In some instances, doing things once still offers greater value for money and providing space for improvement collaboratives enables all parts of London to move forwards.

Moving forward

Regional transformation capacity is essential to improving health for any major global city. It is testament to London's health and care leadership that they have created a joint delivery vehicle that can support wider improvements in population health and wellbeing.

In the current financial environment, health and care systems find it increasingly challenging to prioritise health inequalities and tackling wider determinants. The value of those activities can appear distant from performance measures. The 2020 update to the Marmot Review is a warning that unless we also get better at tackling the root causes of ill health, the demands on health and care services look set to grow exponentially.

Our ambition remains to make London the healthiest global city.

Watch more about HLP's highlights from 2015-2020



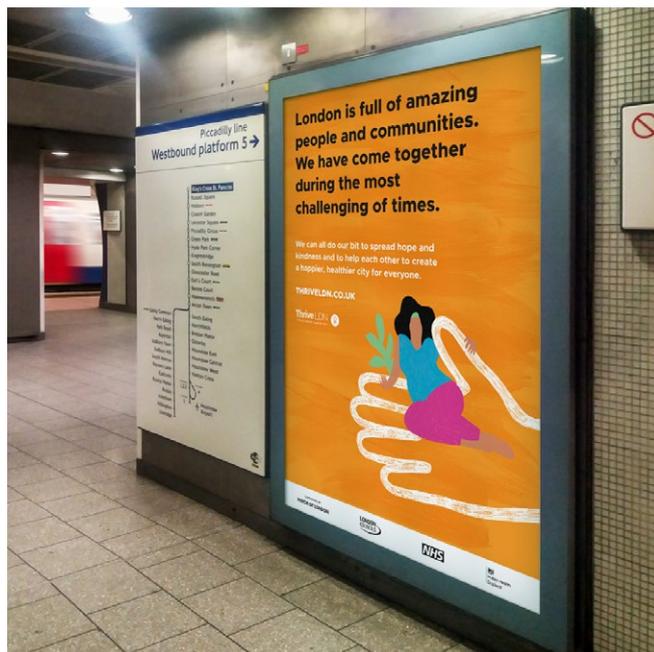
HLP response to COVID-19

In March 2020 HLP moved rapidly to support London's health and care system in responding to COVID-19. This included supporting the development of new models of care, mobilising support to protect some of London's most vulnerable populations and leading the public mental health response. Operationally, HLP led London's communications on homeless health and mental health.

Accelerating and developing new models of care

COVID-19 has out of necessity seen the development of new models of care and accelerated many digital innovations. HLP supported many of these developments, including:

- Establishing COVID-19 and non-COVID-19 primary care sites to enable the continued delivery of core primary care services
- Accelerating the rollout of digital tools in primary care to support remote triage, consultation, and monitoring. Access to online consultations at the start of March 2020 was available at 45% of practices and this increased to 95% by April 2020
- Working with NHS X and NHS Digital, supported the rollout of almost 10,000 new NHS Mail accounts within the social care sector since March 2020 using innovative AI processes
- Supporting the rapid establishment of urgent dental centres
- The development of the pharmacy service response to support GP practices and deliver flexible models of care to patients
- Enabling direct booking for GP Connect to allow 111 to directly book patients into their GP practices
- Mobilising 13 clinical pathway groups to support cancer pathway developments and sustainability of services including advising on updating patient information to reflect changes in urgent, suspected cancer referral pathways and keep patients informed and provide confidence to attend hospital appointments and treatment
- Supporting London's Mother and Baby Units by ensuring effective networks and communications of service provision for example, information and advice on infection control and visiting policies



Protecting our most vulnerable populations

HLP mobilised a cross-system approach to lead the London COVID-19 Homeless Health Response on behalf of the NHS. The Homeless Health Operations Centre coordinated health support for around 4,500 homeless people housed as part of the 'Everyone In' move and coordinated accommodation support for around 1,200 people in partnership with the GLA. This quick and decisive response meant that among the rough sleeping community in London at the peak of COVID-19, infection rates stood at around 5-6%, compared to comparable international cities such as Chicago and San Francisco, where this has been 50-60%.

The emergency response also provided a unique opportunity to test and treat people for conditions such as HIV and hepatitis, to assess needs more generally, and to register people formally with general practice to enable ongoing care.

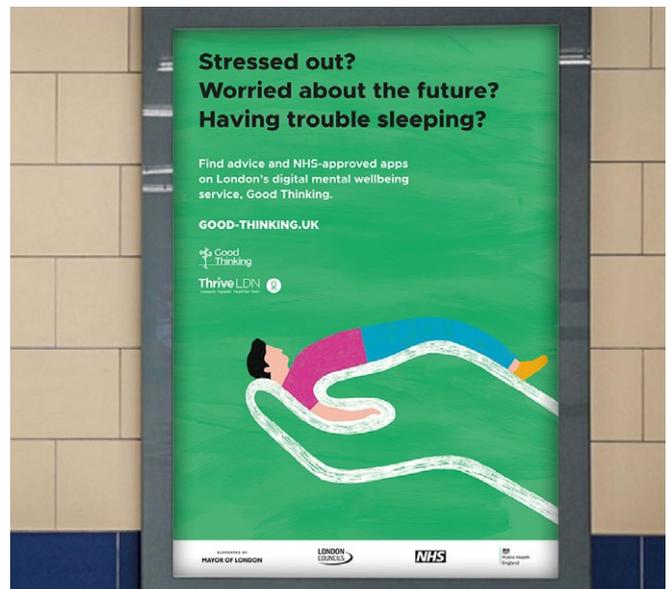
Social prescribing link workers also played a critical role in supporting vulnerable and shielded patients during COVID-19. [Working with partners, HLP reviewed the social prescribing link worker role and supported the development of new ways of working.](#) This included supporting rapid recruitment to increase the workforce, providing additional training, equipment, resources and guidance; as well as supporting local systems develop recovery strategies for social prescribing. This is to ensure longer term ways of working play a key role in reducing health inequalities in London.

Leading London's public mental health response

Thrive LDN coordinated the public mental health response to COVID-19 on behalf of Public Health England Office for London to support the mental health and resilience of Londoners during and after the pandemic.

Partnerships projects, and activities were mobilised with a participatory approach and focus on advancing equality. Major highlights included:

- Development of the COVID-19 public mental health communications toolkit with weekly agreed citywide public mental health messaging and resources
- Challenging the representativeness and inclusiveness of research findings on how the pandemic is affecting people's lives by promoting uptake across London's diverse communities, supporting Black Thrive's research and commissioning community research
- A series of the 'Act On' podcast focusing on the COVID-19 outbreak and the challenges faced by Londoners including bereavement and loneliness
- Over 100,000 Londoners have completed #ZSA suicide prevention training
- A Thrive LDN poster campaign in partnership with PHE, the Mayor of London and TfL sharing messages of support and hope across the TfL network including, tube, rail and bus stops
- New resources developed for people who are supporting communities and individuals adversely affected by COVID-19. This resource provides an overview of psychosocial approaches and general guidance for people supporting individuals and communities affected by COVID-19
- A series of "Coping Well during Covid" webinars to support members of the public during the pandemic
- Almost 100,000 wellbeing card packs distributed through emergency food and medical parcels to London households to support those with limited or no internet access



Good Thinking provided a critical component of the London public mental health response to COVID-19 with more Londoners than ever before accessing free mental health self-assessments and wellbeing apps. In May 2020 the Good Thinking website was accessed more than 52,000 times.

Good Thinking ensured Londoners had access to tools to support with stress, anxiety, low mood and sleep difficulties as well as signposting to trusted public health guidance on COVID-19. The Good Thinking podcast series also captures the thoughts, feelings, and experiences of Londoners directly or indirectly affected by COVID-19.

Good Thinking also worked with Partnership for Young London and Tik Tok to produce 'Checking in: Voices of young people during lockdown'. This report provides valuable insights into the effect of Covid-19 on the mental health of London's young people.

This informed an update to the Mental Health in Schools Toolkit which now includes tailored COVID-19 advice and resources for children and young people, parents, carers, schools, governors and commissioners on mental health and emotional wellbeing.



Healthy London Partnership