

**Agenda item: 8**

**Paper no: 4**

<b>Title of Report:</b>	<b>Chief Officer's Report</b>	
<b>Status:</b>	<b>TO NOTE</b>	
<b>Committee:</b>	<b>Governing Bodies in Common</b>	<b>Date:</b> 18/12/19
<b>Venue:</b>	Martineau Hall, Dorking Halls	

<b>Presented by:</b>	Matthew Tait, ICS Chief Officer	
<b>Executive Lead sign off:</b>	Matthew Tait	<b>Date:</b>
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### Governance

<b>Conflict of Interest:</b> The Author considers:	None identified	✓
<b>Previous Reporting:</b> (relevant committees/ forums this paper has previously been presented to)	Not applicable	
<b>Freedom of Information:</b> The Author considers:	Open – no exemption applies.	✓

### Executive Summary

This report provides an update on recent developments and areas which may be of interest, and do not form part of the wider Governing Bodies Committee in Common meeting agenda. It includes an update on the following areas, relevant to the three CCGs:

- Update on the Surrey Heartlands Integrated Care System:
  - Continued development of our Integrated Care Partnerships
  - Supporting primary care development
  - System planning
  - Annual Operating Plan
  - Health & Wellbeing Board update

### Working together across Surrey Heartlands

East Surrey CCG | Guildford and Waverley CCG | North West Surrey CCG | Surrey Downs CCG

- Development of a Transformation Support Unit
- ICS Executive Team update
- Proposed Merger of Surrey Heartlands CCGs
- East Surrey CCG transition
- Draft Operating Model
- Winter update
- Local CCG/ICP updates

## Implications

What is the <b>health impact/ outcome</b> and is this in line with the <b>CCGs' strategic objectives</b> ?	This paper is relevant to the following CCG corporate objectives: - Objective 1: Achieving a sustainable system Objective 2: Development of collaborative working Objective 3: Developing Integrated Care at a local level Objective 4: Primary Care development Objective 5: Safe, effective care providing the best possible health and care outcomes and patient experience Objective 6: Commissioning a safe and sustainable Children's service
What is the <b>financial/ resource</b> required?	This paper has no direct financial implications.
What <b>legislation, policy or other guidance</b> is relevant?	This paper makes reference to areas of statutory responsibility including the CCG's legal duty to engage and involve local people.
Is an <b>Equality Analysis</b> required?	An equality analysis is not required for this paper as analysis is undertaken at individual project or programme level.
Any <b>Patient and Public Engagement/ consultation</b> required?	This paper references engagement work undertaken as part of local programmes including the Better Care Together programme in Guildford and Waverley, the Big Picture in North West Surrey and proposed public consultation on the Improving Healthcare Together in Surrey Downs.
Potential <b>risk(s)</b> ? (including reputational)	This paper does not highlight any specific risks.

## Recommendation(s)

(1) **TO NOTE**

## Next Steps

No direct next steps as a result of this paper.

## Chief Officer's Report

### 1. Surrey Heartlands Integrated Care System update

#### Continued development of our Integrated Care Partnerships

Our four place-based Integrated Care Partnerships (across East Surrey, Guildford & Waverley, North West Surrey and Surrey Downs) continue to develop, with agreed priorities and Financial Recovery Plans now in place.

The East Surrey Integrated Care Partnership (ICP), which covers East Surrey and the population of Crawley, Horsham and Mid Sussex that flows into Surrey & Sussex Healthcare NHS Trust, is now known as CRESH (Crawley, East Surrey, Horsham) ICP. The relationship of Horsham and Mid Sussex CCGs, which sit outside the Surrey Heartlands system, is one of collaboration as opposed to accountability and is being worked through with Sussex partner organisations. Sumona Chatterjee has been appointed as the ICP Director for CRESH and took up her appointment on 1<sup>st</sup> November.

#### Supporting Primary Care Development

Developing effective Primary Care Networks – local networks of GP practices covering between 30,000 – 50,000 patients - is a key element within the NHS Long Term Plan. Central funding has been allocated to support this work, which includes the development of our Clinical Directors and aspiring Clinical Directors. This support fund, which is available for five years, has been made available to all 24 PCNs in Surrey Heartlands. NHS England/Improvement has developed a PCN Maturity Matrix which we are using to help understand each PCN's baseline position and what steps they need to take to develop and achieve maturity as a network. We are also working with the National Association of Primary Care to help map these baselines and will work with each PCN to develop their 'learning journey' so each PCN will have their own 'development journey pack'.

We are also developing a programme of workshops to support primary care colleagues, which will include the outputs of the National Review of GP Access, the new pharmacy contract, and how we support wider transformation work across our health and care system.

#### System Planning

Our *Five Year System Plan* (our response to the NHS Long Term Plan) will be presented to the Surrey Health and Wellbeing Board for final approval on 16<sup>th</sup> December.

The plan describes the vision and expected delivery of health and care services for our population; aiming to give the best start in life, deliver world-class care for major health problems, such as cancer, and help people age well. Our plans have come together through the positive collaborative of our teams across ICS partners and represent a further development of our wider partnership. The plan (including activity, finance, workforce, performance and operational delivery plans) was submitted to NHS England/Improvement on 15 November 2019 and received an indicative 'Amber rating'

following assessment against the NHS Long Term Plan requirements.

This is reflective of our on-going financial challenges and developing delivery plans across our programmes. Our accelerated work on the 'Wider Determinants of Health' was recognised and is a significant step in transforming both our health and care services and the way we work. The plan will be published in the New Year and will include a public facing summary and Easy Read versions.

### **Annual Operating Plan**

The annual operating plan for 2020/21 forms Year 2 of our 5 Year Delivery Plan. NHS England/Improvement have recently advised that national guidance for contracting and operating planning is likely to be released just before Christmas or early in New Year, due to the impact of Purdah, election and legal review. Systems across the South East have requested these plans are 'system' focussed (rather than traditional organisation based). This is being raised at national level for consideration.

Surrey Heartlands is planning to develop a short narrative to support planning requirements (referencing the detail set out in the longer strategic plan), describing the next phase of our delivery plans. The national planning timetable currently indicates final submission of planning requirements at end of March 2020, with a local South East workshop taking place week commencing 13<sup>th</sup> January to support systems in responding to the national guidance.

### **Health and Wellbeing Board Update**

To support implementation of the new Health and Wellbeing Strategy, summary plans for each of the three key priorities have been developed and shared at the latest Health and Wellbeing Board. These compliment the published strategy and will be used to refresh the strategy early in 2020, identifying key focus areas, the Priority Sponsor, Accountable Executive and Programme Manager, as well as setting out what will be delivered within the scope of each priority.

Underneath the summary plans, detailed implementation plans have also been developed describing the work leads and milestones that will be used by the relevant Programme Boards to monitor progress. As part of this, and following more detailed stakeholder engagement, a proposed new set of 38 metrics has been developed to monitor progress and a draft dashboard developed.

In the meantime, the Health and Wellbeing Board has been merged with the Community Safety Board, which will necessitate some additional activity and metrics to reflect the wider work programme. The Health and Wellbeing Board will continue to monitor progress alongside ongoing engagement with partners, wider stakeholders and citizens as the work progresses.

### **Development of a Transformation Support Unit**

The work to develop a shared ambition for Surrey's communities has put the ICS in a strong position; there is a need now to capitalise on this to determine how far the system can achieve real transformational change for local people.

At the recent System Board, Surrey Heartlands partners agreed the need to strengthen our approach to driving transformational change by focussing on four areas, managed through a single 'integrated Transformation Support Unit'. This will be hosted by Surrey County Council on behalf of the partnership. The four programme areas are new models of care; best start in life; learning disabilities and emotional welling.

By focusing on our top transformation programmes and aligning the right resources behind them in this way, we can ensure these move further, faster. As well as enhancing what we can achieve for our communities, this will enable us to better demonstrate our ability as a system to deliver benefits, change and value for money; in turn strengthening our case for further devolution and investment in our communities.

### **Provider Collaborative for Tier 4 CAMHS**

Surrey Heartlands has been successful in an application to develop a Surrey Heartlands Provider Collaborative for Tier 4 CAMHS (Child and Adolescent Mental Health Services). This will give us specialist commissioning responsibility for children across Surrey and will integrate the escalation into specialist beds as part of the overall pathway of care for children. Currently the responsibility sits with NHSE.

### **Developing the ICS Executive Team**

To further strengthen the integration and leadership of key services across our system, two new joint posts have been established:

- Trudy Mills has taken on the role of ICS Director of Children's and Learning Disabilities Services. This role reports primarily to the Director of Children's Services at Surrey County Council, expanding the existing system role across Children's Services.
- Helen Rostill has taken on the role of ICS Director of Mental Health Services, reporting primarily to the ICS Chief Officer.

Both posts will help strengthen a more integrated approach to service and quality improvement across the county, whilst working closely with the Integrated Care Partnerships to support operational delivery and integration at local level.

Interviews are also taking place for the new ICS Director of Workforce and for the substantive Estates Director and Chief Digital Officer roles, joint across health and the County Council.

## **2. Proposed merger of the four Surrey Heartlands CCGs**

Following agreement at the end of June to pursue a merger of the four CCGs (East Surrey, Guildford & Waverley, North West Surrey and Surrey Downs), a membership vote was held during September to approve a draft Constitution for proposed new organisation. Following a successful and supportive vote across all four CCG memberships, a merger application was submitted to NHS England/Improvement at the end of September to form a new CCG from 1<sup>st</sup> April 2020 (to be known as NHS Surrey Heartlands CCG). The application has received conditional approval from regulators

(subject to slight revisions to the new Constitution and agreement on financial plans), and we are now working towards creating the new organisation.

The election of a new Clinical Chair designate is currently underway and the vote will be concluded just before Christmas, with an announcement expected early in the New Year. Once that process has completed, we will then commence the recruitment of the rest of the new Governing Body, including GP and Lay members.

In the meantime, a number of workstreams have been set up to undertake a wide range of work to prepare for the new organisation, from new financial ledgers, payroll systems, to signage and a new website and intranet. Preparation will also include transferring staff into the new merged organisation, via the standard TUPE process.

### **3. East Surrey CCG transition**

Following East Surrey partners becoming part of the Surrey Heartlands ICS and our application to formally merge the four CCGs, it was agreed that it would be beneficial for the Surrey Heartlands CCGs' Accountable Officer to take on responsibility for East Surrey CCG from the 1<sup>st</sup> November 2019 ahead of the formal merger. This was approved by Simon Stevens, NHS England Chief Executive, and ensures a sensible lead time in preparing for the 2020/21 financial year. As such the statutory accountability for East Surrey CCG transferred to Matthew Tait, Joint Accountable Officer for Surrey Heartlands CCGs, on 1<sup>st</sup> November 2019.

The Surrey Heartlands CCGs have welcomed a number of East Surrey staff to the wider team at the same time as work progresses on developing the local place-based CRESH Integrated Care Partnership.

### **4. Draft Operating Model**

A draft operating model, which sets out a proposed new way of working for CCG functions, has continued to be developed and has been shared with staff for further discussion. The draft model takes into account the proposed merger of the 4 CCGs, how we support further development of Primary Care Networks (PCNs), Integrated Care Partnerships (ICPs) and broader integration with Surrey County Council, and the development of our assurance function for the Surrey Heartlands ICS. Work is continuing to agree the detail, with final structures likely to be shared with staff early in the New Year ahead of any necessary staff consultation. Given the likely pace of development, alongside operational and statutory considerations we would anticipate working to a new operating model in broad terms from 1<sup>st</sup> April 2020, ensuring we have the right structure to reflect the new merged organisation.

### **5. Winter Update**

A great deal of work has been undertaken in the last few months preparing for this winter. Work began in May with a Surrey Heartlands Winter Stocktake (2018/19) and Planning event; from this look-back/look-forward, initial actions for winter 2019/20 have

been progressed, for example building an ICS 'action card' to support an ICS Exec to Exec System Call in the event of the wider area becoming significantly challenged. A full winter review was presented to SOAG (System Oversight and Assurance Group) in August, with a winter planning paper presented to Surrey County Council's Adult and Health Select Committee in October.

Members from each of the ICPs and the local A&E Delivery Boards (or equivalent) have continued to refine their local winter plans; with the combined Surrey Heartlands plan submitted to regulators on 14<sup>th</sup> October which was rated GREEN / AMBER. Key areas noted included workforce, mental health capacity and performance and mitigations have been put in place to manage these. Surrey Heartlands also has a new performance dashboard and each area is focused on improving flow through their local Emergency Departments.

Our system winter preparation work includes:

- A single Surge and Escalation Plan for Surrey Heartlands, to go live in early December, including a provider scoring matrix to help easier comparison across organisations and local systems.
- To ensure wider system oversight, a Surrey Heartlands *Urgent Integrated Care* dashboard has been created within Alamac along with a daily OPEL status (Operational Pressures Escalation Level). Beautiful Information, which provides 'live' Emergency Department updates every 10 minutes for each of the hospital Trusts, has also set up an 'app' to capture this information across the system.
- An acute hospital and mental health workshop was held in October, which was well attended by colleagues across the system and the Frimley system.
- Considerable work undertaken by all the acute hospital Trusts to reduce ambulance handover times in A&E (with a 17.5% improvement in handovers in less than 30 minutes); this focus will continue throughout the winter period.
- Each area has plans in place to open escalation beds, along with community hospitals trialling changes to reduce lengths of stay in community wards. Local Authorities are also working closely with colleagues across the various agencies to support and drive the 'Home First' principle.
- GP Out of Hours services - contracted to provide robust out of hours arrangements between 5pm - 8.30am each weekday and throughout the weekends, further complimented by the 'Improved Access' initiative including **Bank Holiday** cover via the GP Federations.
- The online GP service, LIVI, is now live across a number of areas across Surrey Heartlands, operating from 7.00 am to 10.00 pm on weekdays and 9.00 am to 5.00 pm at the weekends. In North West Surrey alone, LIVI has seen 22,866 appointments, providing significant support particularly to Out of Hours services.
- Mental Health services now has a fully staffed Psychiatric Liaison Service 24/7 in all the acute hospitals, with additional funding enabling Epsom Hospital to launch a 24/7 service from November.

- Staff flu vaccinations campaigns are well underway – with all areas having over 33% of healthcare workers already vaccinated; and some areas above 54%.
- Once again a Surrey Heartlands Winter Review and planning event will be held in early May 2020 to reflect on and learn from winter 2019/20.
- A successful bid for an additional £500,000 from NHS England/Improvement to support spot purchasing packages of care and provision of additional Livi appointments as well as paediatric bed management support and additional paediatric consultant cover at Ashford & St Peter's.

We have already seen positive benefit from joint working across the system, for example paediatric capacity within the acute hospitals and the ambulance trust supporting hospital diverts which has enabled wider system support. However, whilst the system is working hard to mitigate against a prolonged surge in demand as far as possible, it should be noted that all ICP areas are already reporting significant pressure. In particular Surrey and Sussex Healthcare NHS Trust are seeing significant increases in adults of working age attending the Emergency Department.

## 6. Local CCG updates

### 6.1 Guildford & Waverley CCG

#### Primary Care Development

*Re-opening of Chiddingfold Surgery* – on 25 November Chiddingfold Surgery returned to its Chiddingfold site less than a year after a fire caused significant damage to the building. This required the practice to relocate to Cedar Ward at Milford Hospital as part of an interim arrangement whilst the re-build took place.

All appointments will now be provided from Chiddingfold or Dunsfold branch surgery. In addition, a full dispensing service is available from the Chiddingfold Surgery. The practice offered the local community a chance to see all the good work that has been carried out over the past few months with some open afternoon sessions in late November.

*New Inn Surgery* – NHS Guildford and Waverley CCG had been working with New Inn Surgery for some time to find options to enable the practice to continue to provide GP services to registered patients from their premises in Burpham, Guildford. Despite concerted efforts from all parties, including support from Guildford Borough Council, the practice was unfortunately unable to secure a long-term arrangement for suitable premises. Therefore, regrettably the practice closed to the public on 22 November 2019. The formal decision regarding the closure was made by the CCG's Primary Care Commissioning Committee.

The CCG worked closely with the practice to undertake a safe dispersal process. All registered patients were notified of the closure and advised to register with an alternative GP practice as soon as possible. The CCG has also been liaising with other local GP practices around re-registration of New Inn patients to ensure that care is

accessible to all. Advice and support to find alternative GP practices has been available for all patients.

### **Better Care Together Programme**

The Guildford and Waverley 'Better Care Together' is a programme of work focused on the review of urgent care across Guildford and Waverley. The aim of the programme is to identify how best to provide urgent care locally in line with new national standards, which will improve quality of care and mean clearer pathways for patients so they know where they can access the care they need. The programme is also an opportunity to consider the changing needs of our population and make sure we have the right services in place to meet local demand in future. The Programme Executive is now focusing on taking a long list of potential options for urgent care across the Guildford and Waverley area, and shaping into a short list. This work is supported by a clinical working group, a group of health professionals who can advise and comment on suggested activity.

### **Primary Care Network Transformation Bids**

Transformation funding is made available to healthcare systems to accelerate transformation and integrated working and improve health outcomes for local populations. As an Integrated Care System (ICS), Surrey Heartlands receives funding over and above national commitments/allocations to invest at its own discretion.

Guildford and Waverley ICP set aside a portion of these transformation funds for Primary Care Networks (PCNs) to put forward transformation proposals. A total of 13 proposals from PCNs and the voluntary sector were received and evaluated at a panel on 7 November. Eight proposals have been approved to date including:

- Group consultations pioneer programme across four PCNs
- Same Day Access Service in GRiPC/North Guildford
- Homelessness in GRiPC/North Guildford
- PCN Network MDT coordinator – West Waverley

The ICP is now in the process of supporting PCNs and partners with mobilisation of the projects, and monitoring progress.

### **Successful Quality Improvement Bid for Cardiac Care**

The Guildford and Waverley ICP has been awarded £30,000 by the Health Foundation 'Q Exchange' to deliver a Quality Improvement project around cardiac care. There were 180 ideas submitted nationally and the joint bid (a partnership between the Royal Surrey, the Clinical Commissioning Group and the British Heart Foundation) was one of 20 finalists who were awarded funding.

Uptake of cardiac rehabilitation services after a cardiac event, like a heart attack, is low (at around 50%) and means that people may not be accessing the care and support needed to make lifestyle changes that would reduce their risk of another attack. The project will involve patients in redesigning the pathway, including behavioural insights to improve uptake of cardiac rehabilitation services.

## 6.2 North West Surrey CCG

### **Big Picture Programme**

This programme looks at the future of urgent care services in North West Surrey and is now entering its next significant phase. We have a shortlist of options for possible locations of Urgent Treatment Centres (which will standardise walk-in centres and minor injury units based on national requirements).

Following a period of early engagement with stakeholders in 2018 and in-keeping with our commitment to ongoing dialogue with local people about our emerging ideas, we want to seek views on the shortlisted options. In the New Year we will be running a series of events, focus groups and community outreach activity which will be promoted widely following the general election. Feedback from local people will help to shape the clinical model and enable us to reach a preferred option(s) which may or may not require formal public consultation later in 2020.

### **Update on plans for Weybridge Hospital**

The external company instructed by NHS Property Services have been refining the schedule of accommodation to reflect work carried out with primary care and CSH (community services) to support their requirements and population growth predictions. A revised schedule of accommodation, along with financial analysis has been agreed with all partners. This is being used to inform a final version of the Project Initiation Document. Subject to some primary care amendments this has been agreed by the CCG and will be submitted to NHS England later this month.

From January 2020 the focus will be on developing the outline business case which will involve agreeing funding for the project and appointing a project team.

### **Fort House appeal update**

In September the CCG lodged an appeal against the planning decision of Elmbridge Borough Council to refuse the change of use of the empty Burwood Ward in Walton Community Hospital to house Fort House GP surgery. Disappointingly, this was rejected in November on the grounds that further information was needed regarding the proposed additional car parking area, the quantifiable impact of digital transformation of services on parking demand and the absence of a cap in patient numbers.

The CCG met with Elmbridge Borough Planning Officers earlier this month to establish the availability of feasible alternative estate in the area to house the GP practice. There are some options currently being explored and the outcome of this will determine whether we go back to the planning committee with an amended appeal.

In parallel we are working with partners, including CSH Surrey, to consider the future of Burwood Ward. As an empty space that costs the local NHS £200k per year it is essential we find a way to use this for the health and wellbeing of local people. Activity on this will progress at pace only after all options to house Fort House Surgery on the site have been exhausted. It will also consider the broader context of emerging plans for neighbouring areas such as Weybridge and Molesey.

## **Service developments**

- £50,000 transformation money has been released to mobilise an integrated urology service across community and secondary care
- New pilot live trialling a robust discharge process that enables people to leave hospital with support, whether that be health or social care, under a single budgetary framework
- Establishing dedicated care home support in our Walton and Hersham Primary Care Network through a partnership across CSH (community services), social care and GPs.

## **6.3 Surrey Downs CCG**

### **Improving Healthcare Together update**

The Improving Healthcare Together (IHT) programme has been making positive progress. In September the programme was allocated £500m by the Government to invest in improving both Epsom and St Helier hospitals and to build a new specialist emergency care hospital, confirming the necessary capital funding for the programme. The Pre-Consultation Business Case has now been submitted to regulators as part of the national assurance process and approved, meaning the programme is now able to prepare to go to formal public consultation.

Consultation can only take place once the three CCGs have met in public to consider all evidence, decide on a preferred option(s), and agree to proceed to consultation. Preparations are now underway so the programme can proceed with these necessary steps after the General Election, in the New Year.

### **Molesey Hospital Update**

The CCG is continuing to scope the right model of care for local people in the Molesey area; once that work is complete, we will be able to progress towards the development of an Outline Business Case. The original project initiation document, completed in 2017, described the need for a new healthcare facility in the West Molesey area which is one of the more deprived areas in Surrey.

The scope of the project includes consideration of the current Molesey Hospital and nearby Clinic; with the recent development of Primary Care Networks (PCNs) - groups of local GP practices working more closely together - the CCG is also working with the local PCN to consider any additional needs that may be required.

Whilst this project is taking more time than originally anticipated, it's important we take the time to get the model of care right for local people; as soon as we have a proposed way forward, we will continue our engagement with local stakeholders and the wider public as appropriate.

Once the business case has been completed, a capital bid would then be made to fund any necessary development.

## **Surrey Downs Loneliness in our Communities - 'a challenge best solved together'**

Loneliness has been highlighted as a key issue in today's society and Surrey Downs partners have agreed to tackle loneliness as a key priority. On 5th December a range of partners came together to launch this work, aiming to reduce the number of people who are/feel 'lonely' and/or 'isolated' in the Surrey Downs community. This initial even focused on highlighting current challenges, priorities, exiting services and opportunities to work together and learn from each other across the Surrey Downs system. Partners included District and Boroughs, the voluntary sector, lay partners, Surrey County Council, Police, public health and local charities.

A number of next steps have been agreed including reviewing and gathering more information, including local residents' stories to gain more personal insight, bringing in further partners (e.g. local businesses, leisure centres, carers and others) to review existing services, and from early next year start to develop and agree a collection of specific projects to take forward.

## **Joint winners of the Healthcare Financial Management Association Governance Award**

Surrey Downs CCG, along with Epsom & St Helier University Hospitals NHS Trust and Sutton CCG, have been awarded this year's HFMA Governance Award for a shared governance framework to support the achievement of savings across the local system. With a joint financial gap of £67m across the two health and care systems, all parties agreed a change of approach was needed, developing a programme that delivers savings with no boundaries across the two CCGs, the hospital trust and community services.

This has involved dropping the 'payment by results' approach in favour of a focus on reducing system costs through co-authored financial savings plans centred around four themes; planned care; urgent and integrated care; and clinical and non-clinical supporting programmes, supported by a joint programme management office. Judges praised the way the three organisations have worked together to develop this new approach, particularly as the partnership straddles two health and care systems; Surrey Heartlands and South West London.

## **6.4 East Surrey CCG**

East Surrey CCG, which is part of the CRESH ICP, has significant financial challenges. A System Recovery Board has been established Co-chaired by Dr Claire Fuller, Senior Responsible Officer for Surrey Heartlands ICS and Bob Alexander, Independent Chair of Sussex STP. An external consultancy has been appointed to identify the key drivers of the deficit. The output would define the System Recovery Plan and the establishment of a Delivery Unit to deliver the multiyear system recovery plan.

A Frailty Transformation Programme has been developed which will commence mobilisation in January funded through Transformation monies.

The CCG has also been successful in a bid for GP Integrated Mental Health Services in North Tandridge and a Population Health Management pilot site in Phoenix, Redhill.

### **Greystone House Surgery, Redhill, opens new extension**

Greystone House Surgery in Redhill recently opened its new extension. They were awarded the funding by NHS England to build an extension to the existing building.

The extension includes six new consulting rooms, one new treatment room and a large meeting room. The extension will allow the surgery to increase their GP training capacity from two to three trainees at any one time, they will also benefit from hosting further services which benefit their patients and those from our neighbouring practices, these services include; Heart Failure Clinic, Diabetic Dietician, MS Specialist nurse, Well Being Social Prescriber, Counsellor, First Contact Physiotherapist and Pharmacist.

### **Surrey & Sussex Healthcare NHS Trust named best dementia friendly hospital**

Congratulations to Surrey & Sussex Healthcare NHS Trust who won the award for best dementia friendly hospital at the recent national Dementia Care Awards.

A range of improvements for people living with dementia have been made across the hospital in recent years, including an ambitious strategy which focuses on four key areas; patient engagement, the patient experience, training and the environment. easily.