

Chris Pelham  
Neal Hounsell  
Dr Vasserman

By email only

20<sup>th</sup> January 2014

Dear all

## **Re Community Nursing services – Neaman Practice**

I am writing further to our discussion on Monday 13<sup>th</sup> January regarding the above topic. I committed to respond to you in writing once I had looked into the plans around community nursing services in more detail, particularly related to individual practices. I apologise that I am a day late in forwarding this.

I have spoken to Louise Egan, Head of Nursing for Integrated Medicine and Rehabilitation Services (which incorporates community nursing). The plans for the community nursing services have been discussed for several months and have heavily involved a group of four representative GPs from City & Hackney CCG/practices. The proposal was established during the summer months following an extensive fact finding review. This proposal was discussed with the GP representatives and amendments made accordingly prior to being circulated to all GP practices on 10<sup>th</sup> October 2013. I am aware that Louise has spoken to a significant number of GPs directly, including I think, Dr Vasserman. I have attached a copy of the paper that was circulated.

As we discussed, the proposal involves bringing together a large number of very small teams into four larger teams. It is intended that each team is located on the same site and in the case of the Neaman Practice, this will be at the Rushton Practice. However, it has been agreed with the Practice Manager at Neaman that the nurses attached to the practice will continue to have a desk available to them which they can use.

The intention of this change is not intended to reduce communication with the practices, indeed focus has been placed on improving the communication. A named nurse will be identified for each practice and this individual can be contacted directly. Previously much of the communication was managed through the administrative offices.

Key drivers for these changes have been as follows:

- Improve the communication between clinical teams, necessary for covering leave and absences.
- Provide robust clinical supervision for all members of staff to assist in ensuring a safe and high quality service. The previous arrangements did not facilitate this.

- To introduce a Practice Development Nurse for each team to further develop and enhance skills and knowledge within the community nursing teams

I would like to assure you that the intention of these changes is in no way intended to remove the community nursing service from supporting the practice but it is intended to enhance the quality of the service to the benefit of patients and GPs alike. However, I do recognise that the accommodation changes could be perceived as a loss to the practice site. The enhanced communication arrangements should mitigate this and indeed, overall develop into a better operating arrangement.

I am sorry that this change has caused anxiety across the City. Every effort was made to liaise with GPs and, as stated above, a representative group were involved in the design and sign off of the service.

I hope that the attached report provides further information. Please do not hesitate to contact Louise Egan, Sheila Adam, Chief Nurse or myself to discuss further.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Tracey Fletcher'.

Tracey Fletcher  
Chief Executive

cc. Louise Egan  
Sheila Adam  
Osian Powell, Divisional Operations Director