	LNNI Work Plan for 2017-18

Summary	This document provides the background and timetable for the proposed 2017-18 LNNI work plan.
Purpose	To inform stakeholders of the proposed programme of work
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Supersedes previous	-
Lead Responsible	LNNI Lead
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Policy Record

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Author (s)	Approval		
Lead Responsible	Approval		

Approval Process – Trust Policies

LNNI Board meeting	Authorise		
LNNI Chair	Sign Off		

2017-18 Work Plan – Lymphoedema Network Northern Ireland

The Lymphoedema Network Northern Ireland (LNNI) provides regional professional clinical leadership for the management of Lymphoedema. Lymphoedema is a long term condition (LTC) which if diagnosed early results in better outcomes for the patient and a more efficient use of resources. Lymphoedema is an elective service monitored by the AHP 13 week access criteria.

The Network has continually modernised to ensure value for money by:-

- Updating regional referral criteria and pathways for access to the service ensuring appropriate use of limited resources. This has included the integration of CCG and ECR, and potential to link Lymphdat with the H&C Index, and upgrade to electronic record format.
- Developing (and updating) patient information in a number of formats utilising PPI to inform potential service users and to aid self-management of the condition. This has included Easy Read formatting and a PHA hosted garment website patient information sheet (in conjunction with a pharmacy/GP guidance tool).
- Maximising capacity by reviewing regional band 3 and 4 competencies and agreeing a regional model, with associated education goals.
- Enhancing the roles of specialist staff and continuing to develop local professional networks, thereby reducing the necessity of regional complex clinic medical input; this has included regional agreement regarding Doppler and vascular assessment.
- Locally provided quality services have resolved the need for ECRs (apart from lymphoedema/lipoedema liposuction surgery)
- Reviewing and employing new technologies to improve effectiveness and efficiency with introduction of PhysioTouch and new vascular assessment systems.

Despite all service development, the continued increase in referrals, and the impact of increasingly more severely obese patients, has impacted on services. The NHSCT has breached access targets from April 2016. LNNI has temporarily supported the NHSCT to reduce waits whilst awaiting intra-trust review.

Summary of key programmes of work for 2017-18

	Action	Impact
1.	Continue to quantify current demand and referral routes	Meet 13 week AHP access targets - NHSCT: monitor referral, review, re-referrals and breaches - Review activity changes provided by LNNI temporary funding support and impact
2	Quantify the impact that changing demographics	To be able to describe and quantify new referral sources which in turn will allow for demand to be managed.

	(obesity, lipoedema and chronic oedema, palliative care), specialist Lymphoedema liposuction and pediatric lymphoedema service will have on the demand to the Lymphoedema service	- ICT development to support information management (electronic record) - ECR (surgical) collated along with costs - Paediatric: Integrate the National Children's Charter (launched May 2017)alongside upgrade of local paediatric documentation and liaison with trust paediatric teams - Lipoedema: formal engagement with voluntary sector and awareness provision - Chronic oedema: partnerships with GP Federations/trusts/PHA/pharmacy contacts re care of non-complex case bids - Bariatric: data base, engage with diabetes teams/voluntary sector/psychology, PHA/HSCB
3	Continue to pilot a self-management model to roll out a programmed of supported self-management for lymphedema patients.	Direct patients to a self-management model to reduce the number of review appointment and increase capacity within current resources. - Evolve different focused models for physical activity engagement including SHSCT's Healthy Legs outcomes (Oct 17) - App development re limb volume and BMI calculations (initially HCP focused with a view to later models being for service users) - Long Term Conditions Alliance NI engagement: Diabetes/Macmillan Move More
4	Roll out the education and communication strategies	To develop a specialist workforce required for Lymphoedema - To continue to raise awareness of the condition with a range of Health Care professionals; focus on palliative care, paediatric and diabetes teams - Joint working with ACPOPC - New cultural populations - Prescribing (NMP) - Succession planning - Enhanced band 3 / 4 role
5	All Ireland service development	Joint working with new HSE lead - Shared learning with new HSE Lead - Partnership planning: 15th November 2017 - All Ireland conference - October 2017 – All Ireland certification course - National Lymphoedema Partnership (NLP)