



South West London HIV & GUM Clinical Services Network

Networks in action:

"SWAGNET"

South West London AIDS/HIV GUM NETWORK

Paul Lister

former Network Lead Clinician
& Consultant GU Physician
Roehampton Clinic
Queen Mary's Hospital, London
paul.lister@swlondon.nhs.uk

- Stages in implementing a Network
- Experiences from South West London
- Tangible benefits from networking in SWL
- Unresolved issues

How to develop a network

Stage 1: Pre-networking

Stage 2: Setting direction and building consensus

Stage 3: Structuring the network

MedFASH *'Developing sexual health and HIV service networks - A practical guide'* Summer 2005

Stage 1: Pre-networking

- Convene planning group
- Map current services, links, gaps
- Map stakeholders and their views
- Map existing collaboration & connections
- Clarify purpose
- Explore operating principles
- Identify possible network models

Stage 2: Setting direction and building consensus

- Summary report on potential for network development
- Activities to reduce barriers
- Stakeholder event to build consensus & ownership

Stage 3: Structuring the network

- Create a structure
- Network leadership
- Network structures and management arrangements
- Links to external commissioning
- Resources

Practical issues to consider in setting up networks:

- **DESIRABLE?** **Scepticism <==> Opportunity**
- **TYPE** **virtual organisation <==> collaborative partnership**
- **BOUNDARIES** **Broad <==> Narrow** clinical, social, community?
GUM, FP or just HIV?
- **INCLUSIVITY & OWNERSHIP** all units & professional groups
- **SCOPE** **Operational <==> Strategic**
- **COMMISSIONING** **Reactive <==> Proactive**
- **FORMAT** **Informal <==> Formal**
- **LEADERSHIP & MEMBERSHIP OF STEERING & SUBGROUPS**
- **COMMUNICATION & TRANSPARENCY**
- **IDENTIFIED/RECOGNISED TIME TO NETWORK**
- **SUPPORT & RESOURCES**
- **I.T.** **None <==> Website support <==> Video conferencing**



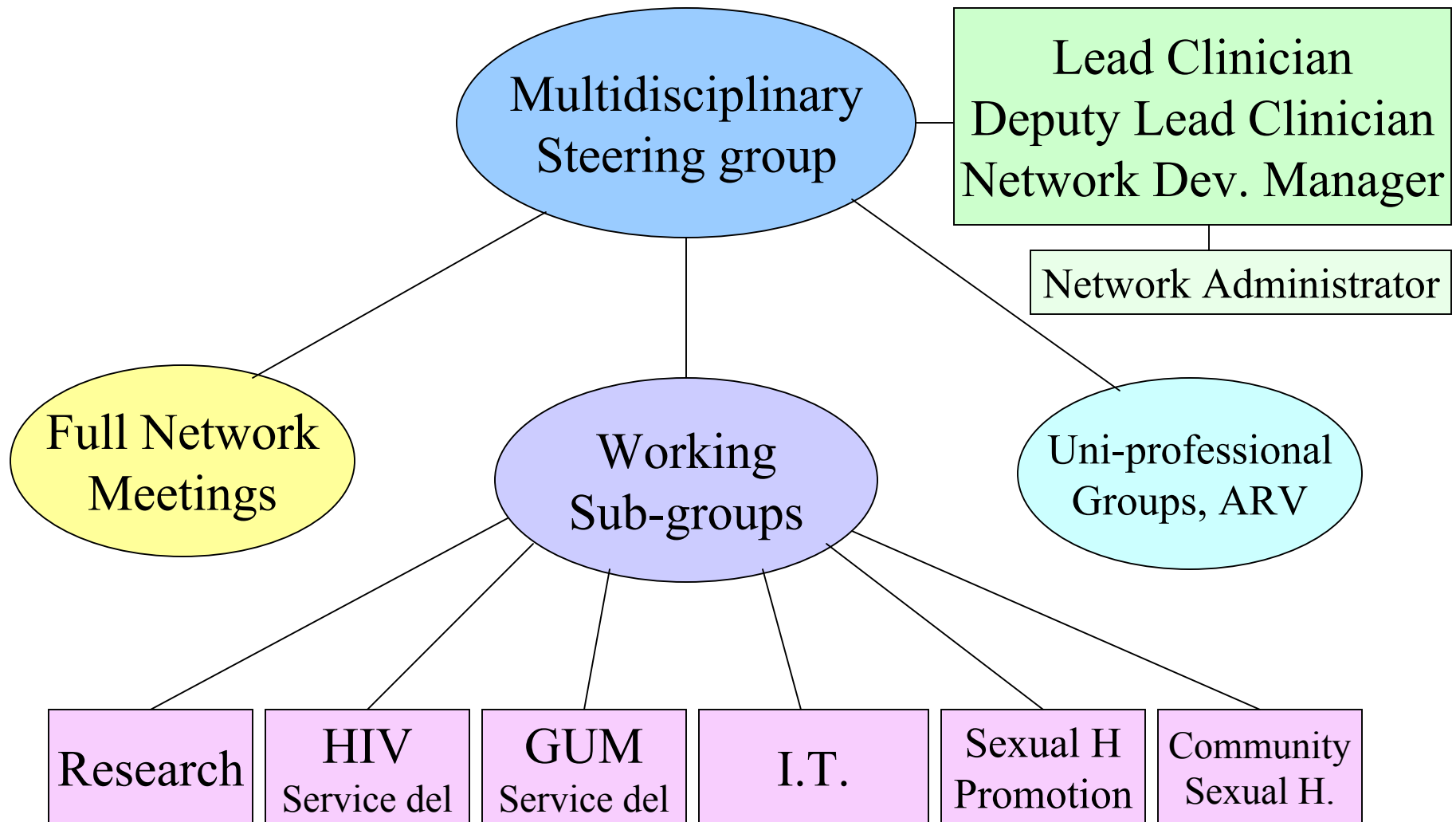
“swagnet”

- **6 adult HIV/GUM units at 5 hospitals (4 acute Trusts)**
1400 HIV+ patients 100,000 GUM annual attendances
- **2 specialties**
genitourinary medicine & infectious diseases
(not Family Planning services)
- **7 professional groups**
doctors, nurses (acute & community) , health advisers, pharmacists,
clinic managers, commissioners, public health leads
- **1 SWL Sector HIV & GUM Commissioning consortium (6 yrs)**
3 Health Authorities → 5 PCTs

Milestones:

- **Nov 2000 “Pre-networking”**
Service review for 1yr (external consultants)
- **Nov 2001 “Setting direction & building consensus”**
Network stakeholder event
Agreement to proceed. Lead Clinician
Decision to network GUM (not just HIV)
Steering group set up
- **Jan 2002 “Structuring the Network”**
Network structure agreed
Subgroup membership & priorities approved
Linked Consultant & Pharmacist posts planned
- **Mar 2002** www.swagnet.org website for communication
NETWORK LAUNCH
- **Oct 2003** part-time Network Development Manager in post
- **Sep 2004** rotation of Network Leadership
- **Apr 2005** Subgroups begin 4th year of operation
– gradual rotation of co-chairs & members

Structure of South West London HIV & GUM Clinical Services Network



Networking :

- Informal networking through linked posts, contact details
- Time identified for Network meetings. Accessible venues, parking. Dates planned 1 year ahead
- 6 subgroups established – 4 meetings per year, now 3 all units & professional groups represented
- Existing uni-professional groups recognised
- Antiretroviral Discussion Group
- Full Network Meetings – 4 per year, rotating host
- Facilitate communication, open access website

www.swagnet.org

South West London HIV & GUM Clinical Services Network 

SWAGNET Home

Home

F.A.Q.

Members

Schedule

Subgroups

Resources

Search

SWL Services

Clinical Trials

Links

RELATED INFORMATION

[A-Z GUM Clinics](#)

[ART Advice](#)

[New Fill](#)

[HIV Support & Advice Services](#)

[Commissioning](#)

[Strategy Group \(SHEAG\)](#)

[STIFcourse/ Primary Care](#)

[Noticeboard](#)

Welcome to the home page for South West London HIV & GUM Services Network.

Click ABOVE buttons to access Network information.

Click LEFT list to access related information.

See BELOW for [Network News](#) and [What's New](#) in our web.

See [F.A.Q.](#) for answers to "frequently asked questions" - background information about the Network, how the Network is organised and how to use this website.

USERNAME & PASSWORD

If you need access to minutes or members' contact details then you will need a username and password.

The username is p8873809-0

The password is the old username and old password combined (8 characters) - if you are a swagnet member and do not know these details then [email us](#).

Once you have entered the username and password tick the box to save these details on your computer so that in future you only have to hit the Return button.

NETWORK NEWS

- **Access & Modernisation of GUM services**

GUM services in South West London have recently completed a document reviewing the initiatives we have

Primary Care / STIF course

[Home](#)

Sexually Transmitted Infection Foundation (STIF) course

This course is open to anyone working within primary care or sexual health services within South West London. The 2 day course aims to equip participants with the basic knowledge, skills and attitudes for the effective management of STIs. For further general information about STIF courses [click here](#).

SWAGNET has organised 3 courses for 2005. Places are limited. For further information and application forms click below.

[Who to contact](#)

[Course outline](#)

Course One	15-16 June	Princess Alice Hospice , Esher
Course Two	26-27 Sept	Strawberry Lodge Conference Centre, Carshalton
Course Three	9-10 Nov	Queensmere Road Conference Centre, Wimbledon SE19 5QD

Useful resources for primary care staff

[SWL GUM Clinics - opening times & contact details](#)

[Guidelines for Chlamydia testing in Primary Care \(SWAGNET\)](#)

[National Recommendations on testing for STI in Primary Care settings \(BASHH\)](#)

[National Guidelines for Treatment of Genitourinary conditions \(BASHH\)](#)

[National Strategy for Sexual Health & HIV \(DoH\)](#)

GUM Service Delivery Subgroup

- Establish baseline data for HIV testing uptake in 2001
Implement change in policies & practice to ↑ testing rates & monitor
- Identify problems in monitoring HIV testing data using KC60 codes – huge inter- and intra-clinic variation in use of “P1B” code
- Maintain pressure on commissioners about capacity issues.
Ensure pump-priming monies received & fully utilised
- Collaboration over access issues, young persons’ services
- Equitable access to chlamydia & HIV testing
- Local implementation of national issues – GC resistance, chaperones
- Increase efficiency – HIV results by phone, results by text, ↓microscopy
- Report on service modernisation against BASHH document
- Review services against *MedFASH Standards for SH services 3-6*
- Survey of NCCG educational requirements & set up training sessions

Community Sexual Health Subgroup

- Guidelines for supporting chlamydia management in primary care
- Collaboration for SWL rolling programme of STIF courses
- Develop resources & training to support partner notification in primary care

Sexual Health Promotion Subgroup

- Develop sector-wide *Standards for Health Promotion in GUM*
- Specific focus on *Gay Men's sexual health* - training, liaison
- Produce recommended list of standard Patient Information Leaflets
- Liaise with PCT Sexual Health Leads about health promotion issues

IT Subgroup

- Survey of data capture & reporting, facilitate best practice
- Competitive development of GUM software systems
- Pilot & influence development of HIV modules
- Texting of results – negotiate with providers & establish protocol

Antiretroviral Discussion Group

- Case discussion for doctors/pharmacists
- Feedback from Antiretroviral Advice Team on cases submitted
- Update on clinical trial results & changes in prescribing practice

Research Subgroup

- Working group for new research initiatives
- Facilitate access to clinical trials across SWL

HIV Service Delivery Subgroup

- Directory for specialist referrals/advice
- Guidelines agreed - admission, STI screening in HIV+ clients
- Service information for clients, out-of-hours cover
- Commissioning issues highlighted - brain impairment
- Review services against *MedFASH Standards for HIV Care 3-12*
- Collaboration on PEP guidelines, mental health access
- Care pathways for TB, hepatitis co-infection
- Hepatitis/HIV co-infection clinic
- Anti-retroviral Therapy Advice team
- Sector-wide service for treatment of lipoatrophy

Full Network Meetings

- Lunch to promote informal networking, rotating host, 4 per year
- Open to anyone working in Network, voluntary sector reps
- 30 min Network feedback then 2 hr Educational meeting :

HIV & Pregnancy

World AIDS Conference Feedback

HIV Subtypes

HIV Treatment Update

HIV services for Young People

Debate on Partner Notification in HIV

HIV & TB co-infection

Sexual Assault

Gay Men's sexual health

Visions for the future of Sexual Health services

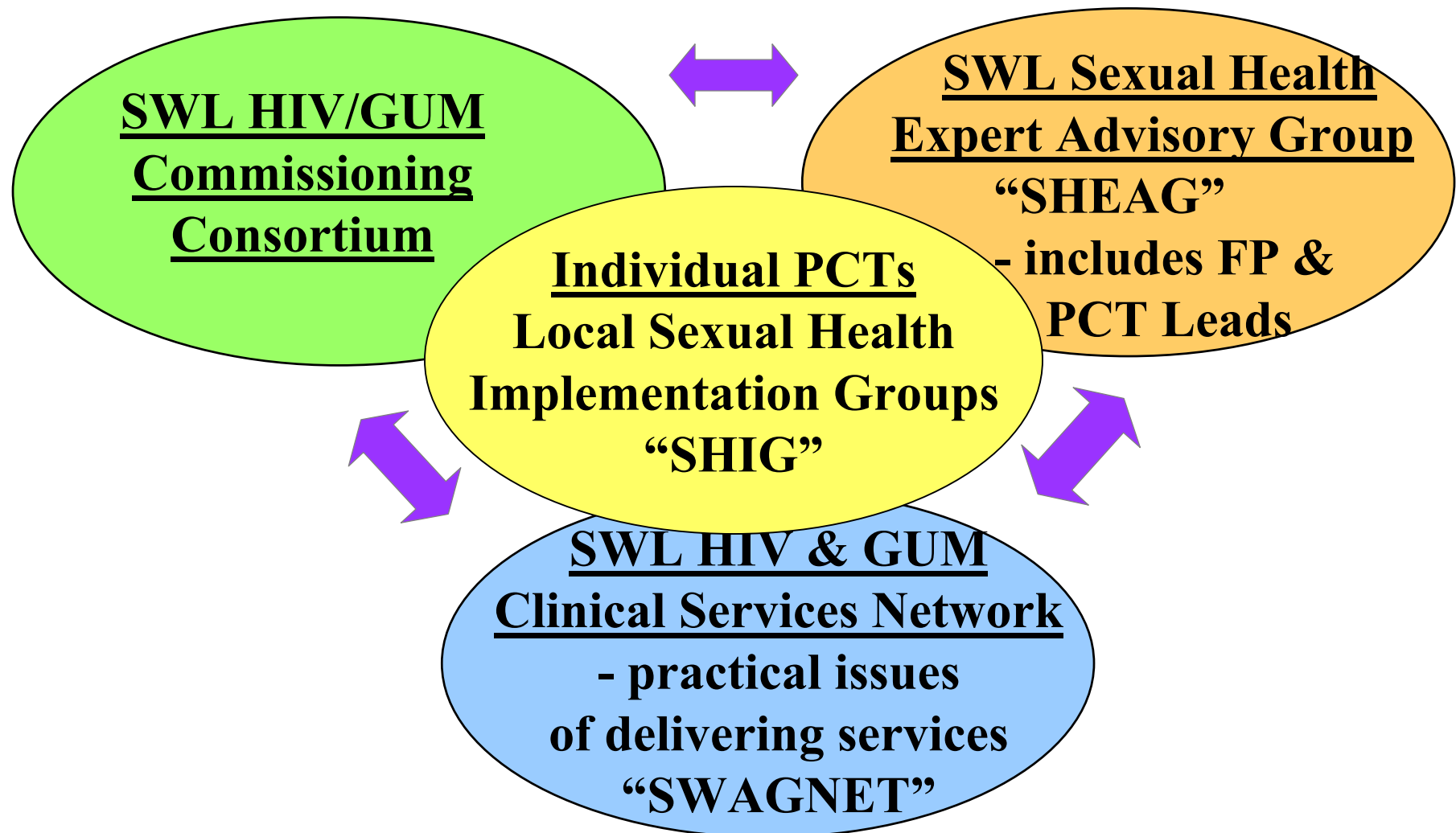
Point of care HIV testing

Part of a bigger picture....

MedFASH definition of managed service networks (adopted from Scottish Executive) :

“ Linked groups of service users, professionals & organisations convened by Commissioners, **spanning NHS primary, secondary, and tertiary care, the voluntary sector, and social care**, which work in a co-ordinated manner, unconstrained by existing professional and organisational boundaries, in order to ensure the equitable provision of high quality & effective services throughout a Network area”

Co-ordination of HIV & GUM service development & delivery in SW London



Issues in maintaining Networks:

- **SUSTAINABILITY – immediate clinical commitments compromise efforts for longer term effectiveness**
- **HORIZONTAL STRUCTURE IN VERTICAL ORGANISATIONS**
- **SPONSORSHIP BY TRUSTS WHEN NOT AN N.S.F.**
- **STATUS OF NETWORK. IDENTIFIED RESOURCES**
- **INDIVIDUAL'S CONTRACTS, ACCOUNTABILITY & PERFORMANCE**
- **NETWORK'S ROLE IN COMMISSIONING**
- **USER INVOLVEMENT**
- **MAINTAINING EXTERNAL RELATIONSHIPS**
- **EVALUATION. DELIVERING EDUCATION & AUDIT**
- **RESOURCES – cost-neutral quick fixes → investment in services**
- **CHANGING POLITICS – Networks NOW!
Foundation Hospitals TOMORROW!**

SUMMARY

- Networks offer many potential benefits for patients & staff
- main barrier may be available time rather than commitment
- Networks need to be funded! - they don't run themselves
- Level of funding may determine level of network - "collaborative partnership" may be most realistic type to aim for initially
- Exact model depends on local issues - but needs agreed boundaries (SWAGNET model c.f. Manchester model)
- Formal structure & support required for progress & sustainability
- Good communication & broad involvement is a key requirement
- Networks help galvanise action on improvements in patient care
- Networks evolve over time and need to link into other networks
- Don't let Networks be a distraction! Effective service delivery does not negate the need for urgent investment in sexual health.

www.swagnet.org

Annual Report

www.swagnet.org/AR2004

Mark Pakianathan, Lead Clinician
mark.pakianathan@stgeorges.nhs.uk

Richard Lau, Deputy Lead Clinician
richard.lau@stgeorges.nhs.uk

Janine Railton, Network Development Manager
janine.railton@swlondon.nhs.uk

Paul Lister, Network Adviser
paul.lister@swlondon.nhs.uk