

Dec-09							PCT Cluster : County Durham and Darlington													
Pathway Area	OGIM No.	Planned Go Live Date	Scheme Commenced? (Y/N)	Start Date or if not commenced, revised start date	Project Lead	2009/10 Key Objectives	Map to targets (hide)	Goal(s) associated with 2009/10 objective	Current progress against goal(s) for pathway area (red/green)	Prediction of year end (red/green)	Potential to impact on Vital Signs/Operating Framework Priorities (Yes/No)	Current Financial Position (Frozen/Not Frozen) NHS CD	Current Financial Position (Frozen/Not Frozen) NHS D	Progress notes and/or remedial actions where there is a high risk to delivery (narrative)	Safer care north east	Better health fairer health	CD PCT Total Investment 2009-10 £'000s	D PCT Total Investment 2009-10 £'000s	Actual Funding drawn to November £'000s NHS CD	Actual Funding drawn to November £'000s NHS D
	0910-093	01/07/2009	Y	01/07/2009	Nick Springham (via Jonathan Wrann)	Reducing cancer deaths through earlier presentation by increasing cancer awareness and promote health seeking behaviours ensuring high levels of uptake of cancer screening services ensuring delays in primary care pathways are reduced.	VS203, VS411, VS412, WCC21, CQC(NP)	Produce baseline data on cancer awareness levels in communities across County Durham and Darlington and produce demographic analysis of this data in order to identify need Expand and improve a service to increase awareness levels by meeting identified need Employ social marketing techniques to promote cancer screening uptake focusing on those communities where uptake is lowest with the aim of having the best uptake rates in the county within three years Eliminate delays in the primary care referrals into diagnostics through an RPIW initially looking at lung and teenage cancers.	Green	Green	Yes	Not Frozen	Not Frozen	Baseline Cancer Awareness Measure completed Plans for the extension of the Cancer Awareness Service completed Posts have been appointed to, service launched 30 Nov 09. Primary Care training is scheduled Additional national funds secured for Improvement Foundation support to community-based cancer awareness service SLA complete Social marketing plans in place for bowel cancer screening Report on cervical screening commissioned and completed. Implementation plan in place. Starting development work on breast screening promotion National funds secured for RPIW approach to primary care referral pathway improvement. Working group with Greg Rubin + Cancer Network. GP surgeries recruited, data gathering complete, RPIW to take place second week in December December update RPIW postponed due to lack of Primary Care engagement, rescheduled for March	Y	Y	366	65	366	65
	0910-071	01/04/2009	Y	01/04/2009	David Britton	Five new clinical Directed Enhanced Services - Heart Failure	WCC43, WCC46, VSB01, VSC23, CQC(NP)	To deliver the national clinical directed enhanced services in GP practices for Heart Failure This is a one year DES and is due to finish on 31 Mar 2010 (unless otherwise advised by the DoH)	Amber	Amber		Frozen	N/A	The funding should be transferred to the GMS/PMS budget as the service is currently being funded from the budget at risk		Y	51	0	0	0
	0910-057	01/07/2009	N	TBC	Debra Hartley (Jackie Rutter)	Community Nursing Services - Staffing	VSC15, VSC04, VSC19, WCC53	To support the future development of community nursing services in line with the principals of Department of Health Directives for the redesign of community nursing services and care closer to home To support and enhance the development of the integration agenda	Amber	Amber		Not Frozen	Not Frozen	Progress with integration agenda and associated issues related to estates - linking into Estates / Provider workstream Potential shift of workforce into community settings with risk for de-stabilising services - to be addressed Data duplication strategies & metrics ending Financial implications should become clearer with start of reporting date end July (for receipt mid-August) - increased activity evident in reporting at this stage Planned to 'go live' as part of CIT programme, start dates & project plans TBC 25 Nov 09 All service reviews have been suspended so there has been no movement on community nursing / health & social care teams Currently undertaking a baseline stock take of all community services, this is a 6-week-ish piece of work (given Xmas etc) expecting completion 22nd Jan December update Service reviews remain suspended at this time, no progress	Y	Y	404	34	425	34
	0910-008				Peter Taylor	HIV Treatment and Care	WCC15, WCC20, CQC(EC)	Availability of 'treatment earlier', care closer to home - the offer of related support therapies in HIV treatment and care To develop programmes and initiatives to meet the government pledge of increase access to NHS dental services	Red	Red		Frozen	Frozen				43	8	0	0
	0910-061	01/04/2009			David Britton	Increasing Access to NHS Dental Services	VSB18, WCC27, WCC28, CQC(NP)	The funding for this OGIM has now been transferred to the Increasing Dental Access OGIM to support the DoH requirements of increasing access to NHS Dental Services by 2011(0910-061). This has been approved by the SDG	Green	Green	Yes	Frozen	Frozen				128	23	0	0
	0910-062	01/10/2009			David Britton	Salaried Dental Services & Additional Enhanced Services	VSB18, WCC27, WCC28 CQC(NP)	This OGIM has been delayed in providing the services. It is questionable whether the funding will be spent in year. However with the Government's new initiative around increase access to NHS Dental services it may well be that approval could be sought from the SDG to transfer funding access to the Dental Access OGIM	Amber	Amber	Yes	Frozen	Frozen				213	38	0	0
	0910-249	01/10/2009			David Britton	Additional Enhanced Services (incl. sedation/smoking cessation/alcohol screening)	WCC40, WCC41, WCC42, VSB14, VSC26, CQC(NP)	2 year programme to conclude on 31 Mar 2010 (unless otherwise advised by the DoH)	Green	Green	Yes	Frozen	N/A				57	0	0	0
	0910-072	01/04/2009	Y	01/04/2009	David Britton	Five new clinical Directed Enhanced Services - Drugs / Alcohol	WCC40, WCC41, WCC42, VSB14, VSC26, CQC(NP)	2 year programme to conclude on 31 Mar 2010 (unless otherwise advised by the DoH)	Amber	Amber	Yes	Frozen	N/A	The funding should be transferred to the GMS/PMS budget as the service is currently being funded from the budget at risk		Y	26	0	0	0
	0910-032				Claire Sullivan (via Jonathan Wrann)	GP led Alcohol Service in County Durham and Darlington. This GP led service will build upon the directed enhanced service for newly registered patients aged 16 and over. This specification will reward practices for screening existing registered patients aged 16-39 years (patients with risk factors for CVD aged 40-75 years will be identified and screened via the CVD specification) to deliver simple advice and brief interventions to help reduce alcohol related risk in adults drinking at hazardous and harmful levels. The practice will screen existing patients in the target group using the AUDIT tool. The SWITCH (Young People's Specialist Substance Misuse Team) referral form (Appendix 7) includes the AUDIT tool and use of this form could be considered best practice for patients aged 16-18 years The practice will deliver simple advice and brief interventions (followed by re-screening after 6 months for those scoring 16-19) and where appropriate refer patients to the relevant Alcohol Service, to reduce alcohol related risk in adults drinking at hazardous or harmful levels.	WCC14, WCC42, VSC26	Contribution to the PCT target of 2% reduction in rate of alcohol related hospital admissions (Vital Signs guidance) Raise public awareness relating to safe levels of alcohol consumption by screening using the AUDIT questionnaire Reduce harmful or hazardous drinking levels to low risk by offering a brief intervention or referral into CAS where appropriate. Patients scoring 16-19 will receive a 6 month follow-up for re-screening Screen 25% of the target population by the end of Year 1. Screen a total of 60% of the target population by end of Year 2. Screen a total of 100% of the target population by year 3. (Minimum threshold 80%)	Amber	Amber		Frozen	N/A	GPs delayed due to DoH releasing new READ codes. Expected start date 01 September 09. Confirmation for authorised shift in time till 2011/12 received. Letters to GP. December update 75% of GPs signed up to date	N	Y	137	0	121	0
	0910-094	01/04/2009	Y	01/04/2009	Claire Sullivan (via Jonathan Wrann)	Developing Alcohol Services: Reducing harm from alcohol Goal: Reduce the rate of hospital admissions for alcohol related harm per 100,000 population. Increase the numbers of adults accessing Community Based Alcohol Treatment Services. Reduction in the rate of A&E attendance, where alcohol is a primary or secondary factor. (Establish baseline during 2010) Reduction in the percentage of adults who binge drink in-line with the England average. Commission Community Based Alcohol Service with a range of statutory and voluntary service providers. Commissioning of a Probation Programme for offenders (Durham)	WCC14, WCC42, VSC26	Publish two alcohol harm reduction strategies and action plans by March 2009 Recruit an Alcohol Coordinator by October 2009 Increase the number of GPs and nurses screening and delivering brief interventions in primary care Create a Regional Common Data Set for the collection of Alcohol Admissions in A&E by June 2009 Introduce new data collections system in A&E (Cardiff Model) by 2010 Increase the access to services by expanding the community based alcohol treatment multi-disciplinary teams in both County Durham and Darlington Develop service specification for Tier 4 treatment and complete tender process by December 2009 (Darlington and Durham) Commission a Community Alcohol Service (Darlington) to include DAAAT training posts. Provide dedicated services for high risk groups, e.g. offenders. Roll out the probation pilot linked to alcohol treatment orders in County Durham and Darlington	Green	Green	Yes	Not Frozen	Not Frozen	Two Alcohol Harm Reduction Strategies for County Durham and Darlington now published and launched Expansion to the two community alcohol services (Durham & Darlington) is complete. This is an extension to an existing contract Delay on the recruitment of the alcohol coordinator due to LOR Regional common data set agreed for the implementation of the "Cardiff Model" Draft referral pathways into the community alcohol services are underway for both adults and young people An interim process has been established for providing Tier 4 December update Progress for Alcohol Services is as follows: Alcohol Coordinator now appointed and will commence February 2010 There are currently 951 adults in treatment in County Durham and 255 in Darlington, 67% are men and 33% are women Over 1000 frontline practitioners have now been trained to screen and deliver brief advice New IT system for A&E procured and includes minimum common data set for Cardiff and screening for alcohol	N	Y	977	172	977	172
	0910-107	01/01/2010	N	TBC	Christine Scorer (via Jonathan Wrann)	Health Trainer Programme Objectives: Reduce health inequalities - The Health Trainer Programme is a national programme designed to tackle and reduce health inequalities by using community development approaches and skills to engage with adults who have little or no contact with the Health Economy specifically it contributes to: Reduction in CVD Mortality Reduction in Cancer Mortality Increase in Smoking Quitters Increase Mental Well-being Reduction in Alcohol Consumption.	WCC43, VSB01, VSA06, VSA07, VSB16, VSC31, VSC25	Scale up HT provision increasing contacts and Lifestyle Change and Support sessions by 11,000 to ensure fair and equitable access across County Durham and Darlington and maximise impact Stage 1 - Develop Specification Stage 2 - Work through procurement process Stage 3 - Contract with appropriate provider(s) Stage 4 - Commencement Stage 5 - Evaluation and Review	Red	Red	Yes	Frozen	N/A	Service specification currently in developmental stage and on target However, the AOP funding is currently suspended for this project and without this funding equitable access to Lifestyle Change and Support sessions across County Durham and Darlington will not be achieved The project is ready to go if the AOP suspension is lifted December update No change	N	Y	157	0	0	0
	0910-013	01/04/2009	N	TBC	Paul Turner	Reducing Chronicity of the population of C&D&D Developing community based services that focus on supporting the patient to self-manage their condition as well as treating it.	WCC43, WCC29, WCC other, VSB15, VSA06, VSA07, VSC31	Undertake demand analysis - complete by Dec 09 Commence tender process Implement service provision Concurrently, Commissioning Lead to work with existing Providers to develop a pilot for expanding their provision	Red	Red		Frozen	Frozen	Funding is for expansion/enhancement of current community pain provision in Durham Dales, Durham and Chester le Street and Derwentside and the tendering of new provision in the remaining localities where there is a need. 600k was awarded recurrently (510k for Durham and 90k for Darlington). Original start date July 09; Finance moved to October 09. Slippage has been altered accordingly by finance. Improvements to current service provision has been achieved as far as possible without further funding. However, gaps in provision can't be addressed without a tender process that can't be started until funding available. Also a pilot to expand the current services can't be undertaken without funding. Therefore the RAG rating is red.	N	Y	425	45	0	0
	0910-097	01/10/2009	N	TBC	Sue Hoare-Lather (via Jonathan Wrann)	Childhood and maternal obesity By 2020 aim to reduce the proportion of overweight and obese children to 2000 levels in the context of a broader strategy to tackle obesity in the whole population Collate local obesity data to inform planning and performance management as part of the childhood obesity pathway Promote healthy lifestyles by improving the nutrition of children and young people in County Durham and Darlington To slow the rise in prevalence of adult obesity to England average by 2013. Utilise childhood surveillance data to measure levels of childhood obesity and plan services Support the two children's trusts to complete and update the Preventing Obesity, Promoting Physical Activity strategies for children and young people in Darlington and County Durham Further update the childhood obesity pathway of care as services develop. Phased development and implementation of three age-appropriate childhood intervention programmes to support children and families and cost involvement with Specialist children's obesity service and halt the rise in childhood obesity, building on the 2008/09 launch of FISCH Support analysis of workforce competencies review by raising awareness and address primary care training needs of childhood obesity using standardised training pack. Respond to recommendations from regional and local mapping of service provision for maternal obesity Raise awareness of serious risks to both mother and baby of obesity in pregnancy and associated links with childhood obesity Develop a pathway of care for pregnant women that incorporating prevention and treatment as per national guidance Develop a weight control programme for pregnant women who are obese, working with midwives and health visitors	VSB09, CQC(NP)	30 Sept - 30 Dec 2009 (I) Roll out of FISCH 7-11yrs (Second phase) operational by 31st December 2009 30 schools to benefit from FISCH per term (400 - 600 pupils) 31 March 2010 (II) Develop service spec of Junior group programme (4-11yrs) by 30 September 2009 (III) 1st phase of Junior programme operational by 31 March 2010 (IV) Service Spec for teenage programme (11-16yrs) completed by 31 December 2009 31 Dec - 31 Mar 2010. Delivery of training sessions (I) 2 sessions delivered by 31 December 2009 (II) 4 sessions delivered by 31 March 2009 Action plan and media strategy drafted 30 September 2009 - completed 31st March 2010 Pathway to be developed by 31 December 2009 Identify service access baseline by 31 March 2010 Workforce plan complete by 31 December 2009 - Identify / develop initiatives by 31 March 2010.	Red	Red	Yes	Frozen	Frozen	Roll out of FISCH (2nd phase) - Due to AOP freeze no monies have been released to commence phase 2 of FISCH. RAG rating - Red Develop service specification of junior programme - due to AOP freeze process has not been able to progress past the PIN registration stage. RAG rating - Red Develop service specification of teenage programme - due to AOP freeze process has not been able to progress past the PIN registration stage. RAG rating - Red Delivery of training sessions - progress is being made to develop training programme, however delays may be unavoidable with delivery due to recent public health provider/commissioner split and the capacity of health improvement team to deliver. In addition the effects of the AOP freeze may inhibit the ability to provide facilities to support training delivery. RAG rating - Green Maternal obesity media strategy work currently ongoing. RAG rating - Green Development of pathway - due to AOP freeze progress has been significantly reduced. RAG rating - Red Overall - the effects of the AOP freeze will have a huge impact on being able to progress work to provide services for those children and young people who are classified as obese. Currently we have no services for these children and young people December update No change	N	Y	170	30	0	0
	0910-098	01/10/2009	N	Apr-10	Lynn Wilson (via Jonathan Wrann)	Adult Obesity Pathways Objectives: Reduce Health Inequality and contribute to an overall increase in life expectancy and thereby contribute to the reduction or elimination of the gap in life expectancy between County Durham and Darlington and England as a whole by 2013 Reduce the prevalence of cardiovascular disease, including stroke and diabetes and improving related health services Reduce obesity levels in the population and contribute towards an increase in life expectancy, ensuring a narrowing of the gap, by the provision of a 5 level adult obesity service across County Durham and Darlington.		Goals: Level 2 services from January 2010 at the cost of £100K Full delivery of service at £400K/ annum Level 3 service from January 2010 at cost of £100K with full year costs of £400K/ annum Communication strategy, including commissioning of social marketing research and development of appropriate messages, at the cost of £20K per annum. (£20K in year 1) Delivery of training programme including costs of venues and dietetic and other associated staff, £50K/ annum. (£2K in year 1) Commissioning of Physical activity team of 6 exercise specialists and venue and equipment costs, £250K/ annum. (£26K in year 1) Revision of multi-agency physical activity strategies for County Durham and for Darlington focusing on increased access and equity of access by 2008 (Darlington) and end 2009 (County Durham) Revision multi-agency food and health strategies by end 2009. Commission consistent, evidence-based service provision for people in County Durham and Darlington based on levels of service. One pathway used by all practitioners for adult obesity. Raise prevalence of adult obesity slowed with prevalence being at England average by 2013.	Red	Red		Frozen	Frozen	Current State (December 2008): Inequitable access to physical activity opportunities and to healthy food. Variety of community and primary care-based weight management approaches in place. Inconsistent obesity pathways currently operating. Lack of capacity for bariatric surgery. 16 Nov 09 - Level 2,3,4 obesity service specifications being finalised. Level 2&3 funding remains frozen in the AOP. December update No change	N	Y	349	62	0	0
	0910-103	01/10/2009	Y	10/09/2009	Tim Wright (via Jonathan Wrann)	Affordable warmth/fuel poverty programme in County Durham and Darlington The project will enhance the current programme in County Durham and Darlington by expanding two core elements Goal: Better Health, Fairer Health within its later life section identifies two core elements to support the vision of 'The North East will be the safest, healthiest and happiest place to grow old'. These are establishing regional targets for uptake of Warm Front grants and for winter health protection. The second is to measure and report upon local progress towards the abolition of ever winter deaths.	WCC29, WCC30, VSC03	Specification developed Advertised to providers Provider appointed - start date 10 Sep 09 Metrics Emergency fund expanded to support 5% more people in 2009/10, 10% more in 2010/11 and 20% more in 2011/12 The social marketing element will support the role out of Life Channel to clinics, community hospitals, urgent care centres during 2010. Negotiations with DCC and DSC will commence to roll out of Life Channel to libraries, community centres, leisure centres. A range of additional communications material will be developed during 2010. At least 30 additional community champions will be identified and supported via a commissioned programme. An R&D/service evaluation will be commissioned in 2011 to identify the impact of the programme on peoples perception of their health and well being.	Red	Red		Frozen	N/A	The emergency fund, currently being funded via a non recurrent resource and a key element of this programme, is now virtually spent There is an urgent need to identify funding to continue to support this particularly now as winter approaches and more professionals are referring increasing numbers of people with a limiting long term health condition The social marketing element of this programme has continued only because of this resource from financial year 2008/09 December update The emergency fund has been closed since mid December 2009 with 12 people are currently waiting to have warmer homes improvements. In terms of remedial action, negotiation with Durham County Council has commenced to explore whether they can contribute to the fund The social marketing element of this programme has commissioned a market research company to identify people's recognition, knowledge and understanding of current fuel poverty/affordable warmth literature	N	Y	120	0	0	0
	0910-104	01/09/2009	N	TBC	Wendy Bagnall (via Jonathan Wrann)	Healthy Schools Plus The project is based on the link between improving health and reducing inequalities and raising educational attainment. Healthy Schools Plus: Support schools to engage with and achieve Healthy Schools Plus (working title), the next stage of the National Healthy Schools Programme (NHSP). Schools will be given a £500 grant on engagement to support progress towards achievement of identified local health outcomes. Healthy Schools Plus provides a framework for universal provision and targeted interventions based on health needs assessments. By end March 2013 218 County Durham and 38 Darlington Schools will be actively engaged with Healthy Schools Plus.	WCC4, WCC16, WCC39, WCC40, WCC41, WCC42, VSB04, VSB05, VSB06, VSB08, VSB13, VSB14, VSC26, CQC(NP)	By December 2009 engage 100% of all schools in Co. Durham & Darlington with the Co. Durham and Darlington Healthy Schools Programme (CDDHSP) achieving the national participation target Maintain 100% engagement rate from January 2010 onwards to mainstream the healthy schools agenda Increase the number of schools achieving Healthy Schools Plus (working title) to 100% of all schools eligible in a given year based on the number holding National Healthy School Status (NHSS) validation for 3 years Increase number of schools registered with NHSP website/database Increase number of schools actively engaged with Healthy Schools Plus Increase number of schools achieving Healthy Schools Plus (data commencing January 2011) 100% schools to be registered by end December 2009 43 Durham schools & 2 Darlington schools to be actively engaged with Healthy Schools Plus by end March 2010.	Amber	Amber		Frozen	N/A	Go live has been shifted to November 2009 due to a delay in the National Programme. Further slippage of start date until 2010. Unlikely to deliver in the original timeframe 16 Nov 09 The final model is different to what was anticipated and hence the move from the current to the enhanced model and engagement with schools will be a longer process than anticipated. Events to be held 23 Nov to encourage schools. Unlikely to be moving to enhanced model before next financial year, will not achieve goals in the original specified timeframe December update 5 Jan 2010 100% schools are registered with the NHSP. Have begun to recruit schools on the first step of the process towards engagement with the Healthy Schools Enhancement Model (actual file). It is anticipated that schools will be regarded as engaged from April 2010. Current metrics will need to be reviewed once delivery of the HS Enhancement Model is established	N	Y	19	0	0	0

Pathway Area	Funding	Planned Go Live Date	Scheme Commenced? (Y/N)	Start Date or if not commenced revised start date	Project Lead	2009/10 Key Objectives	Map to targets (hide)	Goal(s) associated with 2009/10 objective	Current progress against goal(s) for pathway area (red/green)	Prediction of year end (red/green)	Potential to impact on Vital Signs/Operating Framework Priorities (Yes/No)	Current Financial Position (Frozen/Not Frozen) NHS CD	Current Financial Position (Frozen/Not Frozen) NHS D	Progress notes and/or remedial actions where there is a high risk to delivery (narrative)	Safer care north east	Better health fairer health	CD PCT Total Investment 2009-10 £'000s	D PCT Total Investment 2009-10 £'000s	Actual Funding drawn to November £'000s NHS CD	Actual Funding drawn to November £'000s NHS D
		0910-251	01/06/2009	N	TBC	Sharon Kebell	Support of Domiciliary Care Workers by Preparation of a Medication administration Record (MAR) sheet when a prescription is presented for a patient assessed as requiring the service.	WCC29, VSC19	Amber	Amber		Frozen	N/A	Funding frozen, not started. Scheme would potentially reduce burden on preparation of boxes for patients which has capacity issues. To be raised via CDRG			14	0	0	0
		0910-096	01/10/2008	Y	01/04/2009	Dianne Woodall (via Jonathan Wrann)	Tobacco Control (Smoking Quitters) Equitable access for stop smoking/increase quitters Quitters per 100,000 population aged 16+ Reduce smoking prevalence.	WCC6, WCC16, VSC6, COSC(NP)	Green	Green	Yes	Frozen	Not Frozen	At quarter one County Durham had achieved 1,185 quitters at 4 weeks, Darlington achieved 265 quitters at 4 weeks. Both on target to achieve vital signs. Four new stop smoking providers have been approved with a further seven new providers coming on line. Two areas of the tobacco programme have been subjected to delays in commencing. The services will come on line Jan 2010. There is also a delay in commencing youth advocacy work due to a delay in receiving the regional research on the evidence. The research, which will provide the evidence for this work, is now due in Jan 2010. December update Quarter 2 Performance data: Durham 1220 quitters; Darlington 205 quitters This exceeds vital signs target	N	Y	106	19	106	19
		0910-092	01/04/2009	Y	01/04/2009	Richard Healion (via Jonathan Wrann)	CVD Risk assessment and management pathway Primary prevention of CVD by the provision of a CVD risk assessment and management pathway. CVD risk is assessed and suitable therapeutic or lifestyle interventions offered to reduce the risk Objective: Reduce health inequalities.	WCC46, WCC47, WCC60, WCC51, VSC81, VSC82, VSC24, VSC12, VSC13, COSC(NP)	Green	Green	Yes	Frozen	Not Frozen	December update This year programme on target to deliver 100% of 1/5 population NHS County Durham and Darlington, in Deliver 2010 have committed to an accelerated roll out of the programme, stating that all those in 40-74 age group (approximately 270,000 people) should have an actual risk recorded by 31 December 2014. This equates to approximately 60,000 health checks per annum from 2010. There is a risk this will not be achieved if funding is not maintained or increased. d. A pilot programme is underway to deliver the health checks in community settings. Eight pharmacies are taking part and have undertaken over 115 health checks in the first three months, equating to approx 250 by end of the six month period. Delivery of Health Checks in workplaces will follow pharmacies and there are discussions underway about delivering Health Checks in Frankland prison December update IT system now in house (myquest) more robust than previous providers (MSD). MSD contract has been cancelled	N	Y	502	89	348	89
		0910-056	01/09/2009	N	TBC	Matthew Thomas	Telemedicine	VSA06, VSA07	Red	Red		Frozen	Frozen	a. There is slippage to original perceived timescale to Jan 2010 due to process taking longer than anticipated but no risk to service delivery b. Current position is that the service spec is currently being drafted and finalised prior to going to Enablers Group after which it will be ready to go through the procurement process Due to stop on funding currently at standstill until reallocation Fees then start by end of financial year but likely not Jan Should still deliver intended outcome	Y	Y	413	73	0	0
Continuing Care		0910-250	01/04/2009	Y	01/04/2009	Amanda Jones	CHC Additional Pressures To put in place additional resources to cover the estimated growth in CHC. Additional resources are required in a number of areas: 1. Anticipated referral of LD clients following the transfer to the LA of S28a monies. 2. Estimated 10% increase in new referrals due to the implementation of the National Framework for CHC. 3. An anticipated rise in S117 aftercare costs once the 50:50 joint agreement between the PCT and LA has ended. 4. Continuation of the Respite Care contract at Brabourne House for CHC & FNC clients (Cath Scott is the Lead). 5. Financial provision for the CHC Darlington Joint Domiciliary Care Contract with the LA and implementation.	VSC15, VSC04, VSC19, WCC53, VSC11, VSC12, VSC13	Amber	Amber		Frozen	Not Frozen	a. NHS County Durham: Recurring 2,806K (taken £2,143K in month 3 - budget voucher 189). Non recurring 2,500K. Work is ongoing to calculate a forecast to full year based on the first 3 months of the financial year b. NHS Darlington: Recurring 875K (taken £200K relating to Dom. Care, £375K for other pressures in month 3 - budget voucher 130) Non recurring 357K (taken £357K for other pressures in month 3 - budget voucher 131) All funds drawn down for Darlington PCT and this budget is still forecast to overspend; as of 31 Aug CHC budget overspend by £33K. Some of funds for County Durham have been drawn down, to date £2,143k has been taken from recurring allocation and added to CHC budget. The balance is £853k recurring and £2,500k non-recurring; this is currently frozen. At the end of Aug the budget showed an overspend of £362k and a forecast overspend of £876k. 25 Nov 09 The October month end finance report shows an overspend of £730k for CHC in County Durham however, this allows for an additional 30 clients per month from month 8 to the end of the financial year. At the end of October the finance report for CHC in Darlington showed an overspend of £362k with the forecast continuing to allow for 2 new clients per month to the year end. Further work to disaggregate the budgets by the Department of Health Benchmarking codes is being considered, which will enable more accurate reporting but is dependent upon the Q&A Coni database being fully implemented and operational across all localities. County Durham's forecast outline for CHC in month 8 has improved by £832k and is currently forecasting an overspend of £11k. In month 8 Darlington is forecasting an outturn overspend of £950k. An 'invest to save' paper is due to be discussed at the Management Executive on 23/12/09 and if agreed could provide a cost saving of £700k across County Durham & Darlington in years 2010/11. Reviews are now being targeted which should positively influence the forecast outturn position of Darlington.	Y	Y	5,306	932	2806	932
		0910-035	01/10/2009			Jule Dhuny	Offender Health - Mental Health to commission community equivalent mental health services based on the needs of the population to reduce rates of self harm and suicide to increase access to primary mental health care and specialist mental health services	WCC39, VSC05, VSC06, VSC2, VSC02, VSC22	Red	Red	Yes	Frozen	N/A	Band 6 OT and 2 Band 6 RMN appointed. Upgrade Band 6 to 7 OT for clinical supervision. Low Newton and Deerbolt YO1. Currently scheme is frozen due to financial constraints The key developments of the Mental Health Review will be the implementation of a 'stepped model of care' to ensure mental health needs of patients is met.			500	0	200	0
		0910-037	01/07/2009			Jule Dhuny / Helen Bell	Offender Health - Alcohol Misuse reduction in the rate of healthcare and hospital admissions where alcohol is the primary or secondary cause	WCC42, VSC26	Green	Green	Yes	Frozen	N/A	•Reduce number of external hospital escorts and secondary care expenditure •100% of prisoners to receive brief alcohol interventions following referral •Alcohol audit tool as part of the reception screening process with 100% of prisoners screened by Year 4 •100% of prisoners referred for treatment receiving treatment programmes •100% of prisoners to be retained in treatment for more than 12 weeks. The project is making good progress. In support of the project, a social photographer (Adrian Clarke) has consulted with women offenders, with the aim of capturing their thoughts on what their needs were before sentence, during prison term and following release. The consultation is in the form of a portrait photograph taken in their own surroundings and a short personal interview, with booklets and a DVD produced as an educational resource. Early findings demonstrate that when discussing 'health', the women focus on their mental health and describe their fear on incarceration.	Y	Y	100	0	100	0
		0910-140	01/04/2009	N	N/A	Sue Dixon	Inpatient Challenging Behaviour Beds	N/A	Withdrawn			N/A	Frozen	Planned Go live date - 01/07/09. Effective June 09 DAAT is Lead Commissioner and NEOHCU to work alongside DAAT to ensure a joint commissioning approach. NEOHCU to implement pilot work to support offenders through the prison process. A pathway will be developed from the community into custody and on release will be supported by the community services aftercare and support team. Key outcomes from the pilot will be: • Implement the AUDIT screening tool on reception/healthcare • Offer an indication at what level a person has been drinking in the community • Prison staff can implement the Brief Intervention dependent on score • Establish care pathways back into the community • Offer aftercare, support and relapse prevention programmes in the community. The relapse prevention works to be based on an already successful programme commissioned and delivered in the community by the National Probation Service - County Durham. The programme has recently won an award for good practice and will make a significant contribution to addressing the reducing re-offending agenda Project has slipped and is currently frozen due to financial constraints It is the intention that a meeting will be held in August/September with the Regional Lead for Health and Social Care in Criminal Justice to explore how the learning from this work may be further supported by HSCCJ.	Y	Y	0	350	0	295
		0910-118	01/09/2009			Nigel Nicholson	Improving Access to Psychological Therapies To put in place the necessary preparations in 2009/10 to ensure that NHS County Durham can be part of the IAPT programme in 2010/11 Commission a comprehensive and co-ordinated primary care mental health service which increases access to psychological therapy	WCC27, WCC28, VSB04, VSC02, VSC06, VSC08	Amber	Amber	Yes	Frozen	N/A	Currently frozen due to financial constraints			309	0	0	0
		0910-130	01/09/2009			Sue Dixon	Psychological Therapies (NHS Darlington) increase capacity in local services to deliver NICE compliant services.	WCC27, WCC28, VSB04, VSC02, VSC06, VSC08	Amber	Amber	Yes	N/A	Frozen	1/3rd workforce identified Training provider identified Anger management services running Contract being monitored.	Y	Y	0	75	0	0
		0910-073	01/04/2009	Y	01/04/2009	David Britton	Five new clinical Directed Enhanced Services (Learning disabilities)	VSC05, VSC07, VSC22, VSC33	Amber	Amber		Frozen	N/A	The funding should transfer to the GMS / PMS budget as the service is currently being funded from the budget at risk		Y	213	0	0	0
		0910-117	01/09/2009	N	Not Known as funding currently frozen. Unlikely to now commence until April 2010	Les Grey	Autism Spectrum Disorder Assessment and Support Service for Adults with a Learning Disability (NHS CD) To ensure that children and adults with a suspected Autism Spectrum disorder have their condition recognised by appropriately trained health professionals and following diagnosis, receive timely and appropriate treatment and support. Evidence of transitional pathways between childrens and adult services that promote positive outcomes; improved choice of support provider if required, development of services that are based on individual need, seamless transition between services, increased control. Provider will compile quarterly return of numbers and types of health professionals who have been engaged by the service, details of any training that has been provided including level and number of participants.	WCC30, VSC06, VSC08, VSC05, VSC07, VSC22, VSC33, VSA06, VSA07	Will not commence until 2010			N/A	N/A	Will contribute towards the achievement of the SHA's "7 No's", CDPCT - shift towards services that are personal, sensitive to individual needs and that maintain independence and dignity, promote health and well being and reduce future ill health costs, promote inclusion and tackle health inequalities. WCC competencies NSP's for mental health and children. Information will be gathered by provider who will establish baseline data regarding current state and provide annual updates on improvements in quality, waiting times, diagnosis, activity through agreed mechanisms for public involvement such as audit, survey or questionnaire. Increased awareness of ASD amongst health professionals working in children's or adult services through the development of a targeted programme of engagement with health professionals in acute, primary and specialist health services Evidence of transitional pathways between childrens and adult services that promote positive outcomes such as; improved choice of support provider if required, development of services that are based on individual need, seamless transition between services, increased control Evidence to be provided by production of agreed joint protocols, feedback from service users and carers/parents, statistical data from childrens and adult commissioners re numbers of people who are being supported and type, level and cost of service, reduction in the number of complaints/concerns registered with PALS of 10% based on number in previous year Funding for this development has been further slipped from a start date of September to December 2009. Finance (Mark Pickering) aware and has adjusted year one available funding to reflect this. Service specification is being completed and initial discussions with potential service providers are on going			0	0	0	0
		0910-117	01/09/2009	N	Not Known as funding currently frozen. Unlikely to now commence until April 2010	Les Grey	Autism Spectrum Disorder Assessment and Support Service for Adults with a Learning Disability (NHS CD) To ensure that children and adults with a suspected Autism Spectrum disorder have their condition recognised by appropriately trained health professionals and following diagnosis, receive timely and appropriate treatment and support. Evidence of transitional pathways between childrens and adult services that promote positive outcomes; improved choice of support provider if required, development of services that are based on individual need, seamless transition between services, increased control. Provider will compile quarterly return of numbers and types of health professionals who have been engaged by the service, details of any training that has been provided including level and number of participants.	WCC30, VSC06, VSC08, VSC05, VSC07, VSC22, VSC33, VSA06, VSA07	Will not commence until 2010			N/A	N/A	Will contribute towards the achievement of the SHA's "7 No's", CDPCT - shift towards services that are personal, sensitive to individual needs and that maintain independence and dignity, promote health and well being and reduce future ill health costs, promote inclusion and tackle health inequalities. WCC competencies NSP's for mental health and children. Information will be gathered by provider who will establish baseline data re current state and provide annual updates on improvements in quality, waiting times, diagnosis, activity through agreed mechanisms for public involvement such as audit, survey or questionnaire. Increased awareness of ASD amongst health professionals working in children's or adult services through the development of a targeted programme of engagement with health professionals in acute, primary and specialist health services Evidence of transitional pathways between childrens and adult services that promote positive outcomes such as; improved choice of support provider if required, development of services that are based on individual need, seamless transition between services, increased control Evidence to be provided by production of agreed joint protocols, feedback from service users and carers/parents, statistical data from childrens and adult commissioners re numbers of people who are being supported and type, level and cost of service			0	0	0	0
Mental Health		0910-126	01/09/2009	N	Not Known as funding currently frozen. Unlikely to now commence until April 2010	Les Grey	Autism Spectrum Disorder Assessment and Support Service for Adults with a Learning Disability (NHS Darlington) To ensure that children and adults with a suspected Autism Spectrum disorder have their condition recognised by appropriately trained health professionals and following diagnosis, receive timely and appropriate treatment and support. Evidence of transitional pathways between childrens and adult services that promote positive outcomes; improved choice of support provider if required, development of services that are based on individual need, seamless transition between services, increased control. Provider will compile quarterly return of numbers and types of health professionals who have been engaged by the service, details of any training that has been provided including level and number of participants.	WCC30, VSC06, VSC08, VSC05, VSC07, VSC22, VSC33, VSA06, VSA07	Will not commence until 2010			Frozen	N/A	Funding for this development has been further slipped from a September to a December 2009 start date. Mark Pickering is aware and has adjusted year one available funding to reflect this. Service specification is being completed and initial discussions with potential service providers are on going			163	0	0	0

Pathway Area	OGIM No.	Planned Go Live Date	Scheme Commenced? (Y/N)	Start Date or if not commenced revised start date	Project Lead	2009/10 Key Objectives	Map to targets (hide)	Goal(s) associated with 2009/10 objective	Current progress against goal(s) for pathway area (red/green)	Prediction of year end (red/green)	Potential to impact on Vital Signs/Operating Framework Priorities (Yes/No)	Current Financial Position (Frozen/Not Frozen) NHS CD	Current Financial Position (Frozen/Not Frozen) NHS D	Progress notes and/or remedial actions where there is a high risk to delivery (narrative)	Safer care north east	Better health fairer health	CD PCT Total Investment 2009-10 £'000s	D PCT Total Investment 2009-10 £'000s	Actual Funding drawn to November £'000s NHS CD	Actual Funding drawn to November £'000s NHS D
	0910-142	01/09/2009	Y	01/09/2009	Les Grey	In Reach Support for Independent Providers of Residential Accommodation (LD)	VSC06, VSC07, VSC22, VSC33, VSA06, VSA07	Partnership working with TEWV to develop this service linked to the delayed discharge in patients (CAMPUS) and those on the Local Authority 'Coming Home' List. Implement service variation with TEWV to enable two Band 5 nurses to be seconded into this project. Develop an 'In Reach' service to support independent residential providers across Durham and Darlington. Ensure the provision of high quality care, through an improved knowledge of the health needs of their learning disabled residents, and develop partnership arrangements with providers of mainstream health and social care services.	Green	Green	Yes	Frozen	N/A	Funding for this developmental project reduced to one-year, non-recurrent, therefore original OGIM may not now be fully achievable. Dec Update Service commissioned			85	0	0	0
	0910-122	01/04/2009			Sue Dixon	Improve long term care for people who have dementia	WCC27, WCC28, VSB04, VSC02, VSC06, VSC08	Undertake engagement exercise Listening event scheduled June 09 - concluded Focus Group scheduled for September 09.	Red	Red	Yes	N/A	Frozen	Provide on-going support mechanism, inclusive of information sharing and advice provision, regarding access to legal and local service. 16 Nov 09 funding currently frozen	Y	Y	0	44	0	0
	0910-124	01/09/2009			Nigel Nicholson	Dementia Home Care Support Services	WCC27, WCC28, VSB04, VSC02, VSC06, VSC08	Develop a range of services that fully meet the changing needs of people with dementia and their carers. All individuals within County Durham who have a diagnosis of dementia to have access to a Dementia Care Advisor	Red	Red	Yes	Frozen	N/A	Currently frozen due to financial constraints			190	0	0	0
	0910-131	01/09/2009	N	Not Known as funding currently frozen. Unlikely to now commence until April 2010	Les Grey	Dementia Assessment and Support Services for Adults with Learning Disabilities	WCC27, WCC28, VSB04, VSC02, VSC06, VSC08, VSC05, VSC07, VSC22, VSC33	Achievement of National Dementia Strategy key objectives of: earlier diagnosis and treatment changing public and professional attitudes enabling people with dementia and their carers to live well with dementia by the provision of good quality care for all Operating Framework 2009/10 objective of driving up standards and improving quality of dementia services and SHA priorities, national and local targets etc. Data will be sought from a variety of sources including feedback from individuals and their carers on an annual basis via questionnaire, waiting times information from NHS Trusts and General Practice.	Red	Red	Yes	Frozen	Frozen	Draft service specification has been completed and will be going to enablers shortly Initial discussions have been held with TEWV and development notified in the 'pipeline' Will need to discuss with procurement whether this development needs to go to full tender or can be classified as an extension of currently provided dementia services Service Provider will be required to provide baseline data on current levels of quality, waiting times and training needs.			78	14	0	0
	0910-129	01/09/2009	N	Not funded	Nigel Nicholson	Liaison Nursing - Mental Health in Older People	WCC29, WCC30, VSC25, VSC06, VSC08		Not funded			N/A	N/A	Currently frozen due to financial constraints			0	0	0	0
	0910-134	01/09/2009			Nigel Nicholson	Early Onset Dementia	WCC41, WCC40, VSC02	Enhance existing early onset dementia service	Red	Red	Yes	Frozen	N/A	Currently frozen due to financial constraints			84	0	0	0
	0910-135	01/09/2009	N	Not Known as funding currently frozen. Unlikely to now commence until April 2010	Les Grey	Dementia Assessment and Support Services for Adults with Learning Disabilities	VSC06, VSC07, VSC08, VSC22	This initiative will build on current limited resources to ensure timely access to diagnostic assessment for adults with a learning disability across County Durham and Darlington, coordination with mainstream MHSOP services and development and implementation	Red	Red	Yes	N/A	Frozen				0	16	0	0
	0910-137	01/04/2009	Y	01/09/2009	Sue Dixon	Older Person Mental Health	WCC39, WCC40, VSB04	Enable earlier access to diagnostic services Enable links to full range of support services Enable opportunity to create advanced statements (Mental Capacity Act) Develop memory clinics at TEWV	Amber	Amber	Yes	N/A	Frozen	Service pathway identified Engagement work completed Service model being considered. Nov 09 Service specification developed Funds drawn down but not allocated to TEWV budget Service variation for TEWV identified to start 1 Sept 09	Y	Y	0	02	0	0
	0910-144	01/04/2009			Cath Scott	Intermediate Care for Older People with Mental Health Problems	VSC02, VSC25	•Reduce average length of stay for patients age 65 + with ICD10 code R41.0. Target of 5% reduction in 2009/2010 against 2007/2008 baseline •Reduce readmission rates for patients age 65+ with ICD10 code R41.0. Target of 5% reduction in 2009/2010 against 2007/2008 baseline. •Monitor caseloads of mental health assistants - metric to be specified in service specification.	Amber	Amber		Frozen	N/A	Pilot in Easington proposed; meetings have taken place to develop pathway and spec; slippage from proposed go-live date 1-Apr-09. 30 Nov 09 No change since last month			162	0	0	0
	0910-146	01/09/2009			Nigel Nicholson	Specialist Mental Health Advocacy Service	VSC02, VSC06	Enhancing specialist mental health advocacy services.	Red	Red		Frozen	N/A	Currently frozen due to financial constraints			100	0	0	0
	0910-148	01/09/2009			Nigel Nicholson	Mental Health Liaison in A&E	WCC36, VSC02	Enhance existing specialist mental health assessment services in A&E departments.	Red	Red		Frozen	N/A	Currently frozen due to financial constraints			61	0	0	0
	0910-212				Nigel Nicholson	Adult ADHD	VSC06, VSC07	To provide transitional and specialist support to young people and adults with ADHD.	Red	Red		Frozen	N/A	Currently frozen due to financial constraints			60	0	0	0
	0910-247	01/09/2009	Y	01/09/2009	Les Grey	Campus Reprovision Earls House (Delayed Discharge)	WCC35, VSC09	To work with TEWV NHS FT and the Local Authority on completion of an action plan to ensure that all 5 County Durham individuals who are currently resident in Earls House Hospital and not receiving any health or therapeutic interventions have their needs assessed and independent residential providers identified and that plans are in place to move these individuals prior to the DoH deadline of 2010	Green	Green		Frozen	N/A	Implement successful relocation of five County Durham and one Darlington Campus residents from Lancheater Road Hospital into independent residential accommodation by November 2009.			250	0	0	0
	0910-238	Commenced 01/12/08 - staged implementation	Y		Peter Taylor	Rural Ambulance Provision	WCC27, WCC36, VSC14	Following October Board approval extra provision of ambulance cover for rural areas - Upper Dales to provide better response to emergency situations and support the urgent care provision for satellite services	Green	Green	Yes	Frozen	N/A	Commenced 01/12/08 with staged implementation.			320	0	0	0
	0910-225	01/04/2009	Y	01/04/2009	Adrian Metcalf	CDDFT - Independent Safeguarding Authority Scheme	WCC36, VSB02, VSC33	New process for checks on all staff working with children and vulnerable adults requiring registration which carries a fee	Green	Green		Not Frozen	Frozen	Committed and paying for this			17	3	0	0
	0910-031	01/04/2009	Y	01/04/2009	Adrian Metcalf	Acute Services Investment to Improve Waiting Times	WCC24, WCC33, WCC34, WCC36, VSC20, CQC(EC), CQC(NP)	Improve waiting times for patients requiring surgery in acute hospitals (sustaining and improving on the 18 week target)	Green	Green	Yes	Not Frozen	Frozen	Money has been released to the provider			12,750	2,250	12,750	2232
	0910-245	01/10/2009	Y	01/10/2009	David Britton	Directed Enhanced Service for Minor Surgery	WCC27, WCC28, VSC26	To offset the increase funding due the national inflationary increase of 1.74% for the minor surgery directed enhanced service	Amber	Amber		Frozen	N/A	The funding should transferred to the GMS/PMS budget as the service is currently being funding from the budget at risk		Y	213	0	0	0
	0910-227	01/04/2009	Y	01/04/2009	Adrian Metcalf	CDDFT - Medicines Reconciliation	WCC40, VSB14, VSC19	Impact of joint NICE and NPSA guidance issued in December 2007	Amber	Green		Not Frozen	Not Frozen	Money committed Released to CDDFT as and when vacant posts recruited to			227	40	0	0
	0910-022	01/09/2009	Y	01/10/2009	Sarah Brown (David Thome - Consultant via Newcastle PCT)	Provide 24/7 urgent care clinical service to the population of Co Durham and Darlington	VSC14, VSC21	•Specification produced •Procurement conducted via contestability framework •Contract offered to partnership of CDDCHS and CDDFT. (Some elements of service went live July 09) •Full roll out planned for 01 Oct 09 •Full communication strategy educating patients, promoting services will be linked to SHA wide communications material •Increased patient flows both into urgent care and primary care •Reduction in inappropriate attendances at A&E •Reduction in non elective short stay admissions •Conditions presenting will be monitored •Will highlight gaps in service	Amber	Amber		Not Frozen	Not Frozen	Parallel procurement covering Easington is being managed through Primicare All preparatory work being managed by the multi-agency Urgent Care Steering Group chaired by Cameron Ward, Chief Operating Officer Project has gone live Too early to identify improvements from outcome metrics.	Y	Y	596	105	-710	203
Acute care	0910-023	01/04/2009	Y	01/10/2009	Sarah Brown (David Thome - Consultant via Newcastle PCT)	Urgent Care Communication Centre	VSC09	Provide a communications centre to co-ordinate all urgent care for County Durham and Darlington	Amber	Amber		Not Frozen	Not Frozen	• All preparatory work being managed by the multi-agency Urgent Care Steering Group Chaired by Cameron Ward, Chief Operating Officer • Work is referenced to NHS North East interest in piloting the national DH 3DN initiative Project has gone live Too early to identify improvements from outcome metrics but indicators are showing reduction in urgent care admissions.	Y	Y	1,020	180	719	187
	0910-239	01/04/2009	N	01/11/2009	Berenice Groves	Winter Pressures	WCC48, VSC25, VSC34, CQC(EC)	Planning required to cover demand issues which arise usually from winter conditions however evident that these pressures are around at many other times of the year Financial support is required to provide extra resources in times of great demand and a post to support the overall planning working with acute trust, community, social services, mental health and Local Authority	Red	Red		Frozen	N/A				1,275	0	43	0
	0910-260	01/04/2009	Y	01/04/2009	Lynn Wilson (via Jonathan Wrann)	CASH pilot in Consett area 3 year contract awarded from 1/4/09	WCC4, WCC20	Reduce STDs and teenage pregnancies for Queens Road surgery practice population between 16 and 24.	Green	Green		Frozen	N/A	Good progress in attracting patients to clinics This is an extension of a successful pilot from 2008/09 Limited risk to current service.			22	0	0	0
	0910-258	01/04/2009	Y	01/04/2009	Adrian Metcalf	Nicotine Replacement Therapy (NRT) in CDDFT	WCC8, WCC14, WCC16, VSB05, VSC18, CQC(NP)	Safeguard existing provision of NRT/ smoking cessation activities within CDDFT through recurrent funding three costs of NRT	Green	Green	Yes	Not Frozen	Not Frozen	Money committed. Paying for this service, on track			11	2	0	0
	0910-068	01/09/2009	N	01/04/2010	David Britton	Enhanced Service for Anticoagulation	WCC27, WCC28, WCC46, WCC47, WCC50, WCC51, VSB02, VSA04, VSA05, VSC23, VSC19, CQC(NP)	• Service specification produced by June 09 • The service will be in place by Jan 2010	Will not commence until 2010			Frozen	N/A	The Service Specification is with the Strategy Enabler Group awaiting final sign-off The new service will improve patient safety and improve the patient access to the service This will be replacing the existing National Enhanced Service for anticoagulation Slipped to commence Apr 2010		Y	162	0	0	0
	0910-048	01/07/2009	N	TBC	Debra Hartley (Brenda Bulman)	Dietetics Staffing	WCC35, WCC53, WCC Other, VSA06, VSA07, VSB01, VSB16, VSC10, VSC31, CQC(NP)	Requires an increase in staffing within the Nutrition and Dietetics service in order to level up and enhance service provision.	Red	Red		Frozen	N/A	Increased staffing requirement to level-up and enhance service provision Workforce, estates issues require overall strategy to clarify M&T issues related with potential additional staffing levels need resolution Metrics require agreement & financial issues to be clarified. Project plan in draft however no further progress because AOP frozen	Y	Y	128	0	0	0
	0910-143	01/07/2009			Cath Scott	Intermediate Care Services	WCC36, WCC27, WCC28, WCC53, VSA04, VSA05, VSA06, VSA07, VSB16, VSC10	•Reduce non-elective 2-5 day stay admissions for County Durham and Darlington patients aged 18 and over, with one of the following HRG's [D99, H23, H24, H31, H32, H41, H42, H99, L09, L10] attending CDDFT, Gateshead, Sunderland, North Tees & Hartlepool by 10% in 2009/10. •Reduce non elective re-admission for County Durham and Darlington patients aged 18 and over, with one of the following HRG's [D99, H23, H24, H31, H32, H41, H42, H99, L09, L10], attending CDDFT, Gateshead, Sunderland, North Tees & Hartlepool, by 20% in 2009/10 using 2007/08 baseline.	Red	Red		Frozen	N/A	Detailed costings required; subgroup of IC Strategy / Steering Group to be established to work through project plan Links with Falls Services to be established Slippage from proposed go live date 1-Apr-09 (note: there was a query regarding this date in first instance). 30 Nov 09 No change since last month	Y	Y	806	0	0	0
	0910-011	01/04/2009	N		Brenda Bulman	Musculoskeletal Tier 2 Service Quality	WCC27, WCC28, VSA04, VSA05, VSB16, CQC(NP)	Since the OGIM was put in expenditure plans have shifted considerably, but the main areas of spend will now be additional capacity in the CDDCHS service (negotiations ongoing), Choice Advisers (scoping work underway), and a new service at Healthworks. I anticipate spending the full £170k during 2009/10, although I have not spent any of it yet.	Red	Red		Frozen	N/A	To ensure delivery of waiting times per specification in North Durham and Darlington services, and potentially increased capacity in the North Durham service To ensure choice of secondary care provider is offered to patients being referred on To establish a service at healthworks Urgent meeting with CDDCHS 17/8/09 to understand position following advice that this is an unrealistic business case. 16 Nov 09 scheme currently frozen	Y	Y	170	0	0	0
	0910-149	01/07/2009			Cath Scott	Telehealth	VSA06, VSA07, VSB16, VSC16, CQC(NP)	•Reduce non elective admissions for County Durham and Darlington patients aged 18 and over, with a primary diagnosis of COPD [J40-J47], CVD [I60-I69] or diabetes [E10-E14], attending CDDFT, Gateshead, Sunderland, North Tees & Hartlepool, by 8% in 2009/10 using 2007/08 baseline. •Reduce non elective re-admissions for County Durham and Darlington patients aged 18 and over, with a primary diagnosis of COPD [J40-J47], CVD [I60-I69] or diabetes [E10-E14], attending CDDFT, Gateshead, Sunderland, North Tees & Hartlepool, by 5% in 2009/10 using 2007/08 baseline.	Red	Red		Frozen	N/A	Initiative builds on 2007/08 pilot; project plan to be developed; slippage from 1-Jul-09. 30 Nov 09 No change since last month			64	0	0	0
	0910-065	01/04/2009	Y	01/04/2009	David Britton	Directed Enhanced Service for Violent Patients	VSA06, VSA07	•Provide the GP Directed Enhanced Service for Violent Patients in line with the GMS regulations This will ensure that GPs their staff and their registered patient are not put at risk from patients with violent tendencies.	Amber	Amber		Frozen	N/A	This service was not previously funded appropriately and therefore the total costs under the revised payments in not fully understood. However in light of the spend to date it is unlikely that the allocation of £213K will be used by 31 Mar 2010. On current spend projections it is anticipated that total spend for the year will be £55k therefore £148k could be released.		Y	213	0	27	0
	0910-066	01/04/2009	N	Not Required	David Britton	Directed Enhanced Service for Minor Surgery	VSA06, VSA07 CQC(NP)	•Offset the increase funding due the national inflationary increase of 1.74%, for the minor surgery directed enhanced service	Amber	Amber		Frozen	N/A	The funding should transferred to the GMS/PMS budget as the service is currently being funding from the budget at risk		Y	170	0	17	0
	0910-067	01/04/2009	N	01/01/2010	David Britton	Local Enhanced Service for Nursing Extended Hours	VSA06, VSA07, CQC(NP)	•Deliver a local enhanced service to provide additional nursing support to the directed enhanced service for GP extended hours	Red	Red		Frozen	N/A	It is planned (subject to enablers group) that the service will commence on 1st October 2009. Slipped to start Jan 2010		Y	425	0	0	0
	0910-256	01/04/2009	Y	01/04/2009	Adrian Metcalf	Hepatology Hep C service (UHND & Prisons)	WCC30, VSA04, VSA05, VSA06, VSA07	This CDDFT proposal is to implement a comprehensive Hep C service at UHND and in the prisons, based on the agreed HCV Care Pathway which has already been agreed by the HCV Care Pathway in Durham Steering Group (HCPDSG), a multi agency group including PCT, CDDFT, Public Health and HPA	Amber	Amber		Frozen	N/A	Money committed. Paying for this service, on track			180	0	0	0
	0910-233	01/07/2009			Cath Scott	Syringe Drivers for use in Nursing Homes	WCC Other	•Reduce non-elective admissions in those aged 70 and over, by 5% in 2009/10 from baseline 2007/08.	Red	Red		Frozen	Frozen	Work on OGIM progressing; further information on costings requested by finance; risks re patient safety still to be addressed. 30 Nov 09 No change since last month	Y	Y	30	5	0	0

Pathway Area	OGIM No.	Planned Go Live Date	Scheme Commenced? (Y/N)	Start Date or if not commenced revised start date	Project Lead	2009/10 Key Objectives	Map to targets (hide)	Goal(s) associated with 2009/10 objective	Current progress against goal(s) for pathway area (red/green)	Prediction of year end (red/green)	Potential to impact on Vital Signs/Operating Framework Priorities (Yes/No)	Current Financial Position (Frozen/Not Frozen) NHS CD	Current Financial Position (Frozen/Not Frozen) NHS D	Progress notes and/or remedial actions where there is a high risk to delivery (narrative)	Safer care north east	Better health fairer health	CD PCT Total Investment 2009-10 £'000s	D PCT Total Investment 2009-10 £'000s	Actual Funding drawn to November £'000s NHS CD	Actual Funding drawn to November £'000s NHS D	
	0910-136	01/09/2009	N	TBC	Christine Scollen	Integrated Falls Services & Fracture Liaison Services To ensure individuals presenting with a fragility fracture and/or other significant risk factors are systematically screened for osteoporosis and are offered evidence based interventions in order to improve outcomes; additional resource in form of Osteoporosis Specialist Nurse and Admin Support to be commissioned.	WCC29, VSB15, VSB16	•Reduce non-elective hip fracture admission rate in 365s by 5% during 2009/10 from 2008/09 baseline (as measured by ICD-10 codes [S720, S721, S722 and/or HRG codes 82-89]	Will not commence until 2010		Yes	Frozen	N/A	Work in progress against OGIM RAG status - estates outstanding. No RAG status applied to medicines management. Issues raised with line manager. 3-months slippage from proposed go-live date. Potential for further slippage related to recruitment into post. It should be acknowledged this resource is to uplift to an existing service. The service specification has been formally signed off and is currently with existing providers for self assessment as part of the contesability process. 29 Nov 09 Enablers group identified issues with estates and this has prevented recruitment of staff Plans to recruit can be continued in 09/10 with anticipation of recruitment to posts early 10/11 if recurring funding confirmed Funds currently frozen This service development forms a key part of the older peoples agenda In regard to the contesability process, providers have self assessed against the service specification. Now in action planning phase Slippage of full amount available	Y		67	0	0	0	
	0910-029				Sarah Brown	Integrated Transport Delivering a co-ordinated scheme across County Durham & Darlington comprising of Local Authority, North East Ambulance Service NHS Trust, volunteer drivers schemes, hospital link and shuttle services. Reduction in amount of transport travelling into same areas, coordinated delivery. Confident, contented population viewing an improvement in transport provision. No patient will wait more than 60 minutes to access health facility	WCC29, VSB15, VSB16, CQC(NP)		Red	Red		Frozen	Frozen					204	51	0	0
	0910-147	01/04/2009			Cath Scott	Multi Disciplinary Assessments for People with Complex Needs To ensure timely and appropriate multi disciplinary assessment of patients with complex needs requiring long term care on discharge from hospital, to increase health assessment bed capacity.	VSC 11, VSC 12, VSC 13, VSC 03	•Reduce average length of stay for non elective admissions for County Durham and Darlington patients, with one the following HRG's [D99, E99, H99, L99, Q99], attending CDDFT, Gateshead, Sunderland, North Tees & Hartlepool, by 5% in 2009/10 using 2007/08 baseline.	Red	Red		Frozen	N/A	Builds on pilot work; needs to link with winter planning; costings to be quantified; slippage from 1-Apr-09. 30 Nov 09 No change since last month	Y	Y	162	0	0	0	
	0910-075	01/04/2009	Y	01/04/2009	David Britton	Five new clinical Directed Enhanced Services (Ethnicity)	WCC29, WCC30, VSA06, VSA07, VSB16, VSC37, CQC(EC)	•Deliver the National directed enhanced services in GP practices for recording newly registered patients ethnicity This is a 2 year DES and will end on 31 Mar 2010 (unless otherwise advised by the DoH)	Amber	Amber		Frozen	N/A	The funding should transferred to the GMS/PMS budget as the service is currently being funding from the budget at risk	N	Y	43	0	0	0	
	0910-078	01/04/2009	Y	01/04/2009	Lorae Rose (via Jonathan Wrann)	Attention Difficulties To commission a sustainable multi-agency pathway and approach to improving mental health and social outcomes for children, young people and their families.	VSC22	•Effect a 20% reduction of specialist CAMHS referrals •Effect a reduction in waiting times - in line with the national waiting times targets •10% Reduction in exclusions from schools •Improved local access - to be delivered in childrens centres lessening the stigma of a mental health problem •Single point of access via the Common Assessment Framework •Early intervention and prevention	Green	Green		Not Frozen	N/A	Substantiated a non-recurrently funded team for the Attention Diffculty pathway commenced 1st April 09 On track to deliver outcomes December update No change, still on track			255	0	255	0	
	0910-083	01/04/2009	N	01/09/2009	Lorae Rose (via Jonathan Wrann)	Enhancing CAMHS LD Challenging Behaviour Service It was identified in the SHA Specialist Mental Health & Learning Disabilities Review (2004) that there should be a dedicated C&YP Challenging behaviour service. This nursing post is to enhance the challenging behaviour team in Tier 3 CAMHS LD that split out from adults in line with the review which will greatly strengthen the cohesion to a service which has been significantly overlooked for years.	VSB12, VSC29, CQC(NP)	To achieve the recommendations in the NSF to shift to CAMHS LD patient ration	Green	Green	Yes	Not Frozen	N/A	Band 7 nurse appointed, started Aug 09 Development start date September 09 All on target December update No change, still on track			44	0	44	0	
Maternity & newborn care	0910-095	01/04/2009	Y	01/09/2009	Lynn Wilson (via Jonathan Wrann)	Sexual Health To reduce rates of under 18 conceptions, repeat abortions and sexually transmitted infection including late diagnosis of HIV through improving access to services, improving health choices and support for vulnerable populations. Goals: •To reduce the under 18 conception rate from 45.5 in Durham and 48.3 in Darlington to the national average (38) by 2013. •Ensure adoption of the "You're Welcome" quality criteria in primary care services. •Targeted interventions with young people at greatest risk of teenage pregnancies; looked-after children/care leavers circa 300 young people 15 - 17. •To reduce subsequent unwanted teenage pregnancies and abortions. •To increase provision of LARC implant in primary care. •To reduce under 18 conceptions through primary prevention and the availability of emergency oral hormonal contraception via community pharmacies. •To increase awareness of pregnancy risk and methods of prevention. •To reduce health inequalities, risk taking behaviour and improve access to contraceptive choices for young people 16,000 11 - 16 across CDD. •All young people not in education, employment or training evidenced as high risk to TP conceptions offered contraceptive outreach support. •To reduce unintended conception of clients accessing drug and alcohol services.	WCC4, VSB06, CQC(NP)	•18 practices by 2010 • 87 pharmacies by 2010 •Commission social marketing campaign •Develop 6 health drop-in services in schools and colleges by 2010 •Target SRE 19 hotspot schools approx 17,500 young people.	Green	Green	Yes	Not Frozen	Not Frozen	December update No change, still on track	Y	Y	273	48	273	48	
	0910-079	01/04/2009	Y		Lucy Wheatley	Children's Development Post - Darlington Only Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working	WCC8, WCC9, WCC10, WCC11, VSB09, VSB10, VSB12	Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working.	Green	Green	Yes	N/A	Not Frozen	Realignment of services to develop integrated working. In process of implementation Staff in post Invoice received and signed by commissioner on - passed to finance Will meet target standards, Childrens Act 2004, NSF, Nis, 53,55,56,65,69,92,112,112,115,118, LAA 23 Nov 09 Staff in post. These are not quick wins. Reflected in Breastfeeding, Obesity, T/P, Imms targets.They are about reconstructing services as part of Children's Trust assured by DH and DCSF.	Y	Y	0	20	0	20	
	0910-084	01/04/2009	N	TBC	Ian Williams / Lucy Wheatley (via Jonathan Wrann)	Family Support	VSB09, VSC33, CQC(NP)	Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working.	Red	Red		Frozen	N/A	December update Pat Keane has confirmed the details of the following release of funding in this line: Surestart - to be picked up from Family Support AOP line Pick up of Health / Health Visitor posts - from the beginning of new financial year Pick up of SALT / posts - from the beginning of the new financial year Safeguarding - to be picked up from Family Support AOP line We have also agreed to fund the Safeguarding Health Visitor - again with recruitment timescales I expect this to be funded from 1st April 2010. (I have informed Diane Richardson)	Y	Y	272	0	0	0	
	0910-086	01/04/2009	Y		Lucy Wheatley	Integrated Locality Teams - NHS Darlington Only Children's Development Post - Darlington Only Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working	WCC8, VSC33, CQC(NP)	Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working.	Green	Green	Yes	N/A	Not Frozen	Realignment of services to develop integrated working In process of implementation Staff in post Invoice received and signed by commissioner - passed to finance Will meet target standards, Childrens Act 2004, NSF, Nis, 53,55,56,65,69,92,112,112,115,118, LAA 23 Nov 09 Staff in post. These are not quick wins. Reflected in Breastfeeding, Obesity, T/P, Imms targets.They are about reconstructing services as part of Children's Trust assured by DH and DCSF.	Y	Y	0	200	0	200	
	0910-089	01/04/2009	Y		Ian Williams / Lucy Wheatley (via Jonathan Wrann)	Services for School Age Children (including services for children not in school) increase support to families, children and young people to lead health and fulfilling lives	VSB09, VSC33, CQC(NP)	Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working ECM outcomes: •improved health and attainment for children •increased access and delivery of immunisations and vaccinations •increased advice to sexual health •increased advice around obesity and healthy eating •maintaining children in an education environment and increase attainment •promote emotional wellbeing and mental health and identify issues at an early stage •increased access to services for vulnerable families	Green	Green		Frozen	N/A	Will meet target standards, Childrens Act 2004, NSF, Nis, 53,55,56,65,69,92,112,112,115,118, LAA Integration of workforce and pathways in childrens services by Apr 2010 Funding of youth offending nurses - Sept 09 Project has gone live and is on track December update No change, still on track	Y	Y	170	0	166	0	
	0910-090	01/04/2009	N	01/09/2009	Ian Williams / Lucy Wheatley (via Jonathan Wrann)	Short Breaks for Disabled Children	VSC33, CQC(NP)	Short break provision to be transformed following government commitment, confirmed in NHS operating framework. "to develop, improve and transform short break services for disabled children." NSF, EDMC, NIS4, Aiming High for Disabled Children	Red	Red	Yes	Frozen	Frozen	Money drawn down and services in place. As part of the Aiming High political agenda, the OGIM brings about part matched funding expected to match funding allocated to both Durham and Darlington LAs. (The level of funding agreed as part of AOP process falls short of the match funding that should be in place, especially for NHS Darlington). As part of the integration developmental work for children with complex disabilities a series of short breaks have been delivered in partnership with both Durham CC and Darlington Council. Feedback from parents has been very positive and COHE have singled out the Durham approach as a model of good practice. In addition to short breaks, funding to support challenging behaviour is awaiting Board approval of tender, funding has been put in place with the voluntary sector for the specific project and services for technologydependent children continue to be progressed. Match Funding of Aiming High money given to LA as a central government expectation on PCTs. Key developments been agreed and approved and have one out to tender. The Challenging Behaviour Service is awaiting Board approval. If development does not go ahead. The risk to the PCT's reputation as partners are anticipating service provision as part of the integration programme; From a clinical perspective failure to deliver services to young people with complex care needs and disability will further disadvantage this vulnerable group and is likely to lead to increased use of higher level services in later life. There are political risks if this service does not continue to support and further develop much needed resource input for children and young people with complex disabilities. Aiming High is very high on the government's policy agenda and failure to progress this OGIM will have significant implications. There is no slippage planned in 2010 and beyond however the estimated slippage for 2009/10 is £700,000 18 Nov 09	Y	Y	1,445	255	76	255	
Children's services	0910-091	01/09/2009	N	01/10/2009	Lorae Rose (via Jonathan Wrann)	Targeted Mental Health in Schools The training and development of the teaching and non-teaching school staff and associate partners on emotional well-being/mental health issues. Is a continuum to enable the schools to be sustainable after 2-3 years pump-priming including a range of new innovative service provision for C&YP. This will create capacity in schools for early identification and early intervention of emotional well-being/mental health problems in young people	VSC29	•Appropriate referrals of children to child and adolescent mental health services provided by the PCT and other agencies such as mental health trusts and acute trusts •Reduction in waiting times - achieving & exceeding national waiting times •Reductions in rates of exclusions (temporary and permanent), and in behaviour 'incidents' within the school •Improvement in confidence and self esteem •improvements in parents/carers' confidence and skills in supporting their children and preventing problems arising •Improvement in the knowledge and skills of school staff •Increase in staff knowledge and awareness of children's mental health issues •Increase in staff confidence and ability to identify children with mental health problems •Increase in staff confidence and skills in working with children and young people at risk of and experiencing mental health problems	Red	Red		Frozen	N/A	Project Manager appointed to lead this development - development start date September 09 Committed funding - service agreed with clusters of schools across County Durham (Shildon, Chester-le-Street, Easington Colliery, Seaham, Murton, Bishop Auckland) - backfill arrangements already established with schools Estimated slippage £27750 30 Nov 09 Scheme suspended due to delay in release of funding December update No change			333	0	306	0	
	0910-101	01/07/2009	Y	01/07/2009	Dianne Richardson	Safeguarding Children This project is to ensure that County Durham and Darlington PCTs comply with Section 11 of the Children Act 2004 and have robust systems in place to safeguard and promote the welfare of children. This project will ensure that there is a robust team-wide database; the lack of this is currently flagged on the Risk Register. The project will also build extra capacity within the Safeguarding Children Team to meet the increase in demand, monitor the systems and enhance workforce development regarding safeguarding children. Goal: To ensure the PCTs comply with their duties under Section 11 of the Children Act 2004.	VSB12, VSC29	Development of high level service specification 31 January 2009 Approval by Information Management Commissioning Group - mid February 2009 Commission provider (£100k NR)/installation of database and data input Recruitment of temporary data entry clerks (£27k NR) Provision of training for the team members & communication plan for staff/evolve staff member using database Database complying with information governance; annual management and update of database (£20k R, but not 09/10) Recruit 1 WTE Band 7 Training Officer. Recruit 3 WTE Band 7 Senior Nurses. All 4 staff in post 01/07/09 Increase capacity of one part-time Band 6a post by 0.3 WTE from 01/04/09 Recruit 0.5 WTE Band 3 Secretary post for Escomb Road and 0.4 WTE Band 4 for JSH from 01/07/09.	Amber	Green	Yes	Not Frozen	Not Frozen	Recruitment has progressed with the posts - this was outside timescales due to HR and QIPP processes. All posts have been now appointed to except 0.5wte of the band 7 trainer post. Interviews were held for this but it was not possible to recruit. The 3 Band 7 Senior Nurses and the Admin post are now in post. The other staff will be in post as soon as HR processes allow. The 0.5wte Band 7 Trainer posts will be re-advertised as soon as possible Database not progressing due to the exploration of use of SystemOne. Still awaiting a final decision to be made with regards to the database as the meeting scheduled for 5 November in Wakefield had to be cancelled and there has been difficulty rearranging this. This will take place before the end of February. The lack of database is currently flagged on risk register, remain until full implementation All possible steps have been taken to ensure the speedy implementation of a safe system that satisfies information governance recommendations.		Y	257	45	257	45	
	0910-112	01/04/2009	N	TBC	Anthony Prudhoe (via Jonathan Wrann)	Therapy Provision	WCC29, VSB15, VSB16, VSC2, VSC33, CQC(NP)	Reduce health inequalities by improving health and wellbeing of children by following models of progressive universalism and integrated working Will meet target standards, Childrens Act 2004, NSF, Nis 53,55,56,65,69,92,112,112,115,118, LAA Speech, language and communication needs are met by implementing recommendations of Bercow report That children with additional healthcare needs are appropriately assessed and receive accessible services to meet their needs. NSF, EDMC, NIS4, Aiming High for Disabled Children	Red	Amber		Frozen	Frozen	18 Nov 09 Scheme currently frozen December update SALT/O.T - other funding - to be picked up from Therapies AOP line Pick up of the £173k short fall in SALT - this will be part costs for this year (1st Jan 2010) and then picked up recurring for the new financial year Pick up of cross therapy assistants (3 x Band 4s and 2 x Band 3s) costs and appointments to be confirmed - this will be part costs for this year (1st Jan 2010) and then picked up recurring for the new financial year Pick up of the £94k shortfall in O.T - this will be part costs for this year (1st Jan 2010) and then picked up recurring for the new financial year. We will also fund the required O.T "team" for North Easington: 1 x Band 6A, 1 x Band 7, 1 x Band 6, 1 x Band 3. Total costs £165k This funding will be available at the beginning of the new financial year - to allow for recruitment to take place over the next 3 months or so	Y	Y	1,754	133	0	0	
	0910-081a	01/04/2009	N	TBC	Lucy Wheatley (via Jonathan Wrann)	Complex and Continuing Health Care for Children with Disabilities, including palliative care The Continuing Health Care service for children (CHC) offers and provides assessment and coordination and leadership for children and young people aged between 0-19 years who have additional health care needs and whose home address is in County Durham and Darlington. To provide a community nursing service for children who have additional health care needs.	WCC33, VSB15, VSB16, VSC33, CQC(NP)	That children with additional healthcare needs are appropriately assessed and receive accessible services to meet their needs. NSF, EDMC, NIS4, Aiming High for Disabled Children. Identified nationally and subject of DH/DCSF letter 02 04 09. Gateway ref: 11593	Red	Red	Yes	Frozen	Frozen	Totally new service, but linked to services currently commissioned from several providers Children's Trust agreed service model Draft service spec complete Recruit to £200k of posts pa in September 2009 Some slippage likely through 2009-10, but service and total funding needed to meet need identified nationally and subject of DH/DCSF letter 02 04 09. Gateway ref: 11593 16 Nov 09 Scheme currently frozen December update No recruitment possible without investment	Y	Y	527	136	0	46	

Pathway Area	OGIM No.	Planned Go Live Date	Scheme Commenced? (Y/N)	Start Date or if not commenced revised start date	Project Lead	2009/10 Key Objectives	Map to targets (hide)	Goal(s) associated with 2009/10 objective	Current progress against goal(s) for pathway area (red/green)	Prediction of year end (red/green)	Potential to impact on Vital Signs/Operating Framework Priorities (Yes/No)	Current Financial Position (Frozen/Not Frozen) NHS CD	Current Financial Position (Frozen/Not Frozen) NHS D	Progress notes and/or remedial actions where there is a high risk to delivery (narrative)	Safer care north east	Better health fairer health	CD PCT Total Investment 2009-10 £'000s	D PCT Total Investment 2009-10 £'000s	Actual Funding drawn to November £'000s NHS CD	Actual Funding drawn to November £'000s NHS D
Childrens Health	0910-301	01/04/2009			Ian Williams/Anthony Prudhoe	Children's Centres Agenda - transitional support Transitional support for Health posts as part of Children's Centres Agenda			Amber	Green		Frozen	N/A	Not AOP scheme. NR funding from 2008-09. This scheme was initiated through 08-09 with no OGIM or project lead with the original intention to include them in 09-10 but due to underspend 08-09 was sucked into the 08-09 financial year through NR spend to save. All money has been spent on this line and money due is most definitely needed. December update No update required			920	0	795	0
Childrens Health	0910-302	01/04/2009			Ian Williams/Anthony Prudhoe	Increase in Parent Support Advisors in Schools	VSC33, CQC(NP)		Green	Green		Not Frozen	N/A	Not AOP scheme. NR funding from 2008-09. This scheme was initiated through 08-09 with no OGIM or project lead with the original intention to include them in 09-10 but due to underspend 08-09 was sucked into the 08-09 financial year through NR spend to save. All money has been spent on this line and money due is most definitely needed. December update No update required			600	0	600	0
Childrens Health	0910-303	01/04/2009			Ian Williams/Anthony Prudhoe	Support to parents of disabled children through Contact-a-Family	VSC33, CQC(NP)		Amber	Green		Frozen	N/A	Not AOP scheme. NR funding from 2008-09. This scheme was initiated through 08-09 with no OGIM or project lead with the original intention to include them in 09-10 but due to underspend 08-09 was sucked into the 08-09 financial year through NR spend to save. All money has been spent on this line and money due is most definitely needed. December update No update required			52	0	26	0
End of Life Care	0910-307	01/04/2009	Y	01/04/2009	Malcolm Moralee	Hospice Grants		To ensure that current palliative care service provision is funded appropriately to maximise available capacity There were no metrics set against increasing the hospice grant to 50%, work is currently ongoing to introduce KPIs that will allow the hospices to be monitored in the future	Amber	Amber	Yes	Not Frozen	N/A	Approval for the scheme to progress was granted - go live date 01 April 09 Increase in grant to hospices was raised from between 20-30% of the full cost up to 50%, which will lead to no unnecessary waits or delays, and no helplessness and no inequality No claw back of funding can be achieved			732	0	732	0
Other Mental Health	0910-300	01/04/2009			Adrian Metcalf	Delivery of new cancer waiting times 5 Band 4's for 1 yr	WCC25, WCC26, WCC27, WCC28, VSA11, VSA12, VSA13, VSA04, VSA05, CQC(NP)		Green	Green	Yes	Frozen	N/A				48	0	0	0
Other Mental Health	0910-319				Grace Bennett	Specialised Commissioning - Contingency for Mental health	WCC39, VSB04, VSC21		Red	Red		N/A	Frozen	Part funding drawn down			0	200	0	47
Other Mental Health	0910-304				Cath Scott	Specialised Services - Lucentis Investment Contingency Sum based upon population statistics	WCC27, WCC28, VSA04, VSA05, VSB16, VSC31, CQC(EC)		Red	Red		Frozen	Frozen				1,000	200	0	0
Elective Access - other Management/HQ Costs	0910-306				Adrian Metcalf	HRG4 Contingency sum for Elective Activity			Red	Red		N/A	Frozen				0	496	0	0
Elective Access - other Management/HQ Costs	0910-312				Amanda Hume	Contract management function			Green	Green		Frozen	N/A	Initial formation of the contract management team was non-recurrent funding. This line confirms recurrent funding, however a significant proportion of staff recruited have associated recurrent funding The closing date for applications for Phase 1 of this project was the 23rd October 2009. A total of 72 applications were received. All applications have been assessed against agreed criteria. All applicants are to be informed of the outcome of the project assessment process by the end of November with successful interventions anticipated to begin delivering in January 2010. December update 50% of year one funding (£850,000) has been paid to the provider. An update of successful Physical Activity initiatives will be available next month			228	0	0	0
Obesity	0910-316	01/04/2009	Y	01/04/2009	Dianne Woodall (via Jonathan Wrann)	Changing the Physical Activity Landscape People (and their households) in County Durham aged 40-74 with an estimated and actual risk calculation of CVD greater than 20% increase their level of participation in physical activity	WCC6, WCC42, VSB05, VSC25	1. Scoping of the project 2. Preparing the plan and developing the performance management and evaluation framework. Commission projects and programme 3. Preparing the project and programme plans 4. Commissioning research organisations to conduct evaluation of specific themes	Green	Green		Frozen	N/A				1,700	0	0	0
Other Mental Health	0910-317				Grace Bennett	Mental Health Services for the NE To provide core funding, infrastructure and support for Mental Health NE (MHNE)	WCC40, VSB12		Red	Red		Frozen	N/A				96	0	0	0
Other Mental Health	0910-318	01/10/2009	N	TBC	Matthew James	IMS for Mental Health/Learning Disabilities/CHC Individual placements central server to manage regional data.	VSC05, VSC07		Red	Red		Frozen	N/A	This commissioning tool to the Mental Health and Learning Disabilities Commissioning Unit to work with Procurement North East, to urgently prioritise which services and providers in the region need to be targeted during 2010/2011 for improved commissioning and contracting arrangements. If the system is not in place in 1 December then there will be a high risk in not being able to achieve targets in 2010/2011 that could potentially save up to 5% on costs with major provider costs in behalf of all PCTs in the region. Also a reputation risk to all stakeholders and not being able to bring in cost efficiency savings The original funding approved was £38,000. The plan has been scaled down to achieve the project more quickly and more economically, at the cost of £19,960. Plans are ready to be implemented on 1 October 2009 23 Nov 09 Scheme frozen, ready to go live if money released			38	0	0	0
Other policy	0910-321				Mark Pickering	Economic Downturn Reserve - Darlington financial contingency			Amber	Amber		N/A	Frozen				0	500	0	150
Maternity & newborn care	0910-145	01/04/2009	Y	01/04/2009	Donna Thorne (via Jonathan Wrann)	Maternity Matters	WCC1, WCC2, WCC3, WCC4, WCC6, WCC7, WCC9, VSB06, VSB08, VSB11, CQC(NP)	<ul style="list-style-type: none"> Develop County Durham and Darlington maternity services to meet the Maternity Matters policy improve the quality of service, safety, outcomes and satisfaction for all women through offering informed choice around the type of care that they receive, and improved access to services whilst ensuring continuity of care and support Increase engagement with teenagers in antenatal care improve health outcomes for teenage mothers: less premature births; less babies with low birthweight; lower infant mortality; less postnatal depression Contract variation drafted Out to current provider and will be included into the sexual health screening and prevention service specification Decrease in under 18 conception rate Decrease of teenage parents NEET. Increase in teenage parents involved in the Teenage Pregnancy Steering Group thematic groups Increase in teenage parents engaged in childcare / parenting skills education Delay / prevention of subsequent pregnancies Break social isolation and develop peer support networks by providing a safe environment for young fathers to meet Develop fathers confidence by helping develop their skills in areas such as parenting, first aid, childhood illness Provide opportunities for physical activities Encourage the exploration of eating healthier for their own benefit and for their families Train 8 sonographers from CDDFT to learn new NT scan techniques. Programme of implementation coordinated across UHND, DMH and BA Provide Child Health Record Books from Foundation Trust- given for each baby born Midwifery service contact details visible in PCT literature / on PCT website. Meet Maternity Matters guidance to facilitate self referral into the local midwifery service & enable earlier access to maternity services (PSA 19) Maternity services developed and planned in line with local needs Recruitment anticipated October 09 Reduced number of obese and overweight pregnant women Increase access to lifestyle interventions for obese pregnant women Increase education on risks of obesity to mother's health and baby's health Increase in woman engaged in smoking cessation services; setting quitting targets & ceasing smoking during pregnancy (and after birth) Reduced no of babies born <2500g Improved identification of smokers during ante-natal care Clear pathways with referral times exist Midwives / Maternity Care Assistants / Health Visitors understand referral process and are able to access it easily Care is joint up to include midwife / GP / consultant / health visitor / mental health professional (e.g. if a midwife makes a referral she is aware of treatment pathway) Clear pathways exist for midwives to link into enhanced services for those considered more vulnerable or disadvantaged (domestic violence, learning disabilities, substance misuse) Maternity services work jointly with prison services to provide holistic support which includes perinatal care Increase attendances in use of community antenatal clinic Potential engagement / involvement of GP services Increase link up with GP surgeries to deliver maternity services - review on-going Clear signpost exist throughout County Durham and Darlington for all health professionals to access translation services Establish working group to bring together data, finance and operations from the PCT and FT Maternity Service to be delivered by tariff PCT to appoint Trainers Trainers are to be trained by UNICEF to deliver programme to all staff in contact with breastfeeding mothers so they receive Baby Friendly Initiative training Infant feeding support equitable across entire area PCT achieves target 2% increase in initiation rates year on year Recognise, co-ordinate and develop existing Peer Supporter work Provide externally accredited training course - programme being drafted Maternity care assistants present on every shift in UHND and DMH (equates to 12 Maternity Care Assistants) Robust data available for breastfeeding at initiation; 10-14 days; 6-8 weeks; 4 months and 6 months Social Marketing Project commissioned and implemented jointly with Public Health 	<ul style="list-style-type: none"> All areas of the OGIM are being actioned the main areas of spend will be additional capacity in the CDDFT and within the community Anticipate spending the full £2.3 million pounds during 2009/10 - slippage that has occurred has been planned for and identified against December update £1.4m of funding has been agreed (£300k Unicef programme; £340k Peer Support; £800k MCA) Once engaged in antenatal care teenage mothers are likely to consider stopping smoking, considering breastfeeding and planning contraception after birth. Co-ordinator appointed. Sonographers identified to attend the training Program of NT implementation in draft Child health books provided for each baby born PCPI Groups currently working on draft documents, leaflets, guidance and web based information. This work as an interim measure has been picked up by the Public Health Improvement Team A Job description 2 year fixed term has been through agenda for change, vcf currently being signed off PCT meets good to best practice standard by having dedicated capacity for all maternity services PCT has dedicated maternity lead and strategic framework in place for commissioning maternity services. Inclusion of maternal obesity within CDD Obesity Strategy with identified actions and accountable leads Pregnancy and Smoking Action Group Collecting evidence of best practice and strengthening action plan to include workforce development and capacity building A perinatal mental health group is established in CDD, workforce development and capacity building plans are being implemented throughout the trust and within the community provision Pathways are being mapped and strengthened A dedicated midwife is in post, workforce development and integration into the perinatal and broader health inequality agenda is currently being accessed as the maternity matters strategy and broader action plan is being developed and rolled out Actions identified and a planned approach is in place Capacity building within the workforce, pathways are now to be reviewed, consulted on and re-drafted Working group established - maternity service delivered by tariff on the agenda Trainers have been trained by UNICEF, accreditation and implementation Baby Friendly Plan has been drafted Backfill currently being provided to support equity across CDD. Permanent position's drafted Program being drafted MCA's recruited and providing cover on every shift Systems currently being rolled out and data collected Project commissioned and provided - Action Plan drafted to be implemented jointly with Public Health 	Y	Y	1936	342	0	0					