

Implementation Plans for 2010/11

The Improving Lives in Nottinghamshire joint commissioning framework laid out joint commissioning priorities for the next five years in eight 'chapters' now translated into the following seven workstreams:

1. Carers
2. Children
3. Mental health
4. Learning Disability and Autistic Spectrum Disorder
5. Older People
6. Older People with Mental Health needs
7. Physical disability and sensory impairment

Five strategic joint commissioning groups are responsible for overseeing implementation of these implementation plans. Every quarter, the chairs of these groups take responsibility for reporting on performance against the implementation plans to the Executive Joint Commissioning Group.

RAG rating for Joint Commissioning Implementation Plans

The traffic lighting definitions below are to be used in assessing delivery of the implementation plans. A judgement is required on the overall progress where there are a number of tasks contained within the same area of work.

RED – Not achieved/major issue(s) stalling progress
AMBER – Some issue(s) stalling progress
GREEN – Achieved/on course to deliver as planned

Where an action is identified as **RED**, further detail regarding the level of risk and contingency arrangements is required. Where an action has been identified as red for more than two quarter, a more detailed report is provided to the Executive Joint Commissioning Group.

Implementation Plan	Number of red flags	Red flagged action/outcome	Level of risk	Contingency arrangements and comment
Carers	0			
Children	1	<p>50% reductions in the under 18 conception rate by 2010</p> <p>Set a downward trend in the under 16's conception rate</p>	High	In advance of the dis-establishment of the TP Team @ 31.03.10, invitations for tender for the C Card Scheme and the Training Programme will be issued in November 2010. The offer evaluation process will take place in early January with the intention of identifying an organisation to commence delivery of these services from April 2011.
Mental health	1	To improve access to accommodation and housing (with appropriate levels of support for those known to statutory services	High - delays due to proposed Supporting People cuts and still awaiting NHCT business case for lead provider for OATS	Work will continue once there is clarity regarding SP funding
Learning Disability and Autistic Spectrum Disorder	0			
Older People	0			
Older People with Mental Health needs	0			
Physical disability and sensory impairment	1	Further roll out of information prescriptions	High	Post leading this work being deleted by NHS Notts. Info prescription service would cease. Current consideration is being given to transfer the IP worker with funding to NCC.

Carers - Quarterly Performance Report

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of Travel UP/DOWN				If Risk is identified RED please complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-compliance HIGH / MEDIUM / LOW	Are contingency arrangements in place? If YES provide brief outline	
C1	Provide universal and integrated information for carers	Develop information prescriptions to include information for carers	Implementation Plan agreed	Staff Time nhsnc Co-ordinators and NCC Carers Unit	AMBER	AMBER	AMBER				
C2	Enhance emergency respite services (ERS)	Promote ERS as part of Information Prescriptions Promote use of Emergency Care Develop pathways for access to ERS with EMAS	Establishment of easy access to ERS at point of admission decision Uptake of Information Prescriptions Emergency Cards uptake ERS uptake from EMAS	Staff Time Publicity materials	AMBER	AMBER	AMBER				
C3	Increase the number and range of Carer Break services	Promote availability of range of carer's breaks within health and social care including Dementia and End of Life Services	Carer's Implementation Lead in post Increase in number of breaks funded Agree commissioning arrangements	NHSNC Carer's Breaks funding	GREEN	GREEN	GREEN				
C4	Support Carer's who balance their carer responsibilities with employment	Support for carers in the workplace is promoted within public sector Development of resources for independent sector to support their carer employees Support carers in employment to enable them to stay in work	Information and advice available to NCC/NHS staff Availability of policy to support carer's in the workplace Numbers of carer's using resource pack	Staff time	AMBER	AMBER	AMBER				
C5	Provide support to GP Practices to enhance awareness and insight into carer needs and issues	Develop engagement and awareness with four Primary Care contractor groups	Pathways developed for all four groups	Staff time	GREEN	GREEN	GREEN				

Children and Young People

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of Travel UP/DOWN				If Risk is identified RED complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-completion HIGH / MEDIUM / LOW	Are contingency arrangements in place if YES provide brief outline	
CYP1	Reduce teenage conception rates and improve sexual health	Children and young people have good sexual health Children and young people have healthy and safe relationships Delivery of Teenage pregnancy action plan 2010-11	50% reductions in the under 18 conception rate by 2010 Set a downward trend in the under 16's conception rate		RED	RED	RED		HIGH	In anticipation of the dis-establishment of the TP Team @ 31.03.10, invitations for tender for the C Card Scheme and the Training Programme will be issued in November 2010. The offer evaluation process will take place in early January with the intention of identifying an organisation to commence delivery of these services wef 01.04.11.	Some elements of CAMHS funding will be reduced in 2011/12. At present services are being evaluated to help inform future commissioning. The CAMHS Partnership group has been disestablished. The strategy & work programme is now overseen by the Children's Trust Executive. the CAMHS lead commissioner post will be disestablished by 31.3.11 however emotional health and well being remains a priority in the Children and Young People's Plan 2011/12.
CYP2	Reduce teenage conception rates and improve sexual health	Children and young people have good sexual health Delivery of chlamydia action plans and sexual health and teenage pregnancy strategies - 2010/11	35% of 15-24 year olds screened for Chlamydia by 2010/11	Choosing Health funding PCT core funds Funding secure until 31.03.11	GREEN	GREEN	AMBER				Chlamydia screening in community settings is no longer under as much scrutiny as with the previous government. The work is being refocused to work with GPs rather than non-clinical settings. Targets may not be met but work will be improved through this measure. Budget for 2011/12 not yet clear and may be picked up via GP commissioning.
CYP3	Improve Emotional Health and Well Being	Children and young people have good emotional health and well being via CAMHS Programme	Emotional health of children Effectiveness of child and adolescent mental health CAMHS services Emotional health and well-being and child and adolescent mental health services Operating Framework (DH2007) VSB 12 Emotional Health and Wellbeing and CAMHS	Area Based Grant 19 (Children's fund) PCT funding through contracts with NCH and NHT for Tier 2,3 and 4 CAMHS services Funding secure until 31.03.11	AMBER	AMBER	AMBER				Some elements of CAMHS funding will be reduced in 2011/12. At present services are being evaluated to help inform future commissioning. The CAMHS Partnership group has been disestablished. The strategy & work programme is now overseen by the Children's Trust Executive. the CAMHS lead commissioner post will be disestablished by 31.3.11 however emotional health and well being remains a priority in the Children and Young People's Plan 2011/12.

CYP4	To reduce the negative impact of substance use and alcohol on children and young people	Key Outcomes : Children and young people chose not to take illegal drugs and used alcohol sensibly	Performance in relation to national indicators monitoring; Substance misuse by young people Number of first time entrants to the youth justice system aged 10-17 Re-offending rate for young people accessing substance misuse treatment Rate of permanent exclusions from school (drug and alcohol related incidents) Number of young people in treatment for substance use discharged in a planned way Alcohol related harm reported by young people Alcohol attributable hospital admissions <i>Number of referrals from</i>	Area Based Grant (secure until March 2011) Ministry of Justice funding Pooled treatment budget	AMBER	AMBER	AMBER				Work progresses however there is currently a vacant lead commissioner post until mid March. Some targets are not being met due to some in year budget savings. The assessment of targets remains a challenge. Future funding for the substance use agenda is currently unclear.
CYP5	Reduce obesity	Children and Young People have good physical health Children and Young People have healthy lifestyles	Performance in relation to national indicators monitoring; Obesity in primary school age children in reception Obesity in primary school age children in year 6 %age Breastfeeding initiation Uptake of health Start increase 5-16 year olds taking part in 5 hours PE and sport per week Increased uptake of free school meals.	Choosing Health funding PCT contributions Funding secure until 31.03.11	AMBER	AMBER	AMBER				The obesity programme faces significant challenges as the commissioning budget has been reduced and current services are being reviewed, and as such some milestones have not been achieved. Much of the childhood obesity work continues through partnership activity but remains at risk as partners face reducing budgets. PCTs lead on commissioning of this agenda with no LA financial contributions although NCC engages in the work via the partnership group for obesity.
CYP6	Improve Services for children with additional needs	Children and young people are more mentally and emotionally healthy Produce a joint commissioning action plan for children and young people with additional needs	Performance in relation to national indicators monitoring; Services for disabled children Special Educational Needs - statements issued within 26 weeks The Special Educational Needs (SEN)/non-SEN gap achieving Key Stage 2 English and Maths threshold The Special Educational Needs (SEN)/non-SEN gap achieving 5 A*-C GCSE's including English and Maths	Aiming High Grant Aiming High pathfinder funding NCC core funding PCT core funding Funding secure until 31.03.11	AMBER	AMBER	AMBER				The joint commissioning strategy is still being prepared and a joint commissioning group is being established to help progress the strategy and joint commissioning. This area of work remains a priority for NCC and PCTs for 2011/12, and will be included in the Children and Young People's Plan as a priority.

Learning Disability and Autistic Spectrum Disorder

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of travel UP/DOWN				If Risk is identified RED complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-completion HIGH / MEDIUM / LOW	Are contingency arrangements in place if YES provide brief outline	
LD1	Response to Six Lives (LD1)	Review current community Assessment and Treatment Teams (CATT) and consider extending teams across Notts and Bassetlaw Development of clear pathway for people with dementia and other conditions associated with ageing Dental review to be undertaken and implementation plan produced for 2011-12 to increase access to dental care	As per Six Lives Action Plan	Within current resources	GREEN	GREEN	GREEN				
LD2	Supporting People in their caring role	Make new carers services available as part of the national Demonstrator Site Programme Carer consultation on the current short breaks service	See Carers Implementation Plan	Within current resources	GREEN	GREEN	GREEN				
LD3	Develop appropriate accommodation services	All campus residents will be living in the community The Care Cost Calculator and other tools will check the price and quality of high cost services Develop preferred provider list of care homes based on cost and quality Review needs met through out of area placements and strategy for development of local services to meet these needs Develop housing plan to deliver housing strategy	Campus moves undertaken by December 2010 Applied to all new placements by October 2010 Applied to 50 highest cost existing placements List developed Report produced November 2010 with recommendations for future action Strategy developed Housing Plan developed	Within previously identified resources including some DH capital funding Within current resources £20k LDDF housing strategy		AMBER	RED	Low		All Service Users will have left NHS accommodation by the end of 2010 but there will be 4 persons in interim accommodation for 6 months whilst building work is completed.	As for Q2 however, the DH have identified Nottinghamshire as red due to a changed RAG definition. Also, residential care home approved list on hold due to Cabinet query, therefore this work may not be completed before 31 March 2011.
LD4	To enable smooth transitions from children's to adult services	A review of transitions services will be completed to assess the effectiveness	Review Completed	Within current resources	GREEN	GREEN	GREEN				Transitions protocol launched, Jon has written discussion paper and is having talks with CYPD
LD5	Ensure socially inclusive provision	To provide a range of activities that raise awareness of issues relating to people with learning disabilities To increase the number of people who are in employment who have a learning disability	Report to activities to LD SCG LAA target to have 179 people with learning disabilities known to the Council in paid work by March 2011	£30k Within current resources	GREEN	AMBER	GREEN ?				Comment on NHS Trust action required. Currently 170 people with LD known to the council in work. I work increased numbers and data cleansing. Anticipated target will be exceeded - BUT some issue relating to data collection may be giving inaccurate picture.
LD6	Enhance user involvement	To implement all planned changes to the Partnership Board	LDSCG LD Partnership Board	Within current resources	AMBER	AMBER	AMBER				Launch in May 2011. Carer reps already increased.
LD7	Ensure Citizenship	NHS Bassetlaw to increase the number of staff receiving safeguarding training that improves awareness of Hate Crime	80% of NHS Bassetlaw staff to receive training	Within current resources	AMBER	AMBER	AMBER?				comment required from bassetlaw?

ASD1	Supporting Carer's	A carer's support service will be provided for people with Aspergers	Identify resources Identify potential providers via carer's tender Ensure appropriate contracting and payment arrangements in place to commission service according to need	Funding to be identified (carer's grant - £30,000)	GREEN	GREEN	GREEN				1-1 outreach support being provided. Asperger's/Autism specific providers included on approved list of providers for carer services. Specific group activity may be set up 2011/12 if need can be evidenced.
ASD2	Social interaction Improving Mental Wellbeing	Develop new employment support service for people with Aspergers	Service operational	Within current resources	GREEN	GREEN	GREEN				Employment worker in post and helping people into work - figures included in LD above.
ASD/LD 1	Ensure dignity in care	All service providers to have anti-bullying policies with staff trained to implement them Provide bullying awareness training to 1000 service users Provide personal communication and health plans for people admitted to hospital for physical healthcare	Audit of providers completed Follow up audit completed Full provider compliance Quarterly monitoring information from provider Baseline Data considered and target set	Within current resources Within existing contract - £38,000 LDDF	GREEN	GREEN	GREEN				Audit not undertaken due to tenders being run. All contracts for residential, day service and CSE have requirement for anti-bullying policies which will be monitored as part of on-going quality assurance. Bullying awareness training on target. HEALTH PLANS???

Mental Health

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of travel UP/DOWN				If Risk is identified RED complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-completion HIGH / MEDIUM / LOW	Are contingency arrangements in place if YES provide brief outline	
MH1	Improved primary mental healthcare services	Roll out Improved Assess to Psychological Therapies (IAPT) in Bassetlaw Monitor the uptake and impact of IAPT in NHS Nottinghamshire County Monitor the number of physical health reviews of patients on practice SMI registers	IAPT service commissioned in Bassetlaw Report on progress of implementation plan of IAPT Plan and start a health equity audit of the IAPT service Analysis of achievement of QoF NH9 data	Within existing resources	GREEN	GREEN	GREEN				Bassetlaw IAPT service progressing well. County data obtained to undertake a Health Equity Audit.
MH2	To improve secondary care mental healthcare services	Ensure that quality improvements are achieved through CQUIN Ensure that services are accessed on the basis of equal access to equal need Undertake an Equality Impact Assessment in relation to the Age Equality Bill Ensure that the QIPP agenda is applied to mental health	Report on HONOS data Report on physical healthcare screening of patients with mental health problems Agree CQUIN quality improvement measures for 2010/11 Complete a health needs assessment/health equality audit of secondary mental health services Develop an action plan Identify any financial implications Complete a review of all services to determine which services can be delivered more cost effectively or be de-commissioned	Within existing resources	GREEN	GREEN	GREEN				96% of HONOS data achieved. 100% achievement on physical healthcare screening. Specialist psychological therapies HNA completed. Crisis resolution pilot in Newark and Sherwood to consider the needs of those over 65.
MH3	To reduce the rate of suicide and safeguarding service users	Implement suicide prevention action plan and achieve targets for 2010/11 Implement the recommendations of the Bradley Review (City leading) Monitor the use of the Section 136 suite	Arrange and hold a 'hotspots' meeting Scope the current position of mental health services in the criminal justice system 6 monthly reporting to MH SCG	Within existing resources Some non recurrent money for implementation of the Bradley Review which will be shared across Nottingham, Nottinghamshire and Bassetlaw PCTs	GREEN	GREEN	GREEN				
MH4	To increase the involvement of service users and carers	Ensure effective service user and carer engagement Improve advocacy services to support patient and carer involvement and influence	Map existing groups Develop a plan for future engagement with service users and carer's Hold service user and carer events twice yearly Review general advocacy services Re-commissioning advocacy services	Within existing resources £80k approx from existing resources	GREEN	AMBER	AMBER		Advocacy services will not be re-commissioned this year due to the pressures around financial assurance so risk is HIGH	Contingency is that advocacy will be re-commissioned in 2011/12.	Expected that replacement advocacy services will be in place Autumn 2011.
MH5	To address issues of diversity and promote inclusive strategies	To improve access to accommodation and housing (with appropriate levels of support for those known to statutory services)	As part of the MH Services Strategic Review 2010 a housing/accommodation forum is established to ensure appropriate settled accommodation is available (using a single care pathway model) A new range of services to provide settled accommodation and support (in line with national guidance) is developed Care support and enablement tender is completed	Within existing resources	GREEN	AMBER	RED		High - delays due to proposed Supporting People cuts and still awaiting NHCT business case for lead provider for OATS	Work will continue once there is clarity with SP funding	Work around housing/accommodation delayed due to proposed Supporting People cuts

MH6	To increase the third sector adult mental health care and service provision	To scope current service provision To provide an improved range of mental health employment and day service	Conduct a review of non NHS contracts to ensure that commissioned services are appropriately focused As part of the Day Services Review scope opportunities to shape market provision and market test for select provider list	Re-investment of existing funding	GREEN	AMBER	AMBER		High - it is unlikely that third sector commissioning will be increased in the current climate		It is unlikely that third sector commissioning will be increased in the current climate or until personal budgets are fully established.
MH7	To tackle stigma experienced by those with mental health problems	To better understand disability, bullying and hate crime to inform commissioning priorities in the future	A programme of group sessions and questionnaires delivered to identify the levels of type of disability, bullying and hate crime	Within existing resources	GREEN	GREEN	GREEN				
MH8	To improve economic wellbeing	Ensure that there are opportunities for employment for those in contact with secondary mental health services To support those experiencing common mental health problems to remain in employment	Report on %age of people accessing secondary mental health services in employment as part of the CQUIN Evaluate the impact of the individual Placement Support pilot being run by NHCT and roll out As part of the Day Services Modernisation Plan, promote service user led social enterprise or social firms Consult all stakeholders regarding the modernisation of day services (including employment services) Support implementation of the Fit for Work service pilot part of the health, work and Wellbeing programme led by Greater Nottingham Partnership in the Mansfield and Ashfield area. Receive progress report Confirm that employment support is provided as part of the IAPT rollout to Bassetlaw Clarify/publicise IAPT employment support (Bassetlaw) Monitor quarterly reports of IAPT employment support and numbers that return to work (Nottinghamshire County)	Within existing resources Nationally funded programme Within existing resources	GREEN	GREEN	AMBER				See concerns about IPS. All other actions on track

Older People

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of travel UP/DOWN				If Risk is identified RED complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-completion HIGH / MEDIUM / LOW	Are contingency arrangements in place if YES provide brief outline	
OP1	Early intervention and prevention services	Ongoing development of falls prevention services Development of oral health services Development of continence care Roll out of Handyperson Adaptation Service (HPAS) Review of First contact Signposting scheme Review of Activity Friends Review of Community Outreach Advisors	GPs and hospital staff trained in falls prevention Cost benefit analysis for social care of oral health services completed Community pharmacies to have undertaken Medicine use reviews on users of 4 or more medicines Service specification being developed to address the current inequities in the service provision between different areas of the county Develop training to health and social care independent sector staff to ensure equity across north and south Notts Countywide roll out of revised Preventative Adaptation Service and Handy Person Service provision Improvement Plan to LAA Health and Wellbeing Board Completion of Improvement Plan Completion of review	Workforce Development Grant - to fund delivery of training 2010-11 CLG funding £320,000 - 2010-12. Within existing mainstream funding between PCTs, NCC and district councils for the remainder Funding from PCTs, district councils and NCC Funding from PCTs and NCC	AMBER	AMBER	AMBER				
OP2	Enhanced joint working to facilitate integrated pathways between health and social care	Improve access and assessment to rehabilitation Develop health and social care services to prevent unnecessary hospital admission	Mapping of 'as is' and 'to be' pathways into intermediate care and START across south of county Identification of efficiencies through pathway mapping exercise Implementation of 1 year pilot on 'crisis response' service and generic health and social care community support	Within existing resources £126,000 joint funding to be funded by ASCH and Principia	AMBER	AMBER	GREEN				Urgent Community Support Service being implemented in Rushcliffe; staff recruited, induction planned and 'go-live' date 2/3/11. Some additional funding secured from Reablement funds to cover full funding of service.
OP3	Developing services that prevent unnecessary hospital admission and facilitate timely discharge	Integration of pathways between START (reablement) and intermediate care services Review of hospital discharge arrangement and services	Identification of efficiencies Reviews of locality/PBC area Intermediate Care services started Review of joint protocol on 'Delay Transfers of Care' Review and revision of 'Home from Hospital' scheme in Bassetlaw Retendering of 'Home from Hospital' scheme by NHS Notts County Develop business case for 'Home from Hospital' scheme in Newark as part of Newark Strategy	Within existing resources Reablement funding secured for 2011/12 £35,000 required	AMBER	AMBER	GREEN				Work on Delayed Transfers of Care Protocol ongoing. Proposal for 'Home from Hospital' scheme for N&S submitted for funding from Reablement funds and secured for 2011/12.
OP4	Improved End of Life Services	Embedding End of Life pathway Training to appropriate staff	Number of people able to choose to die at home Training being delivered to care home staff to improve service quality Review of two Continuing Healthcare social workers	Within existing resources Within existing funding and workforce development grant Further temporary funding through NCC	AMBER	AMBER	GREEN				16 Care Homes now signed up for GSF training. Training package developed for staff working with people with dementia at the end of life. Funding secured from Reablement funds to purchase drivers for care homes with the associated training.
OP5	Improved Quality of care home provision	Development of joint quality standards and joint monitoring procedures Full implementation of fairer price for care Care home project	Development of oral Health care, low vision	£50,000 funded by NHSNC in 2009/10 for Care Home Project	AMBER	AMBER	GREEN				Oral health training being delivered to care home staff (ongoing).

Older People Mental Health

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of travel UP/DOWN				If Risk is identified RED complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-completion HIGH / MEDIUM / LOW	Are contingency arrangements in place if YES provide brief outline	
OPMH1	Dementia Awareness training for staff	Improved public and professional awareness of dementia	Requirement of staff training included in 2010/11 SLAs for Acute Trusts (NUH & SFHT only) 'Memory Matters' roadshows Dementia Academy for GPs/Primary Care Develop and trial 2 training packages for care homes and home care: Dementia, End of Life Care for people with dementia	Dementia Strategy Group Dementia Strategy Group End of Life package funded by DH	AMBER	AMBER	GREEN				Requirement for training to be rolled over to 2011/12 SLAs. All actions completed.
OPMH2	Commission enough good quality memory services for the local population	Service specification developed and agreed with provider Include consideration of BME, LD and prison	Draft service specification developed by Notts City PCT Participate in Symmetrics modelling to inform future service - timescale to be agreed with SHA Options appraisal of new service model to be evaluated, including financial evaluation New service specification developed and agreed	With existing resources in 2010/11 Resource implications of new service model to be assessed	AMBER	AMBER	GREEN			Whilst the actions are being done, we have received a Business case from NHT (Oct 2010) stating that they would stop the existing service without additional resources. The contingency plan is to challenge NHT assumptions using Symmetrics modelling (although commissioners acknowledge there is a deficit in funding) and assess what can be implemented within existing resources.	Symmetrics modelling has confirmed current memory service is at capacity and demand increasing due to demographics. Business cases being written. Costs of memory services identified as Operating Framework commitment: County £350k, NHS Bassetlaw considering investment against other dementia commissioning priorities.
OPMH3	Good quality information	Develop information prescription for dementia Develop information for dementia in Newark and Sherwood locality	Information prescription in place Information developed and evaluated	With existing resources DH funding £25k in 2010/11	AMBER	AMBER	GREEN				Information prescription being redesigned to ensure appropriate for people with dementia. Notts County Council added dementia to webpage. Newark & Sherwood pilot TBC
OPMH4	Development of structured peer support	Evaluation of a peer support pilot in rural areas	Pilot established Co-ordinators appointed	DH Funding £88k in 2010/11	AMBER	AMBER	GREEN			Exit strategy as funding expires March 2011	Peer support pilot being extended to June 2011. Model being adopted by DASS (Dementia Advice & Support Service) to maximise service reach/benefit.
OPMH5	Care of people living with dementia in general hospitals is improved	Increased awareness and reduced stigma in general hospitals	Dementia Clinical leads in place in local Acute Trusts Ensure requirement for staff training included in 2010/11 SLAs for local Acute Trusts	Within existing resources	AMBER	AMBER	GREEN			Being evaluated via quality panels	Actions completed for NUH & SFHT. NUH & SFHT also involved in in-laws events developing workforce plan for dementia. Doncaster & Bassetlaw clinical lead for older people in post. Staff training requirements to be included in 2011/2012 contracts.
OPMH6	Review current crisis/rapid response services to improve along lines of existing Rushcliffe model	Implement new service model in Newark and Sherwood only in 2010/11	Business case approved by PCT Board	Reinvestment of existing resources	AMBER	AMBER	GREEN				Newark & Sherwood service staff in post and formal launch planned April 2011. Development of third team in Nottingham West.
OPMH7	Reduced use of antipsychotic medication	Reduced prescription of anti-psychotic drugs (by 2/3 over 3 years)	Scope methods Develop Plan	Within existing resources	RED	RED	AMBER			National audit of antipsychotics now underway. PCT'S will also be expected to publish their progress in reducing antipsychotics (although presumably this is not required until the baseline from the audit has been collected)	SHAs leading on this - funding now allocated to enable SHAs to undertake sampling audit to use for a baseline. Nottingham West cluster undertaking audit as part of prescribing scheme. Reviews included in dementia outreach specification for Nottinghamshire County.

OPMH8	Ensure the right assessment, treatment and long-term care services	Equality impact assessment of specialist services	Assess gaps by September 2010 Identify any financial implications by December 2010	To be assessed	AMBER	AMBER	AMBER			Areas of age inequality have been identified as: Crisis resolution (County not Bassetlaw Psychology part of Psychotherapy Financial assurance Assertive Outreach	Gaps identified but financial consequences not fully costed. Some gaps being addressed by other service changes e.g. crisis resolution partly addressed by crisis/rapid response teams(see OPMH6). Psychotherapy will be addressed via revised spec for Tier 4 IAPT.
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Physical Disability and Sensory Impairment

Ref	Commissioning Priority	Actions/Outcomes	Milestones	Resource Implications	Indicate Direction of travel UP/DOWN				If Risk is identified RED complete		Comments Q3
					Status Q1	Status Q2	Status Q3	Status Q4	Level of risk of non-completion HIGH / MEDIUM / LOW	Are contingency arrangements in place if YES provide brief outline	
PDSI1	Implementating the National Stroke Strategy	Implement year 3 of the local Stroke Action Plan	Jointly commissioned service in Bassetlaw - 2010 Satisfactory CQC Review National Project Evaluation Sustainability Plans	LA Stroke Grant NHSNC Stroke specific resource e.g. strokeability commissioning officers	GREEN	GREEN	GREEN				
PDSI2	Increase self-management and self help programme	Develop a multi-agency Nottinghamshire self care strategy	Strategy ratification	Resources have been identified via Expert Patient Programme	AMBER	AMBER	AMBER				
PDSI3	HIV/AIDS services in north of the County	Continued development of North Notts Positive Links Group Identify future commisioning intentions in South Notts	Commission support to establish user led organisation for HIV services to cover all of County Referrals Review current South Nottinghamshire Contract	AIDs Support Grant £75k (no longer ringfenced) NCC £22k, NHSNC - £17k	AMBER	GREEN	GREEN				
PDSI4	Development of Information Prescriptions	Further roll out of information prescriptions	Link with NHS Choice and expand to more conditions and implement training programme	PCTs and NCC recurrent funding 2010/11 and 2011/12	GREEN	GREEN	RED		HIGH	Current consideration is being given to transfer the IP worker with funding to NCC.	Post being deleted by NHS Notts. Info prescription service would cease.
PDSI5	Review equipment joint provision (ICES)	Commission new service following review	Joint Tender - July 2010 Contract award - January 2011 New service - April 2011	City Council City PCT NHS NC NCC Funding for 18 months	GREEN	GREEN	GREEN				
PDSI6	Mobility assessment service for blue badges	Improve mobility assessments for blue badge applicants	Use current GP funding to employ Ots to undertake mobility assessments	Around £41,000	GREEN	GREEN	GREEN				
PDSI7	Establish countywide advocacy service for people with physical disability and sensory impairment	Review provision of advocacy countywide	Consult with key partners and Advocacy Forum Agree future of advocacy services	Recurrent funding in place until March 2011 Funding to be identified by key partners as part of review	AMBER	AMBER	AMBER				
PDSI8	Communication aids joint provision	Review joint provision of communication aids	Agreed approach to provision of communication aids	Recurrent funding in place from NCC and both PCTs	GREEN	GREEN	GREEN				
PDSI9	Develop personalised responses to meet the needs of people with long term neurological conditions	Evaluation of Staying in Control individual health budgets pilot for people with long term neurological conditions Develop strategy to deliver improved support for disabled parents Develop community based Neurological service in partnership with third sector organisations	Twenty patients/service users by the end of the pilot period Consideration of longer term options Strategy ratification Third sector funding secured	Continuing healthcare funded on a per capita basis Resources to be agreed Around £170k over 2 years	GREEN	GREEN	AMBER				project ended - limited number of people being maintained on current PB arrangements