

Focus Area	Key Area	Description	Governance & Delivery			Project Status		Timescale	Progress update	key Risks / Issues	last updated														
			Primary Governance	Accountable Officer (SRO) & Agency	Operational Leads	Current Project Stage	RAG Status																		
Prevention & Early intervention	Community Equipment, DFG, Assistive Tech	Integrating AT with neighbourhood teams - Integrating AT with Primary Care - Deploy monitoring equipment - Enhanced response service - Review network of call centres / monitoring hubs - Increasing reach of AT - Integrating AT geographically and across user groups	Integrated Commissioning Board	Cath Mitchell, CCG	Operational Lead: Diana Mackay	DEVELOP	Pending	Approach fully scoped and implementation plan developed - December 2017 Implementation of new approaches: March 2018																	
	Ageing Well: Falls Prevention	- Develop and implement a falls prevention mass media campaign - Enhance and expand CPFT strength and balance exercise rehabilitation - Enhance/establish specialist falls prevention health trainer service in Cambridgeshire and Peterborough - Strengthen falls prevention delivery and integration in the community - Develop, and implement Fracture Liaison Services (FLS) across Cambridgeshire and Peterborough acute trusts - Public health falls prevention coordinator to lead, co-ordinate, monitor and evaluate the implementation of the programme and facilitate system-wide integration	STP-PCIN Delivery Group	Katie Johnson, Public Health	Project Lead: Helen Tunster Clinical Lead: Jackie Riglin HR Lead: Sarah Dunlevy / Tara Sutton Comms Lead: Mark Cole Finance Lead: Tracy Shepherd / Clare Andrews	DEPLOY	On Track	1. Falls primary prevention campaign: 01/01/18 - 27/8/18 2. Enhancement and expansion of strength and balance training provision: 01/10/17 - 8/1/18 3a. Enhancement of Falls Prevention Health Trainer Service - Peterborough: 19/06/17 - 8/1/18 3b. Enhancement of Falls Prevention Health Trainer Service - Cambridgeshire: 19/6/17 - 8/1/18 4. Strengthening falls prevention delivery and integration in the community: 1/4/17 - 7/11/17 5. Development and implementation of Fracture Liaison Service: 1/9/17 - 1/4/18	<table border="1"> <thead> <tr> <th colspan="2">Top 3 Achievements</th> <th colspan="2">Areas of focus</th> </tr> </thead> <tbody> <tr> <td>1. One band 7 started on 1/10/17 and start dates of the three others have been agreed (7/11/17 and 21/11/17)</td> <td rowspan="3"> <ul style="list-style-type: none"> Develop falls communications Consider and plan mechanisms for increasing pace of implementation Complete FLS scoping report Continue contract negotiations for Peterborough falls prevention health trainer services Finalise KPI trajectory </td> <td>Risk</td> <td>Score</td> </tr> <tr> <td>2. Band 4 therapy assistants posts advertised and shortlisting taken place</td> <td>Delay in falls assessments completed by nurses in Huntingdonshire and data collection due to issues accessing IT template when agile working</td> <td>9</td> </tr> <tr> <td>3. Everyone Health Falls Prevention Health Trainer service contract variation issued.</td> <td>Contract negotiations with Solutions4Health in regards to the Falls Prevention Health Trainer service may take longer than planned</td> <td>12</td> </tr> </tbody> </table>	Top 3 Achievements		Areas of focus		1. One band 7 started on 1/10/17 and start dates of the three others have been agreed (7/11/17 and 21/11/17)	<ul style="list-style-type: none"> Develop falls communications Consider and plan mechanisms for increasing pace of implementation Complete FLS scoping report Continue contract negotiations for Peterborough falls prevention health trainer services Finalise KPI trajectory 	Risk	Score	2. Band 4 therapy assistants posts advertised and shortlisting taken place	Delay in falls assessments completed by nurses in Huntingdonshire and data collection due to issues accessing IT template when agile working	9	3. Everyone Health Falls Prevention Health Trainer service contract variation issued.	Contract negotiations with Solutions4Health in regards to the Falls Prevention Health Trainer service may take longer than planned	12		Sep-17
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Ageing Well: Stroke prevention / Atrial Fibrillation	Develop and deliver programme for patients on the AF register not currently receiving anticoagulation. Targeted opportunistic case finding	STP-PCIN Delivery Group	Sue Watkinson, CCG	Project Lead: Jackie Brisbane Clinical Lead: Amrit Takhar Comms Lead: Helen McPherson Finance Lead: Neil Williamson	DELIVER	On Track	Scoping/Design: 06/03/17 - 17/04/17 Delivery Lead-Time: April to end June 2017 Works/Installation/Commissioning: April to end of June 2017 Practical Completion/"Go Live": 3: End of June 2017 Post-Project Evaluation: January 2018	<p>Top 3 Achievements</p> <ol style="list-style-type: none"> SLA signed by 22 practices Training event well attended and online training available for practise for GRASP-AF installation Templates ready for flu clinics <p>Areas of Focus</p> <ul style="list-style-type: none"> Equipment testing for ECG's to be finalised for roll out in flu clinics Templates need to be confirmed as ready for identifying the patients. Follow up with smaller practises that haven't signed up to see what support can be offered and whether they have gone with GPN offer. 	No significant risks		Sep-17														
VCS Joint commissioning	Mapping existing provision and identify opportunities for joint commissioning Develop strategic plan with partners to roll out joint commissioning	Integrated Commissioning Board	Cath Mitchell, CCG	CCG: Gill Kelly PCC/CCC: Oliver Hayward	DEVELOP	Slippage	1st phase Joint Commissioning Plan to include: March 2018 1. Process for co-production agreed and people identified 2. Set up VCS reference group 3. commissioners' total VCS & community resilience building spend, activity & contracts mapped 4. joint outcomes framework developed & agreed 5. return on investment assessment tool / process developed 6. develop costed plans to achieve outcomes - building on H&WB Strategies and informed by Wellbeing Summit outputs 7. incorporation into other plans system wide plans as relevant e.g. BCF, Council, STP 8. Agree governance to oversee plan implementation 9. Identify further investment opportunities Single Wellbeing Network commenced: December 2017	opportunities are being identified through the Joint commissioning board																	
Community services & MDT	MDT Case Management	Stratified Patient List: Developing effective interventions to support frail older people and adults with long term conditions/disability is establishing a robust mechanism to identify these patients who are at risk (case finding). Joint Care Plan: co-produce a shared care plan, which will quickly inform professionals of agreed care plans Integrated System Pathway to admission and discharge: Ensure an integrated pathway from early identification of need, through intermediate care provision to long term care support and supported early discharge Patient Based Information Sharing: MDT working systems to share patient data and appropriate information governance will be developed to ensure seamless care and reducing the need for the patient to tell their story more than once	STP-PCIN Delivery Group	John Martin, CPFT	Project Lead: Laura Searle Clinical Lead: Rhiannon Nally / Ben Underwood HR Lead: Cathy Mayes Comms Lead: Andrea Grosbois Finance Lead: Tracy Shepherd	DEPLOY	On Track	Phased roll out of case management to non-Trailblazer sites: to commence April/May 17. Pseudonymised tool for case finding rolled out: to commence August 2017. Joint Care Plan developed: January 2018. Frailty tool training implemented: to commence September 2017. Patient held record/information sharing approach implemented: March 2018.	<p>Top 3 Achievements</p> <ol style="list-style-type: none"> Business case supported by HCE Checks and references completed for B6 & 7 appointments. Final offers sent, start dates being confirmed. <p>Areas of Focus</p> <ol style="list-style-type: none"> Training and on-boarding for new staff HCA and Admin recruitment Engagement and integration system-wide via STP cardiology network (group to be established) and via Peterborough respiratory & cardiology services vertical integration initiative 	Staff unable to travel for training. Staff training only available in Cambs - Score 9 Financial risk to CPFT if not recurrently funded by CCG - Score 9		Sep-17													

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DTOC / HIC	8 HIC Model	Delivery of the 8 HIC to manage discharges, supporting the system to deliver the 3.5% DTOC target. Including: - Early discharge planning (Elective & Emergency) - Systems to monitor patient flow - Multi-disciplinary / Multi-Agency Discharge - Home First / Discharge to Assess - Seven Day Service - Trusted Assessor - Focus on Choice - Enhancing Health in Care Homes	A&E Delivery Boards (NWAFT & CUH)	Refer to DTOC Plans	Refer to DTOC Plans	DEPLOY	On Track	Refer to DTOC Plans	<p>Reablement : 20% increase in capacity - recruitment trajectory on track for PCC and CCC. Specialist recruiter in place to support. PCC: 12 additional step-down beds are being purchased from Clayburn Court to provide additional capacity over the coming months. Mobilisation is planned in a phased way over the next 6 weeks. CCC: continued commissioning of existing short term reablement beds at Doddington Court. In addition to this, a number of other reablement beds will be commissioned for 6 months and CCC are currently at the final stages of agreeing a service level agreement with the provider of additional bed capacity.</p> <p>Equipment and AT PCC: Moving and Handling Coordinator Occupational Therapist is now in post and is based within the Transfer of Care Team (TOCT). 7 Day Lifting Response service being implemented by Cross Key Homes, to commence 6/11. CCC: Community Equipment and Assistive Living Technology Services continue to prioritise hospital discharge in deploying equipment to support high risk support packages to both community and residential settings to manage risks and reduce the likelihood of readmission and manage DTOC pressures.</p> <p>VCS Provision: PCC: British Red Cross will be based in the Emergency Department to provide low level support and avoid unnecessary admissions. Go live implemented on the 16/10.</p> <p>Discharge to Assess (D2A) Pathway D2A Steering Group & Operational group established with full system commitment. High level operating model for SPOC and D2A agreed with D2A steering group. Phase 1 SPOC go live 19th September during DTOC week</p> <p>Continuing Health Care (CHC) 4Q Hospital Discharge Pathway Agreement to progress implementation of a 3 month CHC 4Q pilot for hospital discharges has been agreed. An implementation workshop and staff training has been held. Implementation commenced 6/11.</p> <p>Trusted Assessor PCC: joint Care Home pilot with South Lincolnshire County Council and LINCA to roll out in PCH from beginning December 2017.</p>	Risk of recruitment to large number of ICW and reablement support worker posts across the system Capacity at end of d2a pathway needs to be in placed, or will impact on patient flow.	Oct-17
Information, Communication and Advice	Information, Communication & Advice	Deliver a trusted source of 'one version of the truth', enabling information and advice provided to customers to be consistent, accurate and comprehensive; regardless of the point of access.	Integrated Commissioning Board	Charlotte Black, PCC/CCC	CCG: Nigel Gausden PCC: Tina Hornsby CCC: Ed Strangeways CVS: Louise Porter	DEVELOP	On Track	<p>1 Stage 1 - LGA Funded Demonstrator / Proof of Concept Develop MIDOS test environment: 08/09/2017 Test MIDOS: 15/09/2017 Produce Stage 1 evaluation - proof of concept report: November 2017</p> <p>2 LIP Search Platform Development - Go Live Go Live: March 2018</p> <p>3 Directory of Services Development March 2018</p> <p>4 Front End Search Functionality March 2018</p>	The persona development and lead researchers report has been finalised. The Data Standards have been developed. The working group has now been reformed as the Information and Data Standards Quality Group with a remit of the ongoing monitoring and embedding of compliance with standards across the partnership. LGA funded MIDOS test demo has been developed and tested. Evaluation report and toolkit being drafted. Next steps: develop approach and plan for moving to a live system wide solution.	If the cost of IT solution that meets the requirements of the specification is overly prohibitive, then this will impact on the ability to deliver a system wide solution. - Score 9	Oct-17
iBCF Housing	Investing in Housing for vulnerable groups	1. commit funds to enable acquisition of property. 2. property purchase. 3. accommodation available. 4. clients move in. 5. care plans review. 6. Savings available	Integrated Commissioning Board	Oliver Hayward, PCC/CCC	CCG: Richard O'Driscoll PCC: Nigel Harvey Whitten CCG: Cath Mitchell	DEVELOP	On Track	<p>1. Agree principles / prepare Business Case Mid August 2017 2. Start to source property (to meet time-line) August 2017 onwards 3. Property (accommodation) available Mid February 2018 4. Clients move in and benefits start to be realised. Mid March 2018</p>	Progress is being made to establish the commercial arrangements and selection criteria to support delivery of the project and ensure maximum impact is achieved,	None to report.	Oct-17