

Focus Area	Key Area	Description	Governance & Delivery			Project Status		Timescale	Progress update	Key Risks / Issues	last updated																																																																								
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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	we currently have an integrated community equipment service (ICES) across C&P. Work has been ongoing to identify the future provision for the ICES and to strengthen assistive technology. The DFG Joint Grants Policy continued to develop to ensure a consistent approach to appropriate conversations (re suitability of an adaptation or alternative options) and adaptations for residents across the county in order to improve outcomes for people in need of housing support across Cambridgeshire and Peterborough.		Dec-17																																																																								
	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="4">Performance</th> </tr> <tr> <th>KPI</th> <th>Overall Target</th> <th>Monthly Target</th> <th>Monthly actual</th> </tr> </thead> <tbody> <tr> <td>Number of multifactorial falls assessments by (i) Neighbourhood teams</td> <td>TBC by CPFT Dec 17</td> <td>TBC by CPFT Dec 17</td> <td>St Ives data expected Dec 17</td> </tr> <tr> <td>Number of multifactorial falls assessments by (ii) Falls prevention trainers</td> <td>218</td> <td>18</td> <td>Go live Jan 18</td> </tr> <tr> <td>Emergency hospital admission for injury due to falls in people aged 65+</td> <td>TBC by SDU</td> <td>TBC by SDU</td> <td>Data expected Jan 18</td> </tr> <tr> <td>Emergency hospital admission for fractured neck of femur in people aged 50+</td> <td>TBC by SDU</td> <td>TBC by SDU</td> <td>Data expected Jan 18</td> </tr> <tr> <td>Emergency hospital admission for fractured neck of femur including fragility #</td> <td>TBC by SDU</td> <td>TBC by SDU</td> <td>Data expected Jan 18</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th colspan="4">Key Meetings/ Next Steps</th> </tr> <tr> <th></th> <th>Oct</th> <th>Nov</th> <th>Dec</th> </tr> </thead> <tbody> <tr> <td>Interview therapy assistants (2<sup>nd</sup> recruitment) and specialist health trainer (Camps)</td> <td>-</td> <td>Completed therapy assistants 23<sup>rd</sup> Nov</td> <td>Health Trainer: 5<sup>th</sup> Dec</td> </tr> <tr> <td>Train CPFT staff in Huntingdonshire locality</td> <td>-</td> <td>Not completed on time</td> <td>Due by W/C 18<sup>th</sup></td> </tr> <tr> <td>Continue contract negotiations for FPHT service in Peterborough</td> <td>Not completed on time</td> <td>Not completed on time</td> <td>Due by W/C 4<sup>th</sup></td> </tr> <tr> <td>Winter message campaign completed</td> <td>-</td> <td>-</td> <td>Due by W/C 11<sup>th</sup></td> </tr> <tr> <td>Start comms plan for full Falls campaign</td> <td>-</td> <td>-</td> <td>Due by 12<sup>th</sup></td> </tr> </tbody> </table>	Performance				KPI	Overall Target	Monthly Target	Monthly actual	Number of multifactorial falls assessments by (i) Neighbourhood teams	TBC by CPFT Dec 17	TBC by CPFT Dec 17	St Ives data expected Dec 17	Number of multifactorial falls assessments by (ii) Falls prevention trainers	218	18	Go live Jan 18	Emergency hospital admission for injury due to falls in people aged 65+	TBC by SDU	TBC by SDU	Data expected Jan 18	Emergency hospital admission for fractured neck of femur in people aged 50+	TBC by SDU	TBC by SDU	Data expected Jan 18	Emergency hospital admission for fractured neck of femur including fragility #	TBC by SDU	TBC by SDU	Data expected Jan 18	Key Meetings/ Next Steps					Oct	Nov	Dec	Interview therapy assistants (2 <sup>nd</sup> recruitment) and specialist health trainer (Camps)	-	Completed therapy assistants 23 <sup>rd</sup> Nov	Health Trainer: 5 <sup>th</sup> Dec	Train CPFT staff in Huntingdonshire locality	-	Not completed on time	Due by W/C 18 <sup>th</sup>	Continue contract negotiations for FPHT service in Peterborough	Not completed on time	Not completed on time	Due by W/C 4 <sup>th</sup>	Winter message campaign completed	-	-	Due by W/C 11 <sup>th</sup>	Start comms plan for full Falls campaign	-	-	Due by 12 <sup>th</sup>	<table border="1"> <thead> <tr> <th colspan="4">Key Project Risks/ Issues</th> </tr> <tr> <th></th> <th>Of Escalation</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>FPHT contract may take longer than planned to agree. 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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	Slippage	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": End of June 2017 Post-Project Evaluation: January 2018	<table border="1"> <thead> <tr> <th>KPIs</th> <th>Target overall</th> <th>Monthly Target</th> <th>Actual</th> </tr> </thead> <tbody> <tr> <td>Number of signed SLAs</td> <td>30</td> <td>30</td> <td>30</td> </tr> <tr> <td>No of practises with Grasp AF installed</td> <td>30</td> <td>30</td> <td>30</td> </tr> <tr> <td>No of practises ready for data extraction</td> <td>30</td> <td>30</td> <td>29</td> </tr> <tr> <td>Flu clinic participation</td> <td>7 practises</td> <td>7</td> <td>6</td> </tr> <tr> <td>No of AF patients Diagnosed</td> <td></td> <td></td> <td>TBC</td> </tr> <tr> <td>Number of newly diagnosed patients starting Anticoagulation (2495 per year baseline)</td> <td>381 additional per year</td> <td>32</td> <td>TBC Dec</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th colspan="4">Key Meeting/ Next Steps</th> </tr> <tr> <th></th> <th>Oct</th> <th>Nov</th> <th>Dec</th> </tr> </thead> <tbody> <tr> <td>Baseline data extracted</td> <td>Not completed on time</td> <td>W/C 27<sup>th</sup> Nov</td> <td>Ongoing</td> </tr> <tr> <td>Newly diagnosed AF patients to have GP clinical review to determine intervention (support offered by AF Clinical lead)</td> <td>-</td> <td>W/C 27<sup>th</sup> Nov</td> <td>Ongoing</td> </tr> <tr> <td>Review existing patient caseloads in practices to determine if any need anti-coags now.</td> <td>-</td> <td>Not completed on time</td> <td>W/C 4<sup>th</sup> Dec</td> </tr> </tbody> </table>	KPIs	Target overall	Monthly Target	Actual	Number of signed SLAs	30	30	30	No of practises with Grasp AF installed	30	30	30	No of practises ready for data extraction	30	30	29	Flu clinic participation	7 practises	7	6	No of AF patients Diagnosed			TBC	Number of newly diagnosed patients starting Anticoagulation (2495 per year baseline)	381 additional per year	32	TBC Dec	Key Meeting/ Next Steps					Oct	Nov	Dec	Baseline data extracted	Not completed on time	W/C 27 <sup>th</sup> Nov	Ongoing	Newly diagnosed AF patients to have GP clinical review to determine intervention (support offered by AF Clinical lead)	-	W/C 27 <sup>th</sup> Nov	Ongoing	Review existing patient caseloads in practices to determine if any need anti-coags now.	-	Not completed on time	W/C 4 <sup>th</sup> Dec	<table border="1"> <thead> <tr> <th colspan="4">Key Project Risks/ Issues</th> </tr> <tr> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Delay in collection of baseline data means that patients on current caseload have not been reviewed in September - November leading to a risk of reduction in savings.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>SRO reviewing savings profile. The issue of data collection has now been resolved and the savings slippage will be determined once actual savings have been quantified so no actions for PCIN.</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Key Project Risks/ Issues								Delay in collection of baseline data means that patients on current caseload have not been reviewed in September - November leading to a risk of reduction in savings.				SRO reviewing savings profile. The issue of data collection has now been resolved and the savings slippage will be determined once actual savings have been quantified so no actions for PCIN.				Nov-17									
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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	Building on the Joint Commissioning Principles established during 2016/17, the existing arrangements are in the process of being reviewed by the CCG and the Councils, to develop joint outcomes and plans. The two separate C&P Wellbeing Networks merged into a single network in September 2017 to strengthen the co-ordination of and support for wellbeing services and VCS activity across Cambridgeshire and Peterborough to build in more support will be provided for vulnerable adults before they require the support of statutory services.		Nov-17																																																																									
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 Planco-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	Slippage	Phased roll out of case management to non-Traillblazer 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.	<table border="1"> <thead> <tr> <th colspan="2">Top Achievements</th> <th colspan="2">Areas of focus</th> </tr> </thead> <tbody> <tr> <td>1. Letter sent to all trailblazing practices to communicate data extraction start date of 6<sup>th</sup> November, further information and process map.</td> <td></td> <td>• First run of data was run by MDT coordinators on 6<sup>th</sup> November 2017. Ongoing focus.</td> <td></td> </tr> <tr> <td>2. Confirmation of all but 2 of the new staff start dates. First group of staff attended local induction 07/11/17.</td> <td></td> <td>• Kings Hall space situation still a priority. Potential to lease additional space by subletting.</td> <td></td> </tr> <tr> <td>3. Unfilled vacancies re-advertised with a closing date of 17/11/17. Interviews took place 24/11/17.</td> <td></td> <td>• MDT coordinator meeting with practices to agree the process they wish to follow in case finding, with the trailblazer teams.</td> <td></td> </tr> </tbody> </table>	Top Achievements		Areas of focus		1. Letter sent to all trailblazing practices to communicate data extraction start date of 6 <sup>th</sup> November, further information and process map.		• First run of data was run by MDT coordinators on 6 <sup>th</sup> November 2017. Ongoing focus.		2. Confirmation of all but 2 of the new staff start dates. First group of staff attended local induction 07/11/17.		• Kings Hall space situation still a priority. Potential to lease additional space by subletting.		3. Unfilled vacancies re-advertised with a closing date of 17/11/17. Interviews took place 24/11/17.		• MDT coordinator meeting with practices to agree the process they wish to follow in case finding, with the trailblazer teams.		<table border="1"> <thead> <tr> <th colspan="2">Project Risk</th> </tr> <tr> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>• Estates: Kings Hall: Will not be ready by go live date and a plan B has not yet been confirmed. Suggestion of use of Oaktree. Rooms, IT and parking details as yet unconfirmed. CPFT needs to be clarified urgently.</td> <td></td> </tr> <tr> <td>• Data required from practices on EMIS. Can the CCG support this via the Primary Care Information Team (PCIT)?</td> <td></td> </tr> </tbody> </table>	Project Risk				• Estates: Kings Hall: Will not be ready by go live date and a plan B has not yet been confirmed. Suggestion of use of Oaktree. Rooms, IT and parking details as yet unconfirmed. CPFT needs to be clarified urgently.		• Data required from practices on EMIS. Can the CCG support this via the Primary Care Information Team (PCIT)?		Nov-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	Reablement: recruitment is progressing well to support a 20% increase in reablement capacity. A number of appointments have been made, with further recruitment initiatives planned. Additional reablement step down bed capacity has been commissioned at Clayburn Court and will there will be a phased implementation from mid January. Moving and Handling Coordinator: this post is now based with the Transfer of Care Team with a view to support embedding integrated approaches to equipment and assistive technology to support discharge and this post was in place from the 16th October and initial outcomes are being monitored. A falls response pilot went live with Cross Keys Homes in November 2017. Transfer of Care: two new social worker posts have been based in the acute from 23rd October (Admissions Avoidance Social Worker and Social Care Strategic Discharge Lead). A new Continuing Healthcare pathway (4Qs) 3 month pilot was launched in NWAFT during November and additional social worker and discharge planning nurse capacity to support this is in place. An evaluation of the 4Q pilot is in planning. Trusted Assessor: a care home trusted assessor pilot is being implemented with South Lincolnshire County Council and UNCA. Communications have been undertaken with the local care homes to ensure appetite and buy in. The service launched in December with one Trusted Assessor post in place within PCH. A second trusted assessor post is due to come on line shortly, enabling delivery of a 6 day service. Home Care: a regular meeting with home care providers is now fully operational to support joint working and capacity building.	If there is insufficient intermediate care provision in the community to manage appropriate discharges, then reablement effectiveness may be impacted. 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 place, or will impact on patient flow.	Dec-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	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  2 LIP Search Platform Development - Go Live Go Live: March 2018  3 Directory of Services Development March 2018  4 Front End Search Functionality March 2018	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	Nov-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	Slippage	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	Financial arrangements being finalised. Initial properties identified.	Delays in finalising financial arrangements	Dec-17