NHS DORSET CLINICAL COMMISSIONING GROUP GOVERNING BODY MEETING

ANNUAL DELIVERY PLAN

Date of the meeting	19/03/2014
Author	S White, Head of Performance Intelligence - Development
Sponsoring Board Member	P Vater, Chief Finance Officer
Purpose of Report	To note the progress against the 2013/14 Annual Delivery Plan as at January 2014
Recommendation	The Governing Body is asked to Note the report.
Stakeholder Engagement	Not required for this individual report as this is a monitoring report, but priorities within this report have identified public and patient engagement.
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Assurance Domains	OutcoGovePartne	gement		
I confirm that I have considered the implications of this report on each of the matters below, as indicated:		Yes	Any action required?	
		[e.g. √]	Yes Detail in report	No
All three Domains of Quality (Safe	etv.	✓		✓

I confirm that I have considered the implications of this report on each of the matters below, as indicated:	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework / Risk	✓		✓
Register			
Budgetary Impact	\checkmark		\checkmark
Legal / Regulatory	✓		✓
People / Staff	✓		✓
Financial / Value for Money / Sustainability	✓		✓
Information Management &Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓

Initials: SW

1. Introduction

1.1 The purpose of this report is to outline the progress of the priorities outlined in the Annual Delivery Plan 2013/14. The priorities have been identified by each Clinical Commissioning Programme as a result of the Clinical Commissioning Group prioritisation process in April 2013.

2. Report

- 2.1 Each of the 6 Clinical Commissioning Programmes (CCP) has a prioritised work plan and investment plan for 2013/14. These include key outcomes to be delivered which are linked to the national operating/outcomes frameworks and other locally prioritised projects. There are also a number of pan programme priorities that form part of the CCG Annual Delivery Plan
- 2.2 The performance monitoring process in 2013/14 has been simplified to focus on the Annual Delivery Plan within this report and will be supplemented by performance monitoring of national outcomes, 'Everyone Counts' commitments and Quality Premium indicators in a supplementary performance report.
- 2.3 Directors and programme leads have been asked to update the monitoring template summary with the position as at January 2014. This is attached as Appendix 1.



- 2.4 Programme leads have given indications of where the development of the priority is in relation to the commissioning cycle. For example, two reds and one orange would equate to the priority being in the 'Current Service Review' stage 3.
- 2.5 It is expected that the analysis will show improvement on a regular basis.

 Programme Leads have also indicated if the priority is on plan to be delivered in 2013/14. As at January 2014, four priorities have seen improvement from the December 2013 position. Ten priorities have reached the final stage of the

Commissioning Cycle and are now managing quality and outcomes. The priorities which have reported a positive movement in progress are as follows:

- Maternity, Reproduction and Family Health Clinical Commissioning Programme
 - 2.1 Enhance access to palliative and end of live care for children and young people (final stage of commissioning cycle)
 - * 2.2 Review and implement pan Dorset pathways of care for maternity services (final stage of commissioning cycle)
 - * 2.3 Review community paediatric services and pathways of care for chronic diseases in children (final stage of commissioning cycle)

Pan Dorset Priorities

- 8.1 Community IV Therapy Services (final stage of commissioning cycle)
- 2.6 It should be noted that the Mental Health & Learning Disability Clinical Commissioning Programme priority 6.3 'Implement a pilot programme to improve Primary Care Mental Health Services' has been delayed and will not be achieved during 2013/14. This is due to recruitment issues and it has been decided to pause the project for a six month period to develop options for further development of mental health in primary care.
- 2.7 The East Dorset Review of the Specialist Palliative Care Services (priority 7.2 in the Cancer and End of Life Clinical Commissioning Programme), will be delayed due to a revision of the work programme and more clarification on what stage each area is at. The End of Life Board has subsumed the East Dorset Review into a Dorset wide review and is not due to make recommendations to the Clinical Commissioning Programme until March 2014, thereafter, consideration will be made as to whether any re-design or procurement work is needed, if so this may take this priority into 2015/16.
- 2.8 For this report the progress against the Commissioning Cycle is being shown as a Yes/No completion before the 31 March 2014. On this basis, where a service programme change has not been through contract award and mobilisation, then it has been classified as red 'No' for this report.

3. Conclusion

3.1 Members are asked to note the progress being made against the Annual Delivery Plan priorities for 2013/14

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APPENDICES					
	Appendix 1	Summary of Annual Delivery Plan Monitoring 2013/14			