



**Dorset
Clinical Commissioning Group**

NHS Dorset Clinical commissioning Group

Clinical Delivery Groups Priorities Report - March 2016

Produced by: Kelly Spiller
Data source: Highlight Reports
Date published: 02 March 2016



Clinical Delivery Group Priorities Overview

CDG	PROJECT REFERENCE	PRIORITY	RAG	STATUS SINCE LAST REPORT	PROJECT PLAN Y/N
Maternity and Family Health	MAT001	Maternity and Paediatric acute hospital network development			Y
	MAT002	Define and develop local integrated community children's health service			N
	MAT003	To implement a 24 hour dedicated Dorset telephone labour line			Y
	MAT004	Improve emotional wellbeing and mental health outcomes by developing and implementing the Emotional Wellbeing and MH Strategy			Y
Long Term Conditions Frailty and End of Life Care	LTC001	Integrated Teams and End of Life Care			Y
	LTC002	Intermediate Care			Y
	LTC003	Develop out of hospital model of care for phlebotomy DVT and anticoagulation			Y
	LTC004	Remodelling of Diabetes service provision			Y
	LTC005	Longer term project: Out of Hospital Respiratory Services			N
	LTC006	Longer term project: Heart Failure: Nursing care to support frail elderly with heart failure at end of life and avoid hospital admission			N
Planned and Specialist Care	PS001	Rheumatology			N
	PS002	Radiology and Diagnostics			N
	PS003	Dermatology			Y
	PS004	Cancer			N
Urgent and Emergency Care	UE001	Integrated urgent care hub (Out of Hospital/111)			Y
	UE002	Weymouth urgent care centre mobilisation to be completed including an assessment of transferability of service across system			Y
	UE003	Trauma model of care developed to support the proposed acute model configuration			Y
	UE004	Implementation of discharge to assess county wide (linked to the work of the systems resilience group).			Priority moved to SRG
	UE005	Provision of specialist advice and guidance within one clinical pathway that assists admission avoidance.			Y
Mental Health	MH001	Co-produced model for acute mental health services resulting in enhanced access and service user experience (Acute Care Pathway Project)			Y
	MH001	Improved rates of dementia diagnosis (67% by March 2016 – stretch target 70%) and improving post diagnostic support			Y
	MH003	Development of effective provision to support the delivery of the 4 stage crisis model for learning disabilities (LD Crisis Assessment and Support)			Y
	MH004	Deliver the national MH waiting times for IAPT and EIP			n/a
	MH005	Work with the Maternity and Families CDG to develop an All Age Psychiatric Liaison Service by 2020.			M&FH leading
	MH006	Co-produce model for rehabilitation and recovery services incorporating related employment services and supportive housing			Due to commence Sept/Oct 16
	MH007	Co-produce model for organic specialist pathway (in-patient and community provision)			Due to commence April 16

Maternity and Family Health CDG Monitoring Report as at 16 February 2016

Clinical Lead: Karen Kirkham Head of Service: Jane Brennan

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N
MAT001	Maternity and Paediatric acute hospital network development	NEW	Work on the pan Dorset Maternity Strategy is on-going. Priorities are reviewed on an annual basis, informed from the implementation plan of this Strategy and the Wessex Vision of Maternity Services. The Acute Vanguard for Maternity services currently been developed by the all acute providers led by Poole Hospital. The perinatal mental health pathway is been taken forward and implemented alongside the revised Dorset wide specialist perinatal community team service. The business case for increased staffing for this service has just been finalised and these additional posts are been recruited by Dorset HealthCare. Further work in needed with the Midwives during 2016-17	Attending second Acute Vanguard meeting on the 19 Jan to discuss priorities to go forward to the next Acute Vanguard Board	First Draft PID to CDG in Feb 16	Timescale to be agreed at CDG meeting		NA	Y - through Acute Vanguard
MAT002	Define and develop local integrated community children's health service	Nov-15	To confirm priority workstream and develop project plan. To identify project and programme resources to support workstream To identify key areas for service improvement and service redesign To analyse full range of evidence to ensure a whole system approach To plan with communications team the approach to be undertaken to engage with parents and families as part of co-production and redesign processes.	A draft PID has been developed, outlining the whole system redesign programme and overarching programme.	Feedback to CDG in March	NA		To agree priority area	N
MAT003	To implement a 24 hour dedicated Dorset telephone labour line	NEW	Task and Finish Project Group established PGH will be leading the service and managing the team Engagement and Communication Plan Developed and split into three stages Staff and Patient Surveys complete and engagement Workshops carried out Privacy Impact Assessment and Equality Impact Assessment carried out Training plan for all the midwives and 111 staff to be delivered Collating pathways and collecting all relevant contact details for all maternity related services An honorary contract to be put in place to ensure SWAST can communicate with midwives based in the hub	Project plan developed Benchmarking complete Infrastructure and process agreed Set up costs finalised A team of midwives selected	Commencement date moved to 1 March 2016 - East only service	March commencement		March revised start date	Y
MAT004	Improve emotional wellbeing and mental health outcomes by developing and implementing the Emotional Wellbeing and MH Strategy	NEW	New approaches agreed to improve the current Young Peoples Eating Disorder Service (YPEDS) £250K agreed for additional development in DHUFT Development work following the recommendations of the CAMHS Review in 2015 New multi-agency Development and Behaviour Pathway (ASD/ADHD) developed pan Dorset. Task and Finish group in place to support implementation. Additional funding allocated to DHUFT for 2015-16 to recruit two case co-ordination roles as part of a networked approach across providers. CYP IAPT training funding awarded by NHSE for 2015-16 academic year and trainees accepted onto courses. (From DHC and Action for Children)	Draft strategy agreed in principle Local Transformation Plan assured by NHSE	Launch of new strategy Spring/Summer 16. Assurance monitoring end of Jan 16. Improvement and action plans end of Jan 16.	Draft strategy to JCP CYP in Feb 16		As reported	Y

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Clinical Lead: Karen Kirkham Head of Service: Jane Brennan

Other Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Timescale	RAG	Status Since Last Report	Project Plan in place Y/N
MAT005	As part of pan Dorset Maternity Strategy review and implement revised perinatal mental health pathway	Apr-15	The perinatal mental health pathway has been agreed, implemented of revised pathway of pan Dorset wide specialist perinatal community team is planned of April 16 depending on recruitment of staffing						Project completed
MAT006	Implementation of the Special Educational Needs (SEN) Act 2014 statutory requirements	Apr-14	SEND is progressing, however the SEND pan Dorset Board have agreed revised timescales for the local offer, because engagement and cooperation by NHS health providers has been slow, hence all health services missed the publishing date set for November 2015. Revised date for completion of this work is the end of Jan 16, it is still moving forward slowly.						On going through the contract
MAT007	Review and redesign of children's audiology service	Aug-15	Agreement has been reached by both current providers to work together to redesign a new service model and deliver a new service across Dorset. Agreement has been reached that current providers will work together to deliver newly designed pan Dorset service model.	Agree MOA inclusive of finance	Apr-16	Sep-16			In draft
MAT008	Children's Palliative Care	Aug-15	Review of Children's Palliative and EOL Care in DCH and PGH pathway and service specification, working with Children's CHC team.	PGH meeting occurred in Dec 15. Meeting booked with DCH 20 Jan 16.	End of Feb 16	17-Mar		on-going	To be developed
MAT009	Assisted Conception	Jan-15	Revised Policy adopted in April 15, implemented during 2015, CCC agreed minor changes to policy in Dec 15.	Policy changes made and operational April 16	16-Apr	16-Apr		on-going	On going through the contract
MAT010	Termination of Pregnancy (TOP's)	Apr-14	Contacts issued. Performance and monitoring on-going						On going through the contract

Long Term Conditions, Frailty and End of Life CDG Monitoring Report as at 24 February 2016

Clinical Lead: Craig Wakeham Head of Service: Fiona Richardson

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N	
LTC001	Integrated Teams and End of Life Care including:	Nov-15								
	a) Risk Stratification		Service specification for integrated teams and outcome measures. Frailty reference group established and agreed output, task and finish group will be established. Outcomes agreed for work programme. Mapping of frailty services commenced. 1) Agree frailty risk screening and assessment tools, including the comprehensive Geriatric assessment to recommend pan Dorset. 2) Agree Dorset care plan template pan Dorset interfacing with information systems. 3) Recommend approaches for supporting people in care homes more proactively.	Frailty and End of Life Care Reference Group to provide guidance on risk stratification to build on work of Better Together locality developments.		Apr-16		↔		
	b) Anticipatory Care Plans, Avoiding Unplanned Admissions, over75s, Clinical Commissioning Improvement Plan		Primary Care Enhanced Services AUA, Over 75's CCIP, tracker nurse, vulnerable adult nurse. CDG planning to consider in January. Work on schedule for enhanced services. Frailty reference group to establish task and finish group to make county wide recommendations on ACPs	Primary care team working on "Bundle" re AUA, CCIP, over 75's linking with CDG. Frailty and End of Life Care Reference Group commenced work on ACPs to be shared with providers Dorset wide.		Apr-16		↑	Y	
	c) Implementation of End of Life Care Strategy		Gap analysis of Dorset EOL services against national strategy EOL. Outcomes: 1) Primary care - integrated with frailty work 2) Understand how to support DHUFT EOL strategic vision and integrated community teams 3) Acute care - ensure Trusts have plan to meet national NICE guidance and understand commissioning implications	Gap analysis to form part of the overarching mapping being carried out by the Frailty and End of Life Care Reference Group		Apr-16		↔		
LTC002	Intermediate Care including:	Dec-15	CDG considered output from stroke workshop and have recommended the service model: 1) Is not disease specific, 2) Is based on a 'pull out' of hospital model 3) Ensures specialism/specialists are included within community teams providing rapid response, intensive rehabilitation and reablement, early supported discharge and 4) Services are integrated and minimise the handovers between teams.							
	a) Intensive rehabilitation and re-ablement (including stroke)		Better Together programme review of intermediate care and reablement. Initial meeting taken place. Mapping of service due to complete in February. Links to the frailty work above. DHUFT meeting to review their service action plan in March.	JCOG to agree programme of work and approach	Feb-16			↔		
	b) Links with Early Supported Discharge - Stroke		Community Hospital bed modelling for future needs. Modelling completed for stroke care and tested with clinicians. Community bed requirements identified but Acute Vanguard interface unclear. A task and finish group will be established to develop proposals for early supported discharge/ ESD light touch services that are not disease specific	Recommended model based on the principles above for ESD and ESD light touch - establish task and finish group		Apr-16			↑	Y
	c) Rapid Response		Stroke rehabilitation model of care for Dorset. Workshop on right time right place stroke rehabilitation completed. Project on target. Acute Vanguard have included within their outputs and direction of travel not including commissioners.	Links to the frailty work above there and better together - no separate milestones					↑	

Long Term Conditions, Frailty and End of Life CDG Monitoring Report as at 24 February 2016

Clinical Lead: Craig Wakeham Head of Service: Fiona Richardson

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N
LTC003	Develop out of hospital model of care for phlebotomy DVT and anticoagulation	Jan-16	Locality model of care to be finalised with primary care and patient engagement. Locality model shared with all localities and feedback by most localities. Localities have been advised by Trusts model unsafe so concern in localities requiring additional meetings. Little patient engagement by localities Meeting with current providers planned, Poole fixed RBCH not scheduled and no Trust lead identified. Financial modelling near complete but requirement to extract costs from trusts in East or staff resources delivering new model.	Provider meetings re model and experience in West. Additional locality meetings. Financial modelling completed for localities	Feb-16			↓	Y
	Work collaboratively with locality management teams to improve and enhance identification and management of people with atrial fibrillation	Nov-16	Ongoing work on use of risk tools and safety tools					↑	
LTC004	Remodelling of Diabetes service provision	Nov-15	Service model for Dorset. Model revised following workshop. 2 areas of disagreement; type 2 diabetes programme and skills and competencies within diabetes specialist services to support people with psychological needs.	West Vanguard working up implementation implications in more detail	Mar-16			↑	Y
		Dec-15	Financial modelling. Unlikely to hit target for end of January					↓	
			Procurement approach to be agreed. Not commenced.					↓	
LTC005	Longer term project: Out of Hospital Respiratory Services	Dec-15	Dairs non-recurrent funding for 2016/17 to be considered at CCC. Completed and outcomes shared with Trusts. Model of care to be developed for Dorset. Detailed work has not commenced.	Workshop to scope primary care capacity gaps and requirements	Mar-16			↑	N
LTC006	Longer term project: Heart Failure: Nursing care to support frail elderly with heart failure at end of life and avoid hospital admission	Dec-15	Detailed work not commenced. Possible cross over with Acute Vanguard					↔	N

Planned and Specialist Care CDG Monitoring Report as at 02 February 2016

Clinical Lead: Christian Verrinder Head of Service: Cindy Shaw-Fletcher

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N
PS001	Rheumatology including:								
	a) Development of Rheumatology Clinical Network pan Dorset	Nov-15	First rheumatology task and finish Group meeting to be held 09 March 2016 to discuss next steps. TOR, PID and members of task and finish group agreed.	Task and finish group 09-Mar	to be determined	to be determined	Green		N - meeting with SOF
	b) Move appropriate rheumatology outpatients into the community. Focus on inflammatory disease service provision	Nov-15	As above	Task and finish group 09-Mar	to be determined	to be determined	Green		N - meeting with SOF
	c) Any reorganisation agreed to complement and further enable the Dorset MSK strategy and the implementation of the Spinal Pain specification	Nov-15	As above	Task and finish group 09-Mar	to be determined	to be determined	Green		N - meeting with SOF
PS002	Radiology and Diagnostics including:								
	a) Develop a pan Dorset unified radiology platform for reporting and accessing images		Acute Vanguard project team for diagnostics commenced and awaiting clarity on impact this will have to the radiology platform. Plans to be aligned which has necessitated a change in approach. PID completed and project plan to be developed with support from SOF and aligned with Acute Vanguard.				Yellow		N - meeting with SOF
	b) Use findings to design and agree the integrated radiology and pathology IT services to include commissioners (quality, procurement, finance, information)		This will be facilitated through the Acute Vanguard Radiology group at present.				Yellow		N - meeting with SOF
	c) Development of a Dorset radiology clinical network		This will be facilitated through the Acute Vanguard Radiology group at present.				Yellow		N - meeting with SOF

Planned and Specialist Care CDG Monitoring Report as at 02 February 2016

Clinical Lead: Christian Verrinder Head of Service: Cindy Shaw-Fletcher

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N	
PS003	Dermatology including:									
	Development of a Dorset Dermatology clinical network	Nov-15	TOR and PID agreed. Initial Task and Finish Group held 12 February. Still to recruit a GP and patient representatives (anticipated for 2nd T&F Group on 22nd April). Initially members joined at Dermatology Workshop 27 January (25 people). Format and management of network to be agreed at T&F Group 12 February and how to involve broader membership (eg voluntary sector, Wessex Deanery)		Apr-16				N - meeting with SOF	
	Agree integrating dermatology model (acute, community, primary care)	Nov-15	A workshop which built on previous patient and clinical engagement was held on 27 January 2016 with clinicians, GPs, GPwSIs, other health care professionals and managers. Outcomes will shape the future model for discussion at task and finish group. Patient reference group planned for 23 March.		30-Jun-16				N - meeting with SOF	
	Move appropriate dermatology outpatients into the community	Nov-15			01-Jan-18				N - meeting with SOF	
PS004	Cancer									
	Adapt cancer pathways to meet agreed performance targets		Timed cancer tumour site pathways are now in operation across Dorset. A Pan Dorset cancer operational policy has been developed for use in each of the three acute Trusts. The RCOS have reviewed the prostate pathway and released their report with recommendations. Feedback to the providers on these recommendations 23/01/16 - Actions agreed from this. RBCH and Poole have been issued with contract performance notices and both have agreed the recovery action plan and milestones. It is anticipated that both Trusts will recover the 62 day standard target for Q3. Two week wait referral forms being agreed across Wessex.						N - meeting with SOF	
	Continue to develop a Dorset Cancer clinical network		This is being delivered via the Dorset Cancer Alliance and a workshop is set up for February 2016.						N - meeting with SOF	
	Continue to develop a single Dorset cancer service		National, regional and local strategy will underpin this work including the work of the Dorset Cancer Alliance. This is a 3-5 year objective.						N - meeting with SOF	
	GP Education		GP education and engagement planned for 2016 - update 'Ready, Willing & Able' leaflet, redistribute. Discuss improvements in communication between PC & SC - better outcomes and streamline patient pathway and improve experience. Via locality protected learning time, improve understanding of forms/process/diagnostic requirements of each Cancer pathway, including 2 PSA test requirement for prostate cancer referral.						N - meeting with SOF	

Urgent and Emergency Care CDG Monitoring Report as at 03 February 2016

Clinical Lead: Simon Watkins Head of Service: Hazel Thorp

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N
UE001	Integrated urgent care hub (Out of Hospital/111)	NEW	Service Specification agreed. Receipt of 1st draft of detailed implementation plan from provider (SWAST) anticipated this week. Milestone trajectory altered in light of specific challenges. Revised trajectory of implementing 12 standards by April 2018.	detailed implementation plan produced	12/02/2016	01/04/2018			Y
UE002	Weymouth urgent care centre mobilisation to be completed including an assessment of transferability of service across system	NEW	Formal announcement of successful provider delayed. Due to procurement processes project on hold at present. Contingency plans being explored. Planned stakeholder events postponed.	Formal award of contract	08/02/2016	30/06/2016			Y
UE003	Trauma model of care developed to support the proposed acute model configuration	NEW	2nd Task & Finish Group held on 7/1/16. Activity data continuing to be collated to support modelling and development of options. Strong interdependencies identified with paediatrics and critical care. Clarity regarding trauma unit status requirements in respect of paediatrics requested from Wessex trauma network manager. Delivery of aims remain challenging in light of concerns highlighted by group members and interdependencies.	develop Trauma pathway options	01/04/2016	01/04/2016			Y
UE004	Implementation of discharge to assess county wide (linked to the work of the systems resilience group).	NEW	Forms part of wider work on Delayed Transfers of Care (DTCO) that is co-ordinated via SRG due to cross cutting nature. Dorset wide agreed plan developed and linked to Better Care Fund. Updates will be provide via SRG	MOVED TO SRG					
UE005	Provision of specialist advice and guidance within one clinical pathway that assists admission avoidance.	NEW	Initial task and finish group held. Good attendance and levels of engagement from wider stakeholders eg. Fire Service. Work plan being produced to deliver a refreshed strategy by project end date. Linking development with Right 2 Care plan.	develop revised falls strategy and pathway	01/04/2016	01/04/2017			Y

Mental Health and Learning Disabilities CDG Monitoring Report as at 29 February 2016

Clinical Lead: Paul French Head of Service: Kath Florey-Saunders

CDG Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report	Project Plan in place Y/N
MH001	Co-produced model for acute mental health services resulting in enhanced access and service user experience (Acute Care Pathway Project)		Mid way through options development stage. Options for models of care emerging. Anticipated additional funding via NHSE for mental health crisis care has not been released. Reduced amount of resource available to invest in any revised pathway as a result. Dates for final modelling sessions may need to be altered to take account of revised funding streams and the need to have clear costs available to evaluate affordability.	Stage 3 modelling & business case	Jul-16			↔	Y
MH002	Improved rates of dementia diagnosis (67% by March 2016 – stretch target 70%) and improving post diagnostic support	ongoing	current diagnosis rate averaging between 62.4 - 62.8%. No. of diagnoses should have increased the diagnosis rate by 7/8% following work within MAS/MSAS. Data anomalies still exist - currently trying to understand how 500 people have been lost from the system. Meetings have been held with NHSE / Wessex Strategic Clinical Network to appraise of current progress and challenges. Team working through options to decipher anomalies including potential option of independent audit of data. Privacy impact Assessment for care home work being finalised with IG lead with a view to sign off and Audit & Quality committee.	Increased accuracy of Dorset dementia prevalence estimates Identification, care and support of people with dementia within Care homes	Mar-17			↔	Y
MH003	Development of effective provision to support the delivery of the 4 stage crisis model for learning disabilities (LD Crisis Assessment and Support)		Transforming Care Plan developed in partnership with LA colleagues and presented to NHSE on 9/2/16. Queries raised subsequently answered. Plan rated as green as at 25th February. Local partnership commended for plan and have been identified as a potential buddy for other partnership areas that are struggling with TCP governance.	Formal Board sign up to plan	04-Apr-16	11/4/16 final plan submission		↔	Y
MH004	Deliver the national MH waiting times for IAPT and EIP		Mobilisation plan in progress to achieve EIS Standards. Recruitment process commenced. Work required on enabling reporting capability within IT system. Interim data collection via UNIFY put in place nationally pending improved reliability of data collected via HSCIC. New IAPT access standards monitored monthly with new standards currently being met/exceeded.	Achievement of new national Mental health access standards for Early Intervention in Psychosis and IAPT	Apr-16	01/04/2016		↔	N/A
MH005	Work with the Maternity and Families CDG to develop an All Age Psychiatric Liaison Service by 2020.		TBC: M&F CDG will be leading on this						M&FH leading
MH006	Co-produce model for rehabilitation and recovery services incorporating related employment services and supportive housing		Project will start in late 2016						Due to commence Sept/Oct 16
MH007	Co-produce model for organic specialist pathway (in-patient and community provision)		PID will be developed by end April with view seeking expected late spring/ summer.	PID produced	Apr-16			↔	Due to commence April 16

Mental Health and Learning Disabilities CDG Monitoring Report as at 29 February 2016

Clinical Lead: Paul French Head of Service: Kath Florey-Saunders

Other Priorities

Reference	Priorities/Projects	Commencement Date of Project	Progress Updates / Comments	Current Milestone	Milestone Timescale	Project Timescale	RAG	Status Since Last Report
MH008	Implement local recommendations of the confidential inquiry into premature deaths of people with learning disabilities.	Apr-14	Contract issued. Draft mobilisation plan in place. On track to commence service from 1st April 2016.	Service Commencement	01.04.16	01.04.16		↔

Key	
	On schedule to meet target
	Potential to miss target
	Likely to miss/missed target
↑	Improvement
↓	Decline
↔	no change