

Report for Department of Health
Teaching PCT Activities relating to DH funding
April – December 2006

**Written on behalf of the National Teaching PCT Network as part of NHS
Networks and compiled by Darley Consulting**

30th January 2007



Facilitating transformation



NHS Networks

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**Report on Teaching PCT Activities relating to Department of Health Funding –
April- December 2006
Executive Summary
January 2007**

The purpose of the report is to provide an update on the projects funded by the DH monies in 2006 and showcase the innovative and creative use of the funding.

Nationally and regionally the funding has strengthened the TPCT networks, as demonstrated by the setting up of regional networks covering the whole of England Teaching PCTs (TPCTs). The creation of a national steering group has led to development of links with national bodies such as NHS Networks, NHSI, Skills for Health and NHS Employers.

Many initiatives have clearly demonstrable links to policy agenda and PCT performance, others will have a longer term payback on investment, such as increasing workforce and research/development capacity. Common themes identified under Recruitment and Retention, Research and Development and Workforce Development include:

Long Term Conditions – retention of the workforce by enhancing existing skills, reviewing roles and role redesign to support service transformation. Several TPCTs have reviewed their community nursing services to reflect the changing demands and new roles such as community matrons and extended prescribing. Others are supporting community pharmacists in prescribing. Research and development projects, such as the work on disease specific training programme provision, evaluation and monitoring of the new roles, developing questionnaires related to service user experiences, all contribute to delivering the PCT and national agenda. Specific clinical skills programmes also provide support to the workforce eg Diabetes, CHD, and COPD. The above are evidence-based where possible, using R&D networks.

CPLNHS – TPCTs are working to support and retain a skilled workforce during the reconfiguration of PCTs/TPCTs. They are providing leadership and management development programmes, coaching and mentoring training and support networks.

Pathways to Work- Working with people on long-term incapacity benefit referred to condition management programmes, for assessment, physical and mental health interventions and coaching and mentoring support to help them back into work - often into health or social care services. Providing entry-level skills programmes for these people and people new to work or the existing workforce, also increases capacity and capability within the health and social care workforce.

Public health – links to the Teaching Public Health networks and provision of public health related training and specific programmes such as weight management and immunisation and vaccination training.

Practice Based Commissioning (PBC) – accredited programmes and workshops being run to enhance competencies and understanding of those involved in PBC.

Recruitment and retention of GPs – specific targeting in primary care from modernising medical careers placements in primary care through to increasing the number of GP trainers and training practices to provide the infrastructure for GP placements.

Health and Social Care integration – partnership working across the workforce, particularly in care assistant roles providing generic roles or similar competency bases at entry level. Childrens' services are another area for some TPCT projects.

Workforce expertise within TPCTs, following changes to workforce planning and commissioning, can ensure organisational memory within primary care for learning and development.

Report on Teaching PCT Activities relating to Department of Health Funding – April- December 2006

1.0 Purpose

This report outlines the utilisation of national funding for Teaching PCTs (TPCT), managed through the TPCT National Network Steering Group on behalf of the DH Workforce Directorate. The reporting period is April to December 2006 and is collated from individual TPCT quarterly returns. The report gives an overview of the central networked events, followed by a more detailed breakdown of TPCT projects and their progress.

The main body of the report identifies themes emerging from the returns. More detailed information on the individual projects and their progress is given in Appendix Four.

2.0 National and Regional Networking

2.1 Infrastructure

The Teaching PCTs (TPCTs), supported by NHS Networks, initiated a national steering group to facilitate liaison between Teaching PCTs across the country at a time of reconfiguration and change. The Steering Group has established a robust national network, which regularly liaises with the Department of Health and other national groups such as the NHS Institute for Innovation and Improvement, NHS Employers and Skills for Health. The group helps give a voice to Teaching PCTs, and as well as accessing funding, has supported the continuation of the Teaching PCT concept, re-registration of Teaching PCTs, and a renewed focus on Teaching PCTs' added value. The national network also facilitates discussion between Teaching PCT members. The membership of the National TPCT Steering Group can be found in Appendix One.

Regional networks of TPCTs have also now been established following the early lead of the northern network, with all networks having met at least once in the last few months.

Northern Network – fully active

London Network – fully active

Midlands – inaugural meeting taken place and second meeting date agreed

South Eastern – inaugural meeting taken place and second meeting date agreed

South Western – inaugural meeting taken place and second meeting date agreed

Eastern Network – currently under development

For information on the leads for each network, see Appendix Three.

The service level agreement with NHS Networks, for their consultancy, Business Director, website and administration support (seconded from Nottinghamshire County TPCT), has enabled a central point of contact for TPCTs to collate information.

2.2 Funding Overview

From the original DH allocation (£1.788M) in 2006/07 the Steering Group has agreed £50K funding for individual TPCTs which initially amounted to £1.55M. A further £90k was spent on an 18 month SLA with NHS Networks, which included administrative support for a year, and the national network agreed to reimburse the organisations of Steering Group members for the time spent on national business. The identified underspend was planned to cover central expenditure in 2006/07 and support activity into 2007/08, given uncertainty over both local funding and confirmation of tPCT status.

The Steering Group established funding criteria against which TPCTs bid for their £50K allocation and instituted a quarterly reporting system to the DH to assist in monitoring expenditure. To date 25 TPCTs have received their allocation, invoices are pending from a further 5 and one tPCT has withdrawn without claiming the funding. The national network held a 2 day, centrally funded, conference on October 31 and November 1, with nationally recognized speakers and incorporating the first national TPCT network business meeting.

As a result of reduced TPCT allocations the planned underspend is £50K more than anticipated. This allows the SLA with NHS Networks (including administrative support) to be extended to cover all of 2007/08, as well as supporting a further national conference and reduced payments to Steering Group members, whose workload it is assumed will be reduced now that infra structure mechanisms are established. This will leave a small project fund against which TPCTs will be invited to bid, either individually or (preferably) in clusters to undertake work on behalf of the national network. This bidding process will also help to identify appropriate projects which can be submitted to other potential funders locally, regionally and nationally.

2.3 National Conference

A highly successful conference was held in Nottingham on 31st October and 1st November, with over 100 delegates attending. Speakers included Dr Pat Oakley, Mala Rao and Rachael Carse on behalf of Maggie Rae. A wide range of projects and initiatives were showcased by the TPCTs and good practice shared across the TPCT knowledge economy. Some comments from participants about the two days include:

'Fantastic business meeting, it feels like the National Network is real now'

'One of the things I value is the networking and sharing good practice, it is so important.'

'it was great to pick up new ideas on the role of TPCTs and a different perspective.'

2.4 External Networks

Members of the steering group have met with the NHS Institute, who also participated in the national conference. The group have also influenced the Fitness for Purpose review with respect to TPCTs. Representatives of the group have met with NHS Employers and Skills for Health. The funding has been essential to support the national steering group's inception and continued existence and thereby raise the profile of TPCTs with other national groups.

3.0 Monitoring of TPCTs' Funded Projects (£50k/TPCT)

An increasing number of projects are being formulated between health and social care. As TPCTs become more established in their roles within recruitment and retention, research and development and especially workforce development, these reflect increasing partnership working, for example in Children's Trusts, single assessment – integrated teams as well as intermediate teams. Salford TPCT is developing an integrated Health and Social Care team as one example.

Some projects have been initiated as a result of the funding, others enabled to develop further or extend the timeframe for running a successful programme e.g. offer an additional cohort.

Projects with more easily identifiable direct links with national policy agenda and performance include the 'Team Tool' developed by Wandsworth TPCT to support the TPCT's annual 'health check' by the Healthcare Commission, and training and development in response to NICE guidance on depression treatment in children and young people which Coventry TPCT are planning. Nottinghamshire TPCT are working on a planned training programme on the priorities within the Long Term Conditions agenda. The accredited programme that Northamptonshire TPCT have developed with the University of Northampton focuses on Practice Based Commissioning (PBC). Commissioning is also a priority for City and Hackney TPCT who are delivering a series of workshops on PBC.

With the changes in workforce planning and commissioning, TPCTs can play an important role in evaluating programmes and providing fast responsive programmes to meet the needs of the workforce, facilitate recruitment for specific staff groups and provide support and expertise in skill mix as services undergo transformation.

3.1 Recruitment and Retention

'**Grow your own**' recruitment and retention developments are successful across many TPCTs – both at entry level (basic skills), new to work/return to work, through to developing GPs with special interest (GPSIs). Increasing the number of Teaching Practices and increasing the number of GP trainers and placements is strengthening the training infrastructure and offering **more placements for GPs in primary care**. A broader approach to education and development in a primary care work based setting eg Learning Teams for the Future toolkit produced by the TPCT for County Durham and Tees Valley also helps to retain staff.

Several TPCTs are involved in the **Pathways to Work** initiative, working with people on long-term incapacity benefit to provide condition management programmes, coaching and mentoring support. This involves close work with Job Centre Plus and Connexions. The added benefits to the NHS include increased workforce with the required entry level skills, a potentially healthier population locally requiring less NHS services and economic advantages in reducing the number of people on long term benefits. TPCTs using funding on this type of programme include the TPCTs for East Lancashire, Haringey, Plymouth and Hull.

Work place experience placements with local schools, is encouraging more school leavers to follow up career opportunities with either Health or Social Care Services. Some of the TPCTs working on this recruitment aspect include South Essex PCT Confederation and Walsall TPCT, the latter also developing a Personal Qualities Framework as part of this initiative.

Assistant Practitioner Programme offered by Brent TPCT recruits refugee and migrant doctors to a training programme linked to 12-month work placements in local GP practices.

Portfolio career opportunities within primary care continue to develop for GPs and other primary care colleagues – for instance clinical and academic registrar schemes such as those run by Plymouth TPCT.

CPLNHS : Retention of key members of the workforce is crucial during periods of change and transition. TPCTs have recognised this need and the TPCT for County Durham and Tees Valley has been running leadership and personal development programmes primarily for middle managers. Sunderland TPCT is running coaching and mentoring programmes and the two TPCTs have now joined forces to provide an

even more comprehensive programme of support in the North East of England. Stoke, Bournemouth & Poole and Bristol TPCTs are also providing support within this funding.

The Institute of Health and Social Care being developed by the TPCT for East Lancashire will also be an important education and learning facility to keep the current workforce, as well as potentially attracting more people to work in the area.

Training needs analysis of external courses for Allied Health Professionals (AHPs), to support capacity building of a highly skilled workforce and avoid duplication, will facilitate retention of AHPs across Cheshire and Merseyside TPCT collaborative.

When **new roles** are established such as **Community Matrons**, there is an important process in identifying the recruitment criteria and supporting both practitioners and the organisations to develop new systems and processes to develop new approaches. Bradford & Airedale and Wandsworth TPCTs are two organisations offering guidance and monitoring progress. This is essential to retain experienced practitioners in the first 12-18 months in new roles. Another TPCT involved in recruiting and training to a new role is Greenwich, as one of four spearhead PCTs piloting NHS Health Trainers.

3.2 Research and Development

Increasing research & development (R&D) capacity is achieved through schemes such as offering small grants for research proposals and opportunities for sponsorship of Masters or PhDs. Plymouth have recently reinstated their scheme as a result of receiving this funding. Nottinghamshire TPCT is working with Human Resource colleagues and a research fellow to increase research capacity within the HR team. Portsmouth has offered support for Masters programmes and a Doctorate, all involving research projects/theses.

Dissemination of research in the way that both Bradford and Airedale, and Plymouth TPCTs offer, in a series of lunchtime events, workshops and full day conferences, is an effective approach to sharing national and locally researched projects. It also fosters further awareness of available evidence based practice and developing an evidence base where none is currently available.

Portfolio approach eg Modernising Medical Careers also offer potential for increasing the R&D opportunities for doctors. The TPCT for East Lancashire is successfully building on this programme.

Combining forces with the newly established **Teaching Public Health networks** is proving effective for TPCTs such as Plymouth and Sunderland.

The majority of TPCTs are involved in the **evaluation of projects**. Some of these include how is the Health Care Assistant programme impacting on the overall capacity within GP practice (Haringey TPCT) and Sunderland TPCT is looking at Protected Learning Time for GP practices. A service evaluation on the GPSI heart failure services is being carried out in Bradford and Airedale TPCT. Evaluating People Development –an evaluation on mandatory training – is being led by Wandsworth TPCT on behalf of the local PCTs in South West London.

Scoping Disease Specific Training Programmes is a project led by the TPCT for County Durham and Tees Valley in conjunction with the University of Teesside. This involved scoping programmes which support patients with specific diseases (**Long**

Term Conditions) and to identify the competencies required to run these programmes.

Questionnaire development is crucial to gaining feedback from service users, eg Stroke Services in Lincolnshire TPCT are currently developing a questionnaire for Stroke Patients.

Much of this research is useful to disseminate more widely, some is more **specific to local workforce and population needs**, e.g. oral history of South Asian GPs which Bradford & Airedale TPCT are currently proposing. They are also looking at Barriers for Simulated Patients in relation to ethnic minority groups.

3.3 Workforce Development

Basic skills training has already been mentioned under one of the main themes for recruitment and retention; it is also being provided by several TPCTs (within this funding) for their existing workforce.

Skills escalator development of the unregistered health and social care workforce is a TPCT priority. Training needs analysis for this staff group include study skills, Long Term Conditions, Mental Health and history taking. Examples of programmes developed for **Health Care Assistants** in primary care are East Lancashire and Medway and Eastern & Coastal Kent TPCT.

Organisations are developing **new roles** and **role redesign** and TPCTs looking at **skill mix**, particularly linked to the role of Health Care Assistants, include Nottinghamshire TPCT. Several TPCTs are using some of the funding for the development of new roles such as community matrons, to support learning networks and to monitor and evaluate progress eg Bradford and Airedale and Wandsworth TPCTs. Berkshire East are supporting a learning network for community pharmacists prescribing. Many are linked to the **Long Term Conditions** agenda.

Interdisciplinary education and learning programmes are being introduced across several TPCTs such as Bradford and Airedale and Plymouth. Public Health related workforce development includes learning events and education programmes to encourage people to work across into public health.

Accredited learning programmes have been developed by several TPCTs including

- Modules on B.Sc Health Studies – Plymouth TPCT
- Community Nutrition Assistants (Open College Network OCN accredited) Haringey TPCT
- Post Graduate Certificate in Health Enterprise – Practice Based Commissioning Northamptonshire TPCT
- Assistant practitioner development supported by Foundation Degree (Lincolnshire TPCT)

Sunderland TPCT is supporting the development of a **Skills Passport** across a healthcare community with the development of transferred statutory and mandatory training across community, primary and acute organisations, working towards similar standards of training and delivery.

Specific **clinical based training** and development includes:

First Contact Practitioner Programme (Haringey) where 15 students are undertaking the programme and 5 are now practising.

An Immunisation and Vaccination training programme for practitioners is being developed and updated by the TPCT for County Durham and Tees Valley. This is a cascade training programme, meeting the Health Protection Agency national standards, and is competency based linked to the Knowledge and Skills Framework (KSF) and Skills for Health frameworks.

Graduate Mental Health workers are providing core mental health element of condition management programme in Haringey.

Berkshire East TPCT are providing programmes linked to the public health agenda and population health needs assessment – CHD, Diabetes, substance misuse modules.

Technology ie e-learning and e-mentoring. An e-learning platform purchased by South Essex PCT Confederation allows them to now develop their own e-learning modules as well as using commercial packages. This increases the potential accessibility and learning coverage within the TPCT. South Essex PCT Confederation is also developing e-mentoring links with some of their local schools. Heart of Birmingham TPCT is developing a variety of e-learning resources to support mandatory training.

3.4 Local Partnerships and Networks

One of the underlying strengths of Teaching PCTs is their ability to work in partnership and develop productive networks within their locale.

For example in creating the Institute of Health and Social Care, the Teaching PCT for the East Lancashire area has developed strong links within the NHS – primary and secondary care, Strategic Health Authority, social services, Higher and Further Education, Deanery, independent and third sector agencies and potential links with regeneration schemes.

Plymouth TPCT in conjunction with the Teaching Public Health Network is joining forces with the Police, Probation and Environmental Health services amongst others. Other TPCTs such as Sunderland are also supporting the development of Teaching Public Health Networks, sharing the learning around the growth of a network, timescales and expectations, governance and accountability to partner organisations.

Haringey TPCT is one of several TPCTs working closely with their local Job Centre Plus and Economic Regeneration Teams and Neighbourhood Learning centres to create new opportunities for people coming to work in health or social care, with appropriate entry level skills.

Others such as Peterborough TPCT are also linking in with Learning and Skills Council (LSC), Centre for Vocational Excellence (CoVE), Connexions, Skills for Care and their local patient forum.

TPCTs have also been well placed to forge new working relationships following reconfiguration for those TPCTs whose organisations have changed as a result. The changing senior management teams may have slowed some developments in the early stages of their inception, but in the last quarter most TPCTs report that the initiatives have gained momentum and are back on the target.

4.0 Summary

This report only refers to projects supported in some way by the DH funding and it should be recognised that many other TPCTs are also working in the areas identified by specific TPCTs in Appendix Four, using other resources.

Projects include many which link to delivering the required performance and service transformation to support policy areas. These include Long Term Conditions and associated new roles and revised/enhanced roles, CPLNHS - retaining experienced staff through major change and transition, annual health check and performance, implementing NICE guidance for assessing mental health issues in children and younger people. Commissioning changes, including practice based commissioning, are the focus for some TPCTs.

Recruiting to the NHS in traditionally hard to recruit geographical areas – the ‘raison d’être’ of TPCTs initially, continues to be a key theme. Pathways to Work schemes are one of the main projects where TPCTs are working in partnership with other agencies to encourage people back into work and where appropriate into health and social care services.

TPCTs continue to broaden their partnerships and networking opportunities to facilitate knowledge transfer, share good practice and develop evidence where none is currently available.

Some projects are already being mainstreamed into PCT local development plans (LDPs) which is the aim for as many as possible successfully evaluated workstreams.

Much of this work and evaluation would not have been possible without the additional resources and demonstrates the value added of TPCTs and the strengthened national and regional networks as a result of this DH funding.

Appendix One

Membership of TPCT National Network Steering Group

| | |
|--------------------------|------------------------|
| Ann- Marie Coyne (Chair) | East Lancashire |
| Leo Atkins | Haringey |
| Paul Edmondson-Jones | Portsmouth |
| Linda Grimstead | South Essex |
| Sue Hepworth | Nottinghamshire County |
| Mary McClarey | Plymouth |

Appendix Two

Financial Allocation as at 30/01/07

£
Grant Fund
Expenditure

| | | |
|----------------|--|-------------------|
| | INCOME DoH | -1,778,400 |
| 2006/07 | tPCT allocations x 25 @ 50,000 | 1,250,000 |
| | tPCT invoice received x 1 @ 50,000 | 50,000 |
| | tPCT invoices pending x 4 @ 50,000 | 200,000 |
| | Steering Group backfill | 62,250 |
| | Conference 31.010.06 EVENT invoiced | 8,000 |
| | Conference 31.010.06 EVENT pending | 10,000 |
| | Regional networks X 6 @ 1,000 | 6,000 |
| | Steering Group events | 700 |
| | NHS NETWORKS SLA (04/06-09/07) | 90,000 |
| | TOTAL EXPENDITURE | 1,676,950 |
| | NET INCOME | -101,450 |
| 2007/08 | Steering Group | 30,000 |
| | Conference | 15,000 |
| | SLA extension to April 2008 | 25,000 |
| | Administrative support | 10,000 |
| | National project - bids invited from tPCTs | 20,000 |
| | | 100,000 |
| | Net income | -1,450 |

Appendix Three

Regional Network Leads

Northern Network – Ann-Marie Coyne
London Network – Tom Leach
Midlands – Sue Hepworth
South Eastern – Paul Edmondson-Jones
South Western – Mary McClarey
Eastern Network – Linda Grimstead

Appendix Four TPCT Projects – Progress to Date Recruitment and Retention

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|----------------------------|---|---|--|--|
| Berkshire East TPCT | Support and maintain existing workforce during CPLNHS reconfiguration | Newly established Berkshire East PCT – changing workforce and learning development programmes. Main focus of development – GP Practice, Practice Nurse, Health Care Assistant (HCA), Generic Support Worker (GSW), Community Pharmacy Prescribing | Funding used to support a range of needs assessment and learning development projects | Keeping to original plan and timescales –GSW and HCA particularly successful |
| Bournemouth and Poole TPCT | Community nursing workforce modernisation | Enhanced roles, wider range of skills and increased cover for staff absence facilitate retention of this staff group and realise the benefits of Agenda for Change Supporting the development of specialist nurse practitioners Embedding the role of community matron within the workforce | Substantial changes in skill mix, giving a wider range of opportunity for career development. District Nurses now lead large locality teams across several practices. Support for these clinical leaders includes a modernisation programme – HR, Budgeting, management, public health and clinical skills (£4,000) | On target |
| | Organisational and Human resources infrastructure development | Support for at-risk staff during CPLNHS changes | This includes road shows, CV workshops, and information portfolios. Competency frameworks have been adopted across several services to support induction, Preceptorship Appraisal and CPD (£6,000) | On target |
| Bradford and Airedale TPCT | Community Matron Development Programme | Rolling programme of protected learning time to support recruitment to and retention of community matrons | Educational programme commences Jan 2007. Initial evaluation March 2007 Further evaluation Oct 2007 to inform business planning and potentially mainstream programme | On target |
| Brent TPCT | Assistant Practitioners | 36 refugee and migrant doctors recruited and trained Oct 2006 - March 2008 | 7 refugee doctors recruited and placed in 6 GP practices. New roles tested and evaluated. (£6,000) | |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--|---|--|--|--|
| Brent TPCT (cont.) | Teaching Fellows | 4 GP Fellows recruited and significant savings on locum expenditure expected | 4 GP Fellows, 1 Paediatric Teaching Fellow recruited. Significant improvements to patient care. 90% savings on locum expenditure | Pilot ends Sept 2007. Adhering to timescales |
| | Gateway to employment | 28 entry level posts recruited from local community | 25 entry level posts recruited from local community | Due to be interviewed for posts Jan 2007 |
| Cheshire and Merseyside TPCT Collaborative | Training needs analysis of external courses for Allied Health Professionals(AHPs) | To support capability building and retention in highly skilled sector of the workforce. Coordinated CPD attracts AHPS to area | 4 areas of AHP training may be suitable for local delivery thereby increasing access and reducing costs. Network considering using 'motivational interviewing' training for all AHP staff groups | Keeping to timescales |
| | Workplace coaching course | To support and increase coaching capability within the organisation. Licensed by Leeds University | 8 places funded (£21,000) | Keeping to timescales |
| Greenwich TPCT | National Management Development Initiative | Senior and middle manager intensive development programme. Coaches and mentors provided for participants. | 74 managers trained in total Significant number of new mentors recruited and trained across the sectors. Plans in progress to extend the mentoring network. Three additional learning about leadership events took place | Initially delayed due to illness, now back on track. Looking to develop initiative across all London TPCT networks in 2007/8 |
| | NHS Health Trainer | Early adopter as one of four spearhead PCTs | Tested models of NHS trainers and shared best practice among local implementation teams Different models of recruitment and engagement of NHS Trainers tested Over 50 NHS Trainers now recruited and trained | On target. Now being mainstreamed in Southwark, Lambeth and Lewisham |
| Haringey TPCT | Employment Pathways to Health | Basic skills training, NHS induction, work experience placements, support job search and application and interview (if appropriate) | First cohort completed. 4 now working in local NHS, 14 trained in basic skills and IT to entry level | Next cohort starts Jan 2007 |
| | Working for Health | Developing condition management programme in collaboration with third sector, local authority, mental health services and physiotherapy services | Ongoing | Keeping to timescales |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|---|--|--|---|--|
| Haringey TPCT (cont.) | Pre-registration nurse training/clinical learning and placements | | All functions now mainstreamed | |
| Heart of Birmingham TPCT | Teaching Academy | Development of Teaching Academy Scoping interest of local stakeholder | Q2 information available | Q2 information available |
| Hull TPCT | Pathway to employment | Work experience scheme for admin and clerical to recruit local employed people into employment within NHS | 28 trainees have been recruited to the programme | Ongoing |
| | Learn2Care | Support unemployed beneficiaries to access career information, advice, guidance and work experience. | 105 unemployed beneficiaries will undertake some work placement activity in the sector. It also addresses skills gaps in existing employees. 300 existing employees will have a learning needs assessment and funded training is available to allow them to gain level two qualifications | Ends Dec 2007 On target |
| | Health and Well being course Local year 10 health and social care class | Accredited by Open College Network To raise awareness of NHS as potential employer and to learn about health and social care career opportunities | 9 pupils have achieved level one and a second cohort of 29 pupils will gain accreditation in summer 2007 | On target |
| Lincolnshire TPCT | Teaching Practices | Placement opportunities for all learners within General Practice. To increase the number of trainers available in general practice, by offering teaching, networking, qualifications and programmes | Successful project and increased demand. | Extended to September 2007 |
| Medway and Eastern & Coastal Kent TPCTs | Business case to develop recruitment and retention of local workforce post reconfiguration of PCTs | Identify priority areas for Business case | Priority areas agreed as Practice Based Commissioning and Health and Social Care integration. Consultation with new PCT Directors underway | Planning over five month period as new Directors appointed and consulted |
| Northamptonshire TPCT | Post Grad Cert in Practice Based Commissioning – Health Enterprise | Support staff to develop into new roles and responsibilities related to practice base commissioning. Effective recruitment into new roles identified by commissioning process | 16 participants on programme. Funding towards programme development, materials, lecturer time and evaluation at programme completion | Commenced Sept 2006. continuing as per timetable |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|-------------------------------|---|---|--|---|
| Nottinghamshire County TPCT | GP recruitment resources | Helping to address under doctored areas. To increase the number of GPs recruited by developing a recruitment resource and a Nottingham Partnership model | Project team being established and first meeting anticipated to be in Feb 2007. (£20,000 funding) | Currently under development. Evaluation of scheme potentially May 2008 |
| Peterborough TPCT | Implementation of Patient – led NHS | Implementation of appraisal system and evaluation of Personal Development Plan (PDP) outcomes to ensure that PCT is meeting the learning needs of staff under the knowledge and skills framework (KSF) | New structures agreed and development programme proposals going to the board Jan 2007. | On target for implementation end June 2007 |
| Plymouth TPCT | Mentoring and coaching programme for people on long term invalidity benefit | Programme to support people on long-term invalidity benefit access an opportunity to join the NHS workforce. Also to identify service users (mental health) preparing to return to work and currently undertaking voluntary work | Bringing individuals off long term incapacity benefit, improving their health and contributing to the PCT workforce. Pilot complete. Next stage Feb 2007 (£5,000) | Progress to timeframe. |
| | Clinical/Academic registrar scheme | Portfolio career opportunities for clinical staff (Upto 0.2 wte per week protected time) | 5 health professional benefited from scheme. Papers published, research grants awarded and PhD sponsorship secured for one person. (£3,000 first stage) | Progress to timeframe |
| South Essex PCT Confederation | Work placements | Increased awareness of NHS as an employer. Support for schools and pupils wishing to pursue a career in NHS | Further engagement with local schools and TPCT acts as contact point for work placements. Funding used to provide handbooks and information | Adhering to timeframe |
| | Talent Bank | Identifies GPs, nurses, Health Care Assistants, and Practice staff with spare capacity that can be used by the PCT/other practices | Funding used to update website and database | Adhering to timeframe |
| | Apprenticeship Scheme | 'Grow your own' staff training by ITEC | Pilot ongoing, placement currently at 6 months an training being supported | Adhering to timeframe |
| Stoke on Trent PCT | Organisational Development: Managing through change | Retention of staff through organisational change | Meeting convened between OD lead and external consultants to discuss programme content for managers and programme for staff | Delivery in Q4 |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--------------------------------------|--|---|--|---|
| Sunderland TPCT | CPLNHS transition support | Provide support to staff affected by CPLNHS | Developed project plan Training for in house facilitators to deliver sessions – workbooks/materials included Trained 3 cohorts of coaches and evaluators | Funding used to run 3 training programmes and development of job skills pack. Running to schedule |
| TPCT for County Durham & Tees Valley | Managing Change and Transition/Personal Transition | Enhance managers' understanding of the potential impact of change on themselves and their teams, services, organisations and service users. – CPLNHS Funding toolkit, materials and venues | First wave of programme evaluated well. Second series started August 2006. programme now also includes coaching, mentoring and facilitation skills in response to demand | Roll out to March 2007 |
| | Learning Teams for the Future | Build capacity for work-based learning in primary care. Develop leadership for learning. Funding for Printing the workbook and checklist | Workbook and checklist developed. Distributed to PCTs and practices Oct 2006 | PCTs to pick up with practices- main stream |
| TPCT for East Lancashire | Institute of Health and Social Care | 'Grow your own Staff' increasing and co-ordinating training and education opportunities across health and social care. | Possible locations linked with regeneration objectives being explored for hub and spoke model. Further discussions re capital/revenue costs Clarification of training needs with stakeholders (£25,000 contribution) | Business plan early 2007 Project start date April 2007- Sept 2007. Nb reconfiguration may impact on timescales |
| | Modernising Medical Careers | Increasing primary care education and training capacity – undergraduate and specialist training to recruit and retain medical staff. | F2 programme currently 16 tracks and 48 placements for doctors. Potential placements with local hospice for F2 doctors Piloting multi-disciplinary learning Pilot of management training for junior doctors, managers etc (£15k contribution) | Matched funding until 2007 |
| | Health Care Support Worker Programme | New job opportunities for existing staff and additional staff from non-traditional labour market | Facilitator developing impact assessment framework. Next cohort starts Jan 2007-01-03 Training needs analysis for unregistered staff – Chronic Disease Management topics included (£10k contribution to programme facilitator post) | Pilot project extended to offer training and work placements. Developing further training portfolio for primary care |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--------------|--|--|--|---------------------------------------|
| Walsall TPCT | Health and Social Careership Co-ordinator | Increase in people recruited locally into NHS and social care Decrease in attrition rate amongst young people entering into NHS career Supporting the educational attainment of local young people by enabling a vocational route into Further and Higher Education. | Broad partnership Steering Group overseeing and enabling project implementation. | Co-ordinator to be in post March 2007 |

Research and Development

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|------------------------------|---|--|--|---|
| Berkshire East TPCT | Needs assessment eg Health Care Assistants, Community Pharmacists | Clinical skills of Generic Support workers, Extending and enhancing the role of Health Care Assistants in Primary Care- assessing the impact of roles on new competencies. Joint needs assessment on 'single assessment' system for Children | Funding used to support the needs assessment | All keeping to original plan and timescales |
| Bournemouth and Poole TPCT | Development of a research awareness programme | Programme based on TPCT/ national priority areas and via quarterly Research Club (multidisciplinary) | Research results and evidence and of effective practice are disseminated via the library information services and local projects (£3,000) | Ongoing |
| Bradford and Airedale TPCT | GPs with Special Interest (GPSI) service evaluation | Gather and assess information on current national models used in GPSI heart failure services. | Backfill admin support identified to free up time for evaluation. Phase 1 interview GPSIs on Post Graduate Diploma for Special Interest re service pathways | On target |
| | South Asian GPs | To produce an oral history relating to the experiences of overseas-qualified South Asian doctors and see how they responded to the needs of an ethnically diverse population | Identifying GPs who are near to retirement and exploring their potential level of engagement with the project | On target |
| | Barriers for Simulated Patients | To identify the barriers to recruitment and retention of simulated patients from ethnic minority backgrounds – focus on communication and training issues | Initial scoping exercise underway | On target |
| | Dissemination of research through events | To share the learning through research | Learning sessions held on inclusion and diversity, obesity and healthy eating, Children and Young Peoples' participation | Development of 2007 programme underway |
| <i>City and Hackney TPCT</i> | <i>Pan London seminars</i> | <i>Dissemination of research</i> | <i>Q2 information available</i> | <i>Q2 information available</i> |
| Coventry TPCT | Children and Young Peoples' Teaching and Assessing System | Once junior staff are trained, they will deliver the teaching packages to children/young people. The packs are evidence based and will be peer reviewed and evaluated | Significant progress made in enhancement of training packs including video clips and stills. Focus group for carers to evaluate and feedback on the materials has been established. (£11,000 allocated) | On track |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|------------------------------------|---|---|--|---|
| Haringey TPCT | Second stage evaluation of Health Care assistant programme | To demonstrate the impact of programme on overall practice capacity | Practice nurses have been interviewed across 4 PCTs and case studies undertaken | Report to be available early 2007 |
| <i>Heart of Birmingham TPCT</i> | <i>Attending and contributing to conferences; AMEE and ASME</i> | <i>Dissemination of project work</i> | <i>Q2 information available</i> | <i>Q2 information available</i> |
| Lincolnshire TPCT | SHOUT – Stroke Service Users views | Development of a questionnaire to interview Stroke patients and find out their views of the service | Providing backfill and travel costs associated with developing the protocol and questionnaire. Further bid for funding being prepared | January 2007 |
| Medway Primary Care Research Group | Together with Higher Education support offered to GPs with research interests | First project to look at use of technology in diabetes care. Aim is that research will influence models of care in practice based commissioning | Peer reviewed and awaiting ethics committee approval. Once approved will recruit further practices and begin to collect data | Subject to ethical approval on time |
| Northamptonshire TPCT | Post Grad cert in Practice Based Commissioning – Health Enterprise | Full evaluation of project to support further development of programme | 16 participants on programme. Funding towards programme development, materials, lecturer time and evaluation at programme completion | Commenced Sept 2006. Interim evaluation Feb 2007 |
| Nottinghamshire County TPCT | HR research and Development | Encourage HR staff to participate in research. Set up interest group to develop research questions. To then undertake research project | Research Fellow appointed 0.1 wte to work with HR Agenda for Change team. Research project identified – primary care staffs' experience of agenda for change process and their perceptions of the outcome | Anticipated that study will be complete by end March 2007 |
| Plymouth TPCT | Small grants research Scheme | Dissemination of learning | Small grants scheme recommenced. Bringing national speakers to Plymouth. Disseminating research findings locally – eg length of stay after a fall in Parkinson patients, medicine compliance with COPD, results of schools' healthy weight (£5,000 £2,000 allocated to date) | Progress to timeframe. |
| Portsmouth TPCT | Bursary Fund | To support continuing professional development (CPD), retain highly skilled staff and build on research within programmes | Three Masters Programmes and one Doctorate programme – rehabilitation/looked after children/geronterlogical science/aging | On track |
| South Essex PCT Confederation | Essex Public Health Resource Unit | TPCT working closely with Public Health Unit regarding training on 1:1 or group basis | Ongoing | Adhering to timeframe |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--|--|--|---|---|
| Stoke on Trent PCT | Clinical Effectiveness | Literature review on information requirements of decision-makers, barriers to changing practice, information requirements of clinicians Local research groups to disseminate findings | Literature review completed on information requirements of decision makers, barriers to changing practice, information requirements of clinicians. Meetings held with local R&D groups. Presented information to clinical effectiveness group Discussed with GPs interested in R&D | Likely completion date Dec 2007 |
| Sunderland TPCT | Evaluation of Time In/Time Out protected learning time for Practices | Evaluation of protected learning time events for Practices | Evaluation completed | |
| TPCT for County Durham and Tees Valley | Scoping Disease Specific Training Programmes | Scope range, extent and content of primary care based programmes to support patients with specific diseases. Funding scoping activity by Teesside University | Scoping completed. Opportunities for PCTs to share developments and good practice have been identified. | Completed-mainstream to PCTs |
| TPCT for East Lancashire | Institute of Health and Social Care | Piloting and supporting evidence based practice. | Possible locations linked with regeneration objectives being explored for hub and spoke model. Further discussions re capital/revenue costs Clarification of training needs with stakeholders | Business plan early 2007 Project start date April 2007- Sept 2007. Nb reconfiguration may impact on timescales |
| | Modernising Medical Careers | Increased R&D opportunities in primary care for doctors in training | F2 programme currently 16 tracks and 48 placements for doctors. Potential placements with local hospice for F2 doctors Piloting multi-disciplinary learning Pilot of management training for junior doctors, managers etc | Matched funding until 2007 |
| | Health Care Support Worker Programme | Impact assessment of new roles, providing evidence of 'added value' of new roles | Facilitator developing impact assessment framework. Next cohort starts Jan 2007-01-03 Training needs analysis for unregistered staff – Chronic Disease Management topics included | Pilot project extended to offer training and work placements. Developing further training portfolio for primary care |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|-----------------|--|--|--|--|
| Walsall TPCT | Health and Social Careership Co-ordinator | Regular review of skills gap highlighted by employers | Steering Group overseeing and enabling project implementation | Co-ordinator to be in post March 2007 |
| Wandsworth TPCT | Evaluating People Development | Proposal for sector wide evaluation around mandatory training- defining mandatory training, impact and most effective learning methodologies | Majority of S West London PCTs supportive of project. Literature Review, Risk assessment, criteria for prioritising training needs, legal requirements, evidence of effectiveness of training, impact of managers on training, focus on moving and handling training | Slow start due to other priorities within area. Now making good progress |

Workforce Development

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|----------------------------|---|---|--|--|
| Berkshire East TPCT | Key Programmes- GP practice development Nurse Development Health Care Assistant Development Generic Support Worker, Community Pharmacy prescribing | Development of the new programmes. Supporting the establishment of a learning network for Community Pharmacists. Specific GP programmes on CHD, Diabetes and substance misuse to reflect the public health indicators | Funding used to resource a range of formal learning events and structured learning programmes for vocational/professional workforce | All keeping to original plan and timescales |
| Bournemouth and Poole TPCT | Competency development in Long Term Conditions | Audit of skills in primary and community care Skills development training programmes Implementing competency based frameworks adapted from Skills for Health | Completed a baseline of current skills in COPD, heart failure and diabetes and training needs identified. Diabetes programme for all HCAs (£6,000) | Ongoing |
| | Promoting Optimal Self Care | Programme for clinicians to support patients to self manage long term conditions | Won national recognition and award. A handbook has been produced promoting the benefits of self care to clinicians (£6,000) | Handbook for patients being considered as next stage |
| | Developing the role of Health Care Assistants | Supporting the non-registered clinical workforce to expand their roles | HCAs have now been comprehensively trained and assessed as competent to perform tasks such as blood glucose, health promotion, blood pressure, ECG (£8,000) | Ongoing |
| | Developing learning in primary care | Supporting primary care teams to learn together from an accessible network of expertise and resources | Multi-professional 'Learning Leaders' network established. Implementation of protected learning time in all practices Development of web based educational resources Support to practices to improve the training infrastructure (£7,000) | Ongoing |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--|--|---|---|--|
| Bournemouth and Poole TPCT (cont.) | Promoting public health | Working in partnership with patients, community and associated organisations to enable better access and support to lifestyle changes which improve health | Won local award and recognition. Bournemouth PCT, Borough Council and University all partners in the project supporting local public health initiatives such as Smokestop, healthy schools etc (£2,000) | Ongoing |
| Bradford and Airedale TPCT | Interprofessional Learning | To disseminate the findings from a West Yorkshire Interprofessional Learning Project seeking to break down the barriers to this learning approach | Data collected and in process of being analysed. Report available later in 2007 | On target |
| | Practice Management | Yorkshire-wide conference on Practice Management | Took place November 2006. Programme developed and circulate to practices | On target |
| Brent TPCT | Diabetes skills profile | Over 200 registrations on-line system, launch of local projects to develop diabetes skills- measurable reduction in follow up appointments in GP practices. To reduce the number of inappropriate referrals to secondary care | Discussions ongoing with Brent, Hounslow and Ealing PCTs on implementation of project (£6,000) | Launch of practice based phase delayed by financial constraints. |
| <i>Bristol TPCT</i> | <i>New models of care and roles to support community service developments</i> | <i>South Bristol Community Hospital due to open in 2008. Undertaking full costing of implementing the training needs and supported workshops</i> | <i>Q2 information available</i> | <i>Q2 information available</i> |
| | <i>Leadership for All Programme</i> | <i>Supporting new PCT organisational developments</i> | <i>Q2 information available</i> | <i>Q2 information available</i> |
| Cheshire and Merseyside TPCT Collaborative | Accreditation of in house programmes across the PCTs | Allows staff to APL their learning and gain academic credits- skills escalator approach | Area now investigated – to standardise core-learning outcomes in key topic areas, giving PCTs' confidence in level of previous training. Project expanded and likely to be continued into 2007/8 | Keeping to timescales |
| | Health and Social Care links | Building capacity in no-registered workforce across primary and social care | Capture best practice and share developments | Keeping to timescales |
| | Knowledge Skills Framework(KSF) | Enabling managers to develop the skills and experience to successfully implement KSF | Planning for event is progressing. Funding used for marketing materials (£2,000) | Keeping to timescales 31 st March 2007 end date |
| <i>City and Hackney TPCT</i> | <i>Action Learning set for strategic commissioners and education commissioners</i> | <i>Delivery of an action learning set attended by strategic and education commissioners. Self assessment in relation to their perception of learning</i> | <i>Q2 information available £15,000 allocated</i> | <i>Q2 information available</i> |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--------------------------------------|--|--|---|--|
| <i>City and Hackney TPCT (cont.)</i> | <i>Practice Based Commissioning</i> | <i>Delivery of 8 workshops</i> | <i>Q2 information available £5,000 allocated</i> | <i>Q2 information available</i> |
| | <i>Case management</i> | <i>Alternative proposals for use of specialist practice teachers. Improved pool of clinical assessors for advanced practice</i> | <i>Q2 information available £5,000 allocated</i> | <i>Q2 information available</i> |
| | <i>Urgent Care</i> | <i>Models of skill mix and translation to education commissions</i> | <i>Q2 information available £5,000 plus £6,000 p/t facilitator to oversee projects</i> | <i>Q2 information available</i> |
| Coventry TPCT | Weight Management Groups | Training and development for Primary Care Staff to deliver weight management groups in their community. Participation and progress of participants will be monitored | Expert trainers commissioned and materials purchased to support groups. (£10,000 allocated) | On track Training dates set for March 2007 |
| | Haematology/Oncology Community liaison nurse | To provide community nurses with ongoing training and development in oncology and haematology client groups' care | Recruitment to post early in 2007. service changes within community services have delayed appointment (£20,000 allocated) | Some delay and hope to appoint to post early 2007 |
| | NICE Guidance – Delivery of Depression treatment in Young People | Training and development for primary care staff so that they recognise depression in children and young people and intervene appropriately to identify risk and referral. Using a train the trainers approach. | Protected learning time for CAMHS practitioners to develop modules and training plan to support Tier 1 staff. Module to be piloted early in 2007 (£9,000 allocated) | On track |
| Greenwich TPCT | Learning Culture within TPCT | Empowering staff using a range of previously developed tools Encouraging and supporting all staff to register with NHS Networks as a base for best practice across all six PCTs | Event for 120 administrative and clerical staff held in May 2006 Workshops in clinical governance planned Feb 2007 – Long term Conditions and End of Life Care Tools and workshop methodology adopted by Allied Health Professionals (AHPs) | Initial delay due to illness and now back on track |
| Haringey TPCT | First Contact Care Practitioner Programme | First Contact Service aims to improve patient experience and free up health care professional time. | Ongoing | Programme ends Sept 2007 |
| | Community Nutrition Assistants Development Programme | Level 2 Open College Network (OCN) work placement modules now being extended to run across North Central London. | 14 students now completed the programme | To timetable |
| | Graduate Mental Health Workers | Providing clinical services to 5 GP practices working in the wider community. | Ongoing | To timetable |
| <i>Heart of Birmingham TPCT</i> | <i>Facilitator for Long Term Conditions</i> | <i>To provide an educational programme to foundation degree level</i> | <i>Q2 information available</i> | <i>Q2 information available</i> |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--|---|--|--|--|
| Heart of Birmingham TPCT (cont.) | E-learning resources for mandatory training | To develop a variety of e-learning resources for mandatory training | Q2 information available | Q2 information available |
| | Public Health and Mosaic data | To determine local need and develop more effective methods of reaching that population group | Q2 information available | Q2 information available |
| Hull TPCT | CHD ISIP key pathways | Integrated care pathway for suspected/diagnosed Ischaemic heart disease – development of workforce plans to support model | Ongoing | Completion date Aug 2007 |
| | Developing capacity in public health workforce | Competence- based skills audit and learning needs assessment of specialist and practitioner roles plus wider workforce | Also gained neighbourhood renewal funding to support initiative | On target |
| | Mentoring pupils and students | Pupils and students in local schools and colleges linked to PCT mentors for those pupils interested in possible career in health and social care | 26 PCT staff expressed interest in becoming mentors. Training scheduled early 2007 | Feb 2007 training programme starts |
| | Health trainers | Co-ordinating local trainer hub across Humber PCTs | Regular meetings held to share learning and good practice from the health trainer programme | Ongoing |
| Lincolnshire TPCT | Assistant Practitioner – supported by Foundation Degree | To meet the growing need to extend roles previously undertaken by qualified practitioners. | Course being run from January 2007 (Subject to successful validation). Service redesign ongoing with clinical teams. Envisaged that 2 cohorts will run per annum for Foundation degree | Course starts Jan 2007 – first cohort |
| Medway, Eastern and Coastal Kent TPCTs | Knowledge and Skills in Primary Care Pt 2 | Training programme for health care assistants working within general practice. Developing second stage of programme following evaluation and training needs analysis | Next two units have been developed and undergoing peer review. First cohort in early 2007 | Ahead of schedule |
| Northamptonshire TPCT | Post Grad cert in Practice Based Commissioning(PBC) – Health Enterprise | To provide skills and knowledge for NHS employees involved in implementing Practice Based Commissioning. Enable knowledge transfer from participants to others involved in PBC | 16 participants on programme. Funding towards programme development, materials, lecturer time and evaluation at programme completion | Commenced Sept 2006. continuing as per timetable |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|------------------------|---|---|--|--|
| Nottinghamshire County | Long Term Conditions Education and Training | To support the Long Term Conditions (LTC) Workforce and Education Development delivery plan – ensuring workforce have the capability and capacity to improve the health outcomes for this client group | Development of a competency-based LTC education and training programme. Support post-project evaluation of the Gedling Action Team (£20,000) | First programme completed and evaluated well. Next 2 programmes to be delivered by end March 2007. Evaluation report envisaged to be ready by end March 2007 |
| Peterborough TPCT | Skills Partnership Development | Project manager post to enable all local PCTs to increase their learning and development activities to deliver patient led NHS agenda. Development of further partnerships through the workforce development team engaging in new opportunities eg Care Ambassador scheme | Skills partnership project manager and admin appointed. | ON target to end September 2007 |
| Plymouth TPCT | Teaching Public Health Network | Leading a learning event – signposting public health related workforce towards educational opportunities in public health | Learning event planned March 2007-01- (£4,000) | Progress to timeframe. |
| | Education and Training Programme | Developing an education and training pathway for directly employed medical staff and primary care teams. In collaboration with Peninsula Medical School | Ongoing | Progress to timeframe. |
| | Partnership modules | Registered as academic partner with University of Plymouth. Clinicians developing optional learning modules on BSc Health Studies programme | Ongoing | Progress to timeframe. |
| Portsmouth TPCT | Work based programmes | Intensive training for specialist team working with borderline personality disorder and deliberate self-harm. Action learning set which developed falls prevention and management training programme | Falls prevention and management training due to roll out spring 2007 | On track |
| | Public health trainer | To develop and disseminate learning across identified communities and work in partnership with local organisations such as Sure Start, Healthy Living Centres and Probation service | Team recruited | On track |
| | Development of community nurses and HCSWs | Use of staff and patient educators to provide bespoke programmes | To date includes: Tissue viability, continence care, bowel care, diabetic care, phlebotomy, bariatrics | On track |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--------------------------------|---|---|---|--|
| Salford TPCT | Integrated Health and Social Care Teams | Supporting the development of integrated health and social care teams in Salford Establish the lessons learned from Walkden team such as: planning, barriers, success factors. Evaluate the needs of all stakeholders and organisational readiness to implement integrated care teams. Assist in the OD support to the whole city implementation | Production of project plan and Manchester business School appointed to undertake evaluation | Jan- Feb interviews with key stakeholders March Evaluation report April-May OD action plan June OD support in place On target with above |
| | North West Teaching PCT Partnership | Development of new learning network across the North West | Ongoing | Ongoing |
| South Essex TPCT Confederation | E-learning | Provision of e-learning platform | Learning Management System established. | Slightly behind timeframe- meetings with new Directors been arranged |
| | Non Clinical Training | Training provision for non-clinical staff | Customer care for receptionists, risk assessment, skills for secretaries – provision currently underwritten by TPCT | Adhering to timeframe |
| | Development of Training Practices | Supporting the development of training practices – GPs undertaking Masters in Clinical and Medical Education -> Trainers | Ongoing | Adhering to timeframe |
| | E-mentoring | E-mentoring Scheme involving schools and health care professionals | Further school engaged. Training provision for mentors and mentees and materials funded by TPCT | Adhering to timeframe |
| Stoke on Trent PCT | Clinical Supervision Model | More structured system supporting staff to grow their professional expertise. Closer monitoring and evaluation of supervision and action on feedback Training for practitioners Involvement of Allied Health Professionals (AHPs) and health care support workers e-learning solution to increase training options | Design for clinical supervisory framework commissioned and costed. Focus groups have been convened e-learning solution identified | Focus groups and training postponed until reconfiguration complete within TPCT |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|--|---|---|---|---|
| Sunderland TPCT | Skills passport | To support ongoing development of a skills passport – produce a common standard of statutory and mandatory training | Ongoing | Running to schedule |
| | Project Planning Pack | Development of a project planning pack | Ongoing | Running to schedule |
| | Innovations website | | Ongoing | Running to schedule |
| TPCT for County Durham and Tees Valley | Immunisation and Vaccination Training Programme | To sustain and further develop a training programme for registered practitioners. To ensure consistency of approach across local PCTs. To provide a competency based programme in line with KSF, Skills for Health and Health Protection Agency guidance. Funding supported updated materials and training costs for trainer programmes | Updated participant workbook and trainer's manual. Over 850 people now trained since the programme began in January 2005 | E-learning version hoped to be developed in 2007 |
| TPCT for East Lancashire | Institute of Health and Social Care | Developing new roles, supporting role redesign, skill mix and inter-disciplinary learning. Supporting competency and work-based learning | Possible locations linked with regeneration objectives being explored for hub and spoke model. Further discussions re capital/revenue costs Clarification of training needs with stakeholders | Business plan early 2007 Project start date April 2007- Sept 2007. Nb reconfiguration may impact on timescales |
| | Modernising Medical Careers | Expansion of multi-professional learning and education to populate practice-based learning environments | F2 programme currently 16 tracks and 48 placements for doctors. Potential placements with local hospice for F2 doctors Piloting multi-disciplinary learning Pilot of management training for junior doctors, managers etc | Matched funding until 2007 |
| | Health Care Support Worker Programme | Mainstream development of unregistered health and social care workforce. Establishing skills escalator across health and social care economy. | Facilitator developing impact assessment framework. Next cohort starts Jan 2007-01-03 Training needs analysis for unregistered staff – Chronic Disease Management topics included | Pilot project extended to offer training and work placements. Developing further training portfolio for primary care |

| TPCT | Project | Project Outcomes | Summary of Progress to date | Timescales |
|-----------------|--|---|--|---------------------------------------|
| Walsall TPCT | Health and Social Careership Co- ordinator | Supporting the development of the future workforce | Steering Group overseeing and enabling project implementation | Co-ordinator to be in post March 2007 |
| Wandsworth TPCT | 'Team Task Tool' implementation | Tool to support teams work through Healthcare Commission's annual health check. Compliance against standards can be checked. Good practice shared and teams supported where necessary | System 'live' for three months on three core standards. 96% response rate – need to sustain this level of response. Electronic data collection system to replace manual system. Due to go live Feb 2007 | Project on target |
| | Implementing Community Matron Role across South West London | To facilitate a sector-wide approach to monitor and evaluate the outcomes of the Community Matron role | Identification and monitoring progress of community matron roles. Group beginning to work as a group. Workshop to be held in early March 2007 at the request of the group – collaborative working approach | Project on target |