

	Current position	Action	Risk	Date to be achieved
Staff capacity / resource	<p>Adult service</p> <ul style="list-style-type: none"> Existing sessions sufficient for current pump service Limited use of group starts for uncomplicated patients Adult service has identified additional staffing requirements and funding for additional pump starts over 4 year period 	<ul style="list-style-type: none"> Adult clinicians currently reviewing model of care for delivery of service Review use of group starts for less complicated patients to maximise capacity Phase in new sessions: 2012/13 - ↑ 0.45 WTE 2013/14 - ↑ 0.35 WTE 2014/15 - ↑ 0.35 WTE 2015/16 - ↑ 0.3 WTE 	<ul style="list-style-type: none"> Group start approach not appropriate for all patients Insufficient funding to meet required capacity 	<p>31st June 2012</p> <p>31st March 2016</p>
	<p>Paediatric service</p> <ul style="list-style-type: none"> Team is developing capacity post NDP funding but is 1.0 WTE Consultant down due to long term absence Currently no pumps initiated, first two are planned for June. Current capacity (including NDP funded posts) can support 10 pumps per annum Additional staffing requirements and funding identified for additional pump starts over 4 year period Plan to move to group educational work which would be up to 2-3 cases at a time Adult service would cover 16-18 yrs reducing the demand on Paediatrics from 99 to 77 pump starts 	<ul style="list-style-type: none"> Train third Consultant after the initial pump starts are established Phase in new sessions: 2012/13 – no additional funding 2013/14 - ↑ 0.555 WTE 2014/15 - ↑ 0.555 WTE 2015/16 - ↑ 0.555 WTE 	<ul style="list-style-type: none"> Insufficient funding to meet required capacity Ongoing support required by children and families is greater than expected (they require a much more wrap around support than adults) Some patients require greater individual support i.e. group starts not appropriate for all Schools and nurseries reluctant to support children for insulin pump initiation Discussions ongoing, but may require additional support from Paediatric team 	<p>31st March 2016</p>
Service infrastructure	<p>Adult service</p> <ul style="list-style-type: none"> In place for current pump service (72 patients funded) Service unable to support proposed number of new pump starts within 3 years – plan developed for 4 year time scale Specialist staff have agreed to review current clinical model to maximise capacity 	<ul style="list-style-type: none"> Implement 4 year time-scale for new pump starts: 2012/13 - ↑38 (16 currently funded; 22 for 16 & 17 yr olds) 2013 to 2016 - ↑39 / 40 per annum Specialist staff to review current practice 	<ul style="list-style-type: none"> Public expectations are for shorter time-frame Revised clinical model and additional staffing resource insufficient to achieve targets 	<p>31st March 2016</p>

	Current position	Action	Risk	Date to be achieved
Service infrastructure (continued)	<p>Paediatric service</p> <ul style="list-style-type: none"> • In place for current planned 10 pump starts per annum • Service unable to support new target of 25% of young people by March 2013 	<ul style="list-style-type: none"> • Develop Paediatric pump service over 4 year time scale • Formalise a pump service group • Develop criteria for paediatric pump initiation • Identify patients for pump initiation • All three Consultants to support pump starts for their own cases • Implement 4 year time-scale for new pump starts: 2012/13 10 pump starts 2013/14 22 pump starts* 2014/15 22 pump starts* 2015/16 22 pump starts* * with additional investment 	<ul style="list-style-type: none"> • Delays to meeting targets due to need for ongoing staff training and time to gain confidence in new service • Maintenance of pumps once in service 	31 st March 2016
Staff expertise / training	<p>Adult service</p> <ul style="list-style-type: none"> • Appropriate skills and expertise in place 	<ul style="list-style-type: none"> • Ensure staff resource available to assist development of Paediatric pump service 	<ul style="list-style-type: none"> • Requirement to upskill new staff in the event of existing staff leaving 	Ongoing
	<p>Paediatric service</p> <ul style="list-style-type: none"> • Multi-disciplinary staff have recently completed group pump training • Little or no practical experience within the team and would require support of adult and pump company colleagues to build confidence 	<ul style="list-style-type: none"> • Team require time to consolidate learning and gain experience • Increase capacity as team become familiar with process • Case by case agreement for Paediatric/Adult shared care as required in the 14-16 transition group 	<ul style="list-style-type: none"> • New NDP staff do not complete basic diabetes qualifications on time • Lack of confidence in new pump service extends timescales (ongoing support from established adult service) 	Ongoing
Managing public expectations	<p>Adult service</p> <ul style="list-style-type: none"> • Public enquiries currently being managed effectively by specialist staff • To date, limited number of negative responses from the public • Expansion of Type 1 structured education for adults throughout Lanarkshire has removed / delayed the clinical need for pump therapy for some people 	<ul style="list-style-type: none"> • Develop a communications plan to advise Lanarkshire population of new service 	<ul style="list-style-type: none"> • Public expectations are for shorter time-frame 	30 th June 2012

	Current position	Action	Risk	Date to be achieved
Managing public expectations (continued)	<p><u>Paediatric service</u></p> <ul style="list-style-type: none"> • Staff answering questions in clinic time • Current demand being addressed through recent training and planned pump starts for this year 	<ul style="list-style-type: none"> • Once action plan agreed, ensure all staff are aware of NHSL position • "KICK-OFF" pilot being evaluated in England, consider implementation once reported 	<ul style="list-style-type: none"> • Potential for increased demand - will be tempered by clinical need and assessed capacity to comply with system 	Ongoing
Management of costs	<p><u>Adult service</u></p> <ul style="list-style-type: none"> • Currently managed by Diabetes Service Manager i.e. monthly review of budget statements; scrutiny of patient supplies invoices; identify over-ordering and discuss with individuals as required 	<ul style="list-style-type: none"> • Continue with current arrangements, encompassing additional funding • Continuing to liaise regularly with Finance Department and Management Accountants 	<ul style="list-style-type: none"> • Insufficient funding to support identified number of pumps and consumables required 	Ongoing
	<p><u>Paediatric service</u></p> <ul style="list-style-type: none"> • Will be managed through North East Unit Finance group 	<ul style="list-style-type: none"> • Liaise regularly with Management Accountant and monitor spending against budget 	<ul style="list-style-type: none"> • Insufficient funding to support identified number of pumps and consumables required 	Ongoing
Monitoring of targets	<p><u>Adult service</u></p> <ul style="list-style-type: none"> • Currently monitored on a regular basis by Diabetes Service Manager and specialist staff • Bi-monthly Multi-disciplinary team (MDT) pump meetings identify people requiring pump therapy 	<ul style="list-style-type: none"> • Request Clinical Quality support to develop more robust system for monitoring • Monthly reporting to Executive Director / Programme Board • Increase MDT meetings to monthly 	<ul style="list-style-type: none"> • Absence of a robust monitoring system would compromise ability to provide full reports / updates for Scottish Government 	30 th Sept 2012
	<p><u>Paediatric service</u></p> <ul style="list-style-type: none"> • No pump starts at this time 	<ul style="list-style-type: none"> • Monitor through Paediatric Diabetes Steering Group and Childrens Services Management Team • NDP funded data admin. worker to manage data base and collate stats • Monthly reporting to Executive Director / Programme Board 	<ul style="list-style-type: none"> • Any difficulties with monitoring system would compromise ability to provide full reports / updates for Scottish Government 	31 st July 2012