

**MID TRENT CANCER NETWORK**  
**INFORMATION PRESCRIPTIONS**  
**PROJECT**

**PROJECT DELIVERY PLAN**

**January 2007-January 2008**

**MID TRENT CANCER NETWORK  
INFORMATION PRESCRIPTIONS PILOT PROJECT**

**PROJECT DELIVERY PLAN (JANUARY 2007-JANUARY 2008)**

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## PROJECT DELIVERY PLAN (JANUARY 2007-JANUARY 2008)

### 1. Introduction

'Our health, our care, our say' (Department of Health, January 2006) announced an intention to provide everyone with long-term health and social care needs and their carers an 'information prescription'. The idea for these information prescriptions arose from the need for people with cancer to have access to information that is more directly relevant to their diagnosis and personal circumstances, so that they are better equipped to make decisions about their treatment and their future.

#### What are information prescriptions?

Information prescriptions are an evolving concept but in principal are designed, in part, to inform people about their health and to signpost them to further information, services and support, in a highly individualise way. Information prescriptions may be delivered by a health care professional following a discussion with the patient and their carer about diagnosis, treatment options, concerns, appointments, support and other queries.

Information Prescriptions are in their infancy and the Department of Health have launched a one-year pilot project to develop and implement information prescriptions in cancer, mental health and amongst vulnerable elderly people.

The aim of the Information Prescription Pilots *is to develop a systematic approach to information prescriptions that ensures that anyone with a long term condition or social care need and/or their carer can access information that is relevant to their well being, health and care.* Building on the results of the pilots, information prescriptions will be rolled out across England.

### 2. Information Prescription Pilots

Following some initial discussions with Cancerbackup, the Mid Trent Cancer Network was invited by the Department of Health, in November 2006, to become a pilot site for information prescriptions. At the end of December 2006 approval was given by the Department of Health and £94,500 was awarded to the Cancer Network to undertake a one-year pilot project from January 2007 to January 2008.

The draft bid was discussed and approved by the Network Patient Information and Communication Group at its meeting on the 12<sup>th</sup> December 2006, and the group approved the establishment of a smaller pilot project steering group to oversee the project. The final bid was also agreed by and signed off by the Chief Executive of the Mid Trent Cancer Network Management Board. The Network Management Board further endorsed the project at a meeting in January 2007.

#### 2.1 The purpose of Information Prescription Pilots

The purpose of the Information Prescription Pilots is to develop and test information prescriptions for people in their area. The pilots will:

### Information Prescriptions Pilot Project - Delivery Plan

- Develop and test the process for people to receive information prescriptions in health and social care settings;
- Evaluate the impact and benefits of information prescriptions and provide data on their effectiveness;
- Contribute to an independent research oriented evaluation of the pilots.
- Pilots will record their approach, learning and results to inform the development of policy and contribute to national rollout.

## 2.2 Expectations of the Information Prescription Pilots

It is expected by the Department of Health that all the pilots will take the following steps to develop, test and implement information prescriptions:

- **Identify Content** - decide which information content patients, social care users and carers should be given and pointed to;
- **Establish directories** - compilation of the repository of links which point to the content (e.g. telephone numbers, web addresses)
- **Information prescription template generation process** - the process by which a personalised information prescription is created which will contain specific items listed in the directory for a specific point on a care pathway
- **Issuing process** - The process by which the information prescription is issued to the patient or social care user.
- **Information accessing process** - so that the patient or social care user or carer receives the information (e.g. hardcopy printout, healthspace account, NHS Direct delivery service)

## 2.3 The Process

To do this, individual pilots should:

- Work in partnership with patients, carers, service users, local trusts and services, professionals and IT departments to develop information prescriptions
- Work with the evaluation team to ensure that the work of individual pilots contributes to the overall purpose of the pilots to inform national policy and implementation
- Work with other pilot sites and the evaluation team to share learning and contribute to problem solving
- Collect and provide data to the evaluation team;
- Provide regular progress reports to the evaluation team;
- Participate in regular meetings convened by the evaluation team;
- Share experiences of developing and giving people information prescriptions.

In addition, pilots should work collaboratively with each other and the Evaluation Organisation to identify activities, which would benefit from developing and agreeing a common approach.

### 3. The Mid Trent Cancer Network Information Prescriptions Pilot Project

#### 3.1 Introduction to this section

The following sections of this plan provide the detail requested by the Department of Health in the Delivery Plan proforma. The specific sections in the Department of Health (DH) Delivery Plan proforma are cross-referenced and highlighted in red.

From the Strategic Objectives set out by the Department of Health for the Information Prescriptions Pilots the Mid Trent Cancer Network proposal focuses on some specific areas and questions:

- Who will deliver them?
- How will they be delivered?
- What will they include?
- What resources are required specifically for delivery?
- How much will these resources cost?

#### 3.2 The key objective of the project: (Section 1 in the DH Proforma)

By the end of January 2008 we will have developed and tested information prescriptions for patients with lung, gynaecological and head and neck cancers within the Mid Trent Cancer Network.

#### 3.3 The desired outcomes are as follows: (Section 1 in the DH Proforma)

By the end of the project (January 2008) we will have

- Developed underlying principles, a model and process for the delivery of information prescriptions to patients and carers on the lung, gynaecology and head and neck cancer pathways.
- Delivered these information prescriptions
- Considered the development of 'patient information formularies'
- Evaluated the delivery and provided answers to some of the key questions (see 3.1 above).

#### 3.4 The Information Prescriptions Pilot Project (IPPP)

- *Settings:* The Information Prescriptions Project (IPP) would cover the whole of the Mid Trent Cancer Network (Nottinghamshire and Lincolnshire) covering primary and secondary care and the voluntary sector mirroring the current information pathways of three cancer pathways (head and neck, Gynaecological and Lung Cancers).

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- **Content:**
  - The Project would seek to identify and assure the content of information prescriptions (For example, what do patients need, what they want, and what is possible for professionals to deliver).
  - The Project will examine these issues with a range of stakeholders (patients, carers and professionals), develop a range of prototypes and test them in the field to find out what works for patients).
- **Process:**
  - The Project would focus on the process for issuing information prescriptions (How they are drawn up and who is responsible).
  - It would also look at the integration of the information prescription into existing patient information pathways (Head and Neck, Lung and Gynaecological Cancers) and see whether it needs to vary along the pathway, and how it gets updated and reviewed at different points along the pathway.
- **Conditions:**
  - The pathways identified above cover complex conditions with more than one point of care on the pathway.
- **Delivery:**
  - Based on the assumption that the information prescriptions will be dispensed to patients on the lung, gynaecological and head and neck cancer pathways (for which we already have patient information pathways developed) we would anticipate dispensing approximately 60 information prescriptions per month.
  - The project would evaluate the economic implications of implementation and delivery of information prescriptions for the groups identified above.
- **Support:**
  - Given the ethnic profile of the Network the project would more realistically be interested in looking at the access to information in a variety of formats, which would also build on work already undertaken in the information pathway developments.

### 3.5 Project Management arrangements (Section 2 in the DH Proforma)

The Mid Trent Cancer Network has appointed Sheila Williamson, Director from Dearden Consulting Ltd as Project Manager. Sheila will work closely with Elaine Wilson, Network Nurse Director in steering and managing the project and ensuring the successful delivery of the project objective and desired outcomes.

A Network-wide **Information Prescriptions Project Steering Group** has been established, and began its work in January 2007. The group comprises key stakeholders across the health and social care communities within the Networks' boundaries, including primary and secondary care, voluntary organisations and most importantly patients and carers. Much of the membership is drawn from the clinical Multi-disciplinary Teams and Clinical Nurse Specialists for the three different cancer sites. The Project Steering Group has agreed to co-op other members as appropriate, as the project develops.

The Project Steering Group is also working in partnership with other well-established groups within the Cancer Network, namely the Network Patient and Public Partnership Group, the Network Site Specific Groups for Lung,

## Information Prescriptions Pilot Project - Delivery Plan

Gynaecological and Head and Neck Cancers, the Network Education and Training Group and the Network Cancer Care Professionals Group.

The group has elected a carer to chair the group, who will be fully supported by Sheila Williamson and Elaine Wilson in this role. The group has developed and agreed terms of reference, membership and an outline work programme (Copies of which are available on request and have been sent to OPM).

The Network Information Project Steering Group reports to the Network Information and Communication Group and the Network Management Board (which comprises of the Chief Executives of the networks constituent organisations). Group members are also accountable to their managers within their own organisations.

The Project Steering Group and Project Manager will provide monthly reports to the Department of Health and to the Network Information and Communication Group, as well as to all key stakeholders.

### 3.6 Stakeholder engagement (Section 1 in the DH Proforma)

Stakeholder engagement is already well underway and embedded in the project process and delivery. As described above there is a well-established and robust infrastructure in place, which is facilitating effective communication and stakeholder engagement. The feedback we have received to date has been extremely positive and there has been higher than expected levels of engagement with the project, and a huge amount of enthusiasm has already been generated.

As part of this engagement process we have developed effective communication systems, mainly through email, letters, regular meetings, briefings. We also plan to develop a page on the Mid Trent Cancer Network Website as another way of publicising the work. We are also working in partnership with the Public Relations Department of our host trust to plan ways of maximising positive publicity for the project.

We are organising a Stakeholder Event on 27<sup>th</sup> March 2007, to further promote and develop the work. Invitations have been widely circulated and to date we have 55 delegates from across the Network registered, with over half of the delegates being patients and carers.

The team and Steering Group are working on contingency plans to maintain and optimise stakeholder engagement throughout the course of the project.

### 3.7 Coverage (Section 3 of the DH Proforma)

To reiterate, the Mid Trent Cancer Network Information Prescriptions Pilot Project will cover the whole of the Mid Trent Cancer Network, namely Nottinghamshire and Lincolnshire. There are three acute trusts on 7 sites (Nottingham University Hospitals NHS Trust [City Hospital Campus and Queens Medical Centre Campus], Sherwood Forest Hospitals NHS Trust [Kings Mill Hospital and Newark Hospital], and United Lincolnshire Hospitals NHS Trust [Grantham Hospital, Lincoln County Hospital and Pilgrim Hospital, Boston]). The area also includes the three Primary Care Trusts, Nottingham City PCT, Nottinghamshire County Teaching PCT and Lincolnshire PCT as well as social services within the three health communities.

Information Prescriptions for Lung, Gynaecology and Head and Neck cancers will be developed across the Network, and then piloted on selected sites, although all the

### Information Prescriptions Pilot Project - Delivery Plan

sites will be involved in piloting. We hope to cover all points along the patient care pathway as described in the Patient Information Pathways for the three cancer sites. At present a wide range of health and social care professionals have been involved. Again we are working towards greater clarity as the project develops.

We are aiming to issue 20 information prescriptions per month per cancer site (a total of 60 per month) - although more work needs to be completed on this.

The actual prescribing and dispensing locations are yet to be decided, but will probably be in the locations described above.

#### **3.8 Baseline Assessment (Section 4 of the DH Proforma)**

The baseline assessment exercise is currently underway and will draw from a wide range of information sources within the Network, such as the Networks Health Needs Assessment (2004), Network Service Delivery Plan (2006-9), Network Annual Report (2006-7) and an Information Service Development Proposal to Macmillan Cancer Support (2006). The baseline assessment will address the following issues and questions:

- How do patients, carers and health professionals currently find out where to go to gather information materials - how do they know where to go?
- How do patients, carers and health professionals currently gather information materials within the area the pilot will be covering - what sources do they use?
- What types of information materials do patients, carers and health professionals currently gather?

We also plan to gather views, comments on these questions from the audience at the Stakeholder Event on the 27<sup>th</sup> March 2007. The baseline assessment will be submitted by the 2<sup>nd</sup> week in April 2007.

#### **3.9 Design, delivery and introduction of information prescriptions (Sections 5 and 6 in the DH Proforma)**

The following milestones have been set down by the Department of Health:

1. Identify content and establish how accessible directories will be designed by 1.4.07
2. Agreed design of information prescription template by 1.4.07
3. Agree design of prescribing process by 1.4.07
4. Agree design of dispensing process by 1.4.07
5. Introduce Information Prescriptions by 1.5.07

These milestones have been discussed by the Network Information Project Steering Group, and with Rob Coffey from OPM. We will not be able to achieve these milestones within these very short timescales. Firstly, we have a stakeholder event arranged for the 27<sup>th</sup> March 2007, at which the first four questions will be addressed. The timescales do not allow for us to have sufficient time to then process and develop the material elicited from this event by the 1<sup>st</sup> April 2007.

Within the Network we are committed to managing a project, which will deliver sustainable outcomes, which are meaningful to patients, carers and healthcare professionals. In order to achieve this we need to engage a wide range of patients, carers and professionals. Meaningful engagement and the robust development of the tool and process require time. We have thought about this long and hard and

feel that we need a little more time in the planning and design stages in order to achieve this. We have excellent relationships with the key stakeholders who are engaged and motivated and we feel that we can implement an accelerated implementation phase within a shorter time frame.

Within this project delivery plan we are aiming for the design and development to be completed by 30.06.07 and information prescriptions will be implemented on 1 July 2007, which equates to a 2- month slippage on the above milestone deadlines.

### **3.10 Monitoring and assessment progress (Section 7 in the DH Proforma)**

We will be working closely with OPM to develop and design a process for the robust monitoring and assessment of our progress against the delivery plan. We are currently providing monthly update reports to the Project Steering Group and to the Network Information and Communication Group. Quarterly reports will be delivered to the Network management Board, who received a Briefing paper about the project in January 2007. Following the stakeholder event on the 27<sup>th</sup> March 2007 we will be establishing a much wider communication framework, which involves all interested parties and key stakeholders.

All activity will be recorded by the Project Manager and Nurse Director and will be held centrally within the Mid Trent Cancer Network Office. We are also developing a process of evaluation using reflection and recording reflections and observations in a Learning Log/Diary.

As part of the presentation of the monthly update report to the Project Steering Group, the group will be assessing progress and critically analysing the report and identifying issues for further action or modification.

### **3.11 Engagement with the Consortium and other Information Prescription Pilot Sites (Section 8 in the DH Proforma)**

The Project Manager and Nurse Director have already met with Rob Coffey from OPM, and have been in telephone contact with GfK. We have shared a plethora of information with OPM to date, such as our Briefing paper, Project Delivery Plan (first draft), Steering Group terms of reference, minutes of meetings and so on.

We are keen to establish these links and develop close and effective working relationships with all members of the Project Consortium. We have expressed our willingness to be involved and engaged as fully as possible and to share our work and experiences. We welcome working in partnership with the other pilot sites and hope to establish a forum for mutual support, sharing and problem solving. Action learning sets may be one productive way of engaging with the other pilot sites.

We are currently gaining information on ethical committees and contacts within the acute Trusts and PCT's for GfK and would like more information on this aspect of the evaluation. We have offered to pilot the patient survey questionnaire for GfK and provide feedback in advance of its rollout.

We are already providing monthly updated to the Network Information Project Steering Group, and are happy to share these with the Consortium and the other Pilot Sites.

### 3.12 Contribution to local patient information delivery (Section 9 in the DH Proforma)

Within the Mid Trent Cancer Network Information Prescriptions Pilot Project we aim to build upon existing work within the Lung, Gynaecological and Head and Neck Patient Pathways. In addition we have just published a research evaluation project, in conjunction with Nottingham University and Cancerbackup, which has evaluated patients and carers experiences of information delivery along information pathways. We plan to integrate the recommendations from this research, and the work on the existing pathways, with the work on information prescriptions. Already we have identified gaps in the information pathways and see that the development of information prescriptions can enlighten and contribute further to the development of these information pathways, their delivery and the infrastructures required. We see that not just information, but the infrastructure, services, and appropriate resources need to be in place in order to successfully deliver information prescriptions.

To date, the process of being involved in this project has facilitated and accelerated stakeholder engagement and partnership working across health and social care. It has provided an impetus and focus, which has been very positive in developing these relationships. Now established we hope that the ongoing development and learning will be sustained after the life of the project, with key relationships built and best practice promoted.

Beyond January 2008, the learning from these three tumour sites will then be shared across all other types of cancer, including end of life and palliative care.

### 3.13 Contribution to developing national policy (Section 10 in the DH Proforma)

At this stage in the project we feel that we can contribute to the development of national policy on the following ways:

- i. Providing an example of an Information Prescription (Layout, content ect)
- ii. Share the learning of the process in design and implementation/delivery
- iii. Share our successes and learning about stakeholder engagement (development and sustainability of)
- iv. Integration of information prescriptions into existing information pathways (being a catalyst to refine existing and develop new information pathways).

## 4. The Project Delivery Plan

4.1 An outline project plan, highlighting the overall direction of travel has been approved by the Project Steering Group, at its inaugural meeting in January 2007. Subsequently, the outline project plan has been built upon to provide this more detailed delivery plan, highlighting key milestones. It is anticipated that this will be further fleshed out following a Stakeholder Event at the end of March 2007.

The Project Team envisage that this delivery plan will be a dynamic plan, one which is constantly evolving and developing, and that each stage of the project will inform the detailed planning and development of the next, in an action learning approach.

## 4.2 Key Milestones (Section 1 in the DH Proforma)

The delivery plan is divided into five different stages with the following *key milestones*:

1. Project Establishment Stage
2. Baseline Stage
3. Design Stage
4. Implementation Stage
5. Sustainability Stage

Evaluation will occur within each of these different stages.

The detailed delivery plan is presented in Table 1 below, and Table 2 includes a Gantt chart with project timescales.

The Network Information Prescriptions Steering Group has identified a number of **core principles**, which support the evolution, and development of this delivery plan:

1. **Flexibility** - The plan needs to be flexible and responsive to learning along the way
2. **Innovation and Creativity** - this project provides the opportunity for us to work in different ways and develop something which is different and complements our existing patient information pathways
3. **Partnership working** - with key stakeholders across the three health and social care communities, including health care, social care, voluntary sector
4. **Patient Involvement** - will be at the very heart of what we do - developing a tool and processes which works for patients and carers

Benefits to these approaches mean that we can design and develop information prescriptions at a strategic level, utilising the wealth of expertise and experience, and then ensure that these are delivered appropriately at a local level.

Key to our approach will be engagement. We firmly believe that the development and embedding of information prescriptions in practice cannot be achieved without genuine and meaningful engagement with both patients and carers and the all health and social care providers who they come into contact with.

## 5. Evaluation

The Information Prescription Pilots will work with an independent evaluation organisation to:

- Develop and test the process for people to receive information prescriptions;
- Evaluate patients, social care users and carers and professional's satisfaction with information prescriptions;
- Evaluate the outcome of people receiving information prescriptions;
- Provide an analysis of the costs of implementing information prescriptions to services, including the voluntary sector
- Identify further action needed at a local and national level to make information prescriptions a success from a patient, social care user and carer user and professional perspective.

Table 1: Detailed Delivery Plan (January 2007 to January 2008)

Actions/Milestones	Lead Person (s)	Timescales	Outcomes	Progress/Comments
<b>1. Project Establishment Stage</b>				
<ul style="list-style-type: none"> <li>Establishment of a Project Steering Group</li> </ul>	Elaine Wilson	01.01.07	Project Steering Group established with appropriate membership	<i>Steering Group established - 08.01.7</i>
<ul style="list-style-type: none"> <li>Appointment of a Project Manager/Consultant</li> </ul>	Elaine Wilson/Peter Higgins	31.01.07	Project Manager appointed	<i>Sheila Williamson of Dearden Consulting Ltd appointed</i>
<ul style="list-style-type: none"> <li>Development and agreement of an outline project plan</li> </ul>	Elaine Wilson	31.01.07	Outline Project Plan agreed by the Steering Group	<i>Outline plan agreed on 08.01.07</i>
<ul style="list-style-type: none"> <li>Establish formal links with the Department of Health and the evaluation organisation as well as the other Pilot Sites</li> </ul>	Elaine Wilson/Project Manager	31.01.07-ongoing	Names and contact details, face to face meetings with key people	<i>Links established with OPM/DH team. OPM meeting 15.02.07</i>
<ul style="list-style-type: none"> <li>Secure funding into the Network Budget from the East Midlands SHA</li> </ul>	Elaine Wilson	28.02.07	Funding secured into the Network budget and accounting arrangements established	<i>In progress</i>
<ul style="list-style-type: none"> <li>Communication and engagement with key stakeholders (ongoing)</li> </ul>	Elaine Wilson/Project Manager	Ongoing	Full engagement in the project from all the key stakeholders	<i>Briefing paper presented to Network Management Board</i>
<b>2. Baseline Stage</b>				
<ul style="list-style-type: none"> <li>Delivery Plan to be developed and submitted to the Department of Health</li> </ul>	Elaine Wilson/Sheila Williamson	01.03.07	Delivery Plan submitted to the DH by 01.03.07	
<ul style="list-style-type: none"> <li>Develop detailed plans on what is to be done, how it will be achieved and who the key participants are</li> </ul>	Elaine Wilson/Sheila Williamson	01.04.07	Detailed Plan agreed after the stakeholder Event	
<ul style="list-style-type: none"> <li>Establish work streams to develop information prescriptions and address the key issues of content and delivery</li> </ul>	Elaine Wilson/Sheila Williamson	Ongoing	Effective management of the work programme and engagement of key stakeholders	

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Actions	Lead Person (s)	Timescales	Outcomes	Progress/Comments
<b>2. Baseline Stage continued</b>				
<ul style="list-style-type: none"> <li>Hold a stakeholder scoping event</li> </ul>	Elaine Wilson/Sheila Williamson	31.03.07	Engagement of Stakeholders, intelligence gathering and base lining	<i>Event planned for 27<sup>th</sup> March 2007</i>
<ul style="list-style-type: none"> <li>Scope existing work on Information Prescriptions, locally, regionally and nationally</li> </ul>	Elaine Wilson/Sheila Williamson	31.03.07	Engagement of Stakeholders, intelligence gathering and base lining	
<ul style="list-style-type: none"> <li>Undertake a baseline assessment of resources and services relating to information prescriptions and report to the DH</li> </ul>	Elaine Wilson/Sheila Williamson	16.04.07	Baseline completed and written report sent to the Department of Health	
<ul style="list-style-type: none"> <li>Develop principles and processes for the development and delivery of information prescriptions</li> </ul>	Elaine Wilson/Sheila Williamson	07.04.07	Outline principles developed and agreed by which the design and implementation phases will be guided	
<ul style="list-style-type: none"> <li>Identify which parts of the patient information pathways require further development and provision of information resources</li> </ul>	Elaine Wilson/Sheila Williamson	30.04.07	Existing information pathways reviewed and gaps for further development identified	
<b>3. Design Stage (Development of tools and processes)</b>				
<ul style="list-style-type: none"> <li>Within the three tumour-site groups and work streams design the tools and processes by which the information prescriptions will be delivered</li> </ul>	Elaine Wilson/Sheila Williamson	30.06.07	Information Prescription Tools, pathway and operational policies developed and agreed	
<ul style="list-style-type: none"> <li>Publication/printing of the tools and processes by which the information prescriptions are to be delivered</li> </ul>	Elaine Wilson/Sheila Williamson	30.06.07	Printed/Published tools (in a variety of formats - paper, IT-based)	

Information Prescriptions Pilot Project - Delivery Plan

Actions	Lead Person (s)	Time scales	Outcomes	Progress/Comments
<b>3. Design Stage continued</b>				
<ul style="list-style-type: none"> <li>Briefing/Education and Training of the key clinical staff and teams who will be involved in the implementation phase of the project</li> </ul>	Elaine Wilson/Sheila Williamson	30.06.07	Staff have the necessary knowledge, support and expertise to deliver information prescriptions	
<ul style="list-style-type: none"> <li>Utilise appropriate knowledge and expertise to design the information prescriptions and supporting resources</li> </ul>	Elaine Wilson/Sheila Williamson	30.06.07		
<ul style="list-style-type: none"> <li>Ongoing record keeping/data collection with the national evaluation organisation</li> </ul>	Elaine Wilson/Sheila	Ongoing		
<b>4. Implementation Stage</b>				
<ul style="list-style-type: none"> <li>Working with the key groups of staff and patients deliver the designed tool</li> </ul>	Elaine Wilson/Sheila Williamson	01.07.07 to 31.12.07	Implementation of the Information Prescriptions for patients and carers along the head and neck, gynaecology and lung cancer pathways	
<ul style="list-style-type: none"> <li>Ongoing record keeping/data collection with the national evaluation organisation</li> </ul>	Elaine Wilson/Sheila Williamson	Ongoing		
<b>5. Exit Strategy/Sustainability Plans</b>				
<ul style="list-style-type: none"> <li>Development and implementation of a project exit strategy and a longer-term sustainability plan for future development and roll-out of information prescriptions</li> </ul>	Elaine Wilson/Sheila Williamson	31.12.07		
<ul style="list-style-type: none"> <li>Consider inclusion of information prescriptions into the Local Delivery Plans</li> </ul>	Elaine Wilson/Sheila Williamson	31.12.07		
<ul style="list-style-type: none"> <li>Project end report</li> </ul>	Elaine Wilson/Sheila Williamson	31.12.07		

Table 2

## Information Prescriptions Pilot Project - Delivery Plan

**MID TRENT CANCER NETWORK  
INFORMATION PRESCRIPTIONS PILOT - PROJECT PLAN GHANT CHART (2007-2008)**

	JAN 2007	FEB	MARCH	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN 2008
Establishment of a Project Steering Group													
Monthly meetings of Project Steering Group	8.1.07	12.2.7	27.3.07	16.4.07	14.5.7	25.6.07	16.7.7	13.8.7	10.09.07	15.10	19.11	10.12	14.08
Reports to the Network Information and Communication Group			23.03.07										
Secure funding from SHA into the Network budget													
Appointment of a Project Manager													
Establish formal links with the DH, pilot sites and evaluation team													
Engagement of Lung, Gynaecology and Head and Neck NSSG's													
Communication and engagement with key stakeholders													
Development and agreement of a detailed action plan													
Briefing paper to the Network Management Board	23.1.7												
Stakeholder Event - to launch and brainstorm			27.03.07										
Attend national launch event for information gathering and sharing			22.03.07										
Development of specific plans and identification of key participants													
Delivery Plan to be presented to the DH			01.03.07										

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	JAN 2007	FEB	MARCH	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN 2008
Undertake a baseline assessment of services and resources relating to information prescriptions				01.04.07									
Establish work streams to develop information prescriptions and address issues of content and delivery													
Development and publication of tools and processes by which the information prescriptions will be delivered													
Briefing/Education and Training of staff in the use of information prescriptions													
Implementation of the information prescriptions (Head and neck, gynaecology and lung cancer)													
Record keeping and evaluation													
Development of Exit Strategy and sustainability plans													
Project End Report													

Elaine Wilson/Sheila Williamson  
 Mid Trent Cancer Network  
 12<sup>th</sup> March 2007