

**Information Prescription Pilots – details of plans post January 2008**

		<b>Activity</b>
<b>1</b>	<b>Pilot site</b>	Arthritis Care/ Asthma UK/Diabetes UK with Hammersmith and Fulham PCT
<b>2</b>	<b>Project lead – name, tel nos and e-mail address</b>	Nicola Kingston Project Manager 0207 786 4978 <a href="mailto:nkingston@asthma.org.uk">nkingston@asthma.org.uk</a>  (Contract to Feb 22 <sup>nd</sup> )
<b>3</b>	<p><b>Will you still have DH funding left at the end of Jan 2008?</b></p> <p><b>When will this funding run out?</b></p> <p><b>Will you also be using further funding from other sources to continue your work?</b></p> <p><b>What are these sources and how long will this funding last?</b></p>	<p>Yes, will cover evaluation activity.</p> <p>31<sup>st</sup> March 08, probably.</p> <p>No further funding yet identified, exit strategies currently under discussion. Goodwill exists from all partners for further joint work, and are actively looking to build on findings, if further funding becomes available.</p>

		<b>Activity</b>	
<b>4</b>	<b>How many information prescriptions have been issued?</b>	May	October 70
		June	November 70
		July	December 40
		August	January 2008 30
		September 10	<b>Total 220</b>
<b>5</b>	<b>How many staff have been involved in issuing information prescriptions?</b>	Primary Care – GPs 9 Nurse 2 Pharmacists 2	Social services and other community based services & centres
		Secondary Care - hospitals	Information & advice centres
		Mental health care services	Libraries
<b>6</b>	<b>How do you plan to consolidate and mainstream your work with current health conditions and existing staff?</b>	<p>Our work showed that in Health Inequality areas a different approach is needed.</p> <p>We have no evidence that Information prescriptions will be successful in primary care in health inequality areas, without taking a different approach.</p> <p>The evaluation will test out the views of our prescribers that in health inequality areas, a face to face service is needed.</p> <p>We are interested in exploring this further. We are also looking at producing material that is more visual, and accessible.</p> <p>We are interested in looking at a segmentation approach, and development of a health navigator role for health inequality areas as advocated in the recent Turning Point/Dr Foster report.</p>	

		<b>Activity</b>
7	<p data-bbox="226 201 658 264"><b>If you intend to expand your work what are your plans?</b></p> <p data-bbox="226 568 613 632"><b>List the health conditions involved</b></p> <p data-bbox="226 823 689 887"><b>List the settings and locations involved</b></p> <p data-bbox="226 1078 622 1142"><b>List the professionals and organisations involved</b></p>	<p data-bbox="763 201 1944 264">No expansion of current work is planned at present, unless further funding becomes available.</p>

		<b>Activity</b>
<b>8</b>	<p><b>Do you have the full backup and buy in of your local host organisations?</b></p> <p><b>What senior staff support and endorse your work? Please supply names, positions, tel nos and e-mail addresses</b></p>	<p>Yes, there is full backup from our partner organisations, and their Chief Executives- Neil Betteridge, Neil Churchill, Douglas Smallwood, Mike Wood.</p> <p>Our Management Board includes:</p> <p>Kate Llewelyn    <a href="mailto:katel@arthritiscare.org.uk">katel@arthritiscare.org.uk</a>    7380 6524  Mikis Euripides    <a href="mailto:meuripides@asthma.org.uk">meuripides@asthma.org.uk</a>    7786  Bridget Turner    <a href="mailto:Bridget.Turner@diabetes.org.uk">Bridget.Turner@diabetes.org.uk</a>    7424 1112  Judith Ralphs    <a href="mailto:Judith.Ralphs@hf-pct.nhs.uk">Judith.Ralphs@hf-pct.nhs.uk</a>    8846 6803</p>
<b>9</b>	<p><b>Is there any support and advice you would like from DH to help you implement your plans?</b></p>	<p>We would like additional funding to support our continuation in order to :</p> <ol style="list-style-type: none"> <li>1. Develop health information specifically targeted to people who are in health inequality areas, and are health illiterate. We would do this using the Hammersmith and Fulham MOSAIC analysis, which stratifies the borough and shows us the areas which do not have much computer access. We would do this through co creating appropriate material.</li> <li>2. We would wish to evaluate this.</li> <li>3. Develop self management navigators for health inequality areas. Using community recruited volunteers who are living with a long term condition themselves, or interpreters or community or faith activists who are given training to take on this role. We are anticipating this could also form part of a pathway back to work .</li> <li>4. We would like to develop a model for commissioners to use to commission Information Prescription material. This would include developing local information for directories, and joint partnership working across the PCT area with the council and voluntary community sectors, which could then be used as a model for other</li> </ol>

		<b>Activity</b>
		commissioners, and could be put in the Resource pack.