

**2009/10 NATIONAL INDICATOR DELIVERY PLAN
CONTRIBUTING TO THE LOCAL AREA AGREEMENT**

Section 1: Performance Indicator Details

(i) Indicator number:	NI123		
(ii) Indicator description:	Stopping smoking – smoking quitters per 100,000 population aged 16+ (number of people who had stopped smoking at 4 weeks following contact with the local stop smoking service).		
(iii) This Delivery Plan directly supports the following:			
LAA Priority:	18. Adult Health and Wellbeing		
SCS Theme:	Health and Wellbeing		
APB Action Plan: (if applicable)			
(iv) NIS Indicator:	Baseline:	790	Target 2009/10: 897
			Target 2010/11: 819
(v) APB Action Plans: (if applicable)	Baseline	Target 2009/10	Target 2010/11
Chester	N/A	N/A	N/A
Ellesmere Port	N/A	N/A	N/A
Northwich & Rural North	N/A	N/A	N/A
Winsford & Rural East	N/A	N/A	N/A
Rural West	N/A	N/A	N/A

Section 2: Responsible Officers and Organisations

(i) Lead Partner Officer & Organisation:	Liz Noakes, Associate Director of Public Health, NHS Western Cheshire
(ii) Designated Performance Manager:	Pam Hughes, Head of Strategic Performance, NHS Western Cheshire
(iii) Data Systems Officer:	Jill Oakley, Public Health Analysis Programme Manager, NHS Western Cheshire
(iv) Other Key Partners:	

Section 3: Key Delivery Plan Risks

Description of risk:	Mitigating actions:	Net score	Risk owner (name, organisation)
Poor recruitment of smokers to service	Supporting and maximising Smokefree North West communications campaigns. Developing the Secondary Care Smoking Cessation Project.	Medium	Julie Rogers Community Care Western Cheshire
Lack of skills in primary and community care services	Training plan Promotion of Smoking Cessation in Practice (SCIP) training	Medium	Julie Rogers Community Care Western Cheshire
Lack of buy in to the western Cheshire Tobacco Control Strategy	Clear action plan for partners with targets attached	Medium	Alison Paul NHS Western Cheshire

Section 4: Equality Impact Assessment

Should a full Equality Impact Assessment (EIA) be carried out? (Mark with an X in the appropriate box)	Yes:	X	No:	
If 'No' please state why:				

Section 5: In-year Targets

IN-YEAR TARGET DESCRIPTION	Indicate figure to be achieved per quarter		
	Q2	Q3	Q4
LAA Level (Add more rows below if needed)			
Planned Number of 4-week smoking quitters who attended NHS Stop Smoking Services	377	354	659
APB Level (Add more rows below if needed)			

Section 6: Measurable Milestones and Actions

MEASURABLE MILESTONE/ACTION	Please mark X in relevant quarter in which this will be achieved		
	Q2	Q3	Q4
LAA Level (Add more rows below if needed)			
Working with Smokefree North West to support and develop locally the regional marketing and PR plan	x		
Develop and implement training plan to include promotion of Smoking Cessation in Practice (SCIP) training	x		
Tobacco Control Strategy to be adopted by West Cheshire Together		x	
Develop action plan to ensure delivery of the Tobacco Control Strategy		x	
APB Level (Add more rows below if needed)			

Section 7: Sign Off

I certify that I have examined this delivery plan and that to the best of my knowledge and belief:	
<ul style="list-style-type: none"> • The procedures for monitoring and managing performance against targets are robust, supported by adequate systems of internal control and are reliable to support information submitted • The data has been produced in accordance with the current definition and guidance 	
Lead Partner Officer:	Print name here: _____ Sign and date: _____
Thematic Board Chair:	Print name here: _____ Sign and date: _____

Please return this form to the person named below. If you require any assistance with the completion of this form please contact XXX on telephone XXX or email XXX@cheshirewestandchester.gov.uk

The deadline for returning the form is 30 June 2009