

Finance and Resources Committee

10.00, Thursday, 7 March 2019

Contract Waiver for the Edinburgh Health and Social Care Partnership

Item number	7.16
Executive/routine	
Wards	
Council Commitments	

1. Recommendations

It is recommended that the Finance and Resources Committee:

- 1.1 Approves the direct award of the contract to Partners 4 Change for the period April 2019 to April 2020 at a cost of £80,000 plus expenses capped at a further £12,000.

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Chief Officer, Edinburgh Health and Social Care Partnership

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Contract Waiver for the Edinburgh Health and Social Care Partnership

2. Executive Summary

- 2.1 This report seeks approval for the waiver of Contract Standing Orders to allow the direct award of a contract to Partners 4 Change. This contract will provide change management support to the Edinburgh Health and Social Care Partnership (EHSCP) with the implementation of a new operating model, known as the Three Conversations model. This will form a key element of the EHSCP's transformation and change programme.

3. Background

- 3.1 On 8 February 2019, the Edinburgh Integration Joint Board (EIJB) approved a report which sets out ambitious plans for a new, revised transformation programme. This programme seeks to respond to current areas of underperformance and build a sustainable, high quality health and social care system for the future within Edinburgh.
- 3.2 A key element in delivering these changes is a different approach to working with people, communities and professionals within the EHSCP and beyond. There is a clear need to focus on reducing and reshaping demand, improving people's health, wellbeing and independence and supporting professionals and teams to work in a truly integrated way to deliver better outcomes.

4. Main report

Revised Transformation Plans

- 4.1 The EHSCP is seeking to increase the pace and focus of its transformation and change efforts. There is a pressing need to make significant improvement within current areas of underperformance, such as delayed discharge and people waiting within the community for assessment, review or packages of care. More importantly, there is also a need to respond to the wider change in demand and

demographics, to create and build a sustainable, high quality health and care system for the future in the city.

- 4.2 On 8 February 2019, the EIJB approved a report which set out plans for a revised and streamlined programme structure, delivering real transformation, proper involvement of partners and stakeholders, and a refreshed governance process to ensure robust leadership and decision making at the right level.
- 4.3 One of the key objectives of the new transformation programme will be embedding widespread cultural change in the way that frontline teams practice and engage with people and families across the city. It is essential that dedicated change management resource is secured to support this ambitious change.
- 4.4 The EIJB has approved an approach to delivery that will see the new transformation programme aligned to a framework known as the Three Conversations model. Owned and trademarked by Partners 4 Change, Three Conversations offers a unique model for the redesign of health and social care service delivery. It is based on the principle that the EHSCP should focus not on the function of care management and its processes, but rather on organising its resources around having “three conversations” effectively. Further details of the model are provided at Appendix 1.
- 4.5 Partners 4 Change are specialists in the redesign of health and social care services and their trainers have significant professional and clinical experience in adult health and social care. They provide bespoke change management support to embed this new way of working and drive whole system redesign. The organisation has worked with over 75 Councils delivering reform and financial sustainability and can evidence significant financial and non-financial benefits. Three Conversations is closely aligned to the EIJB’s strategic priorities and it is the specific nature of this model that the EHSCP is seeking to procure, rather than any general health and social care consultancy support.

Waiver of Contract Standing Orders

- 4.6 The nature of the support offered by Partners 4 Change is specific and tailored. The Chief Officer considers that the Three Conversations model offers the best approach to redesigning health and social care services within Edinburgh and it is highly unlikely that another model can be found to better match the current transformation vision.
- 4.7 Given the unique nature of the support offered by Partners 4 Change and bearing in mind the direction of travel already approved by the EIJB, the Chief Officer is seeking the approval of the Finance and Resources Committee to waive normal Contract Standing Orders and directly award a 12 month contract to Partners 4 Change up to the value of £80,000 plus expenses capped at a further £12,000.

5. Next Steps

- 5.1 Assuming this report is approved, the Chief Officer of the Edinburgh Health and Social Care Partnership will proceed to engage Partners 4 Change and begin to develop the Three Conversations model for Edinburgh.

6. Financial impact

- 6.1 The cost of support from Partners 4 Change in implementing the Three Conversations model in Edinburgh is £80,000 plus expenses (capped at a further £12,000). This covers support for a 12 month period from 1 April 2019.

7. Stakeholder/Community Impact

- 7.1 Initial staff engagement sessions have taken place to share details of the Three Conversations model. Wider engagement is planned as part of the programme initiation phase.
- 7.2 The EIJB has been fully consulted regarding plans for the new transformation programme, including the implementation of Three Conversations, and are supportive of this approach.
- 7.3 The successful implementation of the Three Conversations model in Edinburgh will bring significant community benefits, helping to strengthen personalisation and supporting people to remain independent.
- 7.4 There are no adverse equalities or sustainability impacts arising from this report.

8. Background reading/external references

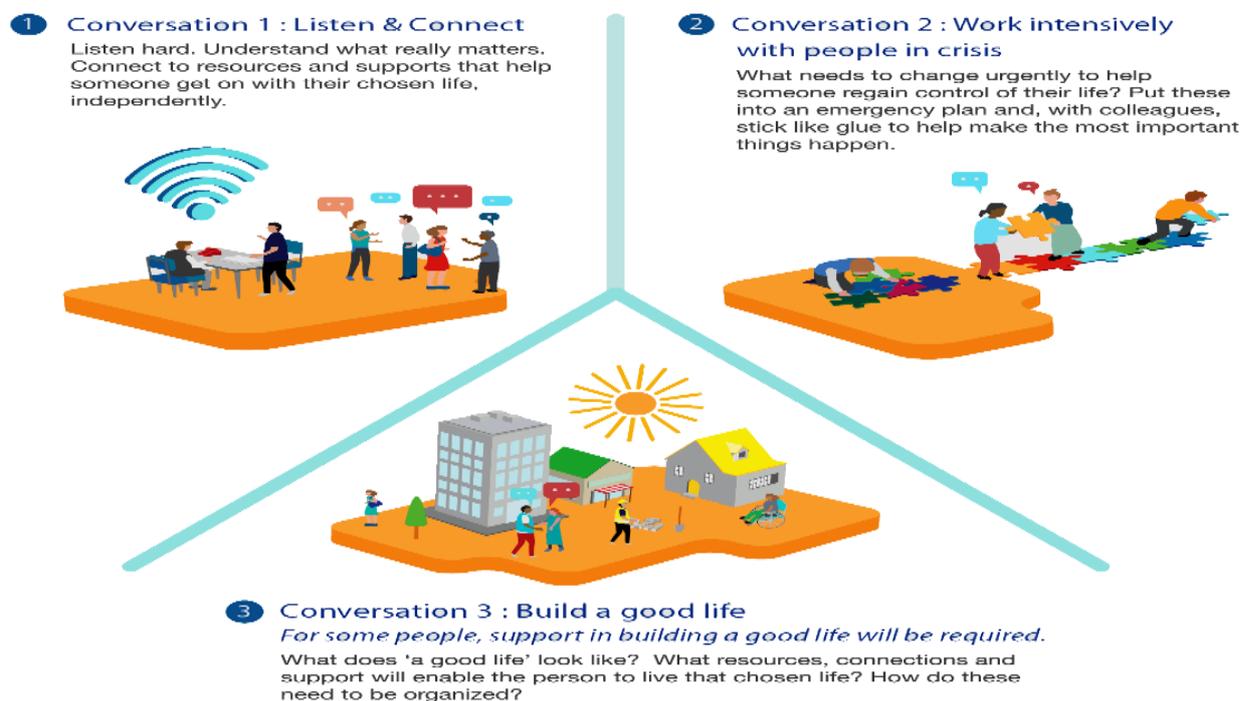
- 8.1 [Report to the EIJB on the transformation programme, 8 February 2019.](#)

9. Appendices

Appendix 1 – Three Conversations Model

The Three Conversations model is a paradigm shift in how to deliver adult social care, and how it collaborates with NHS, Housing, Voluntary Sector and other colleagues to make the whole joined up system of community based support work differently and better.

It seeks to replace the 'contact, re-ablement, then assessment for services' culture with a new approach based on the assets, strengths and capabilities of people, families and communities. It is built on, and has proved, the assumption that if you collaborate with and allow people to be co-designers of their support - then their outcomes go up, and their use of health and social care resources goes down.



There are very precise rules associated with these conversations that are necessary in order to produce a very different culture, practice and behavior in comparison with the default system. These include - you have to exhaust conversations 1 and 2 before you are allowed to move to conversation 3, you are not allowed, ever, to plan long term with people in crises, you are never allowed to hand off or refer people, or triage them, or use a waiting list or allocation process. If someone is in crisis you 'stick to them like glue' and work with them on what needs to change intensively for a short period of time.

Making it happen is a huge challenge because of the power of the status quo to reinvent itself. So we have learnt to stop using some key words, phrases and associated activities - that include assessment, review, respite, services, triage, referral, signposting etc. Instead after socializing these ideas and finding out where 'the grain' is i.e. who really wants to do it, we create innovation sites with their own new and different rules. Our innovation sites have included 'the front door', long term teams, GP 'at risk of admission' lists, an acute hospital ward, people waiting for a review and more. Innovation sites collect data every day about what happens to people when we approach them differently. What we have learnt is - if you change the conversation, then peoples lives change.

The results; the numbers of people with ongoing packages of formal care significantly goes down - we aim to halve it - with the consequent savings to health and social care budgets. People and families say how much they like the different approach - where workers are allowed to really listen and be interested in them as people, where they do what they say, and where the response is fast and effective. Staff satisfaction and productivity shoots up, and they say things 'I love my job, it is inspiring', 'don't make me go back to the old way of working'.

We have learnt that you can make rapid progress and at the same time achieve seismic change. Our programme usually looks something like:

- month 1 and 2: socialize these ideas and co-design your innovation sites
- month 3 to 5: run your first phase of innovation - collecting data every day
- month 6: evaluate - collect and share your compelling evidence from your data about what happens when you work differently - both numbers, and 'stories of difference'.
- month 7 to 9: run an expanded area of innovation to prove you can scale it and deal with any challenges from phase one
- month 10 to 12: evaluate and get ready for business as usual.



We have now done this enough times in enough different environments to know, and be able to prove, that it works with all areas, and all people. We really can support better lives for people and families, more satisfying and productive jobs for our staff, and save significant amounts of health and social care resource.