

Report of Chief Officer - Service Transformation

Report to The Director of Adults and Health

Date: 21/8/19

Subject: Social Care Digital Innovation Programme

Are specific electoral wards affected? If yes, name(s) of ward(s):	🗌 Yes	🛛 No
Has consultation been carried out?	🗌 Yes	🛛 No
Are there implications for equality and diversity and cohesion and integration?	🗌 Yes	🛛 No
Will the decision be open for call-in?	🗌 Yes	🛛 No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	☐ Yes	⊠ No

Summary

1. Main issues

- Service Transformation have been awarded £30k and specialist support in User Centred Design techniques as part of the Social Care Digital Innovation Programme (SCDIP). The funding will be to explore the problem statement "How might we improve the experience for individuals and for staff, when an emergency transfer from a care home to hospital takes place
- The purpose of the discovery phase is to carry out extensive user research and develop a prototype solution which can be submitted in an application to the next phase of SCDIP, which provides £90k and further support for implementation. The timescales for the project are extremely challenging with the Discovery Phase and application for the Implementation Phase expected to be complete by 27th September 2019
- Due to the short term but intensive nature of the work and the current capacity issues within the Service Transformation team we feel that additional capacity is required to meet the project deadline for submission for the implementation phase by 27th September.
- The support we need requires an advanced knowledge and application of user centred design techniques, and also familiarity with the health and social care system. Mhabitat are ideally placed to provide this given they are hosted by Leeds

and York Partnership NHS Foundation Trust and specialise in supporting digital innovation in health and social care.

2. Best Council Plan Implications (click here for the latest version of the Best Council Plan)

Addressing this problem area deliver directly against several of the priority areas of the Health and Wellbeing Strategy 2016-2021. This includes:

- An age friendly city where people age well
- The best care in the right place at the right time
- A valued, well trained and supported workforce
- A strong focus on prevention
- Support self-care with people managing their own conditions
- Maximise the benefit from information technology

The programme will also support delivery of the following KPIs within the Best Council Plan:

 Percentage of CQC-registered care services in Leeds rated as 'good' or 'outstanding'

3. Resource Implications

- Due to the short term but intensive nature of the work and the current capacity issues within the Service Transformation team, additional capacity is required to meet the project deadline for submission for the implementation phase by 27th September.
- Given the timeframe and immediacy of the work, there is not sufficient time to recruit to temporary posts to fulfil the requirements of the programme and therefore the only feasible option is to commission specialist support to assist with planning, delivering and analysing user research as well as developing prototype solutions.

Recommendations

- a) The Director of Adults and Health is recommended to use the £30k allocated to LCC via the SCDI Programme to appoint Mhabitat at a cost of £21,700 plus VAT to deliver:
 - I. Context setting and project initiation kick off workshop
 - II. Discovery which will include interviews, journey mapping, ethnography work and surveys with front line staff
 - III. Delivery of Ideation workshops, including preparation, analysis, project meetings, support and project management
 - IV. Prototype design
 - V. Report writing to support bid to SCDIP implementation phase
- b) The appointment will take place under Contract Procedure Rules 7.2 and 7.4 which state –

"7.2 Where the relevant Chief Officer believes that it represents Best Value for the Council to make a direct appointment or considers there is genuinely no competition such that only a particular organisation or provider can meet the Council's specific requirements (e.g. when commissioning a unique product or service) three written tenders as required by CPR 7.1 need not be obtained. However, the lack of competition must be formally evidenced and approved by the relevant Chief Officer before the contract is entered into"

And

- "7.4 where CPR 7.2 is used, all completed procurementsover the value of £10K must result in the award of a contract and be registered on YORtender and Contracts Finder. Failure to publish on YORtender and Contracts Finder will lead to the Council being in breach of data transparency legislation"
- c) The Director of Adults and Health is asked to approve this report so that Mhabitat can immediately be appointed to support the discovery work set out in the main issues of this report. All work will be completed by September 13th to enable A&H to complete the application to the implementation stage of SCDIP. The Project Manager in Service Transformation, Adults and Health will be responsible for implementation.

1. Purpose of this report

1.1 This report sets out the case for appointing Mhabitat to support the connecting care homes project which is currently being managed by Service Transformation as part of the Local Government Association Social Care Digital Innovation Programme (SCDIP).

2. Background information

- 2.1 Service Transformation has recently shifted its project delivery approach to incorporate user centred design principles. This has been prompted by successful bids to two Local Government Association programmes; Design for Care, and Social Care Digital Innovation Programme. Both of these programmes provide training and specialist support from Snook Design Agency to tackle a problem within Health and Social Care.
- 2.2 The central premise of user centred design is that the best designed services and products result from understanding the needs of the people who will use them. It is a series of tools that support an iterative approach, to first understanding in detail the drivers for a particular problem, and also co-designing and testing solutions with key user groups. The approach places emphasis on collaboration throughout the process and is recognised by as ISO 9241-210 as an effective approach to designing and delivering new products and services.
- 2.3 The SCDIP programme provides support and £30k of funding for delivery of a 'Discovery Phase' which seeks to both understand and propose a digital solution to a problem within Health and Social Care. Leeds was successful with a bid to explore the problem statement: How might we improve the experience for individuals and for staff, when an emergency transfer from a care home to hospital takes place? The purpose of the discovery phase is to develop a prototype solution which can be submitted in an application to the next phase of SCDIP, which provides £90k and further support for implementation. The timescales for the project are extremely challenging with the Discovery Phase and application for the Implementation Phase expected to be complete by 27th September 2019.
- 2.4 The project is being led by the Service Transformation Team within the Adults and Health Directorate at Leeds City Council. The team have established a steering group and developed a research plan in collaboration with two care home providers, Orchard and Burlington Care. The plan also includes engagement with our in house care home provision and a range of health and social care professionals. In order to carry out the best discovery phase possible we need additional support and resource to deliver the research phase and take us through to ideation. We anticipate this to be short but very intensive piece of work to include:
 - Context setting and project initiation kick off workshop
 - Discovery which will include interviews, journey mapping, ethnography work and surveys
 - Delivery of Ideation workshops, including preparation, analysis, project meetings, support and project management
 - Prototype design
 - Report writing to support bid to SCDIP implementation phase

3. Main issues

- 3.1 Due to the short term but intensive nature of the work and the current capacity issues within the Service Transformation team additional capacity is required to meet the project deadline for submission for the implementation phase by 27th September.
- 3.2 Given the timeframe and immediacy of the work there is not sufficient time to recruit to temporary posts to fulfil the requirements of the programme and therefore the only feasible option is to commission specialist support.
- 3.3 The support we need requires an advanced knowledge and application of user centred design techniques, and also familiarity with the health and social care system. Mhabitat are ideally placed to provide this given they are hosted by Leeds and York Partnership NHS Foundation Trust and specialise in supporting digital innovation in health and social care. They have a track record in delivering projects within the sector including significant co-design projects with the Scottish Government (OurGP), and development of Child and Adolescent Mental Health Services with Humber NHS Foundation Trust.
- 3.4 To provide the level of support we need to complete the Discovery Phase Mhabitat have quoted £21,700 plus VAT. Given the cost of recruiting the level of resource required to carry out the work, and the specialist skills and experience on offer we feel that the value of the contract represents good value for money. The funding will come wholly from the £30k awarded to Leeds City Council for SCDIP via the LGA. The LGA have confirmed that they see this proposal as an appropriate use of the funds.
- 3.4.1 The The appointment of Mhabitat would comply with Contract Procedure Rules 7.2 and 7.4 which state –

"7.2 Where the relevant Chief Officer believes that it represents Best Value for the Council to make a direct appointment or considers there is genuinely no competition such that only a particular organisation or provider can meet the Council's specific requirements (e.g. when commissioning a unique product or service) three written tenders as required by CPR 7.1 need not be obtained. However, the lack of competition must be formally evidenced and approved by the relevant Chief Officer before the contract is entered into"

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"7.4Where CPR ... 7.2 is used, all completed procurements ...over the value of £10K must result in the award of a contract and be registered on YORtender and Contracts Finder. Failure to publish on YORtender and Contracts Finder will lead to the Council being in breach of data transparency legislation"

4. Corporate considerations

4.1 Consultation and engagement

4.1.1 As mentioned above user led design is a process by which the most effective designed services and products result from understanding the needs of the people who will use them. The SCDIP programme requires a period of intensive research involving interviews, workshops, shadowing and surveys to take into account the perspective of all identified user groups. In this case user groups include service

users, care home staff and managers, family and carers, residents, GPs, paramedics, Occupational Therapists amongst others.

4.2 Equality and diversity / cohesion and integration

4.2.1 Consultation is extremely important for carrying out the equalities agenda. The appointment of Mhabitat means we will have additional resource to use service design principles to ensure that the Council gains an understanding of the real issues that affect people who belong to the protected characteristics of the Equalities Act 2010. The process also involves these groups in the development of new products and services.

4.3 Council policies and the Best Council Plan

- 4.3.1 The problem statement being explored via the Social Care Digital Innovation Programme is 'How might we improve the experience for individuals and for staff, when an emergency transfer from a care home to hospital takes place?' Addressing this problem area deliver directly against several of the priority areas of the Health and Wellbeing Strategy 2016-2021. This includes:
 - An age friendly city where people age well
 - The best care in the right place at the right time
 - A valued, well trained and supported workforce
 - A strong focus on prevention
 - Support self-care with people managing their own conditions
 - Maximise the benefit from information technology

The programme will also support deliver of the following KPIs within the Best Council Plan:

 Percentage of CQC-registered care services in Leeds rated as 'good' or 'outstanding'

Climate Emergency

- 4.3.2 At Full Council on 27 March 2019, Leeds City Council passed a motion declaring a Climate Emergency. In addition, the Leeds Climate Commission have proposed a series of science based carbon reduction targets for the city so that Leeds can play its part in keeping global average surface temperatures to no more than 1.5'C. A 'City Conversation' is planned for the summer of 2019, to raise awareness, review and refine the options and to start to build public, business and political support for transformative action.
- 4.3.3 The report recognises the importance of climate emergency and through the discovery and implementation phase we will seek to implement solutions that are in line with the Leeds Carbon Road Map. Though this will be small there will be a potential contribution in terms of a reduction in carbon emissions through the intended reduction in service user transfers from care settings to hospital.

4.4 Resources, procurement and value for money

4.4.1 To provide the level of support we need to complete the Discovery Phase Mhabitat have quoted £21,700 plus VAT. Given the cost of recruiting the level of resource

required to carry out the work, and the specialist skills and experience on offer we feel that the value of the contract represents good value for money. The funding will come wholly from the £30k awarded to Leeds City Council for SCDIP via the LGA. The LGA have confirmed that they see this proposal as an appropriate use of the funds.

4.4.2 The original funding bid made to the Local Government Association contained an estimate of how the £30K funding would be met:

Item	Cost
Communications	£400
Planning workshops and user interviews	£7000
Shadowing and interviews	£7000
Running Workshops	£3000
Venues and refreshments	£4000
Travel	£300
Materials / Equipment	£300
Final report production	£8000
Total	£30000

Table 1. Original Funding Plan from bid submission

Table 2. Revised Funding Plan

Item	Cost
Travel	£515.30
Equipment	£194.46
MHabitat (includes planning and	£21,700.00
delivery of workshops, shadowing,	
interviewing, running workshops and	
final report)	
MHabitat VAT (will be reclaimed by	£4,340
	0700
Workshop 1 (Aug 13th)	£500
Workshop 2 (Aug 20th)	£500
Remaining available funding	£6,590.24
(reclaimed VAT plus unspent funding)	
Total	£30,000

Within the original bid submission (as shown in table 1) £25,000 was allocated for planning workshops, shadowing and interviews, running workshops and producing the final report. As mentioned in paragraph 2.4 Mhabitat will lead on all of these areas within the contract costs with oversight and support from the Service Transformation Team. This amounts to £26,040 after VAT (though the VAT will be reclaimed).

In addition the actual costs of the workshops (£1000 for venue hire) is much less than anticipated (£7000) as we can utilise MHabitat's conference spaces and facilitation within the contract.

4.5 Legal implications, access to information, and call-in

- 4.5.1 This is an Administrative decision which is not subject to call-in and there are no grounds for keeping the contents of this report confidential under the Access to Information Rules.
- 4.5.2 As mentioned the appointment of Mhabitat complies with Contract Procedure Rules 7.2 and 7.4 and whilst there are no legal implications in awarding this contract direct to Mhabitat in this way, in making their final decision, the Delegated Decision Panel should note the above comments and be satisfied that the course of action chosen represents best value for the Council.

4.6 Risk management

- 4.6.1 The main risks associated with this work are that Mhabitat do not deliver sufficient research and support to enable Adults and Health to meet the deadline for the Implementation phase of the Social Care Digital Innovation programme. To address this we have collaborated on a clear Project Initiation Document and developed a jointly agreed work plan that allocated resource for user research, planning, analysis and prototyping.
- 4.6.2 As mentioned previously there is currently very little additional capacity within the Service Transformation Team to deliver the work required in the timeframe allotted by the LGA. Using the funding for the programme of commissioning specific and specialist support represents the best opportunity to meet the deadlines. Without gaining approval for this approach there is significant risk that we would not meet the deadline.

5. Conclusions

5.1 The most effective means of delivering the Discovery Phase of the SCDIP projects is to appoint Mhabitat to provide specialist support in both researching the problem statement and developing potential solutions. Mhabitat have quoted £21,700 plus VAT for the work which would be entirely funded via the £30,000 allocated to the project via the LGA.

6. Recommendations

- 6.1.1 The Director of Adults and Health is recommended to use the £30k allocated to LCC via the SCDI Programme to appoint Mhabitat at a cost of £21,700 plus VAT to deliver:
 - VI. Context setting and project initiation kick off workshop
 - VII. Discovery which will include interviews, journey mapping, ethnography work and surveys with front line staff
 - VIII. Delivery of Ideation workshops, including preparation, analysis, project meetings, support and project management
 - IX. Prototype design
 - X. Report writing to support bid to SCDIP implementation phase

"7.2 Where the relevant Chief Officer believes that it represents Best Value for the Council to make a direct appointment or considers there is genuinely no competition such that only a particular organisation or provider can meet the Council's specific requirements (e.g. when commissioning a unique product or service) three written tenders as required by CPR 7.1 need not be obtained. However, the lack of competition must be formally evidenced and approved by the relevant Chief Officer before the contract is entered into"

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6.1.3 The Director of Adults and Health is asked to approve this report so that Mhabitat can immediately be appointed to support the discovery work set out in the main issues of this report. All work will be completed by September 13th to enable A&H to complete the application to the implementation stage of SCDIP. The Project Manager in Service Transformation, Adults and Health will be responsible for implementation.

7 Background documents¹

7.1 None.

¹ The background documents listed in this section are available to download from the council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.