Dadansoddi ar gyfer Polisi

YMCHWIL GYMDEITHASOL
Y LLYWODRAETH

GSR

GOVERNMENT SOCIAL RESEARCH

Analysis for Policy

Ymchwil gymdeithasol
Social research

Rhif/Number: 40/2014

Llywodraeth Cymru
Welsh Government

www.cymru.gov.uk

An Independent Evaluation of the Invest to Save Fund - Case Studies

An Independent Evaluation of the Invest to Save Fund – Case Studies

SQW Ltd

Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government.

Ceri Greenall
Social Research and Information
Welsh Government
Cathays Park
Cardiff
CF10 3NQ
Tel: 029 2082 3811
Email: Ceri.greenall@wales.gsi.gov.uk

Welsh Government Social Research, 2014
ISBN 978-1-4734-1189-0

Table of contents

1 Invest to Save Fund projects

This section presents summary reports for case studies with Invest to Save projects undertaken as part of the evaluation of the Fund over its first six rounds of activity.

The purpose of the case studies is to provide more detailed insight into the practical delivery of projects, and to identify and disseminate key learning from experience.

The case studies covered the following projects:

- Agile Working Flintshire
- All-Wales Public Sector Broadband Aggregation
- Mental Health Rehabilitation & Recovery Reconfiguration
- One Newport Information Station
- Our Space Cardiff
- Paperless Powys
- NHS Wales Voluntary Early Release Scheme
- NHS All-Wales Collaborative Procurement
- Wyn Campaign: Regaining & Retaining Independence
- Wales Enhanced Recovery 1000 Lives Plus Collaborative Programme
- North Wales Regional Telecare Call Monitoring Service

Agile Working Flintshire

- The Agile Working project aims to bring about efficiencies through reduced travel costs, travel times, and office costs as a result of digital record keeping and hot-desking. The ability to work remotely is a key element of agile working, with enabling mobile devices acquired as part of the project. The project was awarded £262k of investment from Invest to Save.
- The project has a corporate element in terms of overall device management, with three tailored service-level projects in Housing, Planning, and Building Control.
- The project successfully led to efficiencies across the three services, with the corporate structure element meaning that these approaches could be rolled out elsewhere. Cash releasing benefits of £460k have been generated by the project.
- Without Invest to Save funding, a smaller scale project would have occurred, possibly in Pest Control, but without the scale and impetus that the Invest to Save project enabled.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts

• Different rationales for each service:
  • Building Control competitive and so needs to drive efficiencies
  • Planning had undergone service review which identified agile working as way forward
  • Housing was undergoing a series of changes to improve performance, with agile working seen as an important driver
	• Improve organisational efficiency and performance through IT-enabled mobility in:
	  • Building Control
	  • Planning
	  • Housing
	• Improve organisational awareness in flexible working practices
		• Total of c.£350k of funding, £262k of which was Invest to Save funding
		• Teams in Building Control, Planning and Housing, and corporately introduce mobile working solutions, including IT systems and mobile devices, to enable remote working
			• Cash releasing benefits of £460k p.a.
			• A "Health Check" undertaken for Building Control, followed by the introduction of an electronic system and devices
			• Devices rolled out to Planning Enforcement team, whilst electronic development management system put in place
			• Devices rolled out to Housing Maintenance team, and administrative staff numbers reduced.
				• Has resulted in corporate management of devices, allowing the Council to build on the project
				• Made Building Control more competitive, reduced office space, time costs, enabled remote working
				• Achieved time and cost efficiencies in Planning, enabling remote working and document submission
				• Improved productivity in Housing, reducing administrative tasks and staffing, improving monitoring of work, enabling remote working

Project background

The Agile Working project emerged from Flintshire County Council's transformational change programme "Flintshire Futures", with mobile and agile working seen as enablers to achieving the objectives of both the Council's Assets Programme and Organisational Change programme, which sit within the transformational change programme. The Council's

Management Team considered how best Invest to Save funding could be applied to the change programme, with Agile Working identified, given its ability to establish the merits of agile working through pilot projects and deliver substantial savings.

The project, running until the end of 2013, specifically aimed to:

- roll out the use of mobile technology to improve organisational performance and efficiency, across a corporate structure
- demonstrate what this technology can deliver, through three pilot projects in Housing, Planning and Building Control departments
- raise awareness across the organisation of flexible working practices.

The pilot services were chosen as being areas that could gain maximum benefits from rollout of agile working, with Building Control, Enforcement (Planning), and Housing Maintenance (Housing) chosen for rollout:

- **Building Control**, unique in a local authority setting as a competitive business, needs to drive efficiencies as a core requirement of its business model, with the agile working project a helpful way to do so.
- **Planning** was undergoing a service review at the time the project was being scoped, with a LEAN review identifying that efficiencies could be driven through such a project, and with the Welsh Government pushing an electronic agenda within Planning.
- In **Housing**, as in Planning, a LEAN review stated that mobile working was a key enabler to addressing issues in the service, and the agile working project comprises one part of a series of improvements being made to the service more widely.

Mobile devices to enable staff to record and submit information and data remotely away from the office, had only previously been used at the Council in Highways, and in a limited way, with no corporate management in place. As a result, mobile working was largely new technology for the Council at the time.

Project implementation

Flintshire County Council applied for Invest to Save funding in 2009, and was awarded £262k, with the Council contributing £87k, representing 25% match funding. Around half of this total funding package was for integrating systems (software licenses and consultancy), a quarter for handheld devices, and a quarter for business process reengineering and change management.

At the outset, the project expected to achieve savings of £460k, by reducing staff travel time and costs, increasing productivity, reducing supervisory and administrative support and reduction of office accommodation. In addition the project was expected to achieve increased job satisfaction and more autonomy and flexibility, whilst improving customer service and satisfaction. The majority of the savings was expected to come from the Housing element of the project, with Housing receiving the largest portion of the investment – as allocated by the Council, with funding managed and distributed centrally within the Council.

The work was managed as a Programme consisting of the three separate projects, one in each service area, with a fourth element being the introduction of a corporate mobile device management system. In two of the service-level projects (Building Control and Planning), document management and back scanning were key enablers with Invest to Save resource used to support this work. The three services have implemented their solution in different ways, as each service had different needs and different starting points:

- For **Building Control**, the project looked at the whole service, with savings of £30k identified. The first action was to fund a service "health check", to test whether the current business system was being used optimally. As the business system provider could not offer an integrated mobile working solution, the decision on how to proceed was straightforward relative to the other two service-level projects. A bespoke solution to enable mobile working was developed specifically for the service, in-house, with full integration into the back-office system used by the team. Document scanning was particularly

important for Building Control, as the service is legally obliged to keep records for 15 years, meaning that files were spread across a variety of locations at County Hall, with considerable space requirements. For the team to be able to operate effectively in an agile way, they would also need access to the records out in the field.

- **Planning** also use a supplied business system and in this case, the supplier had developed a mobile solution for Planning, although this was the first live implementation of the system. In this sense, it was an innovative project for both the Council and the provider. As with the other projects, this one involves the rollout of mobile devices, for the Planning Enforcement team, and the introduction of a mobile working system that fully integrates with the back-office business system, capable of supporting electronic management of planning applications, compliance and enforcement. As with Building Control, the project involved a LEAN review and would also utilise electronic document management. Again, £30k of savings was identified.
- **Housing** received the largest portion of the funding, as the service was expected to make the largest contribution to savings. Savings of £400k were identified, although agile working is only a contributory factor to this, with wider changes to the service being undertaken. For housing, document scanning was less of a concern, with rollout focused on acquiring mobile devices for all staff (around 100) working in Housing Maintenance, and putting in place an optimal back-office system, in order to minimise administration requirements. An integrated mobile working solution could have been developed internally as with Building Control, but following evaluation of options, the decision was taken to acquire the solution from an external back office systems provider, driven in part by the need to ensure utilisation where a mobile signal was not available which would not have been enabled through an internal solution.

The Agile Working project aligned with, and linked to, a separate transformational change project across the Council, the introduction of corporate electronic document management (EDM). Reducing reliance on

paper based records was a key enabler to driving process efficiencies, and it was vital that back office business system were being used effectively. A combination of LEAN reviews and consultancy from the system providers ensured that the council's use of the systems was critically examined with recommendations made for improvement where possible. This provided strong foundations upon which to build the mobile working projects. Alongside delivering efficiencies through mobile working, it was recognised that securing the devices and data on them was vital, so the procurement and implementation of a corporate mobile device management system was key.

Project achievements and benefits

The project achieved what it set out to do, with cash releasing benefits of £460k, networking benefits, and efficiency benefits delivered as expected, with benefits on-going. However, the nature and scale of benefits differ between the three services:

- **Building Control**: agile working is now in place for all staff. The solution integrates with electronic document management and the backscanning of files has meant that staff can access all of the information that they need from any location, with efficiency benefits. The backscanning and integration with electronic document management has led to reduced space requirements for storage, with storage of 15 years' worth of documents on site no longer a necessity, whilst also improving reliability. Office space requirements have also been reduced, as staff can now more easily work out-of-office, meaning that a degree of hot-desking is possible, reducing the ratio of people per desk. Furthermore, travel time and costs are reduced, as a result of no longer needing to return to base to submit visit notes, as these can now be submitted remotely. Whilst not a stated aim of the project, productivity benefits enabled one member of staff to take early retirement, without needing to be replaced. Developing a mobile solution in-house had the benefit of allowing Building Control to respond quickly to customer needs, important in the competitive market in which they operate.

- **Planning**: mobile devices were acquired as planned for those in Planning Enforcement. The benefits were similar to those for Building Control, with the ability to hot-desk, work from home, or work on site with customers. Whilst staff numbers were not reduced, the efficiencies do allow greater flexibility in meeting the demands of the Council's assets strategy. The Invest to Save project brought five people into agile working, with continued progress on the back of this meaning that devices have now been procured for 16.
- **Housing**: devices have been acquired as planned for those working in Housing Maintenance. Improvements related to Invest to Save are part of a larger suite of improvements being made to the service, making it difficult to unpick the Invest to Save from other changes undertaken, including:
    - Staffing restructure to enable improvements in management and leadership and deliver savings
    - LEAN reviews on all areas of the service led by a team of internal staff trained in the process to deliver performance improvements and savings
    - The introduction of compressed working hours (8 day fortnight), extending the service hours to 8.00 to 6.00 Monday to Friday with weekends included (for gas servicing) and at no extra cost
    - The introduction of a revised schedule of rates - reducing the number of items in the schedule and using more composite rates making the use of the mobile technology faster at the end of each job with less individual items to be coded and added in.
    - Other improvements have included – the introduction of a new contact centre to improve the customer experience, closure of outdated depot delivering savings in operating costs, outsourcing of ineffective stores service to an external provider, development of asset investment planning, enhancing and developing trades staff multi skilling, the introduction of vehicle tracking for health and safety and value for money outcomes,

the completion of Fleet review to release efficiencies, and the introduction of repairs by appointments and text reminders and mobile working technology.

The introduction of mobile working that the Invest to Save project enabled has been a critical and complementary part of the wider transformational change programme. Notably, it has enabled the Housing service to move from being paper driven with the Trades staff keeping weeks' worth of tickets in their vans and being chased to hand them in (leading to issues in managing spend, commitments and performance) to the service having access to real time data, and leading to back office staff spending time processing tickets and matching materials spend with tickets and variations. In turn, this has led to better record-keeping, and better stock management, as necessary information and reports can now be filed remotely and electronically. Productivity improvements have been notable in Housing, with reduced administration costs, and a reduction in administrative staff.

There is also evidence of the project leading to benefits for service users, for example, with the Housing team able to provide 'real time' text reminders for appointments, minimising the number of cancelled jobs.

Further to the quantitative benefits, greater organisational knowledge of mobile device management has meant that the Council has been able to review the provision of mobile devices in the Highways service, which was already using mobile working prior to the Agile Working project. This has led to enhanced security and functionality, allowing devices to be updated and supported remotely.

The use of formal project management systems to deliver the project also generated documented learning and experience that can be shared with further mobile and agile working projects as the Council moves forward with its change programme. Future projects can learn from these experiences in order to improve their own implementations. These experiences would not have been possible without the Invest to Save Funding. Indeed, a project in Pest Control is nearing completion with more to follow.

Project partners reported that without Invest to Save investment, the Agile Working project would not have been undertaken in the form that was delivered – activity would have been at a smaller scale, reducing the potential to demonstrate the efficiencies and benefits that can be gained by services, in terms of both operational and service improvement.

What went well …

Invest to Save gave the project impetus and, although it is probable that it would have happened to a smaller extent in any case, it enabled a more ambitious project. Whilst a grant would have been preferable in financial terms, the repayable investment proved to be useful in prioritising effort, focusing on making the necessary changes to recoup the funding, and driving through efficiencies.

Strong relationships and ambitious leadership helped the project, including between the services and the corporate IT Division. Building and managing relationships with device and software suppliers, has been vital, particularly where technologies perhaps have not delivered as expected. The development of a successful in house solution has also shown ambition and developed internal skills that can be used for further developments, for example in Pest Control. Further, with corporate device management in place, the organisation is in a good position to push onwards with mobile working solutions in other parts of the organisation.

It was also reported that the success of the project has raised the profile of the services involved, and there has been networking with other external agencies. For instance, Building Control had contact from Herefordshire Council, regarding the mobile working solution.

… and what could have gone better

There are a number of ways in which the project could have gone better:

- Managing user expectation is key to the success of the projects. With these being new technologies for the council, timescales proved overly ambitious. Mobile signal coverage is a problem, even in major cities and so the facility to work in an ‘offline’ mode is vital but difficult for

some users to understand as a limitation, particularly if the mobile solution isn't well designed. Even at this stage, one supplier is revisiting the solution as they had not considered the concept of record locking in the back-office system whilst the record was being accessed and worked on remotely.

- All three projects had difficulties, relating to suppliers, overcoming issues with coverage and ensuring existing back-office systems were used effectively. Invest to Save helped to resolve this as it ensured expertise could be brought in to assist when required. Wherever possible, assistance was requested from other organisations but many were found to be experiencing similar issues or were not subject to the same rigorous security requirements that Local Government is, with implementation therefore more straightforward for these.
- At the project initiation stage, it would have been useful to have had an understanding of potential pitfalls and the limitations of mobile technologies. Attempts were made to engage with others but many were in similar positions at this time.
- It was reported that suppliers "promising the Earth" and then not delivering was an issue. For example, suppliers did not consider how they would cater for poor mobile signal and in some instances had not engaged with mobile device suppliers in order to assess the best possible way of developing the solution in the most effective way. It was reported that at times it proved difficult to maintain a positive relationship with the supplier whilst working through issues of this type.
- Quarterly reporting for this project was seen to be onerous by those involved. Owing to the nature of the project, there was often little progress on a quarter-to-quarter basis, meaning some reported wasted effort. The issue here was the frequency of, rather than the need to, provide monitoring returns. A more flexible approach was arguably possible.

Key lessons

Three key lessons emerge from the project:

- Feedback from consultees pointed to the need to ensure timely technical assistance. There is an important lesson here, beyond technical projects alone, in scoping out the projects and understanding fully the requirements of systems, technical or otherwise, that are put in place, in order to minimise any negative effect.
- Managing expectations is particularly important where the individual elements are effectively 'pilots'. This includes managing the expectations of those expected to develop new ways of working – being clear about what this will mean to their day-to-day work – but also those that witness the changes but have not been provided with the mobile working solution. For instance, with Planning and Housing, not all staff have mobile devices and therefore the working flexibility afforded by agile working. Social Care have been interested in developing mobile solutions, whilst Environmental Health and Trading Standards are two other services that would benefit from mobile working. With the success of the project, it is important to have in place a way of moving on to next steps and additional services such as these. In this case the Council is looking to roll-out the project activity, potentially in Pest Control, ensuring a positive legacy from the project.
- Feedback pointed to difficulties in unpicking the benefits of Invest to Save, when it was one part of a suite of interventions. Thinking through how the specific contribution of the Fund can be monitored and evidenced was regarded as important going forward.

Accelerating the benefits of Public Sector Broadband Aggregation (PSBA)

- PSBA is a Welsh Government initiative to deliver a consolidated, all-Wales, public service telecommunications network by aggregation of the demand for broadband. Invest to Save was used to support the acceleration of take-up of PSBA across Wales, alongside a number of place-specific interventions.
- The PSBA network was originally developed to address co-ordination failures, and responded to the need (and opportunity) to drive efficiencies in the use of ICT in supporting service delivery, whilst maintaining and improving service quality. Invest to Save was required to address the significant up-front 'costs of change' for organisations to join the shared PSBA network.
- Consultations indicate that the Invest to Save project increased take-up, by as much as a half. However, the focus on accelerating take-up, meant that the 'additionality potential' of the project was from the outset partial, and some of the organisation support may have joined in any case some time in the future.
- The Invest to Save project was straightforward, with limited administrative burden, and it provided an important level of flexibility, both of which were important. Invest to Save support was also regarded by project partners as an important demonstration of the strategic importance of PSBA, helping to develop its credibility amongst public service organisations.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Co-ordination failures where individual organisations have their own broadband networks, leading to varied quality and resilience • Need to improve service delivery through ICT alongside drive for cost efficiencies • Responding to increasing demand for versatile, high-speed connectivity across the public sector • Significant up-front costs involved in change limiting take-up of PSBA by organisations	• Help public sector organisations across Wales to move to PSBA connectivity services more quickly • Improved take-up of PSBA leading to ➢ efficiencies in connectivity services ➢ make other cost-saving services accessible sooner ➢ building of a common platform for collaboration and shared services	• £4.0m of Invest to Save resource, matched to local financial contributions from partners • Funding used to provide up-front finance to address significant 'costs of change' in sign-up and integration with the PSBA network	• Increase in the number of organisations signed-up to and using PSBA • Cash-releasing and non-cash releasing benefits generated through use of PSBA, including ➢ 20% reduction in network connectivity costs ➢ forecast £1m efficiency saving per annum	• Efficiency in public sector delivery, reducing the cost of ICT • Improved service collaboration between public organisations, including shared services • Improved service delivery enabling new ways of working, and new citizen services • Enhanced ICT innovation in the public sector e.g. cloud computing, video conferencing • Potential for improved user outcomes through enhanced service provision

Project background

Public Sector Broadband Aggregation (PSBA) is a Welsh Government-led initiative to deliver a consolidated, all-Wales, public service telecommunications network by aggregation of the demand for broadband across large parts of the public service. Its overall purpose is to support '*collaborative and shared service delivery so that the citizens of Wales benefit from improved public services*'.[1]

Originally established in 2004, and operational since 2008, PSBA enables partner organisations across Wales to share the same secure broadband network, and a reliable infrastructure to support improved service delivery. PSBA brings together the procurement, delivery, operations and management of ICT into one communications network for Wales.

PSBA was established to address co-ordination failures across public services, where individual organisations traditionally had their own broadband networks of varying quality and reliability. It also responded to the need (and opportunity) to drive efficiencies in the use of ICT in supporting service delivery, through economies of scale, whilst maintaining and improving service quality and the offer to citizens from across the public sector.

The Invest to Save Fund has supported a number of separate PSBA-related projects, with a total investment value of around £13m over the 2010-2012 period covered by the evaluation. These projects have focused on supporting organisations to join the network, both in specific areas including Gwent and North Wales, and across Wales more widely. The focus of this case study is principally on one of the projects, namely the '*Accelerating the benefits of PSBA*' project. That said, unpicking the effects of this specific funded-activity from the wider Fund support to PSBA, and the broader PSBA intervention, is challenging.

Led by the Welsh Government itself, the overall aim of the '*Accelerating the benefits of PSBA*' project was to public sector organisations delivering public services to move to PSBA connectivity services more quickly than would

[1] Introduction to PSBA – see http://www.psba.org.uk/Libraries/Publications/1_PSBA_introduction-15364.sflb.ashx

otherwise have been the case. Through accelerating sign-up to PSBA, the project sought to deliver resource savings on connectivity services, make other cost-saving services accessible sooner to these organisations through PSBA, and further develop and build the common platform for collaboration and shared services. Importantly, however, rather than operating as a discrete Invest to Save intervention, the project was recognised explicitly from the outset as providing additional support to, and enhancing the offer of, an existing initiative.

In this context, why was Invest to Save support necessary, given that the PSBA was well-established and operational? The case study research indicates that two key issues were in play:

- first, pump priming finance was required to address the significant up-front costs required for organisations to join the PSBA network, which involves a significant outlay that will not be re-paid for five or six years. The role of Invest to Save was to address this financial barrier, overcoming the 'cost of change' that would otherwise have prevented take-up of PSBA by organisations
- second, given the nature of the activity, non-repayable forms of finance were not possible given State Aid issues around intervention in the market (i.e. the provision of subsidised broadband services), meaning that a re-payable form of any public support to address the financial barriers was necessary.

Consultations suggest that the Invest to Save Fund was also regarded as aligned strategically to PSBA, with a focus on both driving efficiencies and service improvement, providing a coalescence of financial and strategic drivers justifying support from the Fund.

Project implementation

The '*Accelerating the benefits of PSBA'* project was awarded £4m of Invest to Save support in 2010, with the finance provided to the Welsh Government-led PSBA team.

The financial contribution was used to assist in covering the set-up costs for individual organisations across Wales to join the PSBA network, addressing the significant up-front costs of the technology integration. Organisations supported included Local Authorities, education institutions and other public agencies across Wales.

The range of services subsequently available for organisations on the PSBA network – though these are not funded specifically by Invest to Save – are summarised in the Table below.

Service Component	**Features of PSBA**
Core Network Services	• Bandwidth from 1Mbps to 1Gbps • Internet Access and Gateway Services • IP multicast capability and addressing services • Domain Name System (DNS) Services and domain registry • Content Filtering to meet the Internet Watch Foundation standards • Secure connections to shared resources and to enable shared services • Remote Access
Advanced Network Services	In addition to the core network services can provide: • Managed Firewall service • Local NAT service • Custom Resilience Requirements • Local VPN termination services • Support for Protectively Marked traffic up to RESTRICTED Gateways are also provided into JANET (for education), N3 (for health) and GCSx (for Local Authorities).
Professional Services	Technical consultants are available for the following service engagements: • Technical advice including capacity planning • Migration support • Network design and optimisation consultancy

Source: www.psba.org.uk

Project achievements and benefits

The PSBA project as a whole has generated significant cash releasing and non-cash releasing benefits. Quantitative benefits in the period up to the end of 2011 were £8.5m in cash releasing benefits, and an estimated £3.9m in non-cash releasing benefits. In the 2011/12 financial year, the first full financial year following the '*Accelerating the benefits of PSBA'* project, cash

releasing benefits were estimated at £3.4m and non-cash releasing benefits of £2.4m.[2]

These benefits cannot be attributed directly to the '*Accelerating the benefits of PSBA'* project. However, consultations with project partners suggest that the number of organisations signed up to PSBA, would have been substantially lower without the project, potentially as much as half lower by the close of the project. Indicatively therefore around half of the estimated benefits for the 2011/12 financial year (not the aggregate data to this point) can be linked, albeit not directly, to the Fund project. Given the potential for these benefits to be sustained over the longer term, the case study does suggest a potential overall positive Return on Investment for the Fund's significant contribution to the PSBA, even though this cannot be accurately quantified at this point.

That said, the impact of the project will decay over time, as it is important to recognise that the focus of the project was explicitly on *accelerating* the take-up of PSBA, that is delivering timing additionality, or making things happen more quickly than they otherwise would have done. Whilst it is not possible to be definitive, it is likely that some (if not all) of the organisations supported by the project would therefore have signed up to PSBA at some point even without the financial support provided. Indeed, the 'additionality potential' of the project was in its foundation focused on timing, and therefore partial, rather than full additionality.

The wider benefits of the PSBA intervention has been summarised widely elsewhere, and were not evidenced specifically for this work given the challenges of attribution. However, specific benefits include improved data transfer – both in terms of security and timing – within and between organisations, and facilitating new ways of working by exploiting emerging technologies (e.g. video-conferencing, cloud applications, and Voice over Internet Protocol).

Further, through increasing the number of organisations on the PSBA network (through accelerating take-up), the overall resilience and financial sustainability of the network has been enhanced given that the core

[2] See http://wales.gov.uk/docs/dpsp/publications/valuewales/121002i2s1.pdf

infrastructure is supported through on-going financial contributions from partners. The Invest to Save project therefore helped to both extend and embed the network across Wales.

What went well …

The role of the '*Accelerating the benefits'* project was to provide finance to enable organisations to access an existing set of activities through the established PSBA network. In this respect, the Invest to Save project represented the facilitation of a well-established process, playing an important 'obstacle clearing' role, but not fundamentally delivering 'new' or 'different' activity. As such, successful completion and delivery of the project was to be expected.

This being said, consultations for this case study indicated that the Invest to Save intervention was straightforward, involving a limited administrative burden, and provided an important level of flexibility in implementation, both of which were important in the success of the activity.

… and what could have gone better

Two issues emerge in terms of what could have gone better, both 'process' rather than 'impact' oriented:

- First, as noted above, the Invest to Save '*Accelerating the benefits of PSBA*' project was part of a wider programme and suite of investment meaning that unpicking the specific contribution of the Fund in terms of the benefits generated is challenging, and at this point the data are not available to provide a clear indication of the specific return on investment generated by the (significant) Fund investment provided. Consultations indicate that the Fund has been important to PSBA, but how important is hard to evidence quantitatively.
- Second, re-payment was not linked directly to savings generated (i.e. the Invest to Save investment was re-paid according to an agreed schedule, not when the savings had been realised practically), and given this arrangement, greater flexibility in the timing of re-payment and lead in time might have been helpful.

Key lessons

Three key lessons related to the Invest to Save support for PSBA activity emerge from the case study:

- the support from the Invest to Save Fund helped to provide the PSBA with increased credibility and recognition amongst the public sector, in this respect Invest to Save can be a helpful demonstration of the strategic importance and profile of an innovative and/or new intervention
- whilst focused on technology, it was important that PSBA – with the support from Invest to Save – has not been regarded purely as a 'technical' or 'infrastructure' project; this has helped to secure buy-in and engagement, and ensure that the service improvement focus of the intervention is maintained
- the provision of pump-priming funding was important in attracting organisations to the project (or accelerating their take-up), providing accessibility and flexibility in the project that would not otherwise have been possible – in this respect the simple 'financial offer' from Invest to Save was key to addressing the financial barriers impacting on organisations delivering public services.

Mental Health Rehabilitation & Recovery Reconfiguration

- The Mental Health Rehabilitation and Recovery Reconfiguration project received £564k of Invest to Save funding, enabling the development of new in-area accommodation and services for mental health patients. Prior to the project, a large number of patients were being sent out-of-area for accommodation, which was costly and sub-optimal for patient outcomes.
- The project allowed for the decommissioning of one ward, and the opening of new accommodation, leading to the repatriation of patients from out-of-area, the prevention of more patients going out-of-area in the first place, and the introduction of a number of mental health services in the community.
- The project was successful in achieving substantial savings of over £500k from its first year onwards, and has become a high profile project within the Health Board and more widely.
- The evidence suggests that without Invest to Save investment not all of the developments achieved would have been possible i.e. scale additionality was generated.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Costs of sending patients out-of-area higher than providing care locally, whilst local care seen to provide better patient outcomes • The decommissioning of a ward by the health board could free up capital to provide more care locally, but without Invest to Save the capital was not available	• Repatriate patients from out-of-area care, reducing costs – directly in terms of greater care costs, and indirectly in terms of travel time and direct travel costs • Improve patient outcomes by providing care closer to home, in a more familiar environment	• Investment of £564k from Invest to Save • Project run by teams at the health board, in partnership with local authorities, and the third sector • Estate requirements established first • One ward was then decommissioned, with new unit capacity increased, including the opening of a Psychiatric Intensive Care Unit • Initiation of a variety of community services and supported accommodation, including services for older adults	• Cash releasing savings of £541k in the first year of the project, with savings projected to continue • The repatriation of 30 patients from out-of-area care • Prevention of more patients going out-of-area due to sufficient capacity in the local area • Expansion of care in the community, with a greater variety of options for care	• Mental health services now operating more as a single system • Improved patient outcomes by having care in their local area, and by having more expansive community care

Project background

The Mental Health Rehabilitation and Recovery Reconfiguration project was developed by the Hywel Dda Local Health Board, which covers the areas of Ceredigion, Carmarthenshire and Pembrokeshire. The project emerged from the Health Board's focus on delivering care 'closer to home', aligning with the

national One Wales agenda, and built on the work of a precursor three-year programme of activity to return individuals with mental health issues from out-of-area high-cost placements. This earlier programme had realised a significant and continued return to local service provision and a reduction in healthcare costs.

As such, the Invest to Save project was building on an existing platform and intervention model, that had been tested and proven, to pump-prime a significant service reconfiguration. The underpinning rationale for the project was to modernise health services for people from the area with complex and enduring mental health problems, by:

- returning patients to the local area from high cost out-of-area placements, with many people going to England, where the closest appropriate accommodation was located (a significant distance from mid and South West Wales)
- preventing further placements out of the Health Board's area in the future
- developing a broad set of care options, including alternatives to in-patient care, such as supported housing.

An important element of the project's rationale was to bring people back to the area, or keep them in the area, to ensure better links to their families, dependents and local healthcare professionals and services, alongside a clear need to drive efficiencies in the costs of mental health provision.

The project was awarded £564k from Invest to Save, with the total cost of the service reconfiguration being £2m. Consultations indicate that the use of internal resource was considered, with the earlier three-year programme funded internally, however, the activity had '*gone as far as it could*' without additional funding. The Invest to Save resource was therefore focused on both direct delivery against the three work strands set out above, but also to enabling the decommissioning of a long-term rehabilitation ward deemed to be unfit for purpose. The decommissioning of the ward was the key enabler to the full realisation of the project, with the capital to deliver this not available without Invest to Save. The £564k enabled full realisation by off-setting pay

costs whilst the services were reconfigured and grown anew through recruitment.

Project implementation

The Invest to Save project, running from 2010 to 2013, was undertaken by Hywel Dda's mental health services, in partnership with the three local authorities covered by Hywel Dda, third sector organisations, and the Modernisation team and Community Services at the Health Board. The project took a "whole systems" approach, looking at the project within the context of the whole of mental health services at the Health Board, with a number of actions to bring changes to service provision in Mental Health Rehabilitation Services, Acute Mental Health Services and Older Adult Mental Health Services. As stated above, a core element of the project was to enable the decommissioning of a long-stay rehabilitation unit, which in turn released the resource and capacity to deliver a range of other actions. The first of these actions established the estate requirements to achieve the project's stated aims. Developments then followed, including:

- the growth of accommodation to support repatriation of out-of-area patients
- the development of local mental health services, including alternatives to inpatient care, and support to move people on from inpatient care e.g. a Therapeutic Day Service and crisis accommodation options
- consideration of options for older adults and community provision
- the opening of a Psychiatric Intensive Care Unit (PICU), and Acute "Assess to Admit" Unit, in 2012.

A small, five bed unit, had already been commissioned, on a site owned by the nearby hospital in Carmarthen. This had become operational prior to the Invest to Save project, in 2008, and had already demonstrated the savings possible from providing local care, leading to savings of £413k in 2008/09, and £503k in 2009/10, with the Invest to Save project commencing in 2010. Invest to Save enabled the expansion of this unit to include 14 beds for patients with mental health needs, four beds for step-down care, and a

complementary repatriation service. Without Invest to Save, some, but not all of the developments achieved would have been possible.

Project achievements and benefits

Benefits delivered by the project were as follows, with benefits ongoing:

- The repatriation of 30 people from care outside of the area, and the prevention of any more individuals going out-of-area for care. Project partners reported that, although this positive development might have happened in any case, without Invest to Save it would have happened more slowly, in part because the low-security unit developed by the projects would not have been delivered. The experience of the Invest to Save project helped give the board the confidence to go ahead with the development of low-security accommodation.
- A reduction in continuing health care spend, directly owing to reduced costs in providing accommodation within the NHS, and indirectly via a reduction in travel costs and travel time as a result of having patients locally, with no need for lengthy travel for patient visits. Building on the progress made prior to the Invest to Save project, changes to mental health services delivered cash-releasing savings of £541k in 2010/11, with the Invest to Save project saving more than had initially been anticipated. The cost efficiencies were recycled into the core service budgets, providing resource for investing in staffing, and an enhancement to the service offer through the creation of more bed spaces for patients.
- Reduced length of stay as a result of patients being closer to home and family, being in Wales, and a Welsh-language environment, improving patient outcomes through access to community services, community placements, and individually tailored resettlement. Further, a community service specifically for older adult mental health patients was established, alternative in-patient care developed, community resource teams strengthened, and developments between health and social care encouraged. Refocusing older adult services also improved assessment and treatment, bringing this to settings closer to home,

and having more extensive provision in place allowed for effective risk management of patients, in turn reducing demand on in-patient beds. The project leads were said to have found evidence of improvements in quality of life as a result of the project, with reduced length of stay the result.

Whilst the project was not regarded as one of the most high profile in the Health Board at the start of the project, it was reported that the benefits generated increased its profile. Further, there has been wider learning for the Health Board as a result of the project, in part owing to the fact it was delivered across the three constituent areas of the Health Board providing an integrated overview across the areas managed by three county directors. As an innovative approach to repatriation, the project was also reported to be recognised externally as 'best practice' – for example, Aneurin Bevan Health Board have met with Hywel Dda on a number of occasions to learn about the repatriation project.

What went well …

The following points were identified through the case study as key determinants of the success of the project in delivering efficiencies and service benefits:

- The project team was in charge of both service budgets for mental health, controlling budgets for internal and external commissioning, meaning that money could be transferred from one budget to the other to flexibly fund the continuation of the project and the whole systems approach. Prior to Invest to Save this was not possible, with separate trusts and boards. This enabled the team to move rapidly and respond to changing needs. Furthermore, by decommissioning one ward and opening up new units, it was possible to combine new and experienced staff, which meant that the new units benefitted from experienced staff.
- Significant effort was focused on planning around potential risks with the project, both financial risks, and clinical risks in re-locating individuals moving people, with communication between all partners involved in the repatriation an important factor in ensuring a smooth

transition from out-of-area care to local care. The template and philosophy of the project was considered to be robust in minimising these risks.

- There was a good relationship with procurement at the local authorities, third sector buy-in, and a good implementation model to work with. The core Health Board team worked with local authority procurement to procure accommodation. Whilst significant accommodation existed locally, it was not always fit for purpose (as identified in a needs analysis), so supported living in Pembrokeshire was developed, which was deemed successful. Having now procured accommodation, this paves the way for future collaborations. Indeed, the team are now looking at moving forward to the development of a low secure unit.

… and what could have gone better

There were some unforeseen hindrances to progress, with emerging evidence requiring changes to the original plan for the project, and in order to factor in the outcome of consultation with staff and stakeholders. Whilst not something that the project was ever intended to address, there was also a gender disparity evident, with the accommodation specifically for male patients. However, another Invest to Save bid has been considered for a women's unit.

More widely three issues emerge:

- It was reported that there was some resistance initially, with apprehension from some members of the public due to the type of patients being brought back into the local area. Given the complex cases and intensive requirements of patients involved, it was recognised that some resistance from the public in bringing more of these people into the local area was possible, irrespective of efforts taken to alleviate concerns.

- Dissemination could have been better earlier on in the project, with efforts concentrated on getting the project up and running. However, this has improved greatly in the past 18 months, with more meetings

and committees on what is being delivered, outcomes, costs and efficiencies.

- A formal review at the end of the project with the Invest to Save team would have been beneficial, with the quarterly reporting ending on project closure, and no subsequent follow-up activity. That said, internal monitoring has continued, with this having improved as a result of the regime in place for Invest to Save, with more information available as the project has progressed. Further, an external case study has been produced.

Key lessons

Over and above the messages set out above, two key lessons emerged from the project:

- First, although in this case they did not affect the success of the project, the unforeseen circumstances experienced highlight the need to be constantly aware of any issues that may affect the project, and have appropriate contingency plans and risk management systems in place.
- Second, an important aspect of the project was the “whole systems” approach. Taking such an approach means that, in this instance, the project did not sit in isolation, but rather as part of the mental health services as a whole, meaning that the project linked up with the rest of mental health services to maximise the potential impact of the project.

One Newport Information Station

- One Newport Information Station is a flagship initiative of One Newport's vision for the transformation of public services. The project sought to unify a complex and fragmented network of customer service centres associated with specific community services themes, by establishing a coherent, accessible 'hub and satellite' model, better connecting customers to services, core to this was a new customer service facility.
- The Information Station project was led by a project team within Newport City Council, but involved a wide range of partners from across the Local Service Board, enhanced partnership working was a hallmark of project development and implementation
- The Information Station project has enabled the disposal of property, resulting in savings of £580k per annum, together with a net resource saving of £139k. This financial saving is combined with significant gains in the quality, efficiency, and effectiveness of customer services
- The evidence indicates that the Invest to Save investment was a critical enabler of partnered investment, serving as a platform and stimulus for subsequent support of partner agencies.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Need to integrate and centralise a fragmented customer and community services provision across the area, that had come to be viewed as inefficient and poor quality by service providers and service users • Underpinning co-ordination failures across different policy and service delivery domains and organisations in the area	• Facilitate improved direct public access to a range of citizen-focussed services through the establishment of a multi-agency face-to-face customer service centre and satellites within the City of Newport • Service improvement through a package of measures to deliver better quality, and more accessible services including via engagement, communications, web 'channel shift', partnership service delivery	• Invest to Save support of £700k • Other funding through sale of surplus assets, partner funding (e.g. funding to establish a Domestic Abuse Unit in the building), and in-kind support from collaborating agencies • Refurbishment of the Customer Service Centre in Newport City • Relocation of 300 staff drawn from across the community services provision of the Council and its partners	• Disposal of property to the value of £580k p.a., and a net resource saving of £139k • Released funds reinvested into the improvement of customer services, resulting in customer service awards, national recognition, and improved customer survey feedback • Increased service uptake and reductions in referral and duplication faults	• Improvements in the efficiency and quality of community services • Improved stakeholder engagement and partnership working across public services in the area • Contribution to the regeneration and economic development of the city-centre through local purchasing and improvement to the physical fabric of the area

Project background

The One Newport Information Station project is a flagship initiative emerging from One Newport (Newport's Local Service Board) vision for the transformation of public services, and specifically their quality, effectiveness, and efficiency. The Information Station project sought to unify what was

regarded as a complex, fragmented, and underperforming network of customer service centres across the Newport area, each associated with specific community services themes, by establishing a coherent, accessible 'hub and satellite' model, more able to connect customers to services.

The evidence underpinning the project came from a long-term analysis of customer satisfaction surveys, and internal analyses of customer service efficacy, in parallel demonstrating the need for a more streamlined and accessible service provision platform.

In this context, the objectives of the Information Station project were to:

- facilitate improved access to services for local citizens
- improve the efficiency and effectiveness of service delivery
- stimulate and enable multi-agency working in the provision of community services.

The role of Invest to Save funding was to provide an initial revenue resource platform for subsequent investment by the Council and its partners: providing a sound base for the project and supporting the significant planning effort required to address the complex service planning, legal and practical (e.g. planning, design) challenges inherent in a project of this type.

The Invest to Save finance was considered critical by project partners to facilitating the partnership model, eliminating the obstacles presented by collaborative investments of this nature i.e. where no one organisation is able (or prepared) to play the role as core funder, given the inherent risks of partner disengagement and/or practical barriers to the sharing/pooling of resources. Overcoming these co-ordination failures, in delivery and funding, was core to the rationale for Invest to Save support for the project.

Project implementation

Initiated in 2009, the Information Station project was led by a project team within Newport City Council, supported by partners including: Aneurin Bevan Health Board, Citizens Advice Bureau, Communities First, Jobcentre Plus, Heddlu Gwent Police, Newport City Homes, the University of Wales, Newport, South East Wales Racial Equality Council, and associated partners.

Central to the planning process was an extensive initial programme of process mapping, business process reengineering, and transition planning that spanned the service components of the Council and its partners. This process was critical to the development of a practical solution for service delivery at the Information Station, and incorporated the production of specific development plans for individual service areas, alongside the negotiation of multi-agency, partnership initiatives.

The early development process was also underpinned by a wide-reaching stakeholder engagement programme, engaging stakeholders in the formulation of a service delivery model for the Information Station.

Alongside development of the operational model, the project coordinated the re-location of existing service teams to a newly refurbished central facility. The facility featured an integrated customer services suite, alongside modern open-plan, agile-working office environment conducive to cross-service, multi-agency working.

The Information Station centre opened in January 2012, providing access to a wide range of services as summarised in Table 1 below in one single location, rather than a network of centres and facilities across the Borough.

Table 1: Information Station Services

Blue badges Gwent Education Minority-Ethnic Service (GEMS) Business rates Job Centre Plus Domestic abuse unit (multi-agency unit) Re-housing services Council tax Housing benefits	Citizens Advice Licensing Credit Union Planning Social services (including children and families, child protection, appointeeships, access to supported employment Exercise referral

Source: Newport City Council

The project was financed by a number of partners and funds, including cash released through the disposal of vacated property and awards for specific initiatives (such as the establishment a Domestic Abuse Unit). This financing package incorporated £700,000 of repayable Invest to Save funds.

Project achievements and benefits

The Information Station project has delivered significant cash-releasing benefits, realised by the disposal of property through the re-location of service provision facilities, resulting in achieved savings of £580,000 in the first full year to 2013. The project has also delivered net resource savings in service delivery to date of £139,000, with the savings reinvested by the Council in developing the quality and scope of service delivery.

The cash-releasing benefits are combined with significant reported wider benefits in the quality, efficiency, and effectiveness of customer services. Evidence provided by the case study research indicates that the project has delivered:

- improved levels of customer satisfaction with service provision, as evidenced through surveys following the implementation of the Information Station project. Indeed, the advances in customer service facilitated by the Information Station have received wide-spread recognition for excellence. Notably, the project was awarded 'Best High Street Customer Service' at the 2012 European Call Centre and Customer Service Awards.
- higher levels of uptake in services and reductions in referral and duplication faults, as evidenced in performance reviews, although quantitative data on these factors was not available to the evaluators
- enhanced multi-agency working, with multiple initiatives emerging from the Information Station leading to an enhanced service offer to the citizen and user of Council and partner services.

Alongside the 'service-user' benefits of the project, the Information Station has also delivered qualitative benefits for project partners, with the potential to deliver a long-term legacy for the Invest to Save funding over and above the direct financial savings. These include significant improvement and efficiency gains in the service teams through:

- facilitating improved information sharing, cross-service, and multi-agency working

- removing duplication, exceptions, and faults in service delivery between agencies

Wider benefits associated with the refurbishment of the Information Station physical facility, not originally a core part of the rationale for intervention, but delivering important (positive) unintended consequences, include supporting the regeneration of the local area through the improvement to the physical fabric and offer of the city centre, and supporting local economic and community development through the use of 'social clauses' and 'local procurement' in the design and build contract.

What went well …

Overall, the Information Station project has delivered significant gains in the quality, efficiency, and effectiveness of the customer services provided by Newport City Council and its partners. Key factors in the successful realisation of the Information Station vision reported by project partners and evidenced in the document trail included:

- The depth of process mapping, business process reengineering, and transition planning undertaken to inform the development of an efficient and effective service solution
- The extent of consultation and engagement with customers, staff/unions, and stakeholders undertaken to inform the development of a feasible, widely endorsed solution to service delivery

Crucially, however, the success of the Information Station project was seen to be dependent centrally on factors beyond the quality of the building. The refurbishment was accompanied by the development of new operational model for service provision, incorporating development of the governance structure, adoption of multi-channel (digital) service delivery, introduction of a multi-agency information sharing protocol, and an extensive staff training provision. This emphasis ensured an effective service *improvement* solution was ultimately realised for what started out as a largely service *channel* development concept.

… and what could have gone better

The principal challenge faced by the Information Station project team was the complexity of the process of research, planning, and negotiation of a feasible, effective multi-agency solution that met the needs of each partner and their customers. This complexity impacted significantly on the pace of early phases of the project. This challenge could, in part, have been managed/mitigated through a more structured initial dialogue, featuring a more detailed treatment of critical issues and path dependencies, such as legal parameters, for each partner, aligned with an integrated understanding on how these partner-level constraints would impact the overall timescale and delivery plan.

As noted above, establishing monitoring procedures to track quantitatively changes in service uptake, and reductions in referral and duplication faults, comparing pre-Information Station baselines to the post-project position, both in the short and longer-term would also have been beneficial. Without a robust baseline in place, understanding the effects Information Station is not possible.

Key lessons

The key lessons from the project identified through the case study research, with relevance to agencies delivering public services across policy domains are as follows:

- The One Newport Information Station project demonstrates the value of early stakeholder engagement to the development of an effective multi-agency solution over the longer-term
- Invest to Save funding has been a critical enabler of partnered investment, serving as a platform and stimulus for subsequent support of partner agencies, helping to offset the co-ordination challenges – practical and financial – that can hamper effective multi-agency working
- A factor critical to the Information Station project's successes was the recognition by partners that a physical solution, the refurbishment,

required a sophisticated operational and service model in order to realise the full benefit of the investment; in this respect similar projects should focus as much on the service improvement intent as the service channel/delivery mechanism element of the intervention.

- To a great extent, the success of the Information Station project can be traced to the level of research and study undertaken during the planning process, an effort critical to removing risk in subsequent phases of the project. However, even with this level of planning, the development of an effective multi-agency solution that met the needs of each partner and their customers was not easy and took significant time and effort across the partnership. Put simply, multi-agency projects take time: both project delivery agencies and funders need to ensure that this is reflected in project plans, business cases, and funding agreements.

Our Space Cardiff

- Our Space Cardiff was based on a sound, well-defined rationale to drive efficiencies, and provide the opportunity for an improved working environment for staff, through the rationalisation and improvement of the office property portfolio across Cardiff Council.
- Invest to Save provided the necessary resource to undertake the research activity that informed practical implementation. Without Invest to Save, project partners reported the office rationalisation process would have been less structured, and would have happened later, and potentially not at all. Although relatively modest compared to the capital costs of the implementation, Invest to Save funding played a key pump-priming role.
- The project closed in July 2013, so full benefits are yet to wash-through. However, at this stage, cash-releasing savings of £250k have been achieved through office rationalisation, with a further £1.5m of capital receipts from disposal.
- Our Space has delivered important qualitative benefits including better linkages and cross-departmental working, an improved working environment for staff, and learning on how to deliver a structured and focused asset management approach.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Information deficits regarding the Council's office property holdings and capacity, including current efficiency, utilisation and quality/fitness for purpose • Need to drive efficiencies and cost savings through the better use of property assets to meet increasing budgetary constraints and challenges • Recommendation from the Welsh Audit Office to review the corporate office property portfolio	• Reduced cost of running the office estate with revenue savings from reductions in operational and management costs, Improved environmental performance of buildings in terms of both carbon emissions and footprint • Improved accessibility to council buildings • Better working environment, with more flexible working, more fit for purpose buildings, more efficient office layouts and the co-location of teams	• Invest to Save funding of £250k, matched to Council resource for revenue activities • Council capital resource of c.£3m for subsequent implementation • Two main activity areas ➢ Research and planning including mapping and auditing of Council office portfolio ➢ Implementation including disposal of property, refurbishments • Programme of staff engagement and consultation	• Property disposals – eight completed by the close of the project • Achieved cash-releasing savings of £400k at formal project closure • Achieved capital receipts of £500k from disposal of property • Reduction in the Council's Carbon footprint through property rationalisation • Improved cross-departmental working within the Council • Enhanced staff welfare and perception of satisfaction with the working environment	• Improved efficiency through better utilisation of Council's office property, and reduced footprint across the City • Over the long-term, potential for improved staff welfare to be reflected in higher quality service provision for service users

Project background

Cardiff City Council operates a significant office portfolio to fulfil its statutory and service delivery functions. Our Space Cardiff sought to map the scale and breadth of the Council's office portfolio, to inform the subsequent

implementation of a programme of premises rationalisation to deliver financial savings and better align the portfolio to the Council's delivery and business needs.

Initiated in 2009, the project was developed originally to address two distinct, but related, issues:

- **information gaps**: prior to the project the Council did not have an overall view of the scale and range of its office portfolio, or in turn its quality, efficiency/utilisation, any capacity constraints, nor the extent to which it was fit for purpose
- **financial pressures**: with budgetary constraints facing the Council, there was a need to drive efficiencies and cost savings, with property rationalisation identified corporately as a potential opportunity to meet this challenge.

These twin 'internal' issues were at the core of the rationale for Our Space. However, the project also responded to an 'external' driver, with the Wales Audit Office's review of the Council's 2009 Asset Management Plan recommending that it undertake a review of its office accommodation portfolio. Our Space's development therefore was not driven out of formal/mechanistic options appraisal or business planning processes, rather it was developed as a pragmatic and timely response to meeting a range of both internal and external issues.

Why Invest to Save? Some four years on from the original concept development, absolute clarity on this issue is not evident, as people have moved on and the project has evolved. However, the document trail and consultations with project partners suggest that there was insufficient internal resource to fund the project in full at the time. Invest to Save was identified as an appropriate, and available, financial mechanism to overcome this deficit. Importantly, although 'new' to the Council, the project built on experience from elsewhere, with similar processes undertaken by other Councils across Wales. Our Space was therefore regarded as an important, but relatively low-risk project, with the potential to leverage significant returns.

Consistent with the underpinning rationale, the core objective of the project was to deliver efficiencies of resources through the release of cash savings by rationalising property requirements, and where possible capital receipts from property disposals. However there was also an important service improvement intent, with the planned rationalisation to emerge from the project, leading to the development of more modern office environments and in turn, more efficient and effective working practices.

Project implementation

Our Space involved two main phases of work: an initial 'research and planning' phase, and a subsequent 'implementation and delivery' phase. The Invest to Save funding of around £250k (alongside £85k from internal Council resource), was used for the 'research and planning' phase only. Although starting formally in September 2009, practical delivery of the research and planning phase commenced in March 2010. The work was delivered by a Project Manager, reporting to the Corporate Property and Estates Manager.

This first phase of work involved:

- Mapping of the Council office portfolio across its directorates and service departments: in all some 51 offices were identified.
- A detailed audit of the identified portfolio including gathering information on lease terms and dates (where let) or market value (where owned), and an assessment of the quality and appropriateness of the premises using consistent criteria, for example, asking:
    - Is the property "fit for purpose" – in relation to the property condition, is it legally compliant (e.g. DDA), is it in a relevant location?
    - Can the property be modernised or facilitate more efficient service delivery?
    - Can the property be occupied by a greater number of staff?
    - Is it possible to use the space within the building with greater flexibility?

- Based on the audit, the development of an Implementation Plan that identified which buildings would be retained, re-developed or disposed of. Alongside the Plan a detailed financial model was developed identifying both the costs and savings of the proposed interventions over a 20-year period to 2031.
- The development of a set of design principles, providing an overview of the core elements to be contained in the re-purposed 'Our Space' offices following consolidation, for example, related to open plan office design (for buildings where this is possible), lighting, quiet areas, seating areas etc.
- A programme of staff engagement with internal staff, including a series of meetings, presentations and briefing sessions with Senior Managers and Trade Union Representatives, reflecting the potential perceived disbenefits to staff from re-location from existing facilities.

The second phase of Our Space, not funded directly by Invest to Save, but flowing immediately from it, involved the realisation of the Implementation Plan. This was delivered through a staged approach, with the original Implementation Plan proposing to retain 24 buildings and dispose of 27, with a significant process of consolidation of staff into four 'Core Buildings', of City Hall, County Hall, Willcox House, and Global Link.

The project was tested initially through a pilot with around 25 staff moved from one of offices planned for disposal to County Hall into an area with the 'Our Space' design principles. Subsequently, around 1,800 staff from across the Council's offices were re-located, including the total refursibment of Willcox House and Global Link, and closure of eight buildings. Capital costs of this activity were around £2.6m.

Based on the original Implementation Plan, the next stage was to complete the project through the closure of a further 19 buildings, with staff re-housed following major refurbishments of County Hall and City Hall. This would have incurred significant additional expenditure, including £8 million to address the backlog of maintenance to County Hall. However, in 2012 following a change of administration, a decision was made not to continue with this activity, with

the Council considering the potential to develop a new single HQ site. Following this decision, plans for additional Our Space activity was halted, with the project completing formally mid-2013 with the closure of eight offices.

Project achievements and benefits

Feedback from project partners, both those involved in its delivery, and from a service delivery perspective, was positive regarding the overall achievement and benefits of Our Space. Although the scope and scale of the project changed significantly in its implementation phase as discussed above owing to a change in the strategic direction of the Council, Our Space was regarded as a success, from both a quantitative and wider qualitative perspective. In quantitative terms, by its close, the project had delivered:

- approaching £250k in cashable benefit through reduced running costs as a result of the office rationalisation in the 2012/13 financial year; this represents a 2.7% reduction in the total annual running costs of the Council's office portfolio.
- a further £1.5m of one-off benefits through capital receipts from the disposal of office property.

Looking forward, the target is that the cashable benefits through reduced running costs will increase to around £400k per annum (four of the eight closures took place in early 2013), and as the office disposal process continues (with a staged approach to sales being undertaken to avoid distortion of the commercial property market), the Council's target is to achieve a total of £5.3m of in capital receipts. If delivered, by March 2016 (the end point for monitoring purposes) this would equate to some £6.75m of cashable savings generated by the Our Space project.

Through the office rationalisation and disposal programme, the project has also delivered environmental savings, with data provided by the Council reporting that the project had improved the environmental performance of the office estate by 7% by March 2013. This benefit is aligned with the Council's Corporate Objective of ensuring that people in Cardiff have a clean, attractive and sustainable environment.

More widely, the case study indicates that a range of wider qualitative have been delivered, of three main types namely:

- first, through the movement of staff (some 1,800 in all) the project has provided the opportunity for improving the linkages and informal cross-departmental working; put simply, with increased co-location of departments at Willcox House and Global Link there are more opportunities for staff to work together and engage with each other – this has in turn led to a reported 'change in mind-set' amongst those staff in terms
- second, and related, the project has delivered an improved working environment, evidenced both anecdotally through consultation with project partners, and through survey evidence which showed an increase in satisfaction with the working environment amongst staff engaged in the project
- third, the project has generated experience and learning for the Corporate Property and Estates on how to put in place a structured, managed and focused approach to asset management, with legacy benefits for the wider property portfolio and effects (and efficient) management of resources in the future

To what extent are these quantitative and qualitative benefits additional to Invest to Save, or put another way, would they have happened in any case? This is important given the significant capital costs required to implement the project, not covered by Invest to Save funding. Consultation with project partners indicate that the additionality of the Invest to Save funding was significant. Without this resource, and the opportunity it conferred to dedicate specific resource, and time, to the research phase, it was reported that the Council would have remained 'responsive' to office accommodation challenges with a 'piecemeal' rather than integrated approach.

As such, without Invest to Save, project partners reported the office rationalisation process would have been less structured, and would have happened later, and potentially not at all. Therefore, although relatively

modest compared to the capital costs of the implementation, Invest to Save funding played a key pump-priming role.

What went well …

Four key messages emerge from the case study research:

- first, the potential level of risk in the implementation of the rationalisation of office accommodation – related to staff antipathy to relocation, and the potential effects on their established working practices, including travel – were mitigated substantially by a wide engagement exercise, and the delivery of a pilot to test the concept and demonstrate to staff the potential benefits of the 'Our Space' approach
- second, the project was delivered though a planned and staged process, this 'incremental approach' as termed by project partners meant that the potential disruption caused by office rationalisation was minimised, with clear planning in place – where, when and how
- third, and related to the previous point, the project included a detailed research and planning phase – that the Invest to Save project enabled – ensuring that the subsequent activity was based on a solid evidential base; this research phase also provided a significant body of evidence on the Council's property holdings, which will be of use over the longer-term as the Council continue to develop its approach to asset management
- fourth, although a 'property' project, a conscious effort was made by the core team to engage staff from other disciplines through the project process, including from HR, Finance, Communications, Design, and IS/IT perspectives, ensuring that issues were anticipated and addressed in advance of engagement with staff and practical roll-out.

… and what could have gone better

By its close, Our Space had not delivered fully on its original targets, largely owing to the change in strategic direction of the Council mid-way through the projects that impacted substantially on the scale and scope of the

implementation phase. This change was outside fully the control of the project. However, two points are worth noting:

- Potentially, more could have been achieved if the project had commenced on time (in Autumn 2009, rather than Autumn 2010, owing to delays in the appointment of staff), however, this would not have altered substantially the overall profile of project outputs and benefits
- Monitoring processes could have been improved, especially given the research focus of the first phase of the work. For example, although it is too soon at this stage to know whether perceived benefits for *staff* have led to improved service quality for *service users and client*, there do not appear to be plans in place to capture these potential benefits over the longer-term. Similarly, as recognised by the Council in their internal closure report, there were also no baselines put in place for measuring the potential travel cost benefits of the office rationalisation, as such the scale of potential benefits in this area will not be known.

Key lessons

The consultation with project partners and documents provided to the evaluators demonstrate that a wide range of lessons have been learned through Our Space Cardiff in terms of 'how to do' office rationalisation and asset management projects. This is valuable learning for Cardiff Council with the potential to be shared more widely across the property management community, indeed, we understand that the project lead has been engaged in disseminating and communicating the lessons amongst relevant agencies.

However, the key lessons from the project, with cross-thematic relevance to other public authorities seeking to deliver savings and service improvements, are as follows:

- The scale, range and intensity of the engagement with staff to drive through the project was key; the lesson here is not the truism that 'engagement matters', but that 'planned, sustained and deep' engagement matters, and is crucial if staff are to be bought into the process. The use of a group of staff as project 'champions' was an

important engagement mechanism, providing a weight of influence when corralling the broader staff group.

- Similarly, capacity and time are crucial. For a project of the nature, scale, and scope of Our Space, a dedicated resource is key, ensuring that this activity is ‘core businesses’ for a dedicated team, not additional activity for a wider group.
- The project logic model reflected a sound and well defined and direct relationship between activity and cash-releasing savings, making the evidencing of benefits manageable and the demonstration of effects clear. This helped to ensure that the focus and momentum of the project was maintained despite external pressures. In this sense, although detailed and complex in delivery, Our Space as a concept was simple and straightforward in design. This has also helped in the monitoring and re-payment regime put in place at the Council, with re-payment of Invest to Save based on realised savings only.
- Finally, although tailored to the local content, Our Space drew heavily on existing activity and previous examples of similar work, including a formal review at the outset of the project of similar processes in other local authorities, and regular engagement with external partners. This helped to ensure that the project drew on good practice, whilst maintaining local specificity. Where possible, building on existing learning is therefore important, fundamentally whilst there is scope for innovation, the core processes and procedures of service improvement interventions are often well established, and should where possible be sought out and utilised.

Paperless Powys

- Paperless Powys aims to delivering efficiency savings and supporting business transformation and improvement by through transition to a paperless process for the handling and management of information across the Council and its services.
- The project is on-going, but has started to deliver benefits including £130k p.a. recurrent cash-releasing from Social Care and Complaints departments, and £195k p.a. recurrent savings from Transport, and Education departments.
- Although a 'new' project, which secured Invest to Save resource on its own merits, Paperless Powys drew on the experience of an earlier intervention focused on paperless concepts in the Revenue and Benefits Department. This helped to de-risk the investment of public monies and provided an important evidence base on which to build
- The project involved significant up-front and on-going research, including a detailed Return on Investment study and development of benefits realisation plans. The Invest to save fund provided the resource to deliver this capacity and level of rigour in the project process. Without Invest to Save, the transition to a paperless Council would have been slower, and incremental; the benefits would have been lower as a result.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Cost and space associated with production and receipt of significant levels of paper across Council departments • Strategic intent from Powys Change Programme to improve services and responsiveness to citizens alongside efficiency improvements	• Deliver savings in core processes and administration • Realise improvements in performance, quality and compliance • Support accommodation and flexible working strategies • Adopt paperless working and a 'hands-off' approach to service delivery • Increase responsiveness in cross-department and multi agency working	• Total investment of £500k, including £375k from I2S • Paperless Powys Team including Project Manager, and oversight from Paperless Powys Board, • Research into opportunities for implementation of paperless services at departmental & service level • Implementation of corporate scanning operation and electronic document management system • Staff engagement, and training programme	• Cash releasing savings of £5.4m over a five year period • Increase in customer satisfaction levels and a reduction in customer complaints • Reduction in carbon footprint by reducing the production and movement of paper across Powys	• Reduced costs through space and employment savings contributing to efficiency and value for money agenda • Streamlined processes enabling the Council to deliver a faster and more consistent service to citizens

Project background

Paperless Powys is led by the IT Department at Powys County Council. The project is focused on delivering efficiency savings and driving business

transformation and improvement by supporting the transition to a paperless process for the handling and management of information across the Council and its services. Developed initially in 2009, the project responded to two key issues:

- the need to reduce the costs of the management, processing and storage of information and documents – which are not insubstantial – as part a wider drive across the Council to respond to significant financial pressures; there was a significant budget deficit in place at the time of project's conception
- given the size and rurality of the County Council's spatial footprint, there were challenges in delivering high quality and cost effective services owing to the slow speed and high cost of moving around documents and materials.

These issues formed the core rationale for the project. However, three other points are important in understanding the genesis and development of Paperless Powys. First, the project was developed in response to the strategic intent of the Council set out in a wider business transformation programme across the Council under the 'Powys Change Plan' programme, which sought to better connect and align Council activity to citizen outcomes, and deliver better value for money. Ultimately, Paperless Powys became one of the 40 projects delivering against this Plan across Council departments.

Second, the project was underpinned by a detailed and comprehensive Return on Investment (ROI) assessment undertaken by an external systems management provider to scope the potential costs and benefits for Powys County Council of the rollout of an Electronic Document Management (EDM) and Workflow solution. This work identified *potential* savings over a 5-year period of £5.4m, including:

- Direct cost savings of £320K from reduced printing and associated paper management costs
- Process cost reductions of over £720K, the equivalent of approximately 30 FTEs

- Further process/workflow efficiency improvements of approximately £470K, equating to an additional 20 FTEs, subject to the ability to redesign processes and introduce new ways of working.

Third, although a 'new' project, which sought and secured Invest to Save resource on its own merits, Paperless Powys drew on the experience and lessons of an earlier intervention focused on paperless concepts in the Revenue and Benefits Department of the Council in 2005. This earlier work had introduced an EDM system, leading to a reduction in operational costs (through staff and accommodation savings) alongside improving its collection rate of benefits.

The Paperless Powys project funded through Invest to Save was therefore focused on rolling-out to a wider set of departments an already well-established process which the Council had experience of delivering successfully. This helped to reduce the risk and uncertainty of the project, albeit the Invest to Save Paperless Powys was operating at a larger scale than the earlier Revenue and Benefits activity.

In this case, was there a justification for Invest to Save support for the project – that is, given its low-risk nature (i.e. implementing a process well-known to the Council), could this not have been funded through internal resource? The case made at the time, back in 2009, was a lack of internal resource, and with budget pressures, there were insufficient funds available within the Council to deliver the project as intended, including across a number of departments. A headline options appraisal was completed to test the potential for a smaller programme. However, this reported that a more modest and incremental approach would not release the benefits of a corporate solution. In this respect Invest to Save was therefore judged by Powys County Council – and the Invest to Save Board – as an appropriate funding mechanism. The firm evidence of savings from the earlier Revenue and Benefits project was helpful here, de-risking the public investment.

Against this strategic and operational backdrop, the stated objectives of the paperless Powys Project were to:

- Deliver savings in core processes and administration, including through adopting a paperless working and a ‘hands-off’ approach to service delivery – with forecast efficiency savings of approximately £150k per annum.
- Realise improvements in performance, quality and compliance
- Support accommodation and flexible working strategies
- Increase responsiveness in cross-department and multi-agency working

Importantly, the project was from the outset focused on seeking to deliver both financial savings, and service improvements though a business transformation project and the implementation of ‘paperless’ processes that would lead to improvements to project workflows (that is, how documents and information are managed and processed across the Council), with the potential for subsequent improvements in the speed, quality and efficiency of direct service delivery.

Project implementation

Paperless Powys is a significant and multi-faceted intervention. Drawing on the detailed analysis from the Return on Investment (ROI) assessment which also included the development of high-level service department delivery plans (that is, how the ‘paperless’ concept would be realised practically for each service area), the project has involved three phases, with Phase 3 still underway:

- Phase 1: the technical development of the project including the establishment of a corporate scanning facility at the Council’s head offices at Llandrindod Wells to receive and scan documents and process them across the Council and relevant departments, and implementation of the EDM and the scanning process with the with the Social Care department as a pilot
- Phase 2: Roll-out of the EDM and scanning process to other Council departments including Education, Transport and Complaints, with this stage of the work also including a significant staff engagement and

change management process to ensure that staff were trained on, and bought into, the use of the EDM for the processing of information, and to ensure that the potential benefits of the system were utilised fully

- Phase 3: involves the further rolling-out of the process across the Council, including looking to ensure that the horizontal links between departments are also covered through the EDM and paperless processes.

The delivery and governance model currently includes:

- a dedicated Paperless Powys Team, led by a Project Manager and involving 2.5 FTE staff
- a Paperless Powys Board, involving representatives from a range of Council departments as well as the project team.

The Invest to Save Paperless Powys project will close on the completion of Phase 3 by the end of the 2013/14 financial year. However, in a positive development, project partners reported that the activity is planned to continue following the end of Invest to Save support, although the funding for this legacy activity has yet to be secured.

Project achievements and benefits

The project is still in the delivery phase. However, at this stage a range of benefits have been delivered. In quantitative terms the research with projects partners indicated that the following cash-releasing savings have been achieved:

- £130k p.a. recurrent savings delivered through savings generated form work in Phase 1 with Social Care, Complaints and a number of other small Council units.
- £195k p.a. recurrent savings delivered through savings generated from work in Phase 2 including through work with the Transport, and Education departments.

However, it was noted that at this stage the cashable benefits are ‘assumed’ rather than realised. They will be realised practically through departmental-

level cost savings which have yet to be delivered, either via reduced employment (with some potential sensitivities which will need to be managed sensitively), or other cost savings such as reduced travel time and reduced costs of accommodation to store and archive documents.

The case study also provide evidence of benefits for services users starting to flow through. For example, it was noted that following the implementation of the EDM system and paperless approach with the Complaints department staff are able to deal with complains more quickly, and that the process improves the traceability and audit trail of activity, with all information stored electronically rather than in physical form. Further examples of these types of benefits are expected to emerge as the project is rolled-out across the Council fully and as the procedures put in place become embedded fully in day-to-day activity.

As noted above, a headline options appraisal was undertaken to demonstrate the benefits of the Invest to Save project. Project partners, who were separate from those who originally drafted and made the case for funding at the outset provided a corroborating views; that without the Invest to Save funding, the implementation of the project would have been incremental and piecemeal, with overall lower levels of benefits flowing through. The role of Invest to Save was therefore to accelerate, and in so doing scale-up the activity and its subsequent benefits.

What went well …

The case study research suggests that the projects is performing well, and has started to deliver benefits, both financial and non-financial. Key issues contributing to this positive story include:

- Activity in each department has been based on the development on a benefits realisations plan to identify what will be delivered, when and how. There was also a focus on delivering some quick wins for the project in Phase 1 and Phase 2 (for example through the implementation of paperless in Complaints where there can be a high volume of paper transactions) prior to the wider roll-out, helping to

demonstrate the benefits to staff potentially sceptical of the ‘paperless’ concept

- The capacity provided by the Invest to Save funding, with a dedicated team put in place, has meant that there is the ability to scrutinise hard the potential benefits to be generated, and to focus on the technical delivery
- Engaging delivery and service-level staff in the project through the Paperless Powys Board, and for each department covered, the identification of a responsible officer for Paperless Powys. This was important, to ensure that a ’real-world’ perspective was taken on the development of work-flows through the EDM and how this would impact on staff on their day-to-day roles.

… and what could have gone better

Two points were noted in terms of what could have gone to better, although it was noted that as implementation continues, and as the project now increasingly moves to a horizontal cross-departmental (rather than a vertical internal department) focus other challenges may emerge:

- The cost of the project has been higher than first envisaged. The Invest to Save funding did not increase, meaning that the cost to the Council has been greater than planned, with the original Return on Investment analysis providing more of a ‘road-map’ for delivery than a detailed implementation plan. Essentially, additional complications, with associated costs, emerged in the practical implementation of the project.
- The success of the project to date has conferred its own challenges, with the corporate scanning facility put in place now requiring further development and space with additional machines and staff required. In hindsight, it is possible that the scale of the facility could have been future-proofed more effectively to enable the development of further capacity as the project was rolled out across the council.

Key lessons

The consultation with project partners and documents provided to the evaluators demonstrate that a wide range of lessons have been learned through Paperless Powys in terms of 'how to do' technical projects of this type. This is valuable learning for the Council with the potential to be shared more widely across the IT and information management community in Wales. However, the key lessons from the project, with cross-thematic relevance to other public authorities seeking to deliver savings and service improvements, are as follows:

- Securing senior commitment to, and ownership of, the project was an important factor in the successful development and delivery to date. For Paperless Powys this ownership was in place from the outset, with the senior staff member responsible for its development also responsible for the precursor project in the Revenue and Benefits department. However, retaining this commitment over the long term was seen as key to ensuring that the project retained momentum and profile.
- The development of a paperless process has delivered both direct and indirect effects, with the indirect effects including improvements to the quality and robustness of information management and information governance – the document trail is now more robust. Whilst this does not deliver a cash-releasing, or productivity benefits directly, it has added to the resilience of the Council's document management system. These wider, unintended benefits, matter.
- Staff engagement matters. The wide engagement process of staff through Paperless Powys has been important in the success that it has delivered to date, – the approach taken has been to focus on how the project can 'work with' staff, rather than be seen as a classic IT intervention which is largely 'done to' staff.

The NHS Wales Voluntary Early Release Scheme

- Workforce transformation has been highlighted by the NHS as a critical enabler of the service improvement and efficiency gains targeted in in its five-year vision, which incorporates a commitment to a five-percent efficiency gain per annum. The scale and speed of the required workforce transformation cannot be achieved by traditional provisions, such as redundancy, alone.
- Voluntary Early Release (VER) was developed as an alternative option to enable the release of personnel for the purposes of restructuring non-clinical and clinical teams.
- A total of £30m has been invested in the VER scheme, of which £17m was contributed by Invest to Save. Over 800 staff have been released through VER which is estimated to have generated recurrent savings of approximately £33m (57% attributable to Invest to Save). This release of staff has enabled a reported, albeit not evidenced formally, programme of service transformation. Staff releases have been mainly non clinical posts
- Invest to Save funding was important to overcoming the challenge of implementing the VER that faces NHS organisations, namely: an inability to release resources to fund a VER prior to the saving resulting from that VER being realised. The structure of Invest to Save allowed NHS organisations to offset the up-front cost of VERs until savings were made.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Budgetary pressures for NHS organisations across Wales leading to targeted efficiency gains of 5% p.a. • Transformation of clinical and non-clinical teams requires substantial reconfiguration of the workforce. This level of transformation is inhibited by restrictions placed on workforce streamlining. • Alternative options for service HR teams to redesign local workforce structure required	• Secure savings on workforce budgets through voluntary release of staff, assisting delivery against NHS efficiency targets • Assist service transformation in non-clinical and clinical teams	• Total investment of £30m, including £17m from Invest to Save • Delivery overseen by NHS Wales, including provision of guidance, and administered practically by the HR teams of individual NHS organisations • Specific VER agreements negotiated by HR teams of individual NHS organisations, governed by eligibility, application, and approval provisions outlined in the formal guidance	• Total of 829 staff released through VER • Annual recurrent savings of approximately £33m (of which 57% is attributable to I2S funding given level of funding contribution) • Facilitation of workforce transformation	• Overall efficiency improvements for NHS Wales and delivery against efficiency targets • Long-term service benefits based on service transformation and improvement, (although these are not captured within the project's performance management system)

Project background

Workforce transformation has been highlighted by the NHS as a critical enabler of the service improvement and efficiency gains targeted in in its five-

year vision (which incorporates a commitment to a five-percent efficiency gain per annum). The scale and speed of the required workforce transformation cannot be achieved by traditional provisions, such as redundancy, alone. Notably, in the NHS, redundancy is subject to restrictions placed on workforce streamlining and budget constraints.

In this context, Voluntary Early Release (VER) has been developed as an alternative option to enable the release of personnel for the purposes of restructuring clinical and non-clinical teams. As set out in the core VER business case document[3]:

> *NHS Wales is entering a challenging period of profound and sustained change. "Together for Health" describes the nature of these changes and the accompanying Workforce & OD framework highlight the challenges facing the workforce and its leaders in moving to new patterns of service delivery.*
>
> *It is clear that such moves will require substantial and rapid changes to take place to the number, location, working patterns and skill mix of staff. This scheme has been designed as an enabling tool to support the flexibility of NHS Wales organisations in addressing the demands of rapid change and service re-design.*
>
> *VER is a scheme where it is of mutual benefit, to both an employee and their organisation, for an individual to voluntarily choose to leave their employment, with the agreement of that organisation, in return for a severance payment.*

The VER scheme is governed by NHS Wales and administered by the HR functions of each NHS organisation (access to the scheme is at the discretion of each organisation). To date, the following organisations have utilised the VER scheme:

- Abertawe Bro Morgannwg University Health Board

[3] NHS Wales. 2012. 'Model Voluntary Early Release Scheme'.

- Aneurin Bevan University Health Board
- Betsi Cadwaladr University Health Board
- Cardiff and Vale University Health Board
- Cwm Taf University Health Board
- Hywel Dda Health Board
- Powys Teaching Health Board
- Welsh Ambulance Service NHS Trust
- Velindre NHS Trust
- Public Health Wales NHS Trust

Novel in the NHS, the VER scheme was designed and developed by professionals within NHS Wales, and managed by the DHSS Finance Directorate, guided by consultation of key HR and workforce representatives.

Invest to Save funding was required to address a paradox at the heart of the VER scheme: NHS organisations are unable to release resources to fund a VER prior to the saving resulting from that VER being realised. Facing this challenge, the structure of Invest to Save funding – with an initial payment made pre-activity – enabled NHS organisations to offset the up-front cost of a VER until the savings are realised practically.

Project implementation

Since 2010/11 when the project launched, a total of £30m has been invested in the VER scheme, of which £17m was contributed by Invest to Save. A total of 829 staff have been released through VER which is estimated to have generated recurrent savings of approximately £33m (of which 57% is attributable to Invest to Save funding). Details across each of the health agencies participating in the project are provided in Table 1 below.

Table 2: VER Scheme Outcomes

Organisation	Invest to Save Funding (£000)	Internal Funding (£000)	Total Funding (£000)	Total Staff Released (WTE)	Recurrent Savings (£000)
Abertawe Bro Morgannwg University Health Board	1,183	1,760	2,943	66	2,340
Aneurin Bevan University Health Board	2,729	0	2,729	82	3,890
Betsi Cadwaladr University Health Board	3,460	5,686	9,146	266	11,105
Cardiff and Vale University Health Board	3,360	1,549	4,909	144	4,566
Cwm Taf University Health Board	3,355	599	3,954	111	4,417
Hywel Dda Health Board	400	846	1,246	27	990
Powys Teaching Health Board	1,132	0	1,132	44	1.294
Welsh Ambulance Service NHS Trust	1,132	392	1,524	34	2,189
Velindre NHS Trust	201	688	889	24	889
Public Health Wales NHS Trust	0	1,067	1,067	30	1,478
Total	**16,952**	**12,587**	**29,539**	**829**	**33,158**

Source: NHS Wales, 2013

The VER procedures were devised and developed by NHS Wales, in consultation with stakeholders. The scheme has subsequently been opened to all NHS organisations on a voluntary basis, subject to the workforce planning programmes of each organisation and component service. Access to the VER scheme is dependent on the HR policies of individual organisations.

NHS Wales have issued detailed guidance to VER candidates and respective HR teams on the eligibility criteria, application process, and approval process for each VER. In summary, a business case must be made for each VER,

which is subject to the consideration of the Directors of Workforce & OD and Finance, the organisation's Remuneration and Terms and Conditions Committee, and Audit Committee, prior to formal approval for ex-gratia payments from Welsh Government.

Project achievements and benefits

As noted above, 829 staff have been released through VER, estimated to have generated recurrent cash-releasing savings of approximately £33m across the NHS. Paired with this saving, the release of staff has enabled a faster rate of workforce transformation in clinical and non-clinical teams.

The information provided to the evaluators indicated that to date, the majority of staff released through VER have been non-clinical, largely representing efforts to thin-out duplicated functions that resulted from the reform and merger of NHS organisations in 2009 across Wales. Overall, during the period 2010 to 2012, NHS staff numbers been reduced by c.50% of the number released through VERs, primarily due to increases in clinical-staff: in total, NHS staff numbers were reduced by 475, incorporating a reduction of 493 administrative and estates staff, 253 ancillary staff, and 88 nurses, offset by increases in medical and scientific staff. There is no reported evidence that staff reductions have had an impact on service quality. Arguably, had these savings not been achieved on non-clinical staff, the NHS in Wales would have been put under even greater financial pressure.

Although the case for Invest to Save in enabling the VER scheme is clear at a headline level, there is less clarity on whether more VERs could have been self-funded by NHS organisation, with around 43% of the VER investment funded by internal budgets. NHS organisations have indicated their capacity to utilise funding of £20m in 2013/14 in order to overcome the challenge meeting the in-year costs of the initial release and continue the VER scheme at scale. However, over the course of the Invest to Save funding period, in the absence of Invest to Save funds, approaching 60% of the VER investment would not have been delivered: rendering the project less effective in terms of the scale and speed of transformational change enabled. Further, the financial positions of the NHS organisations during the project period (2010/11 to

2012/13) were challenging, with internal competition for any available funds (e.g. increases in service provision.

What went well …

To date, the case study evidence is that the national VER scheme has been delivered on time and to budget, with objectives achieved, and repayment as planned. The project has benefitted from strong buy-in amongst stakeholder NHS organisations and the workforce itself: as a voluntary, discretionary scheme, uptake was not guaranteed but has been strong against initial targets. Key elements of the project's success include:

- its design and communication to stakeholders, relatively simple in concept, and furnished with clear guidance, the project was readily absorbed and 'owned' by each NHS organisation and featured sufficient flexibility to the context of each post being considered.
- effective management of risk and uncertainty: expenditure was channelled directly to cash-releasing activities, without the need for extensive set-up costs committed 'at risk', before uptake was known.
- a phased approach: allowing a gradual ramping-up of activity with time to reflect on, and finesse, processes within each organisation as the project has developed.

… and what could have gone better

Three key points emerge in terms of what could have gone better:

- Although at the level of NHS Wales, the project reported no setbacks, at the level of individual NHS organisations, there was an initial challenge to integrate what was a novel HR process into existing practices – however, this issue was overcome, facilitated by guidance issued by the project team.
- A learning process is apparent with regard to the eligibility of applications and the strength of the business case for specific VERs. Again, the VER scheme integrated measures to address these issues in guidance, and via the formal approval process, but the business

cases have got stronger over time, early in the lifetime of VER there is the risk that optimal value for money was not secured in all cases

- Although the monitoring of direct cash-releasing savings is sound – albeit straightforward based on foregone salary costs – and the Welsh Government collects information on benefits related to headcount reduction, the wider monitoring in place has been limited, and improvements to the reporting of benefit beyond the simple cash-saving would enable a 'richer' narrative to be built around the VER scheme: it is asserted that the VER scheme enables transformational change within organisation, but details, and evidence on why and how such change is realised is not recorded formally, and to date somewhat limited. To an extent, this may reflect a difficulty in linking a specific VER to a specific transformational change in a context of a broad-reaching reform programme, and as other budgetary pressures and operational changes in the NHS are delivered alongside the scheme; further, the release of staff has been associated with release of excess non-clinical staffing, and the release of modest staffing numbers in a number of geographical and service areas.

Key lessons

The key lessons from the VER project are as follows:

- The structure of Invest to Save directly addressed the central issue for beneficiary organisations: most organisations do not have the resources to meet the in-year costs of the initial release, accessing Invest to Save was vital to enable the VER scheme, and thereby engineer transformational change. The project utilised intelligently the financial management opportunity of Invest to Save.
- VER benefitted from simplicity in design, effective communication, and minimisation of financial risk. Dependent on the uptake of VERs by NHS bodies, the scheme's ability to be flexible to context enabled 'ownership' by each organisation, despite its national profile and remit.
- Given the scale of the project, operating across organisations and involving significant sums of public monies, the project benefits from a

phase approach to delivery, allowing a gradual ramping-up of activity with time to reflect on, and finesse, processes within each organisation as the project has developed.

- The project did not articulate specific 'transformation' outcomes over and above direct savings. For the full benefits of the project to be evidenced formally such outcome measures ideally would have been put in place at the outset of the project. Similar projects elsewhere should ensure that alongside the financial savings appropriate wider quantitative and qualitative outcomes are identified to track the effects of activity in the round.

NHS All-Wales Collaborative Procurement

- The project sought to align pricing and enable group procurement in the NHS procurement system through the introduction of a centralised coordinating team supporting procurement teams in each Health Board.
- The project was delivered successfully, achieving £1.26m of savings from a £300,000 investment. The project team has since received funding for a further five years and is projected to delivery £3m of savings per annum. Additional benefits include efficiencies and performance improvements permeating through the wider procurement system.
- The project benefitted from effective planning, minimising uncertainties and risk through simplicity in design, stakeholder engagement, and research probes. As a result, directly attributable benefit has been achieved rapidly.
- Without Invest to Save, delivery capacity would have been diminished significantly. Operating at this smaller scale, the savings and benefits would be have been less substantial and slower to materialise, and the project would have been less able to secure the endorsement that has led to the commitment to self-fund: Invest to Save both catalysed activity in the short-term, and enhanced its sustainability over the longer-term.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Traditionally, procurement has been coordinated at the local level leading to variation in costs, and fragmentation militates against purchasing economies of scale • Information failures where procurement teams not aware of the 'best price' that could be achieved for specific items. • Missed opportunities to minimise unit-costs for specific items through the formation of service-wide purchasing groups	• Establish a service-wide procurement team, coordinating collective purchasing and indexing of service-wide 'best price' to deliver efficiencies and costsavings • Centralise procurement for selected, 'pilot', procurement categories	• Invest to Save funded procurement team drawn from procurement teams across NHS Wales • Complementary resource, time, committed by trust and board procurement teams • Stage 1: Price Alignment to identify commodity areas for shared procurement • Stage 2: Contracting - action plan to implement new contracts and shared purchasing	• Cost-savings on procurement categories: pilot resulted in £1.26m cash-releasing savings (Feb 2010 to Jan 2011); the project has subsequently achieved £3m of cash-releasing savings p.a. through this mechanism • Wider benefits include enhanced efficiency and effectiveness in the service wide procurement system	• Service efficiencies and reduction in overall costs of NHS purchasing • Invest to Save funding resulted in an internal commitment to self-fund a subsequent 2 years, and then a further 5 years • Project served as a precursor, 'proof of concept' for the broader NHS Wales Shared Services Partnership delivering wide range of efficiency and service improvement projects

Project background

The NHS All-Wales Collaborative Procurement project was developed and led by a dedicated project team drawn from the former Welsh Health Supplies, Procurement, and Accounts Payable teams that were in place across NHS

Wales. This team would subsequently form part of the Procurement Services activity of the NHS Wales Shared Services Partnership.

The project was motivated by the ‘shared services’ agenda, itself driven by the NHS-wide efficiency programme. In this context, research had highlighted the potential savings and efficiencies that could be achieved through price alignment and group purchasing. In part, the case for the project was made by evidence of wide variation in the prices being paid by each Health Board for the same, or similar, items, often from the same supplier: many Health Boards were not getting the ‘best price’.

Initially structured as a one-year pilot, the project sought to determine and demonstrate the cost saving opportunities that could be achieved by an ‘all-Wales’ approach to NHS procurement: aligning prices, indexing ‘best price’ benchmarks, and realising economies of scale through group purchasing. The project engaged and supported the activities of Procurement and Accounts Payable teams in place across NHS Wales, initially concentrating on specific item purchases. Post-pilot, the Procurement Services activity of the NHS Wales Shared Services Partnership have developed to provide a complete Procurement to Payments system for all of the Health Boards and Trusts across Wales.

The project represents a novel approach to procurement for the NHS in Wales, informed by the best practice demonstrated by services in the UK. Project design was undertaken by experienced procurement directors, supported by research and planning processes. The project was delivered by a specially recruited, experienced team, operating with the endorsement of the NHS procurement system. Invest to Save finance was sought in order to enable the establishment of a project team concentrated on delivery of the collaborative procurement ambitions. In the absence of Invest to Save project partners reported that this delivery capacity would have been significantly diminished. Invest to Save was regarded as an appropriate funding mechanism for a pilot project of this nature.

Project implementation

The project was initiated in 2009 and led by the NHS All-Wales Collaborative Procurement project team, which was recruited from procurement staff from across NHS Wales in the initial stages of the project. The project had two stages of activity:

Stage 1 – 'Price Alignment' – incorporating two activities informed by analysis of an Oracle Financial Management System collating procurement activity from across the service:

- Identification of 'priority commodity areas' presenting opportunities for cost-savings through group purchasing
- Alignment of all prices across NHS Wales to the 'best price', negotiating re-pricing with suppliers as contracts allowed.

Stage 2 – 'Contracting' – letting of a selected group of service-wide product procurement contracts, informed by the analysis of the Oracle Financial Management System (ensuring good governance and compliance with EU public procurement rules).

The work supported the procurement activity being carried out by Health Boards. In addition to the 'alignment' and 'contracting' activity, significant effort focussed on the implementation of a performance management and improvement framework for service-wide procurement, facilitated by the implementation of KPIs (spanning practice, compliance, and governance).

The project's dependence on the 'buy-in' of partner procurement teams placed required an extensive stakeholder engagement effort, supported by a monthly cycle of performance reporting by the project team.

In 2010/11, the year funded by I2S, a total of £300,000 was used to initiate the project and fund the project team (staff costs). This figure was composed entirely of Invest to Save monies (with some in-kind investment from procurement teams and associated stakeholders). Subsequently, £250,000 of internal budget has been committed to the project, per annum, for a further five years.

Project achievements and benefits

Since its establishment, the project team has analysed over £40m of procurement spend, spanning over 2,500 procured product lines. In headline terms, the project achieved £1.26m of cash-releasing savings in the period funded by Invest to Save monies (February 2010 to January 2011). These savings were principally derived from the price reductions achieved as a result of the 'alignment' and 'contracting' activities.

The project has subsequently achieved a reported £3m of cash-releasing savings per annum through this mechanism, with this value being realised after the formal Invest to Save funding period, but benefiting directly from the processes and systems put in place by the pilot.

Over and above the cash-releasing benefits generated, the case study research indicates that the wider benefits of the project include:

- **Enhanced efficiency and effectiveness in the service wide procurement system**, achieved through introduction of a Key Performance Indicator (KPI) framework governing quality and reducing the unit cost of procurement procedures through group procurement of common product lines
- **Improvement of the governance and compliance of service-wide procurement processes, eliminating faults and establishing an ongoing performance management framework**, this included the development of a consistent approach to data management within the Oracle system, improving data integrity and compliance with the All-Wales Common Operating Model.

The NHS Wales Shared Services Partnership project team reported that it has received positive feedback from stakeholders, including its client procurement teams. Ultimately, a key achievement of the Invest to Save-funded element of the project was to demonstrate the effectiveness of the concept, securing the confidence of Finance Directors and resulting in commitments to fund the project through internal budgets in future years.

In the absence of Invest to Save monies, project partners reported that a smaller-scale project would have resulted, driven by the wider 'shared services' agenda. Operating at this smaller scale, project partners reported that the savings and associated benefits would have been less substantial, and slower to materialise. Critically, this smaller scale project may have presented a less compelling case to Finance Directors when considering investment in the project's continuation. As such the Invest to Save support both catalysed the project activity in the short-term, and enhanced its sustainability over the longer-term. The Invest to Save element of the project operated effectively as a test, or 'proof of concept' for the broader NHS Wales Shared Services Partnership which has subsequently been developed and rolled-out nationally to improve the economy and efficiency of support services, including procurement.

What went well …

The Invest to Save funded element of the project was completed on time and on budget, with objectives achieved, and repayment as planned. Fundamentally, the project's success is based on the following key factors:

- Sound planning, underpinned by research during the design process and extensive, early stakeholder engagement
- Recruitment of a capable and experienced project team drawn from, and connected with, the existing procurement system
- An ability to deliver tangible results for partners in the Health Boards rapidly, as a result, buy-in amongst partners was significant.

Ultimately, the project minimised uncertainty and risk through simplicity in concept, paired with research and stakeholder engagement during the planning phase. The early success of the project has facilitated its wider roll-out, extending its reach through the procurement system and, by extension, its capacity to yield further savings in the future.

… and what could have gone better

The project has encountered no unforeseen challenges other than initial difficulty recruiting a project team to a short-term contract in its first year (i.e.

experienced personnel were not inclined to leave a post in preference for a role that could only be guaranteed for the single year). This challenge has been overcome by seeking, and securing, internal funding commitments for a five year period, paired with greater support from HR teams.

Key lessons

The key lessons from the project that emerged from the case study research can be summarised as follows:

- The project implemented a gradual introduction, led by a pilot phase in which the concept was demonstrated. The early results achieved by the pilot have been instrumental in securing stakeholder buy-in to wider roll-out and scale-up.
- Early stakeholder engagement emerges as a critical success factor, securing the engagement and endorsement of its 'client' stakeholders in the Health Boards enabled the project to maximise its impact
- In concept and design, the project has sought to minimise uncertainty, and therefore risk, through research and stakeholder engagement during the planning phase.
- The project presents a very direct relationship between activity and savings, the logic chain is relatively simple and readily communicated/understood, and the project has in tangible, directly attributable results. Again, this aided the project's delivery/reception.
- The project has rapidly proven its ability to self-fund: to date, the project has saved more than it has cost to run and significant savings were posted in the first year of operation. As a result the project has secured legacy rapidly.
- The project was initially challenged by short-termism in the funding commitment: a one year commitment made it difficult to recruit the team and invest in long-run savings. A subsequent extension of the funding commitment has enabled the project to plan and implement improvements operating on a longer timescale.

The Wyn Campaign: Regaining & Retaining Independence

- The Wyn Campaign seeks to deliver efficiencies and service improvements in care for older people in the Cardiff and Vale of Glamorgan area, through support for the expansion of Community Response Teams (CRTs). The project was awarded £3.2m from Invest to Save, with the funding used to the end of 2013, after which the campaign will continue to deliver
- The project is delivered by Cardiff & Vale University Health Board, in partnership with Cardiff and Vale of Glamorgan Councils. It delivers efficiencies through the reduced need to provide surge capacity at hospitals, by avoiding the need for hospital admissions, and reducing length of stay if admission, through providing a greater variety and quality of services for older people in the community.
- The initial phases of the project preceded Invest to Save investment. However, without the Invest to Save investment, the campaign would not have seen the step-change it has enabled, as the development of the CRTs would have progressed at a smaller scale.
- Whilst ongoing, the project has delivered reported improvements to patient outcomes. The project is also expected in time to generate significant savings by avoiding the cost of otherwise required additional capacity in the acute sector

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Early on in scoping the project, was realised that health services in the community for older people were insufficient • As a result of this insufficient provision, unnecessary numbers of patients were being admitted to hospital, and remaining there longer than they should, with this adding strain to hospital capacity, and deemed unsustainable	• The Wyn Campaign was therefore designed with the intention of enhancing community care for older people, to prevent unnecessary hospital admissions and reduce length of stay, promoting independence amongst older people • An important enabling factor is the aim of progression towards integration between health and social care	• Invest to Save funding for Phase 1c was £3.2m, with £1.9m in 2012/13 and £1.3m in 2013/14 – although Cardiff did not draw down their £0.8m in the first year • Activities of the campaign so far include the recruitment of around 50 staff, and expansion of CRT activity, including the development of an additional CRT so as to cover the whole health board geography	• With the project ongoing, outputs and outcomes are not yet fully evident • Nevertheless, there is evidence of some improved patients outcomes, whilst CRT coverage being across the whole area means that, for the first time, CRT service provision is available across the whole health board geography	• Again, as the project is still early on in operation, impacts are not expected to be fully evident for another three years for patients • That said, there is evidence that the campaign has resulted in improved partnership working, important to achieving the aims of this partnership project

Project background

The Wyn[4] Campaign Invest to Save project, led by the Cardiff and Vale University Health Board, in partnership with Cardiff Council and Vale of Glamorgan Council, emerged in response to a number of challenges:

- **Co-ordination failures** – the way that services were being run for older people in the area prior to the project was regarded as insufficiently joined-up, with partners not working close enough together to focus on sustainable change in the services. Whilst an integrated Health and Social Care Board existed, between the Councils, the Health Board and the third sector, older people was not an area that the board had previously sought to address. The fragmented approach was therefore sub-optimal, and made for a confusing system of support for patients.
- **Budgetary pressures** – the current service was deemed inefficient, and overly reliant on responding to crises, such as bringing in surge capacity over winter months, which cost the Health Board around £4m in the winter of 2011/12 alone. Over-dependence on hospital care, due to insufficient community care, added to the strain, whilst local authorities face increasing demand for care home and domiciliary care support, at the same time as facing significant financial constraints.
- **Strategic policy intents** – a number of Welsh Government policies have called for improved services for older people in recent years, with this a priority area for change, with the Welsh Audit Office suggesting that the service could be improved in the area.

The status quo was not considered an option, as it had failed to bring about the changes needed to achieve service efficiencies and improvements. The other alternative to improve services would have been to increase bed capacity in hospitals and care homes, but this would have been unaffordable and therefore an unsustainable approach, and in case would have put more capacity in and not improve the service itself.

[4] So called as this is a familiar male or female Welsh name, in order to emphasise the person-centred nature of the campaign

To address these issues, driving efficiencies and improving services for older people, partners sought to implement the “Team Around Wyn” model, through support for the expansion of the local Community Response Teams (CRTs). The model promotes independent living and maximises the well-being of resident of the area, built around published evidence on what health-related services older people need and want, and a series of reports that led the Health Board to see the model as the means to provide sustainable health and social care. The Wyn Campaign started in 2011, as a workstream of the Cardiff and Vale University Health Board’s Integrated Health and Social Care Programme, with the Health Board managing the funds for the project, on behalf of its partners, and with a Steering Group in place, with members from organisations involved to oversee the project.

However, given budgetary challenges (which the project itself responded to), there was a requirement for pump-prime funding to extend and develop the campaign following an initial phase, self-funded by the Health Board. With limited funding options available to the Health Board owing to national regulations, Invest to Save was identified as an appropriate funding stream.

Project implementation

The campaign, including non-Invest to Save elements, has involved the following phases of activity:

- **Phase 1a**, costing £325k and solely funded by the Health Board, and which sought to develop the area’s CRTs. The CRTs provide community care in the form of physiotherapy, occupational therapy, speech and language therapy, dietetics, nursing, multi-professional technical support (therapies), a Home Care Manager, Care Staff Support, and Community Social Workers. Phase 1a ran from September 2011 – to be clear, this Phase of work pre-dated the Invest to Save funding.
- **Phase 1b**, costing £498k, funded solely by the Health Board, and running early in the 2012/13 financial year. Phase 1b was intended to further develop the CRTs, so that they were all operating from the same baseline, expanding and enhancing them to reflect the ambitions

of the project to avoid admission to hospital and facilitate early discharge – to be clear, this Phase of work pre-dated the Invest to Save funding.

- **Phase 1c,** with this intended to cost £4.4m, with £3.2m of this being Invest to Save funding (i.e. the Invest to Save funding kicked-in at this point), running from November 2012 onwards, and ongoing to date. Of the £3.2m, £1.9m was allocated to the Health Board, £0.8m allocated to Cardiff Council, and £0.5m allocated to Vale of Glamorgan Council.

This funding is being used to further enhance the capacity of the CRTs, and take them to the "next level", providing meaningful impacts on secondary care flow and capacity, doing so through increased numbers of frontline staff, developing the staff at the same time and putting in place an IT system for performance management. It was noted that Cardiff Council decided not to draw down their allocation, although with changes at a senior level, and with the project not meeting capacity targets in the first year, Cardiff Council have become more involved in recent months. Otherwise, spending and delivery has gone as expected to date. To recoup the funding awarded for Phase 1c in cost savings and efficiencies will require an estimated bed reduction total across the Health Board area of around 80 beds.

Initially it was intended that there would then be a Phase 2, to expand the campaign further, with the potential for this to be funded through a further Invest to Save bid, bringing the combined total cost of rolling out the model to around £10m. However, this has not been progressed – a detailed capacity and demand modelling exercise would be required to assess the impact of expanded the campaign further, something there is little appetite for locally, whilst the complexity and variables involved in delivery of the model make it difficult to measure benefits realisation, with three to five years needed in order to demonstrate cost savings. With this being the case, and with all partners under financial strain, no more funding will be sought.

That said, it was decided that the partners would develop a 10 year strategy for older people, currently under development, that will embed the current

phases of the Wyn Campaign, and extend the model as part of the partnership's integration work.

Project achievements and benefits

The project is on-going, and the changes expected to take up to five years to become fully embedded. As such, it is not possible at this stage to set out the full achievements and benefits achieved. In cashable savings terms, the Invest to Save project is *expected*, ultimately, to generate significant savings by avoiding the cost of otherwise required additional capacity in the acute sector, for example, avoiding unnecessary hospital admissions, and reducing length of stay. However, these savings are difficult to evidence, with methods of calculating cashable savings relating to Invest to Save funding not considered to be robust locally.

The evaluators understand that the CRTs will in practice be funded through core Health Board resource, with the savings 'assumed' rather than realised practically in financial management terms – the investment will be re-paid corporately through core resource, not directly as a result of the savings generated. That said, the cashable benefits are currently undergoing review, which may ultimately mean that robust figures can be provided. At the time of the case study these data were not available.

Quantitative achievements have been delivered. For example, since Phase 1c started in November 2012, c.50 people have been recruited to the CRTs, enabling expansion of CRT service provision across the Health Board's geography, although recruitment took longer than expected. Some of this was directly attributable to Invest to Save – Cardiff North and West did not support a CRT prior to the Invest to Save-funded phase of activity. Development of the CRTs is key to reducing the need for hospital admission and lengthy stays, and so this expansion helps to drive these efficiencies. However, it is important to note the difficulty in understanding, overall, what difference the Invest to Save funding has made, with some activity already having been undertaken, whilst some activity would have occurred whether or not the Invest to Save funding had been secured.

The Health Board has also developed a series of qualitative performance metrics, with its partners and following advice from the King's Fund and the Wales Audit Office, in order to provide as robust a set of performance data as possible on the service improvements from the campaign. By July 2013, achievements were noted on four of the 12 metrics in:

- shifting the balance from care home to home care provision, including at-home stroke support
- falls data appearing to point to improvements
- discharge to usual place of residence increasing by 3%
- activity at both Elderly Care assessment Unit, and Day Hospital decreasing.

Staff development was also an important element of the Invest to Save project. To this end workshops have been held, and resource put in place to develop the workforce, bringing the various partners together. It was reported, anecdotally, that the increase in partnership working has been a major benefit of the project, with the various partners now working together in a more united fashion. This is important, given that the previously fragmented approach was one of the factors that was undermining efforts to provide services to older people prior to Invest to Save. The cultural change this has fostered – with partnership increasingly seen as the norm, rather than the exception – is regarded as an important interim benefit of the project.

What went well …

At this early stage, it is not possible to be definitive on what has gone well, with the project a 'work in progress'. Nevertheless, it was noted that the Invest to Save funding was crucial to this phase of the campaign going ahead, on what is an innovative and complex project for the Health Board and partners.

One area in which the project has so far performed notably well is in fostering trust between the organisations involved, where previously there had been a degree of distrust and frustration at the lack of resource available. In partnership and process, the project has worked well so far.

… and what could have gone better

As above, it is too early to be definitive. However, at this stage a number of points were identified:

- There is some uncertainty between partners (although not the Welsh Government) over who would re-pay the funding to the Welsh Government, and how, given the absence of a clear process to capture and evidence the proposed savings.
- Commitment to the campaign amongst participating authorities has been varied, as illustrated though Cardiff Council not drawing-down the Invest to Save funding, in contrast to the Health Board and Vale of Glamorgan. As such, they were left behind somewhat, missing the intended capacity avoidance target in the first year.
- Having a pooled budget would be helpful, with budgets currently being managed separately, although some progress is being made here.

Key lessons

Whilst ongoing, key lessons from this project to date include:

- The need to provide appropriate metrics for measuring performance. Although the choice of qualitative metrics has been evidenced, and data collected for them, there appears to have been greater difficulty in measuring the direct cashable savings achieved from the project than expected. Whilst qualitative improvements are important, the project nevertheless is intended to deliver direct cashable savings. Clarity from the outset on how savings for all projects will be calculated is key.
- The project involves reallocation of staff, with some destabilisation as a result, highlighting an important aspect of projects where the intention is to create new services using current staff. It is imperative that the consequences of this are considered before embarking on any project, as a reduction in capabilities in one area may offset the benefits gained from the project operating in another.
- In a project where there are a number of funded partners, each with an important role to play, it is imperative that all partners are fully

committed at the outset. Although the impact of Cardiff's non-take-up of Invest to Save in the first year was minimised, partner engagement and full commitment throughout such complex projects is key.

- With this project being the third phase of the campaign, with the Invest to Save project forming part of a much larger intervention, unpicking clearly what Invest to Save has, and has not, itself delivered is challenging. Again, clarity from the outset on attribution of benefits, as well as costs, is important.

Wales Enhanced Recovery After Surgery 1000 Lives Plus Collaborative Programme

- The Enhanced Recovery After Surgery Programme (ERAS) colorectal project sought to deliver efficiencies and service improvements in surgery in NHS Wales through the dissemination of ERAS principles. The project was awarded some of £569k of Invest to Save resource.
- The overall project approach was driven centrally by the Welsh Government, however it was delivered by individual Health Boards with local flexibility. As such, there is no 'single view' of the project; put simply it operated differently in different places.
- The case study research found divergent views from project partners on the success, or otherwise, of the project: both perspectives are reflected in the case study report. In headline terms one view was that the project was a success, delivering improvements for patients and driving efficiencies. The second was that the project was not a success, and hindered service improvement.
- Where the project was regarded as a success, in the absence of Invest to Save support it is likely that the project would have been delivered, but not to the same speed, nor providing the same impetus and momentum to rollout that the funding leveraged.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Opportunity to optimise patient care and patient outcomes through the implementation of Enhanced Recovery after Surgery (ERAS) principles in Health Boards across Wales in specific clinical areas • Delivery against policy objectives of the 1000 Lives Campaign to improve surgical care and reduce surgical complications	• Improve the quality of care provided to patients undergoing major surgery, and reducing harm • Improve service efficiency measures through reducing length of stay post-operative complications, cancelled operations and readmission rates leading to cash-releasing savings	• Invest to Save funding of c.£570k distributed across Health Boards • Health Board and national co-ordinators to support roll-out of ERAS principles in colorectal and orthopaedics • Local Health Board implementation of ERAS in selected Care Bundles (primary care, pre-operative assessment care, peri-operative care, post-operative care, and discharge and follow-up care) • Local and national dissemination and sharing of best practice	• Intended cash-releasing benefits through reduced bed-stays • Benefits practically realised as non cash-releasing benefits through more efficient use of bed spaces as a result of reduced stays e.g. seeing more people, more quickly • Intended improved patient experience and outcomes through ERAS process	• Improved healthcare outcomes for patients,. contributing to reduction in preventable deaths • Improved service efficiency of the NHS across Wales • Selected roll-out of ERAS principles to other clinical areas providing long-term benefits in patient outcomes

Project background

The All-Wales Enhanced Recovery After Surgery Programme (ERAS), operating in Health Boards across Wales, under the 1000 Lives Plus campaign, had the stated intention to improve quality outcomes and patient experience, and drive service efficiencies and improvements. Colorectal surgery[5] was chosen for an Invest to Save project within the programme, as it was regarded as an area of surgery where significant improvements could be made through the adoption of ERAS, with the programme also working, more widely, around the introduction of ERAS in total knee and total hip replacement surgery (TKR and THR surgery).

Sitting within the former National Leadership and Innovation Agency for Healthcare (NLIAH), 1000 Lives Plus has undertaken a number of other collaborative programmes – these other programmes did not receive funding from Invest to Save and are not the focus of this case study.

ERAS originated in Scandinavia, the USA and England. The core ERAS principles are to ensure that patients are in the best possible condition for surgery, the patient has the best possible surgical operation, and the patient has the best possible rehabilitation from surgery, enabling as rapid a recovery as possible. The principles were organised into five "Care Bundles" by 1000 Lives Plus, reflecting these ERAS principles, and to which the Invest to Save project operated, comprising specific activities to develop the practice and delivery of:

- primary care
- pre-operative assessment care
- peri-operative care i.e. the period covering surgery itself
- post-operative care
- discharge and follow-up care.

Implementing ERAS principles within these Care Bundles might include, for example, new ways of working in physiotherapy, dietetics, colorectal specialist

[5] Colorectal surgery is performed to repair damage to the colon, rectum, and anus, caused by diseases of the lower digestive tract, such as cancer, diverticulitis, and inflammatory bowel disease.

nursing, or anaesthesia. Fundamentally therefore the project sought to improve quality outcomes and patient experience, including the reduction of post-operative complications, cancelled operations and readmission through the implementation of ERAS principles in Health Boards across Wales in colorectal surgery.

The corollary is that the improved service will lead to reduced length of patient stay at hospital, which leads to cost savings. The original objective for the Invest to Save project was to deliver cash-releasing savings through reduced hospital stays of £1.15m per annum across Wales.

Unusually for an Invest to Save project, although initially scoped out and developed by individual Health Boards, the project was subsequently driven centrally as an all-Wales project. The rationale for this was to establish and help disseminate good practice nationally. The case study research identified different views on the appropriateness and efficacy of this strategic, 'top-down' approach as discussed in greater detail below. Although focused on clinical activities, the programme sought Invest to Save funding as there was insufficient resource in Trusts and Health Boards and across NHS Wales to pump-prime such activity from core resources.

Project implementation

In 2010, the All-Wales ERAS Programme was awarded £569,000 from the Invest to Save Fund, which, with a 25% match element, brings the total project cost to around £760,000. The funding was distributed to each Health Board, with each Health Board then implementing the project at a local level, based on local priorities, but with Invest to Save specifically supporting teams in colorectal surgery.

As the central team, 1000 Lives Plus put in place the aforementioned five bundles of care typology, and also offered guidance on ERAS, for colorectal surgery, as well as TKR and THR surgery, to local Health Boards. A number of events were held for those involved in the Invest to Save project, in order to establish best practice and understanding across the organisations involved. Guidance suggested that, within each Health Board, one clinical team should receive funding via the ERAS Programme to adopt, trial and disseminate the

ERAS practices. Other clinical teams in the area would then be expected to adopt such practices, through dissemination of best practice.

The initial efforts were carried out by the Aneurin Bevan Local Health Board, where progress had already been made prior to the start of the Invest to Save project. Importantly, not all Health Boards were at the same stage of adopting an ERAS approach at the outset.

At this point, the Invest to Save-funded element has been completed, although funding repayments are ongoing, with final payments expected in 2014/15.

Project achievements and benefits

As noted above the implementation model of the project was different in each Health Board. To present different experiences of the project, two Health Boards were contacted for the purposes of this case study. For the purposes of this case study, and given the divergence in view, we have reported separately below the feedback provided regarding the project by each Health Board (anonymously). Cash-releasing savings were not noted, and with by either respondent, with any bed space created filled by other patients.

Feedback from Health Board A

The benefits and achievements of the project, according to Health Board A, were significant. They included:

- in terms of benefits for patients, it was reported that the length of stay had been reduced, although it is difficult to quantify this in terms of reduced beds, as beds are filled again once emptied
- wider qualitative benefits have been delivered with the project providing an impetus to the implementation of ERAS principles, showing practitioners in the Health Board's geography that ERAS has the capability of significantly improving the quality outcome and patient experience for elective and non-elective surgery.

Indeed, there are now moves to roll ERAS out into other areas of elective surgery. The project has brought enthusiasm from doctors, nurses and therapists to continue the rollout. In this respect, the ERAS Programme has

the potential to lead to greater benefits than expected, by spreading to other surgical specialities. Importantly, a commitment has been given to continue with the ERAS principles, providing a legacy and sustainability for the project into the future.

In this case, the additionality of the project (and in turn the Invest to Save funding) was regarded as significant. Health Board A reported that in the absence of Invest to Save support, it is likely that the project would have been delivered, but not at the same speed, nor providing the same impetus to rollout that the funding leveraged.

Feedback from Health Board B

The feedback from Health Board B was less positive, where the ERAS Programme funded by Invest to Save was regarded as holding back, rather than accelerating or scaling-up, the implementation and dissemination of ERAS principles. The context appears to be an important factor here – ERAS was already established as a principle in this Health Board (in colorectal surgery), driven internally rather than through an external project such as the ERAS Programme, with the external projects leading to some reported resistance at a local level. Further, the ERAS coordinator appointed by the project did not manage to drive the ERAS process as hoped, left the job early, and was not replaced.

Notably, it was reported that the implementation of ERAS has increased after the ERAS Programme funded co-ordinator has moved on, in the orthopaedics area. This was explained as a result of staff benefiting from a greater level of flexibility without the formal co-ordinator role, the ability to progress with the principles at their own pace, and owing to the reduced data and monitoring requirements in place at the close of the funding period.

What went well …

As indicated above, the two Health Boards consulted for this case study had different perspectives on what went well with the project, and what did not. Both perspectives matter, and are equally valid given the local implementation of the ERAS Programme. Where the project was seen to have worked well the following points were drawn out:

- where ERAS was not already established, the ERAS Programme provided a fresh impetus and momentum to its piloting and delivery – in this sense, the novelty (albeit based on sound clinical evidence) of the project activity was important
- the Invest to Save funding gave the project focus, accountability, and through the reporting requirements, ensured that activity was taken forward and that monitoring procedures were put in place
- the shared learning across and within Health Boards, including workshops, site visits, e-mail exchanges, and best practice dissemination, helped to standardise and optimise approaches, and was regarded by Health Board A as an innovative method of shared learning across spatial and clinical boundaries (Health Board B was less positive regarding the shared learning).

… and what could have gone better

The perceived 'imposition' of the project was the core issue for Health Board B, underpinning wider views on the appropriateness of the project. However, the one area where there was consistent feedback across the two participating Health Boards concerned the use of quantitative metrics on bed stays as the key measures of success of the project. Both Health Boards reported that a quantitative assessment of the number of bed stays, or reduced length in bed stays, were not appropriate measure of project success, recommending a focus on quality and patient outcomes.

This point reflects the apparent tension between the stated benefits of the project used to secure Invest to Save funding – namely cash-releasing benefits through reduced bed stays – and the practical realisation of the projects where the focus of the ERAS model was on non cash-releasing benefits through better care (for the same resource), or the ability to treat more people (through reducing the length of stay by individual patients). Two other points are worth noting:

- the monitoring processes were seen as burdensome by Health Board B, with 43 measurements to be taken for ERAS (established by

NLIAH), with not all considered relevant, and which the Health Board itself consolidated into 12

- with a central team coordinating efforts nationally, the local Health Boards have had to re-pay a higher level of resource than they received, with cash-releasing savings not yet delivered (and not expected owing to the points raised above) this means that the project has cost, rather than saved (in pure cash-flow terms) Health Boards money.

Key lessons

The lessons from the project are not straightforward, however, three messages do emerge.

- First, where projects are concerned with changing behaviours, ensuring buy-in and local ownership is key, especially when the intervention is looking to alter established practices, and arguably particularly in specialised professional settings such as healthcare. The experience of Health Board B suggests that it was principally the perceived 'imposition' of a process from outside the organisation that led to the challenges in implementation. Of course, this does *not* mean that centrally-led projects cannot work or should not be progressed in the future; but it does mean that where they are care should be taken to ensure that existing local practices are understood and built on as far as practical within a national-level framework. Put simply, for behavioural changes to work, buy-in from those involved in practicing these techniques on the ground is key and should be a core focus of initial project planning and implementation.
- Second, where supporting activity in one specific area in an organisation, it is important to engage with, and seek, as far as practical, to secure the commitment of non-funded but related teams. There was feedback from Health Board A that the provision of 'extra' funding to one team in the Health Board caused some issues with non-funded teams; this illustrates the importance of ensuring buy-in not only by those directly involved, but also those directly "missing out" on the

funding. With a project that seeks ultimately to lead to new techniques to be disseminated from a pilot/test team to other parts of an organisation, it is vital to ensure that other groups do not feel ‘shut out’ of the process.

- Third, the need for absolute clarity on the aims and objectives of the project from the outset. The ERAS Programme appears to have suffered from a disconnect in the project’s logic model between the Invest to Save bid, which was predicated on length of stay reductions (delivering efficiency savings), and the 1000 Lives Plus collaborative partnership, for which the project was fundamentally about patient outcomes, not efficiencies. Projects can of course do both, but clarity on the core focus (one, the other, or both) is an important learning lesson from the ERAS Programme.

North Wales Regional Telecare Call Monitoring Service

- The North Wales Regional Telecare Call Monitoring Service involved the transformation of Telecare Call Monitoring services, bringing three separate services into one service, across two centres, in Conwy and Anglesey to drive cost efficiencies, enable the expansion of Welsh-speaking services, provide full disaster recovery for the service, ensuring the retention of Telecare Services Association accreditation, and contracts with customer organisations.
- The project was led by Conwy County Borough Council, in partnership with Anglesey, Gwynedd and Flintshire Councils, with the project receiving £300,000 of Invest to Save funding to help the service to become operational.
- Savings of over £1.46m over four years from 2011/12 to 2014/15 are expected through the project, alongside other significant productivity and service provision improvements.
- The project has provided the impetus to additional partnership working between the regional partners, with the project serving as an exemplar of the possible efficiency savings to be made from working regionally in North Wales.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• The current setup was seen as unsustainable, with the risk that the three services would be shut down and provision contracted out, potentially out of the local area • This would risk losing the region's Welsh-speaking service, and the local brand, potentially increasing cost at the same time • With I2S funding, the project to regionalise the services could be undertaken more quickly than without, increasing the chances for successful regionalisation	• The project sought to achieve a number of objectives. Primarily it sought to create a sustainable service for the region, accredited, and with region-wide Welsh-speaking provision • To this end, the project sought to: • Consolidate provision in two centres • Reduce unit cost • Enhance disaster recovery capabilities • Put in place a robust governance framework	• £300k of I2S, £50k WLGA, £30k CEOs, £20k officer time • I2S funding was received in order to bridge an expected funding gap in the first year of the service, due to redundancies and reconfiguration costs • Funding was also provided by the Welsh Local Government Association, for project management, and scoping of the project • I2S enabled the closing of one of the centres, in Flintshire, and the rollout of the new service across the other two centres	• Unit cost per call is expected to have fallen to 76p per call by 2014/15 • Overall savings to the end of 2014/15 should total over £1.46m • A Welsh-speaking service has not only been retained, but expanded too • Full disaster recovery is in place, whilst greater out-of-hours support is available • The service operates GPS and mobile technologies, allowing for wider use of the facilities on offer • All customer contracts have been retained	• The service is now on a more sustainable footing, due to reduced unit costs • Through increased provision, the service has had a positive impact on other areas of social care, more widely • The project has exemplified the merits of regional working for partners the North Wales region

Project background

The North Wales Telecare Call Monitoring Service Invest to Save project was led by Conwy County Borough Council, alongside its partner Councils in Anglesey, Gwynedd and Flintshire. The project aimed to establish a single

regional 24 hour-a-day assistive technology (telecare and telehealth) call monitoring service across North Wales, consolidating the existing services.

Work had already begun on regionalising telecare call monitoring before Invest to Save, with efforts commencing in 2006/7, taken forward by the North Wales Social Care Collaboration of the six North Wales local authorities. Telecare consultancy T-Cubed was commissioned by the partnership to undertake a study to recommend ways forward towards regionalised telecare provision, and from ultimately came a Section 101 Partnership Agreement in place between four Councils: Anglesey, Conwy, Flintshire and Gwynedd Councils. A number of recommended workstreams came from T-Cubed's study, with a regionalised call monitoring service ultimately the first aspect to be taken forward. A business case for the regionalisation of the call monitoring service was funded by the Welsh Local Government Association's (WLGA) and Welsh Government's Making the Connections Improvement Fund.

Prior to the Invest to Save project, there were three different services across the region, in Anglesey (Gofal Môn), Conwy (Conwy Careline) and Flintshire (Flintshire Carelink). However, this led to reported inefficiencies in service delivery. In light of the strains on Council budgets, it became apparent to partners that the high costs of operating three distinct services were unsustainable. Proposals were developed to improve sustainability by streamlining these services, with Flintshire's service to be shut down, and the Conwy and Anglesey services to merge into a single service across two locations serving the region as a whole.

Without Invest to Save, therefore, some movement towards a regional call monitoring service would likely have been achieved, with the early stages having already involved a significant commitment from regional partners. Without Invest to Save funding, the Councils would have needed to debate alternative sources, such as prudential funding, which could have taken a long time to arrange, with additional debate and planning required. The longer the process took, the greater the risk of the project not being across as substantial a geography, which could have reduced the efficiencies achieved, In this respect, Invest to Save was felt to be advantageous to ensuring the

project went ahead in a timely fashion. With the fund, Conwy Council agreed to host the project manager and manage the Invest to Save funding, with Anglesey, Flintshire and Gwynedd as partners, and Denbighshire as a customer, with no negotiations needed over transitional costs of setting up the service[6].

An underlying challenge to the setup of the project, was scoping out the services across the region, to ascertain what the call monitoring services cost, a result of each service not having clearly defined, and similarly-defined. For instance, Anglesey's service budget included CCTV installation, other budgets did not. Disaggregating the call monitoring services from their wider service budgets was therefore important, and an agreed "recharging" structure for the service was needed, so that the costs of running the service could be accurately disaggregated across the Councils. This took some time, but once agreed, allowed for Invest to Save to step in to put the new service in place.

Ultimately, the project sought to achieve increased sustainability, as a result of reduced costs, and improvements to the service offer, including the retention and expansion of its Welsh-speaking service across the region, and its ability to meet disaster recovery standards set by the accreditation body, the Telecare Services Association (TSA). Meeting these agendas, alongside the use of the most advanced software available, means that the project was seen as "future-proofing" the service, by presenting the region with a uniquely well-positioned service going forward, when compared to other parts of Wales.

Project implementation

Following the production of the business case for a regionalised service, internal debate over the charging structure, and the production, by Conwy Council, of a budget for the service, Invest to Save funding was sought in late 2010. Funding was received in January 2011, and was used to address a revenue shortfall in initiating the service, including costs involved in merging the services and redundancies from the Flintshire service.

[6] Even with Invest to Save funding, the project did not go ahead across the whole of the region, with Wrexham already with a contractual commitment to an external provider.

Repayment of the Invest to Save funding was undertaken over a two year period, with £150k repaid in both 2011/12 and 2012/13, with repayment starting two months after the start of the service. The service commenced on June 1st 2011, although this was two months behind schedule due to delays in the transfer of undertakings with service staff.

The £300k Invest to Save funding was only one part of the cost for the project. Other sources included: support from the WLGA in the form of a £50k grant for project management and project implementation, including legal, IT, HR and PR workstreams, and CEO and officer time, totalling around £50k.

Project achievements and benefits

The North Wales Telecare Call Monitoring Service project has delivered substantial cash-releasing benefits since the start of the service in 2011, and is forecast to do so as far forward as the end of 2014/15, with savings also expected to continue thereafter. By the end of 2014/15, over £1.46m is expected to have been saved, with this cash absorbed into the respective Councils' social care budgets. The target cost per call is 77p by 2014/15, with the service actually on course to achieve 76p per call. Overall, across the region, potential cost reductions total around 40% of what was the operating budget of the three original services, due to reductions in staffing costs, as well as consolidated space and infrastructure requirements.

That said, growth in the service, with 7% growth in connections and 38% growth in calls to date, means that the savings have not been entirely realised directly, as a result of staffing increases, from 19 to 21.42 full-time equivalent employees, with efficiencies instead realised through increased productivity. This growth is felt to be natural growth, but could also be due to an increased profile for the service, as a result of the regionalisation project. In addition, £10k of savings expected as a result of efficiencies from Conwy changing its software arrangements for out of hours call monitoring was not realised, as this transfer did not occur as envisaged.

Cashable benefits are one of a number of benefits of the project. Other benefits include:

- **The retention of a Welsh-speaking service**, something that may have been lost if the service had to be sourced externally, but was deemed to be important regionally. Prior to the start of the service, a Welsh-speaking service was not available across the whole of the region anyway, meaning that this actually represents an expansion of this provision.
- The service runs **24 hour a day, every day of the year, with enhanced out-of-hours support, and with full disaster recovery provision**, through the adoption of a "one centre, two site" approach. Full disaster recovery, with one centre ready to take over from the other if one centre has to be shut, is an important element in maintaining TSA accreditation, itself seen as key to ensuring commercial sustainability of the service, by helping to retain contracts with external providers. There are a number of organisations that contracted the services in place prior to regionalisation, with all of these contract retained following the regionalisation, amongst them contracts with social housing management companies, and Denbighshire Council. Prior to the adoption of the current system, the way the services were setup would not have facilitated as seamless a transfer of operations from one centre to a backup centre, undermining TSA accreditation.
- **More efficient use of capacity and infrastructure**. A condition of accreditation was that, at a minimum, two people had to be on hand to receive calls at all times. Whilst this meant having a minimum of six people ready to receive calls at all times under the old system, with three separately-run services, now a minimum of two can be used across the region, due to there being just one unified service. In terms of infrastructure, software packages in use need to be updated every three to four years. With three services, costs of this would be borne three times over, at a cost of £80-90k, whilst, under the consolidated service, this only has to be paid for once.
- **"Future-proofing"**, due to the advanced facilities that the service now operates. As well as the full disaster recovery, the only example in

Wales, the service is also the only one in Wales that has fibre-optic broadband and Voice over Internet Protocol capabilities, alongside GPS and mobile capabilities, which are useful for lone-working, and wider social care and telehealth applications. This has meant that, as well as retaining contracts, the service has been able to expand its provision, bringing in more income, and thus making the service more sustainable.

- **Closer partnership working**, with the local authorities understanding each other better, and with the partners more willing to work together, although this is partly down to the Regional Programme Board, not Invest to Save. That said, whilst the Board has given regionalisation a platform, it is the project that has been a benchmark for sharing service provision. Exemplifying this change, since this project there has been more cross-boundary work around social care more widely.
- **Process improvements**, including a quality assurance framework and robust governance arrangements to ensure an optimum standard of operation across the region.

What went well …

In a number of ways, on top of the benefits resultant from the project, the regionalisation of the call monitoring service was deemed to have gone well:

- With no provision in the then budgets for the three call monitoring services for updating systems, it would have been difficult to argue for funding for the service, whilst at the same time the services required significant investment. By having Invest to Save it was **possible to offset the costs involved in investing into the service**, helping to bridge the funding gap that would have existed for the first year of operation. As such, Invest to Save helped to keep the partnership together in pursuing a regional approach to call monitoring, by allowing the regionalisation to occur earlier than it might have otherwise. It was felt that there was a risk that this would not have been the case without the Invest to Save funding.

- Conwy and Anglesey's **commitment to work together**, to ensure they kept in-house services despite their then unsustainability, was felt to be a driving force behind the project, whilst Gwynedd and Flintshire's **drive for cost efficiencies** was felt to drive this aspect. Ultimately, there was strong will on the part of the partners to make the project work.

… and what could have gone better

There were a couple of aspects of the project that may have proceeded better:

- The **short timeframe between receiving the funding and paying it back** was not felt to be helpful. Whilst the partnership's initial application had called for a five year payback period, they had to pay the Invest to Save funding back in two years, with the first of two instalments just eight months after receiving the funding, and only two months after the start of the service. As such, whilst Invest to Save made the project administratively easier, and therefore quicker to become operational at a regional scale, as above, it was not so helpful in reducing the financial burden.
- **There was a degree of uncertainty over whether Denbighshire would be a partner or would commission the service**. As a result, at meetings between the Councils, commercially sensitive discussions were had in front of a Council that would instead ultimately become a customer, not a partner.
- **Getting approval from Flintshire on the "recharging" formula, and on the termination of their service, and consequent redundancies was challenging**, due to the politically difficult position that this put Flintshire in.

Key lessons

There are a number of key lessons that can be taken from this project, particularly, though not exclusively, with regards to partnership working:

- This project highlights the importance, in partnership working, of very clearly **setting out the parameters of working together**, right at the start of the partnership process, something that did indeed occur in this case. Reaching agreement on the “recharging” formula was imperative for the partnership arrangement to work. The time that it took to reach agreement though, highlights the potential for delay in setting up such arrangements. As such, it is imperative that such negotiations are timetabled for sufficiently in any similar partnership project.
- Furthermore, clearly setting out, early in the process, **who is going to be involved in the partnership arrangement** is also important. As highlighted in this case, uncertainty over Denbighshire Council’s role in the project caused some confusion during the development process, although did not ultimately create any issues to the operation of the project. Setting out who the partners are early on, and ensuring their commitment to the process, is key to enabling a strong partnership, with clear commitments from each partner.
- **Scoping out how the future could affect the project that is being undertaken** is important too. By adopting the latest technologies, and a two centre, one service approach, this service has been able to be flexible and adapt to new demands and markets, ensuring its commercial viability, Transformational change can help public services adapt not only to the conditions they face today, but also prepare for the potential challenges and opportunities they may face in the future.

2 Non-Invest to Save Fund projects

This section presents summaries of four projects that did not receive Invest to Save funding reviewed as part of the evaluation for ‘comparison purpose.

The four projects were in two groups:

- two ‘unsuccessful’ projects that applied for Invest to Save funding but did not receive support from the Fund
- two ‘external’ projects that had no engagement with the Fund but were seeking to deliver similar activities and secure similar cash-efficiencies and service improvement outcomes

The summary case studies are provided below, setting out the project journeys, from the background of the projects, through to the projects’ achievements, and lessons.

Modernisation of the South Wales Police Custody Estate (non-supported project)

- The Modernisation of the South Wales Police Custody Estate project sought to bring about a phased rationalisation of the custody estate, consolidating a number of existing facilities into four dedicated, resilient custody centres
- The project applied for Invest to Save support but was not successful. However, given its strategic priority, the project was taken forward, funded internally by the South Wales Police budget redirected from other priority programmes, meaning that cuts were made to other services
- The absence of Invest to Save support led to some financial re-engineering, but the scale and focus of the project was not changed substantially. However, the project was delivered later and over a longer time-scale than would have been the case with Invest to Save support.
- The project has delivered benefits as planned including a reduction of staff resource required to manage custody facilities, higher capacity custody, and reduced facilities management costs.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• A deteriorating and inefficient custody estate across the police force area, providing long-term strategic intent to consolidate the custody estate • Need to drive efficiencies and cost savings in the management and operation of the custody estate as part of wider organisational efficiency drive	• Consolidation of the custody estate providing efficiencies in the form of cost savings from ➢ reduced staffing ➢ reduced maintenance costs ➢ lower utility costs • Ensure that the police custody estate in South Wales is compliant with relevant standards and requirements	• An application to the Invest to Save Fund for the project was submitted, but was not successful • Project developed as planned involving consolidation of existing centres into four dedicated custody facilities • Project delivered and led solely by South Wales Police • Project managed by an extensive KPI-driven performance management framework	• Reduction of staff resource required to manage custody facilities • Higher capacity custody for the police leading • Reduced facilities management costs • Disposal of old custody facilities has 'unblocked' land assets for future neighbourhood regeneration projects across the area, and opened-up opportunities for new revenue generation • Recognition of best practice custody solution	• Efficiency in public sector delivery, reducing the cost of custody and mainstream services • Service capacity enhancement given improved and extended facilities

Project background

The ‘Modernisation of the South Wales Police Custody Estate’ project (the modernisation project) intended to bring about a phased rationalisation of the custody estate of the South Wales Police, consolidating the large number of existing custody facilities into four dedicated, resilient custody centres, known as Bridewells.

Led by the South Wales Police – that is, no other partner organisations were involved in the project’s development – the project was initially conceived owing to a long-standing agenda for the police force, based on two re-enforcing core drivers:

- first, a **deteriorating and inefficient custody estate** across the South Wales Police force area, with the need to consolidate and improve the facilities to enable effective service delivery
- second and related, the need to **drive efficiencies and cost savings** in the management and operation of the custody estate as part of wider organisational efficiency drive.

The objective of the project was to drive efficiencies through reduced staffing, reduced maintenance costs, and lower utility costs within the consolidated centres.

The modernisation project was also intended to ensure that the police custody estate in South Wales was compliant with relevant standards and requirements, improve accessibility to custody cells by siting them strategically across the police force area, and ensure that custody processes are more efficient and effective in operation terms.

An application was submitted by the South Wales Police for support towards the capital costs of the modernisation project, with an application made for £13 million of Invest to Save resource to support new-build custody facilities.

Project implementation

As noted above, the project was not successful in securing investment from the Invest to Save Fund. It was reported to the evaluation team by the project

lead at South Wales Police that they understood that Welsh Government policy was not to provide capital funding for the project as it was a matter for the Home Office.

Following the non-approval of the application for Invest to Save support, the project nevertheless remained a priority for the South Wales Police, and the rationale for intervention remained given the deteriorating estate and need to drive efficiencies. South Wales Police therefore re-directed resource from other priority programmes within the organisation to enable the delivery of the modernisation project.

As such, the project was funded internally in the absence of Invest to Save investment. Some cost engineering was undertaken to reduce the costs of the proposed intervention, such as simplifying the facility specification, and utilising a pre-qualified procurement system (Escape Procure). However, the project went ahead largely as planned in the original Invest to Save application and business case, leading to the consolidation of custody from across South Wales into for new-build facilities, albeit at a later date given the time taken to develop the Invest to save application and using internal resource only.

Project achievements and benefits

The project lead reported that a range of benefits have been delivered by the modernisation project, as intended at the outset and initial development of the project including:

- a reduction in staff resource required to manage custody facilities
- higher capacity custody
- reduced facilities management costs.

Additional benefits reported include the unblocking of land assets for future neighbourhood projects, as a result of the disposal of the old facilities, providing the potential for revenue raising activity. The project lead also reported that the project has gained wide recognition as a “pioneering” and “best practice” custody solution for UK police forces, based on the innovative

aspects of the physical build, and the used of contracted agents in the service solution progressed.

However, the project took longer than it was expected to, had Invest to Save resource been made available. Further, the need to progress the project in some form led to reduction in expenditure on other services undertaken by the delivery organisation, considered detrimental – although it was not possible to provide specific details on what other services were impacted.

Perspectives on the process

The Modernisation of the South Wales Police Custody Estate project did not receive Invest to Save support, however a number of messages and lessons emerge from the modernisation project of relevance and interest to the wider scheme and the evaluation of the Fund:

- the project was a high priority for the organisation, and the failure to secure Invest to Save investment did not eliminate the need to progress the project in some form, suggesting that the original rationale for intervention was sound and based on well-identified and articulated challenges and issues
- given its strategic importance, the delivery organisation had to re-allocate resource from other activities once Invest to Save was not available, considered potentially detrimental to wider service delivery activity
- the project has been managed by a detailed Key Performance Indicator (KPI) driven performance management framework enabling the recording of the benefits of the activity over the medium and longer term including savings and wider benefits.

Improving Quality and Efficiency in Community Child Health and Maternity (non-supported project)

- The project sought to provide investment in the clinical and performance management capacity required to reduce routine elective paediatric referrals from Powys Teaching Health Board to paediatric services outside Powys (including those in England).
- Practically, the project intended to establish a dedicated team to support GPs in Powys to help direct patients to the health board's facilities; and a maternity ultrasound capacity-building programme, seeking to minimise out-of-area flow of patients and improve quality of care.
- An Invest to Save application was unsuccessful. The failure to secure support from the Fund led to some reduction in the definition, focus and scope of the project. Whilst the stated ambition remains valid, the GP signposting activity was merged with mainstream activity at a lower scale, and the ultrasound capacity-building programme was indefinitely delayed.
- The project was high priority for Women & Children's Services in Powys Teaching Health Board. Failure to secure Invest to Save investment did not eliminate the need to progress the project in some form, although the project re-focused to prioritise care-quality gains over financial savings.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Lack of capacity led to a high rate of referrals from Powys to services outside of the health board, leading to high costs of treatment payable by the health board • Project underpinned by long-term organisational strategic focus on securing efficiencies in service delivery	• Reduce the cost of service delivery for paediatric services, through maximising the use of under-utilised health facilities within Powys and repatriation of services within Powys • Minimise the cross-border flow of patients from Powys to other locations, improving care-quality for Powys residents	• An application to Invest to Save was submitted, but was not successful • Two project elements ➢ establishment of a team to support GPs to direct patients to the health board's facilities – without Invest to Save a reduced scale of activity was completed ➢ an ultrasound capacity-building programme, seeking to minimise out-of-are flow of patients and improve quality of care – not delivered without Invest to Save	• Intention to deliver efficiencies through cost savings. • Despite the absence of Invest to Save estimates that the repatriation of services within Powys can lead to savings of £230k • Intention to deliver improved care-quality for Powys residents	• Potential for improved healthcare outcomes for patients through repatriation • Potential for improved service efficiency of the NHS across Wales

Project background

The Improving Quality and Efficiency in Community Child Health and Maternity project (the project) sought to “pump-prime” the clinical and performance management capacity required to bring about systemic service and clinical pathway redesign in child health and maternity, delivering savings, and service improvements in Powys.

Led by the Powys Teaching Health Board, the aim of the project, practically, was to reduce the number of elective paediatric referrals from the Health Board’s general practitioners to external services, in both other parts of Wales, and across the border to health agencies in England.

The project responded to the Health Board’s strategic plan for efficiencies – a four to five-year ambition pre-dating the Invest to Save opportunity, alongside the need for service improvements and improved healthcare outcomes, and maximise the utilisation of the capacity and facilities within the Powys area, for both patient and organisational benefits.

Project implementation

Support from the Invest to Save Fund was sought to support two distinct, but re-enforcing, elements of the project developed by the Powys Teaching Health Board, both focused on reducing out-of-area referrals:

- first, the establishment of a dedicated team to support General Practitioners (GPs) in Powys to direct patients to the health board’s facilities – a key challenge identified faced by the project was reported ‘cultural inertia’ in GP referral behaviour, emphasising the need for a concerted engagement and capacity-building activity as envisaged in the Invest to Save application

- second, the development of an ultrasound capacity-building programme, seeking to minimise the out-of-area flow of patients and improve the quality of care.

The investment sought from the Invest to Save Fund was around £430,000, in order to deliver a planned 35% reduction in routine elective paediatric

referrals from Powys Teaching Health Board to paediatric services outside Powys, including those in England.

As noted above, the project was not successful in securing investment from the Invest to Save Fund. It was reported by the delivery organisation that the Invest to Save application was rejected over concerns on the impact that the project would have on the revenues of other health boards, and concerns as to how the savings would be delivered alongside service quality improvement and/or maintenance.

In the absence of Invest to Save support, the planned project was restructured substantially by the lead organisation. Taking in turn the two project elements as set out above:

- **the establishment of a dedicated team to support General Practitioners (GPs) in Powys to direct patients to the health board's facilities** – a dedicated team could not be formed for the paediatric services component without Invest to Save resource. However, this element has been progressed at a smaller scale funded through existing internal organisational budgets, with the signposting activity essentially 'mainstreamed' within the wider existing work of the Powys Teaching Health Board.
- **the development of an ultrasound capacity-building programme** – this element of the planned project has not been delivered, although it has been scheduled for action over the longer term, if and when time and resources allow.

Project achievements and benefits

Lacking the scale of investment that the Invest to Save project would have enabled, and as a result, a reduced project scope, the planned benefits of the project have been diminished substantially, and have taken longer to materialise than would have been the case. The project lead noted that the Invest to Save support would have amplified significantly the paediatric services component of the project, providing a 'jump start' delivering larger results, faster, and freeing resources for the wider strategic programme i.e.

the ultrasound component.

That said, project partners reported that benefits have been generated by the smaller project, with the project run efficiently and effectively in order to maximise return on investment. Although the project has lost some definition, with the delivery model eroded and merged with mainstream activity rather than as a focused and discrete set of activities, project partners estimate that through the reduction in external paediatric referrals, savings have been generated and that savings of around £230k are achievable for the Health Board over the longer-term.

Perspectives on the process

The Improving Quality and Efficiency in Community Child Health and Maternity project did not receive Invest to Save support. However a number of messages and lessons emerge from the modernisation project of relevance and interest to the wider scheme and the evaluation of the Fund:

- first, without the steer of Invest to Save, the project became more about quality of care than financial savings – though indeed, the application itself made no clear commitment to delivering savings, emphasising instead quality of care improvements; the fact that the focus of the work that went ahead prioritised quality improvement rather than savings does suggest that the rationale for the project was sound from a service improvement perspective, although the justification in terms of efficiencies may have required further development to justify the use of Invest to Save resource

- second, some minor concerns were voiced by GPs regarding encroachment on their autonomy, however, care has been taken to prioritise care-quality gains over financial savings helping to secure buy-in – whilst this is a specific issue for this project, it does suggest an important lesson for wider projects – be they funded by Invest to Save or other funding streams – on the value and importance of securing engagement of key stakeholders group through appropriate messaging and communication

- third, as a high priority project for Powys Teaching Health Board, the project needed to progress in some form, even without Invest to Save – however, from the lack of Invest to Save funding reduced the potential impact of the project, by reducing substantially the speed and scale of activity
- fourth, eligibility issues were raised as an issue by the lead organisation, suggesting from a process perspective, the need for clarity from the outset on what is and is not eligible to be supported by the Invest to Save Fund; In particular, a minimum bid of £250K meant that projects from Powys would be amalgamated; and therefore less likely to be supported than bids from large NHS organisations providing actute hospital services.

Carmarthenshire Asset Review (external project)

- The Carmarthenshire Asset review project was undertaken to capture and collate comprehensive information on the assets of the County Council and other local public sector partners in order to make better use of the local asset base. The project responded to both national level and local drivers focused on maximising the efficiency of public assets.
- The project was funded using internal Carmarthenshire County Council resources; the Invest to Save Fund was not approached given the staging and timing of the project that was developed prior to the potential for securing Invest to Save investment.
- Following a research phase including mapping of assets, workshops with partners, and a review of options for the assets, project benefits included capital receipts of £2m in the first year, with more expected for the future, and a range of partnership and strategic benefits, including completed asset transfers and enhanced partnership working between local agencies.
- Key lessons of the project included the importance of dedicated resource, a focus on property and asset management as a core element of wider service delivery, wide engagement with local partners, and the establishment of a clear delivery timeline, helping to 'focus the mind' and provide a clarity of purpose in delivery.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Local response to pan-Wales agenda to improve the utilisation of assets in public ownership, following review by the the Wales Audit Office • Need to secure cost efficiencies in the use and management of public assets • Need to encourage public agencies to work in partnership • Address information failures, with no comprehensive understanding of the scale, range and potential of public assets across the local area	• Overall purpose to make better use of the local asset base • Specific goals included ➢ identification of potential opportunities for the sharing of accommodation ➢ identification of "immediately" and "potentially" surplus assets for disposal ➢ opportunity for asset transfer ➢ provide better strategic understanding of the asset base	• Establishment of a Asset Review Team • Research phase including detailed mapping of local assets owned by Council and other agencies, workshops with local partners • Reporting phase including identifying sites for disposal/re-purposing • Estimated total cost of around £150k	• Disposal receipts – asset review led to receipts of £2m to date with further savings expected • Reduction in revenue costs through shared accommodation • Improvement in communication and information sharing between property teams in public bodies • Improved engagement between local public services • Transfer of assets to local community organisations	• Efficiency savings though both capital receipts and reduced costs generating reduced revenue costs • Better service delivery for customers and local people, including through clustering of public services in premises • Enhanced social capital and community engagement, including through voluntary/community sector asset transfer

Project background

The Carmarthenshire Asset Review project, led by Carmarthenshire County Council, involved a review of the built assets, across use classes (that is covering office, service delivery and other uses), in the ownership of Carmarthenshire County Council and other public agencies across the Local Authority area, to inform strategic planning activities and wider resource utilisation and maximisation.

The Asset Review project represented a local response to a pan-Wales agenda to improve the utilisation of assets in public ownership, triggered principally by a report by the Wales Audit Office on Buildings Management across Wales.

The Asset Review project in Carmarthenshire also responded to a number of local drivers including:

- the need to secure **cost efficiencies** in the use and management of public assets, including those owned by the Council and the wider public sector
- the need to **encourage public agencies to work in partnership** through the better utilisation (including the potential for the sharing) of built assets, helping to address standard co-ordination issues between local agencies
- the need to address some **information deficiencies within the Council**, with a lack of comprehensive understanding in place of the scale, range and potential of public assets across the local area prior to the asset review.

Within this context, the specific purpose of the Asset Review was to capture and collate comprehensive information on the assets of the Council and other local public sector partners in order to make better use of the local asset base including through:

- the identification of potential opportunities for the sharing of accommodation

- the identification of “immediately” surplus assets that could be easily developable and sold thereby generating savings through disposal and on-going revenue savings
- highlighting “potentially” surplus assets which would require preparatory work at varying degrees of complexity to enable disposal
- provide the opportunity to transfer assets to Town, Community Councils and the third sector
- supporting an improved service related to property issues with a better strategic understanding of the asset base across the local area and its public sector.

Project implementation

The project was developed prior to the opportunity to access Invest to Save resource emerged. The project was therefore funded fully using internal Council resources as no other funding was regarded as viable or available at the time. The total project cost to the Council was an estimated £150k.

A dedicated team (equivalent to 3 Full Time Employees) was established to undertake the asset review, overseen by the Head of Corporate Property at Carmarthenshire County Council, with overall strategic direction and governance oversight provided by the Carmarthenshire Local Service Board (LSB).

Practically, delivered over April 2010 to March 2011, the work included an initial research phase involving capturing information on the council’s property assets, and those of other public sector organisations. The work was undertaken sequentially across six areas of the County.

Following this initial desk-based assessment, a series of workshops were held across the area to secure buy-in and engagement to the process and identify opportunities for the assets captured by the mapping.

Based on the evidence and feedback from the workshops, the assets were tested against opportunities of how to maximise their utilisation including:

disposal, transfer to community group, re-purposing (including shared usage), and retention.

Project achievements and benefits

The asset review led directly to the disposal of assets providing capital receipts of £2m in the first and second years, with work on-going to deliver further capital receipts – to 2020 a total of £50m of capital receipts have been set out in the asset management plan, with a detailed and rolling five-year plan for disposals now in place following the asset review.

Revenue costs have also been reduced – for example through reduced costs in rates, energy costs and wider asset management – although at the time of the case study research these had yet to be quantified formally, and may be challenging to track/attribute directly to the project.

The asset review also informed the development of an office accommodation and wider estates strategy for the Council. Other qualitative benefits of the project include:

- a reported improvement in communication and information sharing between property teams in public bodies, and more broadly improved engagement between local public services, including the establishment of ongoing regular cross public sector asset reviews/collaborative meetings
- the successful transfer of assets to local community organisations, covering parks, playgrounds, day centres and public conveniences, bringing about local ownership of assets, and more broadly the development of local capacity and knowledge in 'how to do' community asset transfer to inform future activities
- the identification of land not currently claimed by any organisation, to be utilised potentially for public services, or transferred to community ownership.

It was reported to the evaluators by local partners that the project became regarded as 'good practice' in asset management, with the project team at

Carmarthenshire subsequently undertaking advisory work for a number of other public agencies across Wales.

Lessons

The Carmarthenshire Asset Review did not seek (or subsequently receive) investment from the Invest to Save Fund. The lessons emerging from the case study research are therefore focused on the messages that can be taken from the project by the Fund, and project managers, from similar interventions in the future. Three key messages emerge:

- a dedicated resource to deliver the research phase was vital to the success of the intervention, ensuring that the project was the core focus for those leading on its implementation, rather than an element of wider corporate efforts
- a range of success factors for the project were identified, including
    - a clear focus on property and asset management as a core element of wider service delivery rather than as a 'end in itself'
    - wide engagement with local groups and organisations (including through workshops)
    - the establishment of a clear timeline for delivery, helping to 'focus the mind' and provide clarity of purpose
    - securing the buy-in of local elected members.
- the project has been 'mainstreamed' with the findings informing on-going asset management plans, ensuring the project has a legacy and value over the longer-term; the extensive research process, generating credibility at the outset in the process and its findings, was an important factor in this.

South East Wales Improvement Consortium Telecare and Extra Care Housing (external project)

- The Telecare and Extra Care Housing (later Accommodation with Care) project, led by the established South East Wales Improvement Consortium (*sewic*) involved project, involved research and capacity building support to enhance regional collaboration in telecare and accommodation with care services.
- The project responded to an established strategic imperative for greater regional collaboration in the provision of social care, to improve service delivery and potentially drive efficiencies through joint working, procurement and commissioning.
- Funded by an ESF grant, key benefits include improved partnership, sharing of good practice, and development of a recognised process for addressing service delivery issues and challenges. There is the potential for cash releasing and/or non-cash releasing benefits over the longer term, although these have not been delivered to date.
- Key lessons of the project included the need to be realistic and practical in setting objectives at the outset of projects, recognising that established systems can be hard to change in public service delivery, the importance of partnership development and support within as well as across organisations, and dedicated capacity and resource if sustainable and substantive engagement is to be generated.

Summary project logic model

Rationale	Objectives	Inputs and activities	Outputs & outcomes	Impacts
• Strategic imperative for greater regional collaboration in the provision of social care across South East Wales • Need to promote efficiencies and cost savings in service delivery given challenging budgetary contexts • Need to address co-ordination failures in service delivery across the region in the telecare and extra accommodation service areas	• Enhanced the consistency of the (i) telecare and (ii) extra accommodation service areas offer across the sewic region • Deliver efficiencies in service delivery, including through reduced costs and economies of scale through joint procurement and commissioning • Maximise the potential of new and emerging technology to deliver service user outcomes	• ESF grant funding for (i) telecare and (ii) extra accommodation activities respectively, subsequently linked • Telecare ➢ Research into business case for service consolidation ➢ Facilitation and capacity development support for regional working • Extra accommodation ➢ Facilitation and capacity development support for regional working	• Planned efficiency savings through service consolidation and/or economies of scale through joint procurement and commissioning – likely to be longer term if generated • Range of outputs including case studies, toolkits and research outputs to inform delivery in telecare and extra accommodation • Strategic partnership outcomes, and transfer of knowledge and good practice	• Enhanced capacity across service delivery agencies in terms of joint working and collaboration, with the potential to generate improved service user outcomes over the longer-term • Potential for improved efficiency in public sector delivery through joint working and sharing of best practice

Project background

The Telecare and Extra Care Housing (later Accommodation with Care) project led by the established South East Wales Improvement Consortium (*sewic*) involved research and on-going co-ordination and partnership development support to enhancing regional collaboration in the telecare and accommodation with care services sectors in South East Wales.

The project, and its two elements, responded to a long-term and established strategic imperative for greater regional collaboration in the provision of social care, related principally to the need to improve the service offer across the area including:

- enhancing the consistency of the telecare and accommodation with care service offer across the region, including addressing coordination failures between relevant health and social care organisations
- maximising the potential of new and emerging technology to deliver service user outcomes

This service improvement intent sat alongside a parallel, and equally strategically relevant, driver for promoting efficiencies in service delivery, including the potential for economies of scale through procurement and commissioning.

Project implementation

Funded via a European Social Fund (ESF) grant (as opposed to repayable funding available through the Invest to save Fund), the telecare/ accommodation with care project was developed via an existing regional collaboration, *sewic* – a consortium of that covers social care in the local areas of:

- Bridgend
- Cardiff
- Newport
- Torfaen
- Blaenau Gwent
- Caerphilly
- Vale of Glamorgan
- Rhondda Cynon Taff

- Monmouthshire
- Merthyr Tydfil.

Through the *sewic* consortium, telecare and accommodation with care had been identified as areas with potential for service improvement and the generation of cost efficiencies. The two elements of the project were initially separate (i.e. distinct telecare and accommodation with care projects respectively under the *sewic* banner). However, the two elements were brought together given the thematic linkages between them and the opportunities in terms of strategic alignment and management efficiencies of a single project management process.

Practically, the work included a range of activity over the 2011-2014 period (with the project funding to close in March 2014). The work undertaken by the two elements is described below.

For telecare, the initial work focused on developing and testing the business case for the potential consolidation of the separate monitoring centres across the *sewic* region in order to reduced costs and improved the consistency of the service. The research included significant engagement with partners across the region and a business case was developed, however, the *sewic* Board decided that consolidation was not achievable practically given the challenges and complexities involved.

This led to a shift in the project focus towards providing capacity support to enhance levels of collaboration between authorities though research and the facilitation of meetings, publication of reports and broader partnership working and brokerage activity. This includes the establishment of a telecare reference group to share best practice and experience, for example in approaches to training, installation and review. The ESF grant supported the appointment of a project manager on secondment from a partner authority to deliver the project. The project manager has also overseen the extra accommodation officer (see below).

For accommodation with care, facilitation support for enhancing links between housing and social services departments across the region, including the establishment of a partnership group to share ideas and best practice, and

research support including a mapping exercise of accommodation with care provision across the region. The ESF grant supported the appointment of a project manager initially, following the merger of the two projects, a project officer was appointed, overseen by the telecare project manager.

Project achievements and benefits

The original intention with the telecare element of the project was the potential for the generation of efficiency savings through the consolidation of monitoring centres. However, given the shift of focus in the project explained above, direct savings (cash releasing or non-cash releasing) have not been delivered. However, there are reported examples of service improvement as a result of the enhanced collaboration and partnership working, with the potential to deliver tangible cash-releasing savings over the longer term e.g. through the sharing of contracts and commissioning processes.

The benefits generated to date by the project more widely are therefore focused principally on strategic and improved partnership working across the region, in both a telacare and accommodation with care context, enabling social care partners to share issues, challenges and good practice, and development of a recognised process for addressing service delivery issues and challenges. As one project partner stated, the project has '*delivered knowledge, and intelligence, not hard cash savings*'.

The additionality of the project has been in bringing forward and enhancing the quality of this collaboration.

The key test going forward will be to ensure that the partnership effects are sustained following the close of the formal ESF support and the management and facilitation capacity and resource that this confers, with consultations indicating that discussions on a clear exit strategy underway at the time of the case study research.

The project has also developed a range of tools and materials – for example, setting out guideline and good practice on property adaptation for extra accommodation – to be used by partners to improve the quality of service to

users, and a series of case studies for wider dissemination, for example on procurement practice.

Lessons

The project did not seek (or subsequently receive) investment from the Invest to Save Fund. The lessons emerging from the case study research are therefore focused on the messages that can be taken from the project by the Fund, and project managers, from similar interventions in the future.

A number of key messages emerge from the case study research with the projects:

- integrated working both horizontally between organisations and vertically within organisation is important to ensure both senior level and operational buy-in and engagement to regional working
- enhancing partnership working *within* as well as between organisations is important, for example between housing and social care departments without local authorities
- research, and laying a strong foundation at the outset is important, although there needs to be a recognition that this takes time, and requires dedicated capacity and resource if sustainable and substantive engagement is to be generated
- wide communication, particularly when engaged in projects with the potential for organisational change

The Telecare and Extra Care Housing (later Accommodation with Care) project also indicated the need to be realistic and practical in setting objectives at the outset of projects, recognising that established systems can be hard to change in public service delivery, and the importance therefore of flexibility in project delivery and focus to retain partner buy-in whilst retaining a commitment to the overall purpose and focus of activity.