



Building up your commissioned work

Jane Laughton (CEO)  
Healthwatch Nottingham and Nottinghamshire



Session aims:

1. To help local Healthwatch to consider the benefits and challenges of carrying out commissioned work
2. To share learning with local Healthwatch on what went well for us, learning from our mistakes and provide some tools and advice on how to overcome these
3. To stimulate discussion about how other local Healthwatch are approaching this and encourage further sharing of learning and issues

## Agenda:

2.15 - 2.20	Welcome and introductions
2.20 - 2.45	Presentation - our story and approach
2.45 - 3.00	Table discussions
3.00 - 3.10	Feedback
3.10 - 3.20	Presentation - benefits, challenges, lessons learned, success factors, future opportunities
3.20 - 3.40	Table discussions and reflections
3.40 - 3.45	Conclusions and close

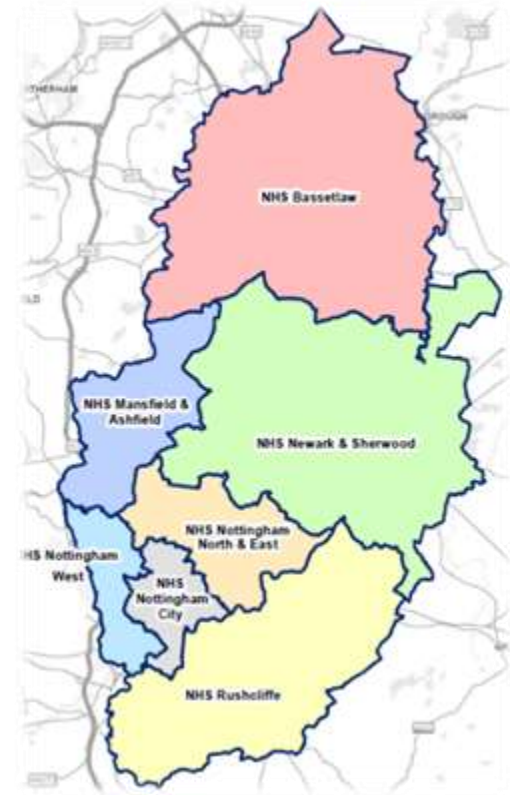
# Our story

**healthwatch**



## Our story:

- A newly merged organisation
- Two Local Authorities - Nottingham City and Nottinghamshire
- Population of over 1 million. Urban and rural.
- Grant income 19/20 £321,000 (reducing next year)
- Staffing - 9.2 wte
- 50 volunteers



Our journey to commissioned work:

1. Two local HW organisations merged in June 2018 with significantly reduced budget
2. Occasional commissioned work in the past but Commissioners encouraged us to seek more commissioned work to cover shortfall to maintain resilience with reduced budget
3. Board agreed 2017-18 strategy  
‘Increasing our capability and capacity to take on contracted work at a level which does not exceed 25% of the statutory grant’  
(decision taken to restrict risk of mission drift)
4. From April 2018 new CEO role included responsibility of  
‘Creating opportunities for income generation and successfully tendering for potential contracts’

## Our Approach: Promoting

All team aware that they need to be looking for opportunities. Leaflet developed to support discussions about potential commissioned work with.



Evidence and Insight Manager responsible for identifying grant funding opportunities.



## Our Approach: Receiving applications

### Key questions:

- Who and how many would you like us to collect evidence from?
- What evidence would you like us to collect?
- When do you need this information collected by?
- What difference to service users will collecting this information make/ What will the impact of this work be?
- Are there any barriers to collecting these experiences?
- Do you have access to the participants you would like to involve?
- Do you have funding to collect this information?





## Our Approach: Deciding

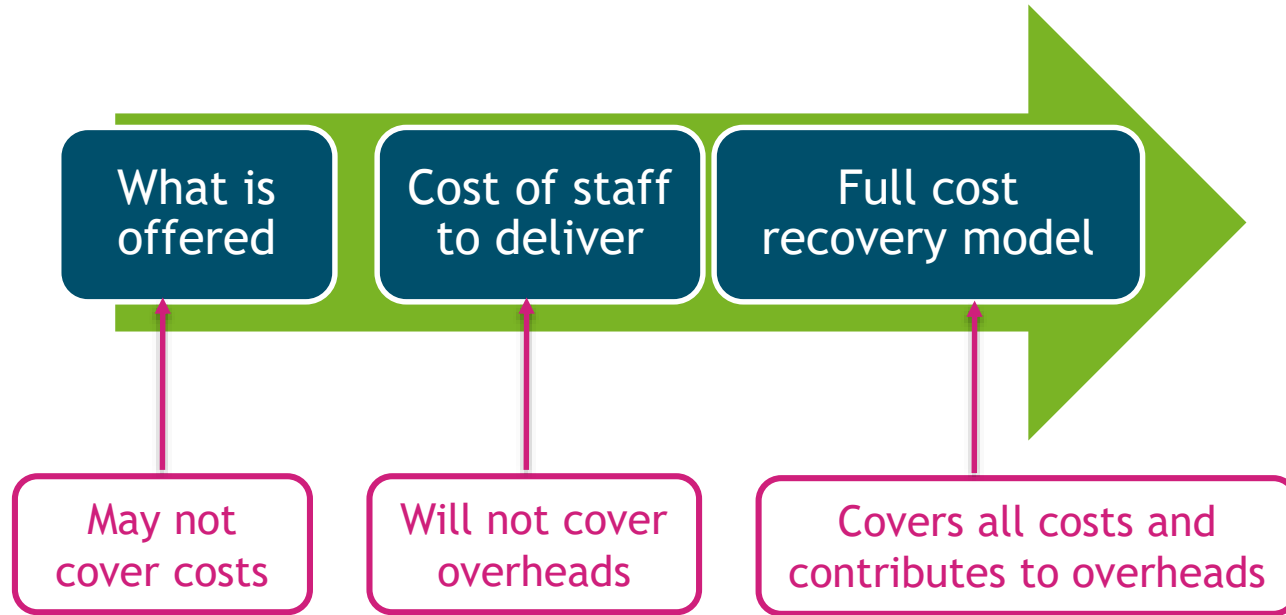
Internal application selection committee - CEO, Managers and Data Analyst

### Key criteria:

- Meets the key aims of Healthwatch?
- Potential to have a positive impact for service users?
- Can we complete the work in the required timeframe considering other commitments?
- Can we recruit additional staff to do the project?
- Is the funding available sufficient to cover our costs based on our 'full cost recover model'?

If yes, move to Project Initiation Document (PID) to capture detail

## What's the price?



## Full cost recovery

Staff costs (Salary + NI + pension contribution)

+

Proportion of organisational overheads

+

Direct costs (Laptop, phone, expenses, printing)

+

Any additional contribution to invest in organisation

= Total cost to be covered in price


**Ask your Board to decide on pricing framework**

## Commissioned work 2018/19

- Safeguarding Survey - Nottingham City Council
- Maternity Voices Partnership - Nottinghamshire County Council/NHS
- Focus groups to inform specification for Wellbeing Services - Nottinghamshire County Council
- Survey to inform recommissioned service - Greater Nottingham CCP
- Interviews about safeguarding process - Nottinghamshire County Council
- Focus groups on shared decision making - NHSE
- Dementia Discharge - Nottingham University Hospitals
- NHS Long Term Plan - HWE

**Total income from these projects: Aug 18 - Aug 19 = £37,552**

**Additional staffing: 2 days a week x 3 months**

A large, stylized pink shape on the left side of the slide.

Involvement of team and client

**Whole team contributes:**

- Engagement Officers - collecting experiences/ running focus groups
- Data Analyst - coding and analysing data. Quantitative and qualitative
- Evidence and Insight Manager - project management/report writing
- CEO and one Trustee - agree draft recommendations

**With the client**

- Discuss findings and agree final recommendations
- 
- A large, stylized green shape on the bottom right side of the slide.

## Output

- Report to client who commissioned work
- Report on website
- Publicise at relevant groups
- Wider communications limited at present but currently under review



## Impact

### Past

- Follow up letters sent but not all responded


### Future

- Discuss with commissioners/providers before signing contract what they will do with the findings
- Inform them they will be asked to complete the impact monitoring form afterwards and include in contract
- Return to groups/people we consulted with and share the final report with them.
- Follow up recommendations after 6 months to ascertain progress





## HWNN Principles

- Projects must fit with our aims and objectives and our core remit
  - Commissioned income not to exceed 25% of our total income
  - We need sufficient lead in time to contract groups and prepare resources (3 months)
  - We are responsible for the data collection in all cases
  - We maintain ownership of the data we collect and will publish the reports
  - We will follow up the recommendations to assess impact
- 

# Questions?

**healthwatch**



## WORKSHOP DISCUSSION

Based on what you have heard and your own experiences, what are the:

- Benefits
- Challenges
- Risks

of carrying out commissioned work?

## Benefits

- Increased engagement and reach
 ● Additional 923 people reached, many seldom heard
- Supports financial sustainability of local HW
 ● £37k 2018/19 (+£5k from Trust Fund)
- Staff training and development in new areas/topics
 ● Running focus groups; developing and winning bids
- Staff satisfaction in winning work and delivering projects
 ● Staff reported satisfaction
- Increased profile and visibility locally and nationally
 ● NHSE and HW England
- Increased impact
 ● New system of evidencing this

## Challenges/risks and how we addressed

- |   |   |
|---|---|
| ● Perceived impact on 'core' work                               | ● Must meet our criteria<br>We also select other projects           |
| ● Getting the pricing right                                     | ● We learned over time!   |
| ● Project scope creep and delays                                | ● A good contract and PID; review meetings and escalation process   |
| ● Timeframes can be short and may need to flex capacity quickly | ● 3 months notice/ Use of associates and flexing up part time staff |
| ● A lot of small projects which are time consuming to manage    | ● Seek larger projects  |
| ● Demonstrating impact  | ● Agree monitoring arrangements at the outset                       |

## Lessons learned

- We have proved to others that we deliver quality work on time
- Be more bold in our negotiations on price and timeframes
- It requires a committed team who are prepared to be flexible
- Strong project management is essential
- Keen an eye on balance between commissioned work and 'core'
- It is hard work and there can be very busy times

## BUT

It has brought us increased profile and a more sustainable organisation, reaching more local people to make their voices heard

# Success factors

- USP
- Team work
- Networking
- Delivery

**healthwatch**






## Future opportunities

- Follow-up work
- ICS, ICP and PCNs - our unique perspective
- Working in partnership with others to bid for commissioned work - universities; VCS

## WORKSHOP DISCUSSION

Thinking about your own Healthwatch, what do you need to consider about potentially developing commissioned work:

- Would the Board support it? How would you address any concerns?
  - Does it fit with your strategy?
  - Are you attending meetings where opportunities may arise?
  - Do you have the skills and capacity to deliver? If not, how could you develop these?
  - What other practical considerations are there?
- 

Final thoughts

**What 3 things are you going to do  
as a result of coming to this session?**



Thankyou and good luck with your commissioned work!

**Please fill in an evaluation form**

**Handouts available from HWNN:**

- Commissioned income leaflet
- Evidence collection request form
- Impact monitoring form

<http://hwnn.co.uk/hwe-ci/>

For further information please contact :



Jane.laughton@hwnn.co.uk

All our reports are on our website [www.hwnn.co.uk](http://www.hwnn.co.uk)



