NHS ENGLAND

(1)

AND

ROYAL FREE LONDON NHS FOUNDATION TRUST

(2)

SERVICE LEVEL AGREEMENT FOR THE PROVISION OF ANALYTICAL SUPPORT SERVICES TO THE PERSONALISED CARE GROUP

SERVICE LEVEL AGREEMENT CONTRACT VARIATION AGREEMENT

**Atamis Contract Reference: C206895** 

**Atamis Business Case Reference: BC-18756** 

#### THIS VARIATION AGREEMENT is made on 14th September 2023

#### **BETWEEN:**

- (1) **NHS England** of Quarry House, Quarry Hill, Leeds, LS2 7UE ("the Authority"); and
- (2) Royal Free London NHS Foundation Trust of Royal Free Hospital, Pond Street, London, NW3 2QG ("the Supplier")

Each a "Party" and together referred to as "the Parties".

#### **BACKGROUND:**

- (A) The Authority and the Supplier entered into a contract entitled "Service Level Agreement for the Provision of Analytical Support Services to the Personalised Care Group" on 04/07/2022 ("the Contract").
- (B) With effect from 1 July 2022 (the "Effective Date") it was proposed that:
  - NHS London Shared Services ("LSS") will transfer all of its rights and obligations under the Contract to Royal Free London NHS Foundation Trust
  - Royal Free London NHS Foundation Trust will deliver the Contract and be bound by its terms in every way, as if Royal Free London NHS Foundation Trust were the original party providing services under it, in place of LSS.
- (C) The Authority and the Supplier have mutually agreed to vary the Contract as fully detailed below in Section 2 (Contract Variation).
- (D) The Supplier will be paid costs as detailed below in Section 3 (Costs).

#### IT IS AGREED as follows:

#### 1. <u>Definitions and Interpretation</u>

- Capitalised words and phrases in this Variation Agreement shall have the meanings given to them in the Contract.
- The Contract, including any previous Variations, shall remain effective and unaltered except as amended by this Variation.

#### 2. Contract Variation

- In accordance with Section Two (Form of Agreement), and Clause 3 (Variation), the Supplier and the Authority have mutually agreed to vary the Contract as outlined below:
- Requirement to the maintenance and stakeholder management/training for a tableau dashboard to enable national, regional and Community Health Services teams to access and monitor performance against current LTP commitments and transition towards future requirements.
- Key services for maintenance include:
  - This includes implementing minor changes to the presentation, monthly loading of the data from existing sources and limited debugging of existing processes if required. Provide SME input to support organisational changes in the data as a result of moving into a new financial year
  - Continue to upskill the M&I Team and support the submission of existing additional reporting requirements such as the SOF and 'Forecast vs. Actual' reports
  - Support any additional ad-hoc reporting requirements where capacity is available, or through reprioritisation of tasks
  - Provide SME input and analytical guidance for wider work in the PCG

- Create documentation and other materials (e.g. video tutorials) to support business continuity, maintenance of the dashboard and FutureNHS site
- Support transitions to new platforms if appropriate (e.g. publish on similar platforms to other dashboards and provide support to migrate from FutureNHS)
- Key services for stakeholder engagement includes:
  - Response and management of stakeholder queries
  - Conduct a stakeholder mapping and requirements gathering with new and existing user groups. Findings will be used to build a prioritised pipeline of potential functions for an updated version of the dashboard
  - Host regular dashboard demonstrations to support rollout to wider groups of stakeholders
  - Create supporting resources to facilitate stakeholder engagement and feedback (e.g. wireframe designs or prototypes)
  - Identify any further information to include in updated user guidance and video tutorials through engagement with stakeholders
  - Develop the FutureNHS page, using it as the main communications platform to inform users of updated data, dashboard releases, demonstrations and guidance.

#### 3. Costs

- The Supplier will be paid a maximum of £77,145.00 excluding VAT. Total Value (£) inc. VAT: £92,574.0
- The Contract Variation Agreement will be for the period 29/09/2023 to 31/03/2024.

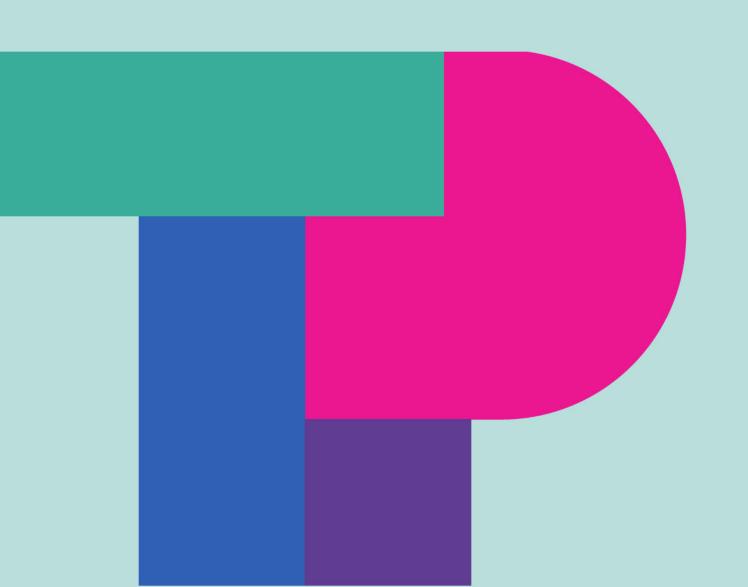
IN WITNESS OF WHICH the Parties have signed this Variation Agreement on the date(s) shown below:

Signed by	for and on behalf of <b>NHS ENGLAND</b>
DocuSigned by	•
Full Name:	
Job Title/Role:	
Date Signed:	29 September 2023
	and on behalf of THE SUPPLIER
— DocuSigned by	
C9880359095A	455
Full Name:	
Job Title/Role:	)
Date Signed:	25/09/2023

## Appendix 1

## **Supplier Proposal**





# Transformation Partners

in Health and Care

## **Analytical Support for the Personalised Care Group**

Outline 35 Week Proposal (August 2023 to March 2024)

Version 1.2

28 July 2023





## The success of the Personalised Care Group Dashboard

### Background and context

Personalised Care means people living with long term conditions have the same choice and control over their mental and physical health that they have come to expect in every other aspect of their life. It is one of the five major, practical changes to the NHS that will take place over the next five years and the action plan Universal Personalised Care (UPC) confirms how this will be delivered. The Personalised Care Group (PCG) is responsible for driving this work forward and sits within the NHS England Strategy and Innovation Directorate.

As part of the NHS Long Term Plan, the NHS Personalised Care model is being rolled out across England, with the aim of reaching 2.5 million people by 2023-24 and then doubling that again within a decade. The model has 6 components:

- Shared decision making
- 2. Personalised care and support planning
- 3. Enabling choice, including legal rights to choice
- 4. Social prescribing and community-based support
- Supported self-management
- 6. Personal health budgets and integrated personal budgets

To demonstrate this commitment, the PCG needs to be able to collect and routinely publish reliable Personalised Care national activity data, including the work of the Personalised Care Institute. To do this, dedicated support is required with expertise in business analysis, data processing and reporting.

Transformation Partners in Health and Care have been supporting the PCG since 2020-21 to establish data management processes and develop and deploy the national Personalised Care Dashboard, 2022-23 saw the successful development and rollout of 'Version 2.0' of the dashboard, which includes a greater focus on identifying unwarranted variation and inequalities analysis, following a period of targeted engagement and requirements gathering with a broad range of stakeholders.

This has been very well received by colleagues working at national, regional and local levels, and is currently the 6th most viewed dashboard on FutureNHS with almost 4,000 views from over 450 individuals; facilitating a culture of data-driven decisions and conversations about Personalised Care.



## Technical and engagement support for iterative development of the PCG Dashboard

Our approach for August 2023 to March 2024

The table below outlines the proposed tasks and deliverables for the package of support (from 31st July 2023 to 31st March 2024):

	Tasks Tasks	Deliverables
Maintenance and SME input	<ul> <li>Continue with the maintenance of the dashboard 'as-is'. This will include implementing minor changes to the presentation, monthly loading of the data from existing sources and limited debugging of existing processes if required.</li> </ul>	<ul> <li>Dashboard updates with new data</li> </ul>
	<ul> <li>Provide SME input to support organisational changes in the data as a result of moving into a new financial year</li> </ul>	<ul> <li>Adapting organisation mapping</li> </ul>
	<ul> <li>Continue to upskill the M&amp;I Team and support the submission of existing additional reporting requirements such as the SOF and 'Forecast vs. Actual' reports</li> </ul>	<ul><li>based on changes</li><li>Upskilling colleagues</li></ul>
	Support any additional ad-hoc reporting requirements where capacity is available, or through reprioritisation of tasks	<ul> <li>Support existing reporting</li> </ul>
	Provide SME input and analytical guidance for wider work in the PCG	requirements
	<ul> <li>Create documentation and other materials (e.g. video tutorials) to support business continuity, maintenance of the dashboard and FutureNHS site</li> </ul>	<ul> <li>Supporting ad-hoc reporting (dependant on capacity)</li> </ul>
	<ul> <li>Support transitions to new platforms if appropriate (e.g. publish on similar platforms to other dashboards and provide support to migrate from FutureNHS)</li> </ul>	<ul> <li>Iterative development of maintenance guides</li> </ul>
Engagement and	Response and management of stakeholder queries	Management of stakeholder
stakeholder	<ul> <li>Conduct a stakeholder mapping and requirements gathering with new and existing user groups. Findings will be used to build a</li> </ul>	queries
management	prioritised pipeline of potential functions for an updated version of the dashboard	<ul> <li>Dashboard demonstrations</li> </ul>
	Host regular dashboard demonstrations to support rollout to wider groups of stakeholders	<ul> <li>Wireframe designs or prototyp</li> </ul>
	Create supporting resources to facilitate stakeholder engagement and feedback (e.g. wireframe designs or prototypes)	<ul> <li>Updated user guidance</li> </ul>
	· Identify any further information to include in updated user guidance and video tutorials through engagement with stakeholders	<ul> <li>Updated FutureNHS page and</li> </ul>
	<ul> <li>Develop the FutureNHS page, using it as the main communications platform to inform users of updated data, dashboard releases, demonstrations and guidance</li> </ul>	management
Dashboard	Review current data sources to identify options for additions in the updated version of the dashboard.	Prioritised pipeline of user
Development	Review existing processes for potential improvements or efficiencies	requirements
	Prioritise functions from the prioritised pipeline, using key documents such as the Long Term Plan and PCG Counting Strategy to	<ul> <li>Development plans</li> </ul>
	inform the process. Prioritised features will be used to plan development cycles for incremental versions of the dashboard	<ul> <li>Incremental dashboard releas</li> </ul>





#### Continued collaboration with the M&I Team

## Working with you

We will work closely with the SRO and Measurement & Intelligence team (M&I) throughout, working in a mutually supportive, open and transparent manner to ensure needs are fully met and deliverables can be met in an agile way.

#### Specifically we will:

- Work with the nominated client team to ensure continuous alignment to aims and objectives of the project. We will do this by having regular meetings and contact
- We will refine 'the right level of agile' concepts and principles, in line with regular feedback from the client team with the aim to continuously improve our processes
- We will provide high-quality project reporting as agreed with the client team, including updates on budget utilisation.

Our approach is to work in a collaborative manner and as such, we request that:

- The client team agrees to be available for regular contact with our project team, and be responsible for final sign-off/decision making in regards to stages outlined in the project plan. They also agree to make the final decision on prioritising the requirements should there be a conflict
- The client team acts as points of escalation (if required) and will support in obtaining access to the relevant stakeholders, datasets, permissions and other factors related to the successful development of the outputs
- The client team also agrees to be transparent (as appropriate) with us regarding any changes in scope or requirements throughout the project and understands that this may impact project timelines and deliverables

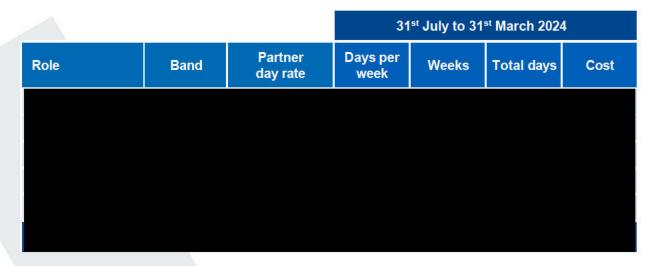




## Our delivery team

### Indicative costs for August 2023 to March 2024

The table below outlines the proposed roles and indicative costs (from 31st July):



- The costs above are based on our partner rates, which represent a 34% discount on our standard rates (see next slide)
- · Our support is commissioned on a fixed price basis. Unless there are issues with the way we deliver or resource the project we would expect to bill for the agreed value
- · Total days have been adjusted to account for annual leave, training and other internal requirements
- Days per week represent an average and will flex over the duration of the project
- · Individuals on the team may rotate during the duration of the contract, however we will ensure access to a consistent level of analytical skills and experience
- Our support will remain flexible throughout the contract to adjust resourcing to meet changing priorities as agreed with the SRO
- · All work will be delivered remotely





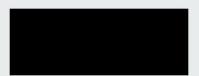
## Partnership rate card 2023-24

- As a valued client and partner, we would like to offer PCG the opportunity to make an up-front financial commitment to TPHC for 2023-24 in order to continue to access the resource at significantly discounted day rates, shown in the table below for 2023-24. A commitment to the full cost of this proposal required to 'unlock' the partner rates. We will be able to offer 30% discounted rates for a commitment less than the full cost.
- We would encourage you to consider the full-year support that you will need at the outset, as day rates may revert to lower levels of discount once the initial commitment has been utilised
- Our pricing options tend to cost less than private sector consulting fees, and when VAT and agency fees are considered, usually less than interim and agency support.

	Band 9	Band 8d	Band 8c	Band 8b	Band 8a	Band 7	Band 6
Consultant rates			6.2			6.2	
Full rate							
25% discount							
30% discount							
Partner rate							

#### Along with being less costly than interim, or private sector consulting, our support delivers additional value:

- Quality assurance and senior oversight for all deliverables provided by TPHC
- Rapid mobilisation, increased delivery due to having no associated delay with recruitment processes and you do not need to set aside capacity for this
- Maximum flexibility as you choose the staff seniority and length of commitment in accordance with your local needs, with the ability for in-year changes
- Staff are line managed and their development is supported by TPHC reducing the capacity impact for you
- Any employment risks and obligations are covered by TPHC
- There are no additional costs for office/ICT equipment
- With a team of c.120 consultants working across the entire health and care system, operating with a broad range of skills and experience and are able to promote knowledge sharing



#### Overview

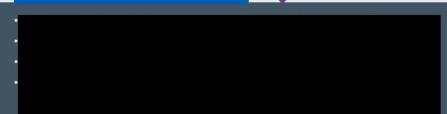
is a skilled analyst, consultant and programme manager with more than 15 years' experience working at a strategic level for the public sector. The has led and delivered solutions across a range of disciplines including benchmarking, data collection and metric development, financial modelling, survey design, large-scale data manipulation and needs assessments.

leads the data and analytics portfolio, with responsibility for the delivery of technical programmes and development of the team's analytical community. oversees support to the Chief Data and Analytics Office (CDAO), CYP Transformation and Greener NHS teams for NHSE/I.

has led several programmes including a pan-London review of the use of secure children's homes, analytical planning and modelling of interventions to reduce the carbon footprint of the NHS, an options appraisal for sexual assault services and the remodelling of Liaison and Diversion services across London

previously led the Analytics and Research team at CIPFA, with respons bility for the institute's leading class statistical, benchmarking and publishing services, providing insight and intelligence to support improvement in the public sector.

## Specialisms & Qualifications







#### Overview

is a skilled strategic analyst with over 7 years' experience in the NHS, working on projects at local, regional and national levels. He combines advanced analytical knowledge with commissioning and project management experience to generate actionable insights; supporting high-quality, evidence-based decision making.

Prior to working with TPHC, worked with NEL's Specialist Business Intelligence team for three years, where development of a scorecard and decision model for the national FGM programme was showcased at the HSJ awards. Since joining TPHC over 3 years ago, notable achievements include leading the development of a pan-London prison healthcare data strategy, establishing a demand and capacity modelling function with London's largest community provider and developing the national Personalised Care Group Dashboard.

also spent two years in commissioning management of children's community services for 6 CCGs and local authorities, where managed a service review leading to £1 million in savings, coordinated NWL's CAMHS transformation plan and led coproduction projects with CAMHS service users, clinicians and teachers.

#### **Specialisms & Qualifications**







#### Overview

- has worked in and around the NHS for over 20 years and has been a consultant for seven.

  possesses a depth of experience in a wide range of sectors and subject areas, including digital healthcare, primary care, and mental health.
- is a polymath, and is trained in consultancy skills, project management (PRINCE2) and agile (certified Scrum Master), as well as leadership. has a has a degree and professional qualification in law (barrister), an MSc in research methods, a PhD in psychology, and a long record of publication in peer-reviewed journals in a wide range of health sectors.
- speciality areas are evaluation/ research and education, with expertise in methodology and metric design, statistical analysis and curriculum development. is a peer reviewer for the National Institute for Health Research, and for several influential academic journals.

In Healthcare Consulting, has run projects for national, regional and local clients, including the Department of Health, NHS England and several NHS providers and other bodies. Roles have included PMO lead, SME in digital, contract negotiator/ manager, budget manager, lead for evaluation of services, business analyst, knowledge manager, and drafter of legal documents.



#### Overview

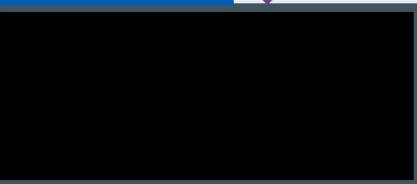
Currently working as Junior Technical Consultant for NHC. During my time here, I have worked on the vaccination project, where I have redesigned their daily reporting model using Power Query and VBA.

Previously, I was the Reporting Developer for NEL CSU, supporting NHS England Specialised Commissioning. I produced the performance report for the commissioning data using PLCM (patient level contract monitoring data), high cost drugs and devices. I have also added to the suite of reports by designing a new provider performance report, working in close collaboration with finance leads and commissioners. This report has been very well received and was used by NHSE/I colleagues during provider facing meetings.

I have used SQL and Excel for analytical purposes for the past four years, where I have created Views, Stored procedures, SSIS packages, dynamic SQL scripts, Excel VBA/Pivot reports and Power BI reports. I was also the technical lead for many reports such as NICU QIPP report, reconciliation reports, performance dashboard, and NHS performance report. I have analysed difference sources of data from PLCM, Drugs, Devices, SUS, NCDR and various other sources.



#### **Specialisms & Qualifications**



#### **Specialisms & Qualifications**



## Costing breakdown based on partner rates

(requiring a minimum commitment of the full proposal cost)

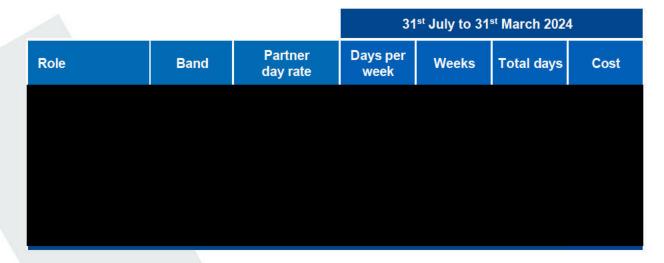




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## Technical and engagement support for iterative development of the PCG Dashboard

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## Costing breakdown based on 30% discount rates

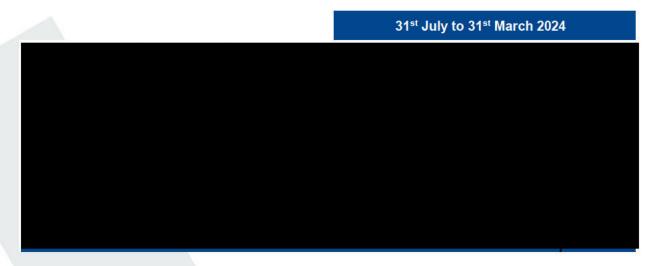
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## To find out more

If you would like to discuss any element of this proposal, please contact:

Transformation Partners in Health and Care



https://consulting.nelcsu.nhs.uk

