[2.3.2] – Service Delivery Model

It is expected that Services will be delivered in 3 phases:

- Phase 1 strategic planning and service design.
- Phase 2 service implementation and delivery.
- Phase 3 learning and dissemination, lessons learnt, toolkit development, and final report.

Please explain how your proposed Service Delivery Model will operate. Your response should include as a minimum:

- How your Service Delivery Model will be structured to provide the Services, including (if applicable) the use of Key Personnel and/or Sub-contractors. Detail how your Service Delivery Model will enable you to support, Vanguards and Vanguard Partnerships.
- How your proposed model will ensure delivery of the Services nationally to all 15 Vanguards.
- Detail how your Service Delivery Model will enable you to support Vanguards with differing levels of maturity and how your delivery of the Services will be flexible to meet the needs of these differing levels of maturity.
- Detail how you will approach the delivery of the Services so that Vanguards are able to access and benefit from the Services and the expertise of the Key Personnel. Please include examples of tools that you would use in the context of the Services and their purpose.
- Outline how you will ensure a consistently high standard of delivery of the Services to all Vanguards and across all Vanguard areas.

Your response will be assessed against the extent to which it demonstrated the following evaluation criteria

- Evidence that your Service Delivery Model is structured to deliver all elements of the Services including tailored support aligned to the differing levels of maturity of each Vanguard/ and Vanguard Partnership.
- Evidence that your Service Delivery Model incorporates the learning and change requirements of the Vanguards, in order to promote dissemination of knowledge, best practice, lessons learn, change management and education in relation to delivery of the WorkWell Services.
- Evidence of your ability to deliver the Services to all fifteen (15) Vanguard on a national basis, noting that these locations could be in any NHS Region within England.
- Evidence that the Services you will provide will be flexible and allow differing levels of support, education and learning, dependent upon the maturity level of each individual Vanguards.

• Evidence that you will ensure that the Services are delivered to a consistently high standard to all Vanguards, irrespective of their individual level of maturity and/or geographical location.

Response Limit – four (4) pages, excluding diagrams.

Responses must be presented using Arial font size 12 (English Language and black typeface) and single line spacing.

Supplier Name	WorkWell Together – a partnership of PA, Mutual Ventures and
	Collaborate

Service Delivery Model: the structure of our Service Delivery Model draws on lessons learnt from delivering similar programmes across our consortium; the detail provided in the specification; and our knowledge of DWP, DHSC, local health systems and employability challenges. We have also validated our thinking with several ICBs that we know well, to see how it works with the thinking behind their submissions. Our service delivery **design principles** will ensure our support to Vanguards and Vanguard Partnerships to build user-centred, place-based, and evidence-led solutions, will result in a model that is:

- human centred, emphasises how the system can change to support the people it serves so that people who want to work can do so.
- **prioritises learning**, with test-and-learn tools and techniques for rapid review cycles and continual improvement, without ever assuming we know the answer already.
- thinks in systems, seeing the big picture and connections across services or silos, and between practitioners and partnerships.
- **nurtures change** using leading practices in change management and collaboration to catalyse change and spread and share learning.
- evidences impact by helping identify the metrics and measures to test and evidence change so partnerships can do more of what works and change what doesn't.

We've called our team '**WorkWell Together'** because our partnership will provide an integrated National Support Team (NST) that will work seamlessly alongside the joint DWP/DHSC team, regional leads and engage all 15 Vanguards, to genuinely help people with disabilities and ill-health to start, stay and succeed in work.

Phase 1: Our Service Delivery Model will evolve over the course of the Programme to best ensure delivery of support to the Vanguards, DWP, DHSC, regional leads and wider stakeholders. The first iteration, shown in *Figure A*, focusses on strategic planning, using PA's proven excellent project inception skills and experience. We will:

- Establish ways of working building on strong existing local relationships with joint DWP/DHSC colleagues, creating a shared understanding between all interested parties to drive collaboration between national/regional/local levels, and build further trust in the WorkWell Programme.
- Set up the leadership through our key personnel, who are PA's Partner lead, [Redacted], and assignment manager, [Redacted], plus the Chief Executives of consortium partners, [Redacted] (Collaborate) and [Redacted] (Mutual Ventures). Our key personnel will draw on resources available across their organisations.
- **Create an integrated digital platform** using [Redacted] tools already in use and familiar to ICBs, as well as by using [Redacted] and [Redacted]. This provides powerful functionality to automate and accelerate data manipulation and integration, providing visibility of progress and reducing time spent chasing reporting from 15 Vanguards (*Figure B*).
- Stand up a proactive PMO function to deliver across the two-year programme with work breakdown structures, scoping statements and detailed programme plans and integrated reporting to your existing governance on progress and benefits. We will provide assurance on Vanguard PMO capabilities, as part of the maturity assessment, and support them with easy-to-use templates and dashboards.
- **Implement feedback loops** to ensure Vanguards consistently receive high standards of support, measured against our quality plan, and can report satisfaction levels, request support, or raise issues or complaints if quality standards are not met for any reason.

To understand differing levels of Vanguard maturity and to enable flexibility in how services are delivered, we will complete an initial discovery phase to:

- **Confirm relationship managers** for each Vanguard, with a point of contact for engaging stakeholders and two-way insight exchange between places and the programme.
- Analyse the context by reviewing Vanguard applications/agreements and using data tools like [Redacted], [Redacted] and [Redacted] to understand the local economy and people.
- **Run discovery sessions** with local teams to validate assumptions, baseline needs and ensure readiness for open and honest maturity assessments that focus on their local learning, support, and delivery objectives.
- **Meet Vanguards where they are,** being non-judgemental about their starting point and treating them as partners and co-creators in the Maturity Assessment Matrix
- Use the discovery engagement to inform the service design and delivery in Phase 2 and learning focus in Phase 3, tailored to emerging, mature and leading Vanguards.

Our Delivery Model is structured to ensure all 15 Vanguards independently and collectively engage, and therefore benefit from, the delivery of services. The community in the Programme will have helped to shape and design the support offer and learning syllabus meaning the support menu will offer services that they want to draw down. We will have a central team based in Manchester and London, and a dedicated relationship manager for each group of Vanguards, giving us reach across England and the ability to support the Vanguards - irrespective of their location - both in-person and remotely.

Example tools in the context of services will include strategy tools (like [Redacted] and [Redacted]); programmatic tools (like [Redacted]); and tools for service delivery (such as [Redacted]). Our tools will be made available flexibly with different channels for accessing them, such as briefings, webinars, coaching and training.

Assurance on the consistently high standards of service delivery to all areas will comes from feedback loops and additional independent challenge and support from:

- An expert panel, with c.8-12 members covering employment, mental health, MSK, system change and public service reform. Although we have informally approached contacts within our network and confirmed good interest, formal invitations will be agreed with you.
- A lived experience panel of those delivering or receiving support to further develop detail of that sketched out in a typical service user journey.

Evidence of capturing learning and change: in just eight weeks, PA led a consortium that consulted with 1700+ care workers, employers, and learning providers using surveys and interviews to understand pain points and create a visualisation of a new Care Certificate delivery model (example in *Figure F*)

Phases 2 and 3 Service Delivery Model: We will run Phases 2 and 3 concurrently to support service delivery, learning and dissemination. Our rapid review cycles and iterative development supports fast, effective, and shared learning. Waiting until July 2025 risks a loss of formative learning and engagement. We can add value by capturing learning in real time and gathering data and evidence to support longer-term discussions, decisions, and impact.

Phase 2: Test (Work Well Services): Our discovery enables an intelligence-led streaming of Vanguards thematically into between 3-5 groups, i.e. by target cohorts (*see Figure C*). This model aims to maximise peer learning and shared problem solving. Each group will have a 'Relationship Manager' (RM) supporting the delivery, monitoring, and reporting on an ongoing basis. As overall Relationship Manager, [Redacted] will support the RMs and provide a point of escalation. The RM's key point of contact will be the WorkWell SRO within a given Vanguard, with whom they will have regular engagement to build trusted relationships.

We suggest these groupings should **not** be geographically based, as physical proximity is not the best determinant of similar challenges and therefore maximised learning. Most of the intra-group

interactions will take place remotely, reducing time and cost for Vanguards and allowing scaled representation. These replicates buddying approaches we have developed for other system transformation programmes.

Our Service Delivery Model **provides flexibility to meet the needs of Vanguards with differing levels of maturity.** Our two-week delivery cadence allows for differing levels of maturity, which we have shown indicatively in Fig. H. The flexible programme allows for weekly touchpoints and both individual and cohort engagement, with the forward programme agreed with RMs. Vanguards with lower maturity will be offered support from Collaborate as our improvement partner. Their organisational purpose is enabling collaboration, and focussing on these Vanguards will accelerate their journey and delivery readiness, helping more vanguards to step up to maturing partnerships. This is also a key reason for our model not seeking to group Vanguards by maturity – the maturity will change over time and will likely progress at different rates - whereas the thematic focus will remain consistent. We will expect leading Vanguards to provide support to others outside of the cohort group sessions, as mentoring is a useful way to further develop in more mature systems.

Phase 3: Learn: Running Phase 3 concurrently to Phase 2 is more iterative and dynamic, which we believe will greatly enhance the learning element and overall impact. We will deliver a draft WorkWell toolkit every quarter starting from a version in December 2024, followed by quarterly iterations. This will ensure learning and dissemination starts from the outset.

Within each quarterly cycle the level of relative effort required by the Vanguards, and the level of support required, would fluctuate to coincide with the creation, dissemination, and discussion of the toolkit iterations, as shown illustratively in (*Figure D*). This will be delivered by our Learning Lead, [Redacted], supported by two Learning Managers, who will work with the Vanguard Learning and Change Managers to co-create the learning programme.

Value add: we will offer to match non-Vanguard ICBs with participants addressing similar challenges so that more of those who made an application can benefit. These [Redacted] will be engaged in the Learning and Change Network and provide a counter-factual control group.

As themes emerge from delivery, we will bring in topic specific SMEs to create tailored content. Our breadth of staff experience and networks means we can reach the right people to add the most value and innovation to the Programme. For example, we would be able to engage EMIS, one of the largest suppliers of healthcare technology, regarding the work they are doing to enable processing of Fit Notes on GPs' systems, and whether second Fit Notes should automatically trigger an additional workflow that signposts to supporting services.

We will also engage our HMT Better Business Case Certified SMEs to inform data capture that will enable findings later in the later learning events to demonstrate impact. Whilst this Programme is targeting improving the lives of 59,000 with c.£50m across systems, we know that the challenge and opportunity is much broader. We will help you get a head start on 'what next?', for example to sustain services post funding and spread to the fast followers.

This model will enable us to promote dissemination of knowledge, best practice, lessons learnt, change management and education early. We will:

- Create a playbook of collaboration and service design support offers from existing tools and templates to use in areas like identifying key players, system mapping and population health management data approaches. The programme curriculum of learning and support materials will provide for both self-directed learning and peer to peer sessions.
- **Develop the Learning and Change Network** based on terms of reference, model agenda and forward programme which will be updated during discovery with the Vanguards.

- Provide a dry run of a Learning and Change Network event to share the draft findings of the Maturity Assessment Matrix reports. This will ensure the whole core team and regional leads understand the baseline, in addition to obtaining feedback on how to best to run the Network before rolling it out to the Vanguards.
- **Create monthly webinars on topical issues** like policy changes for people to come together online, and provide additional collateral for self-directed learning and reflection, such as a podcast series to tell stories from those impacted by the programme.
 - Run in person Learn and Change Network events for the whole programme in:
 - October 2024: for c60-90 people before the launch of Phase 2 to share actions plans;
 - Four quarterly events from in 2025: to share progress and iterate the WorkWell toolkit;
 - March 2026: to end well to celebrate achievements and transition to the next phase.

Each session will provide opportunities for in-depth knowledge exchange and community building. We will host sessions in different locations, including our Global Innovation & Technology Centre near Cambridge where we will focus on innovation support.

Our recommendation is to use the **Future NHS Collaboration Platform for digital material storage and as an additional communications channel**. Set up to help spread and scale learning by connecting peers across health and care to communicate and share professional knowledge it has over 3,500 workspace communities. It provides a safe and secure platform and will continue as a resource beyond the pilot programme.

This Service Delivery Model provides flexibility to meet the needs of Vanguards with differing levels of maturity. The iterative development over time enables 'scaffolded' support for Vanguards with lower maturity levels, so they can engage and contribute more than they otherwise would. As described above, some of the learning and support materials will be self-directed, enabling Vanguards to access and learn in a way that best suits their needs.

To ensure consistent high standards we will use a Learning Lead to provide oversight and support to Learning Managers and learning activities. [Redacted], as our Partner in charge of the assignment has ultimate responsibility for the quality of our delivery, and would work with our Programme Director, [Redacted], and [Redacted], our Relationship Management Lead and [Redacted], our Learning Lead to address any potential issues identified. To ensure that any potential issues are being identified as early as possible within Phase 1 we will implement feedback loops. Regular feedback from the Vanguards on the services being provided, what has gone well and what can be done better will inform our Strategic Reviews. This will also include innovation and improvement opportunities. We will also obtain feedback on a regular basis from the Regional Leads who may have a different visibility across a range of working groups and therefore be able to provide challenge and insight into the consistent high quality of the delivery of services. Figure A – Service delivery approach (iteration v0.1)

[Redacted]

Figure B – reporting example

[Redacted]

Figure C - intelligence led streaming of Vanguards

[Redacted]

Figure D – iterative development of WorkWell toolkit

[Redacted]