



The Development of Ways to Wellness

'At scale' social prescribing service for people with
long-term conditions in Newcastle upon Tyne

and

The first health service funded through a 'Social
Impact Bond' investment

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The Development of Ways to Wellness

1. Introduction

The purpose of this paper is to describe the development phase of the Ways to Wellness (WtW) service, specifically how this unique service came together as the first health service in the UK, funded through a social impact bond (SIB) investment. WtW is a social prescribing service for people who live with long-term conditions in the west of Newcastle upon Tyne in the North East of England. This paper discusses the key elements that led to WtW successfully entering its operational phase in March 2015 following a journey that spanned four years, beginning in March 2011.

Many of the key people involved in WtW's development phase contributed to the generation of ideas and content for this paper, namely Philip Angier, Jo Curry, Chris Drinkwater, Peter Deans, Sandra King and Andrew Walton.

2. Audience

We expect this paper to be of interest to those considering or undertaking the development of a social prescribing service, a social investment funded service, or both, in health or another publicly-funded area. The audiences will likely include:

- commissioners of public services, such as Clinical Commissioning Groups (CCGs), National Health Service (NHS) England, Public Health England, Local Authorities (and equivalent local government bodies outside of the UK)
- voluntary, community and social enterprise (VCSE) sector organisations
- other NHS bodies (such as organisations involved in primary care transformation and new models of care)
- social investors (also known as impact investing or social finance)
- consultants and intermediaries involved in development of impact investing

The current momentum around social investment, along with the transformation of primary care and, more broadly, health and social care services in England, suggests that others are likely to find Ways to Wellness' insights and experiences valuable.

3. Application

The value of the WtW development story lies in the application of the collective experience and knowledge of those involved, tailoring it to the circumstances of others who wish to benefit from the learning. Interpreting and generalising this collective knowledge provides an initial lens through which the context of another project can be viewed, allowing the relevant learning to be identified.

Thus, the information alone is of limited value without the translation and guided application of the relevant learning to the particulars of another project and its context. Nonetheless, this paper aims to begin this process through describing and analysing the collective experience and knowledge that has emerged from the development of WtW.

4. The Early Scoping Phase

4.1 'Kissing Frogs': Finding Alignment of Assets and Opportunities

WtW went through an initial scoping phase of several months starting in March 2011. Voluntary Organisations Network North East (VONNE) commissioned consultants Peter Deans and Philip Angier to identify possible options in the North East of England that might be appropriate for SIB funding. They focused on identifying an issue or unmet need that, when addressed, could have the potential to result in releasing cashable savings from a commissioner(s)' budget. They determined that this would be best achieved through identifying an unmet need that could be delivered at scale by VCSE organisations.

4.2 The Foundations of Ways to Wellness

A critical degree of alignment of local assets and opportunities (see Figure 1) coalesced in the idea that would become WtW – a social prescribing service (that otherwise would not be funded) for people with long-term conditions living in the west of Newcastle, delivered by Link Workers and based in a VCSE organisation.

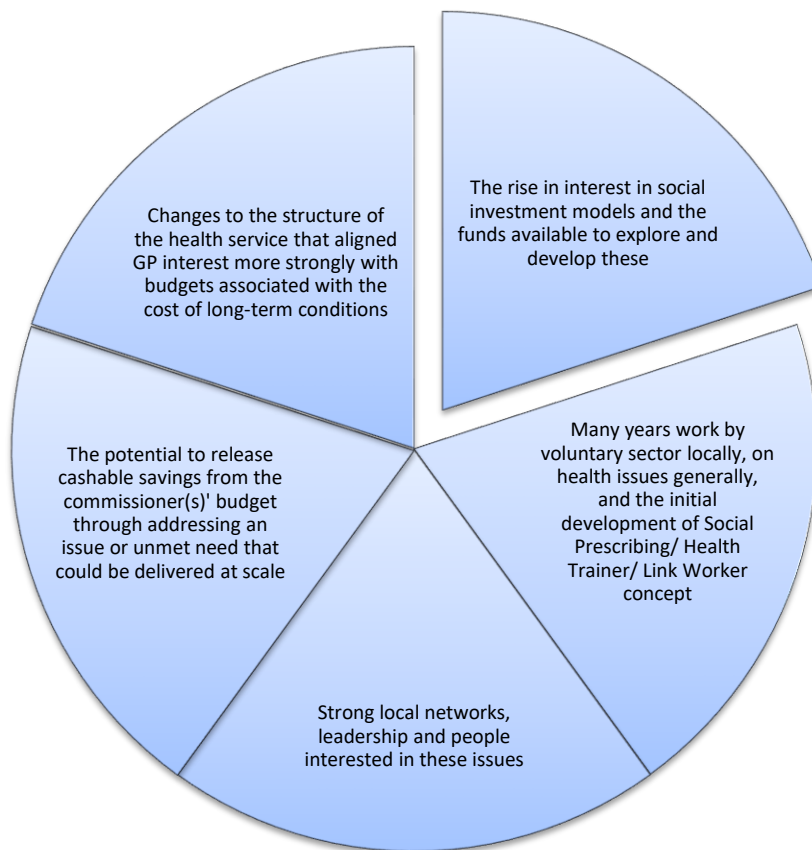


Figure 1: The Foundations of Ways to Wellness: Local Assets and Opportunities

4.3 A Gem of an Idea

The essential elements of the intervention approach were established in the early development phase of WtW. Through the long design process, the service model

underwent numerous iterations and the early clarity of the intervention approach allowed for re-shaping the model without losing the core purpose. The strength of the idea, the need it addressed, and the nuanced understanding the development team (with input from key stakeholders) had of the approach, meant that the WtW service model was developed intuitively and flexibly, whilst ensuring that the core elements were not compromised. Furthermore, the degree of unmet need and the strength of the evidence base for the intervention approach withstood numerous challenges and modifications.

5. The 'What': Development Phases

The milestones and activities of WtW's development (Table 1) provide a framework for a later discussion of the success factors and lessons learned in this process.

Table 1: Ways to Wellness Development Phases

Early phase development [2 years]

Exploring options and ideas	People coalescing	Development funding raised	Initial 'home' for the work: VONNE
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Intense development period [2 years]

Appointment of project director and engagement of consultants	Creation of a steering group	Keeping the voluntary sector briefed and 'on-side'	Keeping the primary care community briefed and 'on-side'
Engaging with Newcastle West CCG	Developing and refining the financial model	Exploring and agreeing possible metrics	Producing and consulting on service delivery model
Procuring service providers	Attracting and negotiating with investors	Developing an information technology management system	Understanding Information Governance requirements
Policies, referral criteria and processes	Finding evaluation partners and devising a programme	Raising additional grant funding	Deciding organisational form, creating it and recruiting trustees/ directors

Contracting and pre-launch phase (6 months)*

Recruiting staff	Contract negotiations	Finding an office	Recruiting and training Link Workers
Maintaining stakeholder confidence	Communications management	Project launch planning	Contractual pre-conditions compliance

* overlap exists in some activities in the 'intense development period' and the 'contracting and pre-launch phase'

source: adapted Deans, P. & King, S. (2015), Ways to Wellness Timeline.

6. The 'How': Success Factors

This section explores how the key actions and milestones were achieved, highlighting those factors considered to be the most critical to WtW's successful development.

6.1 A Strong Development Team

The core development team of four – Angier, Deans, Drinkwater and King – brought together an array of critical skills, experience, contacts and credibility including:

- project management, business and operations management, contracting and procurement, financial modelling and negotiation skills
- understanding of public health issues
- experience, credibility and contacts in the VCSE sector, primary care, NHS commissioning, academic, health policy and planning (locally and nationally) and financial sector

The core team were given a high degree of latitude and trust to develop the project as they saw fit. The team managed to shift effectively from innovative thinking to operational planning, as needed. The project manager maintained frequent internal and external communications, with the aim of fostering external trust and engagement.

In addition, all the members of the core team shared a number of qualities—they were optimistic, resilient and very motivated to be part of WtW's ambition. These traits were a critical factor in WtW's successful development, essential in overcoming numerous significant challenges. This was captured by one of the WtW development team who described their approach as, “a refusal to stand down”.

6.2 Effectively Involving Stakeholders

6.2.1 Steering Group and Critical Friends

The core WtW development team invited key stakeholders (including the CCG) to form a steering group. Once an early service design prototype was developed, four 'critical friends' sessions were held, at which different key groups were invited to provide input into the service design. These approaches brought an element of 'co-design' to WtW's development, strengthening the design and increasing awareness, engagement and commitment amongst key stakeholders at an early stage.

6.2.2 Host Organisation – Voluntary Organisations Network North East (VONNE)

The host organisation, VONNE, brought support, structure and credibility to WtW. VONNE's role as a representative body of the VCSE sector in the North East of England is a position of impartiality in terms of service provision, which extended to WtW. If WtW had been hosted by a specific VCSE organisation during development this might have limited engagement of stakeholders, such as commissioners, due to the perception of favouring a single service providing organisation over another.

VONNE supported the developers in practical ways, while allowing them a high degree of autonomy. This enabled the developers to use a pragmatic and flexible project management approach.

6.2.3 Leveraging Motivation and Passion

Those closely involved in WtW's development felt that one of the critical success factors arose from the motivation and passion of key players and stakeholders. When the WtW development team identified the existing potential in the confluence of

local assets and opportunities (section 4.2 and Figure 1), they leveraged this by effectively harnessing the existing motivation and passion of the individuals and organisations involved. Many were motivated by and/or passionate about one or more of the following:

- (a) an intervention approach that had been locally piloted, using a person-centred approach to long-term conditions, with the aim to address social determinants of health and health inequalities
- (b) the opportunity for VCSE organisations to provide an intervention that has the potential to be more effective (cost and quality) than statutory provision
- (c) innovation through a pioneering contracting and funding structure – the first to receive social impact bond investment in health based on outcomes-based contracting and collaboration across VCSE, public and private sectors

Although several of WtW's supporters and stakeholders were from other parts of England (including the Cabinet Office, Big Lottery Fund, Department of Health, ACEVO, Social Finance and social investors), the relatively smaller geography and population of Newcastle upon Tyne within the North East of England, allowed for closer professional connections amongst key stakeholders. In some cases, the development team was able to build on existing long-term relationships. This likely increased the access, credibility and trust amongst those who contributed to WtW's development.

6.3 Simplicity and Validity of Outcome Measures

SIB funded services are typically matched with outcome-based payments, both of which call for a robust measurement approach (Ecorys & ATQ, 2015)¹ and carefully negotiated outcome metrics. Operational feasibility required outcomes measures that were as straight forward as possible and designed such that they could be easily translated into performance indicators. It was also important that the chosen outcome measurements capture changes attributable to the WtW intervention.

Bridges Ventures (the social investor), the CCG and WtW all had requirements for the design and calibration of the outcome measures. For Bridges, it was critical to have one outcome measure that could deliver payments in the shorter term such that they could feel comfortable with the repayment timelines for their SIB investment – this was a patient-report measure of wellbeing. For the CCG, a longer-term outcome measure would allow them to realise savings to fund the outcome-based payments – this was a measure of secondary care costs compared to a matched cohort. For WtW, it was critical that the outcomes would accurately measure the anticipated benefits of the intervention, without causing perverse incentives that could drive the intervention focus in unintended directions and potentially compromise service quality.

Independent, unbiased, respected opinion on intervention approach and outcome measures allowed for negotiations to proceed and decisions to unfold at key moments in development.

¹ Ronicle, J. & Stanworth, N. (2015) Commissioning Better Outcomes Fund Evaluation: Ways to Wellness Social Impact Bond -- The UK's First Health SIB.

6.4 Choreography of Incentives

The WtW delivery model was designed to optimise incentive alignment amongst all parties involved so that everyone would be working towards achieving the same high-level outcomes, namely, improvement in the health and well-being of patients with long-term conditions and a reduction in costs for the NHS. This alignment was considered essential to support a common purpose and shared approach to problem-solving during anticipated challenges inherent in delivering a pioneering service such as WtW. To reduce provider organisational risk and perverse incentives, the provider payments largely incentivise referral generation and operational fidelity and efficiency rather than outcome measures.

7. The 'How': Lessons Learned

7.1 Innovation Causes Discomfort

The innovative aspects of WtW – the first social impact bond funding in health, scaled-up social prescribing, seven-year NHS contract, outcome-based payments, use of a 'special purpose vehicle' and multiple VCSE providers – meant that all the parties involved were required to adapt aspects of their normal business practices. Furthermore, the financial model became increasingly complex and, as a result, somewhat opaque to those who weren't closely involved in the development. Involvement in unknown, untested and complex approaches naturally resulted in a sense of risk and discomfort amongst individuals and organisations involved.

The WtW development team noted that senior managers tend to get involved and commit to innovative approaches based, in part, on the trust they have in those involved. Building and maintaining this trust, particularly in the early stages, was key to WtW's successful development.

7.2 Adapting NHS Standard Contracts and Information Governance

NHS commissioning organisations, such as CCGs and Commissioning Support Units (CSUs), can face structural and cultural limitations in trying to adapt ways of working to enable SIB funding and outcome-based contracting. Involving the CCG and CSU at earlier stages of the development might help avoid some difficulties.

Retrofitting the NHS Standard Contract to the WtW contract and service model was not straightforward or comfortable. It was a protracted process that added unexpected time and cost to the development and mobilisation phases of WtW. Many of the elements of the NHS standard contract, though not relevant to WtW, remained part of the conditions of the NHS contract. This required a degree of faith and trust amongst all the non-NHS parties involved.

WtW's handling of confidential patient data (Information Governance) was subjected to an unexpectedly high level of scrutiny and compliance. This added significant costs and time to the late development phase.

7.3 Prolonged Development Timeframes

Innovative work often results in extended timeframes and other unanticipated costs and challenges – WtW was no exception. Unexpected delays stretched resources and goodwill to a point where the project became fragile. Numerous individuals and

organisations involved devoted a significant amount of unpaid time to supporting WtW, particularly when the development funding ran out approximately six months prior to when contracts were signed.

8. Next Steps

The Ways to Wellness model provides an example for developing a community-based social prescribing approach using social investment. As the WtW service builds its operational expertise and experience, the model will be further tested and adapted, providing increasingly valuable information. As WtW builds evidence that demonstrates the benefits of the approach, WtW aims to share the model such the fidelity of the WtW model can be preserved and other communities can benefit.

As the market for social impact bonds and other forms of social financing matures and the evidence base in social prescribing at scale builds, the development of services such as WtW may experience a shift from innovation to standard business practices. It is hoped that the investment of time and other development resources will reduce accordingly.

9. Summary

In summary, the development of WtW has been an exercise in innovation, requiring a strong idea grounded in local assets and circumstances, a tenacious and passionate team, and a certain amount of luck. The description of the success factors and lessons learned contained in this document will provide insights for others who wish to go down a similar path. But, the real value is likely to be derived in translating the nuanced understanding and experience from WtW to the local context of other potential endeavours. The Ways to Wellness consultancy team is available to discuss how we can help to support this process through sharing our learning and knowledge.