

CSDI

Care Services

Development Initiative

“Project Management Framework”

Draft version 05 – May 2005

Contents

1. Background	2
a. SCIE's working arrangements with CSD	
b. The Project Management Team	
c. Objectives	
2. Principles of project initiation (Stage 1)	3-4
a. Preparation: Scoping, process and risk management	
b. Involving service users	
c. Equal Opportunities Policy	
3. Commissioning (Stages 2-4)	4-8
a. Selecting Consultants, Selection Process & Criteria (Stage 2)	
b. Commissioning document	
c. Commissioning brief	
d. Awarding contracts (Stage 3)	
e. Managing the contracting (Stage 4)	
4. Completing the project (stage 5)	8-9
a. Independent Challenge	
5. Quality Assurance	10-12
a. Principles & objectives	
b. Review methodologies and standards	
c. Assessment criteria	
Bibliography	13
Appendices	13
• <i>Appendix 1 = Project Scoping Pro Forma</i>	
• <i>Appendix 1A = CSDI Project Development Plan</i>	
• <i>Appendix 1B = CSDI Project Brief</i>	
• <i>Appendix 2 = Duties & Responsibilities of Consultants (Preferred Providers)</i>	
• <i>Appendix 3 = Terms & Conditions and Commissioning Contract</i>	
• <i>Appendix 3A & B = Letters (A= Letter for Pool & B = Letter of specific project)</i>	
• <i>Appendix 4 = QA reporting form</i>	
• <i>Appendix 5 = QA checklist</i>	

CARE SERVICES DEVELOPMENT INITIATIVE PROJECT INITIATION & OPERATING PRINCIPLES

1. Background

The Care Services Development Initiative (CSDI) is a partnership between the Social Care Institute for Excellence (SCIE) and the Department of Health's Care Services Directorate (CSD). It provides an opportunity to combine SCIE's knowledge-based approach with strategic development capacity for care services, which will have a real impact on policy formation and influence on the delivery of services.

1a. SCIE's working arrangements with CSD

SCIE's current government sponsors are the Department of Health. The use of the word sponsors in the document refers to the Department of Health.

1.b The Project Management Team

- The project management team is made up of 8 members – 4 from SCIE and 4 from CSD, DH but the overall core management of the project is held by Amanda Edwards, SCIE and Rachel Arrundale, CSD, who provide supervisory and line management support to the Project Manager
- All members are to commit to the fortnightly meetings alternated between SCIE's Goldings House and DH's Wellington House, to avoid imbalance of power when making decisions or dealing with conflict
- Joint coordination of CSDI projects has been agreed, hence the key purpose of the partnership
- Members are to be open and respect other's opinion and space.

1c. Objectives

The Initiative has identified four themes in which it is interested in taking forward work and underpinning each of these is our objective to promote and expand partnership working:

- Creating integrated service improvement in care services
- Putting service users at the centre of social care and health services
- Making a difference 'on the ground' – perceptibly improving the experience of service users
- Making a significant improvement in the public perception of social care

2. Principles of project initiation

At the beginning of a project, the project support officer (PSO) should produce a 'Project Initiation Document (PID) that defines the project, records the project justification, and sets out the budget (cost) and timetable plans. The PID should also include the following:

- Organisation and responsibilities outline
- Quality assurance policy
- Communication plan.

Stage 1 – (Preparation)

Scoping:

Project scoping is part of the early planning process before the project brief is written. Here underground work or research is done to find out what work is already out there in the specific subject area and, providing background information relating to published work, experts and policy documents to help write the project and commission brief. The scoping exercise also helps in outlining and breaking down the project phases, timeline, task to be done, the process required and output.

(See: CSDI Project Development Plan, Appendix 1; and Project Brief, Appendix 1A)

Process:

- Clarify and agree the objective and product for each commissioned project
- Carry out a scoping exercise that will draw on internal expertise, stakeholder, and sponsors views
- Project Lead (PL) will draw up a project brief, outlining the aim, scope methods, plan, link with other works, timescale, budget, final product and publication
- The PSO will collate and submit the PID to the project team for approval
- Interim reporting stages will be agreed with project leads and project team for progress, risks and any variations from the original brief
- Ensure that project is endorsed by SCIE's Participation Adviser
- PSO to log prospective project to avoid duplication and for quality control purposes
- PL must ensure close working with stakeholders, sponsors, services users/carers and the final product is a synthesis of knowledge from a range of sources
- PSO and PL must ensure all products are assessed, reviewed and adhere to standards, procedures, internal checks, plans, integration test, user/carers test

Risk management:

- Risk is a function of how likely an undesirable event will happen, how likely that event will cause loss; and how serious is that loss
- Risk management tackles these by reducing the likelihood of the event happening, reducing the likelihood of an accident or loss occurring and/or reducing the amount of loss
- The PSO must log any risk, how it was resolved and lesson learned.

2b. Involving service users

CSDI wants to work together or in partnership so people can have a full part in the work done and not only be involved in consultation exercises but also in the project.

2c. Equal Opportunities Policy

CSDI wants to make sure that a range of groups – older people, disabled people, lesbian and gay people, black and minority ethnic people, children and young people, – are included in the work SCIE does. It will make sure that equalities law and good practice guides are promoted in SCIE's work.

Stage 2

3. Commissioning

Below are the reasons for developing CSDI's commissioning guideline:

- Promoting fair dealing/equal opportunities
- Ensuring quality and control of work
- Achieving best value for money
- Managing our budgets efficiently
- Facilitating the commissioning process

The following ground rules for commissioning is proposed:

- a project of £5,000, the project lead may allocate, with regard to established criteria
- a project of £5,001 - £50,000 the project lead invites proposals from a least 3 sources within the pool and make decisions based on established criteria
- for a project over £50,000 a formal tender process must take place with consultants in the pool i.e., interview or paper-panel
- the rest of the team will be advised of the value of all commissions through routine reporting of the work programme at bi-weekly lunch
- For invited and openly advertised proposals, these are not necessarily interviews, but consist of a discussion of all the bids, involving where possible, someone who is outside the commissioning process – 'peer review' – and decisions are recorded stating the grounds on which the decision has been made
- CSDI team will scrutinise the value for money for each proposal by considering consultants' expertise, rates charged, numbers of days work proposed. Final commissioning protocols will cover this aspect and ensure that correct financial controls are in place.

Independent Assessment

Independent Assessment may be employed at commissioning stage for projects above £30,000 in value, or where it is a complex project. The decision about what constitutes, especially complex project, will be made by the tendering team, in consultation with the project lead. At least two, and a maximum of three, independent assessments will be obtained. At completion stage, work may be independently assessed.

CSDI has agreed to maintain a pool of Consultants or Preferred Providers (see Duties & Responsibilities of Consultants, Appendix 2)

3a. Selecting Consultants (into pool)

Banding criteria

- Band C - £5,000 or less
 - Project Lead may allocate, having regard to established criteria (fairness, quality, value etc.)
 - Letter Agreement based on standard form, together with project proposal or brief, to be issued by CSDI and signed by consultant
- Band B - £5,001 to £50,000
 - Project Lead to invite proposals from at least 3 sources and make decision based on established criteria
 - Appointment to be approved by CSDI Project Team
 - Contract based on standard form, together with project proposal, clear timeline and budget, to be issued by CSDI and signed by consultant
- Band A - Over £50,000
 - Open Competition
 - Advertisement
 - Submission of tender
 - Paper proposal (and paper-panel shortlisting)
 - Sign-off by SCIE CEO/CSD Director

Selection Process & Criteria

- The degree of understanding of CSDI's requirements demonstrated by the bidder
- The appropriateness and quality of the method the consultant proposes to follow including the approach to the task and the proposed schedule and timetable of activities
- The expertise and experience of the people proposed to undertake the work
- The total cost including any significant, additional use of the CSDI's personnel and facilities etc, which each bidder's proposal would require.

Advertisement:

- Place adverts in 3 or 4 newspapers (including VOICE and Community Care)
- Each commissioning opportunity must have job description detailing at a minimum the duties, outcomes and responsibilities of the job, including a reference to Equal Opportunity, if applicable
- It should also contain statement about criminal record checks
- Have an enquiries contact and address for forwarding applications
- And a closing date.

Interested consultants should receive the following: Terms & Conditions, outline of duties and selection criteria.

The selection criteria must be based on:

- Merit, integrity, openness, fairness and impartiality
- Ensuring that sufficient information is made available to accurately describe the project and its selection criteria
- Submission of not more than two-paged essay outlining the usefulness of the project
- Suggesting options for new collaborative involvement, and product usage

Convening a selection board: The selection board mainly consists of the CSDI Projects team. The composition of the committee should generally be at least 3 members. Where appropriate an Independent Representative may be invited to be involved in the process. It is highly desirable that the independent representative is from DH and a service users or carers.

Information gathering: Only information that is directly relevant to the consultant's suitability for appointment should be collected. All personal information collected during the selection process must be treated as confidential. All information that is relevant to the selection process should be fully recorded. The selection recommendations are to rely on:

- Structured interviews, work samples, work tests, evidence of competencies, structured referee checks
- Consultants should be advised of the names of the selection board members, the interview format and any special aspect of the selection process prior to the interview
- Consideration should also be given to consultants requiring special assistance to participate in the selection process, e.g. wheelchair access to interview room, or signing for hearing impaired applicants.

Information verification:

- Proof of identity and professional registration (if applicable) is to be sighted by the board
- The selection board *must* verify the claims of the consultants in relation to achievements, employment history and other significant matters
- Referee checks are to be used in arriving at the selection recommendation and must be undertaken, at least, in relation to the preferred consultant.

The expertise and experience of the consultant: It is important for CSDI to set out in its bids the extent that each nominated person will be involved in the project and what their role will be.

Detailed information requirements: The extent of information sought should be proportionate to the scale and cost of the project. The nature of the information required will be virtually determined by the selection criteria and the terms and conditions. Submissions from the consultants should be limited to a maximum number of pages to save costs for all parties.

Selection recommendation: The selection recommendations must be documented in a manner that clearly explains the decision making process and be in a form that allows it to be reviewed and should not merely state a score or rating of the highest ranked consultants. If the board is unable to reach a unanimous decision, the board member in disagreement should prepare a minority report detailing areas of disagreement and provide an alternative recommendation.

Confirmation of selection into pool: The selection board makes the final decision on appointment and where appropriate, based on the report and recommendation by the Independent Representative, a letter (see Letter for successfully membership into CSDI pool, Appendix 3A) is sent to the successful consultants that they have successfully been registered to the pool, stating that the pool will be reviewed 3 yearly and contract will be awarded as and when a specific area of work arise.

Post selection: At the point of offer, if not required earlier:

- The successful consultant must be given an opportunity to declare any health condition.
- Feedback is to be provided to unsuccessful consultants upon request.

Once the Consultants' Pool has formed, the following must be done when awarding contract for a specific area of work:

- Drawing up the Project Initiation Document (PID)
- Select consultant from pool
- Awarding the contract
- Monitoring progress
- Completion of commission

3b. Commissioning document

This document will be used for all CSDI commissions. The contract (see appendix 3) is an agreement between CSDI and the consultant with following 4 items:

- Terms & Conditions
- Project Brief
- Payment & Work Schedule
- Administrative information

3c. Commissioning brief

Below are a few steps in the commissioning process, from producing a project brief to delivery of the final Report/Paper/Findings:

- Appointment of budget-holder and project lead
- Preparation of project budget and timetable
- Approval of budget and timetable
- Negotiation of project brief
- Allocation of project to appropriate associate or consultants from pool

Stage 3

3d. Awarding contracts

- As soon as a decision has been made to award a contract for a specific project, the CSDI Project Manager should write to the Consultant and include words along the lines of (see Letter for specific project, Appendix 3B):

“We are pleased to award the above mentioned commission/project to you, subject to contract. Our project management team will be sending you a draft contract for review very shortly.”

- The Project Lead should promptly pass the project proposal or brief, the Consultant’s contact details and any other specifics about the commission/project to SCIE’s Finance Team. SCIE’s Finance Team will then produce and send out the draft contract
- Corporate Services, will handle the negotiations (though may need to refer to the Project Lead on specifics about the project)
- The Project Lead will remain the point of contact for the project but the Project Owners will be responsible to authorise payments under the contract. The Project Lead needs to be familiar with the terms of the contract and the payment schedule
- Once CSDI Project Manager has received the signed contract, payments may be made to the Consultant in accordance with the terms of the contract.

Stage 4

3e. Managing the contract

In all cases the Project Lead will manage the direction and output of the commission and Finance will manage the operational aspects of the commission (issue of letter agreement or contract, payment and work schedule and terms & conditions).

Stage 5

4. Completing project work

- Once CSDI is satisfied that the project work is ready to go to sponsors, the project support officer will send a copy to the relevant people. This signifies that the content of the work has been internally quality assured and signed off by the CSDI project team
- This is the opportunity for sponsors to comment, primarily on content – the key question being, “Has the projects achieved what it was set out to do?”
- At the same time, where appropriate, the project will be sent out for independent review. CSDI intends that all publications will be scrutinised by writers with expertise in writing for print or the web and this will be in progress
- CSDI project team will meet with the sponsors on a quarterly basis to determine the viability of the project or new ones or for regular update

- On receipt of comments, including from an independent review where applicable, CSDI will revise and return for final comment, indicating how and whether comments have been taken on board
- Sponsors should then be able to indicate that the commission is complete. Representatives will be from DH's Social Care Modernisation Branch
- CSDI will then proceed to publish and disseminate
- Payment of final balance will be paid upon project completion.

4a. Independent challenge: This is an important way of ensuring rigour and clarity of CSDI's work. The means of achieving this for work of an academic/research nature is through peer review. For example, Research in Practice, use peer review system

- Both proposals for and completed commissions could be peer reviewed (however, it may at the commissioning stage will add to time) and this is the practice that is encouraged in the Department of Health Research Governance framework
- Some of our commissions may be small and may not warrant a peer review at the commissioning stage. Perhaps at this stage it may be sensible to limit peer review of proposals to those above £30,000 or whether the subject or complexity to warrant it. As our experience grows, so will our knowledge of when peer review of proposals will be helpful in promoting quality
- On receipt of (final) report an Independent Assessment may be sought.

5. QUALITY ASSURANCE (QA)

This QA policy is intended to be used to monitor, evaluate and improve the quality of work, ensure the reliability of tested delivery tools, and to evaluate the effectiveness of its project development in care services.

CSDI seeks to achieve these by:

- Creating a vibrant policy culture that provides facilities required for the efficient researched knowledge-based care services into the need for, access to, and delivery of care
- Optimising care services when making decisions and partnership formation
- Producing high quality policy capacity building in care service.

Terms & Reference (TOR)

- To advise and support CSDI in assessing and monitoring its projects
- To provide oversight, credibility, independent challenge, accountability, better product and transparency to CSDI stakeholders
- To take an overview of the commissioning process through receiving regular reports outlining decisions and rationale of tenders
- To provide CSDI's management team, project leads, sponsors and stakeholders with information on its performance
- To spot common themes emerging that will assist the development of CSDI's work
- To scrutinise critical decisions from consultation and advice on:
 - The purpose and focus of the development of CSDI
 - The content of CSDI's projects.

Values

CSDI strives to maintain the highest ethical, project development, commissioning and financial standards in all its activities. Underpinning its work is a number of fundamental values:

- Integrity and honesty
- Openness and transparency
- Accountability
- Fairness, equity and equal opportunity
- Respect for individual members' development aspirations
- A desire to produce well researched knowledge - based initiatives that contributes to care services.

Scope

All members are expected to accept individual and collective responsibilities for the quality of their own work and for personally following the guidelines in the CSDI QA.

5a. Principles & objectives

- To ensure that the quality assurance activities are comprehensive and coordinated and that appropriate information is reviewed and reported
- To establish, maintain, support, and document ongoing QA plan that includes effective and systematic mechanisms for monitoring, collecting and evaluating information about important aspects of CSDI's themes in order to identify opportunities for improving its ways of working
- To assist in improving care and identifying problems through the use of ongoing monitors by focusing on identification, assessment, correction, and follow-up problems that affect the progress of its work
- To implement corrective action when problems or opportunities are identified
- To follow up on identified problems to assure improvement and resolution
- Providers are responsible for establishing procedures for quality assurance. The engine of improvement will be the provider's own internal monitoring and evaluation of systems and services
- Equality, integrated in quality assurance procedures, will facilitate greater access to a diverse range of stakeholders and partnership.

5b. Review methodologies and standards

The following QA monitors should be quarterly evaluated to maintain standard of operation and development that are compliant. Data from each monitored area is collected, recorded and investigated. Where appropriate corrective action will be taken and documented. Monitoring will be continued to assure that the action taken was appropriate and resulted in correction of any problems found. Quarterly meetings are held to review the monitored area reports.

The partnership agreement is a central feature of CSDI's QA because it sets out the entitlement of all parties involved:

- The selection process for jobs and commissioning
- Assessment and reporting on key operational functions, e.g., Finance
- Resources

Meetings are held bi-weekly. These meetings are used to discuss issues, approve new project, updates, decision-making and reviews. Similarly, others involve convening meetings to updates sponsors, stakeholders, and dissemination of our work to wider audience.

5c. Assessment Criteria

Assessment will be done on a quarterly basis provided each area of work has defined QA assessment policy to monitor its progress consistently on a weekly or month-by-month basis.

What is germane in the case of CSDI, will be to carry out assessment against the themes, judgment by individual project aims and/or commissioning proposal. The assessment criteria will be based on:

- Aims: Is the topic clearly defined?
 Is the project clearly addressing the theme?
- Sampling: Is it likely that important, relevant studies or works were missed in the search for papers?
 Is the inclusion and exclusion criteria appropriate to the project?
- Results: Are results of all included studies adequately described?
 Are the reasons for any heterogeneous differences considered?
- Synthesis: Are attempts made to address the effects of any mission information?
 Are attempts made to take into account the effects of important biases?
- Conclusions: Are the overall findings clear?
 Are the major relevant outcomes considered?
 Are the conclusions drawn by the review justified?

The method adopted must address the issue of internal and external image of CSDI:

- To record decisions/actions at CSDI meetings and logged on project plan chart and ticked off as they are carried out – the project manager to ensure weekly review and update
- To create project database where information on CSDI projects are entered regularly and reviewed quarterly by the project manager
- To contribute to the quality of CSDI's work by advising on methodology, development and presentation
- To offer an overview of the operation of the commissioning process and of the quality of decision making at critical points in the development of CSDI's
- To ensure that CSDI's QA systems are in place and working effectively.

BIBLIOGRAPHY

- *“Quality Assurance Advisory Group”, Social Care Institute for Excellence, SCIE’s Board Papers 2003*
- *“Quality Assurance Plan”, Access Washington (Official State Government Website), 2003-04*
- *“Collaborative Arrangements”, University of Aberdeen, May 14 2002*
- *“Quality Assurance Guidelines”, Further Education & Training Awards Council, 2001*
- *“Assessing the Quality of Education”, The Quality Assurance Agency for Higher Education, 2004*
- *“Project Management”, University of Glamorgan, 2001, 1999*
- *“Quality Assurance Plan”, Access Washington (Official State Government Website), 2003-04*
- *"Danger makes men devout", W. Baldwin (in "Beware the cat"), 1584*
- *“Consultants as Partners in Care”, Royal College of Psychiatrists, 2004*

APPENDAGES

- *Appendix 1 = Project Scoping Pro Forma*
- *Appendix 1A = CSDI Project Development Plan*
- *Appendix 1B = CSDI Project Brief*
- *Appendix 2 = Duties & Responsibilities of Consultants (Preferred Providers)*
- *Appendix 3 = Terms & Conditions and Commissioning Contract*
- *Appendix 3A & B = Letters (A= Letter for Pool & B = Letter for specific project)*
- *Appendix 4 = QA reporting form*
- *Appendix 5 = QA checklist*