

South West Well-being Programme

Learning from Consortium Working
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The South West Well-being Consortium Approach

Introduction

Consortia for promoting health and well-being are not new. However, a great deal of valuable learning arising from their delivery often goes unreported. This learning often remains the personal knowledge of those with experience. This report aims to give an account of how SWWB programme worked as part of a consortium. Drawing upon the learning from participants, the study presents some key themes that can act as a basis for action by others.

1. Context: Consortium for health and well-being

As a format for service delivery, a consortium offers major attractions for both contractor and consortium members themselves. It reduces the number of contracts and streamlines the supply chain for the contractor. For the consortium itself, it brings larger contracts to front-line deliverers. Consortium members can better advocate for their shared goals; improve or innovate standards; create efficiencies and economies of scale; and share risks or opportunities for development.

Consortia can take a variety of organisational forms and structures as legal entities. Rather like the concept of partnership, there is no universally accepted definition of a consortium (Wildridge et al 2004). However, most consortia share some common features. In general, consortia are associations of organisations (or other entities) with the objective of participating in a common activity or pooling of resources to achieve a common goal. They can usually be considered as one form of partnership: a form that entails contractual commitments and legal obligations to deliver against agreed goals and outcomes.

Whilst consortia may seek to obtain benefits not achievable by other routes, consortium working -as with partnership working- can present challenges (Rummary 2002). Participating organisations can be exposed to new risks, incur additional costs or encounter fundamental ideological differences. Under-resourcing, unrealistic goals, power imbalances and perverse incentives – such as inappropriate performance targets – can all afflict consortium members.

Despite these and other recognised difficulties, consortium working for health and well-being is gaining momentum amongst community and voluntary sector organisations that operate at local levels. This reflects the potential benefits of developing shared approaches to complex health issues, the scope for innovative practice or the pooling of risks for funding bodies. The SWWB programme represents a unique consortium development in the south west of England. It brings together a group of independent organisations with experience of working within locally defined areas. Whilst each organisation has a very individual history, all share some common origins in connection with the healthy living and community health movements that have flourished since the late 1990s in the UK. The diagram overleaf sets out a brief overview of the 'life cycle' of the SWWB Consortium.

2. BIG Lottery Fund's Portfolio Approach

The portfolio approach was designed for programmes where BIG wanted to make grants for strategic projects consisting of a portfolio of more than one project. In this way, the funding could be used most effectively to tackle needs strategically. It is intended to allow grantholders to use their expertise, contacts and local knowledge to compile a portfolio of projects that complement one another and take into account existing provision and overall needs. Portfolios always contain more than one individual project. Individual projects may be delivered on a number of different sites. Lead organisations are expected to identify local needs and develop the most appropriate strategy to meet them, compile a portfolio of individual projects that complement each other, be the accountable body for the grant and delivery of the portfolio of projects for the duration of the grant contract, manage the delivery, monitoring and evaluation of the individual projects within the portfolio, sub-contracting individual projects to other organisations. Apart from the Well-being programme other portfolio programme examples include Changing Spaces, Children's Play and International Strategic.

The portfolio model encourages applicants to work together with other organisations to develop and deliver the portfolio and the individual projects. Under the Well-being programme BIG accepted applications which were developed jointly with one or more voluntary, public or private sector organisations with the relevant knowledge and expertise. BIG's programme therefore has a range of portfolios with differing approaches to delivery – however in all cases, irrespective of partnership or delivery arrangement one lead organisation applied for funding and this organisation has the legal and financial responsibility for the BIG grant.

3. Methods

As part of the review all SWWB Steering Group members were invited to provide written feedback in response to the questions:

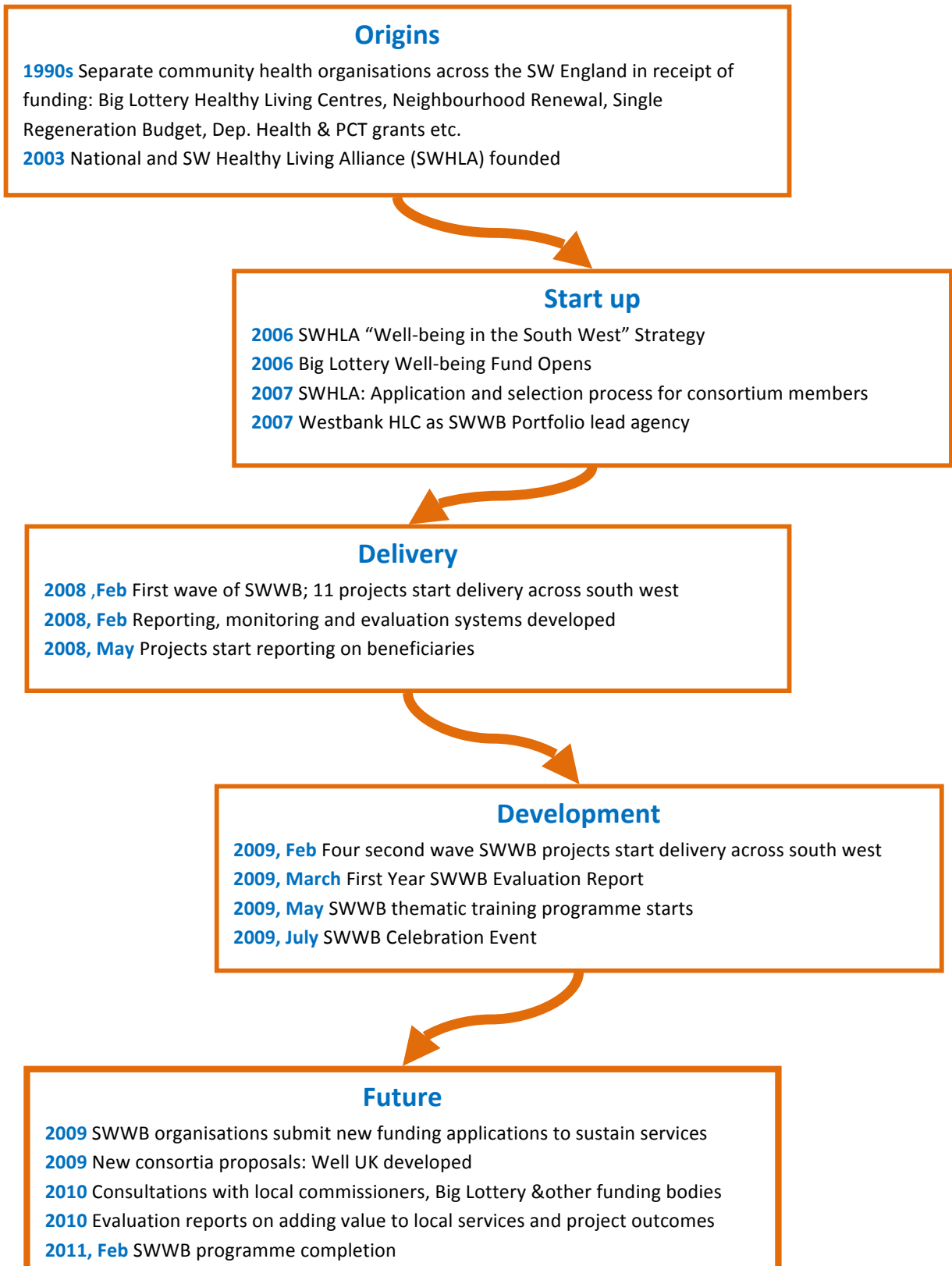
Thinking about your organisation's experience of working as part of the SWWB regional portfolio...

What have been the achievements and successes?

What have been the challenges?

These were returned, anonymised and loosely grouped by the research team. At a subsequent Steering Group meeting participants began to identify some key themes. Although the initial plan was to develop a consensus on key themes using the Nominal Group Technique (Delbeq et al. 1975), participants elected to first identify learning with regard to specific aspects of the programme - rather than to generate a potentially generic list of consensus statements. The evaluation team have firstly selected main themes arising from the feedback to date and, secondly, incorporated evidence from the first year fieldwork to generate the account that is provided in the next section of this report. At this stage of the process, all participants are invited to add further comments. We then suggest consulting on a final draft with all Steering Group members to agree the key themes.

'Life Cycle' of the South West Well-being Consortium



4. Experiences of participating in the SWWB consortium: challenges and achievements

Our analysis identifies six key themes from the feedback. These are presented below and illustrated by examples.

4.1 Building a Common Vision

“Without a consortium there would be no well being programme in the south west - and many people would be worse off within our communities.” Project G

“Our sense of common purpose was essential at the beginning” Project F

“We achieved a sense of common purpose with very disparate projects” Project J

Project leads felt that the creation of the South West Well-being consortium has been a major achievement in itself. Not only has it led to the development of a new programme for the region, it brought together a new group of independent organisations and raised the profile of their own organization in being associated with the consortium.

This has been a challenge, not least in the initial stage of developing a shared vision for the programme. The process started with a small number of leads in the South West Regional Healthy Living Alliance (SWRHLA) who had been developing common approaches since 2003. These individuals championed the idea of creating a vision and a regional strategy that marked out the perspective of healthy living organisations. This strategy formed the backdrop to the programme bid to Big Lottery and was informed by the values and philosophy of the healthy living centre movement. In response to the call for outline proposals from Big Lottery, the SWRHLA was therefore able to respond rapidly and offer an assurance of front-line public health delivery.

For some project leads part of the success of the consortium has been to achieve a balance between this shared deeper vision for the programme and the local aims that were tailored for each individual project. Inevitably this has involved compromises. However, a fortunate aspect of this process appears to have been the broad funding brief of the Big Lottery’s Well-being fund that has helped support this flexible approach at the local level.

4.2 Creating a Framework for Working Together

“I feel the issue about membership criteria - i.e. knowing that organisations are legitimate... and clarity on who is best able (legally and financially) and best qualified to be the lead agency...was our single biggest challenge.”Project C

During the process of developing the bid and the early delivery of the programme the consortium had to develop a new framework for governance: a framework that could address the key issues such as membership and legal responsibility. Leads reported that the initial selection process for consortium projects involved some difficult decisions. With the advice of external consultants, seventeen applications from organisations were shortlisted down to eleven that met criteria for project quality and programme fit. Whilst this process introduced rigour into the programme development, some leads regretted the loss of potential consortium partners:

“We lost alliance members when ‘sifted out’. It would have been good to have been able to keep them on board.” Project C

Nevertheless, this selection and development process reflected a clear effort to achieve good standards of project delivery. In hindsight, project leads reported that the selection process could have been even more rigorous. This could have included a pre-selection membership application process for organisations:

“There are things that need to be put in place prior to accepting partners into consortiums rather than taking organisations on trust.” Project D

Final selection of the lead organisation for the consortium was a late decision in the process of developing the programme. A success of the consortium has been the opportunity for the initial group members to have a role in this selection.

“One challenge has been to keep a working relationship with the decision makers to support the management of the consortium - rather than the well being programme.” Project O

Some project leads wanted to emphasise the more pragmatic aspects of working as part of a consortium:

“I feel that a consortium can be a fairly loose arrangement (not in the rigour of being accountable and doing what it is that you are responsible for) but in the sense that the common ground may only be a desire to achieve certain outcomes and a desire to deliver services to the best practice standards of delivery. Ultimately I am not sure the consortium really needs to do anything else.” Project P

The responsibilities of the lead organisation in this type of consortium are considerable. From the perspective of the lead agency, the significance of this level of accountability has made the SWWB programme very different from other types of partnership initiative:

“Our main learning has been around the role and responsibility that a lead organisation assumes. In essence BIG contract with the lead agency who then hold the legal responsibility for the delivery of the entire portfolio and the performance of the partners.” Project S

4.3 Managing the Consortium

“As lead we have worked hard to provide the interface between BIG and the partners. Monitoring and reporting systems were established immediately and all partnershave commented that the monitoring process has worked smoothly and with out causing delivery organisations extra workload.” Project S

Whilst the management of this particular type of programme was new to the lead organisation, project leads reported being highly impressed with how Westbank had taken on the brief. In part this reflected the early use of clear and simple contractual, finance and reporting systems by the manager. It also appeared to reflect the value of having an ‘insider’ organisation adopt the managerial role. Project leads felt that Westbank had a good understanding of the community health organisations that are either in or closely connected to the voluntary sector. The lead

organisation was also reported to have acted effectively in bridging the requirements of Big Lottery with delivery organisations. Some aspects that worked well have been:

“Knowing that Westbank has been willing and capable of managing the contract on our behalf and in our best interest with minimal input.” Project J

“Systems put in place to support us in monitoring the project in terms of beneficiary numbers and finance. Support and understanding from the central team advising us on positive changes. Mock compliance visits.” Project F

This support was particularly appreciated with respect to the management of adversity and conflict, features that are likely to be inevitable in programmes on this scale.

“During various difficulties and low points, the consortium has been managed professionally and has maintained its cohesion.” Project B

“The consortium has supported the management of a complex working framework to manage organisations and people who were found to have misused and abused their membership of the consortium, to the point where the consortium is being looked at as an exemplar and is in a position to look forward. However, difficult we have found parts of the process we should never forget what we have achieved as a group.” G

Common standards for reporting, monitoring and evaluation presented challenges for some consortium members. The majority felt that standardisation helped drive quality, build coherence and reduced some of the complexities of managing local systems. However, some leads felt that these standard approaches did not fit well with existing systems or that they were implemented differently for some projects:

“The shared learning ... helped to increase understanding of databases, evaluation and engaging with people.” Project G

“Using a shared approach to M&E and reporting has helped us all stay focused on the well-being [programme] outcomes”

“Trying to fit our project into a broad monitoring and evaluation system which tries to provide a ‘one size fits all’ approach, was not always appropriate for our way of working.”

4.4 Building Trust and Commitment

Effective communication has had an important part in maintaining the commitment of project organisations to the consortium. A challenge for the SWWB programme has been the geographical separation of organisations across the region:

“Geographically partners are a long way away from us in terms of time constraints and pressures of work.” Project C

“Being at distance from other partners [has been a challenge], we are used to working in close physical proximity to our partners.” Project F

The central team routinely circulate programme updates and news on funding or development opportunities. This has clearly played a role in developing the identity of the consortium. However,

project leads were more likely to highlight the role of shared training and informal networking. Subsequent to the recommendations of the baseline report, thematic training events that involve frontline staff were very positively rated as opportunities to exchange good practice in healthier eating, mental well-being, physical activity and volunteering initiatives:

“Sharing success and best practice has been an important part of maintaining the consortium.” Project G

“The thematic sessions have worked really well when the relevant workers from across the consortium were able to come together.” Project H

“The consortium partners have found out more about each other’s work, seen examples of other good practice and cemented their relationship.” Project B

This sharing - as opposed to hoarding – of knowledge and expertise has been a clear dividend of the consortium. If anything on reflection, some project leads regret that there had not been further opportunities for deeper, more intensive and tailored knowledge exchange between organisations.

Project leads also identified the role of fun, enjoyable celebration events in keeping up a sense of momentum for the consortium. In the background, the less visible actions of project ‘linkers’ and ‘networkers’ have also helped build the sense of common purpose for the programme.

4.5 Developing and Expanding the Consortium

With the addition of four new projects to the consortium after the first year of delivery and the re-development of another, the SWWB programme has changed considerably since its inception. The new project organisations – known within SWWB as ‘seedcorns’ - report similar benefits to the first wave, although they have had to work hard to engage with some aspects of the consortium:

“Starting later than other projects, has meant playing ‘catch up’ sometimes.” Project F

Membership changes were recognised as a challenge:

“The importance and difficulty of sustaining partnership, for example, when the membership is changing.” Project I

Participation in the consortium helped affirm and develop the professionalism for some project leads. In part this is a reflection of the opportunity for organisations to extend their role beyond the local level:

“We feel that being part of this consortium has raised our profile locally, regionally and nationally” Project H

“Working as part of the consortium has also opened up opportunities for working with other regional organisations” Project G

“We have learnt much more about strategic developments in funding the third sector” Project C

“We have had more access to information on regional and national priorities for wellbeing, external funding and third sector roles.” Project A

Some consortium members feel they have been able to ‘raise their game’ as advocates of new approaches for promoting health and well-being – both across the region and in their local area:

This consortium works differently to the normal ‘subcontracting down to, local organisations’ frameworks and the fact that each member has a role and opportunity to influence the whole is looked at with envy by others. I think it supports especially the public sector to see TSO’s as professional, who are able to see the big picture and appreciate it, and not parochial localised ‘nimbies’. Project G

“Working as member of a regional consortium has created a great deal of interest with other organisations and I have seen it change the impression and level of respect the other organisation gives to our company. [We have gone from] ‘small third sector organisation’ to ‘professional player’.” Project G

4.6 Sustaining the Consortium

The longer term development of the SWWB consortium is clearly a matter of concern for all members. Project leads point out the relatively short duration of the programme as a period within which to consolidate the future. At the project level this also creates pressures:

“The insecurity of projects having a finite life span [presents an issue]. Just as the efforts of the team had started to become establish the brand.”J

Whilst the programme cycle is tight, the consortium has actively started to explore future options as a support base for individual organisation projects and a basis for some members to develop new consortium funded work. One development has been the development of Well UK. Upstream had won Department of Health Social Enterprise ‘Pathfinder’ funding to form an independent consortium to tackle health and care contracts. Westbank and Devon CVS joined Upstream to form Well UK. The Big Lottery then funded Leaside Regeneration to work with a small number of Healthy Living Centres, all members of the National Healthy Living Alliance, to explore further opportunities for social enterprise.

This work was undertaken in recognition that consortium working can be an effective way of delivering national or regional pieces of work that- at the same time - retain an essence of local identity and ownership. Well UK’s rationale has been to enable smaller deliverers a chance to deliver on bigger contracts and vice versa for the contractors. Through effective consortium management Well UK believes that there are significant additional benefits. These include a focus on national quality standards, professionalism, cost effectiveness and key health and social improvement priorities. Development of standards and sharing of good practice is Well UKs strength and ensures continual support and up-skilling of local delivery partners.

Effective Consortium Working: central themes

This section sets out some central themes based upon the experiences of SWWB programme's consortium members. Some themes mirror the learning derived from wider research on partnership working (see for example, Austin 2000, Nuffield Institute 2000). They also highlight some aspects that are more specific. These reflect how an alliance of healthy living organisations has worked with the Big Lottery's portfolio model.

1. **Communicate the benefits to contractors.** The consortium has sought to show how the format streamlines the supply chain. This has kept overheads low, promoted prompt front-line delivery, directed efforts and managed quality assurance.
2. **Develop common purpose.** Given the diversity of approaches to the promotion of health and well-being, consortium members worked to develop a sense of shared identity (a 'brand') despite very independent histories. This was part of a longer term process that started well in advance of the programme funding period.
3. **Create clear membership criteria.** The consortium has learnt the value of developing criteria for assessing both quality of project plans and the capacity of organisations to deliver. Due diligence in applying criteria for membership needs to be in place right from the start of the bid development process.
4. Recognise the distinct legal and programme **performance responsibilities of the lead organisation.**
5. **Commit both to the delivery of the programme and to the development of the consortium itself.** Work to develop the consortium has stretched the resources of the project leads own organisations. However this extra effort by at least some of the members has proved essential for the consortium.
6. **Build trust and confidence between members.** This required investing in the Steering Group as a forum for open and honest communication, as well providing informal opportunities networking and support. Given the democratic basis of the membership, the lead organisation had to act very transparently in all its major management decisions.
7. **Commit to mutual support and service development.** Consortium members committed to sharing good practice, opportunities for funding and regional intelligence. This has helped some members 'step change' their external profile with partners.
8. **Work outwards to build new partners.** Consortium members have successfully brought in additional front-line organisations to broaden and build capacity of local services for the promotion of health and well-being.
9. **Agree, commit to and communicate the core performance requirements and outcomes.** Members valued the chance to shape the programme's aims and objectives. The role of the lead organisation in maintaining a focus on these has been important for member organisations that all have to maintain local commitments.

10. **Respect project diversity and the local autonomy of project organisations.** A shared vision and common approach has given the programme much coherence. However, an additional strength of the consortium model has been the local tailoring and innovation of projects – led by expert local organisations.
11. The consortium lead needs to be able to **draw upon robust governance, agreed processes and members support** for managing risks and adversities that may arise.
12. **Celebrate success.** As a consortium of dispersed projects across the region the achievements of the whole programme are not necessarily visible to beneficiaries, staff and partners in local areas. Celebrating success for the whole region has required commitments from all members of the consortium.

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