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London Ambulance Service NHS Trust.

Background

The London Ambulance Service NHS Trust (LAS) has over 70 properties based within the Greater London area. With such a disparate estate LAS have adopted a rolling programme of repair and disposal which has required a number of key documents to be published and approved by the Trust Board and SHA.

The Challenge

LAS produced its Estate Strategy to help support and help to achieve its seven year Service Improvement Plan. A number of existing ambulance stations were deemed to be in inappropriate locations for the populations they serve and in addition a number are not functionally suitable and have poor space utilisation. The relocation of some stations and the redevelopment of others was required to implement the key issues identified in LAS' Estate Strategy.

The Solution

LAS appointed Inventures to help implement the next key phase of the development and disposal programme by the production of site specific business cases. Inventures used the LAS' preferred business case template, based on the five case model.

The success of this process and the excellent relationship which Inventures has developed with LAS has culminated in 12 approved business cases and a number of other site related projects over a period of almost five years.

The Benefits

It was key to LAS that the continuity of the team was maintained to ensure a swift approval process. Inventures provided LAS with the assurance of continuity that comes with a single point of contact, as well as knowing that the individual is professionally qualified in their field and is supported by other equally qualified staff and an organisation that prides itself on best practice and professionalism. We have brought standardisation in to the process which has provided benefits in time and cost to the client.



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Nottinghamshire Healthcare NHS Trust

Background

With the introduction of a new National Service Framework for Mental Health, Inventures was invited by Nottinghamshire Healthcare NHS Trust to prepare a strategic direction document outlining the changes required to comply with new legislation.

The Challenge

The initial challenge for the Inventures team was to fully understand the policy guidelines, which proposed new ways of working, and set new targets for the Trust. Inventures also supported the review of existing services and assessed how they might adapt and support new ways of working. For instance, there was a new emphasis on treating people in the community, and ensuring patients were cared for in the most appropriate way and by the most appropriate people. This involved scoping new ways of working in line with best practice. To ensure full integration of the services, a 'whole system' approach was adopted. Many of the services involved input and delivery from other agencies. As a result, changes to the way the Trust delivered services needed to dovetail with the working practices of healthcare partners and be developed in agreement with local PCTs.

The Solution

The planning process called on Inventures' in-depth knowledge of the healthcare sector and success rested on the involvement of different agencies working together.

In delivering the new model, Inventures used its extensive experience of developing business cases, and its skills at facilitating multi-agency discussions, to arrive at an agreed new method of working. At the forefront of new working practices was full stakeholder involvement.

The Benefits

Key to the success of the project was Inventures' experience of working within the NHS, ensuring a shared common culture with the Trust and an understanding of the context in which the service redesign was to take place. This meant the team understood what needed to be delivered, and the parameters in which it could be delivered. In undertaking the multi-agency approach, Inventures succeed in bringing all the relevant parties together to work for a common aim. This resulted in an agreed implementation plan that would deliver enhanced service provision for patients, improved ways of working for staff and the opportunity to address historical inequalities in service provision.