

IQ Health

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Moving on up in the NHS

AN INNOVATIVE PILOT project to improve the basic skills of literacy and numeracy in the NHS is now being disseminated nationally.

The Tribal Move On Up/NHS development project has developed several programmes to address the Skills for Life challenges staff face through the introduction of Agenda for Change and the Knowledge and Skills Framework.

Programmes developed and trialed in the North West include:

- Effective communication skills for working in the NHS
- Effective communication skills for customer service
- Move On maths in the NHS
- Move On communication skills for leaders and managers
- Communication skills for applying equality and diversity
- Communication skills for KSF portfolio building.

The programmes were developed and facilitated by Tribal in partnership with a range of health organisations and training providers. The programmes were piloted with 73 learners across 13 trusts. Staff taking the National Certificate in Adult Literacy for the six programmes listed above achieved a pass rate of between 89 and 100 per cent.

Gaye Jackson, NHS North West's head of CPD and education partnerships says the programme's success was helped by Tribal's Julie Mooney and Alison Brierley as Move On regional advisers. "Their role as 'critical friend' coupled with their expertise, commitment and support to all partners was key to the development of the high quality materials which engage NHS employees and encourage them to develop their Skills for Life. As a project, the sector can be assured that we have produced materials and programmes of learning that are professional, accurate and user-friendly."
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Capital health gains

TRIBAL IS WORKING with a new organisation to help it find the right people to transform the health outcomes of people in London.

Healthcare for London (HfL) is a 'mini organisation' that emerged as a result of Lord Darzi's plan to improve healthcare in the capital over the next 10 years and it follows a large-scale pan London consultation.

The programme of work planned to take this forward is divided into the following projects: major trauma; stroke; scheduled care; diabetes as well as local hospitals and polyclinics. It's a major task, but already partner organisations,

working groups and members of the public have come up with ideas to improve quality, safety and accessibility.

Tribal will support HfL to recruit senior level project management professionals from the NHS and health sector in general to deliver this work. They will be seconded into management roles or work on fixed term contracts for up to one year.

The first stage of the project involves a recruitment advertising campaign and microsite, published with the strapline 'Transforming health on a massive scale'.
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HEALTH INFORMATICS

Tribal is working with the NHS to provide vital thought leadership for trusts trying to implement Electronic Document and Records Management (EDRM).

EVER GROWING mountains of paper created by patient records are a major headache for acute trusts. They are finding it increasingly difficult to store all records on site, yet if pressure on space is eased by moving them away from hospitals they face inevitable access, transportation and cost issues.

And with patient safety a top priority, trusts need to ensure health records are always accessible at the point of care – so that clinicians can make fully 'informed' decisions.

There are also access and cost issues across the NHS in managing other records, for finance, HR audit and controls assurance purposes.

Last year Wendy Clark, Tribal's director of consulting in Health Informatics, noticed an upsurge in tenders relating to EDRM. "An increasing number of trusts were obviously starting to look at it and yet I couldn't find any evidence of thought leadership on the subject," she says.

"As Tribal already has a formal partnership with the Association for Informatics Professionals in Health and Social Care (ASSIST),

we approached the chair of the body's national council Brian Derry, with a view to providing a forum through the ASSIST network, so that health professionals could debate the issues and share experience."

Earlier this year the public-private sector collaboration resulted in two events in London and Staffordshire which brought trusts at the start of the digitisation journey together with others already procuring or developing EDRM solutions. This included trailblazer Portsmouth Hospitals NHS Trust, which has benefited from consultancy support from Tribal.

Delegates discussed issues associated with implementation, such as change management, security and confidentiality. Representatives from the NHS National Programme for Information Technology (NPfIT) also explained how EDRM fits in with the national programme and how trusts can ensure any new systems are NPfIT compliant.

And Tribal shared lessons

learned from other sectors where EDRM has been operational for a number of years, as well as providing an opportunity to look at some of the products available in the market place.

"The events were very well received and the feedback is that people found them very beneficial," adds Wendy.

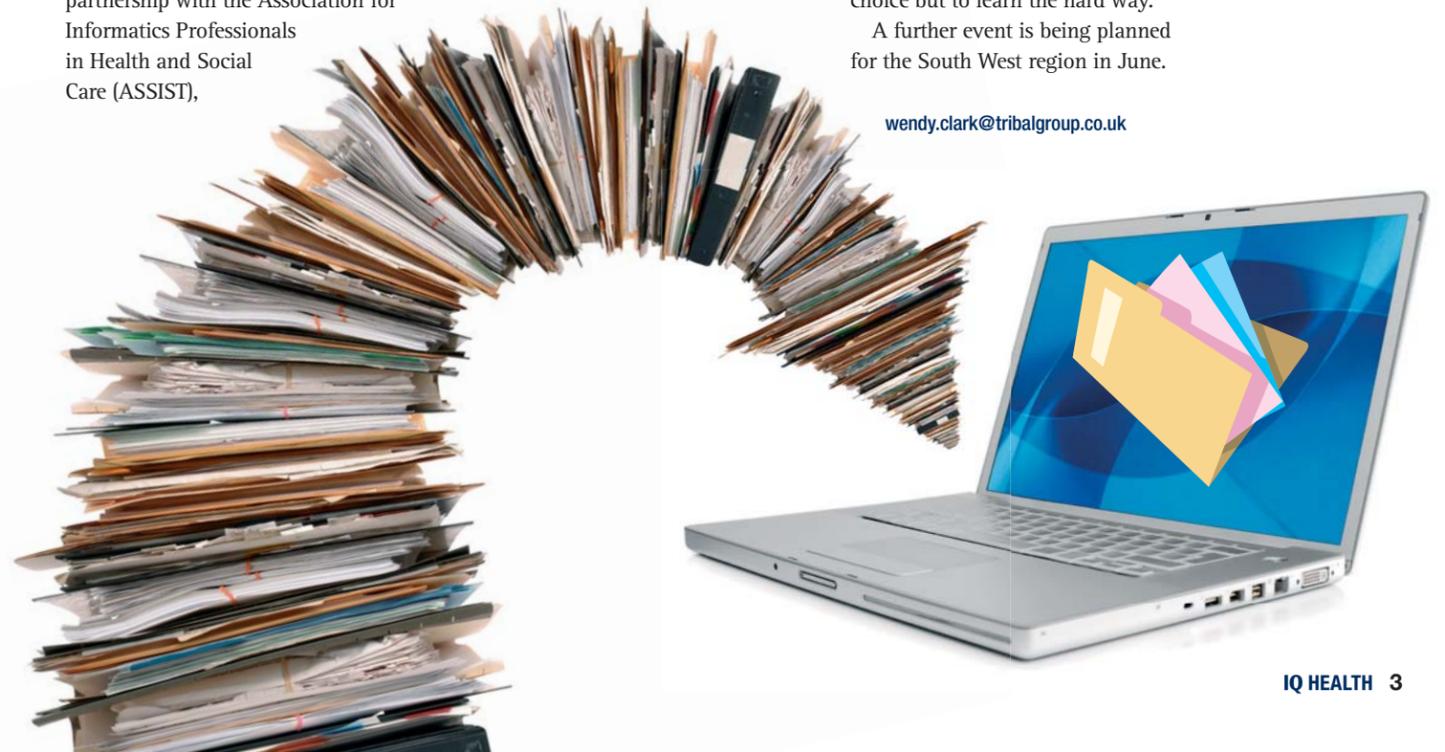
Brian, who is also director of informatics at The Leeds Teaching Hospitals NHS Trust, says that without formal thought leadership, there was a real danger of trusts reinventing the wheel.

"As an acute trust we are looking at EDRM at the moment. The national programme will ultimately provide an electronic patient record, but this will not hold all the historic data that clinicians rely upon to treat patients. If we can make a start on scanning in what we already have, we can begin to develop electronic records from day one of a patient's life.

"The time for EDRM has come for the NHS and these excellent events have provided a real opportunity for us to learn from others who had no choice but to learn the hard way."

A further event is being planned for the South West region in June.

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PARTNERSHIPS FOR CHANGE



For an NHS trust, surviving and thriving in the current health marketplace means constantly striving to maximise productivity and capacity.

THE DUDLEY Group of Hospitals has successfully plotted a course of transformational change aimed at improving performance, increasing quality of care and building the organisation's long-term sustainability.

Last May, this mid-sized acute trust embarked on Programme Enterprise. This was the biggest change programme it had ever undertaken and something that was quite different from anything it had done before.

So, to ensure its success, it partnered with Tribal Boxwood, a unique joint venture set up specifically to help raise performance levels in the NHS by combining the best of public and private sector experience.

Recognising there were barriers to delivering the required improvements

at Dudley, the change programme began with a 'discovery' phase to identify, quantify and prioritise improvement opportunities across all areas of the trust, including in its elective, non-elective, diagnostics and support functions.

Boxwood programme manager Simon McCall says: "We collected and analysed data, made direct observations and talked to staff and patients to get a clear picture of how the hospital was performing.

"This identified more than 250 specific issues where it could work smarter to achieve a significant increase in the quality and quantity of activity. Problems ranged from long outpatients' waiting times to a high number of repeat MRSA tests within 24 hours, to the

effective and timely discharge of patients declared medically fit.

"At the end of the discovery phase, we fed back our findings to senior managers and clinicians in a two-day session and consensus was formed on the changes required."

The joint trust-Tribal Boxwood team then structured and trained 27 Performance Action Teams (PATs) to identify the root causes of the inefficiencies and focus on challenging traditional practices and delivering the necessary changes in phase two of the programme: 'implementation'.

Since September 2007 the four to eight members of each PAT, taken from a variety of staffing levels and teams (150 staff in all), have been working to deliver breakthroughs on the frontline. For example, the length of time to grade and book an outpatient appointment from receipt of a GP referral letter was between six and 59 days. One of the PAT teams has since identified how this can be reduced to three to four days and is currently driving through the changes needed to make it happen.

All of the PATs are also supported by a central Programme Enterprise Team made up of a programme director, seven senior trust leaders and seven project managers. "The whole approach designed by Tribal Boxwood is one of skills transfer. We worked with project managers to expand their skills by training them to ensure they would be able to carry on with the programme when we left site at the end of 2007," explains Simon. "The central Programme Enterprise Team was also coached through the improvement methodology and is now supporting the PATs to ensure trust goals are met.

"Dudley is still at an early stage of implementation, but some improvements are already coming through. As far as Tribal Boxwood's involvement is concerned, the main benefits have already been delivered in that the transformation model is up and running and the trust is set on a sure course of improvement that will make a tangible difference to patients' experiences."

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Learning reform

Tribal combines its leading edge understanding of system reform in the NHS with public sector expertise through a strong partnership with Boxwood.

Boxwood is a business consultancy specialising in change and its approach has helped its own blue chip clients deliver more than £2billion in audited business benefits. Together we work with the NHS to help raise performance and ensure long-term success through strategic and operational improvement projects.



MAKING IT HAPPEN

"Everyone I've spoken to within the trust said the discovery phase had been enlightening and had provided us with a very clear picture of what we need to do and the direction of travel to be taken," says Ruth Serrell, programme director at the Dudley Group of Hospitals.

"Delivery is proving more difficult and is expected to take a little longer than first anticipated. One of the biggest challenges is that all this is happening at the same time as the trust is undergoing restructuring and going for Foundation Trust status. This means there are some competing priorities for clinicians in addition to them delivering 'the day job'.

"Having said that, we have continued to make progress since the Tribal Boxwood team left in December and we intend to achieve all our targets by the end of March 2009."

Ruth says the biggest hurdle to overcome has been how to fully integrate the programme into the trust by shifting 'ownership' from the Programme Enterprise Team to clinicians at the frontline.

"The board has now agreed the best way forward is for clinicians to lead the prioritisation with the board's continued support," she says. "By moving ownership of the changes to the senior leaders in each department, we are confident that the required results will be delivered."

Ruth adds that Tribal Boxwood's approach in ensuring the relevant knowledge and skills were transferred to the trust has been adopted as one of the standard methodologies for making change happen in Dudley.



Engaging the frontline

More people work for the NHS than any other organisation in the country. Day in, day out, one million members of staff deliver services to patients – from catering and outpatient clinics to treatment and surgery.

WHO BETTER then to contribute to the debate about health service reform and where the NHS is headed over the next decade and beyond.

Lord Darzi's *Our NHS, Our Future* review of the NHS will have a major impact on current practice and is committed to seeking the input of staff at all levels and across all professions.

Staff engagement in public sector debates is a Tribal speciality, and the West Midlands Strategic Health

Authority (SHA) set a challenge when it too wanted to hear the views of staff working in the region.

With just two months' notice, Tribal delivered:

- 10 listening events in the space of eight working days
- 10 different venues
- 100-150 people at each event.

At the heart of the consultation lay the SHA's vision for the future of health care in the region, *Investing for Health* – with the Darzi review

clearly coming in to play.

The aim was to gather staff, listen to what they had to say and involve them in the drive to improve patient care.

The listening exercise was going to be huge, and Tribal recognised just how significant the events were going to be. Tribal director of consulting Sarah Atkinson says:

"NHS West Midlands appointed us in mid-September and the remit was to involve as many staff as possible. The

focus was on frontline staff as they would know the issues on the ground.

The structure of the 10 events would focus on people being allocated to tables based on the eight 'Darzi' clinical pathways responding to questions around 'how the challenges of investing for health manifest themselves', 'how they can be overcome', 'what the vision for the future is' and 'moving forward.'

The clinical pathways were: birth, children, staying healthy, long-term conditions, acute episode, planned care, mental health and end of life.

The debate was set against the background of challenges set out in *Investing for Health*, namely:

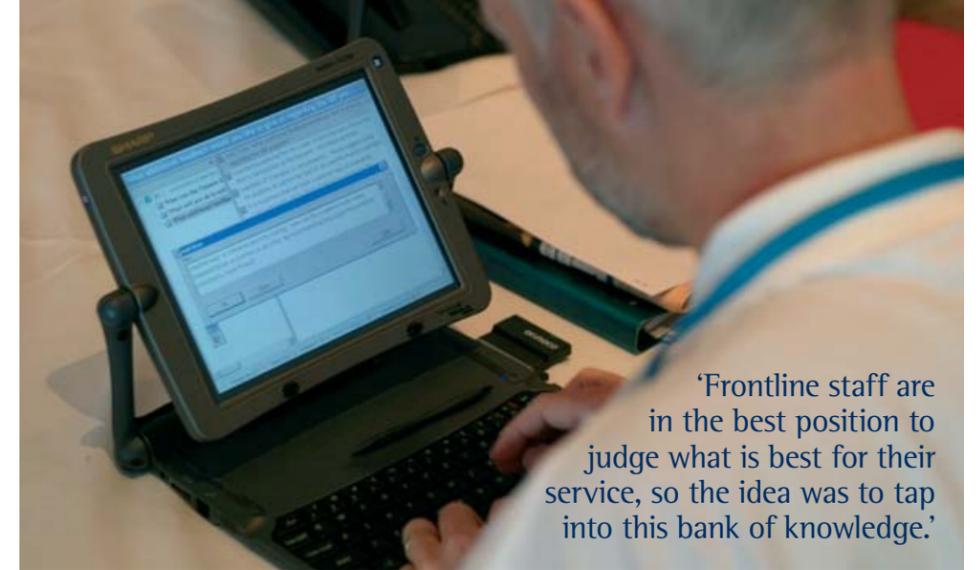
- inequalities widening
- variable quality and safety of services
- lack of upstream investment
- buying things that don't work
- costs increasing faster than income
- lack of public confidence in services
- complex services difficult to navigate.

Sarah adds: "Our brief was to design the 10 events to promote an understanding of the challenges and produce staff ideas on overcoming the barriers in the way of progress. Frontline staff are in the best position to judge what is best for their service, so the idea was to tap into this bank of knowledge."

Tribal consultants worked with the events team from Tribal's communications agency Geronimo Communications to deliver the SHA's brief. This work was led by Russell Joyce.

While Sarah and her team put together agendas and the content for the workshops, Russell and his colleagues addressed the challenge of scoping venues and the 1001 other tasks involved in organising on such a scale. The task was made harder still as on two of the days, two events were held simultaneously in different parts of the West Midlands.

Each gathering had a regional (i.e. West Midlands) focus and a local flavour, as Sarah explains: "The events were scattered throughout the



'Frontline staff are in the best position to judge what is best for their service, so the idea was to tap into this bank of knowledge.'

region to get as complete a picture as possible. Around 100-150 people attended each one, so we had to hire big venues, and those who came represented a cross-section of the frontline workforce. It wasn't just people employed by the NHS either as there are also people working for local authorities and the voluntary sector who also deliver care."

At the events, innovative methods were used to gather opinions, including the use of Crystal Interactive tabletop electronic tablets upon which people scribed suggestions – these were then projected onto a much larger screen everyone could view.

Sarah says: "We were adamant that these were going to be flipchart-free zones, so we used all of the available technology to make the events slick and professional. The result was that we captured an exceptional amount of information."

Each event began with a pre-recorded on-screen introduction by Lord Darzi, which the Tribal team had produced, then it was down to the nitty gritty of examining problems and solutions.

At the end of the process Tribal produced a report on each event and a report for each of the regional clinical pathway groups, as well as an overall view on taking services forward in the West Midlands.

Peter Spilsbury, director of strategy for NHS West Midlands paid tribute to Tribal's work: "Engaging with staff was absolutely essential, both in the context of our regional strategy, *Investing for Health*, and of the themes

emerging from the NHS review being led by Lord Darzi. Tribal delivered an intensive programme of 10 events across the region and their enthusiasm and flexibility was key to success. Many health economies recognised the value of listening to staff and we are now starting to see a culture of engagement being more effectively developed across the region."

The 10 staff consultations were followed by another event in January 2008 for patients and the public. Some 160 people attended, giving their views on current services and the future – again in the eight 'Darzi' clinical pathway areas. This was also organised by the Tribal team.

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POINTS OF VIEW

Delegates who attended said...

"Having a mixture of backgrounds on each table provided an interesting insight into approaches to the challenges."

"We got more issues addressed in a day than we have in months!"

"The style of the event meant that there was some interesting debate and it really worked well."



Turning up the heat

English summers may be an annual disappointment for many of us, but Nigel Draper would much prefer the damp village fetes and the rain stopped plays to high summer in Qatar.

"IT'S A WONDERFUL PLACE, but the heat is incredible. For several months of the year it's too hot to work, and as for stepping outside an air-conditioned building, forget it," he says.

Nigel, a director of Tribal's health consulting practice, has experienced this type of extreme several times recently as part of a Tribal project to improve the performance and quality of acute health care provision in the Gulf state.

He explains: "The Hamad Medical Corporation in Qatar is their version – very loosely – of the NHS. It provides about 95 per cent of public sector acute care in Qatar. The corporation was looking to redesign healthcare provision in light of the special circumstances the state faces and chose Tribal to produce recommendations."

The special circumstances to which Nigel refers arise from the make-up of the country's one million or so population – predominantly immigrants from Africa, the poorer Arab states and the Indian sub-continent, and largely young men.

"Traditional healthcare challenges like treating children and old people don't really apply to these groups – but very large numbers of young male manual workers use A&E," says Nigel, adding: "This brings with it a whole new set of challenges, especially when every morning literally busloads of men turn up to be treated."

Tribal was selected for the project for two reasons: the calibre and experience of its team, tried and tested in this field, and because of a unique link up with consultants at Guy's and St Thomas' Foundation NHS Trust in London.

The brief was to:

- assess the future burden of disease
- estimate future bed requirements
- prepare development strategies for more than 20 clinical services
- advise on implementation, including priorities and timescales.

Qatar has five main hospitals, all but one on one huge campus and currently four more are being built across the road from it. With such redevelopment, Tribal's recommendations are crucial to shaping the future of healthcare.

Nigel says: "We knew we had to get it right from day one, but a potentially massive hurdle that stood in the way of progress was getting the hundreds of Qatar consultants on board. We tackled this by establishing direct communication between their consultants and ours from Guy's and St Thomas' NHS Trust. The London-based clinicians have lived through two decades of upheaval, reorganisation and merger in Britain, so they could bring that experience to bear. Also, the Qatar health professionals felt more at ease talking to fellow medical consultants rather than management ones."

Around 20 Guy's and St Thomas' consultants took part in the project, led by the trust's former medical director Tony Young.

Nigel continues: "The Tribal team undertook research elements, such as projecting the burden of disease

and examining how a whole system approach would work. Our medical consultants, meanwhile, concentrated on matters such as patient flow and other areas where management and clinical practice merge."

Tribal's report is now complete and its recommendations to the corporation cover a wide range of issues, from national to departmental, from short-term to long-term, and from organisational matters to major capital investment.

It calls, among other things, for:

- a clinical decision-making unit to stream patients to the right treatment
- the creation of an elective care centre, including day surgery theatres and beds
- more rehabilitation services to reduce the number of long stay patients
- better education and training for clinical staff
- devolving day-to-day management decisions to clinical departments.

Nigel says: "In many ways it has meant applying the lessons we have learned from the NHS in Britain over the past 10-20 years to the Qatar model. But that's oversimplistic because there are real extremes to be dealt with here – in terms of climate, access and culture but also in terms of delivering a whole range of healthcare to what is essentially a small population.

"We have all learned a great deal of lessons about coping with adversity – in terms of the heat, the different languages and culture. The fact that we have found solutions outlined in our report to the corporation will give us confidence when other challenges arise.

"One of my previous projects was in Queensland, Australia, at a place 400 miles away from the nearest town. The trick was to come up with health services that were viable given the small population – a similar situation to that of Qatar – so success in that project gave me personally a lot of confidence here.

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Team leaders Simon Taylor and Tony Young



Medical City in Doha

"The Gulf experience also told us how far we have come in the UK and affirmed that all in all we made the right decisions about modelling healthcare services the way we did."

The next challenge for the Hamad Medical Corporation is to implement the changes, but Nigel thinks that with the hospital consultants on board there is a good chance of success.



The Corniche

'Traditional healthcare challenges like treating children and old people don't really apply to these groups – but very large numbers of young male manual workers use A+E. This brings with it a whole new set of challenges, especially when every morning literally busloads of men turn up to be treated.'



Women's hospital Doha

A positive change... →

in the right direction →

A two-year programme that will develop and support sustainable 'world-class' leadership in Ireland's Health Service Executive (HSE) is underway. →

IT'S A HUGE TASK, given the number of people involved and the history behind the creation of the HSE.

The HSE was established by the Health Act 2004 and is responsible for providing health and personal social services for everyone living in the Republic of Ireland. It replaces a structure of 10 regional health boards, a regional health authority and several other agencies and organisations. The HSE employs more than 65,000 staff, funding a further 35,000.

The Leadership Development Programme (LDP) programme began in January and it will see the leadership skills of the chief executive officer (CEO), all 17 national directors and 160 of the most senior managers and clinicians developed and enhanced so they are equipped with the skills to deliver the largest change initiative the state has ever seen.

It is being delivered by Tribal in partnership with charitable development foundation the King's Fund.

Tribal's consulting director Alison Kilduff says: "The HSE has the challenge of being a relatively new

organisation. It is working to unify previously disparate delivery arms in addition to the huge challenges faced by other health delivery and commissioning organisations across the world. That is in terms of improving health outcomes, service quality for users, extracting maximum value for investment and instilling staff confidence and pride."

'Tribal and the King's Fund are hugely privileged to be able to work with the managerial and clinical leaders of the HSE.'

The LDP will be split into two overlapping phases, the first of which will see the CEO and national management team go through a series of development modules and one-to-one coaching sessions.

The second phase, launched in May, will bring the management team together with the next level of senior leaders in a two-way session where they will discuss

the leadership qualities and behaviours needed to deliver a world class health service, including the ability and confidence to:

- work in, and for, teams
- challenge the status quo and to be challenged
- really engage with core stakeholders.

Having confirmed a leadership qualities framework, the phase two leaders will then be involved in two 'hothouse' days to test the key desirable behaviours against system challenges to help inform the development of practical learning sets.

The next step will be for Tribal and the King's Fund to set up and run a virtual 'leadership academy'. This will offer tailor-made development sessions, master classes and networking events all designed around real operational challenges for the health service. As a result, the learning taking place will address real business concerns.

The entire programme will be subject to independent evaluation by Henley Management College.

The programme's aims are to:

- provide an important opportunity for the management team, in conjunction with senior managers and clinicians, to define and demonstrate what being a 'world class health delivery organisation' means in terms of leadership behaviour and expectations
- create a coalition of change champions
- support the move to a unified service, by involving clinicians and managers in work-based learning under a corporate umbrella
- promote constructive performance management throughout the organisation so that the HSE's corporate objectives are achieved
- help senior clinicians and managers tap into their personal motivation and creativity to find solutions together to the leadership challenges.

"There has never been a leadership intervention across the state focused on the unified organisation. Tribal and the King's Fund are therefore hugely privileged to be able to work with the managerial and clinical leaders of the HSE in concentrating effort and talent on shifting focus from the organisational upheavals of the past to making real and tangible

differences to health service delivery in the present," explains Alison.

"This will be achieved in a number of ways, but the behaviours, actions and attitudes of leaders at all levels across the HSE will have a defining impact and that is the kind of transformation the LDP will support. All future management and leadership development at the HSE will be informed by the LDP."

'We need leaders at all levels who can manage performance and help colleagues to make sense of the changes.'

Tribal and the King's Fund have developed a strong, dynamic and innovative partnership working with boards and management teams throughout the UK.

"The teaming of a charitable development foundation with a commercial performance improvement consultancy also reflects the travel of health policy in terms of pluralistic models of service provision and new forms of organisation that are flexible and innovative," she says.

"In partnership, we offer an excellent combination of large scale leadership development experience together with acknowledged expertise in supporting health leaders in the delivery of transformational change."

A HSE spokesman for the LDP says senior leaders have shown high levels of personal commitment in 'keeping the show going' through organisational upheaval, but stronger performance management is now required across all levels of the system.

"A change like this cannot be led entirely from the top," he says. "We need leaders at all levels who can manage performance and help colleagues to make sense of the changes. This is where the LDP fits in. It offers us an opportunity to agree and demonstrate what we can and will change, so that we can better enable people to follow us and indeed so that we can follow when appropriate. Leadership without followship will not deliver better results for the public."

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Roundup...



View from the west – Allt Wen Hospital in Tremadog, Wales

New buildings enhance the patient environment

Tribal's architectural arm, Nightingale Associates, has finished work on a new hospital and is nearing completion on another.

It designed the new Mignot Memorial Hospital on Alderney, which replaces a temporary 1960s extension. Facilities include a new build containing a care ward with 14 single bedrooms, two maternity bedrooms and two high observation rooms. A second phase involved refurbishing part of the existing building to provide five acute inpatient beds, enhanced outpatient facilities and a new entrance. The building enhances the patient environment by making the most of a waterfront setting, maximising the views from inpatient rooms and day spaces.

Work is also almost completed on the £15 million state-of-the-art Allt Wen Hospital in Tremadog, Wales. The North West Wales NHS Trust appointed Tribal to procure this community hospital, which includes a 30 bed in-patient ward, minor injuries unit, x-ray suite, outpatients and day hospital, rehabilitation department and community mental health team suite. The project has created a benchmark for design quality by which future healthcare developments across Wales can be measured.

Project architect Tom Withecombe says: "The design of Allt Wen Hospital embodies and

promotes the principles of energy efficiency and sustainability, including a Biomass Boiler and a green sedum roof. It is located on the edge of the Snowdonia National Park on a steep slope and is split over two levels with a roof covered winter garden. The benefits of natural light are maximised by a light filled internal garden, the location of patient areas and the careful design and location of windows."

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Search and selection service grows

Tribal's recruitment team has established itself as a national provider of senior search and selection services.

In the past six months it has appointed the chief executives of Yorkshire Ambulance Service Trust and North Lincolnshire PCT, the latter being filled by a candidate from Western Australia.

Executive Resourcing Manager Robin Stavelly says: "The team's reputation for appointing to hard-to-fill senior joint or integrated roles continues to grow. It is now working on appointing directors of public health for Leicester City's PCT and council, London Borough of



Southwark's PCT and council and Birmingham City Council. The latter role is a unique step by a local authority to employ a public health professional to work alongside the four public health directors within Birmingham's PCTs."

The team is also supporting Herefordshire Public Services Trust (which brings the council and PCT under one management structure) on its first key director appointment.

In the non-executive area the team has supported the Appointments Commission and Lambeth PCT in their search for four non-executive directors.

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Expert advice adds value

Tribal's health consulting practice, in partnership with AT Kearney, is helping PCTs to separate their in-house provider functions from commissioning activities.

It has created online questionnaires and checklists designed to help PCT managers decide how their services should evolve and determine a provider services strategy.

It is also compiling benchmarking and peer review information so PCTs can compare their services with others.

This work is part of Tribal and AT Kearney's successful bid to support Partnerships UK in its PCT Provider Development Programme. Initially the work, which started

last summer and will run for another 12 months, involves six PCTs, although there are plans to work with another 24.

Health practice director Steve Smurthwaite says: "Partnerships UK and the PCTs are pleased with our work, saying we are adding value, providing good support and independent and expert advice."

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