



DECISION HANDBOOK

[Organisation(s) and decision / project]

ABOUT THIS DOCUMENT



- This document contains blank templates and instructions for users for the Best Possible Value (BPV) Decision Framework
- Please refer to the BPV Decision Framework user reference guide for more information at bpv.futurefocusedfinance.nhs.uk
- Decision Planning and Value Generation tool templates may be collectively completed during decision workshops led by a facilitator
- Please contact futurefocusedfinance@nhs.net for comments and queries

DECISION CHARTER



- What is the situation? This is a set of non-controversial, factual observations about the context / subject that all those involved in the decision agree with;
- What is the complication to this situation? These are challenges, points of contention, areas of change and the 'so what' of the situation;
- Use the situation and complication to generate the key decision that the group is trying to make. The group needs to agree the precise decision subject and scope;
- What are the key objectives? These should be considered in the context of maximising value and focusing on the outcomes and impact for service users;
- What constraints need to be addressed in relation to the decision? These set the broad envelope within which the decision needs to be made.

DECISION CHARTER



SITUATION	
+ COMPLICATION	
= DECISION	
OBJECTIVES	
CONSTRAINTS	

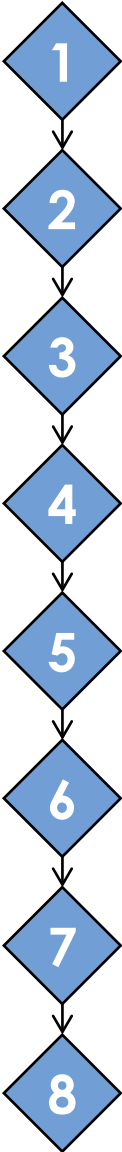
DECISION STEPS

- Aim to have no more than 8 sub-decisions;
- Steps should be written in sequential order;
- Steps may have iterative elements;
- Deciding Value Measures is ideally an early decision step;
- Consider existing processes such as those used by the organisation's Project Management Office, NHS Right Care (where to look, what to change, how to change), or steps used by previous BPV cases for similar decisions.

DECISION STEPS



DECISION



Organisation / team

Decision / project

Date / version

VALUE MEASURES



- Outcomes must always be considered from the perspective of the service user;
- Value criteria should align with the key outcomes selected in the Decision Charter;
- When choosing metrics, only choose those where data is relevant and accessible;
- Evidence for the metrics should be relevant and accessible;
- If a long list of metrics are identified, highlight those which you believe are the most important to progress your decision and which you will focus on going forward;
- Link this work to the BPV Value Framework if the value components need adjusting.

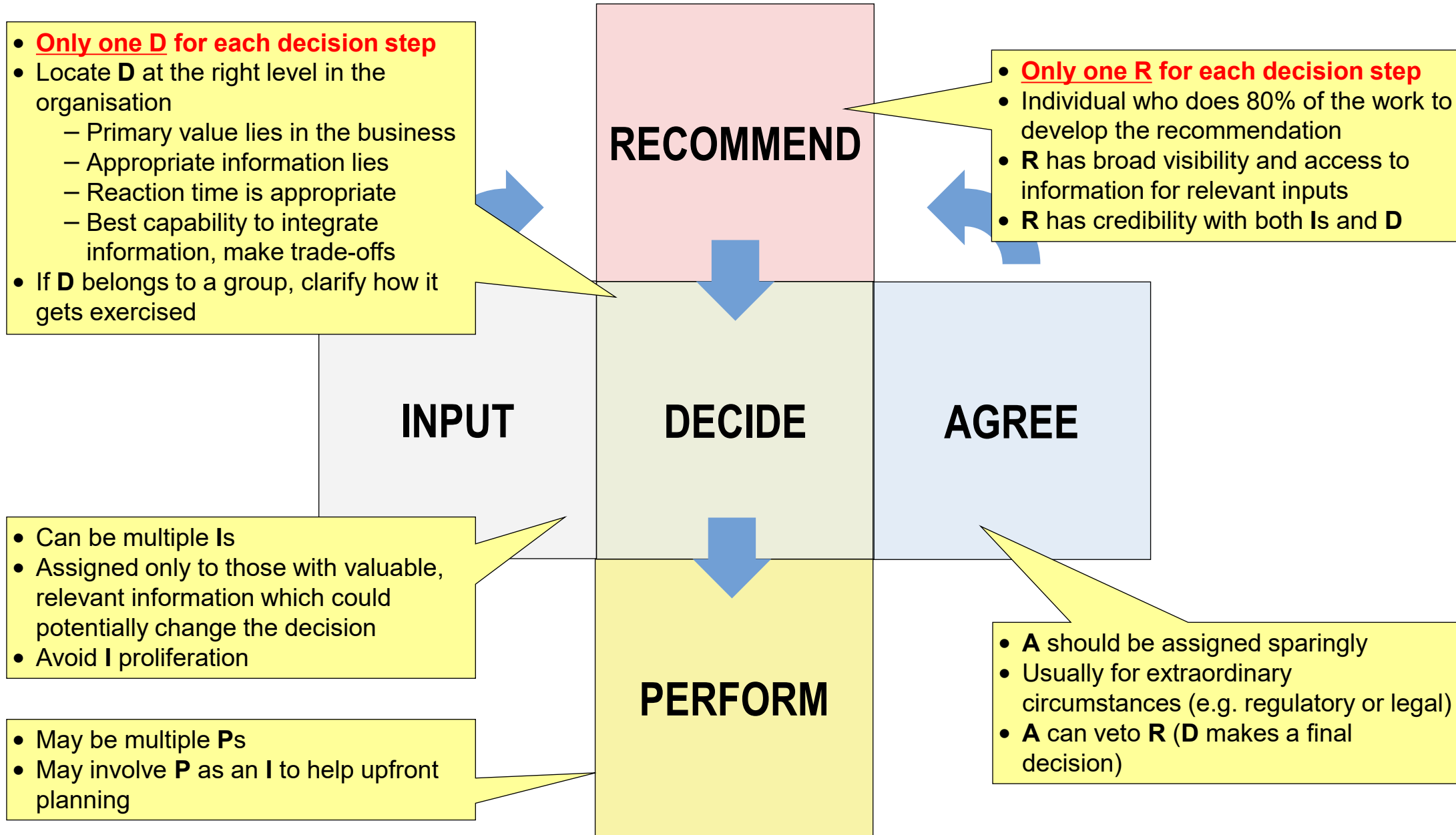
VALUE MEASURES



DECISION			
VALUE COMPONENT		VALUE CRITERIA	VALUE METRICS
OUTCOMES	CARE OUTCOMES		
	USER EXPERIENCE		
	SAFETY / QUALITY		
RESOURCES	REVENUE COSTS		
	CAPITAL COSTS		

RAPID ROLES

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RAPID should reflect what will work in 90% of situations – **design for the rule, not the exception**

- List stakeholders that hold power to influence the decision across the columns (e.g. individual roles, committees, boards or representative groups);
- List the Decision Steps as rows;
- Only one Decide for each decision step;
- Only one Recommend for each decision step;
- Few Agree, if any at all;
- Only Inputs that have something valuable to add;
- If roles are held by groups, clarify how sign-off will be reached.

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DECISION

R

Recommend

A

Agree

P

Perform

I

Input

D

Decide

Stakeholders
→

1 Decision Step 1

2 Decision Step 2

3 Decision Step 3

4 Decision Step 4

5 Decision Step 5

6 Decision Step 6

7 Decision Step 7

8 Decision Step 8

Organisation / team

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KEY ACTIONS



- The activities could be such things as data gathering, analysis, meetings etc.;
- Order the Key Actions sequentially, noting any feedback loops required.

KEY ACTIONS



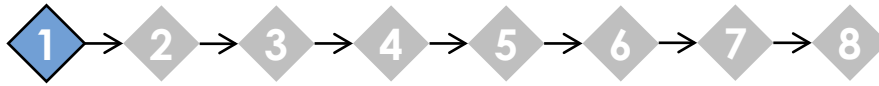
DECISION						
1						
2						
3						
4						
5						
6						
7						
8						

Organisation / team

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Date / version

- **Criteria:** What are the criteria to evaluate the options/make a decision?
- **Critical Steps:** What Key Actions are needed?
- **Choices:** What are the choices that need to be made?
- **Committees:** Which groups need to be engaged?
- **Communication:** How will this decision be communicated to the relevant parties?
- **Closure:** How will we know that closure has taken place?
How will we practically mobilise to implement this decision?



1

Key sub-decision 1

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CRITERIA	CRITICAL STEPS	CHOICES CONSIDERED	COMMITTEES
COMMUNICATION	CLOSURE	VALUE TOOLS	

DECISION TIMELINE

- Consider how long it will take to complete each of the Decision Steps;
- Refer back to the Key Actions identified for each Decision Step to inform the estimation of the amount of time required;
- Work can take place in parallel and may be iterative;
- Strike a balance between pace and realism, informed by past experience.

DECISION TIMELINE



DECISION															
	2017										2018				
Decision Calendar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
1															
2															
3															
4															
5															
6															
7															
8															

Organisation / team

Decision / project

Date / version

- Outcomes must always be considered from the perspective of the service user;
- Lay out the main hypothesis, e.g. ‘we should perform action X because of Y’;
- For each value component, generate a set of assertions that you believe are necessary to support the main hypothesis, e.g. ‘action X will benefit value component Z by...’;
- Refer to the Value Measures and outcome objectives previously decided;
- Develop in tandem with the rationale of the Logic Model where possible.

VALUE BUILDING



Case for change...

Care outcomes primary assertion...

- Sub-assertion 1...
- Sub-assertion 2...
- ...

User experience primary assertion...

- Sub-assertion 1...
- Sub-assertion 2...
- ...

Safety / quality primary assertion...

- Sub-assertion 1...
- Sub-assertion 2...
- ...

Resource requirement primary assertion...

- Sub-assertion 1...
- Sub-assertion 2...
- ...

Strategic factors primary assertion...

- Sub-assertion 1...
- Sub-assertion 2...
- ...

- Carry forward the assertions from the Value Tree;
- Briefly describe the evidence that supports each assertion;
- Score the robustness of each item of evidence (see risk scoring);
- Indicate the next steps to gather any further evidence that is needed for greater confidence (and who will provide it and when);
- Set targets for each value measure – targets should be SMART:
 - ✓ S – specific (relating to value criteria)
 - ✓ M – measurable (relating to value metrics)
 - ✓ A – attainable (relating to evidence base)
 - ✓ R – relevant (relating to value components)
 - ✓ T – time-based (how often metrics will be measured)

EVIDENCE LOG



	PRIMARY ASSERTION	SUB-ASSERTION	EVIDENCE AVAILABLE	FURTHER EVIDENCE TO BE GATHERED	METRICS	TARGET
CARE OUTCOMES	Care outcomes will be improved / maintained by...	<ul style="list-style-type: none"> • Sub-assertion 1... • Sub-assertion 2... 	<ul style="list-style-type: none"> • Evidence 1... • Evidence 2... 	<ul style="list-style-type: none"> • Further evidence... 	<ul style="list-style-type: none"> • Value metrics 1... • Value metrics 2... 	<ul style="list-style-type: none"> • Target 1... • Target 2...

SCORING RATIONALE

- Refer to example scoring mechanisms and tolerances or case studies;
- Apply a mechanism for scoring each value component against:
 - ✓ value outcomes and confidence;
 - ✓ risk; and,
 - ✓ strategic factors.
- Indicate tolerances for each scoring component;
- Clearly indicate and agree tolerances, i.e. unacceptable scores;
- Clearly indicate how scoring logic can be consistently applied across options.

SCORING RATIONALE



	CRITERIA	IMPORTANCE (%)	RATIONALE	SCORING
OUTCOMES				
RESOURCES				
RISK				
STRATEGIC FACTORS				



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MAKING PEOPLE COUNT



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