

# Best Practice Guide: Developing Delivery Plans

March 2024

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# 1. Executive Summary

The twelve-month HSA pilot programme tasked HSA locations with forming partnerships to address multiple high street issues in a relatively short time. This Best Practice Guide for Developing Delivery Plans aims to help HSAs meet pilot programme requirements effectively by alleviating the typical project management burdens that place-based partnerships face when aiming to achieve ‘quick wins’. The goal of this guide is to assist you in developing a delivery plan that will provide tangible and intangible benefits, ranging from establishing immediate changes to fostering a sense of belonging among place stakeholders. See more on Section 3, *‘The importance of delivery plans’*.

Section 2, *‘HSA delivery plan template’*, offers a step-by-step guide on how to populate the delivery plan template available in a customisable form in the Excel model titled [‘How to develop a delivery plan that makes a difference’](#) (see Section 5). This Excel model includes three worksheets:

1. A key providing instructions and suggestions for populating your delivery plan
2. An example of a delivery plan based on best practices from High Street Task Force Experts
3. A customisable HSA delivery plan template

The following is a list of the key information you need for developing a delivery plan, which this Best Practice Guide develop in more details in each of its sections. **Please remember that this is only a guide to best practice and not a requirement – you may have already developed a well-functioning delivery plan and might not need to follow the suggestions included in this guide.**

- After developing a shared vision acknowledging the partnership landscape of your HSA location, you can extrapolate commonly agreed overarching issues summarising the main themes for change characterising your high streets. From a list of overarching issues, you can express actionable projects simplifying and tackling each overarching issue representing single interventions, or ‘quick wins’. See Section 4, *‘What Makes a Good Delivery Plan and Why’*, for further details.
- For projects to be expressed as actionable items with clear outcomes, it is essential to address questions such as who will perform the action and when, where, and how it will be carried out (e.g., cost considerations). Conducting a capacity gap analysis can help answer these questions by comparing the current state of your high street (related to the project) with the desired state (linked to the anticipated benefits of completing the project). Allocating human and material resources, including time, to each project is crucial for ensuring its feasibility. The structure of the delivery plan template will streamline this process for you through milestones identification. See Section 4 and Section 6, *‘Assessing Resource and Capacity Requirements of your Delivery Plan’*, for further details.
- The identification of project ownership and capacity resulting from your capacity gap analysis is crucial for assigning responsibilities for the delivery of each project. In a delivery plan, assigning responsibility does not imply blaming; rather, it serves as a means to facilitate the flow of information/monitoring. Where possible, please name the person/people working on each project. See Section 7, *‘Assessing Responsibilities for Delivery’*, for further details.
- Monitoring aids in managing interventions promptly if deviations arise. Planning is not an exact science, and what you anticipate will rarely follow a linear route of execution. It is important to note that a delivery plan is a ‘living’ document, designed to be adaptable to changes as new circumstances arise. Monitoring can happen at different intervals according to your discretion (if in doubt, please follow Experts’ advice). See Section 8, *‘Monitoring and adapting your delivery plan’*, for further details.

## 2. HSA Delivery Plan Template

### 2.1. Understanding the Structure of your Delivery Plan

In this section, you can find a brief explanation of each column/entry comprising your delivery plan template, which is available for you to use in the *'How to develop a delivery plan that makes a difference'* Excel worksheet attached to this Best Practice Guide. For more detailed information, please refer to the key and example provided in the Excel worksheet and to the guidance laid out in the rest of this Best Practice Guide. It is important to note that the delivery plan is a 'living' document, meaning it goes through cycles of monitoring that will allow you to update its entries whenever necessary.

Image 1 depicts the ideal structure that a good delivery plan should have. A good delivery plan is one that facilitates the achievement of one or more 'quick wins' by simplifying the addressing of overarching issues stemming from your shared vision into a set of single actions with clear, measurable outcomes (who, where, when, and how or at what cost). This structure represents the basic elements of a good delivery plan. See Section 4, *'What Makes a Good Delivery Plan and Why'*, for further details.

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	

Image 1. The HSA delivery plan template.

### 2.2. Overarching Issues

Overarching issues are general statements providing direction for implementing your shared vision, which do not require specificity. These statements represent 'major themes' for action within the HSA programme, identified in alignment with your high street's place-specific challenges. For instance, if your shared vision identifies the development of 'green spaces' as one of the major themes concerning the revitalisation of your high street, you can input the entry 'Town Centre Gardens' (representing an ideal title for this example) into your delivery plan template as shown below (Image 2). Refer to Section 4, *'What Makes a Good Delivery Plan and Why'*, for further details.

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens								

Image 2. Example of an 'Overarching Issues' entry.

## 2.3. Projects

You should simplify overarching issues into manageable, actionable interventions, i.e. ‘projects’, strategically aligning with your shared vision and the local set of skills, time, and budget available. If overarching issues need not be overly specific, projects should. You can input a ‘Projects’ entry as indicated in Image 3 below, with a short title/action statement in bold and a brief summary of its intent and purpose. See Section 4, ‘What Makes a Good Delivery Plan and Why’, for further details.

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens	<b>Community gardens</b> - Implementation of urban growing initiatives to transform a back lane into a community garden							

**Image 3.** Example of a ‘Projects’ entry.

## 2.4. HSA Ownership/Capacity

After having estimated resource and capacity for project delivery, you can input a ‘HSA Ownership/Capacity’ entry assigning responsibility for project implementation and keeping track of resources for capacity gap analyses. See Section 6, ‘Assessing Resource and Capacity Requirements of your Delivery Plan’ for further details.

Where possible, please name the person/people working on the project. Highlight the name of the project coordinator in bold, and add their affiliation in brackets (see Image 4 below). If applicable, also add the name of the other individuals working on the project.

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens	<b>Community gardens</b> - Implementation of urban growing initiatives to transform a back lane into a community garden	Local Cooperative X; City Council Y - <b>Name Surname</b> (Local Cooperative X)						

**Image 4.** Example of a ‘HSA Ownership/Capacity’ entry.

## 2.5. Cost Inputs

Here, you should input the estimation of the monetary resources that will be allocated to the implementation of the project (see Image 5 below). Please specify if they are coming from a specific fund (e.g., UKSPF).

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens	<i>Community gardens - Implementation of urban growing initiatives to transform a back lane into a community garden</i>	Local Cooperative X; City Council Y - <b>Name Surname</b> (Local Cooperative X)	£10,000 (UKSPF)					

Image 5. Example of a 'Cost Inputs' entry.

## 2.6. Start Date

Here, you should input the starting date of the project (see Image 6 below).

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens	<i>Community gardens - Implementation of urban growing initiatives to transform a back lane into a community garden</i>	Local Cooperative X; City Council Y - <b>Name Surname</b> (Local Cooperative X)	£10,000 (UKSPF)	01-Mar-24				

Image 6. Example of a 'Start Date' entry.

## 2.7. Milestones for Delivery

Milestones are time segments denoting the incremental achievements necessary for project delivery. They are progress markers, which should be outlined as detailed actionable steps. For instance, the project titled 'Community gardens', can be implemented in three milestones segmenting the HSA pilot programme lifespan in three equal parts of four months each (see Image 7 below). You can use the entry 'Output delivered' as the standard final milestones for all your projects, regardless of how you decide to segment milestones, or when the project is estimated to be accomplished (you can always estimate the completion of a project in the first or second milestone). See Section 4, 'What Makes a Good Delivery Plan and Why', for further details.

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens	<i>Community gardens - Implementation of urban growing initiatives to transform a back lane into a community garden</i>	Local Cooperative X; City Council Y - <b>Name Surname</b> (Local Cooperative X)	£10,000 (UKSPF)	01-Mar-24	<i>The site audit is done, and an agreement has been reached</i>	<i>Initiation of work on the agreed site</i>	<i>Output delivered</i>	

Image 7. Example of 'Milestones for Delivery' entries.

## 2.8. End Date

Here, you should input the ending date of the project. You can consider using a 'RAG' (Red, Amber, Green) rating system to assess the priority of each project based on the time available, its capacity, and its significance in terms of achieving a meaningful 'quick win' for the HSA. In the delivery plan template, you can apply the RAG rating system (e.g., red = "very high"; amber = "high"; green = "medium/low" priority) to 'End Date' entries for a quick evaluation of each project's priority (see Image 8 below). See Section 4, 'What Makes a Good Delivery Plan and Why', for further details.

<< Please input the name of your city/town here >>								
HSA Delivery Plan								
Overarching Issues	Projects	HSA Ownership/Capacity	Cost Inputs	Start Date	Milestones for Delivery			End Date
					Within N months	Within N months	Within N months	
Town Centre Gardens	<b>Community gardens</b> - Implementation of urban growing initiatives to transform a back lane into a community garden	Local Cooperative X; City Council Y - <b>Name Surname</b> (Local Cooperative X)	£10,000 (UKSPF)	01-Mar-24	The site audit is done, and an agreement has been reached	Initiation of work on the agreed site	Output delivered	01-Nov-24

**Image 8.** Example of an 'End Date' entry.



## 3. The Importance of Delivery Plans

### 3.1. Background: The Need for Delivery Plans

UK high streets are currently grappling with issues such as declining footfall, high vacancy rates, and safety concerns, significantly impacting their vitality and viability. HSAs are called to form partnerships and address these issues within a short time span of twelve months. Given this context, HSAs will likely find themselves under considerable strain, dealing with the scale and complexity of the interventions implementing partnerships' shared vision. IPM research reveals that the implementation of a shared vision for the regeneration of town centres is hindered by project management barriers, such as identifying the necessary capacity, responsibilities, and expertise to deliver interventions (Parker *et al.*, 2017). Place management experts and practitioners emphasise the contemporary significance of supporting partnerships overcoming these barriers, as managing project delivery represents a controllable factor capable of preventing interventions from being completely ineffective or incomplete (State of the Nation Report, 2024).

In this context, research indicates that **the development of delivery plans** offers several benefits to partnership activities, including providing clear direction, ensuring accountability, coordination, and alignment, focusing efforts, allocating resources effectively, mitigating risks, and facilitating effective communication. These aspects collectively support the achievement of immediate yet sustainable place regeneration goals (Peel and Parker, 2017).

Thus, delivery plans play a crucial role in streamlining the implementation of HSAs and partnerships' shared vision, expertise, and interest in place transformation by identifying 'quick wins'. These focus on improving vitality and viability through targeted initiatives, such as addressing the **25 priorities** for high streets (Parker *et al.*, 2017), and aligning with one or more of the '**4Rs**' strategies of **repositioning, reinventing, rebranding, and restructuring** the town centre (Theodoridis *et al.*, 2017). Consequently, delivery plans enable strategic place change, whose outcomes can be tracked as evidence of HSAs' impactfulness. In fact, the flexible delivery plan template provided in this Best Practice Guide can also be useful in collecting evidence of HSA achievements for HSA evaluation according to the **Theory of Change**, as it helps capture the causal linkage between different partners and interventions that together produce impact (Garland and Beach, 2023).

This section aims to show that developing delivery plans is important for HSAs because they bring tangible and intangible benefits to both the high streets and the partnerships working towards making place regeneration happen. However, it is important to acknowledge the following fact: **every place is different and will be at different stages of the HSA pilot programme**. This Best Practice Guide for Developing Delivery Plans (and the delivery plan template it provides – see Section 2 and 5) aims to equip HSAs with a tool to effectively streamline the implementation of their shared vision. Experts from the HSTF team can assist HSAs in developing their action plans.

### 3.2. Delivery Plans Make Place Regeneration Happen

Place stakeholders introduced to delivery plans consider this project management tool as a simple yet impactful facilitator of projects completion (Parker *et al.*, 2017; State of the Nation Report, 2024). The case of Wrexham exemplifies the success of HSTF continuous support in assisting place stakeholders in developing delivery plans based on a shared vision and clear priorities for high street regeneration, such as footfall and occupancy level improvement (Wrexham.com, 2016). More recently, there have been many additional instances of successful case studies of UK high streets validating HSTF five year-long practice of supporting partnerships developing delivery plans,

corroborating the correlation between developing a delivery plan and the achievement of transformative high street regeneration. For instance (State of the Nation Report, 2024):

- In **West Bromwich**, local partnerships involving organisations from different sectors have swiftly implemented high street initiatives by developing a delivery plan prioritising the attainment of simple and realistic ‘quick wins’. These include new seating, lighting enhancements, and increased urban greening and artwork
- In **Earlestown**, recently funded local partnerships have created a delivery plan aimed at performing immediate actions to revive a town experiencing a steady decline in vitality and self-confidence. As a result of this initiative, partnerships were able to quickly expand and organise events drawing people to the town centre, bolstering support for local businesses
- In **Liscard**, the development of a delivery plan has facilitated partnerships in securing immediate ‘quick wins’, including tree planting, shopfront changes, business awards, Christmas events, and enhanced collaboration with the police to address antisocial behaviour

HSTF work shows that delivery plans can harness the creativity and innovation of partnerships crucial for generating place-based ideas that lead to immediate (and realistic) economic, cultural, and social improvements for high streets and town centres. However, how exactly do delivery plans bring about tangible place change in operational terms? And what are the intangible benefits for HSAs in developing delivery plans?

### 3.3. The Tangible Benefits of Developing Delivery Plans

From an operational perspective, delivery plans streamline the scale and complexity of collaborative envisioned interventions. They present a systematic yet adaptable (place-specific) sequencing of actions for success, easily comprehensible to all involved parties. Essentially, delivery plans break down major issues, such as ‘Reducing barriers to delivering cultural activity in high streets’, into a series of smaller projects with clear outcomes, such as ‘Creating a fast-track EOI process for cultural activity proposals’. By simplifying issues into manageable projects, delivery plans make gaps in required capacity and resources, allocation of roles and responsibilities, and potential risks visible at first glance.

Most importantly, delivery plans contextualise HSA progress within a timeframe, equipping partnerships with the necessary tools to assess capacity and address short time constraints through a flexible template providing a way to keep track (and hence measure) their success. By scheduling milestones and anticipating next steps in a rational and place-specific manner, delivery plans provide a structure to the incredibly complex processes of place transformation that IPM research has simplified in the ‘4Rs framework’ for place regeneration (Theodoridis *et al.*, 2017): repositioning (i.e., how to implement a shared vision meeting the needs of your catchment); reinventing (i.e., how to change the offer on your high street and activate your high street); rebranding (i.e., how to change perceptions of your high street and encourage more communication to flow); and restructuring (i.e., how to change the management and governance of your high street – see also Peel and Parker, 2017). In other words, delivery plans will empower partnerships with ‘quick wins’ providing structure for a manageable ‘4Rs’ kind of regeneration. Additionally, reaching milestones, which are intermediary steps symbolising progress towards the final outcome, will allow all stakeholders to witness real-time, cause-effect, tangible changes. This will be useful to evidence the impact of projects in overcoming overarching issues for HSA evaluation in line with the Theory of Change (Garland and Beach, 2023).

This crucial aspect of delivery plans is what helps boost partnerships’ morale and communities’ confidence in the work of partnerships due to their structuring of place-based interventions in

achievable intermediary steps towards enduring place regeneration. This intangible benefit emerges from the tangible outcomes stemming from straightforward yet accurate project planning, which the delivery plan template included in this Best Practice Guide aims to facilitate.

### **3.4. The Intangible Benefits of Developing Delivery Plans**

By adopting a delivery plan strategy, all partnerships advance together on collaborative actions, yielding immediate results within the short time frame of the HSA pilot programme. Given the time constraints, delivery plans play a crucial role for HSAs in visualising progress and risks at a glance, enhancing communication within and between partnerships, the HSA board, and the public. In this respect, delivery plans serve as an effective tool for fostering relationships, instilling a sense of purpose, and celebrating immediate achievements through milestones, thereby cultivating a sense of belonging among all parties involved, including the community benefiting from HSA-led regeneration (Peel and Parker, 2017).

Within the partnership context, when individuals involved in collaborative project delivery feel valued as part of a meaningful initiative, delivery plans contribute to HSA members' commitment to community-wide objectives, motivating them to work for the common good of the high street (State of the Nation Report, 2024). Therefore, the development of delivery plans for HSAs will not only bolster the creation of resilient and vibrant high streets through a controllable and systematic structuring of operations but also enhance the intangible benefits of HSAs by fostering emotional engagement, strengthening partnerships, and securing both internal and external support for future place-based collaborations – all factors contributing not only to achieving 'quick wins' but also to creating an enduring hub of place regeneration initiatives (Peel and Parker, 2017). Emotional engagement is important, considering that, in practice, perceptions about the extent of one's individual input into partnerships' may depend on personal energy and enthusiasm (Peel and Parker, 2017).

Overall, developing delivery plans bring about relationships that enhance a community's sense of belonging, which is crucial for generating the momentum and confidence needed to garner broader support for partnerships. This will not only tap into partnerships' creative energies but also foster the formulation of initiatives ranging from immediate confidence-boosting projects to potential long-term collaborations for the future (State of the Nation Report, 2024).

## 4. What Makes a Good Delivery Plan and Why

### 4.1. Background: The Need for Delivery Plans

Once the HSA and partnerships have agreed on a shared vision for high street regeneration, you should be able to identify overarching issues preventing the high street from becoming a vital and viable place for the community. Expert Visits can assist you in identifying these overarching issues that partnerships need to address within the framework of the HSA pilot programme.

Once you have a list of overarching issues agreed upon as a consistent summary of the challenges identified in developing your shared vision, you should simplify them into actionable tasks with clear outcomes – i.e., ‘projects’. To delineate projects, you should concurrently acknowledge other basic elements of successful plan delivery, such as ownership/capacity; time (e.g., start dates, milestones, and end dates); and cost inputs. A delivery plan that truly makes a difference streamlines project delivery within a timeframe, assigning responsibilities and budget constraints (BIS, 2010). All this information forms the very basics of a good delivery plan.

This section aims to define what makes a good delivery plan and why, offering an understanding of the delivery plan template provided in the *‘How to develop a delivery plan that makes a difference’* section of this Best Practice Guide (see Section 5).

### 4.2. From Overarching Issues to Projects

A good delivery plan begins with a shared vision and a list of overarching issues. However, relying solely on overarching issues is insufficient for effective interventions because they lack practicality in terms of measurability – namely, who will execute them, when, and how, to achieve specific outcomes for place change. Overarching issues are general statements meant to provide direction for implementing the shared vision and do not require excessive specificity.

To develop a robust delivery plan, it is essential to simplify overarching issues into manageable actions with specific outcomes, termed as ‘projects’. The term ‘project’ underscores the strategic alignment between proposed actions and the shared vision, which is crucial for consistency and monitoring. This simplification of overarching issues into projects is not merely rhetorical; in time-sensitive contexts, such as the HSA pilot programme, simplification facilitates the attainment of ‘quick wins’. The immediacy of a project’s outcomes depends on the clarity and specificity of its intended outcome, adhering to the principle of **‘keeping it simple’** (BIS, 2010).

Projects should articulate a single, specific outcome that is realistic and achievable. They should be ‘actionable’, meaning individuals or teams should have a clear understanding of how, when, and where to execute them. For example, if partnerships aim to address the lack of green spaces in the town centre, the overarching issue ‘Town Centre Gardens’ (used as an example in Section 2) can be translated into an actionable project titled ‘Implementation of urban growing initiatives to transform a back lane into a community garden’. Naming the project simply ‘Changes to the town centre that will build more green spaces’ would not reflect an actionable approach towards achieving the intended outcome. A project of this nature would be considered ‘out of scope’ (BIS, 2010). The appropriate project formulation ensures alignment with the overarching issue while maintaining specificity of execution and achievability.

The next paragraph will elaborate on how defining projects should consider other fundamental elements of a delivery plan, such as ownership/capacity, time, and cost inputs. Specifically, it will focus on addressing time constraints, while ownership/capacity and cost inputs will be discussed in more detail in Section 6, '*Assessing Resource and Capacity Requirements of your Delivery Plan*'.

### 4.3. Projects: The Core of Delivery Plans

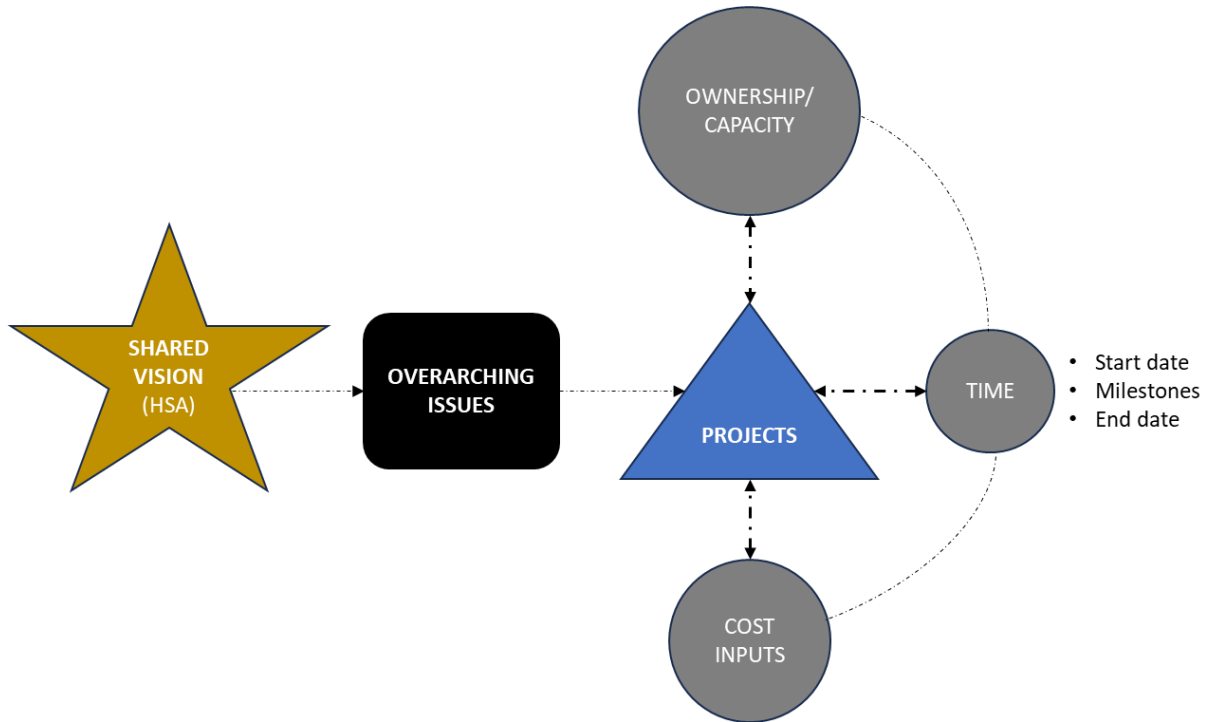
When defining a project, it is crucial to delineate its boundary from others within the same overarching issue to avoid overlaps or gaps in necessary work, aligning with HSA stakeholders' agreement (BIS, 2010). Projects are often expressed as a list of deliverables accompanied by action statements or tasks to be completed within different time periods. This approach allows for the clear demarcation of projects for each overarching issue within the timeframe of the HSA pilot programme and in accordance with budget constraints, termed as 'cost inputs' in the delivery plan template provided in this Best Practice Guide (see Section 2 and 5).

Projects can be articulated by estimating start and end dates, with the end date often aligning with the conclusion of the pilot programme. Within this timeframe, segments representing steps towards project completion are identified, facilitating the achievement of outcomes or 'quick wins' (e.g., 'Implementation of urban growing initiatives for the use of a back lane into a community garden'). These segments are 'milestones' denoting the incremental achievements necessary for the project's overall success. They serve as tangible progress markers, fostering motivation among HSA stakeholders and enhancing their sense of involvement and belonging (Peel and Parker, 2017). Milestones should be outlined with specificity, detailing actionable steps similar to projects but with even greater precision in describing each step, if possible. For instance, 'Implementation of urban growing initiatives for the use of a back lane into a community garden', can be implemented in three milestones, such as

- **Milestone 1:** 'The site audit is done, and an agreement has been reached'
- **Milestone 2:** 'Initiation of work on the agreed site'
- **Milestone 3:** 'Output delivered' (a recommended formula to use for the final milestone)

The delivery plan template provided in this Best Practice Guide suggests segmenting milestones into three four-month periods. This timeframe allows for the execution of tasks and the monitoring of progress effectively. However, you have the flexibility to customise the template according to your needs or with the assistance of Expert Visits. Each project's priority will be rated either 'quantitatively', e.g., based on its immediacy for achieving a 'quick win', or 'qualitatively', e.g., by considering the impact of the outcome on the current state of your high street. We recommend a simple prioritisation rating system for projects, such as 'very high', 'high', and 'medium/low'. You can use a 'RAG' (Red, Amber, Green) rating system to assess the priority of each project based on the time available, its capacity, and its significance in terms of achieving a meaningful 'quick win' for the HSA. In the delivery plan template, you can apply the RAG rating system (e.g., red = "very high"; amber = "high"; green = "medium/low" priority) to 'End Date' entries for a quick evaluation of each project's priority.

Image 9 (see below) is designed to help you visualise how projects emerge from overarching issues, forming the core of your delivery plan. Ownership/capacity, time, and cost inputs are all centred around the definition and execution of projects, with each factor influencing the others. For instance, capacity available will affect the time required for completion, and cost inputs will impact available capacity, creating a recursive assessment process for not only projects but also ownership/capacity, time, and cost inputs.



**Image 9.** Visualising the project definition process for delivery plans development.

## 4.4. The 'Living' Nature of a Delivery Plan

Delivery plans are designed to be adaptable and customisable to meet your specific needs. Adaptability is a key characteristic of delivery plans, as their development and implementation follow the Plan-Do-Check-Adapt (PDCA) cycle (adapted from Jones et al., 2010). This means that, through ongoing monitoring, you can revisit your projects and redefine them as necessary based on any unexpected or emerging circumstances related to ownership/capacity, time, and budget constraints. Section 8, 'Monitoring and Adapting your Delivery Plan', explore this process in more detail.

## 5. How to Develop a Delivery Plan that Makes a Difference

Please refer to the attached Excel file ([click here](#) to access and download it).

## 6. Assessing Resource and Capacity for Delivery

### 6.1. Background: A Shortage of Relevant Local Skills

The State of the Nation Report (2024) highlights that limited local capacity, financial constraints, and a shortage of relevant local skills hinder significant progress in completing collaboratively envisioned interventions. Effective partnership leadership is pivotal in amalgamating local expertise, ensuring equitable representation of local communities. Delivery plans, coupled with leadership prioritising proactive community engagement, foster transparent communication and collaboration, facilitating the diversity and inclusivity of HSAs. This broadens the scope for accessing appropriate skills essential for specific domains of place regeneration, as outlined in the template's 'Overarching Issues' and 'Projects' columns/entries, while also visualising resource and capacity requirements according to a clear, flexible timeline. The visual facilitation provided by delivery plans is instrumental in assessing resource and capacity requirements, enabling partnerships to identify potential gaps. By identifying overarching issues and devising realistic steps to address them through simple actions representing projects, partnerships can coordinate each milestone with a fair distribution of resources and responsibilities.

This section aims to address the following question. **After establishing partnerships and formulating a delivery plan aimed at making a tangible impact, how can HSAs ensure they possess the requisite resources, including personnel, for project execution?**

### 6.2. Knowing your Partnership Landscape

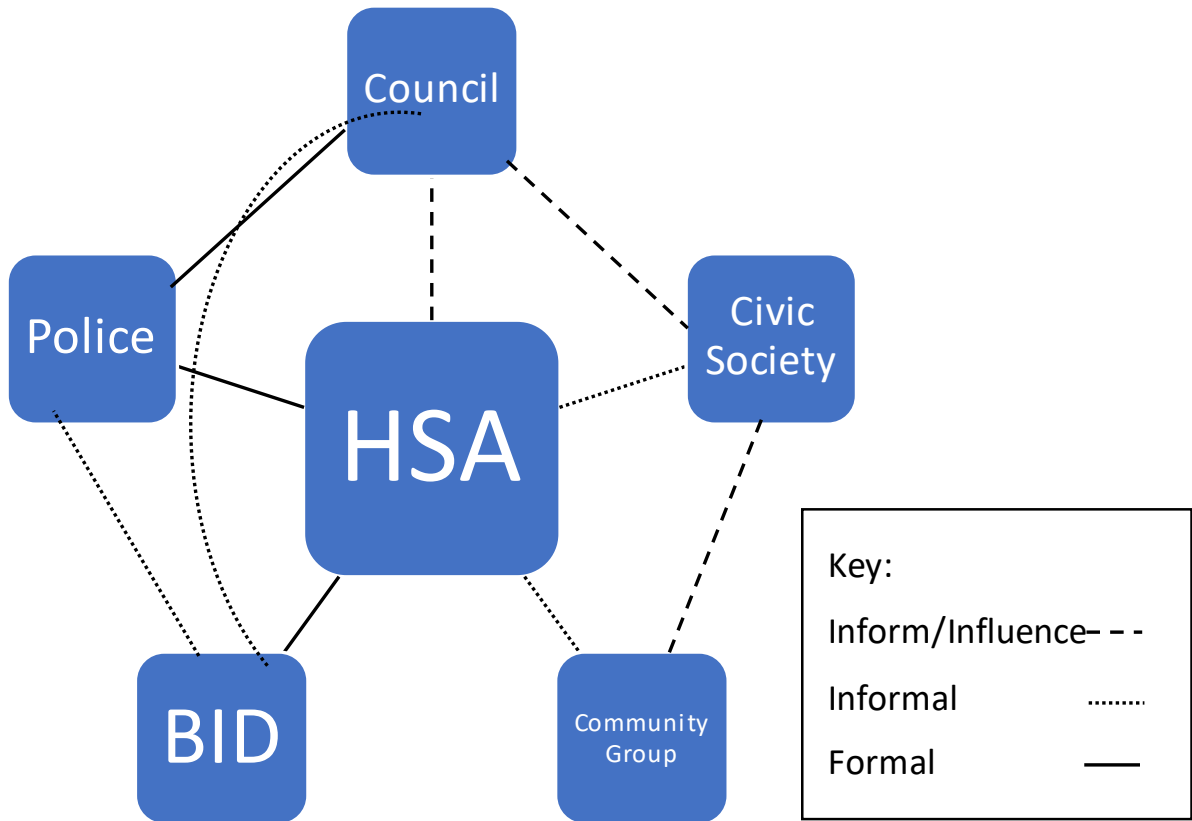
Through the development of delivery plans, partnerships can effectively assess resource and capacity requirements. Delivery plans outline accountability mechanisms for project implementation and provide a template for estimating capacity (Peel and Parker, 2017).

Understanding the structure of your HSAs' partnerships is crucial. This not only aids in identifying individuals involved in each project and their time commitments, thereby visualising HSAs' assets or deficiencies, but also helps in adapting projects to future circumstances while maintaining clarity of roles and partnership structure. For example, various local authorities across the UK have engaged with their communities to bolster capacity, drawing upon civil society resources. This has resulted in increased enthusiasm among community members to participate in high street change efforts, rendering delivery plans more adaptable to potential future challenges (Peel and Parker, 2017).

To ascertain the relevant local skills within your community, it is beneficial to map your partnership landscape. In some regions, distrust between stakeholders and local authorities may be prevalent, coupled with inadequate communication channels. Conversely, partnerships may already exist in other areas, albeit with varying degrees of effectiveness. Mapping both existing and potential collaborations among place stakeholders in the context of the HSA pilot programme can provide insight into available resources and capacity for implementing a shared vision.

Detailed guidance on mapping HSAs' partnership landscape can be found in the HSTF's '**Best Practice Guide: Partnership Formation and Development**'. This guide offers instructions on mapping relationships between different groups within your HSA, resulting in a visual diagram outlining connections and collaborations, and raising awareness about the existing partnership structure and potential capacity (see Image 10 below).





**Image 10.** Example of mapping an HSA's partnership landscape, which can be found in the HSTF's 'Best Practice Guide: Partnership Formation and Development' (see for further details).

### 6.3. Capacity Gap Analysis: Estimating Resource and Capacity

Once you have defined (i) your partnership landscape; (ii) the overarching issues; and (iii) the projects populating your delivery plan template, along with an estimated timeline of execution, you can begin conducting a **capacity gap analysis** to estimate the resources and capacity required for your partnerships to achieve realistic 'quick wins'.

Essentially, a capacity gap analysis involves the following three steps (Harmon, 2019):

- Outline the **current state** of your HSA (e.g., partnership landscape and overarching issues)
- Compare the current state with the **desired state** (e.g., the outcome of projects)
- **Identify any gaps** between the two states

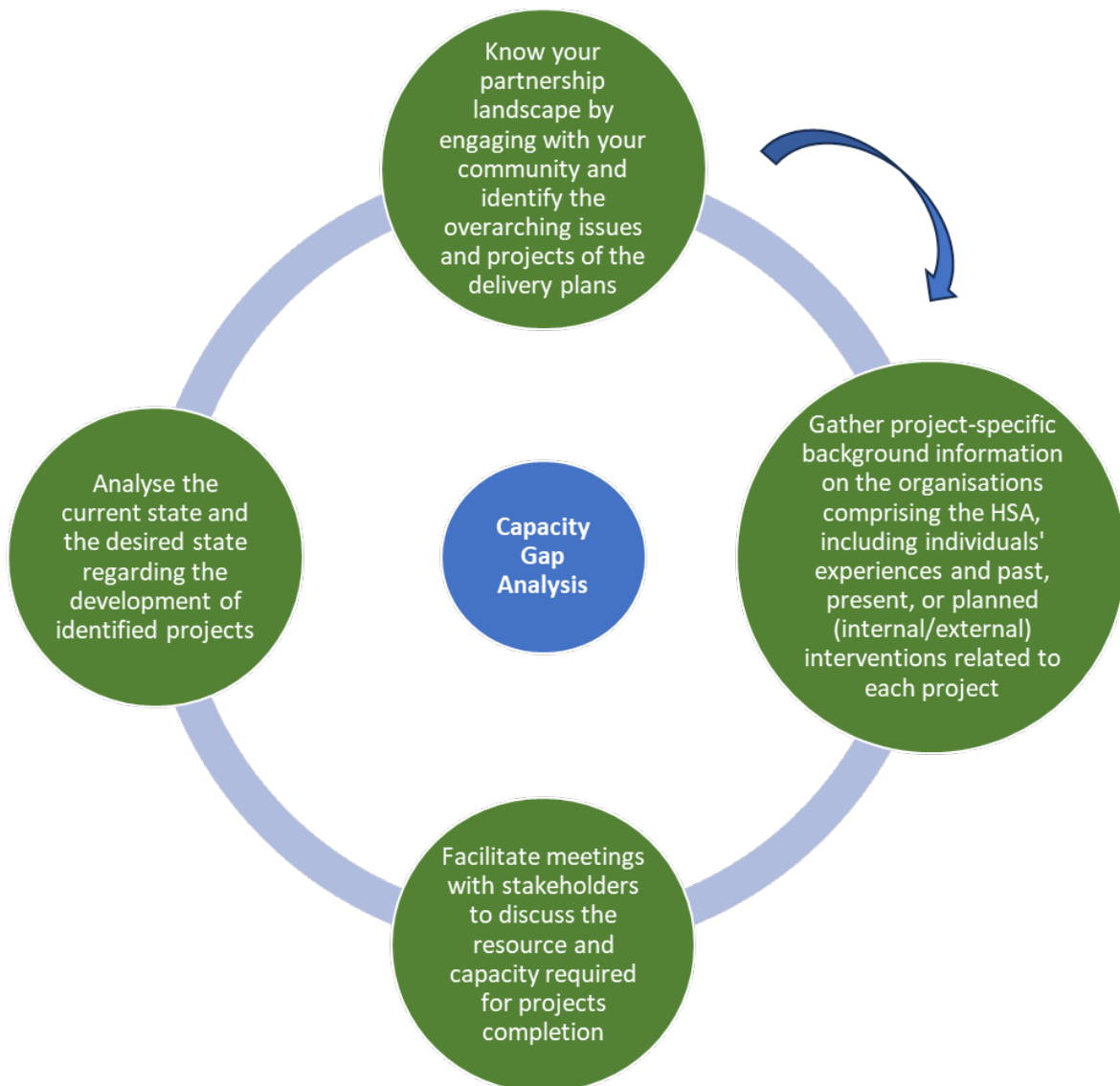
The process of identifying gaps between the two states should focus on pinpointing the root causes that hinder the achievement of the outcome (i.e., project delivery within the end date). This involves assessing the impact of cost inputs and capacity on milestone achievement.

For instance, let us consider a single project with a clear, realistic outcome, 'X'. First, one begins with a statement of the problem as defined by the achievement of X. Secondly, one refines the statement of the problem and describes the current potentiality of HSAs' partnerships in achieving X. The capacity gap suggests the kinds of changes (in terms of human resources and cost inputs) that will be required to achieve X and hence arrive at the desired state. You can also consider addressing potential capacity gaps in the future while the project is under execution via the process of

monitoring (see Section 8, 'Monitoring and Adapting your Delivery Plan') so to mitigate risks of unexpected capacity issues. Some helpful questions you might ask yourself during the capacity gap analysis are (Harmon, 2019):

- What is involved in achieving X?
- What individuals, time, and cost inputs will be required to achieve X?
- Do the individuals involved have the appropriate experience and skills to achieve X?
- What risks can hinder the achievement of X?
- What results and what return should we expect from the effort of achieving X?

Image 11 (see below) represents the capacity gap analysis in the form of an adaptive cycle. This is a useful representation indicating that you can always reassess resource and capacity requirements as needed.



**Image 11.** Capacity gap analysis: an adaptive cycle for estimating resource and capacity requirements.

# 7. Assessing Responsibilities for Delivery

## 7.1. Background: The Need for Clear Roles and Individual Responsibilities

Partnerships, which form the backbone of HSAs, operate within complex environments characterised by diverse interests, expertise, and knowledge. These environments are shaped by unique social, political, and historical factors specific to each location. Comprised of various organisations and individuals representing public, private, or community sectors, each brings distinct perspectives, contributions, and roles to effect change within their respective areas (Peel and Parker, 2017).

The State of the Nation Report (2024) highlights the importance of adopting an approach that aligns and formalises these diverse interests within a structured framework. This alignment enables individuals to collaborate effectively towards common goals within their communities. In this context, the delivery plan serves as a formally structured yet adaptive framework enabling HSAs and partnerships to implement their shared vision collaboratively.

Given the diverse and pluralistic context HSAs must navigate to effectively represent the local community, it is crucial to assign clear roles to those community representatives (e.g., a cooperative or organisation) forming partnerships responsible for projects related to each overarching issue. Effective joint-working requires attention to both relational dynamics and defined roles and responsibilities and clarifying ownership responsibilities ensures that all parties can work on their projects without confusion or lack of coordination (Peel and Parker, 2017). This section aims to assist your HSA in assessing responsibilities for successful project delivery.

## 7.2. Project Ownership: Roles Assignment

After assessing resource and capacity requirements for each project, it becomes evident that understanding how different roles and responsibilities are defined and interrelate is crucial. Conflicting ownership issues often lead to unclear shared visions for a place and its interventions (Peel and Parker, 2017).

Therefore, it is imperative to assign clear roles within a collaborative approach to regenerating high streets, as seen in the context of the HSA pilot programme. Partnerships play a vital role in coordinating inputs, particularly when actively engaged with the community they represent (Peel and Parker, 2017). Each individual involved in HSA partnerships brings unique strengths, emphasising the necessity for active involvement from all, as every local can contribute valuable ideas for transforming the place and facilitating project delivery.

In this context, project ownership within HSAs – instantiated in the delivery plan template as ‘ownership/capacity’ – is the initial step toward assigning clear roles within the development of delivery plans and the associated template provided by this Best Practice Guide. The project owner, whether an organisation within the HSA or a partnership, bears accountability for the project’s success. They ensure the project aligns with the shared vision, sets objectives, secures funding, and supports risk mitigation through resource and capacity assessment. Additionally, the project owner – or ‘owners’ when partnerships are involved – assembles the team of individuals working on the

project, assigning operational roles according to their skills and serving as the primary communication conduit between project coordinators, team members and the HSA.

In particular, the project owner assigns the role of coordinator (or lead) to an individual identified as part of the capacity for that project's delivery. In other words, the project owner identifies who (individual, community group, constituted body, business, or public sector) are those who can take up delivery and be assigned to projects, which the coordinator – a member of the team working on the project with relevant expertise and skills – would supervise collaboratively (namely, through a type of horizontal leadership depending on reciprocity and trust and engaging actively with team members and the community – Peel and Parker, 2017; State of the Nation Report, 2024).

### **7.3. Project Coordination: Supervising Project Delivery**

The project coordinator is responsible for managing the daily operations of the team involved in a project, overseeing capacity micro-planning, monitoring milestone achievements, and reporting progress to both the project owner and the HSA board. The monitoring process follows a 'continuous cycle' (BIS, 2010), which you can adapt to your needs. Section 8, *'Monitoring and Adapting your Delivery Plan'*, will explore this process in more detail.

# 8. Monitoring and Adapting your Delivery Plan

## 8.1. Background: The Need for Delivery Plans Adaptation

While a plan outlines desired actions, it represents just one of the countless pathways that might unfold in the process of improving the current state to the desired one. In reality, your project will most likely take a different path from that initially envisioned in your delivery plan, one that is uncertain. Monitoring ensures that this path leads to the intended destination, adhering to schedule and budget constraints. The delivery plan serves as a benchmark for assessing actual progress, costs, and timing, enabling the identification of any deviations and facilitating corrective measures if necessary (BIS, 2010).

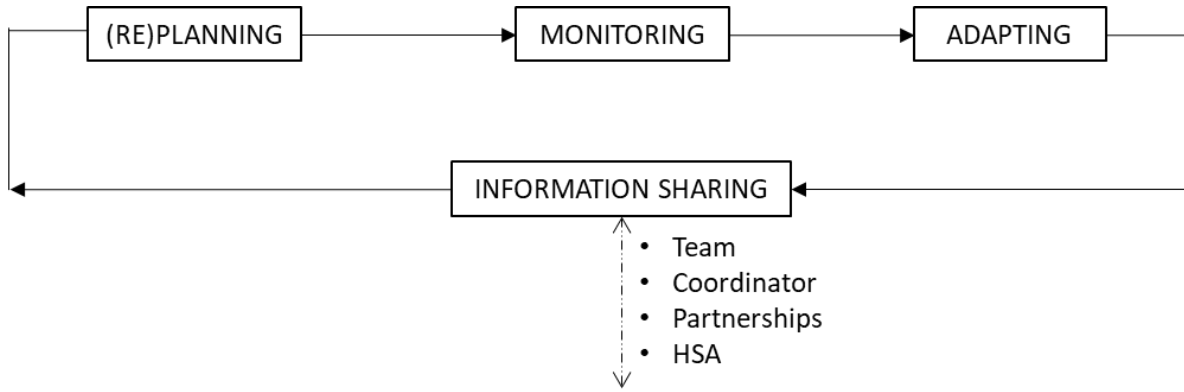
Instead of viewing your delivery plan as a rigid set of standards to strictly adhere to, the delivery plan template attached to this Best Practice Guide should be seen as a place-specific, flexible framework. Depending on the circumstances, you might need to make decisions about the level of management rigour required to deliver projects and reduce the risk of not achieving one or more ‘quick win’ during the twelve months of the pilot programme. This section aims to assist you in making these decisions by proposing a way you could monitor the progress of your delivery plan and adapt it if necessary.

## 8.2. Monitoring

To grasp the functioning of monitoring, it is important to understand that despite meticulous planning and commitment, projects may not unfold exactly as envisioned (BIS, 2010). This does not imply that delivery plans are not really helpful in achieving ‘quick wins’; rather, it entails that partnerships and all HSA stakeholders should develop delivery plans to be able to anticipate risks and adapt to circumstances while implementing a shared vision given time and budget constraints. Therefore, monitoring how your delivery plan unfolds is key to successful project delivery.

The crux of effective monitoring lies in having timely management intervention if deviations arise (BIS, 2010). One of the most important outcomes of monitoring is facilitating the flow of information between different stakeholders, ensuring that your collaborators and partners are aware of the progress of projects and any possible adaptations that the HSA board, partnerships, project coordinators, and teams may deem necessary. Ideally, information sharing during the monitoring process should flow in both directions: between project team members and project coordinators (e.g., individuals supervising collaboratively teams working on the delivery of the project); project coordinators and project owners (e.g., the civic society, organisations, and partnerships within the HAS assigned to a project); and project owners and the HSA board (e.g., the people representing the community and constituting the partnerships involved in the pilot programme).

You can think of monitoring as a more or less frequent process. You can monitor the delivery plan every week or whenever HSA meetings are scheduled; before/after Expert Visits or when a milestone approaches; or simply whenever anything unexpected happens along the way to the end of the pilot programme. Regardless, Image 12 (see below) presents a diagram envisioning the monitoring process as a ‘continuous cycle’, which you can use as a benchmark for your own monitoring purposes (BIS, 2010).



**Image 12.** A proposal for the continuous cycle of monitoring delivery plans for HSAs.

### 8.3. Adapting

Your delivery plan is a ‘living’ document, and hence adaptable. The continuous cycle of monitoring will assist you in making appropriate decisions regarding corrective actions. The delivery plan template provided in this Best Practice Guide (see Section 2 and 5) is a customisable tool designed for HSAs to streamline project delivery and adjust as needed. Projects may require additional capacity, cost inputs may vary during the pilot programme, risks may necessitate reassessment of project actions or timelines, and partnerships may evolve as new local skills are identified or new expressions of interest in the HSA programme emerge. Through the monitoring process, you will be able to track changes and support your corrective actions (or adaptations) with evidence. If you intend to utilise the delivery plan template from this Best Practice Guide (see Section 2 and 5), it is recommended to track changes by saving adapted versions of the template in new files, clearly indicating the date of amendments. Additionally, consider generating a report to document the monitoring process and adaptations for archival purposes.

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