

Developing People Improving Care

The Conditions: In Brief



2

Compassionate, inclusive and
effective leaders at all levels

condition 1

condition 2

condition 3

condition 4

condition 5



Developing People Improving Care was created by the thirteen organisations that form the National Improvement and Leadership Development Board. Every month the operational leads for Developing People Improving Care from those thirteen organisations meet as an implementation group, which drives our approach to the framework, and ensures greater alignment between our work.

Introduction

This short guide is the second in a series of five which aims to provide more information to those with a deeper interest in any of the five conditions that underpin Developing People Improving Care. This second guide relates to Condition Two, and the need to ensure we have 'compassionate, inclusive and effective' leadership at all levels in health and care.

In 2016 the organisations that sponsor Developing People Improving Care recognised this condition as being crucial to achieving the continuous improvement in care for people, population health and value for money, that the framework strives for.

The challenges facing the healthcare system are significant. We cannot afford to see overcoming them as separate from the importance of creating the right culture. Evidence shows us that as well as being the right thing to do, increasing staff engagement, reducing bullying and harassment and building stronger teams leads to benefits in terms of patient outcomes, innovation and financial expenditure. We are rightly proud of our workforce – but to truly make our health and care system the envy of the world, we must ensure that they have a culture in which they can flourish.

Developing People Improving Care Together.

Developing People Improving Care is the national framework to develop leadership and improvement capability throughout the health and care system. It seeks to create the right conditions to equip and encourage all staff and organisations involved in NHS funded activity to continually improve their local health and care systems.

The change we want to see:

- Behavioural change from the centre, with oversight bodies modelling compassionate and inclusive leadership
- Enhanced systems leadership capacity throughout the NHS
- Improvement skills for all staff
- Compassionate, inclusive leadership delivered by staff at all levels
- The right numbers of diverse, appropriately developed people to fill current and future senior management vacancies.

Why this is important

Evidence and experience from high performing health and care systems shows that having these capabilities enables teams to continuously improve population health, patient care, and value for money. Developing these capabilities and giving people the time and support required to see them succeed is vital if the healthcare system is to meet the challenges it faces.

The three pledges

The oversight bodies that are part of Developing People Improving Care recognise that our behaviour and approach to how we do our jobs directly affects the time and space that those on the frontline have to focus on leadership and quality improvement.

Because of this, we made three pledges in **Developing People Improving Care**:

1 We will model in all our dealings with the service and in our own organisations the inclusive, compassionate leadership and attention to people development that establish continuous improvement cultures.

2 We will support local decision-makers through collectively reshaping the regulatory and oversight environment. In particular, we owe local organisations and systems time and space to establish continuous improvement cultures.

3 We will use the framework as a guide when we do anything at a national level concerning leadership, improvement and talent management so we engage across the service with one voice.

Condition Two: Compassionate, inclusive and effective leaders at all levels

A healthcare organisation's culture – 'the way we do things around here' – shapes the behaviour of everyone in the organisation and directly affects the quality of care they provide. Research shows the most powerful factor influencing culture is leadership. Leaders who model compassion, inclusion and dedication to improvement in all their interactions are the key to creating cultures of continuous improvement in health and care.

Compassionate and inclusive leadership creates an environment where there is no bullying, and where learning and quality improvement become the norm. Continuous improvement depends on staff feeling safe and empowered to apply improvement methods in partnership with patients, families and communities. Where leaders act with compassion, staff feel valued, engaged and enabled to show compassion themselves. They feel obliged to speak up when something is wrong and empowered to continuously improve.

It is widely acknowledged that what happened in Mid-Staffordshire NHS Foundation Trust was caused by a range of factors, not least allowing a culture of fear and poor style of leadership to take hold. Among the recommendations of the Francis report and subsequent Berwick and Rose reports, the need for improved leadership, leadership behaviours, values and competencies was repeatedly highlighted. Compassionate and inclusive leadership is embedded in high quality, high performing systems and drives improvement in their overall performance – better outcomes for patients, better population health and better value for money.

ACTION

**Develop
Compassionate
and Inclusive
Leadership for
all staff at every
level**

- In collaboration with local and national partners, review and revise the design and delivery of development for senior and mid-level leaders across the system, especially in primary care
- Ensure digital access to open source resources and tools on compassionate and inclusive leadership across health and care
- Work with health and social care colleagues to develop a joint graduate management training scheme
- Double the size of the NHS graduate management training scheme by 2020 and provide more continuing career support for all trainees and training scheme alumni

ACTION

**Embed inclusion
in leadership
development
and talent
management
initiatives**

- Working closely with the NHS Equality and Diversity Council (EDC), launch a system-wide intervention to address discrimination against those with protected characteristics
- Publicise ambitious targets to improve diversity at every level of NHS organisations and publish the impact of organisations' action on diversity

(Continued from the previous page)

ACTION

Support organisations and systems to deliver effective talent management

- Co-produce a clear statement of what 'good' and inclusive talent management looks like across the NHS system
- Co-design a programme supporting organisations to do talent management better at all levels
- Support local organisation leaders to establish pilot talent management forums at regional and local system levels

ACTION

Improve senior level recruitment and support across NHS-funded services

- Continue work to align and make better use of all existing NHS resource involved in senior level development and recruitment
- Establish a national senior leader support function (SLSF) with representatives from the health and care system
- Commission a senior systems leaders scheme as part of a nationally coordinated talent management programme
- Continue to deliver or commission a set of development programmes for aspiring senior leaders across NHS-funded services and those already in post



compassionate
inclusive
leadership

Case Studies

Case study one: **Aspire Together – The Midlands and East Regional Talent Board**

The Midlands and East Regional Talent Board (RTB) – the first of its kind in the country – had its inaugural meeting in March 2017. Since then, it has been developing **Aspire Together's** programme of work, with leadership from and engagement with local system leaders. The work is being led by thirteen health and social care organisations in partnership with Clinical Commissioning Group (CCG) and trust leaders from the region. The initial focus, in terms of new process, is establishing the Aspire Together talent pool - a quality assured pool from which organisations within the region can fill executive director posts.

Pilot scheme success

Engagement with the pilot talent pool process has been high, with the nomination and application window for the pool being open throughout September 2018. A significant number of trusts and CCGs are already on board and it is anticipated that this will grow as the process for cohort two begins in 2019.

Following the pilot, the talent pool will be opened up to the rest of the Trusts and CCGs in the Midlands and East. Regional Talent Boards are also being set up in other parts of England, with work to establish boards in the North and South West already well underway.

42

The number of Midlands and East Trusts/ CCGs who have requested to take part in the pilot talent pool process.

81

The number of senior leaders from the Midlands and East region who have volunteered and are being trained to become assessors for the pilot talent pool. These include CEOs, AOs, NEDs and Chairs.

Nick Carver CEO at East and North Hertfordshire NHS Trust is the Chair of the Midlands and East Regional Talent Board.

// While the board itself gives impetus to the work, **Aspire Together** is very much 'by the region for the region'. Engagement is a huge part of our remit, and we will only get this kind of culture change right if we all work together in partnership. As we reflect on 70 years of our amazing NHS, it is also right that we look ahead to how we best 'future-proof' our leadership capability for generations to come. //

If you would like any further information about the Aspire Together programme of work, please contact the team at aspire.together@nhs.net. You can also join the conversation on Twitter by following the **#AspireTogetherNHS** hashtag.

Through **Aspire Together**, we are committed to:

1

Shifting the culture to one of collaboration

We want to see a culture where talent management is owned and valued by the whole system, and where NHS organisations are collaborating – rather than competing amongst themselves – for talent. This is a culture where staff at every level can see opportunities to fulfil their potential.

2

Creating a diverse talent pool of future senior leaders

At the same time, we want to see a more systemised approach to how we nurture our aspiring senior leaders. Individuals will have the opportunity to become part of a regional talent pool with rigour, consistency and transparency at its heart. This will give organisations a quality assured pool of candidates from which to select when appointing to board and governing body level posts.

3

Ensuring visibility of talent across the region

We need to better understand the leadership potential within the system, and showcase that to organisations across the NHS. This means developing robust data. We want to see a much better balance between demand (immediate and predicted vacancies) and supply (the individuals available and their readiness to fill posts).

Case study two: Culture and Leadership programme

NHS Improvement is now working with nearly 50 provider organisations to help them develop cultures of compassionate and inclusive leadership at all levels of their organisation.

The work of Professor Michael West, identifies the five cultural elements that create these cultures: Vision & Values, Goals & Objectives, Support & Compassion, Learning & Innovation and Teamwork.

The NHS Improvement programme enables trusts to diagnose their existing performance against these five elements, from individual to board level, design a strategy to improve in areas identified as less strong than others, and then deliver those improvements.

The programme is deliberately designed to be flexible so that organisations can adapt it to their needs. Most importantly of all it provides the framework for trusts to deliver true change from within - with the diagnostic tools and subsequent phases being driven and delivered by a change team of staff from all levels, clinical and non-clinical, within the organisation.

All of the resources required to deliver the programme are open source and available on the NHS Improvement website, and our team would be happy to discuss the programme further - get in touch via nhsi.culture@nhs.net.

Case study three: Striving for greater inclusion

NHS Leadership Academy

An ambitious new programme of work is raising the bar for inclusion across NHS organisations.

Tracie Jolliff, head of inclusion and systems leadership, explains how a new programme of work aims to raise the level of ambition on inclusion higher than ever before.

The NHS Leadership Academy has long been aware of inequalities in health and care and has strived for greater inclusion since its inception. The condition 'compassionate, inclusive and effective leaders at all levels' which Developing People Improving Care aims to help create has further-increased the urgency of this work and the Academy has committed itself to Building Leadership for Inclusion (BLFI).

BLFI aims to create lasting and positive changes around equality and inclusion through leadership. As part of Developing People Improving Care, it will implement three strategic aims:

- Raise the level of ambition
- Quicken the pace of change
- Ensure that leadership is equipped to achieve and leave an ever-increasing and sustainable legacy

A range of workstreams form its foundations, including:

- Proactively engaging with employees with lived experience to help us create and sustain more inclusive organisations and systems
- Working collaboratively with academic partners using action research to pilot inclusive leadership development interventions
- Developing tools and frameworks for the system

By delivering across these workstreams BLFI will help the system gain and implement the knowledge needed for effective leadership development. Such development equips leaders with the knowledge, skills, psychological awareness and resilience necessary to achieve transformed, truly inclusive cultures.

A group of BAME senior system leaders has been formed, with three more groups – LGBT+, disability and women – to follow in 2018. These groups will ensure that BLFI places the voices of lived experience at the centre of all its work, honing approaches to reverse negative trends. Leaders across the service, and at all levels, will be able to use the voices of under-represented employees; those most negatively affected by current cultures, to inform change.

Successful outcomes include embracing and working effectively with equality, diversity and inclusion as an everyday topic of (non-defensive) systemic conversation, an increasing percentage of people from all protected characteristics working and leading at the most senior levels and a more welcoming, supportive culture to drive forward improvements in quality and extend perceptions of what's possible.

// Ultimately, we want the impact of this work to be positively felt by all employees, patients, service users and citizens. The BLFI programme will give those who are serious about tackling inequality the knowledge, confidence and impact they need to make lasting and profound change. //

— Tracie Jolliff

Head of Inclusion and Systems Leadership, NHS Leadership Academy

Where can I find out more?

Resources

Care Quality Commission

www.cqc.org.uk

Department of Health

www.gov.uk/government/organisations/department-of-health-and-social-care

Health Education England

hee.nhs.uk

Local Government Association

www.local.gov.uk

National Institute for Health and Care Excellence (NICE)

www.nice.org.uk

NHS Clinical Commissioners

www.nhscc.org

NHS Confederation

www.nhsconfed.org

NHS England

www.england.nhs.uk

NHS England – Improvement Hub

www.england.nhs.uk/improvement-hub

NHS Improvement

improvement.nhs.uk

NHS Improvement – Developing People Improving Care

improvement.nhs.uk/resources/developing-people-improving-care

NHS Improvement – Improvement Hub

improvement.nhs.uk/improvement-hub

NHS Leadership Academy

www.leadershipacademy.nhs.uk

NHS Leadership Academy – Resources

www.leadershipacademy.nhs.uk/resources

NHS Leadership Academy – Aspire Together

www.leadershipacademy.nhs.uk/aspiretogether

NHS Leadership Academy – Systems Leadership

www.leadershipacademy.nhs.uk/about/systems-leadership

NHS Providers

nhsproviders.org

Public Health England

www.gov.uk/government/organisations/public-health-england

Skills for Care

www.skillsforcare.org.uk/Home.aspx

Overall aim of the framework

Continuous improvement in care for people, population health and value for money

The five conditions (primary drivers)

Leaders equipped to develop high quality local health and care systems in partnership

Compassionate, inclusive and effective leaders at all levels

Knowledge of improvement methods and how to use them at all levels

Support systems for learning at local, regional and national levels

Enabling, supportive and aligned regulation and oversight

Secondary drivers

A joint ambition: clear aims for health and healthcare

Positive relationships and trust in place at all levels

Governance structures to enable local decision-making

Knowledge and practice of compassionate, inclusive high impact leadership behaviours

Development and support for all staff

A system and approaches for attracting, identifying and deploying the right people into the right jobs

Leadership for improvement in practice

Applied training in improvement methods (from micro-systems to system transformation)

Partnering with staff, patients and communities for improvement

Improvement and support systems in organisations

Data systems to support improvement

Systems and networks for sharing improvement work locally, regionally and nationally

National bodies working effectively together

Local systems and providers in control of, and accountable for, driving improvement

Helpful interventions and support offers from the national bodies to local systems

Contact us:

NHS Improvement
Wellington House
133–155 Waterloo Road
London
SE1 8UG

Tel: 0300 123 2257

Email: dpic@improvement.nhs.uk

Web: improvement.nhs.uk

 Follow us on Twitter @nhsDPIC

This publication can be made available in a number of other formats on request.