

LEADERSHIP

IN ASSOCIATION WITH THE NATIONAL LEADERSHIP COUNCIL



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SPECIAL REPORT

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TAKING THE LEAD

We all know leadership matters. Leadership has been a neglected reform lever in the NHS but it is unacceptable for a business of our size and complexity not to have a systematic approach to developing it.

High Quality Care for All has united the NHS in the common goal of improving quality for our patients. Making quality the organising principle of the NHS is an enormous challenge. We have looked at evidence of successful large scale change elsewhere and it has shown us that focusing on quality in isolation will not deliver the scale of change we are seeking. The key lies in improving quality and productivity, linked together by innovation driving improvements across the system, and a stronger focus on prevention.

Thinking beyond swine flu, getting our approach to the quality and productivity challenge right is the central challenge for the NHS. The changes we are seeking need to be designed and delivered locally, with the centre playing a supporting and enabling role.

We have recognised we need something sustainable in place to develop

leadership. That means rewarding and supporting people in current leadership posts, ensuring we support and develop people in a way that fits the leadership skills the system will need in the future, and developing a leadership community that reflects social diversity.

As part of that, great clinical leadership is fundamental to our success. Creating sustainable health systems is about empowering clinicians to bring about transformational change, backed by leaders and managers who support what they are doing and remove obstacles.

A major change is that the National Leadership Council is now bringing this work together, playing a unique role in the system. The council is focusing on what only it can do at national level to build a strong culture of leadership and model the importance of how leaders and leadership are valued.

The council is made up of a fantastic group of members and advisers who bring a wide range of views and experience to the table. They are taking forward five programmes. You can read more about the membership and those programmes in the following pages.

The council is sponsoring the NHS Leadership Awards scheme, to role model the sorts of leadership behaviours that we are seeking to develop. We are in the early days of this journey.

The work of the council is getting us off to a great start. ●

David Nicholson is NHS chief executive and chair of the National Leadership Council.

CLARE CHAPMAN: MUCH TO DO

"As all public services face the reality of an end to the years of rapid growth in investment, it is hard to see how the quality of service we all aspire to see – service users and the public alike – can be achieved without leaders supporting staff in challenging the status quo and enabling citizens to be active, both in service design, and the holding of services to account," says director general of NHS workforce Clare Chapman.

'We want to be genuinely spoilt for choice'

According to Ms Chapman, leaders who succeed in the development of more responsive services are those who can engage with both their workforce and the communities they serve.

She believes successful leaders are those who are skilled at working across boundaries in the interest of patients, and who can reconcile the pressures the service is under with the values inherent within the NHS.

"They take care of the health and wellbeing of their patients and the staff within their own department or organisation, as well as across entire pathways," she says. "They also know how to spot waste so that it can be reinvested back into improved services and how

to use the full diversity of the workforce and partner organisations to stimulate innovation."

She admits there is still much to be done across the NHS.

"As we grasp the importance of leadership, we need to embrace more people with different skills and backgrounds and to support the development of staff in a sustained way. We will know we are making progress when the NHS is as focused on leadership development as it is on financial management."

Ms Chapman says NHS boards will have to have a "clear and systematic approach towards talent and leadership development."

She hopes the NHS will be "genuinely spoilt for choice when appointing leaders to key roles and in the opportunities available for staff throughout the NHS". ●



ON THE WAY UP

Leadership development has made an impressive start, yet the greatest challenges lie ahead as the NHS looks for measured gains in quality and efficiency, says Jim Easton

"We are now in an interesting position in terms of leadership development, both managerially and clinically. We have delivered extraordinary things but when we look forward, it looks like we have only reached base camp," says NHS director for improvement and efficiency Jim Easton.

Mr Easton is clear that challenging times are ahead for the NHS and that quality must be improved against a financially difficult backdrop.

"Just in case people thought it was a time for complacency – but I'm sure they did not – we now need to get the right leadership throughout the system, leadership whose purpose is to achieve measured gains in quality of care and efficiency," he says.

He believes strong leaders with the right skills of creativity, innovation and delivery are needed to guide the NHS through the difficult times ahead.

"These skills need to be in the DNA of NHS management," he says.

He also thinks leaders must engage with both workforce and the communities they serve in order to "communicate and inspire a compelling narrative" about the future.

He has vowed to follow through on Lord Darzi's commitment to quality and believes leadership is the way to do this. The renewed direction of travel is for outstanding leadership at the top of the NHS and a new leadership culture throughout, led by the National Leadership Council.

According to Mr Easton, this means leaders in pivotal positions who can inspire others as well as leaders at the point of delivery who can innovate to improve patient care.

He believes it is important



'Leaders must communicate a compelling narrative'

every member of the health service team is encouraged to demonstrate their leadership skills and the plan is that through the "leadership with a purpose" drive staff will be re-energised and motivated.

empowerment of staff are necessary in the pursuit of quality, innovation and efficiency, but that staff will not achieve this on their own.

The government believes making these changes happen will take leadership. The challenge is to develop a leadership culture that frees up staff to be accountable to the communities they serve and one that prizes evidence based continuous improvement.

The Department of Health wants leadership in the NHS to be consistent with four principles:

- to work together to "co-produce", working across the service on the design and development of leadership solutions
- to apply "subsidiarity": to be clear what needs to be done at what level, and to work to ensure the role of the regions and of local services is the key way improvement in leadership capacity and capability is led
- to value "clinical engagement and leadership"
- to pull in the same direction and achieve greater "alignment" between expectations, policies and practices.

Mr Easton wants to see a "much more formal approach to spotting talent" and in developing leaders of the future. He says NHS leaders must be "positive and ambitious" about the future, not "modest, cynical or pessimistic".

"It is critical that NHS leaders are the best they can be to deal with the real world problems of changes in the population we serve, combined with the global economic problems which will have an impact on the NHS as a significant part of the UK economy. We have to protect the service by driving quality and efficiency – we can't escape these challenges." ●

DEVELOPMENT

ADVANCING WITH A PURPOSE

The National Leadership Council supports and develops people in leading roles across the NHS and aims to ensure new talent keeps emerging for the future

The National Leadership Council was set up following Lord Darzi's 2008 report *High Quality Care for All*, which outlined a commitment to improving leadership within the health service. The government aims to champion the transformation of leadership across the NHS and ensure high quality leadership and leadership development at every level of the system. Chaired

by NHS chief executive David Nicholson, the council focuses on five important areas:

- clinical leadership;
- board development;
- top leaders;
- inclusion;
- emerging leaders.

High Quality Care for All stated that the council would be a "system wide body responsible for overseeing all matters of leadership across healthcare".

It was to "have a particular focus on standards, including overseeing the new certification, and development of the right curricula, and assurance, and with a dedicated budget, will be able to commission development programmes".

Ultimately the Department of Health is seeking to re-energise NHS leaders to take on the task ahead of them to improve quality and drive efficiency and help them to ride out the perilous financial journey the NHS will be faced with in the coming few years.

Its aim is that "world class leadership talent and leadership development will exist at every level in the health system to ensure high quality care for all".

"Leadership with a purpose" is the phrase that has concentrated minds on what leadership needs to look like to develop both quality and efficiency.

To deliver on the new leadership agenda, the NHS needs to look at the capability and capacity of its leaders and their development, so it can plan appropriately for the leaders that will be required in the future.

As a member of the National Leadership Council, North East Lincolnshire Council chief executive Tony Hunter brings the local government perspective.

"We need to actively engage with the workforce in the NHS to take it forward in the 21st century," he says. "It is about

transferring power to the community, which will take a special kind of leadership. We need to move away from a top down style."

Clinical leadership

Getting doctors, nurses and other healthcare staff involved in NHS leadership is one of the major aims of the council. It wants to make sure future leadership is for the whole NHS, not just for those in management roles. This programme is attempting to try to ensure leadership standards are clearly set out and incorporated within clinical education and training, and is developing an accreditation framework for clinicians in training.

Heart of England Foundation Trust chief executive Mark Goldman is the programme lead.

"We need to establish leadership as a mainstream activity in the NHS across clinical professional groups in a way that is consistent and meets the requirements of the NHS. We are aiming to build accreditation and certification so anyone in the NHS who takes on leadership activities can build accreditation for themselves that is also recognised formally," says Dr Goldman.

He adds that the council is also keen to examine the curriculum for clinicians to build in training on leadership from the start.

THE PATRONS' VIEW

The National Leadership Council is being supported by five patrons who have been appointed to offer external perspective and constructively challenge leadership in the NHS. They are Greg Dyke, former director general of the BBC; Dr Daniel Goleman, psychologist, lecturer and author; Sir Stuart Hampson, former chair of the John Lewis Partnership; Sir Adrian Johns, the former second sea lord and commander in chief of the British Navy and governor of Gibraltar; and Dr Gary Kaplan, chair and chief executive officer of Virginia Mason Health System.

SIR STUART HAMPSON

"I spent 25 years [with] John Lewis, which has a strong reputation for delivering good service to customers and which relies very heavily on the commitment and engagement of

its staff to achieve results and I think there are parallels with staff in the NHS," says Sir Stuart.

Sir Stuart says it is imperative that staff on the front line and in management respect each other.

"They will have different training and skills and will come from different backgrounds but they pull together. It is fundamental that everyone works well together."

SIR ADRIAN JOHNS

"I have done a lot in terms of developing leadership in the past," says Sir Adrian.

"I am particularly interested in advising on emerging leaders and talent management.

"The NHS, like the Navy, is a very big organisation and it is important to get the right channels in place to develop people's leadership skills rather than taking it for granted that people will be good leaders."





'This is about building the best leaders in the world'

ensure a good supply of candidates for the toughest jobs in the NHS. The council wants to support and develop leaders who currently have senior roles in the country's most complex and challenging organisations as well as identify and develop their likely successors.

It is aiming to increase the capability and capacity in the system so that for each of these difficult roles there will be a good supply of candidates.

NHS East Midlands chief executive Dame Barbara Hakin is leading the programme.

"The object of the exercise is to identify people who are already in roles that are seen as business critical to the NHS and that make a big difference regionally or nationally, and then to support and develop people in these roles, as well as develop a talent pool of people ready to apply when these jobs are next available," Dame Barbara explains.

She says it is important the programme is multidisciplinary so that it does not just look at developing chief executives.

"We want to be spoilt for choice when business critical roles come up – at the moment it can sometimes be difficult to recruit to these types of roles," she says.

Inclusion

The NHS needs a rich leadership talent pool that reflects the communities it serves and the

diversity of the people who work in the service. The job of the inclusion programme is to create a sustained, integrated, and systematic approach to meeting the development needs of leaders and aspiring leaders from diverse backgrounds.

Proposals include engaging the senior leadership of the NHS in developing a vision and compelling case for change, sponsoring regional or local coaching schemes which support emerging leaders from a wide range of backgrounds; and establishing a way to measure progress towards improved inclusion against robust indicators.

NHS Derby City chief executive Prem Singh leads this programme and says that while there is already some good work going on, it is in "pockets".

"Part of this change is getting leaders to talk openly about inclusion and design creative, compelling business cases for change," he says.

Inclusion should also be embedded across the four other programmes.

"When we talk about success in inclusion in the NHS we tend to focus on chief executives from black and minority ethnic backgrounds, which is important but by itself it is not enough. We need to be looking at what we should be measuring, and developing a set of metrics to tell us what success will look like in leaders at all levels."

Emerging leaders

"We have been tasked with making a difference to outcomes through nurturing the next generation of NHS leaders" explains Deborah Chafer, emerging leaders programme director and director of the NHS North West Leadership Academy. "This is about wanting the best leaders in the world and we want to build this from the ground upwards."

The programme is developing networks with each region looking at the architecture they have in place to develop emerging leaders. It is also aiming to re-evaluate schemes such as Gateway and Breaking Through. It will work with SHAs to develop regional aspirant leaders' programmes and establish a national talent tracking mechanism to monitor progress and encourage coaching and mentoring programmes.

Emma Stanton is one of the five core members of this programme, which is also developing the medical leadership fellowships.

"The medical leadership fellowship model is likely to be followed by other health professionals, not just doctors," Dr Stanton explains. "There are still real barriers to getting more clinicians involved in leadership; you can be seen as going over to the dark side. The fellowships will give people a year where they are able to understand what is meant by leadership." ●

Board development

NHS West Midlands chair Elisabeth Buggins leads the board development programme.

"Boards often have little time to spend on development but they are critically important to the success of organisations," she explains. "In the past the focus has been on the money but this needs to change to focus on quality as well. The attitude in some boards is that if you are sitting on a board you have arrived but there should not be any sense of complacency. That is dangerous and something chairs should look out for."

Among other ideas, the programme proposes to update the Appointments Commission's document *Governing the NHS* and to develop an interactive website and a digital platform for governors to use for online learning.

Top Leaders programme

The Top Leaders programme has been established to try to

NHS LEADERSHIP AWARDS

STANDING OUT

Exceptional leaders across the NHS are vying for the top spot in seven categories of the inaugural NHS Leadership Awards taking place on 25 November.

The awards, in conjunction with the work of the National Leadership Council, aim to recognise the outstanding leadership that exists across the NHS and encourage the NHS leaders of the future.

There are 21 finalists, selected from more than 700 nominations, across the seven categories

THE NHS MENTOR OF THE YEAR A committed and sought after mentor who can connect those they are mentoring to avenues for information and opportunity.



Laweh Amegavie, clinical director, paediatrics, St Helens and Knowsley Teaching Hospitals Trust



Jag Dhaliwal, programme director, West Midlands Leadership Programme and a GP, Royal College of GPs and Warwick University



Becci Martin, mental health nurse, Greater Manchester West Mental Health Foundation Trust

THE NHS QUALITY CHAMPION OF THE YEAR A person (clinical or non-clinical) who has put quality improvement at the heart of what they do to transform patient care.



Chris Harrison, medical director, The Christie Foundation Trust



Adrian Hopper, associate medical director for patient safety, Guy's and St Thomas' Foundation Trust



Roland Valori, national endoscopy clinical lead for England and consultant gastroenterologist with the national endoscopy team, East Midlands Strategic Health Authority

THE NHS PARTNER OF THE YEAR

An organisation demonstrating commitment to partnership working which has delivered improvements for individuals, communities or organisations.



British Heart Foundation

Calderdale and Huddersfield NHS Foundation Trust

Calderdale and Huddersfield Foundation Trust

Knowsley Council **NHS Knowsley**
Knowsley Health and Wellbeing

THE NHS LEADER OF THE YEAR An outstanding and resilient leader who places quality at the heart of everything they do, implies innovation, values partners and partnership working, actively mentors our next generation of leaders and is tireless in changing the system for the better.



Michael Cooke, chief executive, Nottinghamshire Healthcare Trust. Mr Cooke has transformed Nottinghamshire Healthcare Trust, using co-production techniques to develop services, while demonstrating a commitment to quality of care and the needs of people using services



Patrick Geoghegan, chief executive, South Essex Partnership University Foundation Trust. Mr Geoghegan has more than 30 years' NHS clinical and leadership experience, including leading the transformation of mental health services. His approach to leadership results in an inspirational and unique partnership empowering service users and staff to lead change



Ann Marr, chief executive, St Helens and Knowsley Teaching Hospitals Trust. Ms Marr's innovation, vision and drive has shaped a culture where quality is central to service delivery, radically improving patient care and transforming the trust from a failing organisation to one of the country's top performers

THE NHS INNOVATOR OF THE YEAR A person (clinical or non-clinical) who has innovated or championed innovation that has led to significant improvements in the quality or safety of patient care.



Jan Kovac, consultant cardiologist, University Hospitals of Leicester



Stephen Smith, chief executive, Imperial College AHSC



Brigitte Squire, consultant clinical psychologist, Cambridgeshire and Peterborough Foundation Trust

THE NHS AWARD FOR INSPIRATION

A person who emphasises quality and the patient or service user experience as central to their role while inspiring others and generating energy for these issues.



Ashok Handa, consultant vascular surgeon, Oxford Radcliffe Hospitals Trust



Tricia Hart, director of nursing and patient safety, South Tees Hospitals Foundation Trust



Phil Morley, chief executive, Mid Cheshire Hospitals Foundation Trust

THE NHS CHANGE LEADER OF THE YEAR

A person who inspires and delivers sustainable change that makes a big difference for patients, carers, service users, staff and/or the public in an NHS context.



Patrick Geoghegan, chief executive, South Essex Partnership University Foundation Trust



Roland Valori, national endoscopy clinical lead for England and consultant gastroenterologist with the national endoscopy team, East Midlands Strategic Health Authority



Mark Whitbread, clinical practice manager, London Ambulance Service Trust

The NHS Leadership Awards take place on 25 November. They recognise outstanding leadership across the NHS in England and help foster the leaders of tomorrow.

For more information visit www.nhsleadershipawards.nhs.uk, email info@nhsleadershipawards.nhs.uk or ring 0845 867 8545

The vision of the National Leadership Council (NLC) is for

'an NHS with outstanding leadership and leadership development at every level to ensure high quality care for all'.

Its Activities are:

- Ensure the delivery of the NSR Leadership commitments set out in High Quality Care for All.
- Set out clear priorities for culture change and leadership across the NHS.
- Produce an annual report for NHS staff featuring examples of inspiring leadership and best practice, progress towards the priorities and future challenges.
- Ensure standards for leadership and leadership development including methods of accreditation.
- Oversee the effectiveness of national funding and commission programmes and activity where appropriate.
- Make recommendations for policy to influence the valuing of leadership and the employment environment for leaders across the service.
- Exchange knowledge with other sectors, forge partnerships to foster innovation, find and share best practice and celebrate success.

For further information, visit
[**www.dh.gov.uk/leadership**](http://www.dh.gov.uk/leadership)

To contact the NLC, email
[**leadershipcouncil@dh.gsi.gov.uk**](mailto:leadershipcouncil@dh.gsi.gov.uk)

