

То:	The Board
For meeting on:	25 May 2017
Agenda item:	6
Report by:	Suzie Bailey, Director of Leadership and Quality Improvement
Report on:	The 2017/18 priorities for NHS Improvement against the national strategic framework 'Developing People, Improving Care'

Introduction

1. The purpose of this paper is to provide the board with an update on the priorities for NHS Improvement in 2017/18 against the national strategic framework for improvement and leadership development published in December 2016.

Background

- Organisations and systems delivering NHS-funded work face a common set of performance and people development challenges against unprecedented pressure to improve performance, with rising demand for services and constrained funding. At the same time, they are being asked to rapidly join up local health and care systems working with local system partners on sustainability and transformation plans (STPs).
- 3. It is widely recognised that there are not enough leaders with the skills and experience to address these challenges and that the difficult performance environment can contribute to stresses felt by staff.

National framework to develop leadership and improvement capability

- 4. Developing People Improving Care is the national framework for action published in December 2017 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 delivering NHS funded services to continually improve their local health and care systems:
 - 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
- 5. Delivery against the framework requires action at all levels of the health system and greater collaboration across organisations. The scale of development required building capability in improvement and leadership development and talent management across England is considerable and it is recognised that this will take at least 10-15 years.
- 6. Critically, this also requires behavioural change from national organisations including the Arms-Length Bodies (ALBs) to model compassionate and inclusive leadership in their dealings with the service and within their organisations. NHS Improvement has committed to use the framework as a guide when we do anything at a national level concerning leadership, improvement and talent management so that we engage across the service with one voice.
- 7. NHS Improvement and Health Education England (HEE) are jointly responsible for the oversight of the delivery of the framework including programme management, spread and scale, communications and engagement and evaluation work. The Senior Responsible Officers, Adam Sewell-Jones and Nicki Latham (HEE) have a bi-monthly meeting with the programme leads. The national implementation group is co-chaired by NHS Improvement and Health Education England and consists of senior staff from the national organisations.
- 8. There are 13 priority actions in the first version which are subdivided into multiple projects over 1 year and 1-3 year timelines. The framework will be iterated and developed over time as we test and study what works with leaders across the system. The second iteration is planned for publication by December 2017.
- 9. NHS Improvement is responsible for the delivery of 19 projects between 2017 2019 and has a supporting role to a further 22 projects with NHS England, Care Quality Commission, Health Education England and Public Health England. We have a number of existing programmes underway which support delivery of the framework including the Culture and Leadership Programme and the partnership with Virginia Mason Institute.
- The NHS Improvement 2017/18 business plan includes priority projects on knowledge of improvement methods and how to use them at all levels (Condition 3) and support systems for learning at local, regional and national levels (Condition 4). We are helping to build improvement capability across the system by ensuring providers have access to the knowledge and skills they need to lead quality improvement.
- 11. We are currently developing work on good practice in combining measurement for judgement and measurement for improvement, This work will help senior executives across the system (including our regional and regulatory staff) to understand unwarranted variation based on time series data and be better equipped to manage local performance improvement.

- 12. In order to deliver against the agreed objectives, NHS Improvement needs to undertake further internal work to ensure our staff have an understanding of improvement methodologies and the leadership required to enable continuous improvement. We also need sufficient improvement capability so our staff can credibly guide, advise and signpost trusts to resources that will help as well as access to appropriate improvement experts when required.
- 13. An internal working group with regional representatives has now been established to help drive the internal capability building and ensure that the framework is being embedded across the work of NHS Improvement. Monthly improvement reports to the Executive Committee now report progress against each of the conditions of the framework.
- 14. There is also considerable work to do to ensure an effective and ongoing communications campaign for the framework, engaging leaders at every level in this work and sharing good practice. A communications group has been established across the 13 organisations but there has been limited progress to date in developing a compelling campaign.
- 15. As part of the continued work engaging the national organisations in the delivery of this framework including demonstrable progress against the pledges, sessions will be scheduled in the autumn before publication of the second iteration of the framework with each of the ALB boards.
- 16. It is evident that the urgency of short-term performance issues can easily crowd out the importance of developing capability for improvement and leadership. NHS Improvement has to help providers to balance those competing priorities and ensure that developing local capability is a commitment by every provider board.

Recommendation

- 17. The Board are asked to note the report and especially the priority actions identified for NHS Improvement in 2017/18 including the importance of developing of internal improvement capability and the work on measurement for improvement.
- 18. The Board are asked to help sponsor the framework in both internal and external networks and dealings across the health and social care sector.