NHS Clinical Leaders Network Congress: Leadership for Recovery and Reform

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@NHSChange #NHSChange
www.changemodel.nhs.uk
Why did you come along to this workshop?
Workshop objectives

• Understand the genesis and thinking underpinning the NHS Change Model
• Have considered how practical application of the NHS Change Model can help you to success in your improvement projects
• Have considered the leadership qualities required to deliver successful change, improvement and transformation
Jim Easton
National Director for Transformation at NHS Commissioning Board

on the NHS Change Model
Why the NHS needs a change model

• Massive change in the NHS past 10 years – much more to come
• Massive change now required to deliver wholesale improvement and quality of services – scale and pace
• Financial constraints for the foreseeable future
• Using the best of what’s gone before
• Building on our knowledge of large scale change
• Amplifying and reinforcing our ability to drive change
• Fit for new system work – across boundaries and sectors
• The call to action
Our shared goal

Supporting the NHS system to adopt a shared approach to leading change and transformation in order to:

• maximise the potential to deliver unprecedented improvement across the whole system
• enable the NHS to deliver QIPP at scale and pace
• create a common language of change across the NHS
• provide a useful tool for people to structure local work around
• allow better integration of change efforts
• build a coherent approach to training and development
• build on the best evidence and support rapid spread of replicable innovation
How we developed the NHS Change Model

• Looking at best practice from across the world
• Learning from what’s gone before to create a common approach
• Consulting with people in the service – using their ideas, experiences and words – c500 people
• Building on all we’ve learned about large scale change
• Sharing progress – descriptors and design
• Making sense at every level
• Determining the look and feel
The NHS Change Model

Our shared purpose

Leadership for change
Do all our leaders have the skills to create transformational change?

Spread of innovation
Are we designing for the active spread of innovation from the start?

Engagement to mobilise
Are we engaging and mobilising all the right people?

System drivers
Are our processes, incentives and systems aligned to enable change?

Improvement methodology
Are we using an evidence-based improvement methodology?

Rigorous delivery
Do we have an effective approach for delivery of change and monitoring of progress towards our planned objectives?

Transparent measurement
Are we measuring the outcome of the change continuously and transparently?
Some interpretations of the NHS Change Model

• Intrinsic and extrinsic aspects

• *Anatomical* and *physiological*

• Leadership styles and behaviours

• Others?
# NHS Leadership Framework

## 6 leadership styles

<table>
<thead>
<tr>
<th>Leadership style</th>
<th>Primary objective</th>
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<tbody>
<tr>
<td>Directive (Coercive)</td>
<td>Immediate compliance</td>
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<td>Visionary (Authoritative)</td>
<td>Providing long term direction and vision for employees</td>
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<td>Affiliative</td>
<td>Creating harmony among employees and between the leader and employees</td>
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<td>Participative (Democratic)</td>
<td>Building commitment among employees and generating new ideas</td>
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<td>Pacesetting</td>
<td>Accomplishing tasks to high standards of excellence</td>
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<td>Coaching</td>
<td>Long term professional development of employees</td>
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</table>
With reference to the NHS Change Model component allocated to your table:

1) how might *good* leadership manifest itself, and

2) how might *poor* leadership manifest itself?

Please feel free to use the flipcharts at your tables – we’ll feedback and discuss as a group
Reflection

Take some time to consider what this might mean for your leadership for change style

Use your learning log to make a note
## Priority area:

### What outcomes do we seek?

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### Priority area: Dementia

#### What outcomes do we seek?

Deliver goals of the National Dementia Strategy

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<td>Political, clinical, voluntary and private sector <strong>leadership for change</strong></td>
<td>Multiple projects and initiatives at multiple levels not necessarily aligned</td>
<td>Don’t consider any component of change in isolation (eg, broad perspective on CQUIN scheme re people with dementia in hospital)</td>
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<td>Strong sense of <strong>shared purpose</strong> and will for change</td>
<td>Lack of <strong>transparent measures</strong> in terms of how well NHS is playing its part</td>
<td>Support Clinical Commissioning Groups to act as enablers-aligners at local level</td>
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<td>Key stakeholders <strong>engaged and mobilised</strong></td>
<td>Not exploiting the potential for <strong>spread and adoption of innovation</strong></td>
<td>Link to local initiatives such as 'Dementia Friendly Communities'</td>
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<td>Multiple <strong>system drivers</strong> to support change</td>
<td>Sporadic use of quality improvement methodologies</td>
<td>Align with other strategies to support older people across health and social care and building broad common commitment to change</td>
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<td>Clarity of immediate programme</td>
<td>Building energy and <strong>engagement</strong> for the long haul</td>
<td>Build all the components into design of future strategies</td>
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With reference to a past or present change:

1) consider maturity in each component, and

2) consider your change assets, gaps and alignment needed to get to where you need to be

Use the templates provided – we’ll feedback and discuss as a group
Reflection

Take some time to consider what this might mean for how you undertake change projects or initiatives in the future

Use your learning log to make a note
Five key principles in using the NHS Change Model

1. Start with ‘shared purpose’ but after that there is no prescribed linear or logical order
2. It’s important to use the model to check if all eight components are present but it’s more important to focus on whether they are aligned
3. Use the model to build on what you are doing already
4. Don’t 'sell' the change model; 'sell' the outcomes you are seeking
5. Build commitment to, not compliance with, the NHS Change Model
Workshop review
Thank you
Join us for our next

**Twitter Club: #NHSChange**

24\textsuperscript{th} October 4 to 5pm

**Webinar: 2\textsuperscript{nd} November 8.30am**

www.changemodel.nhs.uk