The confident leader

Learning development sets for new and aspiring leaders developing new models of care
Why this programme?

The Confident Leader programme is designed for those who have, or aspire to, a leadership role in primary care, accountable care systems, sustainability and transformation partnerships (STP) or as commissioners of services. PCC’s programme brings together groups of like-minded individuals in an environment to learn together and share experiences. They are supported by experienced executive coaches who provide context and with expert input on various relevant areas to the participants.

This programme aims to give the knowledge and confidence to become a leader – or a better leader – and equip leaders with the resources to push on to the next stage of development and transformation.

PCC schedules confident leader programmes for primary care leaders, or aspiring leaders of collaborations, federations or super-practices and confident commissioner programmes for service commissioners. Modules are selected that are most appropriate to the participants registered.

PCC also offers bespoke confident leader programmes for local areas – for example for federations or collaborations in an area, or for leaders working across an accountable care system or STP area. These programmes can include any of the modules in this brochure and will be co-developed with the commissioner of the programme and the participants. Additional modules can be provided upon request.

The standard programme consists of nine modules over a period of approximately 10 months.
Nine half-day sessions
Highly relevant topics
Learn with peers
Review learning
Work through real problems
Facilitated by experts
Comments from previous participants include:

“I thought the course as whole was most enjoyable. We have changed our approach to dealing with other organisations, how we work internally within our federation working to our strengths, and we have some good ideas still to take forward.”

“Great speakers – both generally and with specifics, and good network of attendees too.”

“Having access to great expertise in an environment where it was ok to ask questions.”

“I thoroughly enjoyed the whole developments set, even sessions where I had previously covered the content. What made it so enjoyable was the opportunity to apply learning in my workplace and to learn from and share with the wider group’s experiences. It was also a very nice small group and we gelled well together.”

“Time out to reflect and share information. Great to feel you are not alone in the challenges in the NHS.”

“I have become more confident within my role. I do lead more effectively. I approach meetings with clear agendas and can negotiate more effectively.”
How it works

The programme consists of **nine half-day sessions** over a period of 10 months, allowing time between sessions for reflection and further study. Sessions include regular opportunities to discuss current issues and seek solutions.

Each session combines **expert facilitation** by experienced practitioners in their field with knowledge-giving, discussion and opportunities to work through scenarios and problems. A qualified coach will lead the sessions and will be supported by other facilitators and experts throughout the programme.

Sessions are supplemented with **selected further reading**, allowing participants to increase their knowledge in their own time.

Learning groups are encouraged to keep in touch with each other between sessions and to maintain relationships after the programme has ended.

Each group has its own **dedicated closed networking space on NHS Networks**, enabling participants to virtually network between and after sessions.

Capacity is limited to maximise the learning potential of the sessions and it is recommended you attend each of the sessions to get the most from your learning.

The following pages describe the modules that can be selected.
The role of primary care

Objectives
To understand the opportunities and challenges including:
- Drivers of change
- Developing the workforce
- Primary care at the centre of systems of care (multispecialty community providers (MCPs), accountable care systems (ACoS), influencing STPs)
- Stabilising primary care services.

Outcomes
Improved insights to:
- The role of primary care at the heart of health and social care services
- Potential levers of change
- The role of the leader in enabling change
- The importance of vision.

Understanding people and leadership styles

Objectives
The session introduces Myers-Briggs Type Indicators (MBTI) preferences and helps participants identify their best fit through exercises to:
- Illustrate different MBTI preferences
- Consider differences between types
- Understand how others are likely to react to your type

It also discusses how to use the strengths of a type and help participants to identify areas for development.

Outcomes
At the end of the session you will understand:
- Your preference type, its implications for you and its impact on others
- How your preferences can be used to best advantage to support your learning during the rest of the programme
- How MBTI preferences affect decision making and their impact on the management of conflict and change in a team or organisation.
- The best ways to provide information and work with different types
- The roles needed in successful teams
- Different leadership styles
- The difference between management and leadership.
Population health

Objectives
This session will allow participants to explore:
- The concept of value
- Design of systems of care delivered to the right patient by the right person at the right time in the right place
- The right care for the population and the individual
- How to maximise the patient experience.

Outcomes
The session will give participants insight to improving population health and increase understanding of:
- Getting the right patients to the right resources
- Getting the right outcomes for the right patients with the least waste
- Doing the right things to protect resources for future generations (sustainability)
- Ensuring fairness and justice (equity)
- Supporting all patients – not just those referred
- Creating population-based integrated systems.

Influencing, negotiating and chairing skills

Objectives
In this session, participants will learn how to make the best of skills they possess naturally but rarely use to best effect, including:
- Chairing meetings
- The psychology of working with groups
- Negotiating skills.

Influencing techniques will be considered during this session.

Outcomes
At the end of this session, participants will:
- Understand that an ability to negotiate effectively depends upon a willingness to develop positive, trusting relationships
- Understand their negotiating arena and how to create variables that allow them to develop a win-win outcome for everyone
- Appreciate that there are two key areas in which good information is required
- Consider the skills needed to effectively chair meetings
- Appreciate how to make the most effective use of communication strategies and influencing skills
- Understand group psychology and how best to manage working with groups.
Leading a commercially successful provider

Objectives
This session will allow participants to explore:
- The commercial reality of the provider organisation
- The importance of brand and reputation
- Winning new business and responding to tenders
- Working with other providers
- Strengths and weaknesses of their organisation

Outcomes
The session will give participants insight to:
- Essential requirements for commercial viability
- Building a culture of profitability
- Leading a commercial organisation

Legal considerations for provider organisations

Objectives
To understand the legal considerations for leaders of provider organisations, and the need to consider function before deciding on a form.

Outcomes
At the end of this session, participants will know the business factors particular to healthcare providers:
- Why consider a legal entity
- Different models – super-practice, mergers, federations
- Forms – companies limited by guarantee, limited by shares, community interest companies
- Advantages, disadvantages and opportunities.

Participants will also consider and discuss opportunities for their own situation.
Contracting for new models of care

Objectives
To provide an overview of the multi-speciality community provider (MCP) and primary and acute care system contract frameworks. Participants will learn more about:
- Use of the contract to commission with systems
- Implications of the different levels of the contract
- Contract models – alliance contracting, prime provider contracts.

Outcomes
Participants will end the session with:
- Increased awareness of the opportunities to use the contract to deliver change
- Insight into the tools available to support transformation
- Appreciation of how to use the contract for more innovative commissioning
- Examples of how the contract will be used in practice.

Commissioning for outcomes and value

Objectives
To consider the principles of value, how this links to outcome based commissioning approaches and how value is underpinned by ensuring patients are supported in making decisions about care at an individual and population level.
- To understand triple value
- Understand outcomes
- Design outcomes
- Understand a logic model approach.

Outcomes
- Have greater insight of the potential to change how and what we commission by working with patients, carers, providers and commissioners.
- Understanding of the potential role of primary care and general practice in relation to enabling personalised care and shared decision making
- Consider the role of the commissioner as a system enabler and engineer, not a solution creator.
Principles of project management

Objectives
This session establishes the common principles of project management and covers the journey from inception to completion.

Outcomes
By the end of the session participants will understand:
- The principles of project management
- How to define a project and ensure each stage is clearly understood and implemented
- How to make the most of time and resources
- How to identify and allow for risks.

The culture of organisations

Objectives
This session explores change through the lens of organisational culture and the process of developing culture in teams and networks to engender change successfully and to support high quality and quality improvement.
- To explore what makes an effective culture, and how to change a culture that isn’t working
- To consider aspects of quality and performance and how these interrelate to organisational culture.

Outcomes
At the end of the session, participants will:
- Understand what culture is and how it develops
- Understand the cultural iceberg – visible and unseen aspects of organisational culture
- Recognise and understand positive and negative cultural signs and symptoms
Provider organisation governance

Most provider organisations use some form of board to oversee executive functions and strategy, monitor progress and manage risk. Leadership requires understanding of the function, roles and responsibilities of the board. To be effective, leaders must grasp the principles of corporate governance and support the board to evolve in the form most appropriate to the objectives and culture of the organisation.

Objectives

To consider the role of corporate governance, clinical governance and information governance as a provider organisation. To understand the implications of good governance arrangements and assess the risk to the organisation from poor governance.

Outcomes

At the end of the session, participants will understand:

- The leadership challenges for governance in primary care provider organisations
- How the role of the board and its constitution need to evolve as the business grows
- CQC requirements, policies and processes required
- Information governance requirements.

Working with and developing your community

This session considers the assets in the community and how these can be developed to work alongside healthcare services

Objectives

- To consider the role of community asset development
- How primary care can provide the vital link to communities
- First steps in empowering local communities
- How those who present to primary care but do not have a medical need can be directed to more appropriate support.

Outcomes

At the end of the session, participants will understand the first steps required to help develop assets in the community and make healthcare services more sustainable, and to promote the health of the local population.
Procurement processes and tendering

This session explores the requirements for procurement, how to manage the process and how to respond to tenders. It will be tailored according to whether the audience includes commissioners or providers.

Objectives
- To understand procurement legislation
- Understand how to manage procurement processes
- What make a good tender response
- How tender responses are assessed
- How to respond to tenders.

Outcomes
At the end of the session, participants will understand how to manage a procurement process (for commissioners), or in the case of providers how to respond to procurement processes, including how to best draft a tender response.

Leader as a coach

Using coaching techniques in the workplace can support effective people management by increasing individuals’ motivation and confidence, and maximising employees’ potential better than training alone. This session explores the use of a coaching management style and coaching tools and techniques to develop others. It includes the opportunity to practise feedback and use a coaching style.

Objectives
- The role of coaching/mentoring in the workplace
- Understanding different leadership styles and when to use them
- Coaching as a leadership style
- Coaching tools and techniques
- Opportunities to practise using a coaching style
- Next steps for building and supporting effective teams.

Outcomes
At the end of the session participants will:
- Be able to support team members using a coaching style
- Have tools and techniques to support people to develop themselves
- Have knowledge of the different leadership styles and when to use them
- Know how to help individuals develop to maximise their potential and develop their personal resilience.
The final session will include: review, continued application and development, how to continue working together

A concluding session will reflect and consider next steps:
- Review of learning set and personal achievements
- Review of learning from each session
- How participants wish to continue to work together
- Continued support from PCC
- Continued use of the virtual network.

This session will allow the group to:
- Agree how to continue supporting each other
- Agree a timescale for meeting again
- Identify continuous support needs.
David Colin-Thomé
David was a GP for 36 years. His practice pioneered systematic management of long-term conditions employing managed care techniques. David was appointed as national clinical director for primary care, Department of Health 2001-2007 and national director for primary care and medical adviser to the commissioning and system management directorate, Department of Health 2007-2010. Honorary visiting professor of health policy and management, Manchester Business School, David is also chair of PCC.

Ross Clark
Ross is a partner at Hempsons, healthcare specialist lawyers. He has helped to establish more than 40 GP federations and provider organisations, representing a patient population of more than six million. Ross advises on the structures available to GPs to satisfy their objectives, guides them through and helps resolve the key issues. Ross advises primary care practices on partnership agreements, disputes, mergers and on treating general practice as a business.

Helen Ellis
Helen is a PCC senior manager responsible for the company’s personal and team development programme. Helen is an executive coach, Myers Briggs practitioner and a Belbin accredited trainer. Helen leads a number of PCC’s programmes, including change and personal resilience and leader as a coach. She runs training workshops and effective meetings that get the most from participants and produce the best possible outcomes. Helen uses her knowledge of Myers Briggs type indicators to give leaders insight into the behavioural preferences of themselves and others and how these preferences affect the development of successful teams.

Mike Ferguson
Professor Mike Ferguson began his career in electrical engineering, but for the past 25 years he has worked in management and leadership development, having discovered his real interests in human software. He is consulted regularly by SMEs and blue-chip companies seeking cultural change and business development, and as a coach for their senior staff. Projects included developing and implementing performance appraisal systems for NHS consultants and designing the selection process used for recruiting volunteers to support the 2012 London Olympics. Mike regularly lectures at the University of Cambridge.

Helen Northall
Helen has extensive experience of supporting NHS organisations to improve through learning, understanding and collaboration. As chief executive of PCC, she has led the organisation from its roots as an NHS agency to independence as a successful social enterprise providing events, training and development programmes to providers and commissioners. A qualified executive coach, mentor and an experienced facilitator, Helen combines technical knowledge of primary care policy and practice with knowledge of the skills needed to develop the potential of individuals and teams. Helen is a Belbin accredited trainer and Myers Briggs practitioner.
Roger Tweedale
Roger started his career at Anderson Consulting (now Accenture) and went on to join the healthcare team at KPMG before joining GP Care. As chief executive, Roger led the Bristol-based GP federation to become one of the most successful organisations of its kind. GP Care now has more than 100 member practices.
Since May 2014, Roger has been providing consultancy support to start-up GP federations across the country, as well as investing in new service initiatives and technologies focused on generating new income and cost efficiencies in primary care.

Muir Gray
Professor Sir Muir Gray entered the public health service by joining the City of Oxford Health Department in 1972. The first phase of his professional career focused on disease prevention and health in old age, followed by the development of the NHS screening programmes, as well as services aimed at bringing knowledge to patients and professionals, including the NHS Choices website. He also helped set up the Centre for Evidence Based Medicine in Oxford. He was appointed as the chief knowledge officer of the NHS in England and was a visiting professor in knowledge management in the Nuffield Department of Surgery.
He now works to bring about a transformation of care with the aim of increasing value for both populations and individuals.

Robert McGough
A qualified lawyer with extensive healthcare experience, Robert has advised on new integrated care pathway models and contractual structures for NHS organisations, including outcomes based arrangements and alliance contracting. He has also advised national NHS bodies on the development of strategy for commissioning support services. Robert advised NHS bodies on the transition to the new structures for April 2013 and led on support for the development and authorisation of CCGs. His wide experience includes producing national template documentation for the Transforming Community Services programme and advice to NHS organisations on mergers and joint ventures.

Cormac Russell
Cormac is managing director of Nurture Development and a faculty member of the Asset-Based Community Development (ABCD) Institute at Northwestern University, Chicago. For 20 years Cormac has worked in more than 30 countries. He has trained communities, agencies, NGOs and governments in ABCD and other strengths-based approaches. He is passionate about the proliferation of community-driven change and citizen-centred democracy, and has supported hundreds of communities to make ABCD visible through ABCD neighbourhood learning sites.
In January 2011 Cormac was appointed to the Expert Reference Group on Community Organising and Communities First, by Nick Hurd MP, Minister for Civil Society in the UK, which he served on for the term of the group.

Ben Farrelly
As procurement lead across Essex and north west London, Ben advised commissioners on the best approach for their procurement, depending on regulations and organisations’ standing financial instructions. Ben would build and run the procurements, delivering the full tender process in line with EU regulations and relevant UK and Department of Health regulations and guidance. He also led on e-commerce for the Essex cluster of PCTs, advising on approaches to various systems such as e-procurement, e-evaluation, and Sid4 and Supply2 health.
Ben has also specialised in new business development, generating business leads and responding to tenders in both the public and private sector. This has given him a key insight to building successful tenders from a provider perspective. Ben works regularly with primary care providers to support tender responses.
About PCC

Primary Care Commissioning (PCC) is an independent provider of training, development and knowledge services to health and care organisations. A not-for-profit business with roots in the NHS, PCC combines extensive knowledge of the NHS with expertise in personal and team development. [www.pcc-cic.org.uk/about-us](http://www.pcc-cic.org.uk/about-us)

For further information email [enquiries@pcc-cic.org.uk](mailto:enquiries@pcc-cic.org.uk)