

## **Improving the Leadership Culture - Reference Group**

## **TERMS OF REFERENCE**

# 1. Background

1.1. The NHS Interim People Plan outlines the important work that needs to be done to improve the leadership culture of the NHS for all our people. Efforts to reform NHS management over recent years suggest that it will only be possible to achieve meaningful change if our approach to leadership is comprehensive and multi-faceted. We have seen remarkable and rapid improvements in culture in some of our most challenged organisations with the right leadership, so we must not fall into the trap of believing that it takes years to change culture – we can act quickly on many fronts.

## 2. Purpose

- 2.1. The purpose of the Improving the Leadership Culture Reference Group is to advise the project team on the delivery of the actions in the Improving the Leadership Culture chapter of the Interim People Plan and on carrying out further work to develop the final People Plan for this area of work. This includes the NHS's proposed response to the important findings of the Kark and Kerr reviews.
- 2.2. The Reference Group will work to the wider group tasked with overseeing the implementation of the People Plan and will provide oversight and guidance to the **Improving the Leadership Culture Working Group**.
- 2.3. The Reference Group membership has been designed to ensure that a wide variety of voices including those of patients, NHS organisations, and from other sectors are heard in designing the NHS's new approaches to leadership.

### 3. Scope

3.1. The actions below from the Interim People Plan (IPP), and outstanding policy questions not covered by the IPP set out a comprehensive scope for the next phase of work on leadership and talent management.

# 3.2. Immediate 2019/20 actions

• Undertake system-wide engagement on NHS leadership compact

- Develop competency, values and behaviour frameworks for senior leadership roles
- Review regulatory and oversight frameworks to ensure greater focus on leadership, culture, improvement & people management
- Support NHS boards to set targets for BME representation across their workforce
- Roll out talent boards to every region, coordinated by national talent board
- Expand the NHS Graduate Management Training Scheme from 200 to 500
- Develop central database of directors holding information about qualifications and history

# 3.3. Actions to develop full People Plan

- Develop resources to support STPs/ICSs and primary care networks to create multi-professional teams that collaborate across traditional boundaries
- Consider actions to encourage more clinicians and people from outside the NHS to take up senior leadership positions
- Review NHSE/I regional teams' support to NHS organisations to promote improvement and staff engagement.
- Implement 360 degree feedback from providers, commissioners and STPs/ICSs

#### 3.4. Other commitments

- Undertake engagement on the recommendations in the Kark report (e.g. mandatory references) and develop options to create a professional registration scheme for NHS managers
- Develop options for improving assurance of leadership in the NHS

### 4. Principles/ways of working

- 4.1. In line with NHS England/Improvement ways of working, Reference Group members are expected to:
  - 1. Be as **inclusive as possible** and involve all relevant partner organisations wherever possible
  - Build on the work that has been done by parts of the system as much as possible, and empower working groups to develop solutions and make decisions

- Work with our Analysis, Insight and Affordability workstream to agree one version of the truth on current workforce data and planned future requirements
- 4. **Take into account diverse and different views**, and reconcile these where we can
- 5. Adopt an approach **consistent with the implementation of the overall LTP**, identifying commitments:
  - i) to be delivered nationally
  - ii) to be delivered locally but where we will set a national trajectory
  - iii) to be delivered locally to locally determined timescales
- 6. Ensure the People Plan is driven by and supports the **new service models** set out in the LTP
- 7. Work hard to **listen to patients**, **citizens and front-line staff** to ensure the People Plan reflects their priorities
- 8. Identify and anticipate the changes and opportunities that **technology and digital developments** will bring to workforce over time

## 5. Membership

- 5.1. Andrew Foster will act as Chair of the Reference Group. In his absence, then Prerana Issar will act as Chair.
- 5.2. The Reference Group will be made up of:

#### **Members**

### **DHSC/ALBs**

- Prerana Issar, NHSI/E
- Helen Bullers, NHSI/E
- Peter Robinson, PHE
- Emily Lawson, NHSI/E
- · Giles Denham, HEE
- Laura Roberts, HEE
- Dale Bywater, NHSI/E
- Yvonne Coghill, WRES
- Ben Dyson, NHSI/E
- [NAME], NHSI/E
- Gina Naguib-Roberts, NHSI/E
- Lynne Winstanley, NHSI/E

# Academic and non-NHS advice

- Dame Deirdre Hutton, Civil Aviation Authority
- Sir Robert Francis, Chair, Healthwatch England & NED, CQC
- Suzie Bailey, King's Fund

- Helen Buckingham, Nuffield Trust
- Michael West, Lancaster University
- Judith Smith, University of Birmingham
- Naomi Chambers, University of Manchester
- Andy Tilden, Skills for Care
- Mark Walsh, Bank of England

# Regulated professions/Rep bodies

- · Nav Chana, National Association of Primary Care
- Andrea Sutcliffe, NMC
- Charlie Massey, GMC
- Rob Behrens, Parliamentary & Health Service Ombudsman
- Peter Lees, Faculty of Medical Leadership and Management
- Chris Hopson, NHS Providers
- Danny Mortimer, NHS Employers
- Julie Wood, NHS Clinical Commissioners
- · Jon Restell, Managing in Partners
- · Henrietta Hughes, National Guardian Office
- Andy Tilden, Skills for Care
- **Greta Westwood**, Florence Nightingale Foundation

### <u>NHS</u>

- Marie Gabriel, Chair, East London NHS FT
- Dean Fathers, Chair, Nottinghamshire Healthcare NHS FT
- Matthew Kershaw, CEO, Croydon Health Services NHS Trust
- Sam Allen, CEO, Sussex Partnership NHS FT
- Navina Evans, EFLT
- Amanda Oates, Executive Director of Workforce, Mersey Care NHS FT
- Julie Screaton, Chief People Officer, Guy's & St Thomas' NHS FT
- Michael Pantlin, Group Director of People, Barts Health NHS Trust
- [NAME], Mersey Care NHS FT
- Claire Fuller, Surrey Heartlands ICS
- Mike Holmes, PCN External Reference Group
- Nav Chana, NAPC
- Janet Wilkinson, Greater Manchester H&SC Partnership
- Karamjit Singh, Leicester Hospitals
- Jagtar Singh OBE, Coventry & Warwickshire Partnership NHS Trusts
- Chris Oakes, NHFT
- Frances O'Callaghan, Homerton University Hospital
- Peter Molyneux, Sussex Partnership
- Yvonne McGlinchey, Salford Royal
- Andy Coley, Salford Royal

### Students/trainees

- [NAME], FMLM
- [NAME], FMLM
- [NAME], Student mental health nurse
- [NAME], Student paramedic
- [NAME], Medical student
- 5.3. Members of the Reference Group are expected to attend meetings wherever possible. In exceptional circumstances [and by agreement with the Chair]

members may send a suitably senior member of their team, who can deputise on their behalf for certain agenda items.

5.4. The Chair may invite others to attend all or part of any meeting.

#### 6. Governance

6.1. The Reference Group will advise the SRO for the Improving the Leadership Culture workstream. The SRO will be held to account by the National People Board.

# 7. Advisory group on Kark recommendations.

- 7.1. To support the Improving Leadership Reference group in addressing the complex issues raised in the Kark review an expert sub-group will be convened to explore the options of responding to the recommendations made in the Kark review. This sub-group will be made up of those members of the larger Reference Group who understand the challenges and opportunities of professional regulation, along with colleagues from DHSC and NHS leaders and representatives to whom any professional regulation may apply.
- 7.2. The Kark Reference Group will meet and convene further round tables to discuss the issues and engage with stakeholders, and make recommendations to the Leadership Reference Group.
- 7.3. The Kark Advisory Group will be chaired by Andrew Foster and will include:

### Members

- Dame Clare Marx, Chair, GMC
- Rob Behrens, Parliamentary & Health Service Ombudsman
- Chris Hopson, NHS Providers
- Danny Mortimer, NHS Employers
- Matthew Kershaw, Croydon Health Services NHS Trust
- Sam Allen, Sussex Partnership NHS FT
- · Julie Screaton, Guy's & St Thomas' NHS FT
- · Michael Pantlin, Barts Health NHS Trust
- Dean Fathers, Chair, Nottinghamshire Healthcare NHS FT
- · Gavin Larner, DHSC workforce
- [NAME], Section Head Priority projects professional regulation DHSC
- · Loretta Outhwaite, Institute of Healthcare Management
- Julie Wood, NHS Clinical Commissioners
- Henrietta Hughes, National Guardian Office
- Matthew Tait, CQC
- [NAME], Queen's Nurse
- [NAME], Oxleas NHS FT
- · Jon Restell, Managers in Partnership
- Gina Naguib-Roberts, NHS Improvement and NHS England
- Michael Pantlin, Barts Health NHS Trust

- · Steve Hart, NHS Leadership Academy
- [NAME], NHS E/I
- [NAME], Mersey Care NHS FT
- [NAME], NHS Leadership Academy
- · Joseph Smith, NHS E/I

#### 8. Secretariat

8.1. The programme support resource in the Improving Leadership Culture Working Group will provide secretariat, including organising internal and external meetings and room booking.

#### 9. Quorum

9.1. Meetings of the Reference Group will only proceed if at least fifteen members of the group are present.

# 10. Frequency of Meetings

10.1. There are three planned meeting of the Leadership Reference group prior to publication of the full people plan.

# 11. Notice of Meetings

11.1. Unless otherwise agreed, notice of each meeting confirming the venue, time and date together with an agenda of items to be discussed and any supporting papers, shall be circulated to each member of the Reference Group and any other person attending, no later than 24 hours before the meeting date.

# 12. Actions of Meetings

12.1. The Secretary will note all actions from the proceedings and recommendations of all meetings, including recording the names of those present and in attendance.

### 13. Reporting Responsibilities

13.1. The Chair of the Reference Group will be responsible for ensuring that the work is reported formally to the wider group tasked with overseeing the implementation of the People Plan.

#### Jul 2019