

**Clinical Commissioning Group Governing Body**  
**Paper Summary Sheet**  
**Date of Meeting: 27 September 2016**

For: PUBLIC session  PRIVATE Session

For: Decision  Discussion  Noting

<b>Agenda Item and title:</b>	<b>GOV/16/09/14 Leadership Development in Wiltshire – A Framework for the Future</b>
<b>Author:</b>	David Noyes – Director of Planning, Performance and Corporate Services and Simon Phillips – OD lead CSU
<b>Lead Director/GP from CCG:</b>	David Noyes – Director of Planning, Performance and Corporate Services
<b>Executive summary:</b>	The paper sets out for the Governing Body the principles of a structured approach to in house through career Leadership development opportunities which are either already in place, under development or proposed to support both future and current clinical leaders and managers in the pursuit of enduring commissioning excellence in Wiltshire. The concept is to develop a framework for Leadership that starts with the newest and carries right through to the most experienced, with building blocks along the way at appropriate points in career progression. The four stages envisaged encompass Initial, Intermediate, Advanced and Higher levels of training.
<b>Evidence in support of arguments:</b>	Five Year Forward View
<b>Who has been involved/contributed:</b>	CCG Directors.
<b>Cross Reference to Strategic Objectives:</b>	To deliver strategic plans which address the needs of the local population and involve patients, practices and partners.
<b>Engagement and Involvement:</b>	Shared ideas with EMT
<b>Communications Issues:</b>	Opportunity to share widely with stakeholders such as NHSE and Leadership Academy
<b>Financial Implications:</b>	Each proposed scheme has a relatively modest financial implication which needs to be fully understood before formal agreement
<b>Review arrangements:</b>	Regular reports on progress via OD round up to Director of Planning, Performance and Corporate Services

<b>Risk Management:</b>	Implementation should mitigate to an extent long term risks of workforce and workforce capability
<b>National Policy/ Legislation:</b>	Coherent with the Five Year Forward view and emergent STP thinking
<b>Equality &amp; Diversity:</b>	Equality Impact Assessments will be required for each
<b>What specific action re. the paper do you wish the Governing Body to take at the meeting?</b>	<p>It is recommended that the Governing Body:</p> <ul style="list-style-type: none"> <li>• Endorse the concept and principles set out in this approach to leadership development, notably the progression through Initial, Intermediate, Advanced and Higher levels, and;</li> <li>• Note the success of the GP Mastermind (Advanced) programme already in place and that development work is already underway on a programme for intermediate level training;</li> <li>• Endorse the concept and approve the development of a full business case, to include employment model, for the Junior Doctor (or Initial) scheme, and;</li> <li>• Endorse the concept and support the development of the Managing Partner (Higher) forum.</li> </ul>

## **Leadership Development in Wiltshire – A Framework for the Future**

### **Issue**

1. To set out for the Governing Body the principles of a structured approach to in house through career Leadership development opportunities which are either already in place, under development or proposed to support both future and current clinical leaders and managers in the pursuit of enduring commissioning excellence in Wiltshire.

### **Timing**

2. Routine – for the Governing Body to consider at their meeting on 27 September 2016.

### **Recommendation**

3. It is recommended that the Governing Body:
- Endorse the concept and principles set out in this approach to leadership development, notably the progression through Initial, Intermediate, Advanced and Higher levels, and;
  - Note the success of the GP Mastermind (Advanced) programme already in place and that development work is already underway on a programme for intermediate level training;
  - Endorse the concept and approve the development of a full business case, to include employment model, for the Junior Doctor (or Initial) scheme, and;
  - Endorse the concept and support the development of the Managing Partner (Higher) forum.

### **Background**

4. Notwithstanding what future structures might look like, there is a significant Leadership challenge ahead as we endeavour to modernise the NHS, implement both our own strategy and the Five Year Forward View, and deliver high quality services within increasingly constrained financial resources. The traditional models for delivering healthcare are being stretched to breaking point, an era of change is upon us and strong leadership capability is going to be essential if we are to build and deliver our ambitious aspirations for the people of Wiltshire. The next generation of leaders will likely need to work differently; they will need to operate with an even deeper understanding of the critical success factors and key dependencies within our complex System, understand how to provide clear direction and monitor appropriately, mentor, coach and work more closely

together and with key partners as they integrate processes from planning through to delivery.

5. To ensure that we have provided our current and future leaders with the best opportunity to thrive in this environment, we need to provide them with a toolkit on which to draw, and create an environment in which they can develop their personal capability in order to deliver our common goals.

### **A Framework for the Future**

6. Our concept is to develop a framework for Leadership that starts with the newest and carries right through to the most experienced, with building blocks along the way at appropriate points in career progression. The four stages envisaged encompass Initial, Intermediate, Advanced and Higher levels of training. The framework will recognise the importance of the larger multi-disciplinary team and provide constant challenge and support for all involved.

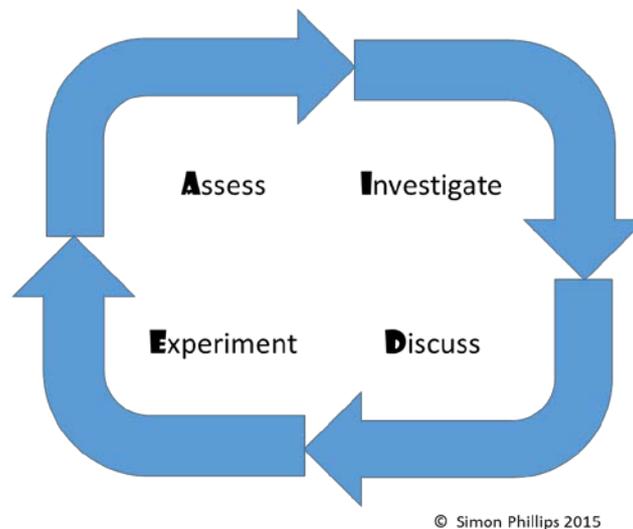


7. Two elements have either already been endorsed for development (intermediate) or are underway (Advanced). All elements reflect NHS England’s General Practice Forward View.

### **The GP Mastermind (Advanced)**

8. The Wiltshire GP Mastermind programme, our Advanced level training, is already in place and has delivered a unique leadership development experience for exceptional value. Utilising the latest thinking concerning adult learning, the programme utilises the IDEA - Sustainable Learning Cycle:

## IDEA – The Sustainable Learning Cycle©



9. The programme contains a mixture of delivery approaches to reflect different learning styles and to accelerate the development of this important group. Mastermind Groups are a proven method for engendering both learning and commitment and also develop mutually supportive relationships that ensure long-term resilience within the group. Many Mastermind Groups have stayed together, in an action learning format, for decades and this is an aspiration for this programme as the individuals progress in their careers within the Wiltshire health economy.

10. The key elements of the programme are:

- 6 full-day Mastermind workshops covering a range of topics that will enable the participants to take on leadership activities within their Practices, the CCG and beyond.
- 6 half-day Action Learning Sets to discuss progress, implementation challenges and test ideas.
- Regular performance coaching to provide objective challenge and support.
- Input from experts on a range of topics and in two key ways; (i) direct involvement in the Mastermind sessions and (ii) through additional networking evenings as guest speakers.
- Involvement in a project to implement their new skills. These will probably be CCG projects but may also include Practice improvement projects.

11. Although initially aimed at senior GPs, just below Board level, a recent workshop generated the opportunity to introduce three senior managers from the CCG to a session on political influence. The intention was to test the effectiveness of a multi-disciplinary group and the feedback was entirely positive.

12. The first cohort of senior GPs aspiring to Board level positions will finish in January 2017 and a second cohort recruited in the coming months to start in January / February 2017.

## The Wiltshire Way Programme (intermediate)

13. In August 2016, the Executive Management Team agreed to authorise the design and development of two inter-linked Intermediate level Leadership Development programmes. These are:

- a New Leaders programme (for those new to leadership responsibility) and
- a Talent Development programme (for more experienced managers aspiring to senior leadership positions).

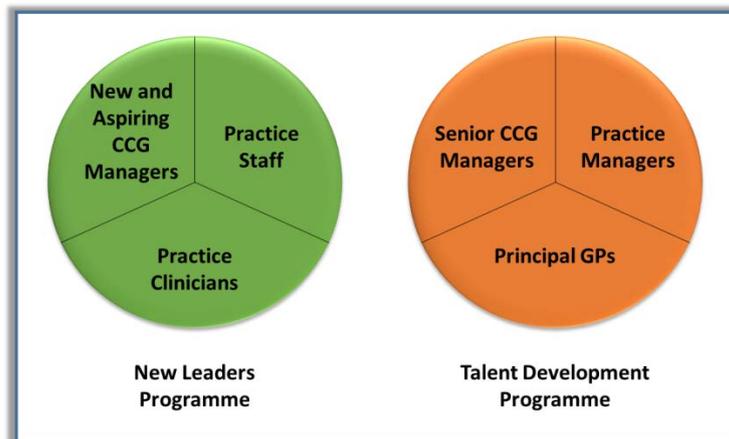
14. Both programmes will bring to life the 9 dimensions of the NHS Healthcare Leadership Model.



15. A full specification is being developed for both programmes, but the following will be key design features:

- Learning will be delivered using the GP Mastermind principles and the IDEA Sustainable Learning Cycle©.
- Each delegate will be responsible for implementing their learning.
- Learning will be offsite to ensure maximum focus and attendance.
- Each group will be supplemented by an Action Learning Set.
- The New Leaders programme will align to the Essential and Proficient levels of the NHS Healthcare Leadership Model.
- The Talent Development programme will align to the Strong and Exemplary levels of the NHS Healthcare Leadership Model.
- Groups will be brought together at various points to magnify learning and reinforce the network connections.
- To minimise costs, the programmes will be delivered by Simon Phillips and Dr Andy Hall who have developed and delivered the GP Mastermind programme.
- Future conducts of the programmes could be led (at least in-part) by successful participants from previous groups; further expanding the capabilities of all involved.

16. The concept is that there inter-linked programmes are multi-disciplinary (ie participants drawn from clinicians and managers across the system such as CCG management group, GPs and Practice Managers and Staff.



17. Funding, backfill and any re-charging mechanism associated with this programme remain under consideration.

#### **Proposed Junior Doctor Scheme (Initial)**

18. This initiative is being developed by Dr Chet Sheth. The intention is to create a foundation level, 12 month rotational employment scheme, supported by a linked modular leadership training offer, in order to encourage high quality and innovative young GPs to start and build their careers in Wiltshire. It is envisaged that the development programme will run over a year and be facilitative in nature with heavy emphasis placed on Case Studies, Action Learning Sets, Mentoring, Coaching and Peer Support.

19. While the employment model is not yet clear, the aspiration is to offer an initial 12 months employment, conditional on agreement to complete the leadership development course. Hosting, funding and pattern of employment are yet to be agreed, but it could be that we arrive at a situation where we have a pool of around 10 junior doctors who could be employed either on a rotational basis, or form a pool of resource that our practices could draw upon (on a repayment basis) to augment the permanent workforce, backfill or provide locum support.

20. The concept has hitherto been warmly supported by the Wessex Deanery and our own Primary Care Operational Group. While Governing Body endorsement of the concept is sought at this stage, a full business case will be required before we mobilisation in order to establish:

- Who will actually host/employ the GPs
- How the rotational/pool employment scheme will work, and who will administer.

- The number of candidates involved.
- The funding mechanism
- The HR, professional registration/conduct/clinical governance and Insurance requirements.
- The constraints/requirements of GP Trainers to oversee the GPs at this early stage of their careers.

21. A lot of the thinking and work required to produce the business case has already been done and progressive discussions are underway with the Wessex Deanery, NHS England and the Primary Care team. In particular an outline content and delivery method for the development programme is already very mature, and there is a good prospect of attracting NHSE funding for the training element of this concept. While the training element should be relatively easy to implement rapidly, building a robust employment model is likely to take longer.

### **The Managing Partner Forum (Higher)**

22. The Higher concept/offer aims to put in place a mechanism for Managing Partners from across Wiltshire to come together in one or more Action Learning Sets to share knowledge and review service delivery. Initially, these sets could be facilitated to re-familiarise everyone with the process and key principles for effective functioning.

23. Given the national and regional context of the Sustainability & Transformation Plans and the General Practice Forward View, the timing is perfect for people with extensive knowledge and experience to come together to explore what is working, what can be improved and what can be re-imagined. Although at a very early stage of conceptual development, it is not envisaged that such events would require very much more than the provision of a pre-booked venue, topic, time, and facilitated discussion to enable the most senior cohort of GPs to share ideas and experiences.

24. Similar to the Initial/Junior Doctor concept, if the Governing Body agree, a fuller exploration of the commitment and cost of this programme would need to be worked up for formal approval.

### **Participation – a multi-disciplinary approach**

25. At this very early stage, we have endeavoured to strike a balance between setting an ambitious approach, but containing the scale of our programmes to a size that we are able to manage with very taut support resource. Accordingly, currently the Initial and Advanced are primarily focussed on GP colleagues, and the concept for the Higher similar. Only the Intermediate has, at this stage of development, included from the outset the idea to have a more inclusive approach.

26. However, once programmes are established, and the administration settles, it is anticipated that we would seek to expand the catchment audience for each and include health professionals and managers from across the system, including nursing staff, pharmacists, therapists, Dental and eye professionals etc. Similarly, there is no reason why, should space exist, we would not offer places to neighbouring areas on a re-charge basis. However, it is envisaged that we will need to be measured in our ambition in this area, as we have only a limited staff resource with which to administer such schemes.

### **Selection for attendance**

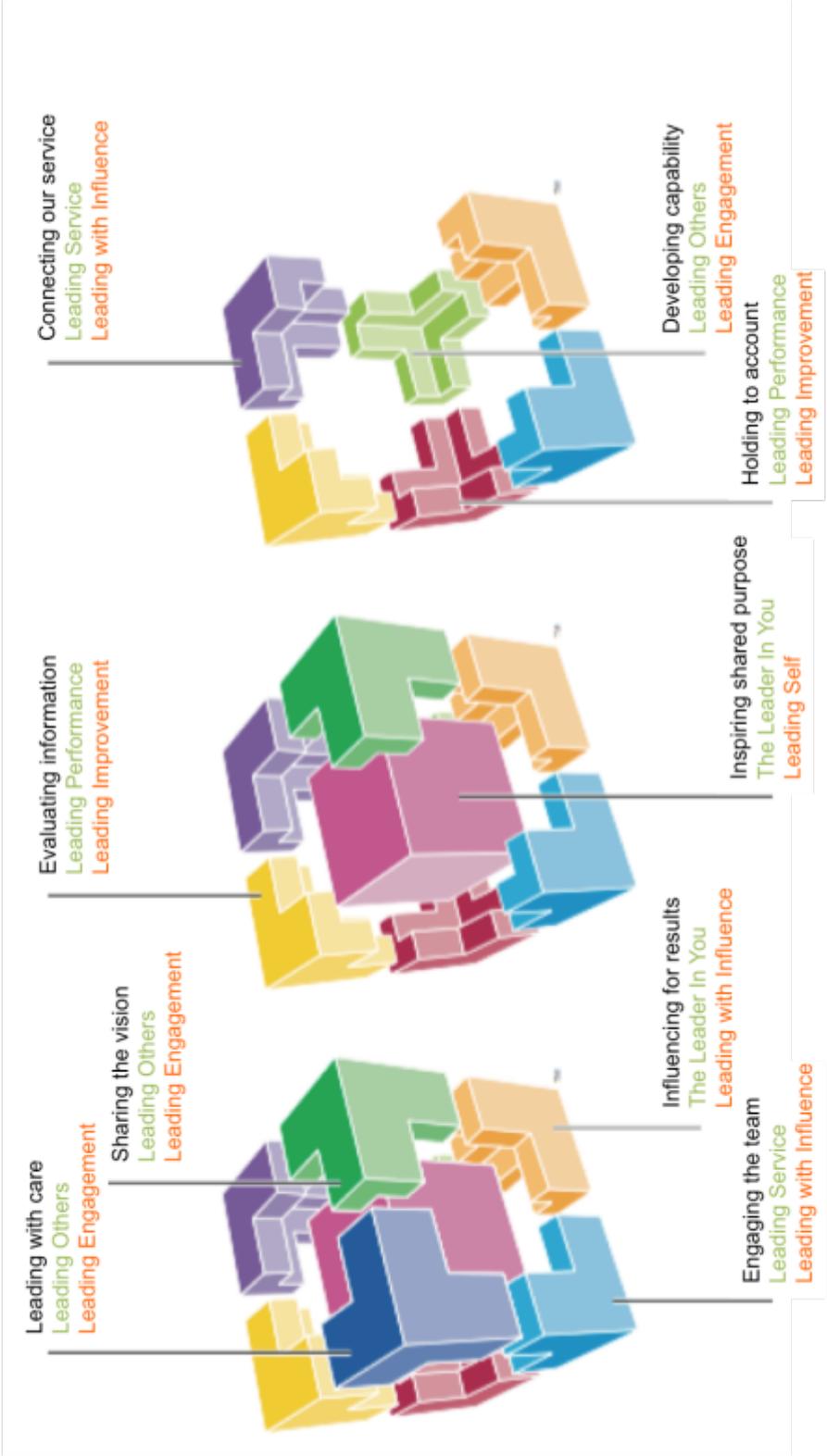
27. The Governing Body are aware of the CCG's cutting edge approach to utilising a values and competence based appraisal system, augmented by Personal Development Plans. Accordingly, it is envisaged that wherever possible, selection to either the Intermediate or Advanced training level will require supporting evidence from this underpinning process.

### **Accreditation**

28. The process of gaining external accreditation from academic or professional bodies is quite time and resource intensive. While we would absolutely wish to gain external accreditation in the fullness of time, we would not wish to hold up the development and roll out of this programme (if the Governing Body agree) awaiting accreditation. However, it is something we would wish to pursue in time.

*How Wiltshire's Leadership Development programmes map to the NHS Healthcare Leadership Model*

## NHS Healthcare Leadership Model & WCCG Programmes



New Leaders Programme  
Talent Development Programme

## Equality Impact Analysis – the EIA form

Title of the paper or Scheme: Leadership Development in Wiltshire – A Framework for the Future

### For the record

Name of person leading this EIA – David Noyes	Date completed 23 Sep 16
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Names of people involved in consideration of impact David Noyes	
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Name of director signing EIA – David Noyes	Date signed 23 Sep 16
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What is the proposal? What outcomes/benefits are you hoping to achieve? A through career staged approach to formalised leadership and development training

Who's it for? Clinical and managerial leaders across the Wilts Health system

How will this proposal meet the equality duties? By supporting the CCG in taking forward the delivery of our 5 year strategy, Five Year Forward View and GP Five Year Forward View

What are the barriers to meeting this potential? None evident

### 2 Who's using it?

Refer to equality groups

What data/evidence do you have about who is or could be affected (e.g. equality monitoring, customer feedback, current service use, national/regional/local trends)? Approach will be equitable for all

How can you involve your customers in developing the proposal? Envisage we will adjust and improve in light of feedback on a rolling basis

Who is missing? Do you need to fill any gaps in your data? (pause EIA if necessary) Nil

### 3 Impact

Refer to dimensions of equality and equality groups

Show consideration of: age, disability, sex, transgender, marriage/civil partnership, maternity/pregnancy, race, religion/belief, sexual orientation and if appropriate: financial economic status, homelessness, political view

Using the information in parts 1 & 2 does the proposal:

**a)** Create an adverse impact which may affect some groups or individuals. Is it clear what this is? How can this be mitigated or justified? None

What can be done to change this impact? N?A

**b)** Create benefit for a particular group. Is it clear what this is? Can you maximise the benefits for other groups? Benefit for all population groups

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Does further consultation need to be done? How will assumptions made in this Analysis be tested?

No

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**4 So what?**

[Link to business planning process](#)

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What changes have you made in the course of this EIA? None

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What will you do now and what will be included in future planning? Implement and test/adjust

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When will this be reviewed? Regularly at monthly OD progress report

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How will success be measured? By monitoring success and take up rates