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for the NHS leadership community

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news



Read inside articles on the new national NHS hub for leadership development and talent management; a national human resources update; and the latest on commissioning, provider, workforce, informatics, local authorities, public health and patient empowerment

[Find out more about the John Taylor Hospice](#)

update

“We know from experience that driving service change is complex, so we need local leadership that challenges the local environment and status quo.”

First of all, I would like to thank you for the continued good performance and delivery through the winter period - the referral to treatment statistics for December show that waiting times continue to be low, with a reduction in the numbers of patients reported to have waited a long time. Waiting times are a key influence on patients' perceptions of the NHS, so to maintain our performance during a traditionally a testing month is a real achievement.

In the past weeks, I have been able to spend more time out in the Service, which always gives me great energy and inspiration. Meeting leaders from across local health and care communities, I see not only the very real challenges people are grappling with but also much great work. Time with our local leaders reinforces for me time and time again just how important leadership is in the NHS and how we must invest in the leadership of the future.

If we think about the scale and scope of the challenge we face - the need to make £20billion of efficiency savings - then robust leadership is essential. Improving quality and efficiency hand in hand demands a fundamental rethink to the way we commission and deliver services, which requires skill and dedication in the design and delivery of new pathways.

We know from experience that driving service change is complex, so we need local leadership that challenges the local environment and status quo. And if we think about the focus on improving outcomes, we know again this can only be done properly where we are integrating services, working across teams and organisations - in short, bringing the whole system together around patients. This requires a new style of leadership.

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update

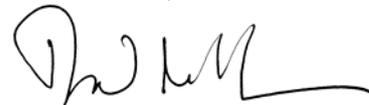
This month I also met with the first cohort of the clinical leadership fellows at a national learning event.

This event was a forum for discussion about the challenges and opportunities for the clinical community as they stand on the threshold of a far greater role in the way services are commissioned, delivered and led.

The fellowship programme is one of a number of schemes designed to help develop leadership skills and capacity across the system, spanning senior clinicians and managers alike. It is critical that through the work of the NHS Leadership Academy and other bodies, we give our leaders the tools, techniques, behaviours and support to lead the service to the future.

The Academy will work across the whole system, reflecting the need for leadership to cross boundaries. It will house programmes such as Top Leaders, which are crucial to developing the right leaders. It will also be home to our work on widening participation and increasing equality, two really important priorities for the new system. Its work will be centred on the leadership framework, and of course, the NHS Constitution, which sets out the values and principles that underpin all of our work.

Best wishes,



Sir David Nicholson
NHS Chief Executive

Read more about the NHS Leadership Academy on page 7

Commissioning development update

Clinically-led commissioning is at the heart of the Government's ambition for the NHS to deliver better quality care with improved outcomes for patients. As we move towards the new financial year, work is continuing to create successful, authorised clinical commissioning groups (CCGs) supported by high quality commissioning support services.

NHS Commissioning Board Authority

In the last month, the NHS Commissioning Board Authority (the Board Authority) has held its second board meeting in public. The papers and discussions are on the Board Authority website.

Commissioning development

At the meeting, the Board Authority ratified three key documents related to commissioning development. These documents (listed below) are designed to give CCGs a framework to work towards authorisation and establishment, while still allowing the flexibility and freedom of clinically-led organisations.

- Towards establishment: Creating responsive and accountable clinical commissioning groups. This guidance intends to support GP practices, and everyone they work with, to prepare to apply to the NHS Commissioning Board to be established as a clinical commissioning group.
- Developing commissioning support: Towards service excellence. This guidance is designed to assist the set-up of locally sensitive, customer-focused support services for CCGs and describes the assurance processes required to establish commissioning support organisations.
- Developing clinical commissioning groups: Towards authorisation. This document was first published in September 2011 and sets out the thinking to help emerging CCGs consider the steps towards authorisation.

Estimated funding

Meanwhile, the baseline estimates of funding for commissioning in the new health structure have been released. CCGs could control almost £65 billion of NHS funding, with the NHS Commissioning Board responsible for around £21 billion of commissioning expenditure and around £5.2 billion spent on public health services.

The estimated figures have been developed by mapping PCT spending in 2010/11 on to the future structure and uplifting them to 2012/13 levels. (The future structure is still subject to the passage of the Health and Social Care Bill).

Authorisation

Emerging CCGs are helping to shape the next steps in planning for the authorisation process. They are being invited to take part in a series of regional events to co-produce the criteria, thresholds and evidence that will be required in authorisation.

The next version of the Towards Authorisation guidance is due out in spring 2012. Its publication will be supported by an applicant's guide, which will incorporate a list of the tools and development support available.

Commissioning support

Over the past year, staff in PCT clusters have been working closely with CCGs to develop responsive and customer-focused commissioning support services (CSS) that will support CCGs through

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Commissioning development update (Cont'd)

Commissioning support (cont'd)

authorisation and beyond. A business review process to assure commissioning support will give confidence to both the NHS Commissioning Board and CCGs that the emerging CSSs are customer focused, effective and efficient.

The first checkpoint of this review took place last month. Feedback showed real progress, with many CSSs developing effective business relationships with their customers and also working together to explore collaborative models. The findings also helped to highlight the development needs of emerging CSSs, especially around customer focus.

Access the Board Authority February 2012 board meeting papers
www.commissioningboard.nhs.uk/2012/02/02/board-video-020212/

Download the commissioning development papers
www.commissioningboard.nhs.uk/2012/02/02/ccg-resources/

Read the latest information on GP pathfinders
<http://healthandcare.dh.gov.uk/category/pathfinder-learning-network/>

Provider development update

Introducing a Single Operating Model for aspirant NHS foundation trusts

Over the next four months, the strategic health authority (SHA) clusters will be introducing a single operating model (SOM) to support and assure NHS trusts through their foundation trust (FT) applications. Led by SHA clusters in partnership with the Department of Health (DH) and drawing on best practice, the model will introduce one common set of tools, processes and guidance for foundation trust development and application.

Trusts will need to follow a process more aligned with Monitor's authorisation approach, bringing greater transparency to the application. It will also enable a smoother transition of responsibilities from SHA clusters to the NHS Trust Development Authority (NTDA) in April 2013, when SHA clusters cease to exist.

The SOM will be introduced in five phases:

- Phase one will focus on the development and assurance of foundation trust applications and will be implemented from February 2012. Establishing a standard process for all SHA clusters to follow, this first phase will introduce standard tools and templates based on current best practice, ensure consistency on roles and provide further clarity on requirements for each assurance domain
- Phase two which will be introduced in March 2012, will look at the processes for managing the oversight of trusts, including regular self-certification by NHS trust boards, a key part of preparing them for operating as autonomous FTs.

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Provider development update (Cont'd)

Introducing a Single Operating Model for aspirant NHS foundation trusts (cont'd)

- Phase three will focus on streamlining DH internal assurance processes for FT applications.
- Phase four will introduce a common set of decision making criteria for reviewing FT applications to ensure consistency.
- The final phase will outline assurance processes for major transactions, which combine the NHS performance framework and the Tripartite Formal Agreements (TFAs) monitoring processes.

Update on the escalation process

2012/13 will be a crucial phase in maintaining the momentum established following the signing of TFAs in September 2011. A significant number of NHS trusts are planning to submit their FT trust application over the next twelve months.

The escalation process, which was established in December 2011, to support NHS trusts in meeting the targets outlined in their TFAs is now fully operational. Having received three consecutive red ratings on the Red Amber Green (RAG) scale, nine NHS trusts have now participated in formal escalation meetings with DH and their SHA cluster. As a result, there is now a plan for all affected organisations. They will continue to update DH on progress. Three more NHS trust meetings will take place shortly.

Update on the escalation process (cont'd)

Work is also underway to bring together the established performance management of the NHS Operating Framework and the performance management of TFAs, to streamline the process, avoid duplication and establish a more cohesive overall approach.

Plans for the NHS Trust Development Authority are progressing

David Flory has been announced as Chief Executive Designate for the NTDA and will take up his post on 1 June 2012, when the organisation will begin to operate in shadow form. He will continue as Deputy NHS Chief Executive and Director General for Performance Management at DH until March 2013.

The chair and other appointments to the senior team, establishment team and supporting posts will be made by the summer. The second phase will take place from October 2012, when the functions of the Appointments Commission transfer across to the NTDA.

A short guide for providers to the Health and Social Care Bill

The Department has published a short guide for providers of NHS-funded services to parts 3 & 4 of the Health and Social Care Bill. The guide outlines the different components of the proposed sector regulation regime, how it will protect and promote patient's interests and how it will work for different types of providers. It also outlines further legislative proposals to increase foundation trusts' autonomy and strengthen their accountability.

Download Launch of Single Operating Model: Part 1 - SHA Development and FT Assurance for NHS Trusts in the pipeline
www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Dearcolleagueletters/DH_132804

Download a short guide for providers to the Health and Social Care Bill
www.dh.gov.uk/health/2012/02/sector-regulation/

Workforce planning, education and training update

Last month, the Department of Health (DH) published details of the new policy framework for the education and training system in *Liberating the NHS: Developing the Healthcare Workforce - From Design to Delivery*.

Now a clear timetable for setting up the new system is in place. Health Education England (HEE) will be established in June 2012 and starts to take on its functions in October 2012. SHA clusters will continue to lead on education and training until HEE takes full responsibility from April 2013.

SHA clusters, working with their providers, will lead on the development of Local Education and Training Boards (LETBs). They, along with DH and HEE will need to work to design of the new system and ensure the safe transition of functions and accountabilities to HEEs and LETBs.

LETBs will need to command the confidence of a broad range of stakeholders. Healthcare employers will provide a clear majority of the membership and the Board members will need to represent fairly the full range of NHS funded providers across acute, mental health, community and primary care settings. It is expected they will also include representatives from universities.

LETBs will also need to consider how they capture public health interests and views from social service providers, clinical and professional networks, research and innovation networks,

including the new Academic Health Science Networks, commissioners, and from patients and the public. Every group is likely to want involvement and there should be a systematic, transparent process for stakeholder input.

SHAs and employers will also need to be mindful of the expectation set out in the Operating Framework for the NHS in England 2012/13 that running costs for the overall system in 2014/15 will be, on average, one-third lower than running costs in 2010/11.

The LETB authorisation process is expected to start from October 2012. Until April 2013, we will continue to monitor the Multi-Professional Education and Training (MPET) budget in the usual way and continue to work with SHAs over the coming months to agree the MPET service level agreement (SLA) for 2012/13.

We have consulted widely to ensure the new education and training system is robust and will build on the successful work of SHA workforce teams. There is a real opportunity now to secure excellence and retain expertise while developing new arrangements to meet the challenges of the future.

**Liberating the NHS: Developing the Healthcare Workforce
From Design to Delivery:**

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_132076

NHS Leadership Academy

A new national NHS hub for leadership development and talent management gets underway in April 2012.

The NHS Leadership Academy will be a centre of leadership excellence for everyone working in the NHS, or providing care funded by the NHS.

It will promote NHS leadership values, raise the profile of leadership and set national standards; design, deliver and commission national leadership interventions; provide expert support for local leadership development, and be an international beacon of best practice.

Throughout, it will focus on developing outstanding leadership to improve the quality of services and outcomes for patients.

A central Academy principle is that the NHS is built on the passion and commitment of staff. The story of leadership success is the story of the NHS's staff - staff who feel engaged and satisfied have a direct, positive impact on patients' experiences of the NHS and their health outcomes.

Good leaders create working climates where staff feel engaged and satisfied; they must work even harder to achieve this in times of major change, so developing outstanding leadership in health has never been more important than now.

The Academy will further develop the work of the former National Leadership Council, NHS Institute for Innovation and Improvement, strategic health authorities (SHAs) and primary care trusts (PCTs). The foundations for this will include the NHS Leadership Framework, providing a single view of leadership behaviour throughout the NHS to underpin development, irrespective of discipline, role or function.

Other familiar offers include the Board Development Tool, Top Leaders programme, Graduate Management Training Programme, Breaking Through and Clinical Fellows.

The Academy will run the prestigious NHS Leadership Awards, which recognise and celebrate outstanding leadership at every level of the service and are now in their third year. Peer nominations open at the same time as the Academy, in early April 2012. There are nine categories and more details, along with case studies and films, will be available soon.

However, to become an internationally recognised centre of excellence, the Academy must do more.

This will include:

- hosting national and international conferences
- contributing to leadership debate in business and academia
- running seminars to discuss leadership practice
- carrying out academic research promoting inclusion and diversity
- producing a talent management guide
- further developing local and regional networks for leaders
- developing nurse leadership
- commissioning new programmes
- products and frameworks in response to changing NHS needs
- designing a suite of academically accredited programmes.

In short, promoting the 'professionalisation' of leadership in health, recognising the vital contribution good leadership makes to improving health outcomes.

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NHS Leadership Academy (Cont'd)

Key facts:

The NHS Leadership Academy will be:

- Steered by a programme board bringing together senior members of the Academy with representatives from the NHS Commissioning Board, employer organisations, social care, public health and local authorities
- Run by a managing director and small team, supplemented by a faculty and associates
- Owned by the NHS for the NHS, with sponsorship from all parts of the system and, over time, other partners
- Based in Leeds

Find out more about the NHS Leadership Academy
www.nhsleadership.org.uk/

Read more the NHS Leadership Awards
www.nhsleadership.org.uk/about-leadershipawards.asp

Informatics Directorate update

National informatics functions

The future strategy for informatics has been approved, subject to resolution of a small number of financial issues. The focus is now on the detailed design of the future IT systems delivery function and the future funding model for national and local initiatives.

Mapping of SHA/PCT informatics

functions to future state organisations
 The exercise of mapping existing strategic health authority (SHA) / primary

care trust (PCT) informatics functions to suggested future state organisations is almost complete.

The bulk of suggested mappings are agreed informally but there is a small number of functions where discussions are continuing. Staff destinations will be communicated once all decisions are made and at the latest, by 31 March 2012.

For more information on NHS Connecting for Health:
www.connectingforhealth.nhs.uk

Local authorities update

Video diaries from national learning programme for health and wellbeing boards

Members of the health and wellbeing board accelerated learning set programme recorded video diaries at a recent national learning and sharing event.

Each learning set delivered a short video on the themes, issues and challenges being discussed within their groups, their expectations for the event and anticipated outcomes and predicted achievements.

David Behan, Director General of Social Care, Local Government and Care Partnerships, also recorded a video y capturing his personal reflections on the work of the National Learning Network and how he hopes the programme will progress.

Future events

The next national event takes place on 24 April 2012 and will be open to learning set members and associates. The event will

Future events (cont'd)

provide a further opportunity to chart progress within learning sets and health and wellbeing boards, as well as a chance to present the products emerging from the accelerated learning set programme. Outputs from the event will be published on the Community of Practice, see details below.

An invitation to our Community of Practice (CoP)...

Get involved in the latest discussions, news and events, join the official National Learning Network for Health and Wellbeing Boards CoP. The network is open to leaders from local government, the NHS, public health and other partners.

Follow this link to sign up:

www.communities.idea.gov.uk/c/10113659/home.do

Or email lola.olawole@dh.gsi.gov.uk to request an invite.

Watch the video diaries

DH website <http://healthandcare.dh.gov.uk/video-diaries-from-national-learning-programme-for-health-and-wellbeing-boards/>

Individually on the DH YouTube channel

<http://www.youtube.com/user/departmentofhealth?ob=0>
www.youtube.com/playlist?list=PLB4683235E6AE9143

Access the latest health and wellbeing news

<http://healthandcare.dh.gov.uk/category/public-health/hwb>

Follow the Health and Wellbeing Board team on Twitter:

Tags: [@johnwilderspin](#) [@AmyatDH](#) [@edwardsginny](#) [@JanineatDH](#) [@davidatDH](#)

Use the following hashtags to follow discussions: #HWBlearn, #JSNA, #Healthwatch

Local authority public health funding

Earlier this month the Department of Health (DH) published figures showing that 2012-13 spending on future local authority public health responsibilities, is estimated at £2.2 billion.

The figures, which are broken down by local authority, are based on primary care trust (PCT) spending in 2010-11 mapped onto the future structure, proposed in the Health and Social Care Bill, and uplifted to 2012-13 levels. Actual allocations for 2013-14 for local authorities will not fall below the 2012-13 estimates in real terms, other than in exceptional circumstances.

Overall public health spend in 2012-13 is estimated at £5.2bn of which £2.2bn is for work which in future would be commissioned by the NHS Commissioning Board.

During 2012-13, public health budgets and responsibilities remain with PCTs. These estimates can help to support a smooth transition and local authorities can now begin planning how to help their local communities stay as healthy as possible and reduce health inequalities.

PCTs and local authorities are encouraged to continue working together with DH to identify the correct baseline spend and to inform us if they believe further adjustments are needed. In some specific areas such as spend on abortion services, which have been removed from the local estimates, further work will be considered later this year.

In due course, DH will also publish recommendations from the Advisory Committee on Resource Allocation (ACRA) on the public health formula, which will be used to inform actual grants to local authorities. More information on a new Health Premium incentive will also be published shortly.

In 2013-14, subject to the passage of the Health and Social Care Bill, DH will allocate a ring-fenced public health budget to upper-tier and unitary local authorities. Actual grants for 2013-14 for local authorities will be announced in late 2012.

Read more about the estimates
www.dh.gov.uk/health/2012/02/baseline-allocations/

Patient and Public Engagement team update

Transforming patient experience

A package of patient experience research and online support was launched in February 2012 to support NHS services to improve patient experience.

The research, carried out by the Kings Fund and Kings College London, sought to establish what matters most to patients. The NHS Institute has turned the main findings into a resource for providers and commissioners with designated responsibility for improving patient experience.

The online guide provides a useful summary of the challenges that exist when planning national and local patient experience measurement and explains how to use patient experience information for accountability, quality improvement and transparency.

The research sets out some strong arguments for how the NHS can improve services and patients' experience of

healthcare and will support the work the Department of Health is doing to strengthen the voice of patients in the new system.

The full report also develops the evidence base for measuring and improving patient experience and highlights some illuminating case studies, which give real life examples of how different types of organisations across the NHS have captured patient experience to drive service improvement.

Commissioning for Quality and Innovation scheme (CQUIN)

Patient Experience CQUIN data has been distributed to NHS Trusts and on 13 February 2012 to SHAs. SHAs will want to share with commissioners to support work around the national goal on improving responsiveness to personal needs of patients.

Download the patient experience online resource and full research reports
www.institute.nhs.uk/patient_experience/guide/home_page.html

Find out more about the CQUIN scheme
www.institute.nhs.uk/world_class_commissioning/pct_portal/cquin.html

Human resources national update

HR Transition Partnership event – 27 March 2012

Following the first national transition partnership event that took place on 5 December 2011, a further event is planned for 27 March 2012 at the TUC Congress Centre in London. The agenda will concentrate on the following:

- Public Health transition to PHE and local authorities
- Clinical commissioning groups and commissioning support
- The national HR transition guidance.

The March event will be a further opportunity to:

- receive an update on the overall transition timescale and milestones
- discuss policy and strategy updates, and their implications, with policy leads from the new organisations
- provide opportunities for delegates to consider these implications
- influence the way these are progressed, and share local practice
- build our shared understanding of the impact on employer and staff-side workloads and the role of social partnership within transition and beyond.

The event will once again be chaired by Stephen Welfare and Karen Didovich,

joint chairs of the HR Transition Partnership Forum. Delegates will be able to debate issues, ask questions and jointly consider the implications of the transition, and how we can further support, inform and engage with staff, their representatives and employers. The final programme for the event will be circulated at the beginning of March but bookings should be made now, via <http://events.eoe.nhs.uk/2279> as places will be limited.

Public Health – the Local Government Association guidance

The Public Health Concordat was published on 17 November 2011, setting out the principles and standards for managing the HR processes to support the transfer of primary care trust public health commissioning activity to local authorities. The second piece of the 'jigsaw' – the Local Government Association transition guidance – was published in January 2012.

Receiver organisations – updates and fact-sheets

To support the letters sent to staff on 31 January 2012, a comprehensive set of factsheets for each of the new organisations has been developed and are now available from employers. More detailed information on the proposed design of the NHS Commissioning Board has also been published.

Download the Local Government Authority transition guidance
www.local.gov.uk/web/10161/media-releases/-/journal_content/56/10161/3341500/NEWS-TEMPLATE

Download Organisational design recommendations
www.commissioningboard.nhs.uk/2012/01/26/board-meeting-020212/

The truth about “privatisation” and why government is a risky business

22 February 2012

In this week’s blog from Health Minister Simon Burns: the truth about “privatisation” and why government is a risky business.

<http://healthandcare.dh.gov.uk/the-truth-about-%E2%80%9Cprivatisation%E2%80%9D-and-why-government-is-a-risky-business/>

Health and Social Care Bill explained

17 February 2012

A series of factsheets on the Health and Social Care Bill explain particular topics contained in the Bill, including its key themes. They include case studies of the policy in action, or answer frequently asked questions about the topic.

<http://healthandcare.dh.gov.uk/factsheets/>

First steps to Public Health England people transition policy published

16 February 2012

The proposed principles for the transfer and appointment of staff to Public Health England are published today.

<http://healthandcare.dh.gov.uk/phe-transition/>

Ten reasons why we need a Bill to make these reforms work

15 February 2012

Simon Burns Health Minister Simon Burns explains why the Health and Social Care Bill is needed to make the changes that are being proposed for the NHS.

<http://healthandcare.dh.gov.uk/ten-reasons/>

Monitor seeks comments on proposed licensing regime

9 February 2012

Monitor, the independent regulator of NHS foundation trusts, has published a number of documents as part of its ongoing engagement on the proposed licensing regime. The closing date for comments is 5 March 2012.

<http://healthandcare.dh.gov.uk/monitor-comments/>

Appointment of five National Directors

3 February 2012

The NHS Commissioning Board Authority has confirmed the appointment of five National Directors.

www.commissioningboard.nhs.uk/2012/02/03/appointment-of-five-national-directors/

David Flory confirmed as first Chief Executive of NHS Trust Development Authority

2 February 2012

David Flory has been confirmed as the first Chief Executive of the NHS Trust Development Authority (NTDA).

<http://healthandcare.dh.gov.uk/david-flory/>

Video of the Board meeting – 2 February 2012

2 February 2012

The NHS Commissioning Board Authority’s latest public board meeting took place on the morning of Thursday 2 February 2012.

www.commissioningboard.nhs.uk/2012/02/02/board-video-020212/

Amendments to Health and Social Care Bill published

1 February 2012

The Government has tabled a series of amendments to the Health and Social Care Bill in advance of its Report Stage in the House of Lords, which begins next week.

<http://healthandcare.dh.gov.uk/bill-amends/>

Commissioning Outcomes Framework consultation

1 February 2012

The National Institute for Health and Clinical Excellence (NICE) has launched its first consultation on potential indicators for the proposed 2013/14 Commissioning Outcomes Framework (COF). Comments are invited on 120 indicators, which cover a broad range of topics, including mental health, cancer and asthma.

www.commissioningboard.nhs.uk/2012/02/01/cof-consultation/

Conference 2012 update

Date	Name of conference	Where	Website
28 February	Electronic Prescribing in Hospitals	Mayfair Conference Centre London	www.healthcareconferencesuk.co.uk/electronic-prescribing-in-hospitals
29 February	Advances in Medical Science	Central Hall Westminster London	www.publicserviceevents.co.uk/206/advances-in-medical-science
22 March	A New Approach to Mental Health	Manchester Conference Centre	www.publicserviceevents.co.uk/203/a-new-approach-to-mental-health
27 March	The Future of Information Governance	One Wimpole Street, London	www.insidegovernment.co.uk/other/information-governance/
29 March	Redesigning Local Services	Central Hall Westminster London	www.publicserviceevents.co.uk/208/redesigning-local-services
29 March	Health & Social Care Conference	One Whitehall Place London	http://govknow.com/event-detail.html?id=106
17 April	A New Strategy for NHS Procurement: Securing the Future of NHS Services	Manchester Conference Centre	www.publicserviceevents.co.uk/211/a-new-strategy-for-nhs-procurement
19 April	Public Sector Pensions	The Barbican London	www.publicserviceevents.co.uk/210/public-sector-pensions

events

Disclaimer: The Department of Health is not responsible for the organisation of any of the above events and cannot be held responsible for the content or quality of any events listed.

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