



# Population health management system leadership improvement programme.

Leading through partnership – a personal and system  
development programme to support leadership and change

# Background

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Nottingham as a system, in common with most systems across England, has significant pressures around flow in services, compromising quality of care and experience for patients. While acknowledging the immediate solutions provided by weekly confirm and challenge meetings and the Quality Risk Summit, addressing long-term, upstream challenges requires additional effort.

There are programmes of work across Nottingham to address the component parts of care in the system related to flow. Stream one is around emergency and acute medicine and meeting the needs of those needing hospital care, to progress more appropriately through the care pathway. The second stream is prevention and frailty and creating an integrated system wide approach to better management. The intention is to create a leadership programme that supports both streams of work by equipping leaders in the system with relevant skills, behaviours, knowledge and practice.

Considering the critical role of frailty in patient flow and the impact on UEC, the program will focus on comprehensively understanding patient pathways, identifying challenges, and pinpointing bottlenecks.

The programme aim is to navigate the immediate problems in urgent care while also preparing for the looming frailty crisis by harnessing strong relationships and a unified culture.

The population health management system leadership improvement programme will prioritise collaborative learning, shared experiences, and the development of a unified vision to bridge gaps within the healthcare system. This programme provides clinical and care professional leadership development to underpin the work across the system to address these key issues.

Professionals will be provided with dedicated time to focus on the programme and will include colleagues from all partners in the health and care system in Nottingham. The population health management approach supports the development of more effective system working and collaboration around a population.

# The approach

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The offer is for a group of clinical and care professionals working together to understand how we can change the system to better support prevention, frailty and as a result, improve flow and urgent and emergency care. The programme will have core elements of leadership curriculum common to all professionals, and working groups formed into learning sets focussed on specific areas of change within the system.

Programme outcomes will include:

- Improve partnership and collaborative working, networks and relationships across the system.
- Common understanding of issues around flow and UEC across the system.
- Design of new pathways and ways of delivering care addressing gaps.
- Defining community-based approaches for Place Based Partnerships addressing demand and creating new pathways of care, relevant to their population cohorts.
- Building on strengths in health and social care partnership working.
- Direct impact on reducing hospital admissions, including length of stay, and ambulance activity.

Participants on this programme will be key to transforming the system of urgency and emergency care and addressing issues of flow. For that reason, this programme will be grounded in reality and application. There is an expectation that participants come ready and willing to play their part in this transformation through active discussions with colleagues, building on existing patterns of good practice, experimenting with new and innovative approaches to care and flow management, learning and making changes – as opposed to this being an abstract development programme.

This is a clinical and care professional led programme so the content will be co-designed with participants. An indicative approach is shown below.

# The programme

A development programme of 9 full days across 18 months to develop capability and capacity in systems change for frailty.



A change project, working in small groups and across the whole programme, on practical application of learning and implementation of changes.



Small group action learning sets supporting each change project to process learning, problem solve and develop individual practice.



Senior sponsorship and individual mentorship, aligned to local development and existing change programmes to leverage power and change across the system.

The leadership programme supports the work of the system in addressing key challenges in system working. Participants will be leading elements of a whole system change programme in either urgent and emergency care or frailty and prevention. They will identify the project at the beginning of the programme and work through it over the following 18 months.

The modular content will include regular process checks on the projects, and content will be shaped around emerging needs of the participants as they work on this project.

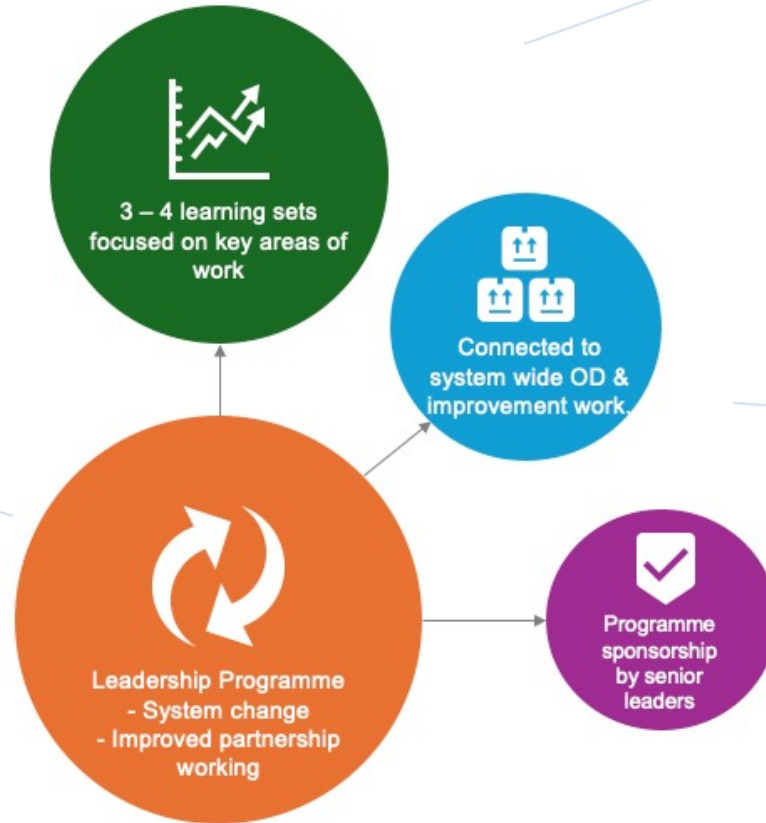
Action learning groups of 6-8 participants will provide space to consider applied learning from the project and modules, and share practice and problem solve.

Each participant will have a senior mentor from the system supporting their individual learning, as well as key stakeholders from the system who are able to help accelerate change, problem solve and secure organisational buy-in.

# Alignment across the system

This development intervention sits within the broader context of transformation, improvement and sustainability activity across the system. Through the programme participants will be better able to navigate the immediate problems in urgent care while also preparing for the looming frailty crisis by harnessing strong relationships and a unified culture.

Participants for programme should be those people currently working in ED and other professionals across the system with a key role in care pathway for frail and vulnerable services.



Learning set group focus will connect to core outcomes for programme and be agreed by sponsors and participants. Examples include:  
Focus on frailty from initial assessment pre-admission. Care pathway around frailty through discharge process.

The programme is one element of a system wide suite of interventions and programmes for improvement.

# The curriculum

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The programme will run over 18 months.

9 development sessions will be provided for the two groups, interspersed with action learning sets to support application of learning and accelerate change.

The small groups will be made up of clinical and care professionals working together across the system on real change, providing both short term change and benefit as well as creating system change for the longer term.

- 1. Leadership models and complexity** - why what has got us here won't take us forward.
- 2. Systems thinking** – exploring the reality of current practice, pressure points, successes and scope for new thinking.
- 3. Managing resistance** - Leading through impact and influence.
- 4. Population health management.**
- 5. Personal leadership** - Being on the receiving end of your leadership and understanding the shadow side.
- 6. Theories and practical implementation of change:** developing & adopting a theory of change more suited to systems working.
- 7. Creating movement in complexity.**
- 8. Learning from other systems** - International comparators for patient and community engagement and involvement, new technologies, workforce.
- 9. Embedding practice** - Personal resilience. Sustaining personal learning and continued development.

# Facilitation style

## Don't lose sight of what matters

We know that in times of change in organisations people can start to look inward at systems, structures and processes often neglecting the all-important creation of new ideas and working relationships beyond the usual boundaries. We give an assurance to keep the programme aspirational yet grounded in the realities and dilemmas of the day.



## Coach don't teach

We are aware of expertise and experience of the participants; all with a history of both formal learning as well as their personal development and with significant and influential positions in the system. So, our role is to help explore their perceptions and personal strategies, challenging and stretching them all in a safe environment.

- always start with understanding our client's needs and creating the very best of working partnerships
- believe that people learn best by doing
- are flexible and allow our interventions to evolve as those we work with evolve
- are well-informed and topical, always looking to the future for emerging challenges
- challenge resistance to change in those we work with through the creation of a supportive environment
- work in the grounded reality of the day
- offer access to associates for coaching during our programmes and follow up when individuals need our on-going support

# Karen Lynas

Karen Lynas is a wise and hugely accomplished leader. She has experience across many organisations that informs her deep understanding of organisational functioning and effective leadership, particularly in health services. Her appreciation of the complexity and rapidly changing environments leaders face is refreshing and rare, along with her responsiveness and sensitivity to the political realities of organisations. She combines this with a humanity and with humility to ensure she offers authentic and inspiring support that makes a difference to individuals, teams and organisations. And she is a delight to work with.

**Professor Michael West**  
**Senior Fellow, The King's Fund**  
**Professor of Organizational Psychology,**  
**Lancaster University Management**  
**School,**

Karen has done a fantastic job facilitating the programme for our Executive Team. Her approach is deliberative and engaging which had a profound impact on behaviours and commitment to work collaboratively.

**Deborah Cadman, OBE**  
**Chief Executive of the WMCA**

Karen operates as a facilitator, developer and Strategic Thought Partner working on a one-to-one basis, with teams, boards and organisations.

Her background is in public sector leadership development with over 25 years leading national initiatives on health leadership, including the award-winning graduate scheme, NHS Top Leaders and most recently in establishing the NHS Leadership Academy with its portfolio of blended development programmes for leaders at every level.

As an accomplished facilitator of both small and large groups where there are difficult issues to face Karen offers challenging enquiry to help resolve issues around relationships, performance, impact, and outcomes. Her style is supportive while direct – she works with positive intent in service of your aims not shying away from helping you confront the less helpful or productive ways of working you might have developed.

She is accustomed to working at a national level and playing a key role in developing strategy and creating a compelling vision for leadership and talent development. In her roles as Managing Director of the NHS Leadership Academy and Director of Leadership at the King's Fund she has established a deserved reputation and track record for success and is regarded as an authoritative source on leadership.

Now working independently her portfolio has a focus on public sector clients including central and local government, health and education. She also works with a small number of private sector clients focussing on C-suite development and with clients internationally on health system leadership.





# Simon Bird

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Simon has worked with organisations in the fields of leadership and organisation development as a consultant, coach, designer and facilitator for over 20 years. A significant part of his career has been spent working in and around complex public sector organisations, and with leaders from a wide variety of backgrounds.

He has an interest in innovative development approaches, as well as the ongoing design and implementation of sustainable and pragmatic solutions. His current work includes working with intact teams and networks – with a focus on effectiveness and how to respond to a complex and evolving environment.

He works across the organisation development disciplines – which include organisation and team culture, change leadership, leadership development, systemic team coaching and one to one coaching.

Simon has worked at chief executive level, with executive teams, operational and frontline teams to support them in building capability, bring about improvements and develop ways of working. He has worked extensively with people from all levels and many professions – and on a one-to-one basis, through to organisation wide development interventions.

Simon was most recently a partner with the global consultancy *Korn Ferry Hay Group*, where he led a team of consultants and advisers who worked across a portfolio of clients. He left Korn Ferry Hay Group in 2017 to work independently and in association with other consultants, establishing Thorpebird Consulting. Before joining Korn Ferry Hay Group in 2012, Simon's career included roles at The King's Fund, NHS England, Mars Confectionery and The Terrence Higgins Trust. In his consulting career, clients have included the NHS Leadership Academy, Rolls Royce, Faculty of Medical Leadership & Management, Post Office, University of Exeter, Whitehall & Industry Group, CGIAR, Reebok International, British Telecom, Cambridge Assessment and Diageo amongst others.

Simon's MSc in Organizational Behaviour is from Birkbeck College (University of London). He is an accredited coach through The School of Coaching/University of Strathclyde – and Systemic Team Coach through the Academy of Executive Coaching (AoEC)



# Dr Andy Haynes DM MRCP FRCPath MBE

Over 40 years experience in the NHS in a variety of clinical and leadership roles. A patient focussed clinician specialising in Lymphoma, Bone Marrow Transplantation and Molecular Diagnostics with an academic background and publication record.

Alongside this as Cancer Lead Clinician and Pathway Lead Clinician for Emergency Care, he developed strong skills in and delivered transformation which improved patient experience, operational effectiveness and outcomes. After illness he moved to become Medical Director and Deputy Chief Executive in a trust entering Special Measures and was part of the team that delivered strategic improvement over 6 years resulting in the CQC rating of Good overall with Outstanding at the main site and Maternity and Urgent Care rated Outstanding. As part of this journey he played a key role in establishing a multiprovider Vanguard which delivered improvements in Urgent Care and established new models of care for End of Life and Musculoskeletal Services. This led him into the Clinical Lead role for the STP and subsequent accelerator ICS where he established the Clinical Reference Group and Chaired the Digital, Analytical Intelligence and Technology Board. He then moved into the interim Executive Lead role for the accelerator ICS where he established and chaired a System Executive Group including local authorities.

With a passionate commitment to population health and inequity he established a Population Health Management group powered by a System Analytical and Intelligence Unit. He oversaw the development of the Long Term Plan and aligned Digital, Health Inequalities and Clinical Strategies with a System Outcomes Framework. During the pandemic he chaired the Health and Social Care Tactical Support Group which co-ordinated the system response for the Local Resilience Forum strengthening relationships with the local authorities and Public Health. After retiring in 2021, he became a Non Executive Director at University Hospitals Leicester where he chairs the Quality and Our Future Hospitals Committees whilst sitting on People and Audit Committees. He continues to be a Specialist Advisor to Sherwood Forest Hospitals trust where he has been on the Board for a decade sitting on Quality, People and Communities and Partnership Committees. He has helped to deliver Medical Director leadership support forums for the Faculty Of Medical Leadership and Management where he is an associate member of FMLM Applied. He has helped to design and co-facilitate two FMLM leadership programmes delivered to ICS Chief Medical Officers and National Cardiac Network Leads focussed on delivery in complex system environments.

