

Leadership for a collaborative and inclusive future – General Sir Gordon Messenger and Dame Linda Pollard

Introduction

On 8 June, General Sir Gordon Messenger and Dame Linda Pollard published [their final report](#) on the review of leadership and management in the health and social care sector, as commissioned by the Secretary of State for Health and Social Care in October 2021. The review was extensive in its scope, covering all parts of the system and utilising a ‘listen and learn’ approach to engage with a diverse range of stakeholders. The report acknowledges the complexity of the system and its structure, as well as the pressures the NHS currently faces in tackling a backlog in care against the backdrop of significant staff shortages. It also recognises the important relationship between driving improvement in leadership and the positive effects on productivity and efficiency. Our [Reality Check report](#), also published on 8 June, further explores the tough financial ask of trusts in this financial year.

Despite these challenges, the review team see a window of opportunity afforded by the statutory footing for ICSs in the Health and Care Act 2022, as well as the merging of Health Education England and other bodies into NHS England and the changes to the world of work being navigated across the country as we emerge from the pandemic.

When the review was first launched, [NHS Providers was supportive but raised concern](#) at the potential for it to descend into a ‘blame game’. We are, therefore, reassured by the engagement undertaken by the review team and the supportive messages contained within the findings that acknowledge the importance of inclusive leadership and culture on recruitment, morale and retention.

In March, as part of the review team’s stakeholder engagement, we facilitated a roundtable with a number of members at challenged trusts. We are, therefore, pleased to see a specific recommendation (7) within the final report outlining details of a support offer for leaders who take on these difficult roles. We are also pleased to see that the review addresses the four leadership challenges we highlighted in a [Health Service Journal blog](#) in February this year.

In this briefing, we have summarised the key areas covered by the report, grouping recommendations under the below headings. It is worth noting that the recommendations included in this report largely address NHS England and the government yet stress the critical importance of co-production at a local and system level.

Training

The report contains two recommendations specifically focused on training, including recommendations 1 and 3. **Recommendation 1** outlines a need for targeted intervention at entry-level and mid-career level (for managers) to promote collaborative leadership and common organisational values, which should include specific modules on equality, diversity and inclusion (EDI). For middle managers, the report recommends a three to five day in person training offer across health and social care, local government and relevant voluntary and private sector organisations. The report notes this could align with the national leadership programme detailed in the [integration white paper](#).

Recommendation 3 calls for a unified set of leadership and management standards, alongside training bundles to help achieve these standards. The review team specifically point towards good practice in the social care sector, for example the registered manager standard, as a cross-sector learning opportunity.

As part of its findings, the report notes a legacy of competition within the service and suggests the collaborative nature of system working will change this dynamic, leading to better outcomes for staff, and patients – it calls this a ‘culture of collaboration’. It also suggests that leadership is, at present, seen as the responsibility of those with ‘manager’ in their job title – yet recommendation 1 seeks to address this by engendering a sense of belonging across the wider workforce.

With regard to standards and structures, the report refers to stakeholder feedback on a lack of career structure for managers, as well as a lack of universal standards, resulting in the perception that management is not viewed as a ‘professional activity’. The review team hope to address this through recommendation 3, as well as through those set out below under ‘Development’.

The review also looks specifically at clinical leadership, noting the central role clinicians can play in culture and behaviour setting, alongside their knowledge of patient and population health. Despite this, stakeholder engagement highlighted that many clinicians with management responsibilities felt unprepared for their leadership roles and noted an assumption that seniority equates to leadership

knowledge. Training and development opportunities outlined in the recommendations within this report therefore need to be applied to clinical leadership roles as well as to non-clinical managers.

Development

Further to recommendations on training, the report considers the system for appraisals, talent management and non-executive director (NED) development. **Recommendation 4** outlines the need for a consistent system for appraisals on an annual basis for all NHS staff, as a unified process should remove silos and unwarranted variation. Appraisals should focus on role performance, both technical and behavioural, as well as staff future career aspirations. In the short-term, this recommendation calls for a focus on fulfilling this recommendation for non-clinical managers within the NHS in 2022/23. Manager training for these appraisals should be included as part of the training bundle in recommendation 3.

Regionally, the report calls for a career and talent management function in **Recommendation 5**. Evidence from stakeholders suggests that there is currently a lack of clarity in management career progression, a sense of a failure to utilise diverse and available talent, and a shortage of candidates for management roles at challenged trusts. The report suggests this regionally based talent management function would have authority for succession planning, career support, data analysis, talent management and the oversight of compliance to standards, as well as training and appraisal processes.

In **Recommendation 6**, the report calls for the expansion of NHS England's non-executive director talent and appointments team to allow this support group to further expand its reach and to diversify the talent pool for NED appointments, both in terms of equality, diversity and inclusion and expertise from other sectors. The report specifically notes the need for renewed efforts to appoint more women, Black and disabled non-executive directors. We support the recognition of the important role NEDs play in NHS trusts and foundation trusts, and agree that there is a need to ensure a wider cross section of society see themselves fulfilling this vital role and to provide support for effective induction, training and talent development of NEDs.

However, it is important to understand that NHS foundation trusts are constituted so that their councils of governors appoint NEDs and many welcome the flexibility that comes with designing their own role specification and recruitment and assessment processes. While foundation trusts may welcome assistance from NHS England, this should not be imposed upon them. It will also be

important that the recommendations of this report do not become out of step with the newly produced code of governance.

We also support the acknowledgment that training and development in the board role are as crucial for non-executive directors as they are for their executive colleagues. While NHS England may serve an important role, we do not support the full centralisation of training and development provision and we firmly believe that it should be the NHS provider sector that influences the shape of training and development provision.

Equality, diversity and inclusion

This report weaves EDI into its findings and recommendations throughout, acknowledging that while there are examples of good practice within the NHS, stakeholder engagement and other data sources (including the [NHS Staff Survey](#), [Workforce Race Equality Standard \(WRES\)](#) and [Workforce Disability Equality Standard \(WDES\)](#)) demonstrate that there is still much work to be done, particularly for minority ethnic and disabled staff. As part of **Recommendation 2**, the review calls for:

- Inclusive leadership to be embedded as the responsibility of all leaders, with a more central role for EDI training
- A commitment to the promotion of equal opportunity and fairness standards at entry and mid-career level (through Recommendations 1 and 3). These standards should equip leaders to address discrimination at all levels
- Wider enforcement of existing measures to improve EDI through the setting of improvement goals
- An enhanced role for the CQC in measuring EDI outcomes, including accounting for EDI data during assessments

The review notes EDI professionals are already in place to assist with embedding these recommendations and further highlights that it expects the number of these professionals to reduce as awareness is instilled in all staff.

This report speaks of the importance of a 'culture of respect', noting evidence of bullying and harassment within the NHS, as identified by other data sources. It calls for responsibility for EDI to be embedded across all levels, with a framing of EDI as a route to improved career progression. It also raises the importance of psychological safety to speak up and a stakeholder perception that Freedom to Speak Up (FTSU) needs reframing as a tool for organisational improvement instead of whistleblowing.

NHS Providers' member support offer on improving race equality is in development, with our initial research and findings published [here](#).

Challenged trusts, regulation and oversight

Recommendation 7 focuses on leadership at challenged trusts, noting a need for increased support and incentives for those taking on these difficult roles to mitigate the 'reputational risk of failure'. Building on recommendations in [Sir Ron Kerr's 'Empowering NHS leaders to lead' report](#) and noting the existing NHS intensive support teams, this report recommends the following actions:

- Strategic placement of managers and clinicians and a celebration of their selection to improve the narrative around these roles
- A regional taskforce of other managers and clinicians to co-produce a sustainable improvement plan
- Creation of support networks for these leaders, including peer mentoring, coaching, training and development and positive action programmes
- Allowing time and space for improvements to occur, championing progress and allowing psychological safety for 'freedom to fail', noting that failure is a normal step in service transformation
- Developing pragmatic improvement plans, with explicit expectations, resourcing and support. This should encompass elements of digital, estates and equipment funding and should be peer reviewed by another chief executive
- Utilising flexibility in terms and conditions to attract senior leaders, including relocation support for leaders moving to rural and coastal trusts

On regulation, the report notes the important role the CQC can play in collaboration at system-level, while the 'well-led' domain offers an opportunity to focus on organisational culture and compassionate leadership. The report shares stakeholder feedback that expressed concern at the tone and outcome of some regulatory visits and that a keen focus on metrics can be overburdensome. Linking to recommendation 7, the report highlights the importance of transparency and support in addressing service transformation, as well as the importance of learning from mistakes. For professional regulators, the report suggests all professional regulators should collaborate to aid the development of management standards and training.

Finally, regarding oversight, the report acknowledges the often unhelpful pressurised environment managers and leaders, as well as frontline staff, are working in, citing internal and external political pressures as part of this.

NHS Providers' view

"Trust leaders will welcome this constructive report. Sir Gordon Messenger and Dame Linda Pollard acknowledge the world-class leadership already in the NHS and have listened carefully to what local leaders have told them, clearly understanding the many pressures that our large and complex health system is under.

"Despite these pressures, the report highlights a window of opportunity for collaboration and co-production, responding to the changing world of work as a result of the pandemic, against the backdrop of a statutory footing for ICSs and the merging of HEE and other bodies into NHS England.

"Trusts are committed to collaborating more effectively to develop and improve leadership, building on existing strong foundations, and local leaders must be fully engaged and involved in any changes to ensure a successful, high-achieving NHS as a provider of healthcare and an employer.

"We welcome also that the review weaves equality, diversity, and inclusion - a key part of strengthening future leadership - throughout its recommendations and findings. We actively support trust leaders to tackle race inequalities.

"The review has been a valuable opportunity to explore how we can strengthen and support leadership across the NHS, and the report recognises the important relationship between driving improvement in leadership and management and positive effects on productivity and efficiency.

"The report rightly highlights the crucial role of NHS managers and the importance of investing in people alongside operational and political priorities. We support this view as we continue to call for a fully-costed and funded workforce plan to deal with future demand. We welcome the report's recognition of the impact this investment will have on staff recruitment, morale and retention.

"Everyone in the NHS will take on board this thoughtful report as staff work flat out to clear care backlogs and treat patients as quickly as possible, amid longstanding financial and workforce challenges. We look forward to helping to implement the review's recommendations, including the call for investment in a leadership and management programme in 2023/24."