

## Service Transformation Challenge Panel: Call for Evidence

### Response from the Systems Leadership Steering Group and Enablers, July 2014

#### Background

- The independent Service Transformation Challenge Panel has been established by the Treasury and the Department for Communities and Local Government, to advise on what needs to happen nationally and locally to increase the pace and scale of service transformation. The Panel has called for written evidence to support its work.
- The call for evidence has been structured around a number of core themes, including leadership. The Systems Leadership Steering Group, and the Enablers engaged in the Systems Leadership – Local Vision Initiative, has drawn together the research and practice evidence around the contribution that Systems Leadership can make, in order to respond to the call around this theme.

#### Introduction

- The starting point of the Panel's view on leadership is that strong and collaborative leadership, nationally and locally, is a key condition to achieving better outcomes across organisations.
- One approach to leadership that appears to be particularly well-suited to achieving such outcomes is Systems Leadership. Systems Leadership has been defined<sup>1</sup> as *"concerning leadership that extends beyond the confines of single agencies or organisations, stretching the remit and skills of leaders into places where their usual authority, derived from organisational position, may not be recognised."*
- By definition, therefore, Systems Leadership extends across organisational and sector boundaries. It describes the way people need to work when they face large, complex, difficult and seemingly intractable problems; where they need to juggle multiple uncertainties; where no one person or organisation can find or organise the solution on their own; where everyone is grappling with how to make resources meet demand which is outstripping them; and where the way forward therefore lies in involving as many people's energies, ideas, talents and expertise as possible.
- Systems Leadership is therefore particularly relevant for people involved in the delivery of public services, especially those services which citizens have been accustomed to receiving since the inception of the Welfare State. People leading locality services are working in a context of ever-growing complexity and ambiguity: on the one hand, resources to deliver are tempered by a shrinking state; on the other, there is a continuing expectation by the public that services remain available on demand.
- Systems Leadership goes beyond collaborative leadership because it does not simply involve retaining your own power and authority whilst working together with a group of professional peers or other

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<sup>1</sup> Ghate, D., Lewis, J., and Welbourn, D. (2013) *Systems Leadership: Exceptional leadership for exceptional times. Synthesis Paper*. The Virtual Staff College, Nottingham, UK

partners. In complex and difficult issues, the power, leadership and authority may not reside in traditional roles. So Systems Leadership recognises that leadership is not vested solely in those who occupy positions of authority, and reflects contexts in which leadership and influence are distributed. It therefore involves being willing to cede leadership to others, or to share leadership, and in coming together not on the basis of a single pre-identified solution, but on the basis of a shared purpose or ambition. Systems Leadership is not just about working together, but about leading together.

- It follows that Systems Leadership allows for – and in fact welcomes – partial, emergent and clumsy solutions, enabling those involved to experiment and to work with uncertainty.
- And it also follows that Systems Leadership is particularly helpful when looking at current integration and other policy agendas, both in terms of starting from the perspective of the person using care and support services and in terms of bringing together health, social care, housing, welfare and other services. In this instance, the aim of Systems Leadership is to transcend individual organisational interests for the benefit of collective impact and improved health and wellbeing outcomes for all. Systems Leadership is a practical way of working to enable this to happen.
- There is both research and practice evidence for how Systems Leadership can foster and underpin collaborative working, and accelerate service integration. The following sections draw out the conclusions of research about what leaders need to have in order to achieve greater collaboration and co-production, and provide examples from projects over the past twelve months of how strong collaboration has been achieved in practice. We then draw out lessons from the projects and recommendations around strengthening Systems Leadership and developing leadership capacity.

### **What do leaders need to have in order to achieve greater collaboration and co-production?**

- In 2013, the Virtual Staff College published the results of research it had commissioned in order to synthesise much of the current national and international theory and practice around Systems Leadership. The College asked the Colebrooke Centre for Evidence and Implementation and Cass Business School to review and build upon the theory around the leadership of whole systems and complex systems, and to draw out key messages of practical use to people working in leadership roles, especially in public services.
- The resulting synthesis paper, *Systems Leadership: Exceptional leadership for exceptional times*,<sup>2</sup> brought together the findings of seven source papers, including:
  - secondary analysis of international literature on leadership in complex systems
  - qualitative in-depth interviews with 29 leaders working in public services across England
  - a group of case studies of three real-world leadership scenarios in locations across England
  - four review papers and short case studies of Systems Leadership in child and youth services in the USA, Canada, Australia and Denmark.
- Key findings identified ways of describing Systems Leadership; the best ways of achieving it; the personal leadership styles of people who do it well; and the conditions it needs to flourish.
- Descriptions of Systems Leadership included:
  - a necessary response to volatility, uncertainty, complexity and ambiguity, and to resource pressures
  - something done within and across organisational and geopolitical boundaries, and beyond individual professional disciplines

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<sup>2</sup> Ghate, D., Lewis, J., and Welbourn, D. (2013) *Systems Leadership: Exceptional leadership for exceptional times. Synthesis Paper*. The Virtual Staff College, Nottingham, UK

- something done within and across a range of organisational and stakeholder cultures, often without direct managerial control of resources
  - a collective rather than individual endeavour
  - distributed across many levels and roles
  - having outcomes for people using services at its heart.
  
- The best ways of achieving it entailed:
  - using influence and ‘nudge’ rather than formal power
  - aligning around a common vision or purpose
  - focusing on outcomes and results rather than process
  - having strong but robust and honest relationships
  - seeing Systems Leadership as a mindset rather than as a set of actions.
  
- The kinds of leadership styles that tended to support Systems Leadership involved:
  - ways of feeling (i.e. personal commitment and core values)
  - ways of perceiving – allowing for the unexpected, seeking diverse views
  - ways of thinking – curiosity, ability to synthesise complexity, sense-making
  - ways of doing – enabling and supporting others
  - ways of relating – honesty, mutuality and self-awareness
  - a grounding in personal qualities – courage to take risks, resilience, patience etc
  
- And it flourished when:
  - people tolerated risk and accepted there might be multiple pathways to outcomes
  - there was a willingness to cede organisational goals for collective ambition
  - role authority was not the sole source of legitimacy
  - it built on place-based initiatives
  - qualities, motivation and personal style trumped conventional skills
  - relationships were central
  - challenge and conflict were accepted as part of the process.
  
- Furthermore, effective Systems Leaders tended to share particular characteristics:
  - values-driven and aligned around a shared ambition
  - driven also to deliver outcomes
  - having humility and passion to learn – this has also been characterised as ‘quiet charisma’
  - having courage to experiment
  - willing to build engagement and listen
  - able to work with uncertainty
  - able to take adaptive action.
  
- Over the past year, these findings have been tested in the *Systems Leadership – Local Vision* initiative described overleaf. These findings provide both examples of how Systems Leadership has supported strong collaboration across political, managerial and front-line leaders, and issues that need to be addressed in order for the benefits of Systems Leadership to be realised.

## Examples that demonstrate how we have achieved strong collaboration across political, managerial and front-line leaders

- The Department of Health has brought together local and national government; social care for adults and children; the NHS; Public Health England; User-Led organisations and leadership specialists to form the Systems Leadership Steering Group. The broad aim of the Group is to improve services by removing barriers between organisations; to examine the effect, in theory and practice that Systems Leadership can have in accelerating transformational change in services; and to draw together the evidence base.
- Alongside commissioning the research described above, the Steering Group has created a fund to offer support to places across the country. Progress on an issue needs to involve a number of different sectors. The aim of these projects, each of which looks to create change in a difficult or 'breakthrough' issue across a locality, is to develop Systems Leadership at local level, to create new ways of working in support of delivering integrated services, and to achieve measurable improvements in health, care and wellbeing. The projects commit to applying what they learn about Systems Leadership to other issues, and to sharing that learning so that other areas can benefit.
- The first 25 programmes, which were chosen in mid-2013 from over 40 applicants, have covered a broad range of issues, from improving safeguarding for adults and children and integrating services for older people, to reducing alcohol abuse and improving exercise levels amongst a local population. In summary, they are as follows:
  - Bristol – integrated approach to health and wellbeing
  - Dudley – minimising service dependency and improving community based interventions
  - Cornwall – encourage access to healthy and fresh food within all communities
  - Birmingham – reducing demand on public services using 'big' data
  - Leeds - interconnection between unemployment and high levels of ill health amongst those who are unemployed
  - Plymouth - alcohol abuse
  - Coventry - raising levels of physical activity in the city
  - Nottingham and Shire - data sharing in the MASH (multi-agency safeguarding hub)
  - Lambeth & Southwark - Integrated Care pathways across Lambeth and Southwark
  - Merton - vulnerable ageing community
  - Kent - The connectivity between the Kent HWBB, the CCG-based Local WBBs and the District Councils
  - Dorset, Bournemouth and Poole - ageing population and gaining coherence across a complex local system
  - Gloucestershire - breaking the cycle of obesity within families in areas of urban and rural deprivation
  - Hackney - eliminate the risk of female genital mutation (FGM) faced by girls and young women growing up in Hackney
  - South Gloucestershire - improve local urgent care system incl. using resident codesign and insight
  - Suffolk - improve mental health outcomes and service provision by developing through early identification and treatment options
  - Torbay - create dementia aware high streets
  - Wakefield - develop an integrated model of care to improve quality for residents
  - West Cheshire - a multi-agency response to social isolation (timebank possible)
  - Wiltshire - create a multi-agency 24-7 response for those with urgent care needs

- Wirral - improve access to affordable, healthy food and influence positive local attitudes towards food
  - York - extending life and disability-free life expectancy for our local population and reducing the gap in health inequalities
  - Luton - addressing the variation of General Practice in Luton
  - Calderdale - raise the percentage of school age children participating in at least 3 hours per week of physical activity
  - Central Bedfordshire - improving outcomes for older residents through a more integrated preventative approach.
- The projects receive a package of support, including:
    - support from an experienced leadership development enabler specialising in Systems Leadership approaches, to work with them on a weekly basis, delivering leadership capability whilst helping the leaders in each project focus on the problem, come together and deliver successful outcomes
    - access to learning networks to help capture learning, hosted by the King's Fund
    - access to a knowledge hub where information from across the pilots is being shared
    - a number of free consultancy days from private sector partners
    - participation in the Cabinet Office's Commissioning Academy.
- The projects have also drawn on findings from eight prototypes, looking at issues from older people's care to reducing emergency hospital admissions through better health and social care integration, and carried out over 2012/13 in Leeds, Kent, Coventry, Lambeth & Southwark, Merton Sutton & Kingston, and Dorset, Poole and Bournemouth.
- Outcomes have already included better integration across health, social care, local government and police services to support safeguarding; stronger networks between food producers and consumers to reduce waste in local food production; and commissioners working more closely with service users, carers and the voluntary sector.
- Particular examples of strong collaboration include:
    - Dorset, Bournemouth and Poole – senior leaders working together to a shared vision across health and social care, pooling budgets and working on a common strategy to redesign integrated services
    - Nottinghamshire Multi-Agency Safeguarding Hub - involved systems leaders beyond health and social care in developing better safeguarding for adults and children - has led to (amongst other things) more staff; better discussions/actions across health, social care and police; increased access to GP systems; and better early years support.
    - LB Merton - integration of health and social care - the Systems Leadership initiative has led to a co-production process between health and social care, with good feedback loops between the front line, middle managers, clinicians and the senior leadership group, so people feel they are owning the change, and the leadership group can respond fast when barriers come up. There have also been strong links built up with users, carers and the voluntary sector, including Healthwatch.
    - Cornwall and The Wirral - both examples of where a very wide range of stakeholders have been brought together to create better health and wellbeing outcomes through food, and to

reduce food poverty (use of food banks in Birkenhead had increased by 47% over 4 months from 9000 to over 13000, for example) - outcomes have included more local markets and food networks, building better networks between local farmers and local consumers, so there is more use of surplus food and less waste; more community cafes; and developing a skills-based food curriculum for schools.

- Plymouth – representatives from health, public health, the local council, the voluntary and third sectors, the police and the local university have been working together on reducing late-night street drinking in order to benefit health, reduce demands on A&E and reduce streetscene costs: the Systems Leadership programme has led to joint decisions on where funding should best be invested to achieve better outcomes.
- The results to date show a mix of real action on tangible issues in some areas, and slower progress elsewhere. But where the projects are working, even if there isn't an immediate payoff, enablers are reporting that people across sectors in a particular place are in a much better position to have the difficult conversations than they previously were – because the right relationships are now in place.
- Another particular revelation has been around the potential role of the Director of Public Health. In a great many of the programmes, the Director of Public Health has emerged as *the* central figure, whether as champion/main driver, or else as catalyst/enabler. Precisely because they are not seen as coming from either 'health' or 'the Council', whilst at the same time having professional credibility, they are trusted across systems and can play a key role as 'honest brokers' in order to drive change forward.
- All the programmes have developed at their own speed over the past six – nine months, with evidence emerging of learning and systems change in support of wider collaboration. At the same time, there have been numerous barriers to change, and we have drawn together some of the early findings from the projects, in relation to what helps and what hinders, in a report, *The Revolution will be Improvised*<sup>3</sup>. Key findings from the report form part of our response to the Panel's final question, set out below.

### **What can be done both nationally and locally to develop greater leadership capacity and capability across all sectors?**

- One of the key themes that has emerged from the projects is that whole systems schemes are often marked by energy and enthusiasm in the early stages, but it takes time and effort for teams to focus on what they really want to achieve and agree a truly – and equally understood – shared ambition. One of the reasons why some Systems Leadership – Local Vision places have made less progress than others is that in practice, the ambition has been differently understood or only superficially explained. Taking time to agree the broad aim at the start, and to ensure that it is clearly understood and signed up to by all the partners, is strongly recommended.
- Another key piece of learning is that transformational change, through Systems Leadership, is difficult. We are looking to change deep-seated patterns of activity and cultures in organisations, and this is hard to do successfully. The emphasis on leadership when it comes to whole systems

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<sup>3</sup> <http://www.localleadership.gov.uk/current/publications/>

transformation can give the misleading impression that once the people at the top have agreed to work together, rapid progress will follow. In practice, the understanding needs to be developed that effective Systems Leadership requires leadership at every level, and just as much effort is needed in bringing teams together.

- Thirdly, we need to develop the understanding that co-ordinating existing services more effectively is not transformation; and neither is consensus if it means brushing difficult issues aside and focusing on the easy parts of an issue. Systems Leadership is about building relationships to the point at which those involved can have difficult conversations and work through difficult issues in order to get to grips with them in order to develop joint solutions.
- One key issue, that also feeds into questions around co-production, is that getting the relationships between the people providing the service improved is only the precursor to the most important relationship of all, which is with patients, people using services and citizens. Staff involved in whole systems transformation projects who took time to develop shared values and aims, and an understanding of each other's priorities, were better-placed to create an environment in which patients, service users and citizens were engaged and empowered.
- It follows that developing leadership capacity, to enable people to build relationships within and across organisations and sectors, is crucial. The Systems Leadership Steering Group is aiming to strengthen this capacity through extending the number of Local Vision projects, both through its national programme and through local initiatives in partnership with the NHS Leadership Academy.
- At the same time, we are looking to develop leadership capacity through developing awareness of Systems Leadership, producing an online platform which can act as a reference point for information on Systems Leadership; and through developing a common understanding of Systems Leadership and its applications, through joint leadership development programmes.
- These include *Leadership for Change*, a place-based programme due to begin its third cohort in September; a joint programme for individual future leaders across sectors and services; the Leadership Centre's *Skills for Systems Leadership* programme for Directors of Public Health, which will be integrated with Public Health England's broader talent management system; the NHS Leadership Academy's *Intersect* programme for Systems Leaders in clinical settings; and a programme with NHS England for Lead Clinical Commissioners in CCGs, due to begin its pilot in Autumn 2014. Other members of the Systems Leadership Steering Group, notably the National Skills Academy for Social Care, are already incorporating Systems Leadership elements into their own leadership development programmes.
- We would recommend that joint approaches to Systems Leadership become standard across health and care, and extend to housing, welfare, youth justice and other sectors, so that over time we can embed common understanding and common forms of working across services.