Leadership for empowered and healthy communities: A framework















Forward

I am very pleased to see this leadership framework produced. It could not come at a more opportune or critical moment for public health and the wider health community. There is good evidence that social networks have a preventative effect on both physical and mental health and that spending time and resources on growing and nurturing strong communities can be a cost-effective way to improve the health of the whole population. This approach must become one of the cornerstones of public health in the years ahead.

Leadership will be central to the success or failure of our ambitions to transform the way we work and the communities we serve. That is why this leadership framework is so timely and such an important piece of work. It should serve as an important resource to support the development of the strong and effective leadership that will pave the way to healthier and happier communities in the 21st Century.

Dr Ruth Hussey OBE CMO for Wales



I am delighted to welcome the Strong Communities Leadership Framework. Good leadership is fundamental not only in the commissioning and delivery of consistently excellent care and support but also in creating the conditions for resilient and mutually supportive communities to grow and flourish.

We all know the challenges we face with reduced public expenditure, whether as individuals, communities, commissioners or providers. At the same time, we know of many great examples, where people and communities are working together with professionals to transform services and where older and disabled people and those with long-term conditions are supported to be active, valued and contributing members of their community. These initiatives not only benefit people with care and support needs, they benefit everyone.

The Strong Communities Leadership Framework has been written in partnership, not only with social care providers, but also with people who use services, their carers and families, the voluntary sector and health providers. I believe it will be a key tool for everyone who wants to ensure that building strong communities and co-production become part of the mainstream of care and health services in the future.

Jo Cleary, Executive Director, Adults and Community Services, Lambeth Council, co-Chair of the ADASS Workforce Development Network and Chair of the National Skills Academy for Social Care



Leadership for empowered and healthy communities: A framework

Health and social care leaders are facing an unprecedented challenge. Reduced public resources and rising demand are coinciding with major structural reforms and clinicians assuming new commissioning responsibilities. However, this is also a period of great opportunity to positively transform health and social care. In times of crisis it is possible to challenge ourselves to do things differently and better, to move away from a process and service-driven system to one in which people can live as independently as possible for as long as possible within strong, healthy and supportive communities.

There is strong and growing evidence that community-based approaches to improving health and providing care and support can be cost-effective, deliver better outcomes and help to prevent health and social care needs arising. Focussing on so called 'social capital' opens up opportunities for stretched public resources to be used more effectively and efficiently by tapping into and releasing the skills, talents and energy of local people and groups.





A cross-sector approach to building strong communities

This leadership framework was developed as part of the Leadership for Empowered and Healthy Communities project which is a joint venture between the Association of Directors of Adult Social Services (ADASS), the Local Government's Ageing Well Programme, Think Local Act Personal, the National Skills Academy for Social Care, Skills for Care and NHS South Central Strategic Health Authority.

The framework

Empowered and healthy communities

Distributed leadership

People

Communities

Organisations

Front-line staff

Managers

Senior Leaders

Leadership Qualities and Behaviours

Strategic intent

Facilitative and collaborative

Driving transformation

Flexibility



Leadership based on collaboration

The framework describes the leadership skills and behaviours which are needed to build stronger, healthier communities, in which everyone is valued and can contribute as a full and equal citizen. It highlights a new style of leadership based on collaboration and co-production – the ability to work across boundaries and organisations and work together with local people in a spirit of genuine and equal partnership. It is grouped into four themes:

- Strategic Intent
- Facilitative and Collaborative Style
- Driving transformation and change
- Flexibility





1 For references and more information see the Building Community Capacity website www.thinklocalactpersonal.org.uk/BCC/EvidenceAndEvaluation/whatworks/EconomicCase

Strong business case for developing social capital

The framework focuses on the skills and behaviours needed to nurture and develop people's personal and social support networks and to enable groups and communities to come together in a spirit of mutual support and reciprocity.

There is a strong business case for such an approach – strong social networks are associated with reduced illness and death rates and can protect against dementia and depression. 'Giving' in itself, for example through community participation and volunteering, is associated with positive health and wellbeing, reduced mortality rates and provides a huge amount of social value (one study showing a social return of between £2 and £8 for every pound spent on volunteers.) Participating in groups has been shown to cut mortality risk, whilst several studies into of the value of peer support in mental health have demonstrated savings in bed days and a 50% reduction in hospital re-admissions compared with traditional care. Moreover, a 'whole community' focus can improve things for all, not just those

with high support needs, through reduced crime, cleaner streets, increased educational attainment and makes the most of local facilities, contributing to their economic viability. ¹

A framework based on consensus

'This framework was co-produced with people with experience of using services, drawn from the National Co-production Advisory Group, part of Think Local Act Personal. It is based on the views of thought leaders and experts from the field of health and social care and beyond, including voluntary and community sector leaders, representatives from User-Led Organisations, social innovators and provider organisations who gave their time generously to share their knowledge and insights around leadership during a series of interviews in late 2011 and early 2012. For useful cross-reference it is mapped against other current leadership frameworks – the NHS Leadership Framework and the 360 degree leadership feedback model for CCGs developed by the Hay Group. We intend to map against the Social Care Leadership Qualities Framework when it is published.

The next generation of public service leadership

The ability to lead this change will become increasingly more important to senior leaders and clinicians in the coming years. It is hoped that health and social care organisations will begin to use this framework when designing or commissioning training but also in recruitment

and performance management of staff. Our highly acclaimed Leadership for Empowered and Healthy Communities Programme, which will begin again in July 2013, is breaking new ground in addressing these areas in one programme. Its first cohort are senior leaders from across the country who have committed to joining this movement for change and contributing to the debate about the next generation of public sector leadership.

Developed by Catherine Wilton on behalf of ADASS, Think Local Act Personal, Skills for Care, National Skills Academy for Social Care, the LGA's Ageing Well Programme, and NHS South of England (Central).

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Strategic intent 'Seeing the whole picture'

This theme is about the ability to see the big picture around communities and health and wellbeing. Other leadership frameworks include this theme but within the context of healthy and empowered communities there is a specific need to understand and promote community connections, social capital and to work with people and communities in developing the vision. It is far more than just consulting with people on a strategy that has been devised by an organisation in isolation – it is about starting from a grassroots level and creating the conditions to allow ideas and mutually agreed priorities to develop.

Important elements and key behaviours

Sees the big picture around communities and can connect things together. Knows the value of community connections and social capital and puts it at the heart of strategy.

Sees role as far wider than health and social care – involves universal services, local people and all other local resources in considering how own service/organisation can meet its outcomes for local people.

Able to convince others of the critical role of social care in tackling the wider determinants of health and wellbeing for all, through building support networks, encouraging membership of groups, co-production and participation.

Engages the whole workforce, people who use services and the wider community in developing a vision for a better future.

Ensures that the vision is linked to corporate aims, service plans, staff development and activity on the ground.

Is adept at future scanning and invests for the long-term.

Takes a whole population approach to prevention and starts from where people and communities are, not from the perspective of services.

Links with leadership feedback model for CCGs

Telling the story

'Actively engages stakeholders across the whole system'

Creating the Story

'Leaders need to be able to grasp and make sense of the context to create a compelling vision'

Links with NHS Leadership Framework

Creating the vision

'Actively engages a diverse range of key stakeholders in creating a bold, innovative, shared vision which reflects the future needs and aspirations of the population.'

Links with the LQF for social care

Creating the vision

'Creating a bold, innovative, shared vision which reflects the future needs and aspirations of the population.'

Driving transformation 'Changing the system'

The ability to drive change and transformation is a key leadership quality in any context but here it is about recognising the imperative to reform the system in order to achieve the health and wellbeing outcomes that people and organisations want and need.

Important elements and key behaviours

Is changing organisational culture, systems and attitudes to put people who use services at the centre.

Involves people in decisions about care and support at all levels (this means a genuine commitment to co-production).

Is moving away from 'pilots' to changing the way the system works – letting go of process-driven activity. Enables co-ordination at a local level, allocating resources where necessary.

Ensures the organisation is asking the right questions – 'what would make a good life for you?' not 'what do you want me to fix?'

Able to paint a picture of the future and a compelling narrative for change for staff, stakeholders and the wider community.

Able to inspire and energise others, especially when morale is low. Ensures the workforce and the local community feel part of the change.

Links with leadership feedback model for CCGs

Creating the story

'Has a reputation as someone who has the ability to develop and implement radical or new thinking'

Understanding patients

'Continually asks the question 'how will this benefit the patient?'

'Uses patient stories to build joint initiatives.'

Personal qualities

'Challenges powerful people and groups in the interests of patients'

Links with NHS Leadership Framework

Creating the vision

'Clearly communicates the vision in a way that engages and empowers others.' 'Uses enthusiasm and energy to inspire others and encourage joint ownership of the vision.'

Improving services

'Inspires others to take bold action and make important advances in how services are delivered. Removes organisational obstacles to change and creates new structures and processes to facilitate transformation.'

continued...

Allows time for staff to reflect on their own motivations and where they fit in to the vision. Allocates time to support people to change.

In commissioning organisations: actively working to change the commissioning culture – seeing beyond traditional procurement based on needs and performance data solely – and focussing on quality, people's experience and impact on their lives.

In provider organisations: actively transforming the 'offer' to commissioners and personal budget holders, trying out new models of delivery that promote and nurture social capital.

Is radical – willing to challenge others or traditional practice – but also sensitive and politically aware – working with councillors and supporting them to take risks.

Belief in own strengths to change and transform. Has confidence to steer things through in tough times.

Politically astute

'Understands how local and national politics will impact on the current and future work of the CCG'

Managing teams: managing people

Creating the vision

'Is prepared to actively lead the cultural change needed to support co-production with people who use services, carers, families and the wider public.'

Improving services: critically evaluating

Creating the vision

'Putting people's lives at the centre of strategic planning and development.'

Facilitative and collaborative style 'Working with others and co-producing'

Collaborative leadership is emerging as a key theme for health and social care leaders. The ability to work in partnership with others will be vital in ensuring coherent and joined-up local health and wellbeing strategies and in driving efficiencies through the system. However, in this context collaboration is more than just about working with other organisations – it is about embedding the principles of co-production throughout the system – so that services truly reflect what people want, need and can contribute, and so that staff and local people feel valued partners in the process of improving health and wellbeing for all.

Important elements and key behaviours

Builds networks and personal links across a multitude of settings and engages genuinely with a wide range of people. Maintains a link to the front line – staff, people who use services and local communities.

Knows the community and places value on staff knowing it too.

Reconnects/connects mainstream services and organisations with community development – making it central not peripheral to core business.

Involves the community and local politicians, is prepared to listen and act on what people say. Enables people to speak out and participate.

Has a truly collaborative leadership style – the opposite of 'command and control'. This includes the ability to accept that senior leaders are not the only experts, an understanding of power relationships and a willingness to let boundaries blur. Supports people to find solutions themselves. Is not afraid to say 'I don't know the answer.'

Links with leadership feedback model for CCGs

Politically astute

'Builds alliances with influential people or groups'

Influencing for results

'Creates engagement by spending time meeting, getting to know and involving stakeholders'

'Builds and establishes a wide range of partnership relationships'

Links with NHS Leadership Framework

Working with others

'Works across boundaries creating networks which facilitate high levels of collaboration within and across organisations and sectors'

'Integrates the contributions of a diverse range of stakeholders.'

Improving services

'Uses feedback from patients, carers and service users to contribute to healthcare improvements.'

continued...

Sees people as assets and equals not just people with needs. Values 'connectors' in the workforce and models 'asset-based' working.

Is comfortable dealing with large groups and is willing to facilitate rather than control a debate. Values differences of opinion and diversity and encourages inclusion.

Is comfortable with and encourages use of Appreciative Inquiry as a method of building a vision with others rather than 'consulting' on problems or solutions.

Comfortable using a 'hosting' approach to leadership – inviting people in, welcoming them, responding to their needs whilst taking overall responsibility.

Is genuinely committed to working in partnership with others and ensures that partnerships are people-centred not service-driven.

Ability to deal with conflict and navigate different points of view – more than just influencing/negotiation. Willing to spend time in understanding others' agendas and language.

Accepts that solutions might be different in different places or for different people – does not seek to control everything.

Understanding patients

'CCG leaders need to listen to patients, carers and their families...this means that CCGs will have the needs of patients, carers and their families at the centre of their decision-making processes.'

Personal qualities

'Is prepared to give up power and/or resources for the benefit of the wider healthcare system'

Leading individuals and teams

Coaches and develops individuals.

Setting direction

'Involves key people and groups in making decisions.'

Managing services

'Promotes an inclusive culture.'

Working with others: encouraging contribution

Creating the vision

'Actively creates a culture of coproduction, joint responsibility, joint decision-making, support and community participation.'

Flexibility and openness 'Open to new ideas'

A key attribute that emerged during the research was the importance of being flexible and willing to change and take on new ideas. Dealing with communities and people means you sometimes have to change course and need to be humble enough to say, 'I was wrong!' It also involves creating the conditions within an organisation and local communities for new ideas and entrepreneurialism to flourish.

Important elements and key behaviours

Is flexible – willing to challenge oneself, actively seeks feedback on own performance and acts on that feedback.

Is transparent about decision-making and willing to provide information openly. Removes organisational barriers to change.

Looks for opportunities everywhere to build better outcomes using resources across a locality – understands and demonstrates that small amounts of money, small changes or different ways of working can have a huge impact.

Creates fertile ground for people to innovate – gives permission, support and allows enough time. Promotes innovation and a learning culture among staff.

Prepared to take calculated risks.

Ensures that the organisation nurtures local entrepreneurialism, lean thinking and innovation – within workforce and communities.

Where possible, moves away from always using traditional procurement practice that favours large organisations – enables market shaping and ensures that small, community-based organisations can enter the market.

Links with leadership feedback model for CCGs

Leading individuals and teams

'Creates an environment where people remain focussed on delivering outcomes'

'Creates the conditions to support innovation.'

Leading a commissioning organisation

'Is aware of market trends and gaps in provision'

'Is entrepreneurial and opportunistic'

Links with NHS Leadership Framework

Improving Services

'Drives a culture of innovation and improvement. Integrates radical and innovative approaches into strategic plans'

Personal qualities: managing yourself

Creating the vision

'Prepared to challenge themselves to try new things... Creates a supportive culture which enables others to innovate.'



Further Information

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