

Welcome to Big Splash, the NHS IMAS newsletter for pool members, Partners and stakeholders. We hope you enjoy reading our latest edition.

Intensive Support Teams moving to NHS Improvement

Since the last edition of Big Splash there have been a number of changes announced for NHS IMAS Intensive Support Teams (ISTs).

Secretary of State Jeremy Hunt announced, in July 2015, that the Intensive Support Teams would become part of the new NHS body, NHS Improvement, which will also bring together Monitor, the NHS Trust Development Authority (NHS TDA), the Patient Safety function from NHS England and the Advancing Change Team from NHS Improving Quality.

The IST work fits well with the principal focus for NHS Improvement, which will be to drive and support both urgent and operational improvement at the frontline and the long term sustainability of the healthcare system, working collaboratively with partners to achieve this.

Alongside that, NHS Improvement will be the health sector regulator.

The ISTs (Elective and Emergency Care) will move over to NHS Improvement officially from 1 April 2016 and may start to operate in shadow form earlier.

The Emergency Care Intensive Support Team (ECIST) has also received additional funding this year to increase capacity within the team to meet demand for intensive support within the service.

A national programme has been designed that will offer targeted improvement support to the 28 most challenged urgent and emergency care systems across England to help drive improvement in the poorest performing systems. This Urgent and Emergency Care Improvement Programme will expand and enhance the existing work done by ECIST and will use

The Keogh Review good practice guide for urgent and emergency care ('Safer, Faster, Better') design principles to construct the programme. The Programme will work with all organisations involved in delivering urgent care, including commissioners, acute, social, community, mental health and primary care.

Russell Emery, Director – Emergency Care Intensive Support Team, is currently undertaking a NHS IMAS assignment as Programme Director of the Urgent and Emergency Care Vanguard Programme at NHS England. NHS England's review of urgent and emergency care proposes a fundamental shift in the way urgent and emergency care services are provided, delivering more care closer to home where clinically appropriate. Part of Russell's role is to direct the process of the co-production, with the selected vanguards, of a support package to deliver the objectives of the Programme.



IN THIS EDITION:

Intensive Support Teams moving to NHS Improvement

Richard Jeavons' thoughts

Life on assignment - Alison Fowler

Team changes

NHS IMAS assignment supports national resilience

Spread the NHS IMAS word!

Join the Pool!

Supporting Pool Members' development

Quick Splash - Chris Reynolds

Life on assignment – Judith Bates

BIG Splash

Richard Jeavons' thoughts

The additional funding and expansion of the Emergency Care Team demonstrates the importance and extent of the need for the work that the Intensive Support Teams do.

Since April 2015 they have supported 115 organisations and the feedback is always overwhelmingly positive.



Emergency care continues to be an area of huge challenge for NHS organisations and the challenge increases year on year. I agree with the Urgent and Emergency Care Improvement Programme that focusing on improving patient flow along urgent care pathways is most likely to help improve performance against the A&E four hour standard this winter and to help ensure it is sustainable in the future.

The announcement that the ISTs will move to the new NHS Improvement body is welcomed as it will ensure that the ISTs continue to work closely with other improvement functions and that there is alignment in that work. We will, of course, miss the teams when they move but we will continue to work closely with Nigel Coomber and Russell Emeny, National Directors of Elective and Emergency Care respectively, to ensure that we continue to benefit from the teams' expertise and fulfil the needs of all our client organisations.

Life on assignment - Alison Fowler

NHS IMAS pool member Alison Fowler talks about her NHS IMAS assignment to undertake a strategic review



I am currently in the middle of a nine month NHS IMAS assignment as Associate Director of a health and social care strategic review. The review spans a population of approximately 650,000 and is jointly commissioned by the CCG, county council plus five large NHS trusts.

I have been in the NHS IMAS pool since 2011 and their credibility with NHS organisations has been enormously helpful to gaining assignments.

Prior to joining NHS IMAS, I worked in the NHS for 12 years in a variety of improvement roles and senior management roles across primary and secondary care, ambulance services and at national level. I have been privileged to work from executive level through all levels to frontline staff. This breadth of experience providing insight into organisational cultures is proving valuable to organisations seeking to deliver rapid cross-organisational improvement programmes.

My current role requires excellent inter-relationship skills with a responsibility to

deliver to a high standard. I am part of a small team reporting to the strategic review's Director, and together we are required to deliver the answers to the following four questions:

1. How well (how effectively and efficiently) are patients' needs met by the current health and social care system across the health economy?
2. What are the opportunities to meet future health and social care needs of the local population more effectively and efficiently?
3. How should health and social care services across the health economy be configured to realise these opportunities?
4. What organisational form(s) and commissioning/contracting model(s) best support the delivery of the preferred future configuration of services?

Continued on page 3»»

...continued from page 2

My particular responsibility is engaging with the clinicians, public health, voluntary sector and senior locality and organisational leads to facilitate the development and ownership of the future models of care through working groups. I am doing this by:

- Sharing national and international evidence and good practice with each working group;
- Aligning closely with organisations' strategic plans and national policy, in particular the Five Year Forward View, new guidance on urgent care, maternity and paediatrics;
- Engaging with the public, voluntary sector and professionals in the four locality regions with the developing future models of care so they can be co-designed appropriately for each locality;
- Working with experts in workforce, estates and IT to incorporate joined up 'enablers' for delivering the models;
- Working towards a list of options for the future configuration of health and social care services, underpinned by financial analysis

I am very proud to be part of this review. I am working with a great team; organisational staff are overwhelmingly enthusiastic to co-design future ways of working knowing that the current operational pressures cannot continue; the voluntary sector is seizing its hugely important community role to prevent people from entering crisis, and GPs are welcoming the opportunity to lead the orchestration of the new ways of working.

One challenge of this role is the long commute but NHS IMAS helped secure a contract that builds in flexible working and this enables me to manage my time as effectively as possible.

I am very much looking forward to using my experience from this strategic review with another health and social care economy undertaking a similar strategic improvement programme.

Team changes

We have a number of changes to the team this month. We are pleased to welcome Diane Kerry and Shamaila Anjum and we say goodbye to Matthew Friend, Nicola Walker and Jordan Scott.

Diane joins us as a temporary PA to the NHS IMAS Managing Partner and Programme Director and previously worked as a PA at NHS Improving Quality.

Shamaila joins us as PA for the Intensive Support Teams (ISTs) and is on her one year work experience from the University of Huddersfield where she is studying Business Management.

Matthew has joined Health Education England (South West) as Stakeholder Engagement and Partnerships Lead. Nicola, PA to the NHS IMAS Managing Partner and Programme Director has taken a new role at the Health and Social Care Information Centre and Jordan, PA to the ISTs, has returned to the University of Huddersfield to complete his degree.



NHS IMAS assignment supports national resilience

Phil Storr, Regional Head of Resilience at NHS England North talks about how NHS IMAS supported the NHS in facing a number of resilience challenges.

During 2014/15 the NHS faced a number of unexpected challenges, Ebola, NHS wide industrial action and emerging Middle Eastern Respiratory Syndrome – Corono virus (MERS CoV) in South East Asia, requiring NHS England to lead and coordinate the NHS response. When additional capacity was urgently needed to support this work, the decision was made to call on NHS IMAS for Pool Members with specialist skills in Emergency Preparedness, Resilience and Response (EPRR). This came in the shape of Phil Bain from the North East Ambulance Service NHS Foundation Trust.

Whilst the NHS has a track record of dealing with incidents, these high profile, long duration incidents required both subject matter knowledge of EPRR and experience of working strategically across different organisations. This was especially the case dealing with Ebola due to the World Health Organisation declaring a global health emergency in

August 2014 - describing the outbreak in West Africa as an 'extraordinary event' and a 'public health risk to other States'. An international response was now essential to stop, and reverse, the global spread of the disease.

In the UK, NHS England has the responsibility under the Health and Social Care Act 2012 to coordinate the NHS response in England to 'relevant emergencies' – and Ebola was one of these emergencies. The assignment was developed to support both NHS England North but also the National EPRR Lead, Stephen Groves, with strategic advice, tactical management and operational support, not just to Ebola but, as it turned out, an unprecedented number of other complex incidents.

Working closely with the Department of Health and the Cabinet Office, Phil supported the development of a national plan to increase specialist highly infectious disease bed capacity.

Based on a range of factors, this additional capacity would be established at three different sites across the North of England supporting the existing capacity at the Royal Free Hospital in London. Working with the national team, Phil engaged various organisations including the Ministry of Defence, local police forces, hospital trusts, senior infectious disease clinicians and equipment manufacturers to ensure the north region, and ultimately the UK, played its part in managing this international public health emergency.

As the old adage goes, 'there are no buses, then two arrive at once'. This is exactly what happened in the NHS resilience world when at the same time the Ebola crisis started to intensify, the NHS faced its first national strike in 30 years. Again, national coordination was needed as Cabinet Office and the Department of Health looked again to NHS England to lead the response. NHS IMAS assisted in redefining the scope of the original assignment to ensure Phil

Bain's resources could be used effectively across both incidents. This realignment of objectives was again revisited when the potential for MERS CoV to be an issue emerged due to a sudden unexpected increase in cases in South East Asia. Thankfully, this emergency was quickly contained by the relevant health departments so action back in the UK was minimal.

Reflecting as client on the end of the assignment it is clear the team at NHS IMAS worked as a key partner to enable NHS England to understand our needs during what was a very challenging and dynamic period. At every stage NHS IMAS Managing Partner, Janet Walter, and her team supported us to ensure we continued to deliver the appropriate response. When circumstances changed, NHS IMAS was there, ready and willing to help navigate and support our requirements. In summary, every incident plan should always include NHS IMAS' number – as you never know when you might need them.

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Spread the NHS IMAS word!

In order to meet demand and to continue to provide an excellent service to the NHS, NHS IMAS must continually grow its resource pool of senior NHS managers. If you are an NHS manager at Agenda for Change band 8d or above (or ready for an 8d role), NHS IMAS could help you to:

- find your next challenge
- progress your career
- gain experience in other areas of the NHS
- share good practice and bring learning back to your organisation

NHS IMAS provides a no-fee service to NHS organisations and can provide a coaching and mentoring service to support pool members undertaking assignments.

Examples of current assignments include:

- An interim Director of Finance for an acute trust
- An interim Accountable Officer for a CCG
- An individual to undertake a capacity and demand review within an acute trust
- An interim Programme Director for a national programme
- Strategic Account Manager and Account Managers for New Care Models.

If you are interested in becoming a Pool Member or would like to recommend a colleague, please visit the NHS IMAS website at: www.nhsimas.nhs.uk/contact-us/to-apply or contact nhs.imas@nhs.uk

Join the Pool!

If you or a colleague are interested in becoming an NHS IMAS Pool Member please contact the team. Alternatively, complete the short online application on the NHS IMAS website at: www.nhsimas.nhs.uk/contact-us/to-apply

Supporting Pool Members' development

NHS IMAS is continuing its commitment to provide development opportunities for our Pool Members. Members of the Intensive Support Teams (ISTs) and other NHS IMAS Pool Members are leading a number of WebEx events focusing on key areas such as capacity and demand and financial recovery. These sessions are an excellent opportunity to discuss good practice, share experiences and network with colleagues across the country. Each session will consist of a short presentation followed by questions and discussion.

Next events are:

- **16 October 2015 – Cost Improvement:** a former Foundation Trust Finance Director will be sharing his experience on the delivery of cost improvement programmes. This will be a personal reflection on what has worked well and what issues and challenges were faced and how these challenges were approached to ensure as successful a client outcome as possible.
- **11 December 2015 – Perfect Week:** The Perfect Week is about ensuring that all the processes required to support flow through the hospital run 'perfectly' so that there are no unnecessary delays that slow down transfers of care. A member of the Emergency Care Intensive Support Team will discuss the following questions: Why would you consider running a perfect week? What does good look like? What do you do after a perfect week?

Continued on page 6»»

...continued from page 5

Consultancy and facilitation skills

NHS IMAS has also developed a blended learning package to introduce consultancy and facilitation skills for our NHS Pool Members. This is a flexible and robust package for NHS Pool Members who are either new to working in a consultancy style or would like to improve their understanding. This blended learning package has been accredited by the Royal College of Physicians and the Royal College of Anaesthetists and, on successful completion, will award you with 12 credits towards your Continued Professional Development (CPD).

The first cohort of delegates have started the course and are well on their way to completing the first module. Any feedback received from the delegates will be used to improve the course for future cohorts. To apply to be on the next cohort please contact the NHS IMAS team.

NHS Pool Members can also access NHS Elect courses. We will email all NHS Pool Members with the details of the course but due to popular demand we only have two spaces available – so you will need to be quick to respond! Priority will be given to those Pool Members who are currently on an NHS IMAS assignment or have completed one.

For information on any development opportunities, please contact NHS IMAS at: nhs.imas@nhs.net

Quick Splash - Chris Reynolds



I work as Associate Director of Business Intelligence at Lancashire Teaching Hospitals NHS Trust. We provide acute and tertiary services with a strong emphasis on education and research.

My typical day involves ...

I have only just started at Lancs Trust and the post is new so nothing's typical and I am spending lots of time getting to know individuals around the organisation. It's very much a process of listening and learning with all staff. I'm reading a lot about different strategies for information and building a long term view of an information strategy that supports our values and master plan and can be delivered within the current financial constraints.

The best thing about my job is... working in a large acute Trust that has a clear vision of what it wants to achieve. There are a lot of opportunities and there are plenty of partnerships to be made within and outside the organisation.

Have you been on an NHS IMAS assignment? Yes, my previous role was as Interim Head of Information Technology and Business Intelligence at Dudley and Walsall Mental Health Partnership. It was an excellent assignment and a really good organisation.

Word of advice for other pool members? Assignments are always about the relationships you have with individuals. Make sure you have a close relationship with the individual who is in charge of the assignment but don't forget about the other stakeholders in the organisation. Always make time to listen to them and try to deliver something early to show credibility.

What do you want to do next? Someday it'll be Chief Information/Technology Officer or Director of Informatics /IT.

If I didn't work in the NHS... I always thought that it'd be interesting to be a water engineer.

In my spare time... it's family first and then swimming to keep me healthy and cricket to relax. I read a lot and recently finished *The Utopia of Rules* by David Graeber. I didn't agree with a lot of it, but it's useful to see what thought leaders are writing about.

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Life on assignment - Judith Bates

NHS IMAS pool member Judith Bates talks about her current NHS IMAS assignment for The Pathology Partnership.

The Pathology Partnership was created in May 2014 as a contractual joint venture between six NHS Trusts in the East of England to modernise delivery of pathology services. It is the largest initiative of its kind seeking to implement the findings of the Carter Report, published in 2008, to create a hub and satellite model for pathology services.

My background is primarily health informatics, having been the Director of Health informatics for countywide NHS services; Programme Director for a multi-million pound e-government and strategic partnership ICT programme; and UK General Manager for a US IT healthcare company delivering services to the National Programme for IT.

I was delighted when approached by NHS IMAS in July 2014 about an opportunity to programme manage the transformation of pathology services to create a satellite service for an NHS Trust involving the transfer of 1.5 million

pathology tests per annum to one of the two Partnership hubs. The programme had to deliver within Trust timeframes the closure of the larger pathology service at one hospital. The remaining pathology service had to undergo major building works whilst maintaining 24/7 services and transform into a satellite service.

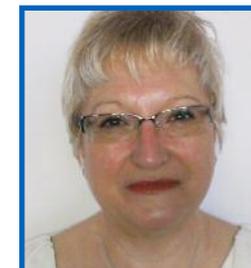
At the same time, the Trust hosting the hub was implementing a new electronic patient record and laboratory information management system (LIMS). This required a complex ICT solution integrating hospital, laboratory and GP systems. The programme also required the delivery of a revised logistics and supplies solution to collect samples and deliver consumables to around 100 locations within required turnaround times.

In the first instance, I built effective working relationships across the different stakeholders and twice recommended the delay of the transfer

of work until the IT solution was working sufficiently to ensure clinical safety without impacting Trust deadlines. I supported the newly appointed Transformation Director for The Partnership in developing the plans and governance arrangements and project managed the IT, logistics and building works projects.

The work migrated to the hub in February 2015 and I was asked by The Partnership to programme manage the transformation of services to the second hub and transferred to this role in March 2015. I designed the programme, comprising six work streams and 42 projects, and support the Transformation Director in the management of the programme that includes the hub development (building works, new equipment, lean processing) and creation of satellite services at three locations plus the development of The Partnership's IT infrastructure and roll out of a new Enterprise LIMS across the whole Partnership.

At the same time as working with stakeholders to define the programme,



Judith Bates,
NHS IMAS
pool
member

such as the service blueprint, I chair the programme's Implementation Group and trouble shoot critical issues to seek resolution and minimise delay to the Programme.

NHS IMAS is invaluable in matching skills and experience to the roles available and offering value for money to the NHS. Although my health informatics skills have been beneficial, I have welcomed the opportunity NHS IMAS provided to take part in a wider transformation programme. I have learned a great deal as well as hopefully making a useful contribution.