

Big Splash

Information for NHS IMAS pool members



Merry Christmas and a happy New Year!



Welcome to the latest edition of **Big Splash**, the newsletter for NHS IMAS members.

Big Splash has the latest news about the NHS IMAS programme and assignments.

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NHS IMAS supports the NHS Commissioning Board Authority

NHS IMAS has been asked to support the interim staffing of the NHS Commissioning Board Authority (NHS CBA) by providing a PMO (Programme Management Office) service for resource management.

The scope for this assignment is that NHS IMAS will be the vehicle for coordinating and tracking the deployment of resource and ensuring the scope of each individual assignment is achieved, until Autumn 2012.

NHS IMAS will establish a discreet pool for the NHS CBA assignments. NHS IMAS usually only register staff on NHS Agenda

for Change (AfC) Band 8d and above, however we are dealing with all NHS CBA transitional posts. Those below AfC grade 8d will be NHS IMAS pool members for the duration of their NHS CBA assignment.

By supporting the interim staffing of the NHS CBA, NHS IMAS can continue to apply the expertise and processes which have successfully managed the NHS Transition Programme assignments. To date, NHS IMAS have managed and co-ordinated 45 assignments for the NHS Transition Programme in DH.

NHS IMAS Partner Day

At the recent NHS IMAS Partner Day delegates were provided with an update on NHS IMAS business planning activities for 2012/13 and presentations from Anthony Sumara and Bill McCarthy.

Anthony Sumara, former CEO of Mid Staffordshire NHS Foundation Trust, presented "A process for clinical due diligence" and used this diagnostic to demonstrate the "Mid Staffs Story".

Bill McCarthy, Managing Director responsible for establishing the NHS Commissioning Board, talked through the four themes that the NHS CBA are focusing on and shared his views on the challenges they face over the next 15 months.

Thank you to Partners who were able to attend and thanks to Anthony and Bill for their presentations which initiated some engaging and interesting discussions.

Life on a NHS IMAS Assignment

This month we hear from NHS IMAS pool member, Michael Watson, about his NHS IMAS assignment as Head of Information at an Acute Trust.

I work for the Intensive Support Team (IST) and I had not-long started work supporting a Trust which was experiencing difficulties around Referral To Treatment (RTT) performance and reporting. The recent departure of the Director of Planning and Information had left a vacuum at the heart of the department at an already-difficult time and I was approached through NHS IMAS to fulfil the interim role.

The broad scope of the assignment was agreed as three days per week for three months in order to:

- Review and revise RTT business rules
- Lead the Planning and Information department through a difficult period of transition and restructure.

After a further, more-detailed, scoping meeting with the Chief Operating Officer – also new in post – I set to work holding 1:1 meetings with senior staff to better understand the dynamics of the department and current priorities; this also formed the basis of the departmental work-plan for the coming months. As the scale of the challenges ahead became apparent over the first week or two I soon learned that the anticipation that the assignment would be limited to the relatively-narrow areas of RTT and cancer was not realistic and three days per week is not as long as it sounds!

My over-arching goal throughout the assignment, beyond the specific, discreet areas covered by the original scope, was to bridge the gap between Information and Operations: to build trust and understanding between the two groups and move the conversation on from 'is this information real?' to 'what are we going to do about it?'

In terms of elective care the clear organisational priority lay in the identification and management of long-waiting patients awaiting both admitted care and other treatments so within our team the focus was on producing robust, timely information to support this aim and the recently re-launched elective Patient Tracking List (PTL) meeting. Improvements in the accuracy and presentation of these reports, coupled

with the attendance of a dedicated Senior Analyst at the weekly meetings, really reaped rewards.

Much of the other work started during my assignment was more behind the scenes 'techie' stuff. In terms of the identification and understanding of patient pathways there has been a total refresh and change of approach in terms of information processing; this is starting to shift the emphasis away from expecting users to understand the world of NHS information standards and towards asking questions and providing answers in language which can be related to core Trust business.

For the first time a reporting model for elective care was developed to form the basis for all new reports in a self-service format for operational staff and managers and the process of migration of existing reports and information has begun. This has set the Trust on the path to having one view of elective care and should give staff and managers the tools they need to deliver real improvements in patient care.

The initial aims of the assignment were met, including a more responsive department aligned to the new Trust structure, trusted PTL reports helping the delivery of shorter waits to patients and much-improved relationships and working between Information and Operational staff. It was a little disappointing, though, not to be able to see the turn-around of the information and reporting service to the end, but I am well aware that this will take far more time than the three months of my assignment and I like to feel that I have left the foundations for a stronger, more dynamic and valued service.

It was interesting in the context of my work for the IST to suddenly find myself 'on the other side of the desk' and this assignment proved a welcome reminder of the daily, often-conflicting pressures faced by staff working within modern NHS provider organisations.



Michael Watson

“ It was interesting in the context of my work for the Intensive Support Team to suddenly find myself ‘on the other side of the desk’ ”

Share, Learn, Network!

NHS IMAS is establishing a network for pool members to share experiences and learning to facilitate personal development.

Building on our commitment to pool member development, these meetings are being created to provide a network to develop skills in common areas of interest. They will also provide pool members with an opportunity discuss work-related issues and learn new ways of working.

The first session will be held for those pool members currently on an NHS IMAS assignment within the Department of Health, this will be held on 25 January 2012 in London.

These sessions are free of charge to attend and places will be allocated on a first come first served basis.

If you would like to attend this session, please contact Sarah Peters on sarah.peters3@nhs.net by close of play Friday 6 January 2012.

“Introduction to Consultancy”

We are also developing a distance learning package called an “Introduction to Consultancy”.

This will be aimed at both clinicians and non-clinicians in the NHS IMAS pool and will provide training in consultancy skills using a tried and tested format of mixing theoretical learning with case studies and facilitated workshops.

The package will include self study modules developed by an expert NHS pool member who will write

the materials and facilitate the workshops. A small group of specialists will be commissioned to act as ‘critical readers’ to review the materials and offer advice and constructive amends.

The first version will be piloted with selected pool members in early 2012. Once piloted, the package will be available to all fully registered NHS IMAS Partners and NHS pool members to access and download via the NHS IMAS members area of the website.

NHS IMAS products *in the spotlight:*

Benefits Management Strategy

A different product from the NHS IMAS toolkit is showcased in each issue of Big Splash to demonstrate the broad range of tools available to you.

We do not claim that these tools are ‘best practice’, but they are good practice, and we know they work as they have been tried and tested elsewhere.

This month, we would like to share the benefits management strategy.

The purpose of this strategy is to provide a framework for realising benefits. It sets out the rules of engagement on how to identify,

map, monitor and review the benefits realisation process. A realistic benefits management strategy is needed to periodically review the target benefits and performance measures and to identify actions to improve delivery of benefits.

The success of a project or programme can be measured against the scale of benefits achieved in comparison with the business case.

If you would like a copy of this template or further details on how to use this tool, please contact Karen Davison at k.davison@nhs.net

Contact us

Please direct any questions regarding the NHS IMAS programme to nhs.imas@nhs.net or call the core team on 0113 254 6424

If you would like to be included on the Big Splash distribution list or have any ideas for future articles, please contact Karen on k.davison@nhs.net or 0113 254 6424

Quick splash...

I work as... part of the small team considering how the Primary Care services will operate under the single NHS Commissioning Board (NHSCB) once they are transferred from the 152 PCTs. I am undertaking this as an NHS IMAS assignment until the end of December 2011.

My typical day involves... I soon learnt that the word 'typical' doesn't apply any more. Working as a General Manager running a large Shared Service gave me key points to work to whereas working on an NHS IMAS assignment to the DH means that the only commonality in each day is that one tries to progress work which takes one closer towards delivering one of the objectives. This is done in a host of ways and don't ever underestimate the usefulness of those corridor conversations and the DH has many corridors!

The best thing about my job is... at the beginning I was overwhelmed by the structure and size of the DH and how I would ever find my way around to try to coordinate this and bring my work into some kind of order. But after a while, this actually becomes a great challenge in the role and it is so interesting seeing the bigger picture and how the DH works. I take back many of my previous criticisms of the DH as I now have a much better understanding of the machinery that drives the process. And never underestimate people's views! It's so great being pulled in so many different directions even though it can be rather frustrating at the time.

What would be your perfect assignment? That is difficult and for me it's not the assignment but the ability to produce a good output which is meaningful and valuable to the service and always in the best interest of the taxpayer. An assignment without a clearly endorsed mandate to deliver would be an imperfect assignment so work it out from that!

Word of advice for other pool members... make the most of it and take every opportunity to learn. Be open to realise that even though you have a level of expertise, that doesn't mean to say you are right.

What do you want to do next? The project I am on is part way through and there is a further 15 months before the NHSCB take over these services so I would love to be able to stick in on this work to see it to the end. Unfortunately my NHS IMAS assignment finishes soon so I really don't know what the future holds.

If I didn't work for the NHS... irrespective of where I work (and there have been many places and sectors in the past!) I just want to deliver to the people who fund me, be they shareholders, banks or the taxpayer!

In my spare time... I turn my brain off and run. Fortunately, I never win a race so don't have to worry about going on the wrong route as there are always loads of people in front of me so I just follow!



Daryl Peter

“ Be open to realise that even though you have a level of expertise, that doesn't mean to say you are right.”

NHS IMAS Programme Board

The first meeting of the new NHS IMAS Programme Board takes place on Friday 6 January 2012. This follows the success of NHS IMAS Change Board during 2011.

Programme Board members are:

Sir Ian Carruthers (Chair)
Chief Executive, South West SHA

Richard Jeavons
NHS IMAS Senior Partner

Janet Walter
NHS IMAS Managing Partner

Jan Filochowski
Chief Executive, West Hertfordshire Hospitals NHS Trust

Angela Pedder
Chief Executive, Royal Devon and Exeter NHS FT

Anthony Marsh
Chief Executive, West Midlands Ambulance Service

Jackie Daniel
Chief Executive, Manchester Mental Health and Social Care Trust

Denise McLellan
Chief Executive, Birmingham and Solihull NHS Cluster

Jo Farrar
Director of Finance, Homerton University Hospital NHS FT

Matthew Kershaw
Director of Provider Development, Provider Development Authority

Lyn Simpson
Director of NHS Operations, Finance, Performance and Operations Directorate - DH NHS Commissioning Board Authority Representative

Everyone in the NHS IMAS team wishes you a very Merry Christmas and a Happy New Year!

This Christmas the NHS IMAS core team will make a donation to charity in lieu of sending cards.

Our chosen charity is Candlelighters, a childhood cancer charity in Yorkshire. For more information on the fantastic work they do in the region, please visit

www.candlelighters.org.uk



The NHS IMAS core team based in Leeds continue to take part in a campaign which aims to help all NHS staff in Leeds to have fun, get active and feel good!

NHS IMAS have received the Gold award three months running in September, October and November for the highest average number of exercise activity minutes logged. Well done team!

To find out more please visit:
www.havefunfeelgoodleeds.co.uk