NHS National Graduate Management Training Scheme

Policy and Strategy Competency Framework v2.1

Last Update: November 2017

<u>Table of Amendments – Policy and Strategy Management Competency Framework</u>						
Date of Change	Detail	Version No				
15.10.12	Core Competencies Section 4.1. Ensuring Patient Safety reordered to show competencies in correct order	1.1				
15.10.12	Specialist Competencies Section 4.1: 4.1.4 renumbered to 4.1.8 to maintain unique numbering system, and reordered within section.	1.1				
27.09.17	Competencies updated by IBM	2				
November 2017	Formatting changed	2.1				

Introduction

The Graduate Management Training Scheme (referred to from this point forward as the Scheme) aims to develop talent into emerging leaders in the NHS. It provides the opportunities for trainees to develop and practise their leadership skills and behaviour. This framework has been developed to ensure that trainees develop the leadership competencies, behaviours and technical skills to both attain roles in the NHS at the end of the Scheme and begin their leadership journey in the NHS.

Purpose

A competency can be defined as a behaviour or technical attribute that an individual should have in order to perform effectively at work. It is widely acknowledged that job performance is based on a number of factors including technical competences, behaviours, attitude, skills and experience. A competency framework is a tool that sets out a number of competencies required by an individual to work in a certain position or within a certain organisation. The Scheme competency frameworks have been developed to ensure that:

- Trainees have a structured approach to their placements throughout their time on the Scheme;
- Trainee performance and achievement can be assessed, evidenced and recorded;
- Trainees are equipped with the skills and experience to start their leadership journey in the NHS and obtain a job at the appropriate level once they complete the Scheme;
- Trainees have clarity around what is expected of them with regards to skills, behaviours and competency they are anticipated to develop and demonstrate.

Approach and Ethos

Each of the five Scheme competency frameworks were created based on the MHS Leadership Framework, updated to link to the Healthcare Leadership Model and are structured around the seven domains below:

- **Demonstrating Personal Qualities** trainees should draw upon their values, strengths and abilities to deliver high standards of service. This requires them to demonstrate effectiveness in developing self-awareness, managing themselves, continuing personal development and acting with integrity;
- Working with Others— trainees should work with others in teams and networks to deliver and improve services. This requires them to demonstrate effectiveness in developing networks, building and maintaining relationships, encouraging contribution, and working within teams to have a positive impact on others and creating a culture of collaboration across teams;
- Managing Services trainees should focus on the success of the organisation(s) in which they work. Trainees should develop competence in planning, managing resources, managing people and managing performance;
- Improving Services trainees should strive to make a real difference to people's health by delivering high quality services as well as display curiosity and other behaviours that encourage continuous service improvement across the organisation. This requires them to demonstrate effectiveness in ensuring patient safety, critically evaluating, encouraging improvement and innovation and facilitating transformation;
- **Setting Direction** trainees should support the aspirations of the organisation and act in a manner consistent with its values. This requires them to demonstrate effectiveness in identifying the contexts for change, applying knowledge and evidence, making decisions, and evaluating impacts;
- **Creating the Vision** trainees should begin to develop a leadership style and be able to support a compelling vision for the future, and communicate this within and across organisations; and
- **Delivering the Strategy** trainees should begin to demonstrate leadership qualities to support the delivery of the strategic vision through agreeing strategic plans and translating these into achievable operational action plans.

For each domain, the competencies have been split between those which are core (shown in green) and those which are specific to the specialism (shown in blue).

<u>Core competencies</u> are shared by each of the five Scheme specialisms (Policy and Strategy Management, Finance Management, General Management, Human Resources Management and Informatics Management). Although trainees are divided up to work in specialised areas the Scheme is a leadership programme first and foremost. For example, competency 4.1.3:

"Demonstrates involvement in developing risk mitigation strategies and measures to improve and/or maintain patient safety", is a core competency that all trainees are expected to achieve and highlights the expected leadership behaviours associated with the specific core competency.

<u>Specialism competencies</u> are competencies specifically related to the trainee's specialism. For example, a Finance trainee would need to achieve competency 3.4.10:

"Understands the role of the external auditor and the relationship between the internal audit function and the external auditors". This competency is unique to finance trainees and is not present in any of the other frameworks.

The shared approach to core competencies is designed to ensure that all trainees leave the Scheme with a shared technical, behavioural and knowledge base firmly rooted in leadership for service improvement and patient outcomes. At the same time, equipping trainees with the technical elements related to their chosen field of work, measured by the specialism competencies.

Where applicable, **examples of activities, and associated behaviours, to demonstrate experience** have been provided, together with the **required level of assessment** expected to be achieved during participation in the Scheme. The assessment is based on a rating for each competency of 1 to 5:

	Level	Description
1	Awareness/knowledge	Demonstrates insight but has no practical experience
2	Support	Demonstrates competence through assisting others in undertaking a process/task
3	Practical application	Demonstrates competence through having a defined responsibility for undertaking a process/task
4	Experienced practitioner	Demonstrates competence through having a defined responsibility for regularly undertaking a process/task
5	Leadership	Demonstrates competence through leadership of a process/task

This scale of rating will allow trainees and their managers to record the trainees' ongoing progress against the competencies and stay focused on further development required.

For each competency, the required target level of achievement is shown in orange.



Each competency will have the minimum target level set at different level: some will be as low as 1, others will be as high as 5.

There are four possible achievement levels for competencies.

Not Achieved: level 0, meaning no work has been done on this particular competency.

Partially Achieved: competency is being worked towards but not yet at the required minimum level (in the case of the example above, levels 1 and 2)

Achieved: competency has been signed off at the required target level (in the case of the example above, level 3)

Achieved +: competency has been signed off at a level above the minimum target level (in the case of the example above, levels 4 and 5)

Trainees are expected to achieve around 40% of their competencies by the end of placement 1 and 90% of their competencies at the end of their final placement in order to successfully complete the Scheme.

Section 1 – Personal Qualities

There is an exception to the rating scale approach for the competencies required in the 'Developing Personal Qualities' section. These eleven competencies will be signed off after the production of a 2,000 word (+/- 10%) reflective piece of work completed by trainees during their last twelve months on the Scheme. This reflective piece should focus on all eleven competencies and the trainee is expected to provide evidence, either through referencing work they have produced or through reflecting on their qualities and how they have developed during their time on the Scheme. Trainees must reflect on their experiences during their time on the Scheme and provide examples of where they believe they have demonstrated and developed certain behaviours and personal qualities such as these. When providing evidence, trainees are advised to consider the following criteria in addition to any information they wish to provide:

Knowledge and Understanding	Cognitive Skills – Behaviours, Emotional Intelligence and Values	Practical Skills
 Sources of knowledge are identified; Awareness of your approach and what informs said approach; Evidence of awareness of your strengths and weaknesses; Evidence of a constant interest throughout the Scheme of keeping up to date with NHS issues, news and developments. 	 Evidence of planning around personal qualities; Evidence of how self-awareness has been increased; Evidence of reflection on personal beliefs, values and motivation in relation to working in the NHS; Evidence that there is a knowledge of NHS code of ethics and values; Evidence of understanding when mistakes have been made; Awareness of how you are perceived by others. 	 Sources of wider reading evidenced; Evidence of flexibility, curiosity and an adaptive nature; Evidence of effective delegation; Evidence of prioritisation.

Once completed, trainees must upload their personal qualities reflective piece on to the Scheme's talent management system and arrange to review the piece with their Placement Manager, either during an ad hoc meeting or during one of their formal reviews. The Placement Manager (or Programme Manager in their absence) is responsible for signing off the competencies in the Personal Qualities section once both the trainee and Placement Manager have had an opportunity to discuss the reflective piece.

The competencies within the 'Developing Personal Qualities' section are either at a status of achieved or not achieved, there is no rating scale.

Trainee approach to the framework

Trainees should consider the following points when approaching the competency framework:

- The framework must be owned by the trainee and it is their responsibility to ensure that they are achieved the required competencies and have displayed the required behaviours throughout. The trainee is therefore responsible for ensuring that they have a plan as to how these competencies will be achieved during their time on the Scheme.
- It is the trainees' Programme and Placement Manager's responsibility to ensure that all trainees are placed in an environment where opportunities are available for trainees to achieve competencies and to work with trainees to help them identify those opportunities and shape their work plan. It is not the responsibility of Managers to formulate a work plan based around each and every competency or to provide a piece of work for a trainee to complete in order to fulfil a competency requirement. This is an important distinction that all trainees need to understand.
- Trainees should aim to complete 40% of their competencies at the required level by the end of year one and 90% of their competencies by the end of the Scheme. The 90% achievement rate is a key graduation standard and trainees may not be able to graduate if they have not achieved this level.
- Trainees are required to evidence their competencies using the Scheme's talent management system. Evidence will generally be in the form of narrative prose which references what has been achieved to complete the competency. In addition to this trainees are encouraged to upload any documents that may support their narrative assessment and supports how they have gone about displaying the required leadership behaviours across the programme.
- Placement Managers are responsible for signing off competencies after providing a detailed constructive feedback to the trainee. Programme Managers are also
 authorised to sign off competencies, but the Placement Manager will be working more closely with the trainee and will probably have a clearer understanding of
 what has been achieved. It is the responsibility of the trainee to ensure that they are booking regular meetings with their Placement Manager to gather constructive
 feedback discuss competency achievement and ensure they are being signed off. Competency achievement also makes up an important part of the review process.
- Trainees need to gain an understanding of how best to utilise a competency framework. Successful trainees understand that the competency framework is a hugely important part of their placements on the Scheme and is something they always need to have in mind, but at the same time they know that it isn't something that should be used to drive their placements. Trainees are there first and foremost to work in a real job in a NHS organisation, and whilst those roles will allow trainees to complete their competency framework, there will be tasks, projects and pieces of work that sometimes don't necessarily directly relate to a specific competency.
- Trainees need to be realistic when using the framework. For example, 40% is a realistic amount of competencies to have achieved by the end of year one. If your work plan shows that you will only achieve 10% by the end of year one then you need to reassess. If you present 80% of your competencies as achieved at the end of year one your Placement Manager is likely to question whether you have actually achieved that many competencies to the required level.

Placement Manager approach to the framework

- One of the objectives of the Placement Manager is to ensure that trainees are in a placement which provides opportunities for them to achieve their competencies. Placement Managers are therefore encouraged to work with trainees at the beginning of the placement (or ideally before the placement) to identify which competencies are achievable throughout the duration of the placement.
- It is *not* the responsibility of the Placement Manager to provide a step by step plan for the trainee which maps pieces of work to specific competencies. It is the Trainee's responsibility to take the main elements of their placement and produce a plan as to how this translates to their competencies.
- Placement Managers are responsible for signing off competencies. Programme Managers are also authorised to sign off competencies, but the Placement Manager will be working more closely with the trainee and will probably have a clearer understanding of what has been achieved. It is the responsibility of the trainee to ensure that they are booking regular meetings with their Placement Manager to discuss competency achievement and ensure they are being signed off. Competency achievement also makes up an important part of the review process.
- Competencies are held electronically on the Scheme's talent management system. Your trainee will be able to guide you through accessing the system or you can contact your Leadership Development Manager if you are having any problems.
- It is the responsibility of the Trainee to evidence achievement of competencies on the Scheme's talent management system and to work with the Placement Manager during regular meetings to sign these off.
- As a general guide, Trainees are asked to complete 40% of competencies by the end of year one and 90% of competencies by the end of the Scheme.

Methodology and Acknowledgements

The NHS Graduate Scheme competency frameworks were developed following a comprehensive consultation process in 2007. After deciding to shape the competencies around the NHS Leadership Framework the Scheme contacted hundreds of individuals and organisations, both internal and external to the NHS, to seek their views as to how the competency frameworks should be shaped, both in terms of structure and presentation and content. Without their help we would have not been able to produce the frameworks.

In the summer of 2017, IBM consultants worked with NHS graduate alumni to review and update the NHS Graduate Scheme competency frameworks. This process evaluated the five current scheme frameworks and their fit for purpose based on changing demands within the NHS and the larger graduate workforce. In addition, the competencies were refreshed around the current Healthcare Leadership Model so the graduate scheme linked to the wider organisation's Leadership model. The frameworks review included stakeholder interviews and multiple iterations with a NHS project team to amend and confirm the NHS Graduate Scheme competency frameworks for the current market.

The NHS Graduate Scheme would like to thank the following who had an input in to the development of these frameworks: current trainees, recent alumni of the Scheme, Placement Managers, Programme Managers, NHS staff at various NHS Organisations and Emerging Leaders Steering Group members. A number of professional bodies and organisations including ACCA, CIPD, CIPFA, CIMA, Department of Health, IHM, NHS Information Centre and UKCHIP also gave up their time and expertise to assist with the process. Finally, a special thank you goes to Sarah Reeves and Brian Niven at Mott MacDonald for their hard work and continuing support in the creation of these frameworks.

For more detailed information about the development and consultation process for these frameworks please contact the NHS Graduate Scheme.

Section 1. Personal Qualities

Core Leadership Domain	Healthcare Leadership Model		Competency	Examples of activities to demonstrate experience
1.1 Developing Self- awareness	Leading with care	1.1.1	Understands the impact they have on others and the impact other have on them. Can review and reassess own beliefs, values, behaviours, strengths and weaknesses, and leadership style	 Developing a Personal Development Plan, demonstrating personal self-awareness and addressing development areas. Using suitable instruments (e.g. MBTI) and reaching out to others to obtain feedback.
	Leading with care	1.1.2	Caring for others and providing mutual support where needed.	 Creates an open and honest environment where others are comfortable interacting and constantly evaluates one's own emotional well-being and its impact on others.
	Leading with care	1.1.3	Understand the impact of one's own physical and mental wellbeing at work.	 Creates a positive atmosphere for others through self- regulation of their own behaviours and mood while at work.
1.2 Managing Self & Others	Holding to account	1.2.1	Plans and manages own time and that of others effectively and is able to evaluate personal performance	 Managing the diary, prioritising tasks and delegating/supporting others to prioritise tasks.
	Holding to account	1.2.2	Makes decisions without reference to others in line with own authority levels and departmental and corporate objectives. Is prepared to be held to account for own contribution and the quality of own work	 Writing Board papers, or sections of papers or plans, representing the team, department, or organisation at meetings and handling issues and actions arising.
	Connecting our service	1.2.3	Is flexible and adaptable to changing circumstances	 Handling last minute changes to task priorities and dealing with the consequences of those changes.
1.3 Continuing Personal Development	Developing capability	1.3.1	Takes responsibility for own personal development and seeks opportunities for learning	 Utilising primary and secondary sources of information for research purposes and introducing new ways of working, for example business best practice associated with project planning, change management, benefits realisation and using these approaches in their own work. Joining and attending the professional bodies and

					conferences/working sessions, or working with external consultancies and partner organisations to adopt new approaches to work.
	Holding to account	1.3.2	Sets work-based targets and personal targets which exceed the minimum requirements and expectations	•	Coming from the PDR process, developing a series of personal development goals with SMART objectives, which the individual can exceed where possible.
	Connecting to our service	1.3.3	Keeps abreast of developments in healthcare, in own professional field and in own organisation as well as other external bodies and organisations	•	Demonstrating commitment to wider reading, e.g. HSJ, NICE publications, BMJ, Twitter etc. Attending events and conferences, e.g. Kings Fund, NHS Confederation, Royal College events, professional bodies. Reading internal communications, newsletters and intranet.
1.4 Acting with Integrity	Inspiring shared purpose	1.4.1	Understands and acts in accordance with the values for the NHS as set out in the NHS constitution	•	Promoting the NHS values.
	Inspiring shared purpose Leading with care	1.4.2		•	Taking accountability when mistakes have been made or understanding is limited, in order to learn and improve services. Demonstrates the ability to listen and incorporate feedback to enable continuous improvement and learning when things that didn't go to plan.
	Inspiring shared purpose	1.4.3	Demonstrates knowledge of professional code of ethics and the public interest role of NHS staff		
	Evaluating information 1.4.4 Understands and manages conflicts of interest, ensuring that decisions are based on objective data wherever possible	•	Providing advice to business partners regarding potential conflicts. Providing alternative solutions where applicable. Declaring any relevant conflicts.		
	Leading with care	1.4.5	Spreading a caring environment beyond one's own area	•	Taking responsibility for others wellbeing, by continuous evaluation of your emotions and their effect on other people.

Section 2. Working with others

Core Leadership Domain	Healthcare Leadership Model		Competency	Examples of activities to demonstrate experience	Assessment Level
2.1 Developing Networks	Connecting our service	2.1.1	Understands the culture and structure of the organisation and the wider NHS and identifies and develops effective collaborations with others outside of their immediate team	 Getting involved in health community-wide working groups or project, for example relating to contract management, care pathway redesign, or clinical networks. 	1 2 3 4 5
	Engaging the team	2.1.2	Is an effective and trusted team member within the department; demonstrates respect to colleagues and gains their respect and support	 Working closely with the team and acting like a regular team member. Creating connections between health and social care services. 	1 2 3 4 5
2.2 Building and maintaining Relationships	Holding to account	2.2.1	Is involved in working with organisations who are external to the NHS, such as professional bodies, social care, voluntary services, etc.	 Building/maintaining relationships (e.g., Local Authority, Private Sector, and Social Enterprises). 	1 2 3 4 5

Specialist	Healthcare Leadership Model					
2.2 Building and Maintaining Relationships	Evaluating information	2.2.2.	Understands the importance of patient and public engagement in NHS services including complaints handling, priority setting, service design, delivery and service improvement.	•	Communicating regularly with patients and their families and/or actively builds patient/public engagement into their project work. Managing, and referring to client services (where not directly in a client facing role), including: freedom of information requests; parliamentary questions and/or media questions in line with organisation's policies; complaints in line with the organisation's policy, listening to concerns and investigating of the complaints; communicating to the complainant and liaising with the organisation's complaints department/ officer; providing information for the compliant response.	1 2 3 4 5
	Influencing for results	2.2.3.	An effective communicator, able to communicate at all levels of the organisation and to uses interpersonal skills to overcome barriers to acceptance or change	•	Communicating and presenting information to different internal stakeholders from staff groups to Senior Managers or Executive Directors.	1 2 3 4 5
	Evaluating information	2.2.4.	Understands and considers processes and procedures to promote the inclusion and accessibility of services for all parts of the community	•	Building awareness of the importance of developing differing strategies and policies, to ensure the full engagement of all areas of the community with the NHS organisation. Knowledge of Equalities legislation.	1 2 3 4 5

	Connecting our service	2.2.5	Builds relationships outside of own environment to ensure collaboration for improvement of services	 Working across organisations to improve services from a high level (versus complain level).
Core Leadership Domain	Healthcare Leadership Model	C	Competency	Examples of activities to demonstrate Assessment Level experience
2.3 Encouraging Contribution	Engaging the team Influencing	d c	hairs and leads small group/team iscussions to show others their ontribution matter and are valued articulates ideas and challenge the	 Holding weekly team meetings. Leading a small project. Presenting at meetings, or writing 1 2 3 4 5
	for results	v	iews of others in a constructive and ositive manner	 minutes of meetings Being recognised as a meeting contributor in meeting minutes.
	Sharing the vision	ir	haring a common purpose and nspiring others to live it through heir everyday actions	 Models NHS values in every day practice and is a role model for other colleagues.

Specialist	Healthcare Leadership Model			
2.3 Working within Teams	Holding to account	2.3.4 Works with clinicians, service managers and other senior representatives within the organisation and uses information from different sources to support operational performance, policy development, a case for change or the implementation of a recommendation	 Getting involved in multidisciplinary team project. Working with clinicians or other SMEs in supporting policy development to ensure effective service delivery. Developing knowledge of clinician's responsibilities, including their role as the patient's advocate, providing challenge and facilitating meaningful discussion, e.g. working with clinicians in changing care pathways or EWTD compliance. 	1 2 3 4 5
Core				
2.4 Working within Teams	rithin Holding to account 2.4.1 Visibly understands the responsibilities of the department and its role and value within the organisation and proactively looks for opportunities where the department can contribute		 Linking personal objectives to team and department objectives. 	1 2 3 4 5
	Holding to account	2.4.2 Takes responsibility and ownership for leading key activities/projects and new initiatives.	 Taking on Project Management responsibilities, or a key role within a project, work stream or task lead responsibility for creating a defined project outcome. 	1 2 3 4 5

	Connecting our service	2.4.3	Provides an effective and valued contribution to projects that require multidisciplinary teams.	•	Takes on individual responsibility within team projects and is considered a leader by one's peers. Identifies areas for key contributions on large projects and works with others to accomplish project related goals.	1 2 3 4 5
	Leading with care	2.4.4	Behaves in a manner that is empathetic to those around them, despite differences of others.	•	Listens to others in team projects, and takes into account other view points and potential information counter to their own views.	1 2 3 4 5
	Leading with care	2.4.5	Provides and facilitates a safe environment to enable their coworkers and team to perform their job efficiently.	•	Incorporates other's views and opinions in discussions on job related matters and enables others to participate.	1 2 3 4 5

Section 3. Managing Services

Core Leadership Domain	Healthcare Leadership Model		Competency	Examples of activities to demonstrate Assessment Level experience
3.1 Planning and Execution	Evaluating information	3.1.1	Is involved in the development of business plans to support operational/organisational change	 Creating Project Briefing documents, Board Papers for investment proposals, supporting the creation of wider strategic, outline or final business cases for larger change programmes.
	Holding to account	3.1.2	Applies project planning methodologies and uses appropriate tools to support this, ensuring timely execution	 Creating Project Initiation Documents, Project Gantt Charts, or implementation plans or roadmaps.
	Sharing the vision	3.1.3	Communicates progress and outcomes of key planning stages/milestones to the relevant stakeholders to ensure two-way communication, alignment and timely delivery	 Creating project status reports, highlighting reports, and presenting project milestones. Communicating outcomes of risk assessments. Contributing to Board papers seeking authorisation to proceed with project phases, or investment stage gates.

Specialist	Healthcare Leadership Model					
3.1 Planning	Influencing for results	3.1.4	Supports contractual discussions and monitoring, and where relevant, difficult contractual disputes and/or commercial negotiations	•	Gaining awareness of the need to build successful business relationships and doing so when and where appropriate. Developing and applying influencing and negotiation skills.	1 2 3 4 5
	Engaging the team	3.1.5	Participates in developing policies which promote health and wellbeing in the population and/or integrated services; clearly understands the whole integrated health and social care system, including primary, community, and secondary healthcare, mental health, public health and the broader health and social care systems	•	Being involved in a planning meeting. Examples include: STP planning round update, NHS England business planning, a joint planning forum with social care, education and regeneration or involvement with localities planning new services. Having awareness of the role of special interest groups including charities, voluntary organisations and other community groups, in influencing and supporting healthcare developments.	1 2 3 4 5

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
3.2 Managing Resources	Engaging the team Holding to account	3.2.1 Takes responsibility for leading a team/group to achieve service objectives within a specified timeframe, resource allocation and budget and to the required quality standard	 Being exposed to a project, or a sub task within a project, that requires a group effort to create a defined outcome or project deliverable, within time, budget and to expected quality standards. 	1 2 3 4 5

Specialist	Healthcare Leadership Model					
3.2 Managing Resources	Evaluating information	3.2.2	Knowledge of organisation's financial duties and targets	•	Engaging with leadership (and financial stakeholders) to gain the relevant knowledge. Attending meetings with finance representatives as part of orientation and through formal meeting with senior finance staff member.	1 2 3 4 5
	Evaluating information	3.2.3	Knowledge of budget setting and financial performance information	•	As per 3.2.2	1 2 3 4 5
	Evaluating information	3.2.4	Able to apply knowledge of commissioning and contracting processes and how financial funds flow across the NHS	•	As per 3.2.2	1 2 3 4 5
	Influencing for results	3.2.5	Supporting or understanding operational management of a service area, including: budgetary responsibilities; supporting the implementation of operational policies and procedures; a supporting compliance with relevant clinical guidelines or standards	•	Being involved in or having a responsibility for managing a budget and, possibly, involvement in the process of budget setting. Ensuring the cost effective use of resources. Supporting managers and clinicians involved with commissioning and with providing services. Getting involved in negotiations with internal and external parties around the financial implications of the	1 2 3 4 5

				service and associated budget	
			•	service and associated budget management. Monitoring waiting times for the service and considering strategies to improve/influence waiting times where appropriate. Exhibits an understanding of key operational policies (e.g. infection control) and can clearly articulate and exhibit these behaviours when working with colleagues. Harness their understanding from their NHS placement to	
				influence policy/strategy back at NHSE during the final placement.	
Connecting our service	3.2.6	Understands the operational functionality and service delivery of areas within providers, e.g. the organisation and day to day practices of inpatient, outpatient and theatre services		Observing of different services. Getting involved in discussions with colleagues and conducting wider reading to grow knowledge in this area.	1 2 3 4 5

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
3.3 Managing People	Engaging the team	3.3.1 Instructs and manages other team members in particular activities/projects while ensuring appropriate accountabilities and clear goals are in place	 Creating verbal or documented task plans for team members/colleagues, or documenting project work packages to define activities and outcomes required. Providing individuals with constructive performance feedback continuously. 	1 2 3 4 5
	Engaging the team Holding to account	3.3.2 Motivates team members through clear direction setting, constructive feedback and open dialogue	 Leading team meetings, encouraging contribution during meetings and seeking/providing feedback. 	1 2 3 4 5

Specialist	Healthcare Leadership Model				
3.3 Managing People	Evaluating information	3.3.3	Understands the basics of employment legislation, NHS staff terms and conditions, staff performance management, statutory requirements relating to pay, pay costs and pay reform, conflict resolution, redundancy and the disciplinary/grievance procedures	 Engaging with leadership to gain the relevant knowledge. Attending meetings with HR representatives as part of orientation and formal meetings with senior HR staff member. 	1 2 3 4 5
	Engaging the team	3.3.4	Clearly understands and has involvement in processes and procedures to promote a diverse and satisfied workforce	 Getting exposure to the HR Director and/or Senior Level Management within HR/OD. Use this experience to work with their team to identify improvements e.g. staff satisfaction surveys, improved selection and induction processes, development of mentoring programmes. Developing and applying awareness of the importance of cultural sensitivity and having a workforce representative of the local population. Acquiring know how and supporting the implementation of staff wellbeing reviews (e.g. the Boorman Review) and organisational sickness absence policies. Awareness of best practice e.g. Improving 	1 2 3 4 5

			Working Lives and Investors in People.
Holding to account	3.3.5	Understands and participates (when relevant) in performance reviews	 Getting involved in PDR. Use of the Knowledge and Skills Framework and an understanding of Agenda for Change. Awareness as to how to identify and nurture talented people and succession planning. Building awareness of how to read other people's reactions and see their perspective, and the importance of listening, coaching, constructive feedback and empathy. Where possible, getting involved in disciplinary or grievance investigation.
Holding to account	3.3.6	Understands and has involvement in workforce planning	 Knowing of how to define the required workforce and link this to service planning, understanding workforce availability; planning to deliver the required workforce and implement, monitoring and refresh workforce plans. Having knowledge of guidance on workforce planning, e.g. Skills for Health.
Holding to account	3.3.7	Involvement within a recruitment process	 Assessing candidates against the predetermined competences through screening or interviews (skills,

		knowledge and personal qualities) required.	
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Core Leadership Domain	Healthcare Leadership Model		Competency	Examples of activities to demonstrate experience	Assessment Level
3.4 Managing performance	Holding to account	3.4.1	Understands the key performance targets for the NHS and the organisation	 Reviewing relevant NHS documentation to ensure plans are drafted and executed in line with performance targets. Understanding role and performance requirements of external regulatory bodies e.g. NHS Improvement, Care Quality Commission, NHS England. 	1 2 3 4 5
	Connecting our service	3.4.2	Demonstrates knowledge of the organisational systems and processes for corporate, financial, information and clinical governance	 Possessing good knowledge of the organisation and membership roles of committee structures. Arranging accountabilities. Attendance at strategic meetings, when available. Possessing knowledge of legislation on Data Protection, Freedom of Information Act, patient confidentiality, and any other relevant legislation applicable to your profession. 	1 2 3 4 5

Holdi	_	Supports the development and monitoring of key performance indicators at an organisational and/or project level	 Possessing knowledge of risk management approach. Understanding routine analysis of organisational performance against key targets. Defining key outcomes and outputs measures within specific projects, e.g. reduction in readmission rates, patient bed days saved. 	1 2 3 4 5
Holdii accou Inspir share	int	Identifies when and what corrective action needs to be taken in order to maintain performance standards for self and others	 Developing a corrective action plan to ensure that timescales and project outcomes are still met. Gaining agreement to additional resources. Taking decisive action within projects. Generating innovative ideas how to maintain and improve standards and efficiencies. 	1 2 3 4 5

Specialist	Healthcare Leadership Model				
3.4 Managing Performance	Holding to account	3.4.5	Supports the internal performance management systems and reporting requirements	 Producing monthly monitoring reports. Using data and information to support the achievement of operational targets/ plans. Having knowledge of service line management and internal monitoring controls for financial duties. 	1 2 3 4 5
	Holding to account	3.4.6	Involvement in improving the performance of a service or department which is in direct contact with patients, their families, other users, staff, or the general public etc., to ensure sustainability and overall better use of resources	 Being involved in a complex service which is staff intensive, multi-disciplinary and, where possible, multi-site/locations e.g. rehabilitation services or children's network or chronic care community services or clinical directorate. Should be involved in all aspects of the operational management of services. Developing awareness of how to motivate individuals and teams to continuously improve the quality of services by sharing best practice. 	1 2 3 4 5

Section 4. Improving Services

Core Leadership Domain	Healthcare Leadership Model	Со	mpetency	Examples of activities to demonstrate experience	Assessment Level
4.1 Ensuring Patient Safety	Connecting our service	wid the	emonstrates knowledge of the der compliance framework for e organisation and the processes r review	 Understanding the role, remit and requirements of external and/or regulatory bodies, including the Department of Health, external auditors, Monitor NHS Improvement, Care Quality Commission, Audit Commission, NHS Litigation Authority and Health & Overview Scrutiny Committee, Healthwatch and Health, NBB. Understanding the different regulatory regimes applicable to organisations. 	1 2 3 4 5
	Evaluating information	and dev saf	sesses and monitors the impacts d risks of service velopments/changes to patient fety and care and to the ganisation	 Defining, measuring and interpreting quantitative and qualitative impacts and outcomes. Using risk management matrices. 	1 2 3 4 5
	Evaluating Information	de [.] str im	emonstrates involvement in veloping risk mitigation rategies and measures to prove and/or maintain patient fety	 Creating/contributing to the development of risk mitigation plans with relevant stakeholders, and demonstration that mitigation plans are achievable, measurable, and address both the cause and consequence of the risks described. 	1 2 3 4 5
	Connecting our service	col	mmunicates and works llaboratively to promote ntinuous quality improvement	 Working collaboratively within multidisciplinary teams to identify or implement improvements to patient care. 	1 2 3 4 5

Specialist	Healthcare Leadership Model			
4.1 Ensuring Patient Safe	Leading with care	4.1.5	Contributes to the development of a culture of quality and safety	 Supporting the implementation of corrective actions in response to incidents. Knowledge of the recommendations and lessons from governance and patient safety failures, e.g. familiar with inquiry reports.
	Leading with care	4.1.6	Understands, and where possible, supports the organisation's quality accounts, which consider patient safety, the effectiveness of treatments that patients receive and patient feedback about the care provided	 Basic understanding of how quality accounts fit within the wider quality improvement infrastructure of the NHS. Knowledge of the required content of the accounts, the scope of the regulation (i.e. organisations that are required to submit quality accounts), and the assurance mechanisms from the regulators. Familiar with guidelines on the completion of quality accounts, including the NHS Quality Accounts Toolkit.
	Leading with care	4.1.7	Clearly understands and has involvement in internal risk management, evaluation and reporting and takes responsibility in responding to a system 'failure' where there is complexity and an urgency to 'turn around' the situation	Getting involved in the reporting, evaluation and management of risk for a specific service or project. Could involve responding to adverse clinical governance incidents, system failure, stalemate' within a delayed controversial project or in strengthening clinical governance arrangements.

	 Providing experience of how to rapidly review a situation, identify the key deliverables, understand barriers to progress and disseminate the learning across the organisation and into relevant assurance frameworks.
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Core Leadership Domain	Healthcare Leadership Model		Competency	Examples of activities to demonstrate Assessment Level experience
4.2 Critically Evaluating	Evaluating information	4.2.1	Establishes an evaluation framework and programmes to support the monitoring of outcomes from service developments, including assessments of the Return on Investment	Demonstrating the ability to set the parameters for undertaking an evaluation, including economic, of planned changes to services, including e.g. setting the baseline, defining the measures, defining the data sources, capturing the data and measuring the impact.
4.3 Developing new and creative concepts	Evaluating information	4.3.1	Reviews and critically appraises the activities within the department and suggests new ways of working	 Documenting ideas raised or suggested as part of regular one to one meetings with line manager, or from minutes of team/departmental meetings. Sharing best practice.
	Engaging the team	4.3.2	Plays an active role within a team on a service development/change management project	 Participating in project management meetings and taking on deliverables that lead to improvements/ changes in services.
	Evaluating information	4.3.3	Thinks creatively and is able to solve complex problems or scenarios	 Proactively getting involved in creating solutions to tackle different scenarios 1 2 3 4 5

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Specialist	Healthcare Leadership Model					
4.3 Encouraging Improvement and Innovation	Evaluating information	4.3.4	Knowledge of evidence sources and guidance on 'best practice'	•	Conducting wider reading e.g. NICE, NHS Evidence, Cochrane Reviews, BMJ.	1 2 3 4 5
	Connecting our services	4.3.5	Engages with clinicians to identify innovative ways of working and improvements in services, through the sharing of ideas, best practice and lessons learnt	•	Attending clinical network events or multiagency planning forums to share ideas and contribute towards implement.	1 2 3 4 5

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
4.4 Facilitating Transformation	Sharing the vision	4.4.1 Has effective report writing and presentation skills of data and information to support the case for change and to influence decision making	 Contributing to or supporting with Board Papers, meeting papers and presentations, and minutes where effective presentation has occurred. 	1 2 3 4 5
	Connecting our service	4.4.2 Has experience of supporting the implementation of a change management process/project	 Taking on a task of Project documentation and post- implementation review, detailing the role of the individual, and the outcomes achieved with the project. 	1 2 3 4 5

Leading with care 4.4.3 Provides positive actions to push leaders and those above them to take responsibility for the wellbeing of their team.	 Engages stakeholder and more senior members of the team to evaluate decisions they make and the effect it has on individual's health and wellness. Pushes back on senior members of the team if decisions are counter to wellbeing within the team. 	1 2 3 4 5
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Specialist	Healthcare Leadership Model					
4.4 Facilitating Transformation	Developing capability	4.4.4	Participates in the delivery of a change programme, in response to system reform, national and local policies and priorities	•	Getting involved in a cost improvement or service improvement programme/ work stream. Managing milestones and outputs within a major change programme. Awareness of the internal and external scrutiny of such major change programmes. Developing and managing the implementation plan. Use of benchmarking and other performance management data to inform and demonstrate the effectiveness of the improvements. Interpreting, challenging and understanding how current strategy in the organisation aligns with national and local policy direction and best practice research and evidence. Awareness of potential risks around workforce redesign. Being aware of processes which encourage the adoption of 'best practice' and ensure continuous improvement. Having knowledge of the process for planning and implementing financial improvement e.g. cost improvement programmes, value for money assessments, business development, driving return on investment.	1 2 3 4 5

				Having knowledge of internal and regulators.
	Holding to account	4.4.5	Supports the identification and implementation of further improvement areas for the organisations efficiency or cost improvement programme	 Map a patient's pathway; identifying/planning/ implementing service improvements. Provide solutions that create effective strategies for streamlining bureaucracy.
	Influencing for results	4.4.6	Recognises the importance of communications in facilitating service changes with internal and external stakeholders	Being involved in staff events/ forums /newsletters to obtain staff buy-in to transformation. Involvement in communication with patients and the public about service developments. 1 2 3 4 5

Section 5. Setting Direction

Core Leadership Domain	Healthcare Leadership Model		Competency	Examples of activities to demonstrate Assessment Level experience
5.1 Identify the contexts for change	Sharing the vision	5.1.1	Demonstrates knowledge and understanding of key strategic policy documents informing the national direction of travel e.g. Health and Social Care Bill, NHS Operating Framework etc.	Familiarising yourself with the relevant policy documents and applying the insights into everyday work.
	Sharing the vision	5.1.2	Demonstrates knowledge and understanding of the system reform agenda, including new organisational forms and their governance and accountability frameworks	Assessing and reading the relevant documentation to stay informed. 1 2 3 4 5
Specialist	Healthcare Leadership Model			
5.1 Identifying the Contexts for Change	Evaluating information	5.1.3	Understands the national policy and how this translates into local actions and service developments	 Knowledge of Health and Social Care Act, Five Year Forward View, Planning Guidance, Operating Framework and other strategic guidance. Maintaining knowledge through regular review of publications and wider reading.
	Holding to account	5.1.4	Understands incentives which are linked to the achievement of local quality improvement goals	 Developing knowledge of the CQUIN framework and QOF. How these link to different organisations and the NHS Outcomes Framework, NICE Quality Standards, PROMs etc.

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
5.2 Applying Knowledge and Evidence	Inspiring shared purpose	5.2.1 Questions and challenges the assumptions and evidence base underpinning the national and loca strategies and plans	 Understanding the national and local plans in order to have informed discussions and give sound opinions based on evidence and insights. 	1 2 3 4 5
	Evaluating information	5.2.2 Supports the development of servitransformation through the use of information and evidence	 Using of benchmarks and data to understand opportunities for improvements. Reviewing and incorporating evidence-based feedback from case studies into own work environment. Working with information and finance departments to gain an evidence base to support change. Conducting wider reading e.g. HSJ, profession specific magazines 	1 2 3 4 5
5.3 Making Decisions	Sharing the vision	5.3.1 Is involved in a group/project responsible for deciding future service change/transformation.	 Contributing to efforts (through research or actions) targeting future services improvement and transformation. 	1 2 3 4 5

Specialist	Healthcare Leadership Model					
5.3 Making Decisions	Influencing for results	5.3.2	Provides support to the process to agree a strategic and/ or local operational plan, representing either the local provider or local commissioner or NHSE	•	Engaging with key stakeholders. Being involved in negotiations. Reflecting the Plan in the providers Business Plan.	1 2 3 4 5
	Sharing the vision	5.3.3	Is part of a team formulating the strategy for one or more services or involved in one or more workstreams	•	Example includes: Formulating a strategy to tackle national and local health improvement challenges, within children's services or a specialty. Engaging with stakeholders e.g. other departments, NHS organisations, partners, governors (in an FT) and present to senior team. Developing awareness of the processes required to develop successful strategies and awareness of the impact of strategies on staff and the wider community including suppliers, partners, public etc.	1 2 3 4 5
	Holding to account	5.3.4	Provides support to the business planning processes and clearly understands how this links with the Health Reforms, the local priorities, etc.	•	Extending to the translation of plans into Service Level Agreements, Service Specifications and/ or contracts, including involvement in negotiations. Gaining awareness of what makes a 'sound' judgement and understanding how to approach political astute	1 2 3 4 5

				decisions, in uncertain and ambiguous situations. Awareness of balancing resource requirements for new developments with existing services i.e. operate within financial duties.
	Evaluating information	5.3.5	Understands processes which attempt to resolve complex situations with difficult trade offs	 Understanding how to tackle situations such as withdraw or retaining of local services which may be difficult to sustain due to scarce clinical skills; approving or rejecting commissioning of a high cost drug treatment programme for an individual patient; and responding to a serious untoward clinical incident or patient/staff complaint.
	Holding to account	5.3.6	Supports an Executive Director and has involvement with the Board	 Attending Executive Team and Board meetings. Understanding and review of minutes. Preparation of Board reports.
	Holding to account	5.3.7	Observes and/or has involvement in Board and Board Sub-Committee(s) preferably at consecutive meetings to develop awareness as to the decision making process	 Being involved in key committees within the organisation, or any similar group which is chaired by an Executive or Non-Executive Director. Knowledge of the duties of NHS Boards (including Board of Governors and Board of Directors for Foundation Trusts) and roles of Chair and Chief Executive and others on the Board. Knowledge of Corporate Governance. Understanding of the importance of relationships with the local community, including other NHS organisations and local authorities.

	Evaluating information	5.3.8 Understands the relationship with Government, other ALBs and parliamentary accountability and scrutiny	 Supporting submissions to select committees, supporting slide pack development for ministerial meetings. Understanding the mandate and accountability meetings. 	1 2 3 4 5
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Section 6. Creating the Vision

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
6.1 Developing th vision for the organisation	e Inspiring shared purpose	6.1.1 Understands the vision for the NF	 Linking own objectives to the organisational objectives, strategy and overall vision. 	1 2 3 4 5
	Inspiring shared purpose	6.1.2 Understands the vision for the department or to objectives	 Aligning objectives above, to the wider department and direct team objectives am to create a cohesive vision from the individual level up to the organization level. 	1 2 3 4 5

Specialist	Healthcare Leadership Model				
6.1 Developing the Vision for the Organisation	Evaluating information	6.1.3	Understands the vision for the organisation and how the operational strategy supports the vision for the organisation	 Applying organisational vision understanding into operational deliverables and communicating the link to a wider audience as part of best practice sharing. 	1 2 3 4 5

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
6.2 Influencing the	Connecting our	6.2.1 Attends and	Attending meetings with Healthcare	1 2 3 4 5
vision of the Wider	service	participates in joint	providers outside of own	
Healthcare System		meetings between	organisation/environment.	
		the NHS and Local		
		Authorities, or other		
		health and social		
		care organisations,		
		or voluntary sector		
		organisations		

Core Leadership Domain	Healthcare Leadership Model	Comp	etency	Examples of activities to demonstrate experience	Assessment Level
6.3 Communicating the Vision	Influencing for results	6.3.1	Communicates the benefits of change to key stakeholders, including clinicians, staff and patients	 Proactively communicating change benefits to others through a specific change management project. 	1 2 3 4 5
Specialist	Healthcare Leadership Model				
6.3 Communicating the Vision	Sharing the vision	6.3.2	Clearly articulates the vision of the organisation to the directorate/department/ service team and discusses the role that the team should take to facilitate implementation of this strategy	 Participating in/leading team discussions and initiatives to facilitate implementation of the strategy across the organisation, not only within own environment. 	1 2 3 4 5
	Sharing the vision	6.3.3	Communicates effectively the strategy of the organisation to senior staff within the organisation and the impact on the service and ways of working	 Communicating compelling and credible vision, supported by achievable action plans and practical ways of working. 	1 2 3 4 5

Evaluating information	6.3.4	Understands the policy development cycle,	 Understanding of and the policy development cycle, including: use of 1 2 3 4 5
			evidence, developing a rationale, appraising options, designing evaluation, implementation and engagement.

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
6.4 Embodying the Vision	Inspiring shared purpose	6.4.1 Behaves professionally with colleagues within and outside of the organisation	 Promotes the vision of the NHS when speaking to internal and external stakeholders when the opportunities arise. 	1 2 3 4 5
	Influencing for results	6.4.2 Acts as an ambassador for the organisation when representing them at external meetings and conferences	 Attending conferences and external meetings in order to promote own organisation and its objectives. 	1 2 3 4 5

Section 7. Delivering the Strategy

Core Leadership Domain	Healthcare Leadership Model	Competency	Examples of activities to demonstrate experience	Assessment Level
7.1 Framing the Strategy	Connecting our service	7.1.1 Understands how the vision for the organisation is translated into a strategy	 Reaching out for opportunities to have informed discussions to develop an understanding of how the vision in translated into the strategy. 	1 2 3 4 5
7.2 Developing the Strategy	Inspiring shared purpose	7.2.1 Understands the strategic direction for the organisation	 Engaging in informed discussions with the relevant stakeholders to develop a sound understanding of organisational strategy and its impact. 	1 2 3 4 5

Specialist	Healthcare Leadership Model					
7.2 Developing the Strategy	Evaluating information	7.2.2	Understands business and operational plans of own organisation or	•	Developing a good understanding of the plans in place within a wider context and connecting	1 2 3 4 5
			service/department and how this links to the wider national agenda		specific initiatives and opportunities where and when relevant. Communicating these to senior stakeholders.	

Core				
7.3 Implementing the Strategy	Inspiring shared purpose	7.3.1 Awareness of the NHS strategic planning process	 Gaining knowledge of the planning process by proactively engaging with the relevant individuals and applying this knowledge in own work. 	1 2 3 4 5
	Connecting our service	7.3.2 Understands how the strategic direction of the organisation translates into organisational and departmental business plans	 Gaining a perspective on how strategy comes to life through own involvement or conversations with other. 	1 2 3 4 5
	Inspiring shared purpose	7.3.3 Is familiar with the organisation's annual business plan and can articulate the key messages	Through informed discussion.	1 2 3 4 5

Specialist	Healthcare Leadership Model					
7.3 Implementing the Strategy	Sharing the vision	7.3.4	Supports the implementation of key aspects of the organisation's operational strategy	•	Getting involved in discussions and supporting operational strategy execution to ensure effectiveness, efficiencies and quality of service.	1 2 3 4 5

Core				
7.4 Embedding the Strategy	Sharing the vision 7.4.1	Demonstrates the ability to support the implementation of organisational change programmes	 Getting involved in implementation of organisational change programmes or working with others to gain understanding of the process. 	1 2 3 4 5