Health and Social Care Secretary speech on leadership review

Mr Speaker, with permission, I'd like to make a statement on the <u>independent</u> <u>leadership review of health and social care</u>.

This is an important report that comes at a critical time.

This government is embarking on a huge programme of reform.

To tackle the Covid backlogs, improve people's experience of the NHS and social care, and to place this system on a sustainable footing for the future.

But we cannot seize this opportunity and deliver the change that is so urgently needed without the best possible health and care leadership in place.

Because great leaders create successful teams, and successful teams get better results.

So a focus on strong and consistent leadership at all levels, not just on those who have the word "leader" in their job title, this will help us in our mission to transform health and care and level up disparities and patient experiences.

This review, which I've deposited in the libraries of both Houses, was tasked with proposing how to deliver a radical improvement in health and social care in the leadership across England.

It sets out a once in a generation shake-up of management, leadership and training, as well as how we can make sure that health and care is a welcoming environment for people from all backgrounds.

It's free from bullying, harassment and discrimination.

Mr Speaker, the review was led by General Sir Gordon Messenger, former vice-chief of the defence staff, and by Dame Linda Pollard, the chair of Leeds Teaching Hospitals NHS Trust.

I'd like to thank them both for taking on this role and for providing their varied expertise of leadership, along with everyone else in their review team who has contributed to this important review.

Before I turn to the recommendations of this review, I'd like to update the House on its findings.

The review found that, although there are many examples of inspirational leadership within health and social care from ward to board, these qualities are not universal and I quote, from the report, "there has developed over

time an institutional inadequacy in the way that leadership and management is trained, developed and valued."

As a result, careers in management aren't viewed with the same respect and prestige as clinical careers.

The review also found "too many reports to ignore" — quoted in the report — of poor behaviour.

And that the acceptance of bad behaviours like discrimination, bullying and responsibility avoidance has become — and I quote again — "almost normalised" in certain parts of the system.

We must only accept the highest possible standards in health and care, where failures in culture and leadership can be making the difference between life and death.

So we must do everything we can in our power to share and promote brilliant, innovative management and to act firmly where standards do fall short.

This means culture change from the top of the system to the front-line, and the review identifies a number of areas where improvement is needed.

It makes seven transformative recommendations and I'd like to update the House quickly on each of them in turn.

First, the review recommends new measures to promote collaborative leadership and to set a unified set of values across health and care.

This includes a new, national, entry-level induction for new joiners to health and care, and a new national mid-career programme for managers.

Second, the review recommends that we should agree and set uniform standards for equal opportunities and for fairness, with more training to ensure that the very best leadership approaches become ingrained and that the CQC must support this work, by measuring progress through regular assessments.

Mr Speaker, this doesn't mean more people working in diversity but fewer.

In my view, there are already too many of these roles and, at a time when our constituents are facing some real pressures around the cost of living, we must spend every penny with care.

Instead of farming out important task to a specific group of managers it must be seen as everyone's responsibility, with everyone accountable for extending fairness and equal opportunities at work.

Third, the review recommends a single set of unified leadership and management standards for NHS managers.

These standards would apply to everyone, including those who work part-time and flexibly, with a curriculum of training and development to help people to meet them.

This is well overdue modernisation and completing this training should be a pre-requisite to advance to more senior roles.

Fourth, the review recommends a more simplified, standardised appraisal system for the NHS.

Moving away from variation in how performance and career aspirations are managed towards a more consistent system that takes into account how people have behaved, not just what they have achieved.

Fifth, the review identifies a lack of structure around careers in NHS management.

It proposes a new career and talent management function for managers at a regional level.

To oversee and support careers in NHS management and to provide clear routes to promotion, along with training and development.

Sixth, the review recommends that the recruitment and development of non-executive directors needs to be given greater priority due to their vital role in providing scrutiny and assurance.

It proposes an expanded specialist appointments team in the NHS tasked with encouraging a diverse pipeline of talent.

Finally, there is currently little or no incentive for leaders and managers to move into the most challenging roles as the barriers are seen as simply too high.

But I want leaders in the NHS to seek out those roles and not shy away from them.

It is essential that we address this and get great leaders into the areas that feel left behind.

The review proposes an improved offer, with stronger support and incentives to recruit top talent into these positions.

Mr Speaker, these are comprehensive, common-sense recommendations and we will be accepting them in full.

The recommendations have been welcomed by groups that represent people who work throughout the NHS, including the NHS Confederation and NHS Providers.

By taking this review forward, we can finally bring how we do health and care leadership into the 21st century.

So we have the kind of leadership that patients and staff deserve, right across the country and we make sure that some of our country's most cherished institutions can thrive in the years that lie ahead.

I commend this statement to the House.