

Clinical and Care Professional Leadership Model

Update for NCL Clinical Leads

Strictly Confidential

Introduction and background

- In Autumn 2021, NHS England published guidance for Integrated Care Systems (ICSs) for the development of effective Clinical and Care Professional Leadership (CCPL). The guidance requires ICSs' to develop an overarching leadership framework and development plan that reflects the following principles.
 - ✓ Full range of clinical and professional leaders from diverse backgrounds are integrated into system decision-making at all levels.
 - ✓ Nurture a culture that systematically embraces shared learning, supporting clinical and care professional leaders to collaborate and innovate.
 - ✓ Support clinical and care professional leaders throughout the system to be involved and invested in ICS planning and delivery, with appropriate protected time, support and infrastructure.
 - ✓ Create a support offer for clinical and care professional leaders at all levels of the system, which enables them to learn and develop alongside non-clinical leaders.
 - ✓ Transparent approach to identifying and recruiting leaders which promotes equity of opportunity, and creates a professionally and demographically diverse talent pipeline.
- Significant engagement and work has been undertaken to establish a clinical and care leadership model that reflects these design principles and the emerging NCL ICS outcomes framework around *Start Well, Live Well, Age Well and Work Well*, which has provided the structure and basis of the model.

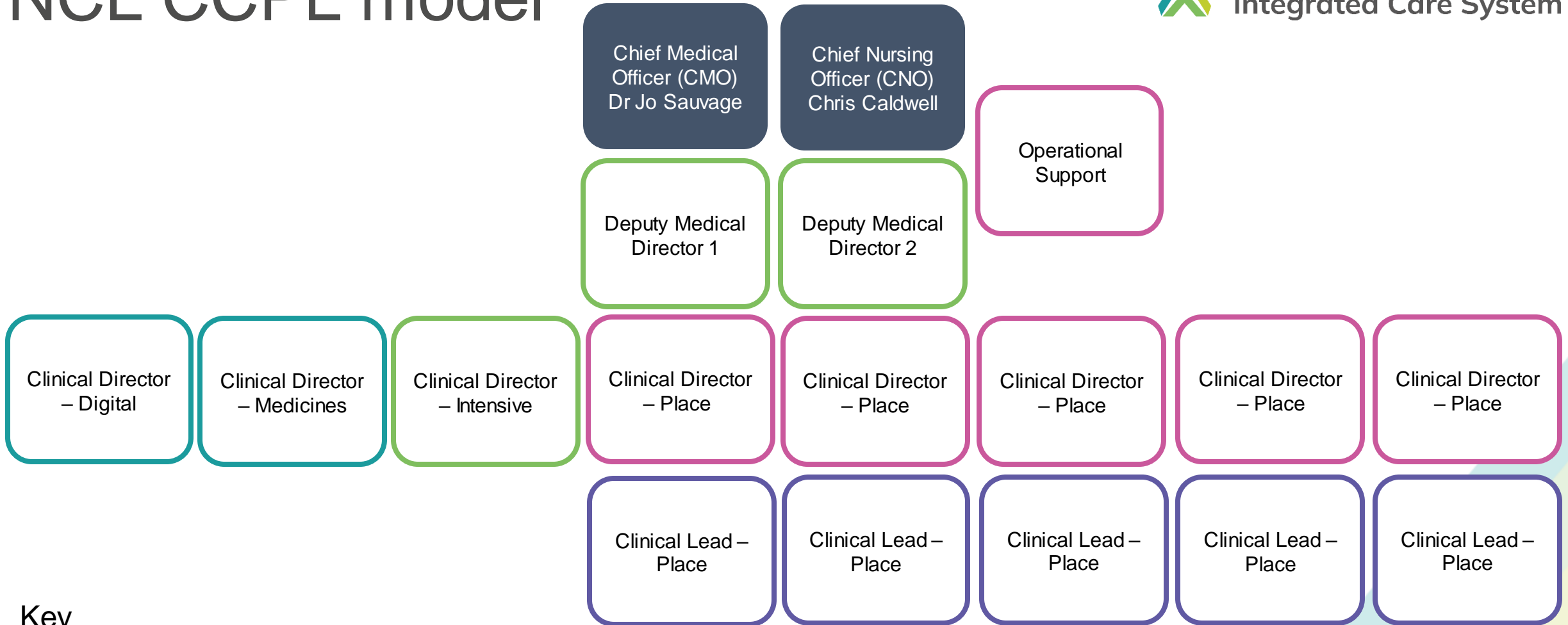
Design principles of the CCPL model

- A workstream was set up to lead the development of the CCPL model, led by the Chief Medical Officer (CMO) with support from the Chief Nursing Officer (CNO), Chief People Officer (CPO), Executive Director of Performance and Transformation, Executive Director of Place, HR and the Programme Management Team for NCL ICB.
- In summer 2021, 'visioning' workshops were held with key stakeholders to give their views on developing the clinical and care leadership model. In addition, an online survey regarding the future was conducted with current NCL clinical leads in November 2021.
- There was a commitment to develop a new and different model of strong clinical leadership and collaborative professional leadership drawing from across organisations in our system and built around our residents' needs, moving away from traditional models of historic institutional hierarchy.
- The future Clinical and Care Leadership model has been developed in accordance with the following design principles:
 1. Delivers on CMO, CNO and corporate responsibilities for the ICS and ICB.
 2. Enables clear leadership with a 'line of sight' to the delivery of ICP/ICB strategic priorities and objectives.
 3. Provides flexible clinical leadership for transformation programmes, with a focus on delivery.
 4. Enables development of a multi-professional leadership model that is inclusive and diverse; reflecting our NCL workforce and population.
 5. Creates a sense of partnership across the system and re-energises our approach to deliver new ways of working.
 6. Supports the delivery of priorities set out within the People function for NCL, regionally and nationally.
 7. Draws support from across ICB portfolios and functions to enable delivery e.g. PMO/ performance/ analytics.
 8. Fits within the allocated financial budget.

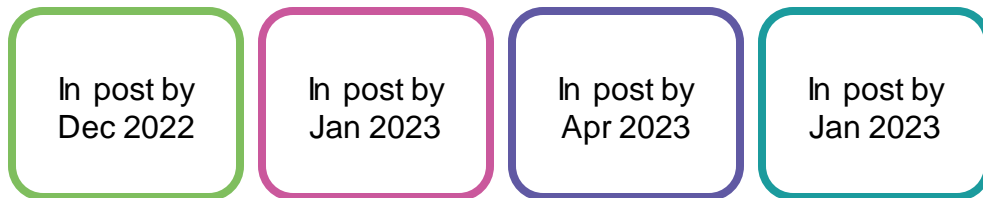
Development of the NCL CCPL model

- It is recognised that the ICS will require greater professional diversity across the portfolios, and a need to distinguish between accountable roles and wider system clinical and care professional leadership.
- Clinical and care professional leadership will need to play various roles in NCL, from statutory to strategic; service redesign and quality improvement through to more technical roles.
- Following an assessment and initial thinking, a mixed CCPL model has been identified as the best and most flexible model that provides greater capacity and continuity to the system.
- In order to maximise professional diversity, and in line with the guidance, the Clinical and Care Director and Clinical Lead posts within the CCPL model will be open to individuals with a range of experience, knowledge and skills, including but not limited to, allied health professionals, pharmacists, doctors, nurses, social workers/practitioners, psychologists, healthcare scientists, physician associates, midwives, dentists, optometrists, orthoptists and public health professionals, all of whom need to work together in the best interests of patients/the population.
- In achieving diversity of professions, the expectation is that there will also be an improvement in the demographic diversity of our system leaders to better reflect the population we serve and build on the work of the ICB to enhance equality, diversity and inclusion across our organisation.

NCL CCPL model



Key



NCL CCPL model

- The Chief Medical Officer and Chief Nursing Officer will provide executive leadership to the CCPL model, supported by a senior leadership team.
- An overview of the accountability and responsibilities at each level are summarised in the following table.

Role within the CCPL Model	WTE	Summary of role
Deputy Medical Director	2 x WTE	<ul style="list-style-type: none"> • Will assume an accountability role to support the CMO to discharge their executive responsibilities. • Part of the ICB senior leadership team. • Provides senior strategic, visible, clinical and professional leadership across the system.
Clinical Directors	Total 2 x WTE (across 5 roles)	<ul style="list-style-type: none"> • Will provide strategic clinical and care professional leadership both at place and in a matrix role across the NCL ICS. • Will report to the Directors of Integration at Borough level to deliver on the key priorities at place. • Clinical and Care Professional Leadership role for place, responsible for developing relationships with a wide range of clinical and care professional leads throughout the Borough and beyond.
Clinical Leads	5 WTE (across a number of roles)	<ul style="list-style-type: none"> • Working to the Clinical Directors to deliver on the priorities and programmes in boroughs. Convening wider groups of clinical and care professionals to contribute to the delivery of local and system priorities.

Transitioning to the new CCPL model

- To ensure a safe transition to the new model, the new model will be implemented on a phased basis through to 1 April 2023.
- This will ensure we are able to recruit to the new model whilst maintaining a safe level of cover over the winter months and allowing for a handover period between existing clinical leads and those recruited to new roles, where applicable.
- All clinical leads have been offered a short-term extension to **31 October 2022**.
- To support the implementation of the new model on a phased basis, the durations of further extensions will vary depending on the portfolios and continuity required for existing work programmes.
- This is to maintain critical 'in flight' work and to support the smooth transition to the new model.
- Following discussions with relevant Executive Directors, further extensions for each role will be to one of the following dates:
 - 31 December 2022
 - 31 March 2023
- All other roles will cease on 31 October 2022.

Overview of recruitment activities and indicative timescales

We will be recruiting to the new clinical and care leadership model on a phased basis, with all new roles in place by 1 April 2023.

Role	Advertised from	Onboarding from	Envisaged Start Date
Deputy Medical Director	End of September 2022	October 2022	November 2022
Clinical and Care Directors – Place	October/Nov 2022	December 2023	January 2023
Clinical and Care Director – Medicines	October/Nov 2022	December 2022	January 2023
Clinical and Care Director – Digital	October/Nov 2022	December 2022	January 2023
Operational Support	October/Nov 2022	November 2022	January 2023
Clinical Leads – Place	January 2023	March 2023	April 2023

Key contacts

If you have any questions or would like any further information, please contact the following key contacts:

Team	Contact Names/Details
Executive Leads	Josephine Sauvage, Chief Medical Officer: josephine.sauvagenclicb@nhs.net Chris Caldwell, Chief Nursing Officer: chris.caldwell@nhs.net Sarah Mansuralli, Chief Development and Population Health Officer: sarah.mansuralli@nhs.net Sarah McDonnell-Davies, Executive Director of Places: sarah.mcdonnell1@nhs.net Richard Dale, Executive Director of Performance and Transformation: richard.dale@nhs.net
HR Team	Darshna Pankhania, Deputy Director of HR, OD and EDI: darshna.pankhania@nhs.net Raksha Merai, Head of HR: r.merai@nhs.net
PMO Team	northcentrallondonics@nhs.net

We have also set up an [FAQ webpage](#), which we will be regularly updating with responses to questions we receive.