

Evidence Brief: Organisational Development

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Produced by the Knowledge Management team Evidence Briefs offer an overview of the published reports, research, and evidence on a workforce-related topic.

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Key publications – the big picture

10 Year Health plan for England: fit for the future

Department of Health and Social Care, July 2025

The 10 Year Health Plan is part of the government's health mission to build a health service fit for the future. It sets out how the government will reinvent the NHS through 3 radical shifts:

- hospital to community
- analogue to digital
- sickness to prevention

Implementing agile working in the NHS

NHS Employers, June 2025

A research report that identifies four key priorities to support the implementation of agile working that can succeed in supporting NHS reform.

Experience of care improvement framework

NHS England, February 2025

Alongside clinical effectiveness and safety, providing a good experience of care is an [essential part of an excellent health and social care service](#). A person's experience starts from their very first contact with the health and care system, right through to their last, which may be years after their first treatment, and can include end-of-life care. In addition, it is also important to understand and learn from people who do not currently access services but who have a need to, ensuring that the service provided understands and meets the needs of the community as a whole.

Greater than the sum of its parts? Sharing board leadership between trusts

NHS Confederation, November 2024

The last decade has witnessed the biggest shift in the architecture of the NHS provider sector since the creation of

NHS trusts. This has included a shift towards much larger trusts and a dramatic rise in the number of trusts sharing board-level leadership. This arrangement is now in place in a third of English NHS trusts.

System Leadership in the NHS: Learning from the North East and Yorkshire Region

NHS, October 2024

The North East and Yorkshire region has developed a distinctive approach to system leadership based on the regional director working closely with chief executives of the four integrated care boards (ICBs) in the region, known as the 4+1 arrangement. In this arrangement, a team of teams provides leadership across the region and ICBs have adapted this way of working in their systems with many leaders and staff involved.

Realising the potential of integrated care systems

The King's Fund, July 2024

Integrated care systems (ICSs) were created to increase collaboration in the health and social care sector and to enable the NHS, local authorities and other partners to take collective responsibility for improving health outcomes, reducing inequalities, delivering better value for money, and driving local social and economic development.

Sustainable Healthcare Financing for SDG3 in ASEAN-6

The London School of Economics and Political Science, March 2024

A key aim should be the creation of fiscal space – the creation of capacity in their (national) budgets that can be used for specific purposes without compromising their financial stability and sustainability.

The elephant in the room: Patient Safety and Integrated Care Systems

Patient Safety Learning, July 2023

This report by Patient Safety Learning considers the roles and responsibilities of Integrated Care Systems (ICSs) in relation to patient safety, and how this fits in with the wider patient safety landscape in England.

How does the NHS compare to the health care systems of other countries?

The King's Fund, June 2023

- Comparing the health care systems of different countries can help politicians and policy-makers assess how the UK health care system is performing and where it could improve.
- For our research, we reviewed the academic literature on previous attempts to compare health care systems, analysed quantitative data on health system performance, and interviewed experts in comparative health policy.

NHS Long Term Workforce Plan

NHS England, June 2023

The first comprehensive workforce plan for the NHS, putting staffing on a sustainable footing and improving patient care. It focuses on retaining existing talent and making the best use of new technology alongside the biggest recruitment drive in health service history.

The Hewitt Review: an independent review of integrated care systems

Department of Health and Social Care, June 2023

The Rt Hon Patricia Hewitt was commissioned to lead an independent review of integrated care systems in November 2022.

Accountability and autonomy in the NHS in England: priorities for the Hewitt review

NHS Confederation, January 2023

Sir Chris Ham reflects on progress made against his recommendations on the conditions ICSs need to succeed and on next steps for the Hewitt review.

NHS delivery and continuous improvement review: findings and recommendations

NHS England, 2023

The findings and recommendations of the delivery and continuous improvement review conducted by Anne Eden. The Review's recommendations were consolidated into three actions:

1. Establish a national improvement board to agree a small number of shared national priorities on which NHS England, with providers and systems, will focus our improvement-led delivery work
2. Launch a single, shared 'NHS improvement approach'
3. Co-design and establish a Leadership for Improvement programme.

Implementation, readiness and resourcing: a practical guide to the adoption and spread of health innovation programmes

Health Innovation Network, 2023

This guide aims to provide an easy to adapt framework for people working within health and care systems seeking to adopt and embed a service innovation or transformation. Applicable to large and small scale projects across multiple locations, it synthesises learning from 'Focus ADHD' (attention deficit hyperactivity disorder), a national programme implemented at pace across England between April 2020 and March 2023 via the 15 local health innovation networks that make up the Health Innovation Network.

Health and social care integration: joining up care for people, places and populations

Department of Health and Social Care, February 2022

This white paper sets out measures to make integrated health and social care a universal reality for everyone across England regardless of their condition and of where they live.

What does it take to lead an integrated care system?

NIHR, 2022

Inspiring different teams to work together is key to the successful leadership of any integrated health and social care system (ICS). However, little is known about how effective leadership can be supported and improved.

In England, ICSs are bringing together local NHS services and working with social care systems, local authorities, communities, and other groups, each with their own motivations. Leaders of ICSs therefore may be managing several professional teams with different goals and accountabilities. The challenges are not the same as in managing a team of professionals working towards a single goal.

Integrating care: Next steps to building strong and effective integrated care systems across England

NHS England, November 2020

This document details how systems and their constituent organisations will accelerate collaborative ways of working in future, considering the key components of an effective integrated care system (ICS) and reflecting what a range of local leaders have told us about their experiences during the past two years, including the immediate and long-term challenges presented by the COVID-19 pandemic.

Leadership in the NHS

BMJ Leader 3(4), 2019

In healthcare, leadership is decisive in influencing the quality of care¹ and the performance of hospitals.² How staff are treated significantly influences care provision and organisational performance so understanding how leaders can help ensure staff are cared for, valued, supported and respected is important. Research suggests 'inclusion' is a critical part of the answer.

Case Studies

Seacroft Local Care Partnership

NHS Confederation, October 2024

Addressing socioeconomic challenges, promoting health equity and creating sustainable community support systems in Leeds.

West End Morecambe Big Local

NHS Confederation, October 2024

A resident-led initiative collaborating to build social capital and create sustainable solutions to socioeconomic challenges.

W12 Together

NHS Confederation, October 2024

Listening to communities and building social capital in West London.

Northwood Together Big Local

NHS Confederation, October 2024

Listening to communities to address social, economic, and health-related challenges in Liverpool.

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Cultural transformation as part of the People Promise

NHS Employers, July 2024

Learn how Shrewsbury and Telford Hospital NHS Trust set about changing its culture following poor NHS Staff Survey results.

Building a culture of continuous improvement at Berkshire Healthcare NHS Foundation Trust

Berkshire Healthcare NHS Foundation Trust, March 2024

Berkshire Healthcare set out to establish, refine and embed an approach to QI that would deliver the improvement in care and outcomes required, but would also engage, motivate and empower colleagues to lead continuous improvement in their daily work.

Improving retention through staff engagement: a Do OD case study

NHS Employers, January 2024

Find out how one trust focused on organisational development leading to enhanced retention and increased staff engagement.

Innovation through robotic-assisted operations to address health inequities

NHS Confederation, January 2024

Robotic-assisted surgery is improving access to the best possible care across the Black Country and helping to reduce health inequities.

Using population health data to underpin transformation change

NHS Confederation, November 2023

Identifying and supporting high needs groups in Cheshire and Merseyside through detailed data analysis.

Integrating care in the community: North Tees and Hartlepool NHS Foundation Trust

NHS Confederation, September 2023

Joining primary, secondary and social care to ensure patients are being treated at the right time in the right place and by the right professional.

Staff recognition awards and improving culture

NHS Employers, July 2023

Read how Essex Partnership University NHS Foundation Trust continues work on its commitment to enhance staff recognition and improve its culture.

Scalable innovation for mental health care and support

NHS Confederation, April 2023

NHS and public health services in Shropshire worked in partnership to provide early mental health intervention and rapid-access pathways.

Using peer review to strengthen clinical and care professional leadership arrangements

NHS Confederation, March 2023

How One Gloucestershire ICS used an external peer review in the development of its local framework for clinical and care professional leadership.

The Star for workforce redesign

More resources and tools are available in the **[insert appropriate sections]** section of [the Star](#)

National Data Programme

Workforce, Training and Education staff can look at the [National Data Warehouse \(NDL\)](#) SharePoint site to find out more about datasets and Tableau products.

Published Peer Reviewed Research

Brexit impact and political pressure

Brexit three years on: Health and the NHS are still suffering

Publication date: 2023

A clear majority of the British public, 62% as of January 2023, now think that Brexit was a mistake. And this is before many of the provisions of the Trade and Cooperation Agreement, such as incoming border checks, have even been implemented by the UK; some arrangements, such as on financial services, that have been given a few years grace period, will eventually expire. New provisions that will create new trade barriers, including those related to energy intensive industries, will be introduced.

NHS crisis: are professionals and politicians prepared to change and lead?

BMJ, 2023

Patients need the NHS to improve and for this to happen both the professionals and the politicians will have to accept the need for change. We sometimes forget that patients are customers, not just service users. Customers exercise choices and this improves the service that they receive.

NHS crisis: Government must fix longstanding problems for integrated care systems to succeed, say MPs

BMJ, 2023

The latest restructuring of the NHS in England will not succeed unless the government acts to tackle longstanding problems in the service, a committee of MPs has warned. The House of Commons Public Accounts Committee said that the case had not yet been made for what improvements the new integrated care systems would bring to patients and by when.

Brexit adds further complexity to the health and care staffing crisis

BMJ, 2023

Health systems in the UK have a long standing dependency on international staff, and over the decades this has tended to intensify at times of shortage. Today is no exception, but this period of shortfall coincides with departure from the European Union (EU)—causing rapid, and at times, concerning changes in patterns of recruitment.

Challenges of Brexit for a medical fellowship in the United Kingdom

Health Policy & Services, 2023

To mitigate the negative effects of Brexit on doctors, the UK medical system and health policy makers must take early measures. Such measures may include continued recognition of medical qualifications from the European Economic Area, preservation of the quality of NHS employment, continued UK participation in research programmes funded by the European Union, eradication of ethnic intolerance and discrimination, as well as provision of equal opportunities for career progression. Ensuring that the NHS remains an attractive destination for international medical practitioners is closely related with maintaining high standards of patient care.

Reviving the NHS—lessons from Labour 1997-2005

BMJ, 2023

We have a great deal to learn from the period 1997 to 2005 when, as the King's Fund has reported, the English NHS began the greatest improvement in its history.

Has Brexit affected the UK's medical workforce?

Nuffield Trust, 2022

The findings suggest that stagnation in the number of EU doctors in these specialties has exacerbated existing shortages in areas

where the NHS has not been able to find enough qualified staff elsewhere. While deeper research into drivers of migration is needed, it appears likely that the decision to leave the EU in 2016 plays a role.

The UK National Health Service's migration infrastructure in times of Brexit and COVID-19: Disjunctures, continuities and innovations

International Migration 61(3), 2022

Brexit and the pandemic are distinctive phenomena with differentiated implications for migrant nurses: the former specifically affecting EU nurses' rights and the latter disrupting the recruitment process and international travel. However, Britain's separation from the EU's single market and the start of the pandemic occurred within overlapping time intervals. Such a temporal proximity justifies a joint Brexit-COVID-19 analysis of changing dynamics of nurse migration to the UK.

Brexit and the NHS: voting behaviour and views on the impact of leaving the EU

British Politics 18, 2022

This paper examines three aspects of Brexit with regards to the NHS. First, we consider the influence of views regarding one of the most contentious issues in the referendum campaign: Vote Leave's claim that the 'savings' from EU membership could alternatively be used to provide additional funding for the NHS.

The costs of Brexit make severe challenges even harder for the NHS and social care

Nuffield Trust, 2022

Brexit has compounded the already severe difficulties faced by the NHS and social care confronting recovery from the pandemic and the economic shocks of the cost-of-living crisis and the Truss government mini-budget.

Brexit and the European National Health Service England Workforce: A Quantitative Analysis of Doctors' Perceived Professional Impact and Intentions to Leave the United Kingdom

Annals of Global Health 87(1), 2021

Although survey data suggest that Brexit has negatively influenced European doctors' decisions to remain in the United Kingdom, this is the first quantitative study to use multivariate analysis to explore this relationship.

Understanding the impact of Brexit on health in the UK

Nuffield Trust, 2020

Our research confirms the well-known issues Brexit raises in many areas, from medicine supplies to data flows. Most, though not all, are relevant whether or not an agreement on a future relationship is reached between the UK and EU at this late stage.

Digital development and innovation

After the disruptive innovation: How remote and digital services were embedded, blended and abandoned in UK general practice - longitudinal study

Health and Social Care Delivery Research, 2025

Background: United Kingdom general practices transitioned rapidly to remote-by-default services in 2020 and subsequently considered whether and how to continue these practices. Their diverse responses provided a unique opportunity to study the longer-term embedding, adaptation and abandonment of digital innovations. Research questions: What was the range of responses to the expansion of remote and digital triage and consultations among United Kingdom general practices in the period following the acute phase of the coronavirus disease discovered in 2019 (COVID-19) pandemic? What can we learn from this example about the long-term impacts of crisis-driven sociotechnical change in healthcare settings?

Unlocking data: Decision-maker perspectives on cross-sectoral data sharing and linkage as part of a whole-systems approach to public health policy and practice

Public Health Research (Southampton, England), 2024

Background: Secondary data from different policy sectors can provide unique insights into the social, environmental, economic and political determinants of health. This is especially pertinent in the context of whole-systems approaches to healthy public policy, which typically combine cross-sectoral collaboration with the application of theoretical insights from systems science. However, the sharing and linkage of data between different sectors are still relatively rare. Previous research has documented the perspectives of researchers and members of the public on data sharing, especially healthcare data, but has not engaged with relevant policy and practice decision-makers.

Advancing the digital and computational capabilities of healthcare providers: A qualitative study of a hospital organisation in the NHS

Digital Health, 2023

The paper identifies a general set of institutional readiness criteria that can guide future hospital leaders and innovators aiming to improve their organisation's digital and computational capability. The paper also illustrates the challenges of pursuing digital and computational innovation in resource-constrained hospital environments.

Protecting the NHS from Cyber Attacks: A strategy on cyber resilience for health and social care organizations has been set out by the UK government. Abstract only*

Pharmaceutical Technology Europe 35(5), 2023

Given that cyber security underwrites public trust in digital services and technologies, the new cyber strategy sets out a vision for reducing the cyber security risk to health and social care organizations across the Department of Health and Social

Care (DHSC), National Health Service (NHS) organizations, local authorities, independent social care providers, and suppliers--which includes pharmaceutical manufacturers.

Digital technologies and healthcare architects' wellbeing in the National Health Service Estate of England during the pandemic

Froniters in Medical Technology 5, 2023

In the niche area of healthcare architecture, architects were in their busiest year. Yet, the DTs available to them then could only support limited tasks and did not link well to operational data.

Microsoft Teams and team performance in the COVID-19 pandemic within an NHS Trust Community Service in North-West England Abstract only*

Team Performance Management, 2022

The findings indicate that Teams made a positive impact to the team at a time of heightened clinical pressures and working in unfamiliar environments without the supportive benefits of face-to-face contact with colleagues in terms of incidental knowledge sharing and health and well-being.

Evaluating the impact of organisational digital maturity on clinical outcomes in secondary care in England

Npj Digital Medicine 2(41), 2019

Organisational digital maturity is to some extent related to selected clinical outcomes in secondary care in England. Digital maturity is, however, also strongly linked to other institutional factors that likely play a greater role in influencing clinical outcomes. There is a need to better understand how health IT impacts care delivery and supports other drivers of hospital quality.

Effective Organisational Development and Delivery

Organisational drivers of performance in mental health providers

Journal of Health Organisation and Management 37(2), 2023

This study suggests that the organisational approaches used to govern and manage mental health providers are associated with their performance, and the study's findings give clues as to what areas might need attention. They include, but are not limited to: developing appropriate governance frameworks and organisational cultures, ensuring that staff across the organisation feel "psychologically safe" and able to speak up when they see things that are going wrong; a focus on enhancing quality of services rather than prioritising cost-reduction; investing in new technology and digital applications; and nurturing positive inter-organisational relationships across the local health economy.

NHS restructuring—can our leaders make it work?

BMJ, 2022

The key to any systemic change always sits with its leaders and their vision, a lot of which is about convincing all and sundry to help deliver. And herein lies the crux of the issue: does the NHS have enough fresh faces or leaders who can make that happen? Shuffling around new titles or colours of lanyards won't get us anywhere.

A study of the implementation of patient safety policies in the NHS in England since 2000: what can we learn?

Journal of Health Organisation and Management, 2022

The conceptual framework the authors illustrate, arising from this new contribution to the body of knowledge, can be translated into a novel self-assessment for individual NHS trusts to understand organisational development areas in the domain of patient safety improvement.

Developing an analytical framework to identify early warnings of serious problems with the quality and safety of care

International Journal of Health Governance 27(2), 2022

In Scotland, the Sharing Intelligence for Health and Care Group uses the analytical framework to collate their combined intelligence and shapes their discussions around the known signs of systemic failure and their early warning signs.

'Well, in dentistry the dentist is always the boss': a multi-method exploration of which organisational characteristics of dental practices most influence the implementation of evidence-based guidance

BMJ open 12(8), 2022

Evidence-based dental recommendations are not routinely translated into practice, with variable leadership and differing practice contexts being central to poor uptake. Guidelines should aim to tailor recommendations and implementation strategies to reflect the complexities and varying contexts that exist in primary care dentistry, thus facilitating the implementation of evidence-based guidance.

Understanding good leadership in the context of English care home inspection reports

Leadership Health Services, 2021

The analysis in this report offers a view of how the inspection regime implements its own guidance and how it assesses leadership. The reports, as public-facing documents, are artefacts of the inspection regime and critical not just as evidence of the practice of inspection but as influence on care home operations and the choices of care home residents and their families.

NHS 'Learning from Deaths' reports: a qualitative and quantitative document analysis of the first year of a countrywide patient safety programme

BMJ open 11(7), 2021

The wide variation in reporting demonstrates that some NSCTs have engaged fully with LfDs, while other NSCTs appear to have disengaged with the programme. This may reveal a disparity in organisational learning and patient safety culture which could result in inequity for bereaved families. Many themes identified from the LfDs reports have previously been identified by national and international reports and inquiries.

Longitudinal evaluation of a countywide alternative to the Quality and Outcomes Framework in UK General Practice aimed at improving Person Centred Coordinated Care

BMJ open 9(7), 2019

The SPQS scheme leveraged time savings and reduced administrative burden via discretionary removal of QOF incentives, enabling practices to engage actively in a number of schemes aimed at improving care for people with LTCs. We found no differences in the experiences of patients or healthcare professionals between SPQS and control practices.

Roles and behaviours of diligent and dynamic healthcare boards

Health Services Management Research 33(2), 2019

The study suggests leadership behaviours that lay the conditions for better organisation performance. We locate our findings within the wider theoretical debates about corporate governance, responding to calls for theoretical pluralism and insights into the effects of discretionary effort on the part of board members. We conclude by proposing a framework for the 'restless' board from a multi-theoretic standpoint, and suggest a repertoire specifically for healthcare boards.

Equality, Diversity and Inclusion

Increasing the ethnic diversity of senior leadership within the English National Health Service: using an artificial intelligence approach to evaluate inclusive recruitment strategies in hospital settings

Human Resources for Health 23(1), 2025

BACKGROUND: The English National Health Service (NHS) strives for a fair, diverse, and inclusive workplace, but Black and Minority Ethnic (BME) representation in senior leadership roles remains limited. To address this, a large multi-hospital acute NHS Trust introduced an inclusive recruitment programme, requiring ethnically and gender diverse interview panels and a letter to the Chief Executive Officer (CEO) explaining hiring manager's candidate choice. This generated large amount of valuable structured and free-text data, but manual analysis to derive actionable insights is challenging, limiting efforts to evaluate and improve such equality, diversity, and inclusion (EDI) recruitment initiatives.

It's ok to be different: Supporting black and minority ethnic nurses and midwives in their professional development in the UK

Abstract only*

Nurse Education in Practice 66, 2023

Findings highlight the value of a diverse workforce, and of an inclusive organisational culture being crucial for effective team work, and of overall benefit to workforce management. Finally, a collaborative initiative like this can successfully improve team work to deliver better patient care.

Inclusive leadership and voice behavior: The role of psychological empowerment

Journal of Social Psychology 163(2), 2023

Using the data collected from 252 employees and their respective supervisors working in cargo companies across the

United Kingdom, this study finds a positive relationship between inclusive leadership and voice behavior. The results further confirm the mediating role of psychological empowerment in the relationship between inclusive leadership and voice behavior. We use causal attribution theory to support the findings and discuss implications for research and practice.

Public health women doctors in England: from backwater to strategic roles in 20 years Abstract only*

Journal of Public Health 44(Suppl 1), 2022

This paper outlines the history of public health medicine in England between 1974 and the 1990s when, through a combination of design, and happenstance in response to organizational changes, a gender-neutral specialty was created, benefiting both men and women, and enabling the latter, in particular, to flourish.

Women in neurosurgery in the United Kingdom: past, present and future Abstract only*

Journal of Neurological Sciences 66(3), 2022

In this article we present a snapshot of women who have played, and who are playing, a key role in UK neurosurgery, highlighting their diverse career paths. We also present the current training distribution and subspecialties of women in UK neurosurgery. We use these data to reflect upon the possible barriers to completion of neurosurgical training, obtaining a substantive consultant position, and reaching positions of academic and clinical leadership.

Motivators and deterrents for early career female doctors applying to surgical training programmes in the UK National Health Service: a mixed-methods study

BMJ Open 12(12), 2022

Thematic analysis suggested that seniors involving women in theatre and a supportive work environment would encourage

entry of more female surgeons. Therefore, the proposed implementations are the active engagement of women in theatre and destigmatising less than full-time training. Further research into ethnicity and personality on motivations to enter surgery is advised.

Implementing the HEART score in an NHS emergency department: can identity leadership combined with quality improvement promote racial equality? Abstract only*

Leadership Health Services, 2022

The results demonstrated significant improvements in the reduction (60%) of waiting time by chronic chest pain patients in the ED. The use of the HS as a stratified risk assessment tool resulted in a more efficient and safe way to manage patients. There are specific leadership challenges faced by an MTI doctor when they arrive in the NHS, as the MTI doctor is considered an outsider to the NHS, with reduced influence. Drawing upon the Social Identity Theory of Leadership, NHS Trusts can introduce inclusion strategies to enable greater alignment in social identity with doctors from overseas.

It is not Black and White: A spotlight on racial diversity in paediatrics

Journal of Paediatric Child Health 58(8), 2022

We explore key areas of concern including differential attainment and the under-representation of paediatricians from minoritised ethnic groups in leadership roles. We use the recent measures adopted by the Royal College of Paediatrics and Child Health in the United Kingdom as a framework for achieving inclusive work environments and equitable opportunities for all paediatricians.

Women in neurosurgery: where does the United Kingdom stand?

Journal of Neurosurgery 50(3), 2021

The authors set out to explore the opinions and attitudes of UK neurosurgeons and neurosurgery trainees on gender issues via

a large-scale national survey. The results highlight key perceptions and gaps in mentorship and leadership and provide ideas for change.

What it means to be an ally Abstract only*

British Journal of Nursing 30(7), 2021

Sam Foster, Chief Nurse, Oxford University Hospitals, considers what it takes to be an ally of people in less privileged groups in the workplace.

Reaching A Female Majority: A Silent Transition for Dentistry in the United Kingdom

Primary Dental Journal 10(2), 2021

A collaborative effort between the dental profession and wider health systems is required to ensure that there are opportunities for everyone to flourish and contribute back to the profession and society. Our medical counterparts have been considering how healthcare should be shaped creatively, particularly in relation to working patterns, economic models and quality patient care: we need to catch up.

On leadership that leads to racial justice

The King's Fund, 2021

The conversation about leadership needs to change – thinking through what leadership is for, and how to determine what good looks like. This straight-talking blog is aimed at leaders who want to 'get it' on inclusion. It's candid because its purpose is to provoke leaders to lead better for racial justice.

Diversity in NHS clinical leadership: Is better talent management the route to gender balance?

BMJ Leader 4(2), 2020

Gender diversity in leadership can be enhanced through the combination of several measures; Increased mentorship, talent

management, training and network opportunities, improvements to advertising, interview panel diversity and succession planning.

Ethnic inequalities in health: should we talk about implicit white supremacy? Abstract only*

Postgraduate Medical Journal 96(1132), 2020

If you live in the United States or the United Kingdom and have black or brown skin, your health is likely to be poorer on average than if you have white skin. You are also likely to receive healthcare of a lower standard. The statistics are dismal.

Inclusive leadership: how ready are we to learn?

The King's Fund, 2019

Speaking truth to power, we have some work to do on inclusion. At times it appears that we're not all on the same page about what is meant by 'inclusion' and, importantly, what we should expect to see as evidence of inclusive practice from leaders.

Funding, resource and finance

Is return on investment the appropriate tool for healthcare quality improvement governance? Abstract only*

International Journal of Health Governance 29(3), September 2024

Purpose: In this article, we outline our views on the appropriateness and utility of Return on Investment (ROI) for the evaluation of the value of healthcare quality improvement (QI) programmes.

Long-term projections of health care funding, bed capacity and workforce needs in England

Health Policy 132, 2023

Changes in population structure and underlying health put a significant strain on health care system resources. In this context, projecting future health care needs can contribute to

better health care system planning and resource allocation over the long term. This paper presents a model of future demand and costs of care to estimate long-term funding and resource needs up to 2030/31.

How inflation threatens the NHS and what policy makers can do about it

BMJ, 2023

Inflation in the UK has soared to a rate not seen in four decades. Growth in the consumer price index (CPI), which captures price changes across a standard basket of household goods and services, reached a peak of 11.1% between October 2021 and October 2022 and remains above historical averages.

Invest in health workforce or risk collapse, WHO warns governments

BMJ, 2023

With quickly ageing populations and an ageing health workforce—40% of doctors in Europe are close to retirement in a third of countries—along with a surge in chronic illnesses and the ongoing effects of the covid pandemic, WHO warned that many countries could soon see their healthcare systems collapse unless they take urgent action.

Budget fails to tackle workforce shortages and NHS funding, say critics

BMJ, 2023

Leading doctors, patients' groups, and health analysts have rounded on the UK chancellor of the exchequer, Jeremy Hunt, for ignoring critical pressures on NHS staffing and funding in his spring budget. They said that Hunt's failure to publish an NHS workforce plan on 15 March, alongside a financial statement that was billed as boosting work in the wider economy,

Cutting investment in the social care workforce will undermine the NHS recovery plan

BMJ, 2023

A major societal concern of our time is making health and social care systems fit to meet the needs of people with long term conditions, frailty, and disability. In the UK, during 2022, it was estimated that nearly 27 000 excess deaths occurred because of systemic pressures on NHS emergency departments.

Challenges and chances for local health and social care integration – Lessons from Greater Manchester, England

Journal of Integrated Care 30(2), 2022

This study argues that the success of pooled budgets is the result, rather than the cause, of effective negotiations between various stakeholders; and therefore, there is no evidence suggesting that pooled budgets can resolve the discoordination of health and social care. Moreover, due to the bottom-up approach adopted by STPs, more effective boroughs tend to receive additional funding, resulting in an increasing gap of development between effective and ineffective boroughs.

The challenges facing the NHS in England in 2021

BMJ, 2021

Some might say that reforms are unaffordable with the level of government debt that has built up in response to covid-19. But neither tinkering nor measures merely to restore the health and care system to its pre-covid status will do. Only a programme with an ambition that matches the scale of current challenges will enable the NHS to cope with immediate and intense pressures and build back better for the future.

Implementing change, reform and innovation

Advancing Quality and Safety Culture in Healthcare: Insights From the Evaluation of an Improvement Science Program for Nurses and Midwives Abstract only*

Journal of Advanced Nursing 81(6), 2025

Aims: This paper presents the outcomes and insights gained from the implementation of an Improvement Science program tailored for nursing and midwifery staff within a large local health district in New South Wales. The programme aimed to enhance frontline clinicians' confidence and capability in quality improvement, ultimately improving patient outcomes and safety culture., DESIGN: Through an explanatory sequential mixed-methods evaluation study, we assessed the programme's effectiveness in building capacity, sustaining practice changes and fostering a culture of continuous improvement.

Investing in staff and innovation is crucial to developing service delivery Abstract only*

British Journal of Nursing (Mark Allen Publishing) 34(9), 2025
Vision, planning and a focus on staff wellbeing is essential if the nursing and midwifery professions are to meet the challenges of tomorrow. Chief Nursing Officers for Scotland, Wales, Northern Ireland and England Anne Armstrong, Sue Tranka, Maria McIlgorm and Duncan Burton reflect on the importance of supporting nurses and midwives as their professions evolve to meet patient need.

Rapid evaluation of the NHS Recovery Support Programme (RSP) in England: Implementing intensive national improvement support for challenged healthcare providers and systems

Health Policy 155, 2025

Launched in 2021, the Recovery Support Programme (RSP) provides mandated intensive improvement support to NHS healthcare providers and systems in England experiencing

significant financial, quality or safety failings. The aim is to prevent further deterioration, embed improvement and to enable sustained stabilisation. We conducted a rapid multi-method study to evaluate the early implementation of the RSP to understand initial impact and identify further developments which could improve its delivery. We found that whilst the RSP is generally perceived as more supportive and less punitive than the special measures regime it replaced, there are areas where its delivery could be enhanced.

Enablers and Barriers to an Experience-Based Co-Design Process to Develop Service Improvements in Enhanced Community Care in Ireland: A Qualitative Study

Health Expectations : An International Journal of Public Participation in Health Care and Health Policy 28(2), 2025
BACKGROUND: Experience-Based Co-Design (EBCD) is a popular collaborative process where service users and healthcare providers share their experiences of using and delivering services to identify ways to adapt services to enhance those experiences., OBJECTIVE: This study aimed to identify enablers and barriers to the successful implementation of EB CD as part of Ireland's recently adopted Enhanced Community Care (ECC) programme., DESIGN: Service users and staff at two sites (N = 17) participated in an accelerated EB CD process designed to enhance service provision for older people and those living with chronic conditions. This included four co-design working group sessions per site.

New models of health and social care for people in later life: mapping of innovation in services in two regions of the United Kingdom using a mixed method approach

BMC Health Services Research 24(1), 2024

BACKGROUND: Innovation for reforming health and social care is high on the policy agenda in the United Kingdom in response to the growing needs of an ageing population. However,

information about new innovations of care being implemented is sparse., METHODS: We mapped innovations for people in later life in two regions, North East England and South East Scotland.

The use of positive deviance approach to improve health service delivery and quality of care: a scoping review

BMC Health Services Research 24(1), 2024

BACKGROUND: Quality has been a persistent challenge in the healthcare system, particularly in resource-limited settings. As a result, the utilization of innovative approaches is required to help countries in their efforts to enhance the quality of healthcare. The positive deviance (PD) approach is an innovative approach that can be utilized to improve healthcare quality. The approach assumes that solutions to problems are already available within the community and identifying and sharing those solutions can help others to resolve existing issues. Therefore, this scoping review aimed to synthesize the evidence regarding the use of the PD approach in healthcare system service delivery and quality improvement programs.

Implementation of large, multi-site hospital interventions: a realist evaluation of strategies for developing capability

BMC Health Services Research 24(1), 2024

BACKGROUND: This study presents guidelines for implementation distilled from the findings of a realist evaluation. The setting was local health districts in New South Wales, Australia that implemented three clinical improvement initiatives as part of a state-wide program. We focussed on implementation strategies designed to develop health professionals' capability to deliver value-based care initiatives for multisite programs. Capability, which increases implementers' ability to cope with unexpected scenarios is key to managing change.

Investigating innovations in outpatient services: a mixed-methods rapid evaluation

Health and Social Care Delivery Research 12(38), 2024

BACKGROUND: Within outpatient services, a broad range of innovations are being pursued to better manage care and reduce unnecessary appointments. One of the least-studied innovations is Patient-Initiated Follow-Up, which allows patients to book appointments if and when they need them, rather than follow a standard schedule. OBJECTIVES: To use routine national hospital data to identify innovations in outpatient services implemented, in recent years, within the National Health Service in England. To carry out a rapid mixed-methods evaluation of the implementation and impact of Patient-Initiated Follow-Up.

Lessons learned from implementing a Human Factors programme into an NHS trust* Abstract only*

Ergonomics, 2024

The interest in employing Human Factors (HF) in healthcare is increasing. There are very few papers that outline an approach to embedding the practical application of HF in healthcare and the lessons that can be learned. The SCReAM HF and Team Resource Management (TRM) programme is not only aimed at raising the awareness and understanding of the science of HF within healthcare, but also to embed its practical application to support staff improve their safety and wellbeing and that of their patients.

Building capacity and capability for quality improvement: developing an organisational approach

British Journal of Health Care Management 29(6), 2023

There has been an increase in the adoption of quality improvement methods to tackle complex problems in healthcare. One of the key requisites for sustainable quality improvement is ensuring that organisations have the capacity and capability to make these changes effectively. This article uses a case study

methodology to describe the learning from 9 years of developing, delivering and evaluating quality improvement learning programmes at East London NHS Foundation Trust.

“Success” in policy piloting: Process, programs, and politics

Public Administration 101(2), 2023

Research has demonstrated that pilots contain multiple shifting purposes, not all of which relate to simple policy testing or refinement. Judging the success of policy pilots is therefore complex, requiring more than a simple judgment against declared goals.

Evaluation of the NHS England evidence-based interventions programme: a difference-in-difference analysis

BMJ Quality & Safety 32(2), 2023

Our analysis shows that the EBI programme did not accelerate disinvestment for procedures under its remit during our period of analysis. However, we find that financial and organisational factors may have had some influence on the degree of responsiveness to the EBI programme.

The Collaborative Care Model: Realizing healthcare values and increasing responsiveness in the pharmacy workforce Abstract only*

Research in Social & Administrative Pharmacy 19(1), 2023

The paper describes an emerging workforce vision, the Collaborative Care Model. This new model defines a systems-first-approach, built on the principle that all jobs must include all four professional 'pillars'. Vertical skills integration, involving education and task sharing, supports sustainability and succession planning. Horizontal skills integration (across practice, leadership/management, education, and research) is included to improve responsiveness to population need and individual professional agency.

Co-creating system-wide improvement for people with traumatic brain injury across one integrated care system in the United Kingdom to initiate a transformation journey through co-production

Health Expectations 26(2), 2023

The co-produced recommendations made within the implementation and impact framework described here provide a means by which the culture and delivery of health and social care services can be better tailored to meet the needs of people living with TBI. We believe that the recommendations will help shape the formation of new services as well as the development of existing ones.

Evaluation of the effect of a Nursing System Framework on Nurse Sensitive Indicators, mortality and readmission in an NHS Trust

Nursing Open 10(2), 2022

In 2018, an NHS Trust (UK) implemented an innovative Nursing System Framework (NSF). The NSF formalized a two-year strategy, which provided teams with clear aims and measurable objectives to deliver care. Failures of coordination of nursing services are well-recognized threats to the quality, safety and sustainability of care provision.

The organisation of nurse staffing in intensive care units: A qualitative study Abstract only*

Journal of Nursing Management 30(5), 2022

Whilst nurse:patient ratios were clearly used to set the nursing establishment, it was clear that rostering and allocation/re-allocation during a shift took into account many other factors, such as patient and family nursing needs, staff well-being, intensive care layout and the experience, and availability, of other members of the multi-professional team.

Navigating new organisation forms: a qualitative study of primary care networks

BJGP Open 6(2), 2022

Four key themes were identified: defining purpose and managing ambiguity; bureaucracy versus local autonomy; relational working; and facilitative leadership. The need for purpose setting to remain adaptive was seen as crucial in avoiding the constraints of too rigid a structure in order to retain local ownership, while remaining focused around meeting complex population needs and reducing variation. Participants reported navigating their way through striking a balance between the 'top-down' mandate and recognising local need. Of importance to the success of PCNs was the necessity of effective relational working and facilitative leadership.

Upstreamist leaders: how risk factors for unscheduled return visits (URV) to the emergency department can inform integrated healthcare

Leadership in Health Services, 2022

The URV data combined with "upstreamist" system leadership from the ED is required as a critical mechanism to identify gaps and inform a rationale for integrated care models to lessen further demand on emergency services in the ED.

Developing and leading ICSs - GGI and Coventry University

Good Governance, 2022

This short briefing paper summarises the key discussion points that arose from a panel discussion hosted by GGI and Coventry University on 17 November 2021. The event focused on the leadership and workforce challenges associated with the development of Integrated Care Systems (ICSs) with three seminal speakers framing the conversation for a live audience.

Learning lessons from the paediatric critical care response to the SARS-CoV-2 pandemic in England and Wales: a qualitative study

Archives of Disease in Childhood 107(3), 2022

During the 2020 SARS-CoV-2 pandemic, an agile response to a rapidly changing situation was enabled through effective clinical leadership and an adaptive workforce. Open systems of communication across senior clinical and management teams facilitated service planning. Support for all members of the workforce through implementation of appropriate and innovative education and well-being solutions was vital in sustaining resilience.

'The WOW factors': comparing workforce organization and well-being for doctors, nurses, midwives and paramedics in England

British Medical Bulletin 141(1), 2022

Multi-level systems approaches to well-being are required that consider intersectionality and structural differences between professions; together with inter-professional national databases to facilitate monitoring.

A grounded theory study on midwifery managers' views and experiences of implementing and sustaining continuity of carer models within the UK maternity system.

Women and Birth 35(5), 2022

Providing the appropriate support for Midwifery Continuity of Carer (MCoCer) is time consuming and personally demanding for midwifery managers, however, implementing and sustaining MCoCer was shown by participants who valued MCoCer models to be rewarding, bringing meaning to their midwifery leadership.

Early evidence of the development of primary care networks in England: a rapid evaluation study

Health and Social Care Delivery Research 10(27), 2022

Primary care networks have mobilised swiftly and developed new services for patients but challenges include sustaining GP support, securing management and leadership capacity, and clarifying their role within the NHS.

A comparison of 2020 health policy responses to the COVID-19 pandemic in Canada, Ireland, the United Kingdom and the United States of America

Health policy 126(5), 2022

Our analyses reveals that all countries faced a number of challenges in putting in place requirements for an effective pandemic response, including rapidly scaling-up testing capacity, implementing effective and joined-up test, trace and isolate systems, ensuring adequate supplies of PPE and other essential equipment and creating surge capacity. Many of these issues were exacerbated by countries entering the COVID-19 pandemic with shortages of health workers, insufficient hospital capacity and inadequate pandemic stockpiles.

Clinical and care professional leadership in integrated care systems

NHS Confederation, 2021

This report from the NHS Confederation was commissioned by NHS England and NHS Improvement (NHSEI) in November 2020, to inform its guidance to support embedding system-wide clinical and professional leadership in all integrated care systems (ICSs).

Will it work here? A realist approach to local decisions about implementing interventions evaluated as effective elsewhere Full text available with NHS OpenAthens account*

Journal of Epidemiology and Community Health 75(1), 2021

There is increasing interest in what evidence is needed to inform decisions about transporting interventions evaluated as effective to new settings. There has been less attention to how local

decision-makers decide whether to implement such interventions immediately or subject to further evaluation.

Senior clinical and business managers' perspectives on the influence of different funding mechanisms, and barriers and enablers to implementing models of employing General Practitioners in or alongside emergency departments: Qualitative study

Health Policy 125(4), 2021

Funding mechanisms and the flow of funds were reported as complex, especially in Inside-parallel GP models. The most efficient mechanisms were described at departments where funding was unified, in collaboration with health and community care services. Staffing with local, experienced GPs was important. There were cautions from experiences with private locum providers.

Lessons in cognitive unloading, skills mixing, flattened hierarchy and organisational agility from the Nightingale Hospital London during the first wave of the SARS-CoV-2 pandemic

BMJ Open Quality 10(3), 2021

In response to rapidly changing circumstances, the NHL mandate required hospital leaders, redeployed staff and non-clinical volunteers to rethink inherited wisdom—to harness their capacity for agility, creativity and change. Driven by necessity and adversity, the NHL was the setting of important, unforeseen and often emergent innovation.

Integrating primary care and social services for older adults with multimorbidity: a qualitative study Abstract only*

BJGP 71(711), 2021

Drivers of integration included groups of like-minded individuals supported by good leadership, expanded interface roles to bridge gaps between systems, and co-location of services. Barriers included structural and interdisciplinary tension between

professions, organisational self-interest, and challenges in record sharing.

Reducing variations in clinical nurse educator roles: a service improvement project standardising roles and career pathways

Abstract only*

British Journal of Nursing 30(12), 2021

This service improvement project demonstrates that a standardised approach to the implementation of CNE roles can be achieved with the support of a unified senior nursing team. Clearer role definition and career progression pathways would improve job satisfaction and may help retain CNEs in post.

Variation in referral rates to emergency departments and inpatient services from a GP out of hours service and the potential impact of alternative staffing models

Emergency Medicine Journal 38(10), 2021

There is substantial variation in clinician referral rates from OOHs primary care to the acute hospital setting. The number of patients referred could be influenced by this variation in clinician behaviour. Referral propensity should be studied including casemix adjustment to determine if interventions targeting such behaviour are effective.

Why healthcare leadership should embrace quality improvement

BMJ, 2020

QI depends on engaging and empowering the teams delivering care and equipping them with the tools and skills they need to improve care pathways. Ultimately, it means trusting professionals' knowledge and judgment of what patients need and allowing them to make decisions, including the allocation of resources, with appropriate accountability.

Workforce experience of the implementation of an advanced clinical practice framework in England: a mixed methods evaluation

Human Resources for Health 18(96), 2020

Advanced clinical practice was considered by many respondents the only viable clinical career progression. Respondents felt that employers were not clear about what practicing at this level involved or its future direction. Efforts to establish further clarity and structure around advanced clinical practice are needed for both the individuals practising at this level and their employers.

Surgical training rotation design: effects of hospital type, rotation theme and duration

BJS Open 4(5), 2020

Longer rotations with a single educational supervisor, in one training centre, are associated with better workplace productivity. Consideration should be given to this when reconfiguring training programmes within the arena of workforce planning.

Workforce predictive risk modelling: development of a model to identify general practices at risk of a supply–demand imbalance

BMJ Open 10(1), 2020

Predictions using current data suggested that, on average, practices at highest risk of future supply–demand imbalance are currently characterised by having larger patient lists, employing more nurses, serving more deprived and younger populations, and having considerably worse patient experience ratings when compared with other practices. Incorporating findings from a survey of GP's career intentions made little difference to predictions of future supply–demand risk status when compared with expected future workforce projections based only on routinely available data on GPs' gender and age.

Organisational development to support integrated care in East London: the perspective of clinicians and social workers on the ground

Journal of Health Organisation and Management 34(5), 2020
Initiatives of bottom-up OD such as those described in this paper have greater potential to change working routines as they enable staff to move towards more collaborative and coordinated work.

How do frontline staff use patient experience data for service improvement? Findings from an ethnographic case study evaluation

Journal of Health Services Research & Policy 25(3), 2020
Organizational recognition, or rejection, of specific forms of patient experience intelligence as 'data' affects whether staff feel the data are actionable. Teams combining a diverse range of staff generated higher levels of 'team-based capital' for quality improvement than those adopting a single disciplinary approach. This may be a key mechanism for achieving person-centred improvement in health care.

COVID-19 in the UK and Occupational Health and Safety: Predictable not Inevitable Failures by Government, and Trade Union and Nongovernmental Organization Responses

New Solutions 30(2), 2020
This commentary examines the occupational health and safety issues faced by the UK workers in the COVID-19 pandemic, against the background of government cuts in health care and in occupational health and safety budgets, and a deregulatory climate. The UK government has been obsessed, blinkered, and distracted by the desire to leave the European Union (Brexit). The state of knowledge about the virus, especially from international agencies that identified pandemic threats and strategies to combat it, is outlined.

New Voices, New Power, New Ways of Working: Bringing integrated care to the National Health Service in England

Healthcare Quarterley 21(4), 2019

There is increasing agreement that integrating health and social services is an essential step in improving the health of citizens and the sustainability of healthcare. But Helen Bevan, the chief transformation officer of England's National Health Service (NHS), wants to see some radical shifts in how we approach that change.

Integrated care: mobilising professional identity Abstract only*

Journal of Health Organisation and Management 32(5), 2018

Recommendations in terms of how healthcare professionals manage and mobilise their Professional Identity when working in integrated teams are somewhat scarce. This paper identifies the key factors that influence PI which could impact the performance of integrated teams and ultimately, patient care.

Integrated Care

"We have to change our mindsets": a qualitative study of barriers and facilitators in research collaboration across integrated care system organisations

BMC Health Services Research 24(264), 2024

The introduction of Integrated Care Systems (ICS) in England aimed to increase joint planning and delivery of health and social care, and other services, to better meet the needs of local communities. There is an associated duty to undertake collaborative research across ICS partners to inform this new integrated approach, which might be challenging given that organisations span health, local authority, voluntary and community sector, and research. This study aimed to explore the appetite for collaborative Research and Innovation (R&I) across ICSs, potential barriers and solutions.

Assessing progress in managing and improving quality in nascent integrated care systems in England

Journal of Health Services Research and Policy 29(2), 2024

Objectives: In 2022, England embarked on an ambitious reorganisation to produce an integrated health and care system, intended also to maximise population health. The newly created integrated care systems (ICSs) aim to improve quality of care, by achieving the best outcomes for individuals and populations through the provision of evidence-based services. An emerging approach for managing quality in organisations is the Quality Management System (QMS) framework. Using the framework, this study assessed how ICSs are managing and improving quality.

Ethical challenges and principles in integrated care

British Medical Bulletin 146(1), 2023

Integrated care is an established approach to delivery in parts of the healthcare infrastructure, and an ideal which, it is claimed, should be realized system-wide. Its ethical weight derives from its defence of a view about how healthcare ought to operate. Although the goal of integration is laudable, it is ethically and practically complex, involving trade-offs.

Shared leadership in integrated care networks: the case of “hub and spoke” networks in oral and maxillofacial surgery (OMFS) in the English NHS

Journal of Integrated Care 31(2), 2023

The paper identifies the challenges that may be faced by policymakers and those involved in the hub and spoke network in developing shared leadership. It also reveals the implications for policymakers in developing shared leadership.

Developing architecture of system management in the English NHS: evidence from a qualitative study of three Integrated Care Systems

BMJ Open 13(2), 2023

There remain significant challenges regarding agreeing governance, accountability and decision-making arrangements which are particularly important due to the recent Health and Care Act 2022 which gave ICSs allocative functions for the majority of health resources for local populations. An arbiter who is independent of the ICS may be required to resolve disputes, along with increased support for shaping governance arrangements.

Access to hip and knee arthroplasty in England: commissioners' policies for body mass index and smoking status and implications for integrated care systems

BMC Health Services Research 23(77), 2023

Commissioning policies are in place in England that alter access to hip and knee arthroplasty based on patients' body mass index and smoking status. Our objectives were to ascertain the prevalence, trend and nature of these policies, and consider the implications for new integrated care systems (ICSs).

Learning from long COVID: integrated care for multiple long-term conditions

British Journal of General Practice 73(730), 2023

Long COVID is a multisystem condition requiring a range of medical, therapeutic, and psychological inputs. Given the complexity of the illness affecting multiple organ systems, often impacting physical and mental health, individuals can be heavy healthcare users across primary, secondary, and emergency services.

Editorial: Integrated care – power to the patients?

Journal of Integrated Care 31(2), 2023

Looking back over these days in the Belgium city of Antwerp, I am struck in particular by the way in which patients themselves have moved centre stage in many integrated care programmes and discussions. Increasingly, the role of patients in designing and producing care is emphasised and receives attention, be it through a renewed focus on their health literacy, their competencies to navigate still fragmented health systems or their ability to deal with organisational or professional boundaries.

Integrated care systems: can they deliver?

BJPsych Advances 29(1), 2022

This commentary is a response to three articles on integrated care systems in this journal. It explores some aspects of the latest transformation of England's National Health Service (NHS) and raises some questions on the extent to which the proposed NHS Long Term Plan can deliver on the current challenges.

Developing programme theories of leadership for integrated health and social care teams and systems: a realist synthesis

Health and Social Care Delivery Research, 2022

Research into the leadership of integrated care teams and systems is limited and underdeveloped, with ideas often reverting to existing framings of leadership in which teams and organisations are less complex. In making explicit some of the assumptions about how leaders lead integrated care teams and systems this review has contributed significant new perspectives, offering fresh theoretical grounding that can be built on, developed and tested further.

The forgotten dimension of integrated care: barriers to implementing integrated clinical care in English NHS hospitals

Health Economics, Policy and Law 18(3), 2022

Multimorbid patients who enter English NHS hospitals are frequently subject to care pathways designed to assess, diagnose and treat single medical conditions. Opportunities are thereby lost to offer patients more holistic, person-centred care. Hospital organisations elsewhere are known to use in-hospital, multi-specialty, integrated clinical care (ICC) to overcome this problem.

Clinical leadership – a framework for action A guide for senior leaders on developing professional diversity at board level

NHS Improvement, 2021

We hope this guide helps senior leaders recognise that all professions can provide high calibre candidates for senior roles – particular when new senior teams are coming together to lead integrated care systems as part of delivering the Long Term Plan. We also hope it shows future leaders with clinical backgrounds what their journeys to senior positions could be like.

The move towards integrated care: Lessons learnt from managing patients with multiple morbidities in the UK

Health Policy 126(8), 2022

The multi-disciplinary care offered to patients with multi-morbidities offers a powerful example of the practical challenges faced by the National Health Service's planned move to more closely integrated models of care. The SELFIE framework has provided valuable insight into the challenges presented by inter-organisational and inter-professional working that will help guide the design and implementation of policies promoting integrated care. These may be mitigated by sharing the varied experiences and priorities that exist across primary and care settings, alongside improving communication and supporting collaborative leadership.

Organisational development to support integrated care in East London: the perspective of clinicians and social workers on the ground

Journal of Health Organization and Management 34(5), 2020
Initiatives of bottom-up OD such as those described in this paper have greater potential to change working routines as they enable staff to move towards more collaborative and coordinated work.

The shift to collaborative working and integration in the English NHS: developing shared leadership in primary care networks

Journal of Integrated Care 30(1), 2020
The paper identifies the challenges that may be faced by policymakers and those involved in Primary Care Networks in developing shared leadership. It also reveals the implications for policymakers in developing shared leadership.

Leadership and Management

Management development in the public sector: a systematic literature review Abstract only*

Journal of Management Development 44(3), June 2025
Purpose: In recent years, interest in the concept of management development and its impact on public organizations has increased. The researchers concluded that management development is necessary to improve the quality of public sector services. This systematic review summarizes the existing knowledge in the field of management development in the public sector to investigate the main justifications for its implementation and identify factors that contribute to or hinder its effectiveness in the public sector.

Workplace-based learning in district health leadership and management strengthening: a framework synthesis

Health Policy and Planning 40(1), 2025
Effective leadership and management has been identified as

critical in enabling health systems to respond adequately to their population needs. The changing nature of low- and middle-income countries' health systems, given resource scarcity, a high disease burden and other contextual challenges, has also led to learning-including workplace-based learning (WPBL)-being recognized as a key process supporting health system reform and transformation. This review used a framework synthesis approach in addressing the question: 'What forms of WPBL, support leadership and management development; and how does such learning impact district health leadership and management strengthening?'.

Integrating leadership into the undergraduate medical curriculum in the UK: a systematic review

BMJ Leader 8(3), 2024
Background: Leadership is a critical skill required of a doctor and is necessary for clinical and organisational development. Literature suggests that newly qualified doctors are not prepared for the leadership roles and responsibilities that they need to undertake in clinical practice. The opportunities to develop the necessary skillset should be available in undergraduate medical training and throughout a doctor's professional advancement. Various frameworks and guidance for a core leadership curriculum have been designed, but data on their integration in undergraduate medical education in the UK are minimal.

Developing coaching cultures: an exploration of the enacting practitioner perspective

Journal of Work-Applied Management, 2024
Purpose: Despite the popularity of facilitating coaching cultures, very little is known about this phenomenon, especially from the perspective of different organisational stakeholders. We aim to add the enacting practitioner perspective in developing coaching cultures that has not yet been explored through empirical research.

Exploration of the representation of the allied health professions in senior leadership positions in the UK National Health Service

BMJ Leader 8(2), 2024

BACKGROUND: Allied health professionals (AHPs) are an important group within the National Health Service (NHS) in the UK and make up a large portion of the workforce. Investment in AHP leadership is believed to lead to improvements in patient care, resource use, collaboration and innovation. This study aims to assess the current state of AHP strategic leadership within the NHS.

Contexts and complexities: a realist evaluation of integrated care system leadership Abstract only*

Leadership in Health Services, 2024

PURPOSE: This paper presents a realist evaluation of leadership within an integrated care system (ICS) in England. This paper aims to examine which aspects of leadership are effective, for whom, how and under what circumstances., DESIGN/METHODOLOGY/APPROACH: Realist evaluation methodology was used, adopting prior realist review findings as the theoretical framework to refine explanations of how and why leadership within an ICS is effective. Between January and November 2023, 23 interviews with ICS leaders took place, alongside 7 meeting observations and documentary analysis. The Realist And Metanarrative Evidence Syntheses: Evolving Standards (RAMESES) guidance informed the study design, conduct and reporting.

Redefining leadership within the NHS' complex adaptive system

Future Healthcare Journal 11(1), 2024

The NHS is continuously evolving and with it, traditional notions of leadership and management must be reimaged and redefined. In order to be effective leaders, however, we must first gain a [deeper understanding](#) of the context in which we lead and recognise how to navigate the system's intricacies. This article

explores the characteristics of Complex Adaptive Systems and how we can understand the patterns of these systems through our experiences leading in the NHS.

Antecedents of innovative work behaviour among leading physicians: empirical evidence from German hospitals Abstract only*

Health Services Management Research 37(2), 2023

Healthcare professionals' innovative work behavior (IWB) plays a key role in the development and implementation of innovative solutions in hospitals. However, relevant antecedents of IWB have not been fully captured to date. This study empirically examines the relationships between proactive personality, collaborative competence, innovation climate, and IWB.

Leadership practices and behaviours that enable and inhibit a continuous improvement culture in an NHS trust

BMH Leader 7(2), 2023

Background: Healthcare providers and systems globally are increasingly recognising the benefits of adopting continuous improvement methods to transform hospital services. Creating a continuous improvement culture relies on giving frontline staff the support and freedom to identify opportunities for positive, sustainable, change and the skills to enable action. This paper analyses the leadership behaviours and practices that support or inhibit the adoption of a continuous improvement culture, drawing on a qualitative evaluation within the outpatient directorate at one National Health Service (NHS) trust. Objective: Identify key leadership behaviours and practices that enable and inhibit a continuous improvement culture in healthcare settings.

Balancing a seesaw – leaders perspectives on design and traditional quality improvement in healthcare

The TQM Journal 35(9), 2023

Purpose: The purpose of this paper is to explore and describe the perspectives and reasoning of senior development leaders in healthcare organizations, when reflecting on design as theory and practice in relation to more traditional methods and tools for improving quality and support innovation.

[Systems leadership: how chief executives manage tension between organisation and system pressures](#) Full text available via NHS OpenAthens account*
BMJ Leader 7(1), 2023

AIM: System leadership is the requirement for a leader of a single organisation to operate on behalf of a wider system, rather than their individual organisation. The current policy landscape does not incentivise system leadership, as many national structures emphasise a focus on individual organisations. This study aims to understand how chief executives in the National Health Service (NHS) in England implement system leadership in practice when faced with decisions that benefit the system to the detriment of their own trust.

Learning Health Systems

[Learning health systems and learning organisations in post-acute rehabilitation care: a scoping review](#)

Disability and Rehabilitation, 2025

Purpose: This study aimed to assess the prevalence of literature applying LHS and learning organisation (LO) concepts to rehabilitation, gather definitions and core features, and document their application and resultant organisational changes.

Material(s) and Method(s): We searched five electronic databases and included peer-reviewed qualitative, quantitative, and mixed-methods studies, reviews, and grey literature in English. Full texts were screened, resulting in 27 included papers.

[Competitive intelligence: A precursor to a learning health system](#)
Abstract only*

Health Services Management Research 36(1), 2023

Unlike other developed countries, the US healthcare system is largely privatized and highly competitive. This dynamic stifles effective information sharing, while the need for prompt and accurate evidence-based decision making has become crucial. Crises, like the COVID-19 pandemic, elevate the importance of quality decision making and exacerbate issues associated with the lack of a cohesive system to share information.

Learning from Covid-19

[An observation of two NHS trusts' use of organisational wellbeing interventions during the COVID-19 pandemic: lessons learnt](#)

Future Healthcare Journal 12(1), 2025

Background: Healthcare workers' (HW') mental health during pandemics may be challenged due to the demands of their professional work. There is a need for effective organisational wellbeing strategies so that HW' mental health is safeguarded. In this article, we sought to examine approaches to implementing wellbeing strategies in hospital trusts, which we hope will improve future workplace planning., Methods: A pilot study comprising semi-structured interviews with five management staff in two NHS trusts (which employ approximately 5,000 staff each) in north-west England (NWE) were conducted to investigate and compare how COVID-19 impacted HW' mental health and what wellbeing strategies were implemented.

[A blueprint for learning: How NHS England \(London\) learned during its response to the Covid-19 pandemic](#)

Public Health in Practice (Oxford, England) 7, 2024

Identification and sharing of lessons is a key aspect of emergency preparedness, resilience and response (EPRR)

activity in the national health service (NHS) in England (NHS England, 2022). The overall intent of the lessons identification and implementation process is to improve readiness and response to future major incidents and emergencies, such that, wherever possible, patient harm is minimised and staff well-being is maximised. In this commentary, we draw on international literature to outline some of the major challenges in healthcare organisations to learning from major incidents and emergencies. We describe our experience of identifying lessons and set out the approach used by NHS England (London) to identifying lessons from the NHS response to the Covid-19 pandemic in the capital.

Learning experiences from an online QI fellowship programme during COVID-19 - a qualitative study

BMC Health Services Research 24(1), 2024

BACKGROUND: During the COVID-19 pandemic in the United Kingdom, multiple aspects of everyday human existence were disrupted. In contrast, almost all levels of educational learning continued, albeit with modifications, including adaptation to virtual-or online-classroom experiences. This pedagogic transition also occurred in the National Institute of Health and Care Research Applied Research Collaboration Northwest London's (NIHR ARC NWL) Improvement Leader Fellowship, an annual programme focusing on quality improvement (QI).

Organisational learning from the public health response to the COVID-19 pandemic: findings from a qualitative interview study

Frontiers in Public Health 12, 2024

System learning from major incidents is essential for enhancing preparedness for responding to future adverse events. Sharing learning not only stimulates further improvements, preventing the repetition of mistakes, but may also promote collaboration and the adoption of evidenced-based best practises. As part of a qualitative interview study designed to explore lessons learned,

this paper describes the experiences and perspectives of 30 staff from the public health agency responsible for the national COVID-19 response in the United Kingdom.

Exploring the impact of the COVID-19 pandemic on mental health organisations in England

Mental Health Review Journal 28(2), 2023

The analysis of the identified resources found four overarching areas for learning: organisational structures, approaches to practice (working and delivering care), leadership and staff support. Organisational structures refer to structural, systemic and procedural changes that have taken place.

Sharing Lessons From Successes : Long-term Care Facilities That Weathered the Storm of COVID-19 and Staffing Crises

Journal of Nursing Care Quality 38(1), 2023

Top reasons for their success were as follows: (1) trusting and supportive staff relationships; (2) positive presence and communication; and (3) use of consistent staffing assignments.

The Impact of COVID-19 on Primary Care: A Scoping Review

Cureus Journal of Medical Science, 2022

The COVID-19 pandemic has had a significant impact on healthcare workers, both with their physical and mental health, and has shown the importance of good managerial support, and reinforced the importance of teamwork, as well as the ability of healthcare workers to seek prompt help with their health, if it is required.

Relationship between working conditions and psychological distress experienced by junior doctors in the UK during the COVID-19 pandemic: a cross-sectional survey study

BMJ Open 12(8), 2022

The findings illustrate the importance of working conditions for junior doctors' mental health, as they were significant predictors

for depression, anxiety and stress. Therefore, if the mental health of junior doctors is to be improved, it is important that changes or interventions specifically target the working environment rather than factors within the individual clinician.

How COVID-19 has affected staffing models in intensive care: A qualitative study examining alternative staffing models (SEISMIC)

Journal of Advanced Nursing 78(4), 2022

The six themes emerging from the framework analysis illustrate how the pre-pandemic ICU culture influenced ICU staffing models during the pandemic. Changes in staffing impacted on the workforce and the care delivered, whilst it was necessary to learn from, and adjust to, a rapidly changing situation. Variation across and between networks necessitated variation in responses. The overwhelming outcome was that the pandemic has challenged the central tenets of ICU nurse staffing.

What can general practice learn from primary care nurses' and healthcare assistants' experiences of the COVID-19 pandemic? A qualitative study

BMJ Open 12(3), 2022

General practice should learn from the COVID-19 pandemic to nurture the clinical role and resilience of nurses and healthcare assistants in the postpandemic 'new normal'. Robust PPE provision could enable them to undertake their patient-facing duties safely and confidently. Judicious implementation of telehealth could help preserve the practical and caring nature of nursing. Improving channels of communication and interprofessional collaboration could help realise their potential within the primary care team.

Companionship for women/birthing people using antenatal and intrapartum care in England during COVID-19: a mixed-methods analysis of national and organisational responses and perspectives

BMJ Open 12(1), 2022

Policies concerning companionship and visiting have been inconsistently applied within English maternity services during the COVID-19 pandemic. In some cases, policies were not justified by the level of risk, and were applied indiscriminately regardless of need. There is an urgent need to determine how to sensitively and flexibly balance risks and benefits and optimise outcomes during the current and future crisis situations.

The Challenges of Nurse Redeployment and Opportunities for Leadership During COVID-19 Pandemic

Disaster Medicine and Public Health Preparedness 17, 2022

Nurses in redeployed roles were susceptible to stress and anxiety and were seeking dedicated leadership as they worked during a pandemic with the additional challenge of unfamiliar workspaces and colleagues. Nurses play a major role in the resilience of healthcare service, which cannot be achieved without a comprehensive resilience strategy.

The impact of the COVID-19 pandemic on clinical guidance and risk assessments, and the importance of effective leadership to support UK obstetric sonographers

Journal of Medical Imaging and Radiation Science 53(4), 2022

Formal clinical supervision programmes may be beneficial in facilitating a more holistic approach to peer-support, although there is currently limited evidence of their use in sonographic practice.

How has Covid impacted the wellbeing of NHS staff?

King's College London, 2022

Particularly effective interventions are often informal, easy to access, and draw on the potential of teams (rather than mental health professionals) as key sources of support and involve clear and consistent communication. Implementation of these interventions should be tailored to the needs of local staff.

Covid-19: Many hospitals “are not declaring critical incidents” despite severe pressures

BMJ News, 2022

Nick Scriven, past president of the Society of Acute Medicine and a consultant in acute medicine at Calderdale and Huddersfield NHS Foundation Trust, told The BMJ that the actual number of hospitals facing critical pressures could be three times the official number.

Leadership for continuous improvement in healthcare during the time of COVID-19

Clinical Radiology 76(1), 2021

Our intention is to provide a road map and personal and team strategies that will deliver ongoing and strong clinical leadership as well as improved quality of care.

Grass-roots junior doctor communication network in response to the COVID-19 pandemic: a service evaluation

BMJ Open Quality 10(2), 2021

This work demonstrates that a coordinated network using existing smartphone technologies and a novel communications structure can improve collaboration between senior leadership and junior doctors. Such a network could play an important role during times of pressure in a healthcare system.

The impact of coronavirus disease 2019 pandemic on working dynamics of junior and middle grade doctors in the United Kingdom: Learning from their experience requires immediate improvement in health care planning and management—An outcome analysis of a nationwide survey

SAGE Open Medicine, 2021

The outcome of the survey concluded with four major recommendations, including the need to have a named supervisor for these doctors, structured induction program, regular well-being checks, and involving them in crisis planning. These recommendations will help to shape future health care policies and management particularly when it is related to redeployment of doctors during any crisis or pandemic.

From front line to battle planning: a nursing perspective of covid-19

International Nursing Review 69(1), 2021

Visible, invested and consistent leadership was key in forming a strong foundation to support clear communication, peer support and increasing confidence. Consequently, strong bonds were forged to enable the team to face further challenges as they felt ‘in it together’.

Medical leadership in the NHS during the COVID-19 pandemic

British Journal of Hospital Medicine 81(6), 2020

Amid the global COVID-19 pandemic, adaptation of healthcare systems, with strong medical leadership, has been integral to coping with the ever-changing situation. This article is based on the personal experiences of doctors in the NHS and insights into the frontline response to this situation. It reflects on leadership dilemmas and strategies implemented to overcome them, with a focus on systems thinking and adaptive leadership.

Mission command: applying principles of military leadership to the SARS-CoV-2 (COVID-19) crisis

BMJ Military Health 167(1), 2021

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), (COVID-19) presents a challenge to UK society and its health system unprecedented in peace time.^{1,2} Naturally, many have reached for wartime metaphors to capture the pandemic's impact and the demand for resilience, community and adaptability it engenders.³ Healthcare leaders at every level must make decisions, provide leadership and control their organisations while unsure of how the situation will develop and employing staff who may fear for their safety. The parallel to the challenge of military command is obvious.⁴

Covid-19 has shown the value of local and clinical NHS leadership

BMJ News and Reviews, 2020

What does our initial response to the pandemic teach us about the balance, and future rebalancing, of central versus local healthcare leadership? Local clinicians and operational management have led most of the measures that have worked. Specialist medical societies, academic researchers, and journalists in mainstream and healthcare media have also had starring roles.

The impact of Covid-19 on the use of digital technology in the NHS

Nuffield Trust, August 2020

The Covid-19 pandemic has resulted in the rapid adoption of digital technology in the NHS and significant changes in the delivery of services more widely – to free up space and capacity in acute hospitals, enable remote working and reduce the risk of infection transmission in NHS settings. Primary care in particular has seen a huge increase in remote appointments.

Operating and workforce pressures

The NHS crisis has been years in the making

BMJ, 2023

Trust leaders tell us the NHS is in crisis. We are seeing a whole system under sustained and mounting pressure as demand for services continues to outstrip capacity. Urgent and emergency care services are most visibly bearing the brunt of this pressure.

Here's something we prepared earlier: Development, use and reuse of a configurable, inter-disciplinary approach for tackling overcrowding in NHS hospitals

Journal of the Operational Research Society 75(4), 2023

A reusable queuing model for exploring drivers of ED performance was augmented by a qualitative approach for exploring the implementation context and a generic framework for assessing the likely compatibility of interventions with a given organisation. At the hospital where the approach was developed it directly informed strategy. We describe reuse of the approach at three hospitals.

An NHS under pressure

British Medical Association, 2022

The NHS is experiencing some of the most severe pressures in its 70-year history. The COVID-19 pandemic is just the tip of the iceberg - the health service has been facing years of inadequate planning and chronic under-resourcing.

Patient Safety

How can specialist investigation agencies inform system-wide learning for patient safety? A qualitative study of perspectives on the early years of the English Healthcare Safety Investigation Branch

Journal of Health Services Research & Policy 30(1), 2024

Objectives: System-wide learning for patient safety is a core challenge for the health care sector, despite the prevalence of localised reporting and learning approaches. There is growing interest in how health care services could emulate other safety-critical sectors with the introduction of specialist safety investigation agencies to inform sector-wide safety. This paper reports on a study of the introduction and early operation of one such agency in the English health and care system.

The impact of collaborative organisational models and general practice size on patient safety and quality of care in the English National Health Service: A systematic review

Health Policy (Amsterdam, Netherlands) 138, 2023

Collaborative primary care has become an increasingly popular strategy to manage existing pressures on general practice. In England, the recent changes taking place in the primary care sector have included the formation of collaborative organisational models and a steady increase in practice size. The aim of this review was to summarise the available evidence on the impact of collaborative models and general practice size on patient safety and quality of care in England.

Retention and attrition

Retention of radiographers in the NHS: Influencing factors across the career trajectory

Radiography 29(1), 2023

In order to meet the rising demands for imaging and radiotherapy services, the chronic workforce deficits experienced in many countries must be addressed. Improving workforce retention is essential; factors influencing radiographer attrition from the NHS have been previously reported as challenging working patterns, lack of flexibility in working patterns and lack of timely career progression and CPD

Retention of surgical trainees in England

The Surgeon 21(4), 2023

Surgical training is a competitive process attracting highly motivated clinicians. The National Health Service is currently facing long waiting lists and a workforce crisis yet there is a paucity of data regarding attrition of surgical trainees in England. This study aims to describe the attrition of surgical trainees from 2016 to 2021 and explore the relationship between specialty competition ratios and attrition rates.

Stress among UK consultant urologists and factors influencing when they leave full-time NHS practice

Journal of Clinical Urology 18(3), 2023

The UK medical workforce is in crisis. The number of surgeons in National Health Service (NHS) practice has decreased, partly because newly qualified doctors withdraw from the workforce, and partly because of the early retirement of experienced surgeons. The reasons for urological trainee loss are largely known, but stress factors influencing the retirement of consultants before state pension age (SPA) are not.

Recruitment, retention and employment growth in the long-term care sector in England

Frontiers in Public Health 10, 2022

Across sectors, we find that the employment growth-turnover and the employment decline-hiring relationships are relatively stronger in the private and voluntary sectors compared to the public sector, suggesting that the impact of staff retention and recruitment frictions on employment is more acute in these sectors.

Factors affecting the UK junior doctor workforce retention crisis: an integrative review

BMJ Open 12(3), 2021

This review builds on findings of related literature regarding working environments, isolation, stigma, and desire for autonomy, and highlights additional issues around learning and training, flexibility, feeling valued, and patient care. It goes on to present recommendations for tackling poor retention of UK junior doctors, highlighting that the complex problem requires evidence-based solutions and a bottom-up approach in which junior doctors are regarded as core stakeholders during the planning of interventions.

A prescription for nursing: five measures to remedy the ills of the profession

BMJ, 2022

England's nursing system is beset by dysfunctionality and fragmentation, contributing to the workforce problems we see today. Many of the elements that could pave a way to improvement are already in place, but we need to align them so they can work together and fix the future of nursing once and for all.

A scoping review of strategies used to recruit and retain nurses in the health care workforce

Journal of Nursing Management 30(7), 2022

Although there is a lack of evaluations of retention strategies, the review identified a number of initiatives that warrant consideration. With the launch of the National Health Service People Plan in England in 2021, which is recommending initiatives identified in this review without robust evidence, an integrated programme of research evaluating this is recommended.

The Association between Staff Retention and English Care Home Quality

Journal of Aging & social Policy 33(6), 2021

The findings suggest that quality could change for the average care home with a relatively small alteration in staffing circumstance. Long-term care is a labor-intensive industry and many countries face relatively high levels of staff turnover and job vacancy rates.

Rates of turnover among general practitioners: a retrospective study of all English general practices between 2007 and 2019

BMJ Open 11(8), 2021

GP turnover has increased in the last decade nationally, with regional variability. Greater attention to GP turnover is needed, in the most deprived areas in particular, where GPs often need to deal with more complex health needs. There is a large cost associated with GP turnover and practices with very high persistent turnover need to be further researched, and the causes behind this identified, to allow support strategies and policies to be developed.

Relationship between labour force satisfaction, wages and retention within the UK National Health Service: a systematic review of the literature

BMJ open 10(7), 2020

This review highlighted how multiple factors influence NHS labour force retention. Pay was found to influence satisfaction, which in turn affected retention. An increase in wages alone is unlikely to be sufficient to ameliorate the concerns of NHS workers. More research is needed to identify the role of autonomy on retention. A system leadership approach underpinned by data is required to implement bespoke job satisfaction improvement strategies to improve retention and achieve the goals of the NHS Long Term Plan.

Understanding why primary care doctors leave direct patient care: a systematic review of qualitative research

BMJ Open 10(5), 2020

Many GPs report that job satisfaction directly relates to the quality of the doctor–patient relationship. Combined with changing relationships with patients and interfaces with secondary care, and the gradual sense of loss of autonomy within the workplace, many GPs report a reduction in job satisfaction. Once job satisfaction has become negatively impacted, the combined pressure of increased patient demand and workload, together with other stress factors, has left many feeling unsupported and vulnerable to burn-out and ill health, and ultimately to the decision to leave general practice.

Co-production of an intervention to increase retention of early career nurses: Acceptability and feasibility

Nurse Education in Practice 47, 2020

Findings indicated co-production equipped participants to function more effectively in their nursing roles; incorporating co-production into the development of future interventions may prove beneficial.

Development and retention of the dental workforce: findings from a regional workforce survey and symposium in England

BMC Health Services Research 20(255), 2020

The composition and work patterns of the primary care dental workforce have changed markedly over the last decade, though utilisation of skill-mix continues to be constrained. Consideration of factors determining career progression of dentists and dental care professionals is needed to optimise a sustainable future workforce.

The impacts of GP federations in England on practices and on health and social care interfaces: four case studies

Health and Social Care Delivery Research 8(11), 2020

General practices working collaboratively can produce benefits, but this takes time and effort. The approach of the federation central authority (authoritative, indulgent or neglectful) was hugely influential in affecting processes and outcomes. However, progress was generally slower than anticipated, and negligible in one case.

More that unites us than divides us? A qualitative study of integration of community health and social care services

BMC Primary Care 21(96), 2020

Given the long-term national policy focus on integration this ambitious approach to integrate community health and social care has highlighted implications for leadership, organisational design and inter-professional working. Given the ethos of valuing the local assets of individuals and networks within the new partnership we found the integrated neighbourhood teams could all learn from each other. Many of the challenges of integration could benefit from embracing the inherent capabilities across the integrated neighbourhood teams and localities of this city.

Systems working and thinking

Identifying and modeling barriers to design thinking implementation in healthcare sector: an ISM-MICMAC approach

Abstract only*

Journal of Health Organisation and Management 38(8), 2024

Purpose: This study aims to identify critical barriers to design thinking (DT) implementation in healthcare and to determine hierarchical relationships among the barriers.

Perceived challenges and enablers to evaluating a whole systems approach initiative: Reflections of embedded researchers

PloS One 20(5), 2025

Physical inactivity remains a substantial public health concern,

with complex socio-environmental factors contributing to increasing inactivity. Whole systems approaches to physical activity seek to address these complexities by promoting multi-component, place-based interventions. This study reflects on the experiences of three embedded researchers working within a whole systems approach initiative aimed at reducing physical inactivity in the United Kingdom.

Modelling lifecycles of inter-organisational collaborations in healthcare: a systematic review and best-fit framework synthesis

Abstract only*

Journal of Health Organisation and Management, 2023

Purpose: Inter-organisational collaboration (IOC) across healthcare settings has been put forward as a solution to mounting financial and sustainability challenges. Whilst ingredients for successful IOC have been explored, there remains limited understanding of the development of IOCs over time.

Evaluating whole system reforms: a structured approach for selecting multiple outcomes

Health Policy 138, 2023

Whole-system reforms, including devolution and integration of health and social care services, have the potential to impact multiple dimensions of health system performance. Most evaluations focus on a single or narrow subsets of outcomes amenable to change. This approach may not: (i) capture the overall effect of the reform, (ii) identify the mechanisms through which system-wide changes may have occurred, (iii) prevent post-hoc selection of outcomes based on significant results; and (iv) facilitate comparisons across settings. We propose a structured approach for selecting multiple quantitative outcome measures, which we apply for evaluating health and social care devolution in Greater Manchester, England.

How do local authority plans to tackle obesity reflect systems thinking?

Perspectives in Public Health 143(6), 2023

Aims: A whole systems approach to tackling obesity has been recommended by Public Health England for several years. This qualitative study aimed to investigate whether systems thinking is reflected in local authority plans and strategies to tackle obesity, using the leverage points for intervention in a complex system, as a framework.

Systems leadership in clinical networks: a new perspective

BMJ Leader 7(Suppl 1), 2023

Clinical networks are increasingly important in providing more integrated health and social care in an ever more complex world, and are reliant on the collective leadership of, amongst others, clinicians who may find themselves in positions of leadership through their clinical expertise and not necessarily their leadership expertise.

A whole system approach to childhood obesity: how a supportive environment was created in the city of Brighton and Hove, United Kingdom

Food Security 15, 2023

Childhood obesity is a growing global challenge, and no country has yet reversed the upward trend in prevalence. The causes are multifaceted, spanning individual, societal, environmental, and political spheres. This makes finding solutions complex as traditional linear models of treatment and effect have proven only minimally successful or unfeasible at the population level.

Improving radiology: a whole-system opportunity Abstract only*

Clinical Radiology 78(6), 2023

In this article, we set out the current context and case for change in radiology in England and how quality-improvement approaches can support the development of sustainable Imaging

services and networks to meet the challenges faced now and in the future.

Unlocking data to inform public health policy and practice: decision-maker perspectives on the use of cross-sectoral data as part of a whole-systems approach

Publication date: 2022

Stakeholders from healthy public policy and practice support greater use of cross-sectoral data sharing and linkage to inform decision-making. Our findings provide a practical set of actions that together can be used to address current barriers and constraints, and realise this potential.

The systems engineering approach to quality improvement in the NHS

2022

The systems approach to problem solving, both within and outside of healthcare, has gained considerable attention in recent years, alongside the growing recognition that modern improvement challenges are seldom a linear relationship between cause and effect.

Embedded Researchers as Part of a Whole Systems Approach to Physical Activity: Reflections and Recommendations

Systems 10(3), 2022

Whole systems approaches are increasingly being advocated as a way of responding to complex public health priorities such as obesity and physical inactivity. Due to the complex and adaptive nature of such systems, researchers are increasingly being embedded within host organisations (i.e., those which facilitate the whole systems approach) to work with key stakeholders to illuminate and understand mechanisms of change and develop a culture of continuous improvement.

Opportunities to engage health system leaders in whole systems approaches to physical activity in England

BMC Public Health 22(254), 2022

Promoting physical activity and contributing to whole systems approaches to physical activity is crucial for health systems improving population health and managing demand, including for the NHS in England. There are pockets of good practice from which lessons can be learned, but there is a need for whole systems approaches as part of a broader, holistic, prevention agenda.

What Does a Systems Approach to Quality Improvement Look Like in Practice?

International Journal of Environmental Research and Public Health 19(2), 2022

Universally improving healthcare systems is difficult to achieve in practice with organisations implementing a range of quality improvement (QI) approaches, in varying and changing contexts, and efforts ranging from project-based improvements to whole system change. This study aimed to identify how organisations overcome the challenges to improving the quality of the services they deliver.

Systems leadership: a fad or food for the survival of our NHS?

BMJ Leader 4(3), 2019

This short paper will explore the meaning of system, and then consider what skills are needed to create the conditions for leadership within and across it.

Workforce health, motivation and wellbeing

Participation in staff engagement campaigns at large healthcare organisations: a focus group study

BMJ Leader 9(1), 2025

INTRODUCTION: Healthcare organisations work better with an engaged workforce, and staff-engagement campaigns offer a method to build this engagement. Leeds Teaching Hospitals NHS Trust (LTHT), one of the UK's largest Trusts, provides an example of where an organisation-wide engagement intervention has been used in a healthcare setting. This study aimed to understand why staff participate, or do not participate, in staff-engagement campaigns, supporting healthcare leaders to increase participation in future campaigns.

Learning from excellence: a thematic analysis of staff-reported excellence in healthcare from two acute NHS trusts

British Journal of Health Care Management 29(11), 2023

Background/Aims Learning from excellence is a philosophy and practice designed to capture positive events in healthcare in order to improve quality and safety, while also providing positive feedback to staff. The aim of this study was to identify themes in staff-reported excellence to understand the conditions and behaviours that can allow excellence to occur. Methods A retrospective thematic analysis was performed with 400 excellence reports (200 per trust), which had been submitted via the learning from excellence reporting systems at two acute NHS trusts.

Reducing Risks in Healthcare by Prioritising Workforce Well-being

The Physician 8(2), 2023

Considering risks to healthcare covers a wide variety of topics. This covers an extensive area such as sustainability, including funding; planning, long-term policy development; and trends,

including the emergence of publicly funded versus private healthcare or a hybrid offering. Other topics include workforce planning, involving the consideration of self-sufficiency versus importing; examination of delivery modes of hospitals versus community; and final consideration of balancing affordability with expectation and need.

Paradigm lost? Reflections on the effectiveness of NHS approaches to improving employment relations

BMJ Leader 7(4), 2023

The National Health Service in England has largely relied on a human resources trilogy of policies, procedures and training to improve organisational culture. Evidence from four interventions using this paradigm—disciplinary action, bullying, whistleblowing and recruitment and career progression—confirms research findings that this approach, in isolation, was never likely to be effective.

Organisational interventions to support staff wellbeing

Wellcome Trust, Birkbeck University of London, SoM, 2023

Key drivers to improve staff health and wellbeing that the report highlights are that it is not only autonomy that makes people happy, but also leadership, organisational culture, and good team relationships. These exist at different levels within an organisation and need to be backed up by evidence-based interventions as stated in this report.

Just culture development and patient safety in the NHS

British Journal of Nursing 32(9), 2023

John Tingle, Lecturer in Law, Birmingham Law School, University of Birmingham, discusses several reports looking at the development of just cultures.

'You get looked at like you're failing': A reflexive thematic analysis of experiences of mental health and wellbeing support for NHS staff

Journal of Health Psychology, 2023

Reflexive thematic analysis identified that perceived stigma around help-seeking, and staffing shortages due to wider socio-political contexts such as austerity, were barriers to using support services. Visible, caring leadership at all levels (CEO to line managers), peer support, easily accessible services, and clear communication about support offers were enablers.

Focus on people, the rest will follow

BMJ Leader 7(3), 2023

Navina shared powerful messages, searching and uncomfortable questions for leaders and touching personal stories. Navina spoke about the many narratives of equality and deep value of diversity for society, the importance of leaders understanding the impact of their behaviours and the role of feedback, the need to understand what we're doing to prevent change and most crucially, the improvement in the quality of care for patients and their engagement with their care when leaders develop a culture of kindness and respect.

Australian doctors are more engaged than UK doctors: why is this the case?

BMJ Leader 6(2), 2022

While the profiles of medical engagement vary at the sites and also across the MES and subscales, the data illustrate that overall doctors in Australia feel valued and empowered, and they have purpose and direction and work in a collaborate culture. At the most disengaged end of the scale, Australian doctors are markedly less disengaged than their UK counterparts. There may be numerous factors that influence and change how engaged doctors are in both countries. The most prominent of

these are appear to be working conditions and lifestyle, driven by funding and other economics issues.

The relationship between leader support, staff influence over decision making, work pressure and patient satisfaction: a cross-sectional analysis of NHS datasets in England

BMJ Open 12(2), 2022

Our results provide evidence that leader support influences patient satisfaction through shaping staff experience, particularly staff influence over decisions and work pressure. Patients' care is dependent on the health, well-being, and effectiveness of the NHS workforce. That, in turn, is determined by the extent to which leaders are supportive in ensuring that work environments are managed in a way which protects the well-being of staff.

Exploring the working environment of Hospital Managers: a mixed methods study investigating stress, stereotypes, psychological safety and individual resilience

BMC Health Services Research 22(1371), 2022

Positive working relationships, high psychological safety and individual resilience are important for organisational safety and individual wellbeing. Our data illustrate unique stressors faced by hospital managers, provide detail on sometimes challenging working relationships, and demonstrate scope to improve both the psychological safety and resilience of those in managerial positions.

Care-home Nurses' responses to the COVID-19 pandemic: Managing ethical conundrums at personal cost: A qualitative study

Journal of Nursing Scholarship 55(1), 2022

Often undervalued, care-home nurses (RNs) are leaders, managing complex care while working in isolation from their professional peers. The pandemic made this more apparent, when care and treatments for COVID-19 were initially unknown,

isolation increased due to withdrawal of many professional health services, accompanied by staff shortages.

In it together?: Exploring solidarity with frontline workers in the United Kingdom and Ireland during COVID-19

British Journal of Social Psychology, 2022

The three themes identified in the data were: (1) Solidarity as central to front-line experiences; (2) Leadership as absent, shallow and divisive: highlighting 'us-them' distinctions and (3) The rise of 'us' and 'we' among colleagues. Our research offers insights into how frontline workers make sense of their experiences of solidarity and discordance during the first year of the COVID-19 pandemic, with relevance for government and organizational policy-makers shaping future conditions for frontline workers.

Socioeconomic differences in recruitment and sickness absence in a large NHS health organisation: a cross-sectional study

BMJ Open 12(4), 2022

This large NHS organisation employed people disproportionately from deprived areas. They were considerably more likely to experience sickness absence compared with people from affluent areas. This appears to be because they were more likely to be in lower wage employment and employed in nursing and nursing assistant. Workplace health policies need to target these workers, adapting to their needs while enabling improvements in their working conditions, pay and career progression.

ENACT study: what has helped health and social care workers maintain their mental well-being during the COVID-19 pandemic?

Health and Social Care in the Community 30(6), 2022

Our findings illuminate the complexity of the effects of the COVID-19 pandemic on HSCWs' well-being and will inform future intervention development seeking to increase positive

adaptation and improve staff well-being. Addressing barriers to mental health help-seeking among HSCWs is essential. The implications emphasise the importance of lessons learned across health and social care contexts, planning and preparedness for future pandemics.

The professional resilience of mid-career GPs in the UK: a qualitative study

British Journal of General Practice 72(714), 2022

That GPs feel to improve resilience they need to work fewer clinical hours may have huge implications for a workforce already in crisis, and ultimately, for the health care of the UK population. Urgent research is needed to formulate a bespoke assessment for measuring GP resilience to assess potential interventions, and to identify GPs at risk of mental ill-health or leaving the profession.

Retrospective observational study of ethnicity-gender pay gaps among hospital and community health service doctors in England

BMJ Open 11(12), 2021

This study presents new evidence on ethnicity-gender pay gaps among NHS doctors in England using high quality administrative and payroll data. The findings indicate all ethnicity-gender groups earn less than white men on average, except for Indian men. In some cases, these differences cannot be explained giving rise to discussions about the role of discrimination.

How district nurses can support team wellbeing during the pandemic and beyond Abstract only*

British Journal of Community Nursing 26(7), 2021

There is much that can be done by the district nurse as a leader of a team to ensure that the pressures are managed in a way that promotes team cohesion and mutual respect, while ensuring that open communication about wellbeing is encouraged.

Constructing high-quality rest facilities to maximise performance and ensure patient safety

BMJ Open Quality 10(3), 2021

The majority of doctors were happy with the new rest areas (60%), a majority felt that they would use the on-call room area (63%) and the renovation improved morale and well-being. There was an increased ability to take breaks. However, the majority of doctors are not exception-reporting missing breaks: 79% (2019), 74% (2020).

Exploring the role of psychological need fulfilment on stress, job satisfaction and turnover intention in support staff working in inpatient mental health hospitals in the NHS: a self-determination theory perspective

Journal of Mental Health 31(5), 2021

Recommendations are made to explore experiences of (and barriers to) autonomy and relatedness in inpatient HCA staff to target and improve autonomy and relatedness in this workforce. Implications of doing so are considered at a staffing, organisational and patient level.

COVID-19: Causes of anxiety and wellbeing support needs of healthcare professionals in the UK: A cross-sectional survey

Clinical Medicine 21(1), 2021

Anxiety levels in HCPs significantly increased during the COVID-19 pandemic and the main causes were identified. Many HCPs felt there was inadequate support and identified what support they needed. Implementing effective strategies to support HCPs' unmet wellbeing needs are required as a matter of urgency.

Sources of work-related psychological distress experienced by UK-wide foundation and junior doctors: a qualitative study

BMJ open 11(6), 2021

Analysis reported four key themes: (1) workload and working conditions; (2) toxic work cultures—including abuse and bullying,

sexism and racism, culture of blaming and shaming; (3) lack of support; (4) stigma and a perceived need to appear invulnerable.

Individual and organisational strategies to develop resilience in the nursing workforce

Nursing Standard, 2021

This article discusses the theoretical underpinnings of resilience, explains what resilience in nurses means, and describes the adverse effects of the pandemic on nurses' mental health and resilience. The article also explores how nurses' resilience can be developed and enhanced from an individual and organisational perspective.

Factors associated with work-related burnout in NHS staff during COVID-19: a cross-sectional mixed methods study

BMJ open 11(1), 2021

Our analyses support anecdotal reports of staff struggling with the additional pressures brought on by COVID-19. All three of the factors we found to be associated with work-related burnout are modifiable and hence their effects can be mitigated. When we next find ourselves in extraordinary times the ordinary considerations of rest and protection and monitoring of the impact of new roles will be more important than ever.

Mental health impacts of COVID-19 on NHS healthcare staff

UK Parliament POST, 2020

There is emerging evidence that the COVID-19 outbreak is negatively affecting the mental health and well-being of NHS staff. A greater understanding of these impacts can inform the development of effective interventions to support staff during the current outbreak and beyond.

The impact of extending nurse working hours on staff sickness absence: Evidence from a large mental health hospital in England

International Journal of Nursing Studies 112, 2020

Estimation results establish that the extended shifts are associated with an increased percentage of sickness hours per week of between 0.73% and 0.98%, the equivalent of a complete shift per week per ward.

Fostering compassion and reducing burnout: How can health system leaders respond in the Covid-19 pandemic and beyond?

Nurse Education Today 94, 2020

We are told to put on our own oxygen “mask” before helping others during a flight emergency. What self-care strategies constitute your “mask” so you can live more bravely and stay well in the months ahead so you can be there for others?

Quality improvement report: setting up a staff well-being hub through continuous engagement

BMJ Open Quality 9(3), 2020

We believe that while there is a lot of talk about well-being and an increasing number of resources being offered electronically, the need for a neat and quiet space cannot be overlooked. We collect feedback on a weekly basis and adapt the space to meet the needs of staff. Long-term impact of such spaces will be reassessed at a later stage.

COVID-Well: Evaluation of the Implementation of Supported Wellbeing Centres for Hospital Employees during the COVID-19 Pandemic

International Journal of Environmental Research and Public Health 17(24), 2020

Healthcare organisations are urged to mobilise access to high-quality rest spaces and psychological first aid, but this should be localised and diversified. Strategies to address presenteeism

and staff retention should be prioritised, and the high dedication of healthcare workers should be recognised.

“Overwhelmed and out of my depth”: Responses from early career midwives in the United Kingdom to the Work, Health and Emotional Lives of Midwives study

Women and Birth 33(6), 2020

Midwives described feeling immense pressure caused by an unremittingly heavy workload and poor staffing. Where relationships with colleagues were strong, they were described as a protective factor against stress; conversely, negative working relationships compounded pressures. Despite the challenges, many of the midwives reported taking great pleasure in their work, describing it as a source of pride and self-esteem.

Just culture and staff wellbeing

British Journal of Nursing 29(6), 2020

Sam Foster, Chief Nurse, Oxford University Hospitals, considers the issue of poor physical and mental health in the context of the complaints process, just culture and workplace support

Workforce and system sustainability, and environmental sustainability

Existing hospitals' journey into a sustainable and climate-resilient future: barriers and opportunities for estates and facilities management Abstract only*

Facilities, June 2025

Purpose: This research aims to assess the journey towards a sustainable and climate-resilient hospital estate to identify the barriers and the opportunities hospital Estates and Facility Management (EFM) professionals encounter when dealing with an existing hospital estate.

Strategies for implementing Sustainability in Quality Improvement (SusQI) education: educator perspectives

BMJ Open Quality 14(2), 2025

The climate and ecological emergencies represent a significant threat to health, and yet healthcare is a major contributor to environmental degradation. Sustainability in Quality Improvement (SusQI) is a framework that enables healthcare professionals to improve how good health is achieved and healthcare delivered in line with social, economic and environmental sustainability goals. SusQI education provides healthcare learners with the knowledge and practical skills for sustainable clinical transformation. We interviewed 11 SusQI course leads at 10 educational sites in the UK and Ireland, exploring educator perspectives on how SusQI can be successfully implemented in diverse health educational contexts.

Collaborative leadership to support sustainability in practice for dietitians as allied health professionals

Journal of Human Nutrition and Dietetics 36(6), 2023

The present study shows that collaborative leadership is a core aspiration across AHP leaders and future leaders to inform the green agenda. Despite inherent challenges, participant perceptions illustrate how “change leadership” might be realised to support the net zero agenda within health and social care.

Benefits, challenges and sustainability of digital healthcare for NHS Wales: a qualitative study

BMJ Open 13(5), 2023

NHS Wales has demonstrated that currently there are an equal measure of benefits and challenges to a national digital healthcare. However, with ongoing government and service support, improvement and evaluation, it has potential for a sustainable digital future, in which the benefits can outweigh the challenges.

Improving the environmental sustainability of paediatric care

ADC Education & Practice 108(3), 2023

In this article, we review literature on practical ways to encourage environmentally sustainable paediatric care and identify areas where more evidence is required. Finally, we introduce readers to the principles of sustainable healthcare which may be used to help guide further efforts to reduce the environmental impact of paediatric care.

The viability and sustainability approach to support organisational resilience: Learning in a recent case study in the health sector

Systems Research and Behavioural Science 40(4), 2023

The tremendous complexity of the NHS and its subsidiaries makes soft OR approaches particularly appealing for the study and analysis of organisational performance. The NHS has recently taken an interest in exploring more systemic approaches for improving its performance. There is evidence that such approaches can identify areas for improvement for the NHS, such as resilience, overall quality of service, customers and staff satisfaction and wellbeing.

Not Only Funding: How Healthcare Organizations Can Contribute to National Health Service Sustainability Abstract only*

International Journal of Public Administration 46(13), 2022

Current possible NHS problems, as well as practical suggestions on how to improve it, are offered. Bureaucracy, slow decisional processes, and weak reward systems are seen as demons to fight. How? Reforming the regulation system, valorizing professional competencies, and placing stronger emphasis on organizations' commitment.

Realist evaluation of the implementation and impact of the NHS carbon reduction strategy in the UK

BMJ Open 11(9), 2021

Organisational factors, particularly Board leadership and internal implementation pathways, have a significant bearing on whether CRM are implemented or not. However, greater national support and guidance is needed for NHS organisations to effectively reduce their carbon emissions. Further cycles of this evaluation are necessary in multiple case study sites to illuminate the path to a net-zero NHS carbon footprint by 2045.

Securing a sustainable and fit-for-purpose UK health and care workforce

The Lancet 397, 2021

Through illustrative projections, we show that, to sustain annual growth in the workforce at approximately 2·4%, increases in NHS expenditure of 4% annually in real terms will be required. Above all, a radical long-term strategic vision is needed to ensure that the future NHS workforce is fit for purpose.

Sustainability in the NHS – what's the theory and what's the practice?

NHS Confederation, October 2021

The NHS sustainability agenda is much discussed, but without necessarily widespread clarity, understanding or consensus on what it means. That's not surprising, given that the term 'sustainability' is applied in many different contexts. The [United Nations 17 Sustainable Development Goals](#) range from the elimination of poverty, to clean sanitation, gender equality, climate action, sustainable cities and communities, and good health and wellbeing. The concept of the three pillars of sustainability describes three areas of action – economic, social, and environmental – which overlap and interact to produce sustainability.

Creating a sustainable workforce: The long-term sustainability of the NHS

Nuffield Trust, 2017

The pressures on the NHS workforce are as great, if not a greater, threat to the future sustainability of services as the pressures on finances. There are serious and growing gaps in the NHS workforce, in both numbers and skills. These threaten the quality of care and the NHS's capacity to deliver improvements in productivity.

Workforce Planning and Education

Strategic workforce planning in health and social care – an international perspective: A scoping review

Health Policy 132, 2023

Effective strategic workforce planning for integrated and co-ordinated health and social care is essential if future services are to be resourced such that skill mix, clinical practice and productivity meet population health and social care needs in timely, safe and accessible ways globally.

Delivering the NHS workforce plan is a massive organisational challenge

BMJ 382, 2023

The plan estimates that the number of people aged over 85 will grow 55% by 2037 as part of a continuing trend of significant population growth. It is inconceivable that the healthcare needs of this cohort could be met by continuing the NHS's hospital-centric, sickness-based operating model.

The NHS workforce plan is welcome—but much of the detail is yet to be worked through

BMJ, 2023

It is a well worn maxim in healthcare policy that if you put two doctors together you will probably get at least three diverging

opinions. However, when it comes to the newly launched NHS Long Term Workforce Plan for England there is something that we both, as incoming and outgoing Chair of the Academy of Medical Royal Colleges are totally united on. It is a good thing. And while some may say that's a bold, if not foolhardy claim to be making before we have even had time to properly process all 151 pages of it, we are confident of this single assertion for three reasons.

The NHS workforce plan

BMJ, 2023

The plan is a welcome and necessary step towards solving the workforce challenges that have vexed the health service, although it is more of a jigsaw puzzle than a masterplan. The overall picture of a future NHS workforce with many more staff, increasingly working in more diverse multidisciplinary teams, and with greater support from technology, is encouraging but several pieces are missing from the vision and roadmap for its delivery.

NHS workforce plan—less operational, more a blueprint for the future

BMJ, 2023

It's good to see a more modernised approach to workforce planning. For many years the NHS has had to rely on demand and capacity modelling—a workforce based on activity not actual demand for labour. The labour deficit is manifest in all the unpaid overtime that has become a normalised part of working practice. We estimate 1.2 million hours unpaid overtime for district nurses in England alone.

Developing a clinical academic career pathway in a Community and Mental Health NHS Trust

Journal of Research in Nursing 28(1), 2023 Abstract only*

Despite growing evidence of the impact that clinical academic (CA) staff have on patient care and clinical practice, there are

disproportionately low numbers of nurses, allied health professionals (AHPs) and other healthcare professionals in CA joint roles, compared to their medical colleagues.

Nationwide evaluation of the advanced clinical practitioner role in England

BMJ Open 12(1), 2022

A standardised approach may support ACP workforce development in England and enable ACPs to work across the four pillars of practice. Due to the wide uptake of ACP roles internationally, this study has relevance across professions for global healthcare workforce transformation.

Applications to medical and surgical specialist training in the UK National Health Service, 2021–2022: a cross-sectional observational study to characterise the diversity of successful applicants

BMJ Open 13(4), 2022

Despite greater success by female applicants overall, there is an attraction issue to specialties by gender. Further, most ethnic minority groups are less successful at application when compared with white-British applicants. This requires continuous monitoring and evaluation of the reasons behind observed differences.

Less than full-time training (LTFT), is this the new norm? A cross-sectional study using a UK-wide online survey to evaluate trainees' views and intentions for LTFT

BMJ Open 12(11), 2022

Systems must adapt to increase access to LTFT training to promote trainee well-being and retention. Progress is being made and we suggest HEE's category three pilot be rolled out across the UK as a priority. Workforce planning needs to consider the substantial rise in popularity of LTFT among

trainees to offset any shortfalls in the present and future workforce.

[Recurrent oversubscription of the UK Foundation Programme reflects the government's failure to plan for the medical workforce](#) Full text available with NHS OpenAthens account*
BMJ, 2022

We are a nation in desperate need of more doctors. It is therefore a cruel irony that the government is putting up barriers to prevent medical graduates from feeling welcomed into the NHS at the very start of their careers. We've known for a long time that the NHS has a low proportion of doctors compared to similar OECD EU nations and carries a stubbornly high number of unfilled vacancies.

[Education for integrated working: A qualitative research study exploring and contextualizing how practitioners learn in practice](#)
Journal of Interprofessional Care 36(1), 2022

Thematic analysis of interview transcripts highlighted the shifting context of working in integrated teams impacting on learning, the influence of leadership on education and training, the nature of in-service training, and the knowledge-sharing culture. The findings highlight that the learning climate is highly dependent on the leadership ethos in the practice context, which influences the allocation of time and resources for training and clinical supervision.

[Sustaining quality education and practice learning in a pandemic and beyond: 'I have never learnt as much in my life, as quickly, ever'](#)

Midwifery 94, 2020

The context of healthcare and of healthcare education has radically changed as a result of the Covid-19 pandemic. To identify positive strategies for midwifery education in this context, five case studies from the UK and beyond were conducted using

an appreciative enquiry approach, from the perspectives of students, the maternity services, cross-university collaboration, and digital learning. A health system analysis was used to identify strategies to cope, adapt, and transform for the future, at the levels of individuals, teams, and the whole system.

Competency Frameworks

[AI Skills for Business Competency Framework](#)

The Alan Turing Institute, January 2024

Artificial Intelligence (AI) holds enormous potential for businesses, enhancing productivity and competitiveness. However, adopting AI technology can be challenging. To support the adoption of AI, we need to ensure that technical and non-technical employees and decision-makers understand the opportunities, limitations and ethics of using AI in a business setting. To address the skills barriers limiting AI adoption in businesses, the Department for Science, Innovation and Technology (DSIT) has been working with the Innovate UK BridgeAI programme (BridgeAI) to develop research on the high-level competencies that businesses need their employees to engage with to enable AI adoption, including for traditionally non-technical roles. This project aims to facilitate an increase in the number and diversity of employees across the UK workforce with access to relevant, high-quality AI training, ultimately addressing the skills barriers limiting AI adoption.

[IFRC National Society Development \(NSD\) Competency Framework](#)

NSD and International Federation of Red Cross and Red Crescent Societies, 2023

This framework is the result of the engagement of a number of National Societies at leadership level, supported by human resources experts. It identifies the critical quality that all staff –

be it IFRC, from other National Societies when acting as partners; be it NSD support staff, heads of delegation / managers or technical staff for programme support – should possess in different degrees according to their roles, to make sure that all support contributes to the work of that recipient National Society to embrace transformation and change.

- Trust, Relationship building
- Respecting NSs as volunteers and membership-based local actors
- Awareness of organisational culture
- Systems Thinking
- Fostering Sustainable Change
- Nursing innovation and creating a culture of learning
- Connecting and coordinating

Global OD Competency Framework™

Organisational DeVelopment Network

The Global OD Competency Framework™ defines five different capability areas of OD Competency. Each capability area includes three specific competencies. Click the links below for more information on each of the core capabilities. As you work your way through the Framework™, you will discover more related resources and information to grow your expertise in each area.

- [Systems Change Expert](#) Systems Change Leader | Culture Builder | Innovator
- [Efficient Designer](#) Efficient Designer | Process Consultant | Data Synthesizer
- [Business Advisor](#) Strategic Catalyst | Results-Oriented Leader | Trusted Advisor
- [Credible Strategist](#) Credible Influencer | Collaborative Communicator | Cross Cultural Navigator
- [Informed Consultant](#) Self-Aware Leader | Equity Advocate | Life-Long Learner and Practitioner

Transformation Capability Framework

Local Government Association

This Transformation Capability Framework has been created with councils, for councils. It sets out 'what good looks like' to enable councils of all sizes and types to identify and address the capabilities that they need to have in place to deliver sustainable and effective transformation.

Healthcare Leadership Model

NHS Leadership Academy

A model, tools and resources designed to develop and support non-clinical and clinical leaders and aspiring leaders.

Development and Use of the Leadership Competencies for Healthcare Services Managers Assessment

Frontiers in Public Health 28, 2019

The Leadership Competencies for Healthcare Services Managers (Global Competency Directory) framework developed by the International Hospital Federation's global consortium for healthcare management serves as a catalyst and resource for defining the skills, knowledge, and abilities needed for the healthcare management profession. This article documents the purpose, development, validation, and use of the framework.

Leadership Development

NHS England, 2018

Developing the right people with the right skills and the right values is recognised as a key priority to enable the sustainable delivery of health services, as leadership is one of the most influential factors in shaping an organisational culture. Ensuring the necessary leadership behaviours, strategies and qualities are developed is fundamental.

Clinical Leadership Competency Framework

NHS Leadership Academy, 2012

Through publishing this framework the National Leadership Council (NLC) is promoting leadership development for all clinical professions that work in health and care, it will ensure that leadership competences will be incorporated into education and training for all clinical professions and establish a stronger foundation for developing leadership capability across healthcare and in delivering the changes needed to meet future challenges.

Clinical leadership competency framework project

National Leadership Council, 2011

This report confirms that the professions themselves are ready to step up and deliver as a collective and in unison. The consensus on approach and the desire for progress that flows from this report is uplifting.

Leadership Qualities Framework for Adult Social Care

Skills for Care

The Leadership Qualities Framework explains what good leadership looks like and describes the attitudes and behaviours needed for high quality leadership at all levels across the social care workforce. It can be used by everyone in the social care workforce, no matter what the size of their organisation or the nature of their role.