8 May 2009

Dear Colleague

SHA Assurance pilot

You will be aware that we volunteered to pilot the SHA Assurance process being carried out by the Department of Health. This process culminates in a series of visits to the SHA and across the patch by DH officials on Monday and Tuesday next week (11 and 12 May) and I wanted to keep you updated on the process so far and what it seeks to achieve.

Background

The rapid changes that we are seeing in society place new and greater demands on our health system. NHS staff, who have always joined the service with a commitment to provide and support the best possible care for patients, need the wider NHS system to provide them with the infrastructure they need to constantly succeed.

The latest stage of the NHS story is a journey of ambitious change. We have moved from what was essentially a top down, one-size fits all service, to a more open, responsive system wrapped around the needs of individual patients. We need to ensure that this SHA is in the best place to support that change.

SHA Assurance will complete a missing part of the jigsaw. PCTs and Foundation Trusts are already held to account through their respective assurance programmes. It is therefore important, particularly in the current economic climate, that SHAs are meeting the needs of their local populations and at the same time preparing for future challenges.

Although the regional context and priorities of the ten different SHAs will vary, there should be some consistency in the core functions and behaviours that an SHA performs within each region. SHA Assurance seeks to assure that each SHA is performing them in a manner that is consistent with the national agenda as well as being appropriate for the local environment. It will act as a rigorous and coherent process for ensuring that SHAs are made accountable for their statutory obligations (what they are required to do by law), their performance (against key performance arenas) and their current and future organisational and system health (how well equipped the SHA and wider health care system across the region are to face future challenges).
High Quality Care for All, Lord Darzi’s ten year vision for the NHS, has set quality as the organising principle for the NHS. Our own ten year vision for healthcare – Towards a healthier future – sets out clear ambitions for the health service on this issue. We therefore need to recognise that improved quality is a system-wide goal and act accordingly. This means that it is crucial that SHAs, as leaders of the NHS within their region, can prove that they are supporting a high quality service to their local population.

Process

The SHA Assurance model has been designed to be consistent with David Nicholson’s four principles of change – co-production (working together), system alignment (pulling in the same direction), subsidiarity (power from the bottom up), and clinical ownership and leadership. Much work has already been done to engage with colleagues from the service in designing the SHA Assurance model, including through the NHS Management Board, the SHA Assurance Programme Board and a national stakeholder Accelerated Learning Event held in March. The DH is working in partnership with all SHAs to develop the process around SHA Assurance.

This is not a traditional 'performance management’ system in which DH simply seeks to hold to account SHAs on their performance against national policy commitments, but a process designed to be much broader in scope and developmental in nature. The systems SHAs lead are becoming increasingly more independent, with more service provision through Foundation Trusts, and more freedom being exercised by PCTs. SHA Assurance is not an audit style approach to examining whether the SHAs are performing against prescribed criteria, nor is it intended to question the role of SHAs as system managers or leaders of the local NHS. SHA Assurance is about strengthening the accountability of SHAs, supporting them build their capacity and capability to lead and drive the quality and innovation agendas, and ensuring that they are prepared to meet the future challenges of their local populations.

What happens next?

The pilot will road-test the assurance process, after which it will be developed further and refined ahead of full implementation from October 2009 to January 2010 when all ten SHAs, including SCSHA, will be assured.

The pilot will be a two-day process. On day one the assurance panel team - consisting of David Nicholson, DH Directors General, a peer SHA Chief Executive – Neil McKay, and a non-NHS member - will be visiting various organisations across the South Cental region and speaking to different individuals and groups of staff to get their views on the contributions the SHA makes in supporting better healthcare for patients and the public. On day two the panel team will hold a series of meetings with the SHA to discuss the evidence collected. This will include a conversation discussing the role of DH and how it can best support the SHA to be successful.

Many of you will already be aware that the pilot is happening following verbal briefings, and most of you (66%) contributed towards the Organisational Health questionnaire providing your views on the organisation. Some staff may be involved in meetings with representatives from DH but even if you are not amongst those who are required to meet with the assurance team, you should be aware that these visits are taking place.
You will see from the attached timetable (Appendix 1) that the agenda for Tuesday 12 May includes a one hour slot (10.30 – 11.30) where various DH Director Generals may wish to speak to a cross section of staff at the SHA. If you are asked to be involved in this part of the days then please do take the opportunity.

The Assurance process is being led by Olga Senior, Director of Communications and Corporate Affairs supported by Nigel Woods, Programme Manager. A significant amount of work has taken place behind the scenes which has required the input of many staff across the organisation in preparing the information requested by the DH as part of the process. The information collated covers the SHA statutory obligations, performance and organisational and system health.

The DH and SCSHA will work closely together, both on fine-tuning the details of the actual assurance process and on communicating the process, its implications and the results of the pilot. This is an excellent opportunity for us to lead the way on shaping a process which will help develop SHAs across the country and help us rise to future challenges.

I will ensure you are kept informed of the outcome and thank you for you input to the process so far.

Yours sincerely

Jim Easton
Chief Executive
Appendix 1: Timetable for the SHA Assurance process

SHA ASSURANCE - PANEL DIALOGUE DAY (11TH MAY)

<table>
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<tr>
<th>Timing</th>
<th>Topic</th>
<th>Format</th>
<th>Location</th>
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| 09:00–15:30  | Stakeholder dialogue interviews  
- Explore cross-patch themes and key lines of enquiry  
- Specific issues where required / appropriate | Paired panel stakeholder visits           | Various  |
| 15:30–16:30  | Group debrief on dialogues  
- Evidence on cross-patch themes and key lines of enquiry | Facilitated discussion (by C Price?)      | Newbury  |
| 16:30–17:30  | SHA leadership perspective on cross-patch issues and key lines of enquiry | 1-2-1 interviews (Panel member + relevant SHA exec team member) | Newbury  |
| 17:30–18:15  | Synthesis of findings from day  
- Agreement of key issues to explore further during assurance day | Support team present synthesis of day and findings  
- Verbal additions of evidence from 1-2-1 interviews with SHA exec team  
- Panel discuss and agree key themes to be explored | Newbury  |

SHA ASSURANCE - ASSURANCE PANEL DAY (12TH MAY)

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<tr>
<th>Agenda (May 12th)</th>
<th>Objective</th>
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| 08:30–09:00                 | Panel breakfast briefing  
- Reflections on dialogues  
- Reiterate key issues to explore |
| 09:00–10:30                 | Panel exploration of key issues with relevant SHA exec  
- Explore evidence and issues in small groups / 1-2-1s  
- Interviewees complete Management Board behaviours feedback questionnaire |
| 10:30–11:30                 | Understanding supporting behaviours  
- Functional and diagonal slice groups of SHA staff to feedback to panel on how DH should support SHA and demonstrate behaviours |
| 11:30–12:30                 | Panel debrief and lunch  
- Agree key themes to discuss with SHA board |
| 12:30–12:45                 | CEO presentation  
- CEO “pitch on the patch” to panel and board |
| 12:45–14:30                 | Panel and full board discussion  
- DN to lead assessment synthesis  
- Panel present specific questions to board:  
  - Major issues and key themes  
  - Specific detailed questions  
  - Issues on Health of org & system  
  - SC board ask questions of panel |
| 14:30–15:00                 | Final panel debrief  
- Agree final issues and implications |
| 15:00–15:30                 | CEO and chair with panel debrief  
- Agree key issues, implications and next steps |

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