

Institution: Lancaster University		
Unit of Assessment: 17, Business and Management		
Title of case study: Transforming healthcare leadership and organisational cultures to deliver high-quality, compassionate care		
Period when the underpinning research was undertaken: 2011-2017		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Michael West	Professor	2011-Present
Period when the claimed impact occurred: 2014-2020		
Is this case study continued from a case study submitted in 2014? N		
<p>1. Summary of the impact</p> <p>A collaborative research project led by West investigating the structural and cultural factors that threaten the safety and quality of care throughout the NHS has underpinned systemic impact within the healthcare systems throughout the UK. The research has been a catalyst for the transformation of leadership and cultures across the sector, becoming central to policy embedded in national strategies such as: 'Developing People, Improving Care' (2016) and 'We Are the NHS: The People Plan for 2020/2021'. The partnership between West and NHS England and NHS Improvement has supported NHS Trusts in England through a programme to develop leadership and cultures that deliver high-quality, compassionate patient care, reaching half a million clinical and managerial staff. Similar approaches have been developed in Wales, Northern Ireland and Scotland. West was appointed a CBE in the Queen's 2020 Birthday Honours List for services to compassion and innovation in the NHS.</p>		
<p>2. Underpinning research</p> <p>Following allegations of serious care failures and avoidable patient deaths in Mid Staffordshire NHS Trust, the Francis Inquiry revealed that between January 2005 and March 2009, up to 1,200 patients died as a result of poor care at Stafford Hospital, a district general hospital in Staffordshire, England. As a result of this inquiry, the Department of Health commissioned research to determine the extent to which cultures of high-quality care existed across the NHS.</p> <p>This research was led by West of Lancaster University Management School (LUMS) and involved a team of 30 interdisciplinary researchers in psychology, anthropology, policy studies and statistics. The other key members of the team and their universities were Dawson (Sheffield), Baker, Dixon-Woods, Martin (Leicester), McKee (Aberdeen), Lilford (Birmingham), and Wilkie (National Association for Patient Participation). The large, mixed-method research programme was carried out between 2010 and 2013, with the bulk of the research activity taking place after West joined LUMS in April 2011 from Aston University. The programme incorporated 300 interviews with senior level executives, managers, and frontline staff; numerous patient, carer and team surveys; hundreds of sets of board minutes and published datasets on performance across all NHS trust types (hospital, mental health, and ambulance); and cultural (ethnographic) case studies (of hospital wards, primary care practices, and emergency care departments), totalling 650 hours of observation. In addition, 10 years' data from the NHS National Staff Survey from >250,000 respondents annually were analysed. The underpinning research revealed many 'bright spots' of excellent care, practice, and innovation across the NHS in England [R1, R2]. However, it also indicated 'dark spots' of poor care, including harried, distracted staff and evidence of deficient leadership, which constituted structural and cultural factors that threatened the quality and safety of care. Among the 'dark spots' were cultures and leadership that were characterised by one or more of the following:</p> <ol style="list-style-type: none"> 1) unclear/disjointed goals in NHS organisations, leading to 'priority thickets' that consumed resources yet provided little coherent strategy; 2) excessive box-ticking to comply with external requirements; 3) multiple regulatory bodies and external agencies serving different but overlapping functions, leading to ambiguity, fragmentation, and competing pressures; 4) poor intelligence on which to base decisions and improvements; 		

- 5) highly variable staff support and a lack of respect and appreciation;
- 6) 'comfort-seeking' behaviours that focused on making a good external impression and positioned staff who raised concerns as trouble-makers;
- 7) a lack of integration of work processes, leading to time-wasting, frustrating barriers, and gaps in care; and
- 8) indiscriminate use of quality improvement management techniques and 'magical thinking' that isolated initiatives would solve many problems quickly and easily [R1, R2].

The recommendations for developing cultures of high-quality care and patient safety based on the research included the following:

- 1) clear national and local-level leadership providing direction focused on quality and safety [R1, R2];
- 2) compassionate and collective leadership at all levels [R3, R4, R5];
- 3) leadership that promotes staff wellbeing and engagement (the key factor in organisations with high-quality care, good financial performance and high patient satisfaction [R3, R4, R5, R6];
- 4) an emphasis on the patient perspective [R1];
- 5) senior staff nurturing cultures that ensure that front-line innovation can flourish and that work pressures do not crowd out space for quality improvement [R1, R3, R4, R5];
- 6) NHS staff working in supportive, well-structured teams [R1, R4];
- 7) better communication within and between teams and encouragement of teams to regularly take time out to review their performance [R1, R4]; and avoidance of burdensome systems for data collection as well as a culture of using data simply for 'comfort-seeking' [R1, R2].

3. References to the research

- [R1] Dixon-Woods, M., ..., **West, M.** (2014). Culture and behaviour in the English National Health Service: overview of lessons from a large multimethod study. *British Medical Journal Quality and Safety*, 23, 106-115. doi.org/10.1136/bmjqs-2013-001947 (388 citations on Google scholar; Altmetric score of 563). *Note that West is the last author as the principal investigator, which is common practice in medical journals.*
- [R2] **West, M.** et al. (2013). *Quality and safety in the NHS: evaluating progress, problems and promise. Quality and Safety in the NHS: Evaluating Progress, Problems and Promise.* Lancaster University.
- [R3] **West, M.** et al Denis, J.L. (2014). Collective leadership for cultures of high-quality health care. *Journal of Organizational Effectiveness: People and Performance*, 1, 240-260. dx.doi.org/10.1108/JOEPP-07-2014-0039 (69 citations on GS, Altmetric score: 7)
- [R4] Lyubovnikova, J., **West, M.**, ... , Carter, M. (2015). 24-Karat or fool's gold? Consequences of real team and co-acting group membership in healthcare organizations. *European Journal of Work and Organizational Psychology*, 24(6), 929-950. doi.org/10.1080/1359432X.2014.992421 (62 citations GS, Altmetric score: 74)
- [R5] Eckert, R., **West, M.**, ... , (2014). [*Delivering a collective leadership strategy for health care*](#). Center for Creative Leadership/The King's Fund. (18 citations on GS)
- [R6] **West, M.** et al. (2017). [*Caring to change: how compassionate leadership can stimulate innovation in health care*](#). The King's Fund. (63 citations GS)

4. Details of the impact

West has persistently led efforts to ensure the dissemination of the findings and implementation of the recommendations of the research programme, giving >300 presentations to national NHS bodies and to practitioners (including doctors, nurses, allied health professionals) in England, Scotland, Wales and Northern Ireland, and individual NHS organisations throughout the UK between 2014 and 2020 [S1, S10(b)]. This engaged approach has produced a wide variety of impacts within a range of healthcare beneficiaries; from government and NHS policy makers, practitioner and service impacts, through to patient experience. These NHS bodies and practitioners are the primary beneficiaries of the research, and the key areas of impact are described in this section.

1 Shaping a national strategy for cultures of high-quality care and compassionate leadership in England

The research led by West [R1, R2, R3, R5] shaped the first NHS national improvement and leadership development strategy: [Developing People, Improving Care, 2016](#). This strategy is being implemented across the NHS in England, is sponsored by all the national bodies overseeing the NHS, and constitutes a national framework to 'guide action on improvement skill building, leadership development, and talent management' across all NHS organisations and roles. West's research outputs (including R1, R3, R4) were cited 10 times in the Culture and Team-working section of the strategy, representing more than a third of the total citations used in this section [S2(a)]. West's research [R1 – R4] has been used to inform assessments of NHS organisations in 2019 and 2020 in relation to the key elements of the *Developing People, Improving Care, 2016* strategy as part of the [NHS England/Improvement Performance Oversight Framework](#). This framework is used to monitor the performance of all NHS provider organisations and to tailor support to their needs. The research was also used to inform the [We are the NHS: People Plan for 2020/2021](#) [S2(b)], published in August 2020, which focuses on developing leadership, cultures and conditions to ensure that staff are being supported and retained and that the NHS is a 'Best Place to Work'. In 2020, West was commissioned by NHSE Improvement to design the measures that will be used to evaluate the implementation of the plan.

As a testament to the impact of the research, the previous NHS Workforce Director General and Director of the NHS Leadership Academy and the lead of the *We are the NHS: People Plan for 2020/2021* commented, *"As an NHS Chief Executive, I have tried to put into practice the processes, interventions and culture that his [West's] work espouses. This has resulted in significant and award-winning success in quality improvement, organisational performance and staff and patient satisfaction. (...) No individual has had a higher impact in this field than Professor West and where his work is turned into practice, it has huge impact on tens of thousands of NHS Staff and on millions of patients"* [S2(c)].

West's research [R6] has also been used to develop the NHS '[Compassionate leadership in crisis](#)' online guide designed for use during the Covid19 Crisis. In 2020, West was appointed a CBE in the Queen's Birthday Honours List for services to compassion and innovation in the NHS.

2 Informing national strategies on cultures of high-quality care and compassionate leadership in Northern Ireland, Scotland and Wales

A comparable approach to shaping national strategy to that in England has been developed in Northern Ireland and has been informed by West's research [R1, R2, R3, R6], culminating in the 2017 launch of the Health and Social Care (HSC) Collective Leadership Strategy: [Health and Wellbeing 2026: Delivering Together](#). The Director of HR & Corporate Affairs, South Eastern HSC, noted, *"Professor Michael West's research and papers into collective leadership & culture were used as the cornerstone to the development of the Collective Leadership strategy for health and social care in Northern Ireland"* [S3].

West's work [R1, R2, R6] was a key influence in the development of [Project Lift](#), a whole-system approach to enhancing leadership capability and capacity in health and care in Scotland [S4(a,b)]. The Head of Leadership and Talent Management of the Scottish Government Health Workforce said that West's work *"has been instrumental and a founding piece of evidence for our new approach to Leadership and Talent Management across Health and Care in Scotland"*. (...) *As such, 'kindness and compassion' are one of our fundamental descriptors, that run through our approach to Values Based Recruitment, Talent Management, Leadership Development, and Performance Appraisal"* [S4(b)].

In addition, West is working with Health Education and Improvement Wales to apply the research findings which has led to the implementation of a 10-year culture and [compassionate leadership](#) strategy across the country. The Director of Workforce and OD, Deputy CEO, Health Education and Improvement Wales, said, *"Professor West is playing a pivotal role in influencing the development of the health and social care leadership strategy, which is aimed at driving a consistent approach to compassionate leadership"* [S5].

3 Implementing a culture and leadership programme for the NHS across the UK and healthcare systems internationally

Drawing directly on West's research [R1, R5] [S6(a)] and working in close collaboration with West and The King's Fund, NHS Improvement (the NHS regulatory body for England), committed in 2015 to building an [open-source support programme](#) for healthcare organisations. NHS Improvement has invested approximately GBP1 million to develop the tools which enable organisations to assess their existing cultures and leadership and design and implement strategies to ensure cultures of high-quality care [S6(b)]. Based entirely on the key elements for compassionate cultures and leadership identified by the research [R1-R6], between 2015 and 2020, the programme has been implemented by >80 NHS trusts in England as well as NHS organisations in Wales, Northern Ireland and Scotland [S6(c)]. An evaluation by independent researchers led by a Professor of Health Management at the University of Manchester described the programme as *"positive, constructive and purposeful in supporting NHS trusts to develop a compassionate and inclusive culture."* [S6(d)]. The former Executive Director of Improvement at NHS Improvement also commented that as a result of West's research and presentations to NHS national bodies and individual trusts, *"all leadership teams are being asked to review their people development strategies and revise priorities and budgets to target building these capabilities for their organisations in the areas identified by the framework... Professor West's work has been central to providing the evidence base and approaches (tools) to support the changes required for provider organisations across the NHS to develop cultures of high quality, compassionate and continually improving care"* [S6(b)].

The culture programme was a guiding framework used in service transformation following a merger in 2019 which created Manchester University NHS Foundation Trust. The Group Director of Organisation Design and Development at the trust confirmed that measurable benefits have been achieved such as: reduced variation in lithotripsy service; quicker access to urgent gynaecological surgery and increasing access to rehabilitation services for fractured neck and femur; reduced reliance on agency and locum staff; and improved health and wellbeing of staff. In relation to the culture programme, she said that it: *"provided a robust framework for understanding, describing and strengthening the leadership and culture of our new organisation."* [S7(a)]. West's research has also provided the basis for leadership programmes developed at the recently merged Liverpool University Hospitals NHS Foundation Trust. Based on a competency framework that applies to all staff, between 2019 and 2020 these programmes have been delivered to approximately 240 senior and operational managers, with highly positive evaluation of impacts at individual, team and organisational levels. Participant feedback indicated benefits such as time and money saved through improved working relationships, improved turnaround times in A&E, and improved patient care [S7(b)].

The research has also directly informed practice in other healthcare systems around the world. In Australia, since 2014, West has assisted the Ministries of Health of Western Australia, Victoria and New South Wales, presenting his research and recommendations to >1,000 health leaders, including CEOs, clinical senates, board members, regulatory bodies such as the NSW Clinical Excellence Commission and Safer Care Victoria [S8]. A member of the Faculty of Medicine at the University of Melbourne commented, *"Professor West's work has been embedded in several State and National leadership programs and will continue to inspire Australian health leaders, at all levels, to develop a culture of high-quality compassionate care."* [S8]. In Ireland, the Programme Director of the Institute of Leadership, Royal College of Surgeons in Ireland, University of Medicine and Health Sciences reported that West's research *"...underpins all of our academic and leadership programmes in Ireland, Bahrain and Dubai and our Health Service Executive (H.S.E.) National Leadership programmes for over 100 clinical directors and other senior healthcare leaders to support and nurture cultures of high-quality compassionate care"* [S9].

4 Leading General Medical Council (GMC) review of the wellbeing of UK doctors and King's Fund/RCN Foundation review of the wellbeing of UK nurses and midwives

West was asked to co-chair, with Denise Coia, a review for the GMC ([Caring for doctors](#), [Caring for patients](#), between February 2018 and November 2019) examining the mental

health of the 300,000 doctors and 50,000 medical students across the UK, with a focus on the cultures of the organisations where they work [R1, R2, R4, R5]. The review has led to extensive recommendations to initiate changes to doctors' working contexts (increasing doctors' influence and control; improving their work conditions, such as by incorporating rest and rotas; improving teamwork; promoting compassionate leadership and cultures; and addressing workload) that are now being implemented by all the national bodies overseeing the work of doctors. An action group is coordinating the implementation of the changes with other national bodies across the UK [S10(a)]. West also led an inquiry by The King's Fund ('[The courage of compassion](#)', between April 2020 and September 2020) commissioned by the Royal College of Nursing Foundation into the mental health of the 700,000 nurses and midwives across the UK, with a focus on compassionate leadership and cultures [R1-R6]. In the four weeks after the launch in September 2020 the report was downloaded 2,596 times, and was covered in national print and broadcast media as well as specialist press. It received positive feedback from key individuals (e.g. Chief Nursing Officers, Chief Midwifery Officers) who found it useful to help change practice, and from stakeholder organisations (e.g. [Nursing & Midwifery Council](#), [NHS Employers](#)) who welcomed the recommendations [S10(b)]. Following the report's publication, the Health and Social Care committee in the House of Commons called West to give oral evidence on workforce burnout and resilience in the NHS and social care in October 2020 [S10(c)].

5. Sources to corroborate the impact

- [S1] [A list of West's presentations over the REF period](#) between 2013 and 2020.
- [S2] Evidence of shaping national strategy in England: a) NHS Improvement strategy: [Developing People Improving Care](#), December 2016, pp. 39-41, b) Testimonial from NHS England Director of Staff Experience and Engagement, 2021, c) Testimonial from previous NHS Workforce Director General, 2017.
- [S3] Evidence of informing strategies in Northern Ireland: Testimonial from Director of HR & Corporate Affairs, South Eastern HSC, 2019.
- [S4] Evidence of informing strategies in Scotland: a) [Progress Lift report, June 2019](#) (pp. 14, 16, 27, 54, 55), b) Testimonial from Head of Leadership and Talent Management, Scottish Government Health Workforce, 2019.
- [S5] Evidence of informing strategies in Wales: Testimonial Director of Workforce and OD, Deputy CEO, Health Education and Improvement Wales, 2019.
- [S6] Evidence of influence on NHS Improvement's Culture and Leadership Programme and impact of the programme: a) NHS Culture and leadership programme: [concepts and evidence](#), 2016, pp. 9, 10, 19, 20, b) Testimonial from the former Executive Director of Improvement at NHS Improvement, 2017, c) NHS Presentation: 'Introducing the Culture and Leadership Programme', 2020, d) Evaluation 'Formative Evaluation of NHS England and NHS Improvement's Culture and Leadership Programme', 2020, p.13.
- [S7] Evidence of influence on large newly merged Trusts: a) Testimonial from Group Director of Organisation Design and Development, Manchester University NHS Foundation Trust, 2019 and 2020, b) Testimonial from Head of OD & Learning, Liverpool University Hospitals NHS Foundation Trust, 2020.
- [S8] Evidence of informing practice in Australia: Testimonial from a member of the Faculty of Medicine, Dentistry & Health Sciences/Research, Innovation & Commercialisation at the University of Melbourne, 2020.
- [S9] Evidence of informing practice in Ireland: Testimonial from the Programme Director of the Institute of Leadership, Royal College of Surgeons, 2020.
- [S10] Evidence linked to national reviews of wellbeing in healthcare professionals: a) Testimonial from Assistant Director of Policy and Business Transformation (GMC), 2020, b) King's Fund report for "The courage of compassion", 2020, c) [Oral evidence to the House of Commons's Health and Social Care Committee](#), 2020.