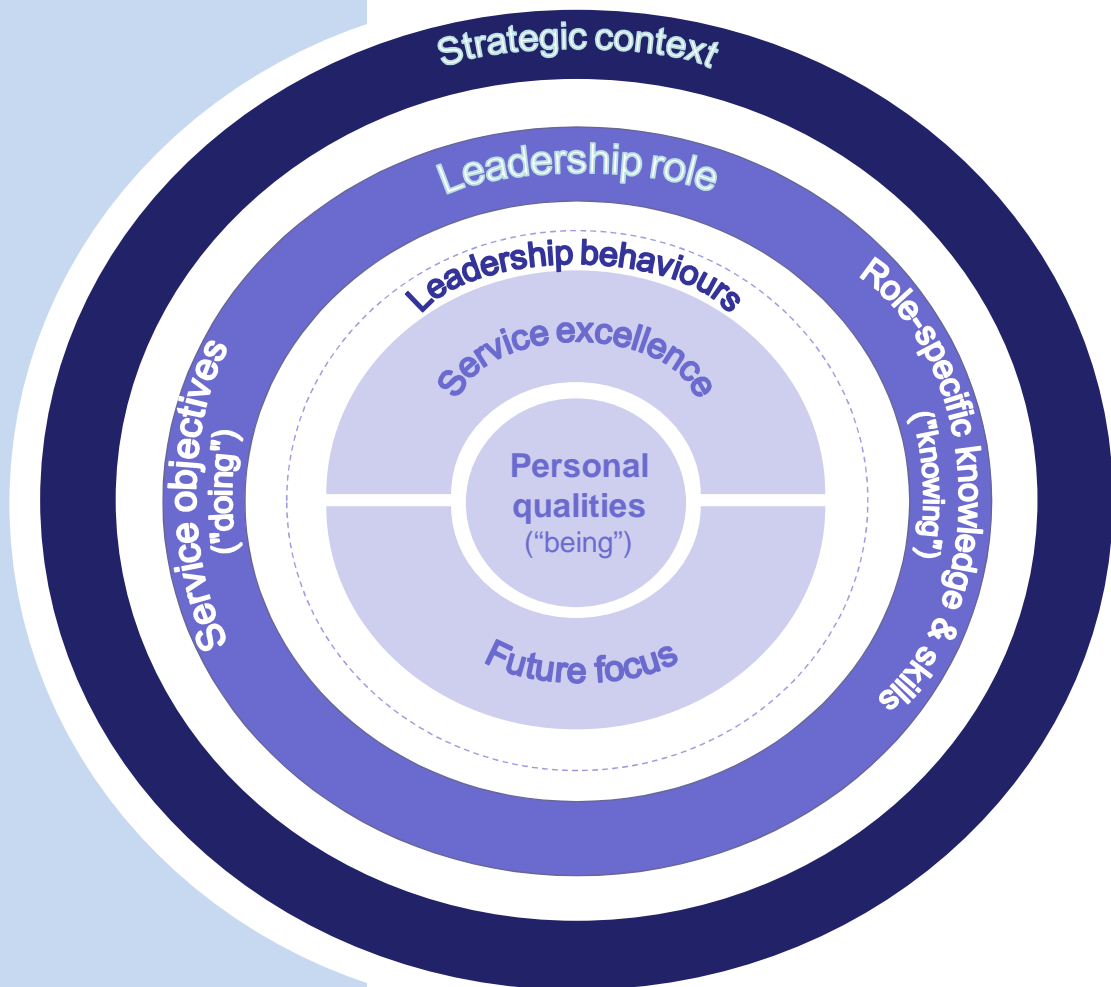


# NHS Scotland Leadership Qualities Framework



Guidance Notes

July 2014



# NHS Scotland Leadership Qualities Framework

## Contents

<b>1: Introduction to the Framework</b>	<b>1</b>
- Why we need a Leadership Framework	
- Overview of the Framework	
- Review of the Framework	
<b>2: Using the Framework</b>	<b>5</b>
<b>3: The Leadership Behaviours</b>	<b>6</b>
- Summary	
- Personal qualities	
- Service excellence	
- Future focus	

# 1: Introduction to the Framework

## Why we need a "Leadership Framework"

Our leaders and managers are operating within a context of change and complexity. The development of individuals in leader and manager roles, as well as of leadership teams, take place within the strategic context in which they operate, i.e., their particular part of the organisation, across their whole organisation, as well as across health and social care in Scotland.

This context influences the priorities and challenges each individual faces in their role. It shapes **what** they are required to focus on in their leadership role, i.e., service objectives, quality improvements, performance targets. However, **how** individuals and teams lead - in terms of values, behaviours, attitudes, and mindset - is at least as important as what they deliver in the leadership role. In other words, how leaders act and behave can help make or break delivery of the change agenda in health.

Having a consistent NHS Scotland-wide Leadership Framework provides clarity about:

- Why effective leadership and management is important to the delivery of high quality health and social care services
- What is expected of individuals, teams and organisations in terms of delivering effective leadership and management (the "what")
- The values, behaviours and attitudes of leaders and managers which underpin effective leadership and management (the "how")

It can be used to underpin personal and team development plans, as well as leadership and organisational development activities, thereby ensuring alignment and consistency between organisational purpose / focus and individual, team and organisational development.

## Overview of the NHS Scotland Leadership Qualities Framework <sup>1</sup>

The original NHS Scotland Leadership Qualities Framework was developed by the leadership team (precursor to the National Leadership Unit) in the Scottish Executive Health Directorates, on behalf of NHS Scotland. It was launched along with *Delivery through Leadership* (Scottish Executive, 2005).<sup>2</sup> The review of *Delivery through Leadership* in 2008 confirmed that stakeholders agreed with having a framework of leadership qualities and behaviours. They also felt that the particular qualities and behaviours were still largely appropriate, with some modifications.

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<sup>1</sup> "Delivering Quality through Leadership", NHS Scotland (June 2009), Section 3 & Appendix 2

<sup>2</sup> "Delivery through Leadership", Scottish Executive (2005), the NHS Scotland leadership development strategy, 2005-08

The NHS Scotland Leadership Qualities Framework was amended in 2008-9, as shown in Figures 1 & 2. While the amended framework comprised the same clusters of leadership behaviours, it was re-drawn to put a focus on "personal qualities". There was also some re-wording in line with a "culture and diversity check". The amended Framework was launched along with *Delivering Quality through Leadership* (Scottish Government, 2009), the leadership development framework for NHS Scotland, 2009-2012.

The personal qualities are re-positioned at the heart of the leadership framework, supporting the notion of authentic leadership. Resilience in particular is a critical personal quality for NHS leaders who need to be able to manage upwards as well as across the organisation, to manage ambiguity, to take difficult decisions and to have conversations which they may find challenging.

Leaders in the NHS have to cope with the paradox of the leadership role:

- Striking the balance between a long-term focus on health improvement with the short-term imperative of meeting HEAT targets;
- Managing the tension between innovation and risk; and,
- Managing corporate governance and performance while being supportive, engaging people and enabling others to develop.

These themes apply equally to leadership at all levels - from the top in the Scottish Government and the Boards through to the front line. There is a need for a consistency of approach across all levels.

The model of 'heroic leadership' is no longer appropriate. What is required is 'engaging leadership':

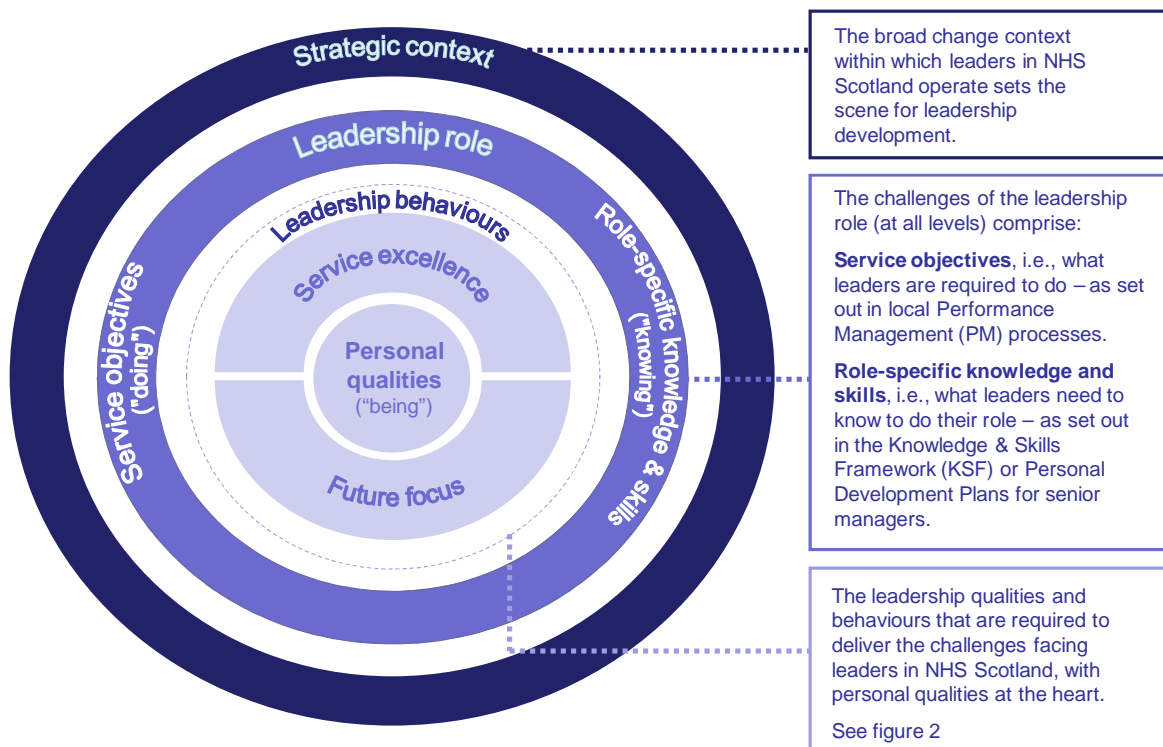
“a commitment to building shared visions with a range of different internal and external stakeholder...[which] exploits the diversity of perspectives and the wealth of experiences, strengths and potential that exists within the organisation, and with partners and other stakeholders”.<sup>3</sup>

In essence, it is a model of leadership which focuses on building capacity and capability in people and organisations. It is leadership which is underpinned by the shared NHS and public service values of: quality of service; equity of access; respect for diversity; mutuality and partnership; integrity; and, consistency.

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<sup>3</sup> Beverley Alimo-Metcalfe & John Alban-Metcalfe (September 2008), *Engaging Leadership – Creating organisations that maximise the potential of their people*, CIPD Research Insight, p.12.

**Figure 1:** NHS Scotland Leadership Qualities Framework



**Note:** Extract from "Delivering Quality through Leadership", NHS Scotland Leadership Development strategy (2009), section 2.

In setting out this Framework, we recognise that:

- Leadership development takes place within the **strategic context** in which our leaders are operating. The detail is outlined in Section 2.0 of Delivering Quality through Leadership.<sup>4</sup> This sets the scene for leadership development.
- The **leadership role** is defined and linked to local processes including performance management, personal development planning and application of the Knowledge and Skills Framework (KSF). This sets out the "what" of leadership.
- A set of **leadership qualities and behaviours** which we need our leaders to demonstrate in how they deliver their role. These set out the "how" of leadership.
- Leadership development does not take place in isolation but is critically linked to other processes, locally and nationally - such as performance management, personal development planning, eKSF.
- We need development approaches that concentrate on both *leadership* development, i.e., enhancing collective leadership capability, as well as *leader* development, i.e., enhancing the development of individual leaders.

<sup>4</sup> An updated outline of the context is provided in "Leadership Matters", following the review in 2012 of the national strategy for leadership development which was conducted alongside the engagement exercise for "Everyone Matters: 2020 Workforce Vision" (Scottish Government, 2013).

## Review of the NHS Scotland Leadership Qualities Framework

Alongside the review of the NHS Scotland leadership development strategy during 2012, a pragmatic decision was taken to adopt the "NHS Leadership Framework" (developed in NHS England) and its accompanying 360° feedback tool. However, this framework has now been replaced by the "Healthcare Leadership Model" (from April 2014) and the feedback tool has ceased to exist.

As a contingency measure for 2014-15, therefore, we have returned to using the **NHS Scotland Leadership Qualities Framework** (as outlined in this document). We have made an interim arrangement with Pilat HR Solutions who are providing access to the **360° feedback tool** which is based on the NHS Scotland Leadership Qualities Framework.

During this interim period, we will be working with colleagues across health and social care in Scotland on the development of a new leadership framework which reflects our changing context. (For information on progress with the new framework, please contact [nlu@nes.scot.nhs.uk](mailto:nlu@nes.scot.nhs.uk))

The development of a new framework is being undertaken in the context of the implementation of:

- "Everyone Matters: the 2020 Workforce Vision (Scottish Government, 2013)
- The Scottish Government Leadership & Management Policy Statement and the supporting leadership and management development strategic document, "Leadership Matters" (to be published, 2014)
- Health and Social Care integration
- Public services reform and collaboration across Scotland
- Strategy for building leadership capacity in Scotland's social services, 2013-2015 (SSSC, 2014)

## 2: Using the Framework

In using the Framework, bear in mind the following:

- Developing leadership capabilities *out of context* is seen as insufficient on its own. It is crucial to develop the leader *in the role* and in full recognition of the complexities of their *context* too.
- Focus in particular on those capabilities and behaviours which a leader needs to develop - or to build upon - in order to lead well in their particular situation as well as in the wider context of health and social care in Scotland.
- Be aware of how these capabilities and behaviours are related to, and under-pinned by, our values (as outlined in *Everyone Matters: 2020 Workforce Vision* for NHS Scotland).
- In how we develop our leaders and managers, pay attention to fundamental management skills and processes, as well as personal capabilities and values around self-awareness, learning and reflective practice.
- Make explicit the links between the Leadership Framework and the associated leadership behaviours and other developmental frameworks / tools, such as the NHS Knowledge & Skills Framework.
- Ensure that the application of the leadership qualities is linked with other processes, including performance management and personal development planning (as outlined in figure 1).

The overall framework (Figure 1) and the leadership qualities (see Figure 2) provide a basis for further local development to support:

### **Recruitment and assessment:**

- Developing role profiles and person specifications to recruit leaders
- Identifying which of the leadership behaviours are critical to the effective delivery of a particular leadership role, at a particular time
- Focusing on several key leadership behaviours in a recruitment or assessment process

### **Personal and team development planning and review:**

- Focusing on which of the leadership behaviours are critical to the person's performance, in their role, at this time and over the coming year(s)
- Making use of the 360° feedback tool to support personal development

### **Design of leadership development initiatives:**

- Focusing on the development of particular leadership behaviours, for individual participants
- Focusing on the development of team leadership behaviours

### 3: The Leadership Behaviours

The set of leadership behaviours or qualities, summarised in Figure 2, has been drawn from a wide range of NHS, public sector, private sector and contemporary academic thinking and models.

It recognises the need for consistent use of positive behaviours by leaders, i.e., that performance is not simply about getting things done regardless of *how*. Fully effective performance requires balancing *what* needs to be done with *how* it gets done. It should be used as part of the performance review and personal development planning processes.

**Figure 2:** Summary of leadership qualities



The detail of the leadership behaviours is summarised in the pages following (pages 7-14).

There is an on-line 360° feedback diagnostic tool available to support the use and development of the leadership qualities and behaviours. See separate documentation relating to the use of the 360° feedback diagnostic tool.



## Personal Qualities

The Personal Qualities are deliberately positioned at the heart of the framework of leadership behaviours, supporting the notion of authentic leadership. Resilience in particular is a critical personal quality for NHS leaders who, working within a political context, need to be able to manage upwards as well as across the organisation, to manage ambiguity, to take difficult decisions and have conversations they may find challenging.



"Personal Governance" is one of the personal qualities. A "Code of Personal Governance" is outlined (on page 15) and provides a code of practice for all leaders and managers in NHS Scotland. This "Code" provides a measure against which individuals can test their decisions and actions. It also provides reassurance to all those served by NHS Scotland of the professional standards leaders and managers use in making complex and balanced judgements.

The "Code" was based on work done (originally in 2005) by the Institute of Healthcare Management and the NHS Confederation to support the development of similar Codes elsewhere in the NHS.

Please note: It is likely that the "Code" will be updated as part of the ongoing implementation of *Everyone Matters: 2020 Workforce Vision* (2013). Managers should also consult the NHS Scotland Staff Governance Standard <http://www.staffgovernance.scot.nhs.uk/>

## Personal Qualities



**Personal governance** (also see Code of Personal Governance, p15)

Descriptors	Behaviour statements in 360° tool
<ul style="list-style-type: none"> <li>▪ Commitment to service excellence.</li> <li>▪ Integrity and honesty.</li> <li>▪ Account for performance.</li> <li>▪ Engage with others in decision-making.</li> <li>▪ Develop team and self.</li> </ul> <p>➤ See examples of leadership behaviours in table below.</p>	<ol style="list-style-type: none"> <li>1. Makes decisions based on patients' / clients' needs.</li> <li>2. Encourage and give recognition to service excellence.</li> <li>3. Act with honesty and integrity.</li> <li>4. Open and transparent in communication.</li> <li>5. Respect confidentiality of information.</li> <li>6. Take responsibility for own performance.</li> <li>7. Take responsibility for team's performance.</li> <li>8. Model and promote collaborative working.</li> <li>9. Work with others to create a shared vision.</li> <li>10. Build and develop effective teams.</li> <li>11. Take responsibility for personal development.</li> <li>12. Understand and value cultural differences.</li> </ol>

➤	Positive behaviours	Negative behaviours
<b>Commitment to service excellence.</b>	<ul style="list-style-type: none"> <li>– Puts patients' / clients' needs at the heart of decision-making.</li> <li>– Challenges decisions which are not based on patients' / clients' needs.</li> <li>– Recognises and rewards excellence.</li> <li>– Celebrates success.</li> <li>– Diagnoses and tackles poor performance and provides appropriate support.</li> </ul>	<ul style="list-style-type: none"> <li>– Makes decisions which are not centred on patients' / clients' needs and does not consider the patient / client point of view.</li> <li>– Tolerates poor practice and does not tackle poor performance.</li> <li>– Takes a punitive approach to poor performance, giving no support.</li> </ul>
<b>Integrity and honesty.</b>	<ul style="list-style-type: none"> <li>– Is truthful and honest in dealing with people.</li> <li>– Takes an open approach to issues.</li> <li>– Creates a climate of openness in which people can say 'no' as appropriate.</li> <li>– Respects confidentiality of information consistently.</li> <li>– Checks out and tackles issues potentially involving dishonesty.</li> </ul>	<ul style="list-style-type: none"> <li>– Behaves in a deceptive, dishonest, or manipulative way.</li> <li>– Hides and encrypts information so that it is not readily available to those who need it.</li> <li>– Expects others simply to agree and not question actions.</li> <li>– Leaks or inappropriately shares confidential information.</li> <li>– Flaunts or ignores issues potentially relating to dishonesty.</li> </ul>

	Positive behaviours	Negative behaviours
<b>Account for performance.</b>	<ul style="list-style-type: none"> <li>– Accepts responsibility and accountability.</li> <li>– Gives credit where credit is due.</li> <li>– Challenges micro-management where it is not needed.</li> <li>– Gives clear, concise, timely explanations – so that there are no surprises.</li> <li>– Ensures information is organised to explain good and poor performance clearly.</li> </ul>	<ul style="list-style-type: none"> <li>– Does not take on responsibility.</li> <li>– Takes credit for others’ work.</li> <li>– Promotes a culture of dependency.</li> <li>– Withholds or is late in providing information.</li> <li>– Information about performance is poorly organised or not provided at all.</li> </ul>
<b>Engage with others in decision-making.</b>	<ul style="list-style-type: none"> <li>– Promotes a spirit of co-operation and inter-dependency.</li> <li>– Seeks first to understand.</li> <li>– Encourages meaningful dialogue at the earliest opportunity.</li> <li>– Develops a shared vision.</li> <li>– Is flexible in approach.</li> </ul>	<ul style="list-style-type: none"> <li>– Is suspicious of others and promotes dependency.</li> <li>– Seeks first to be understood.</li> <li>– Decision-making takes place within cliques.</li> <li>– Does not share information or views with others so that they are left out of the decision-making.</li> <li>– Is rigid and imposes change.</li> </ul>
<b>Develop team and self.</b>	<ul style="list-style-type: none"> <li>– Builds self-belief and promotes a ‘can do’ attitude.</li> <li>– Gives others freedom to make decisions within given authority.</li> <li>– Lets go of control, enabling others to take calculated risks.</li> <li>– Inspires trust.</li> <li>– Values everyone as individuals and respects differences.</li> <li>– Uses inclusive language.</li> <li>– Understands and values cultural differences.</li> <li>– Shows willingness to change and learn from mistakes.</li> <li>– Encourages behaviour which is consistent with all of the above and challenges those whose behaviour is not.</li> </ul>	<ul style="list-style-type: none"> <li>– Undermines other people’s confidence.</li> <li>– Concerned to retain ultimate control at all costs.</li> <li>– Operates with complex and controlling systems of accountability.</li> <li>– Is manipulative.</li> <li>– Expects everyone to be ‘the same’, i.e., does not respect diversity.</li> <li>– Uses discriminatory language.</li> <li>– Is unaware or ignorant of diversity and equality.</li> <li>– Acts as if they know it all.</li> <li>– Behaviour which is inappropriate is not challenged.</li> </ul>

## Personal management

Descriptors	Behaviour statements in 360° tool
<ul style="list-style-type: none"> <li>▪ Self-awareness.</li> <li>▪ Self management &amp; resilience.</li> <li>▪ Champion and live the NHS values.</li> </ul> <p>➤ See examples of leadership behaviours in table below.</p>	<p>13. Show understanding of own strengths and development needs.</p> <p>14. Seek feedback on own performance and act on it.</p> <p>15. Recognise and manage own emotions.</p> <p>16. Recognise emotions in others and help them manage them.</p> <p>17. Come across as positive and enthusiastic.</p> <p>18. Behave consistently with the NHS values.</p> <p>19. Does what s/he says they will do.</p>

	Positive behaviours	Negative behaviours
<b>Self-awareness.</b>	<ul style="list-style-type: none"> <li>– Takes the time to reflect.</li> <li>– Values honest feedback.</li> <li>– Is realistic about strengths and development needs</li> <li>– Seeks out feedback and support where needed.</li> </ul>	<ul style="list-style-type: none"> <li>– Does not seek out feedback.</li> <li>– Does not admit to their weaknesses or development needs.</li> <li>– Has unrealistic expectations of self and others.</li> <li>– Does not ask for help or support, tries to go it alone.</li> </ul>
<b>Self management &amp; resilience.</b>	<ul style="list-style-type: none"> <li>– Adopts a positive and enthusiastic approach.</li> <li>– Is consistently fair in dealing with others.</li> <li>– Is responsible and constructive.</li> <li>– Demonstrates warmth and is easy to approach.</li> <li>– Demonstrates mutual respect.</li> <li>– Recognises and manages own emotions and handles others' emotions with appropriate sensitivity.</li> <li>– Is resilient especially when faced by setbacks.</li> </ul>	<ul style="list-style-type: none"> <li>– Comes across as overly negative and cynical.</li> <li>– Is temperamental and changeable in mood.</li> <li>– Is unco-operative.</li> <li>– Displays vindictive and bullying behaviour.</li> <li>– Is unapproachable, only approached when essential.</li> <li>– Lacks respect for others.</li> <li>– Is insensitive to others' emotions and the impact they have on others.</li> <li>– Gives up when faced with setbacks.</li> </ul>
<b>Champion and live the NHS values.</b>	<ul style="list-style-type: none"> <li>– Actions are consistent with what they say they will do.</li> <li>– Does what they say that they will do, even when this means admitting when a promise cannot be kept.</li> </ul>	<ul style="list-style-type: none"> <li>– Words and actions do not match.</li> <li>– Lets others down – does not make it happen.</li> <li>– Takes actions which are inconsistent with NHS values, even when challenged by others.</li> </ul>

## Seeking understanding

Descriptors	Behaviour statements in 360° tool
<ul style="list-style-type: none"> <li>▪ Asking the difficult &amp; challenging questions proactively.</li> <li>▪ Listening empathetically to understand.</li> <li>▪ Maintaining a contemporary knowledge of good practice.</li> </ul> <p>➤ See examples of leadership behaviours in table below.</p>	<p>20. Constructively challenge current thinking and practice.            21. Create a climate of support and accountability.            22. Open to new ideas.            23. Actively listen to other people to understand their views.            24. Seek comparisons and best practice from within the NHS.            25. Seek comparisons and best practice from outside the NHS.</p>

➤	Positive behaviours	Negative behaviours
<b>Asking the difficult &amp; challenging questions proactively.</b>	<ul style="list-style-type: none"> <li>– Seeks to understand why things are done the way they are; does not just accept the status quo.</li> <li>– Creates a climate of support and accountability.</li> <li>– Encourages dialogue.</li> </ul>	<ul style="list-style-type: none"> <li>– Simply accepts the status quo without question.</li> <li>– Creates a climate of blame in which people are reluctant to express their views openly.</li> <li>– Closes down conversation.</li> </ul>
<b>Listening empathetically to understand.</b>	<ul style="list-style-type: none"> <li>– Open to new ideas.</li> <li>– Shows genuine concern.</li> <li>– Tests out their understanding and provides summaries as a way of ensuring they are understood.</li> </ul>	<ul style="list-style-type: none"> <li>– Closed to new thinking and blocks innovation by others.</li> <li>– Shows superficial interest in others.</li> <li>– Assumes they have understood and does not check.</li> </ul>
<b>Maintaining a contemporary knowledge of good practice.</b>	<ul style="list-style-type: none"> <li>– Seeks comparisons and encourages change.</li> <li>– Ensures learning, research and development are integral to improving service delivery.</li> <li>– Encourages others to share knowledge through networking.</li> </ul>	<ul style="list-style-type: none"> <li>– Simply reacts to externally driven change.</li> <li>– Does not maximise the benefit of learning and R&amp;D to improve service delivery.</li> <li>– Is suspicious of knowledge sharing and discourages networking.</li> </ul>

## Service Excellence

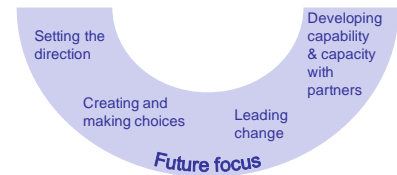
Sitting alongside the personal qualities, there are three leadership qualities aimed at delivering service excellence. These are further described in the table below.



<b>Ensuring focus:</b>	
<b>Descriptors</b>	<b>Behaviour statements in 360° tool</b>
<ul style="list-style-type: none"> <li>▪ Clearly identify and focus attention on the key priorities for delivery.</li> <li>▪ Monitor progress against plans, managing pace and stress.</li> <li>▪ Takes ownership to plan work on a proactive and realistic basis.</li> </ul>	<ul style="list-style-type: none"> <li>26. Recognise key priorities for delivery.</li> <li>27. Stay focused on key priorities for delivery.</li> <li>28. Keep people focused on the key priorities for delivery.</li> <li>29. Anticipate pressures that might interfere with service delivery.</li> <li>30. Take action to manage pressures that might interfere with service delivery.</li> </ul>
<b>Delivering governance:</b> (clinical, staff, financial and corporate)	
<ul style="list-style-type: none"> <li>▪ Is concerned to look after the needs of patients, staff and the public, ensuring adherence to appropriate standards of quality and safety.</li> <li>▪ Identifies risk and is concerned to manage and balance risk appropriately.</li> <li>▪ Maintains professional ethics when confronted with pressure from others and the situation.</li> </ul>	<ul style="list-style-type: none"> <li>31. Ensure appropriate standards of safety for staff, patients and public.</li> <li>32. Consider all aspects of Governance in making decisions.</li> </ul>
<b>Achieving results:</b>	
<ul style="list-style-type: none"> <li>▪ Create a climate of performance delivery and accountability.</li> <li>▪ Set clear goals and objectives.</li> <li>▪ Manage performance by recognising good performance and tackling poor performance constructively.</li> <li>▪ Balance delivery of results with service quality and excellence.</li> </ul>	<ul style="list-style-type: none"> <li>33. Create a culture which is geared to service excellence.</li> <li>34. Actively manage the performance of all individuals within the team.</li> <li>35. Constructively tackle complex issues.</li> <li>36. Achieve a win-win resolution of issues.</li> </ul>

## Future focus

Sitting alongside the personal qualities, there are four leadership qualities aimed at ensuring future focus. These are further described in the table below.



<b>Setting the direction:</b>	
<b>Descriptors</b>	<b>Behaviour statements in 360° tool</b>
<ul style="list-style-type: none"> <li>▪ Create purpose with a focus on quality, outcomes and health improvement.</li> <li>▪ Shape and articulate the future with enthusiasm.</li> <li>▪ Inspire others around the vision of working collaboratively across the public sector.</li> </ul>	<p>37. Clearly focus on longer-term outcomes.</p> <p>38. Create a sense of purpose for delivering agreed outcomes.</p> <p>39. Communicate the vision and make it happen.</p> <p>40. Create enthusiasm for achieving the agreed outcomes.</p>

<b>Creating and making choices:</b>	
<ul style="list-style-type: none"> <li>▪ Think flexibly and foster innovation.</li> <li>▪ Make choices in the context of uncertainty and ambiguity.</li> <li>▪ Involve and engage others in decision-making and build on their ideas.</li> <li>▪ Be prepared to take calculated risks.</li> <li>▪ Be politically aware and politically astute in approaching situations and in communicating decisions.</li> </ul>	<p>41. Think radically and creatively to find solutions to meet goals.</p> <p>42. Encourage others to be flexible and innovative in finding new ways to improve service delivery.</p> <p>43. Recognise the uncertainty and ambiguity in situations.</p> <p>44. Balance the need to make progress and the need to gather more information.</p> <p>45. Understand the wider context and the underlying politics and realities.</p> <p>46. Take calculated risks showing awareness of the needs of multiple stakeholders.</p>

<b>Developing capability and capacity with partners:</b>	
<b>Descriptors</b>	<b>Behaviour statements in 360° tool</b>
<ul style="list-style-type: none"> <li>▪ Build relationships and collaborative partnerships which recognise inter-dependency and which support shared learning.</li> <li>▪ Inspire a culture of development across the organisation and in working with partners.</li> </ul>	<p>47. Work collaboratively with key partners to achieve goals.</p> <p>48. Build positive relationships with partner teams and organisations.</p> <p>49. Readily share learnings with partners for mutual benefits.</p> <p>50. See a development culture as critical to securing long-term goals.</p> <p>51. Promote an environment within which people are passionate about personal development.</p> <p>52. Promote an environment within which people are passionate about team development.</p>

<b>Leading change:</b>	
<ul style="list-style-type: none"> <li>▪ Align people, structures, systems and processes to secure goals.</li> <li>▪ Seize technological solutions to improve healthcare.</li> <li>▪ Inspire and influence others and motivate them to change.</li> <li>▪ Engage others in making changes which result in service improvement.</li> </ul>	<p>53. Identify the full range of effects when implementing change.</p> <p>54. Address all the implications of the planned change.</p> <p>55. Secure the right resources and support needed to achieve change.</p> <p>56. Explore and understand emerging technologies.</p> <p>57. Actively pursue technological solutions to improve service.</p> <p>58. Create a momentum and enthusiasm for change through personal visibility and drive.</p>



## Leaders' / Managers' Code of Personal Governance

As an NHS Scotland Leader / Manager I will:

### **Pursue service excellence by:**

- Ensuring patients' / clients' needs are at the centre of decision-making;
- Seeking to protect patients / clients and staff from clinical and environmental risk;
- Encouraging service excellence and supporting changes to make this a reality.

### **Act with integrity and honesty by:**

- Communicating with openness and honesty in all matters including handling complaints and giving feedback to staff;
- Ensuring confidential and constructive communication;
- Managing resources and financial risk effectively and efficiently;
- Ensuring personal integrity and honesty at all times;
- Seeking to protect patients / clients and NHS resources from fraud, inducements and corruption.

### **Account for my own and my team's performance by:**

- Taking responsibility for my own and my team's performance;
- Complying with all statutory requirements;
- Providing appropriate explanations on performance;
- Acting on suggestions / requirements for improving performance;
- Supporting the Accountable Office of my organisation in his / her responsibilities.

### **Engage appropriately with others in decision-making by:**

- Ensuring that patients, the public, staff and partner organisations are able to influence decision-making in relation to NHS services.
- Supporting effective and informed decision-making by patients about their own care;
- Seeking out the views of others and building mutual understanding;
- Ensuring clarity and consistency in relation to dual accountability.

### **Develop my team and myself by:**

- Building and developing effective teams, supported by appropriate leadership;
- Instilling trust and giving freedom to staff / partners to make decisions within authority;
- Being aware of and taking responsibility for my behaviour and continuous personal development as a NHS leader / manager, to ensure my fitness for purpose.

**Please note:**

This "Code" provides a measure against which individuals can test their decisions and actions. It also provides reassurance to all those served by NHS Scotland of the professional standards leaders and managers use in making complex and balanced judgements. The "Code" was based on work done (originally in 2005) by the Institute of Healthcare Management and the NHS Confederation to support the development of similar Codes elsewhere in the NHS.

It is likely that the "Code" will be updated as part of the ongoing implementation of *Everyone Matters: 2020 Workforce Vision* (2013). Managers should also consult the NHS Scotland Staff Governance Standard.

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