

SCOTTISH ACADEMY FOR HEALTH POLICY AND MANAGEMENT Position Paper: March 2004

This position paper provides a summary of proposals for the foundation of the Scottish Academy for Health Policy and Management. The Academy will adopt and develop current practice in the field of knowledge management to provide a forum which brings together SEHD, the NHSS, Partners and the Academic community to support health policy development and policy implementation in Scotland. The Academy will provide:

- a collaborative network to identify and co-ordinate clearly defined research and evidence to support policy, strategy and service development in SEHD, NHSS and other partner organisations
- dedicated resources to support policy implementation, service development and management practice
- management education and skills development to support implementation and improved service delivery
- a 'knowledge exchange' facility to store and disseminate knowledge and learning

This Position Paper reports on the outcome of 'A Scottish Academy for Health Policy and Management Feasibility Study and Supporting Business Case' and provides an update on the progress of the Research and Policy Development Initiative, including next steps for the development of the Academy.

1. The SAHPM Feasibility Study and Business Case

Between October 2003 and January 2004 independent researchers conducted a feasibility study, and prepared an outline business case for the proposed Academy. Their report 'SAHPM Feasibility Study and Supporting Business Case' shows strong support for the Academy and informs this Position Paper.

Based on an assessment against explicit feasibility criteria the report concludes that:

- an established and widespread need for the Academy is evident
- the rationale behind the Academy is clearly specified and understood
- the Academy will not be duplicating or confusing existing initiatives
- the Academy will support an increasingly distinctive Scottish health policy environment
- funding requirements are likely to be relatively modest and achievable

The Scottish feasibility study draws similar conclusions to those identified in the recent (2002) Welsh Study 'A Co-operative Research and Development Network for Wales. Linking the academic institutions, the NHS, local authority and voluntary provider organisations'.

2. The Development of the Academy Proposals

The Research and Policy Development Initiative Team has been overseen by a Strategic Steering Group representing SEHD, NHSS, Local Government, and front line NHSS staff. Since April 2002 the RPDI Team has:

- scoped the Academy concept with over 120 representatives from SEHD, NHSS, academics and the private sector revealing broad base of support for dedicated Scottish resources similar to those provided by the *Kings Fund* (www.kingsfund.org.uk); the US-based *Center for Health Management Research* (<http://depts.washington.edu/chmr/>); the *Canadian Institute of Health Services and Policy Research*

(<http://www.cihr-irsc.gc.ca/e/institutes/ihspr/13948.shtml>); and English NHS R&D Programme dedicated to improving service delivery and organisation *Service Delivery Organisation* (<http://www.sdo.lshtm.ac.uk>)

- conducted a Consultation with key potential users in the Scottish Executive Health Department (SEHD), other relevant SE Departments, National Health Service Scotland, and other partner organisations and agencies with an interest in health in its widest interpretation. The consultation mirrors the SDO 'listening exercise' in England which identified priorities for their R&D programmes, and the recent Welsh Co-operative Research and Development Network feasibility study
- mapped key Academic players in the health field in Scotland; established key Academy network anchors; and initiated a number of research initiatives with academics, SE Agencies and others
- established a Knowledge Management Group in Health Department adding value to the work of the RPDI Team by raising awareness of the value of evidence and research within SEHD
- opened dialogues with NHSS suppliers and Industry Groups
- identified links with lead national and international health and policy research networks

This work has laid the foundations for a series of national and international networks which will enable the Academy to move swiftly to an operational model during the foundation phase.

3. The Policy Context

Change in the NHSS

The National Health Service Scotland is facing an unprecedented era of reform and investment, and politicians and the communities they serve have increased expectations that this will result in improvements in the management and delivery of services. Since devolution major health policies have sought to address the barriers to improving Scotland's health and priorities for action have been clearly set out in commendable documents such as *Cancer in Scotland: Action for Change* and *Scottish Diabetes Framework*. These service strategies have been underpinned by a sound clinical evidence base,

however, less evidence is available to support clinicians and managers in the delivery of services through a series of different management and organisational structures which require new ways of working across professional and geographic boundaries.

In addition, all service improvement in NHSS is underpinned by a commitment to joint working with local communities and partner organisations, particularly Local Authorities and the Voluntary Sector, and there is a need for a sound understanding of how this can best be achieved.

Evidence Based Policy Making

The concept of evidence based policy and decision is now a standard of best practice in Government. Increased public scrutiny and accountability has created a heightened awareness of the need for politicians and decision makers to have a range of evidence to support policy development and decision making in the public sector. A major programme of civil service reform (*Change to Deliver*) is underway in the Scottish Executive and the Permanent Secretary has made a commitment to improvement at all levels in the policy making process. Improving access to evidence and engaging with stakeholders is at the heart of this programme.

Scottish Resources Post Devolution

In Scotland, whilst there is a highly acclaimed clinical research community, less attention and funding is focused on research and evidence-gathering to support service delivery, management and organisation improvement.

Policy makers and NHS managers are therefore vulnerable to criticism from clinicians and practitioners when asked to identify the evidence that underpins policy and management decisions especially when this results in structural change.

The reform of the NHS in England is supported by a national R&D Programme dedicated to improving service delivery and organisation (SDO) (<http://www.sdo.lshtm.ac.uk>). Additional resources are allocated to the Department of Health Policy Research Programme to inform Ministerial policy and priorities. As health policy diverges north and south of the border, it is evident that there is an immediate need for similar dedicated resources in Scotland.

The Chief Scientist Office (<http://www.show.scot.nhs.uk/cso>) has identified that there is

insufficient research to underpin development or evaluation of policy, organisation or management, within health delivery systems. They have also reported that there may be merit in supporting external evidence-based advice on policy and management issues.

The Academy represents the Scottish response to this identified need.

4. The Academy: Aims and Objectives

Aims

The Academy will provide:

- a collaborative network to identify and co-ordinate clearly defined research and evidence to support policy, strategy and service development in SEHD, NHSS and other partner organisations
- dedicated resources to support policy implementation, service development and management practice
- management education and skills development to support implementation and improved service delivery - in particular the NHS Leadership Strategy currently being developed by SEHD
- a 'knowledge exchange' facility to store and disseminate knowledge and learning

Objectives

The Academy will be partner, stakeholder and membership driven and provide an overarching perspective on health expertise and knowledge in Scotland. The Academy would not duplicate existing expertise or effort in Scotland and would:

- Adopt and develop theories of knowledge management and practice based learning to support organisational performance
- Provide research interpretation and translation to inform policy development and practice and shared organisational learning
- Provide the interface between organisations and groups to reduce incompatibility, create common language, and define common goals

- Provide a neutral platform in order to:

develop a relationship with knowledge and education providers which moves away from short term interactions based on purely transactional arrangements to a model which supports sustainability and trust between respective partners

engage and support other public sector partners in shared research or learning activities

develop 'communities of practice' to bridge the gaps between policy and practice, and research and service delivery

facilitate an acceptable and ethical arena to enable dialogue between NHSS, SEHD and private sector and industry

promote social inclusion by bringing to the mainstream many activities which are currently detached or marginal to policy development and service delivery; and develop people/patient driven research

- Develop processes to enable NHSS staff and partners to share organisational learning and expertise, through the development of a pool of internal advisors
- Work with relevant partners and stakeholders to provide long term perspectives on strategic planning within the NHSS or short term solutions to immediate or pressing policy issues; and have the ability to mobilise individuals, organisations and groups within Academy networks to form appropriate collaborative arrangements to address these issues
- Provide a focal point in Scotland for lead liaison on policy and management research and development with UK and International networks

The Academy will also provide vital international connections for Scotland in this area of research and development, and will enhance the capacity of SEHD to interface with international policy, and practice networks particularly in Europe, the Nordic countries, North America and Australia.

5. The Academy: Location and Model

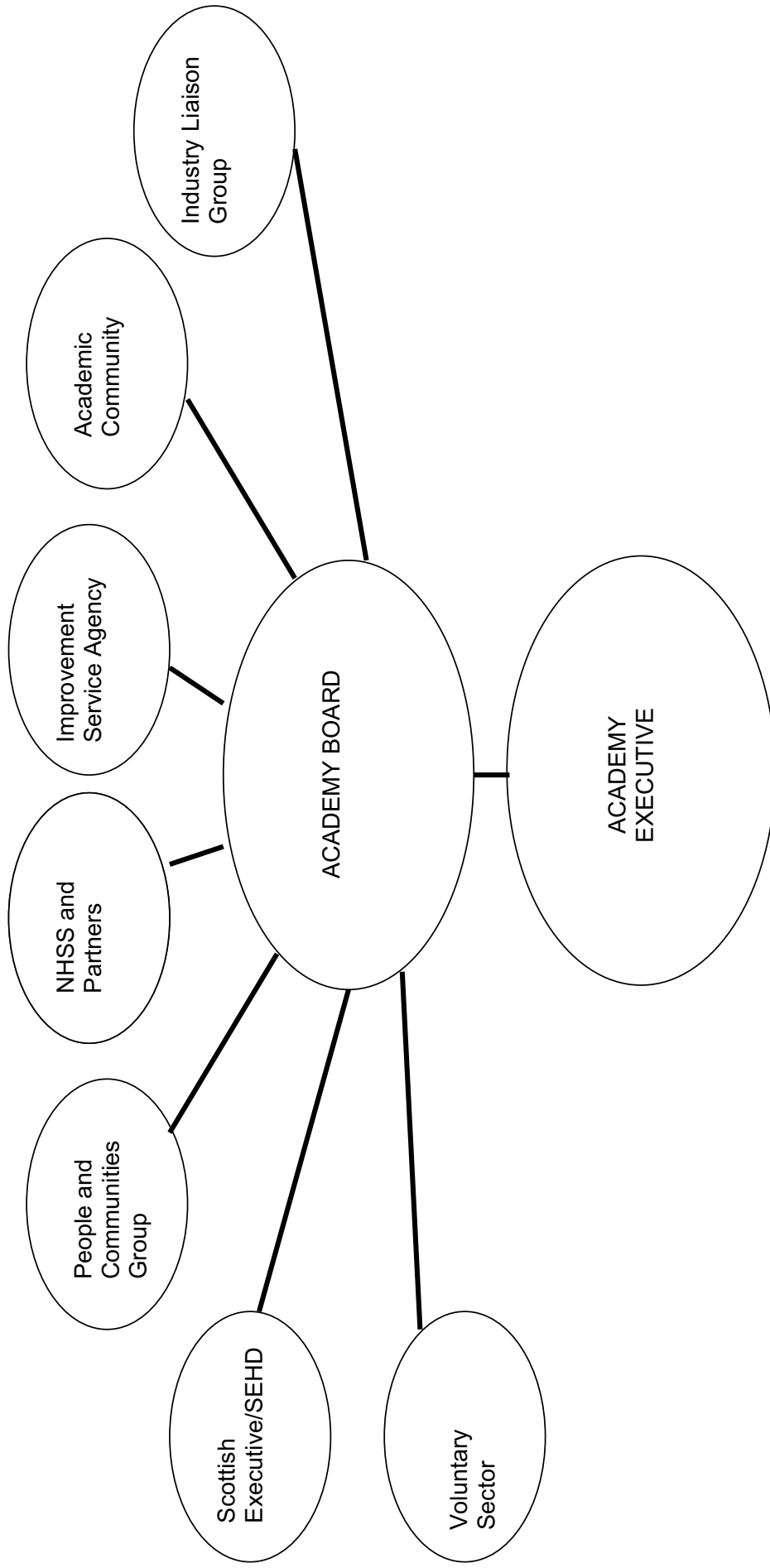
There has been strong representation from stakeholders on the location of the Academy. In order to promote fair and equal status and involvement to a wide range of potential partners, the consensus view is that the Academy should not have Institutional affiliation. The preferred location of the Academy will be a 'neutral' site which will provide the Academy team with accessibility to policy makers, NHSS and other key partners. Likewise a preference for a physical base which could host a range of activity including the ability to 'drop in', and provide a space for members to meet and learn suggests the need for proximity to a good transport hub.

The preferred and feasible model for the Academy is a modest full time core team based in a location which best promotes defined programmes of activity. The team would operate from an appropriate physical base not burdened by high fixed costs and overheads. By working in partnership with the NHS itself and other public and private organisations, it is possible to outsource Academy activities to 'satellite' premises across Scotland. This will promote equity of access to both urban and rural locations.

Work to date suggests that the aims and objectives of the Academy can most readily be achieved through the engagement of individuals and groups through 'Managed Knowledge Networks' which will enable the Academy to increase or decrease levels of capacity and capability according to the defined programme of activity. Staffing will therefore be appropriate to activity, and the Academy structure will facilitate the potential movement of staff from SEHD, NHSS and elsewhere to work with the core Team.

The following diagram illustrates how the activity of the Academy will be defined and driven by stakeholders and partners. Detail of Governance arrangements will be developed and made available in the course of the Foundation Year.

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The Academy will utilise technology and contemporary organisational planning to drive and maintain networks and communities of practice focused on research and development to improve policy making, service delivery and management practice. A critical part of this will be facilitated through an Academy website, and on line facilities to store and share knowledge and organisational learning. Wherever possible this activity will be carried forward in close collaboration with existing providers in the public and private sector. The ability to work in partnership with NHSS funded resources, in particular NHS 24, the NHS Scotland eLibrary and the Scottish Health Service Centre Health Management Library will be explored. The Academy will also work closely with the Improvement Service Agency in exploring the potential of accessing technologies already developed by the Improvement and Development Agency (IDeA <http://www.idea.gov.uk/>) in England.

6. The Academy: Relationships

The Academy will provide dedicated resources to support Ministers and SEHD officials in the policy development process. It is of vital importance that there is a formal relationship between the SEHD and the Academy. To ensure a seamless connection between the Department and the Academy the possibility of a joint SEHD/Academy liaison team is being considered to provide the interface between dedicated policy resources in the Health Department and the Academy networks. At a wider SE level, it may also prove appropriate to formally link the Academy to the Strategy and Delivery Group of the Office of the Permanent Secretary. In addition to formal links to HD at a general level, the Academy will have strong relationships with Departments and Directorates on designated activities.

If paramount importance will be the relationship with NHSS and partners. The Academy will provide resources to support strategic development and decision making, and facilitate staff interactions and exchange. Direct access to Academy resources will be provided to support those delivering health and health related services. Arrangements to provide an appropriate interface between the Academy, the NHSS and partners are being considered.

Working closely with colleagues in Local Government, the RPDI team has identified common areas of interest with the developing Improvement Services Agency. The partnership between health and Local Authorities is

fundamental to health service reform and it may be appropriate to formally involve the Director of the ISA in the Governance arrangements of the Academy in due course. Similar arrangements may need to be developed to include other key partners.

The academic community has signalled strong support for the Academy and discussions are now underway regarding drafting appropriate terms and conditions to govern academic engagement with the Academy. Academics and other evidence or education providers who choose to formally collaborate with the Academy will operate under clear ethical and contractual arrangements which will place the interests of the collaborative Academy activity above individual academic or commercial interest. The current SE terms and conditions for research and consultancy provide a sound foundation on which to build collaborative relationships and new ways of working.

The Academy provides a unique opportunity to develop capacity in NHSS and a number of NHSS staff have expressed interest in 'secondments' to the Academy. This would further promote the concept of communities of practice in particular areas of interest and support shared learning and knowledge transfer in an organisational context with full Academy backing.

Discussions have taken place with potential industry partners and an Industry Liaison Group will be established to agree appropriate arrangements to develop relationships with all interested Industry partners during the foundation phase.

7. The Academy: Costs and Funding and the Foundation Year

Budget and Funding Sources

The SAHPM Feasibility Study explored the proposed aims and objectives of the Academy against the possible models for delivery and provides commentary on two preferred options, an Independent Trust with Charitable status and a Company limited by guarantee.

The activity of the Academy and associated costs remain the same for both models and the Feasibility Study has provided modest estimates to cover a five year period. These costs are conservative and comprise predominantly of staff costs for a core team. The Study makes it clear that any programme of work would be funded by relevant sources according to the defined activity undertaken. The Study report makes

reference to the potential for Academy funding to come from a more effective use of existing resources currently expended in research and management consultancy by SEHD and NHSS: as a result SEHD is currently reviewing the co-ordination and commissioning of this activity.

To ensure long term viability and short term success, there is a strong view that sustainable funding must be identified for the Academy at the outset. With a view to supplementing any central core funding, the RPDI team are currently engaged in positive discussions with a range of potential funders. Other sources of support in Scotland, the wider UK and Europe will be explored in the Foundation phase. There is consensus that stakeholders, academics and partner organisations will be reluctant to engage with an organisation that has fragile financial support. In particular, the RPDI Team have been advised that international partners will not engage without evidence of long term funding. Five years was identified by the Feasibility Study as an optimum funding commitment.

The Foundation Year

It is important to develop the Academy working model in an environment which encourages and supports experimentation in the early stages - there are too many examples of initiatives which have failed during the initial set up phase. The Academy represents a new way of working and the foundation phase will provide both the time and the opportunity to test and further develop the working model in a supportive climate. The foundation phase of the Academy will commence in April 2004 and will be led by an appropriately resourced Implementation Team.

SAHPM Programme Prioritisation

A crucial task of this initial period is to agree, through open process, a prioritised work programme for the Academy. This process should build on the results of the Consultation Exercise which identified a clear set of stakeholder priorities. This programme of activity will set clear outcomes for the Academy in its first 12 months and beyond. In this manner the Academy can begin to deliver on its stated aims and objectives whilst still in foundation phase.

Support for SEHD colleagues in the development of the National Review of the NHSS (National Plan Team) has been suggested as an area where the Academy could make a useful contribution. In addition support for the delivery of the developing 'NHS Leadership Strategy' is another possible key activity area.

Shadow Board

The Implementation Team will make appropriate arrangements to support the appointment of a Shadow Board and the production of a full Business Plan.

At this stage other essential tasks include:

- Sourcing an appropriate location for the Academy
- Network recruitment and management
- Partner and stakeholder liaison
- Financial management and core administration
- Identifying technology support

Other Activity

In addition to core activity, attention will be given to other key areas including communication and knowledge dissemination. The development of online facilities and formal fund raising During the Foundation Year, and wherever possible the ability to access resources and capacity from other organisations will be explored.

8. Further Information

The RPDI/Scottish Academy project (April 2002 to April 2004) has been funded by Scottish Executive Health Department and is supported by Scottish Executive Office of Chief Researcher. The project Director is Liz Kelly, previously the Head of the *Strategic Change Unit* at the Scottish Executive Health Department.

'The Scottish Academy for Health Policy and Management: Feasibility Study and Supporting Business Case' was carried out by Firm Crichton Roberts Ltd and John Clegg Consulting between September 2003 and January 2004.

The RPDI Team will now take forward the Foundation Year plans as the Scottish Academy for Health Policy and Management Implementation Team.

The Academy Bulletin Series

The SAHPM Implementation Team will be producing quarterly bulletins to provide reports on Academy activity and invite engagement with emerging communities of practice. In the next Bulletin we will provide further information on activity we are currently

engaged in with a wide range of collaborative projects including:

- Ethical Decision Making in the NHSS
- SAHPM/SEHD Policy Research Studentship Liaison (ESRC Collaborative 'CASE' and CASE Equivalent Studentships)
- NHSS engagement with British Council Scottish Networks International
- Nursing Policy and Management Research
- NHSS Action Research and E learning
- Ethnic Minority Health Research Network Development
- UK and International Rural Health Networks Liaison
- Enterprise, NHSS and Health
- Social Entrepreneurs, Enterprise and the NHSS

Please contact us if you would like to contribute copy to the next Bulletin on any activity you are engaged in which would be of interest to others involved in the SAHPM networks. We would particularly welcome contributions from frontline NHSS Staff.

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