HORIZONS

# Out of the Dark and Into the Light: The work of a CEO in leading the improvement of challenged NHS organisations

May 2024

# Foreword

This report relays how CEOs talk about what they do when they lead improvement. We two, as ‘authors’ have added very little to their words. Organised into simple time frames, we asked them what did you do on day 1, week 1, month 1? The insights on what to do all come directly from the practice of the CEO. We stay as silent as possible.

When we were carrying out the interviews, we were struck that usually about 45 minutes in the CEOs would say something along the lines of “*You’re the first person who has asked me this!*” It’s not that people haven’t written a lot about how to lead troubled organisations, but we don’t have a literature which talks through the detailed practice of *how* CEOs act when they are tasked with leading turnaround.

These CEOs all went to work for organisations that had been publicly labelled as problematic. They had all received CQC judgements for Quality labelling them as “Inadequate” or “Requires Improvement” and had been placed in some form of special measures or the Recovery Support Programme by the relevant national regulator at the time (currently NHS England).

Leadership in troubled organisations is carried out by people who create strategies through that day-to-day practice. Of course, they have important thoughts about their leadership strategy but what matters is how they actually behaved from day to day. That first morning when you walk into your new job, *how* do you behave? *Who* do you talk to? *How* do you actively listen? *How* do you make conversations? *How* do you build on that behaviour over those first few days? These CEOs tell us how to translate these day-by-day conversations into the themes of the improvement plan.

Unsurprisingly, all the CEOs commented on how hard this task was. Many had years of leadership experience but felt this was the hardest task they had ever taken on. Most CEOs also commented that they felt alone in their task.

Since it provides insights from colleagues who have undertaken this role, we would be disappointed if this report were not helpful for the next generation of CEOs asked to support the improvement of challenged NHS organisations. The below words tell us that they should not be surprised when they also find this the hardest work they have ever done.

This does not contain a set of our recommendations nor recommendations of the CEOs we spoke to. Rather, it aims to provide support through an account of their experiences and reflections. The aim is for that experience to inform the reader with as little interpretation as possible. We would hope that a direct practice to practice relationship will enable the reader to reflect on their own practice through reading about the insights of others.

Our recommendation is that this document is given to prospective or other CEOs involved in this task to see how useful this account is. Its usefulness should then be reviewed, and new editions created to draw upon the most recent experiences of this type of work.

Paul Corrigan

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# The work of a CEO in supporting the improvement of challenged NHS organisations

All the content in this account has been derived from the CEOs' reported experiences and organised around the chronology of their work. Starting from their appointment through to their first 3 years of the task. All of these CEOs are leading improvement in a trust that has been receiving support because of problems with quality in its broadest sense, whether it be safety, finance or otherwise.

## BEFORE GETTING STARTED

### The experiences needed by a CEO to prepare for this task

Whilst all the CEOs had substantial NHS experience before they were appointed, most of them described their naïveté when starting their first improvement roles. When they looked back on what they were thinking when they started, they didn't realise just how hard the task would be. They said that this task was more challenging than any of their previous roles: One CEO, with decades of senior managerial experience, felt that supporting improvement in a small rural trust was the hardest job they had done. Furthermore, they were given little explanation of the challenges and approaches required in roles and many started with little idea of what the job would entail.[1]

Most of the CEOs had worked in other trusts beforehand. This experience led them to believe that CEOs could depend on information channels working and providing them with up-to-date reliable information. But in this new improvement task, CEOs typically found that these did not work very well at all. The trusts may have hollowed-out their core services and these would need time and investment before they could provide the new CEO with effective governance systems. For example, the risk register will have missed several of the risks that the CQC had identified. This means, at the beginning, the CEO needs to create additional channels to provide a picture of what is happening in the trust.

Another CEO characterised this as a task that started hard and got harder. Looking back on the first weeks they felt they did well to survive. The most important personal characteristic in those first weeks was that they didn't give up.

Some of this difficulty came from their experience of hostile behaviour. In many cases, in the trust they were appointed to there had been a long string of CEOs that had come and gone over recent years. This turnover of previous CEOs would lead some senior staff to say directly to the new CEO, that they had seen off previous CEOs and would see off this one. This aggressive behaviour demonstrated the expectation of senior staff that the new CEO would soon be gone. It's important to be ready for this. Whilst it does not reflect the feelings of the entire staff of the trust, new CEOs must be prepared for some hostility.

This and other early experiences led many CEOs to comment that it was important not to have a large ego. CEOs in these roles needed to recognise that the role of

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[1] Providing the new improvement CEO with some clearer idea about the nature of this task is one of the main aims of this account.

CEO did not stop them from being vulnerable human beings. Given there were periods when the new CEO was not being supported, they needed a strong core set of beliefs to keep going. A CEO described this as accepting failure. They commented that it was necessary to fail as little as possible at the start and try not to be disappointed by too little success. This humility was not just about accepting the difficulty of their role but created the conditions for others in the trust to be able to talk about failure.

Before they took up the post, most CEOs experienced no assistance from national or regional organisations. Looking back on their experience, they found this shocking. They had expected that the process of taking on such a difficult improvement job would have been fairly structured and systematic. They anticipated hearing from senior colleagues to share their knowledge about what was wrong in the trust and their perspectives on a way forward.

One CEO mentioned a single helpful conversation with a leading person from NHS England and a sum of money offered to buy in support, but no guidance or knowledge about why the trust had the problems it had was given.

CEOs recommended a structured process of induction for individuals commencing this type of role. Possibly buddying up with an organisation that had developed a similar improvement journey.

Despite the heroic nature of this task, all the CEOs were very wary of framing it in such a way. They were acutely conscious of the dangers of these roles becoming vanity projects where individual CEOs were encouraged to feel that they are unique. They were very driven by doing an excellent job to improve population health outcomes and the satisfaction of staff. There was little preoccupation with how they might personally be perceived and there was a general disregard for big egos.

*This will be one of, if not the, hardest jobs the CEO has ever done. This often came as a sudden shock, and this experience mustn’t lead to feelings of helplessness.*

*The CEO must be aware that everyday governance processes might not work in their new trust and has to be prepared for some difficult early interactions with staff who felt marginalised by the process.*

*Connecting with other CEOs who are having or who have had this experience before starting can help to make sense of what the new CEO is experiencing.*

## Practical steps to make before starting

Assistance before starting the task needed to go beyond guidance and has a much more practical component. In most cases, the CEOs needed to take up this new job very quickly. Many of them had to move away from home during the week to carry out their roles. Very quickly, they had to find their accommodation, often with no assistance. Just at the time when the new trust needed the CEO to be focused on the task. One CEO compared this to similar experiences they had from the private sector, where new leaders would receive assistance in getting themselves established.

Given the urgency of moving someone into the problematic trust, the new CEO is often moved in with no gap at all. Several CEOs noted the importance of a clear break between their previous job and the new task. Some regret not having pushed for it. The CEO needs a chance to rest and recharge their batteries before commencing the new role.

*Before they take up their new position, the CEO needs some time and space to prepare for their task along with some practical help to establish themselves in their new location.*

## Managing upwards: Establishing expectations with the regulators

From the start, if the CEO is to succeed, managing expectations upward is an important part of their task.

Regulators' expectations were often not made clear and were not routinely aligned. Different regulators had different timetables for different improvements. Each expected their needs to receive priority. CEOs learned the benefit of forcing these conversations upwards as early as possible and if possible, in advance of starting the job. They felt that if they had learnt to push for this information and clarity earlier on, they would have received it.

Others agreed that they needed to be clear on the expectations from the regulators. Over the first few weeks, one CEO found unexpected staff from regulators in various parts of their new trust. This was not helpful. From day one (or before) the new CEO needs to recreate a contract with these regulators with a timetable that they know they can stick to.

As a part of this early process of managing upwards, the CEO needs to communicate the size and the duration of the task as they see it. Sometimes, the initial experience of leading the improvement of a challenged organisation that key external stakeholders had differing criticisms of the organisation. These different and confusing expectations made the job even harder. Some CEOs established their high level 2-3 objectives before they started. These were based on the CQC reports and staff survey and any information they could gain. They allowed the CEOs to set their direction and establish some control. By sharing these from the outset with the regulators, they become the benchmark for difficult conversations later. They allow the CEO to judge between the 'must haves' and the 'nice to haves' when facing external demands. Having 2 or 3 overarching objectives is much more useful for grounding conversations with regulators than the 250 must and should dos that the CQC report may have outlined.

Other CEOs did not lay out objectives explicitly until much later in the process, but all had a clear sense of what these would be from the beginning.

Not all the problems that the trusts and the new CEOs faced were within the control of their new trust. One CEO mentioned that half their trust's problems were wider systemic ones that had an important impact on their performance. The trust will influence these issues but not control them. Influencing the external system is as important to the improvement journey as supporting internal change in the trust.

Direct involvement from the wider systemic parts of the NHS which are working on improvement would have been helpful for the CEOs. But often this only materialised as having more regular performance management conversations. These did not provide the level of support that a CEO leading improvement in an organisation requires. What the CEOs and their organisations needed was the complete system putting their collective and aligned effort around them, giving them support.

*Early on it's important for the CEO to set clear parameters, a timeline, and expectations with all the regulators. Realistically what can be achieved and by when? Is it possible to get a clear agreement from different regulators as quickly as possible? They make sure this agreement is deliverable in the proposed timetable rather than wishful thinking.*

*This means being clear about what needs to be improved at a system level and what can be improved within the trust. Having two or three overarching objectives for what needs to be done can also be helpful for managing expectations and focussing attention.*

*Principally, this is about setting the right tone from the beginning.*

## Establishing a consistent leadership style from the beginning

All CEOs felt that it was important to begin in the way in which they wished to continue their leadership. One CEO described their entire improvement journey as having a methodology running through all their activities. This moved from the first day and continued for more than 2 years and they stressed this consistency was important for their staff. If their style of improvement leadership was based on honesty and civility, this needed to be demonstrated on day one and every day afterward.

Others had developed clear methodologies or sets of principles around which to do the work but in some cases, they had not vocalised these until our conversation. [2]

*The CEO intends to be consistent in leadership practice from day one and throughout the time leading the trust. Before starting, they take time to think about the style they are going to lead with and to think through what that will look like from the very beginning.*

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[2] For one CEO who was in their third improvement experience, talking to us was the first time that they had articulated what they did. Again, hopefully this account will give some pointers towards that.

### If possible, walk the walk before starting

Day one is extremely hard work, so, before starting the work, it is invaluable for the CEO to get as much experience of the trust as they can.

One CEO spent a day a week carrying out reconnaissance in the trust they were going in to lead. Another CEO spent two days shadowing junior doctors. This CEO met all the staff the junior doctor met that day and watched them interact with all their colleagues at lunchtime and during the breaks. The quality of interactions between individuals, particularly under pressure is a key indicator that the core relationships were there to build upon.

Later on, in the week before starting, the CEO spent a day with another registrar looking at the ‘medical take.’ Both these days demonstrated that on the one hand there were real problems with quality and safety and on the other, the staff cared about each other and were committed to the trust.

As we shall see throughout the improvement journey, the CEOs sought to understand all experiences in the trust and not just where there are problems. What is not working and needs to change? Where is there pride in a good activity that can be used to build confidence and become a basis for change?

These early interactions set the tone for the CEO in observing with humility: an experience which is to be gradually built upon as they formally start the role.

*Before the CEO starts the job, having an opportunity to simply observe and ask questions, sets the tone for future work.*

*This should be aimed, at least in part, to find what is good in the trust, as this will demonstrate to staff that the new CEO is not just looking for problems. It will help to identify what can be built upon.*

*Understanding the quality of interactions experienced by junior doctors was given as an example of a good place to start for identifying aspects of culture at speed.*

## FIRST DAY

Every CEO underlined the importance of the first impressions. These first impressions had to be congruent with how they would carry out their task for the next few years.

## Being visible, asking detailed questions, and listening hard to the detailed answers

All CEOs stressed how important it was for them to be very visible in their new role. Being seen to be physically a part of the trust was vital. Being seen, asking questions and listening to answers were the main early activities. Throughout the improvement work, CEOs stressed the importance of being physically present with staff and not trying to create improvement through remote systems of management.

The physicality of being seen and being present is at the core of the leadership for these CEOs. Leadership is not an abstract activity to be carried out through mechanisms – it is an activity that requires the actual presence of the leader as a person. More than any other activity, being present with people when they are working, sums up the nature of the leadership that most of these CEOs demonstrated the majority of the time. For most staff in challenged trusts this is a new experience; many of them have not met a chief executive before let alone one that wants to talk to them about their work.

Whenever the CEO meets new staff, it’s important to remember that the staff may have quite different experiences and emotions relating to the public criticisms that have been made about the trust and the new CEO’s appointment.

For some staff, the appointment of a new CEO to lead improvement in the organisation is a vindication of the criticisms they have made. For example, it is often the case that some of the staff have played an active part in telling the CQC or other regulators that something was wrong. During a CQC inspection, a group of staff may have privately told the inspectors what they thought was wrong with the quality and safety in the trust. During a CQC inspection in one trust, a group of over 100 consultants met with the CQC representative to complain about how the trust was working.

Other staff will have resisted the CQC judgment and there may have even been a quasi-judicial conflict to challenge the findings of the CQC report. Whilst this will have involved the past leadership of the organisation, this would also have had an impact on some of the staff. Some will be very defensive and see a CEO that has been appointed to lead improvement in the trust as someone brought in to challenge them.

The only way that a CEO can understand the detail of these different positions is to engage with their staff as an integral part of their discovery process.

And whilst this is obvious, it is important to remember that whatever problems there are in the trust, if the whole organisation were to simply stop the situation for patients would be much worse. Therefore, change must take place whilst the trust continues to deliver.

From day one, the main method used by the CEOs to find out about their new trust is being around the organisation with working staff. The CEO is asking questions, often open-ended, which do not contain a value judgment in their initial framing or response. Asking staff “*What are you doing when you do that? Why are you doing it that way? How many staff have you got on shift today? Is that normal? What’s the* *skill mix like? How many are trained nurses? What's a skill mix in the junior doctor team on duty today? What happens when one of them goes missing? What happens when the registrar goes down? Who is effectively the team leader?"* Listening to the details of the answers is crucial. For example, the nursing staff might argue that they could do with an extra pair of hands. The detail of this experience can be more significant than the board paper that says how many vacancies there are in the trust.

Demonstrating that the CEO is listening to what matters to the staff they speak to, is symbolic that the CEO intends to put the perspectives of staff at the centre of improvement. Resisting the urge to make immediate suggestions about how things could be done better is important – these are reserved for the improvement plan. Being a manager who is 'there' with the staff asking those questions creates a different relationship from more remote management techniques.

Gathering information alongside staff in this way can provide more useful data for evidencing action than others. In the past, the difficult messages from these sources may have been ignored and the Board may not have even been previously sighted on some of them. The data becomes a repository of staff voices that can then be used in the improvement plan. Recording this systematically through organising notes every evening with a Dictaphone or a diary can be helpful.

Generally, face-to-face interaction is a more effective way of listening and being visible, but, given Covid, there were also examples of it being done well virtually.

The answers provided at the place and time of work are different from those given retrospectively in a meeting room. Whilst someone is working, they can be asked much more detailed questions about what they are doing and what they *think* they are doing. One CEO styled this as a distinction between '*work as imagined'* and "*work as done."* If the CEO engages with staff members about the detail of their work, it sometimes becomes clear that what the member of staff is actually doing is different from what they think they are doing. In this case, what staff imagine they are doing is not what is actually happening. Developing this into a detailed discussion with staff members may help to bring the reality of the staff member's actual work to the fore. Helping staff to see that what they imagine they are doing is different to what they are actually doing can only be done empathically; this CEO attempted to understand *why* a difference between the *work as imagined* and *work as done* has emerged.

The CEO also begins to see how staff create inventive workarounds for problems because they haven't trusted what's around them, and as consequence have learned to do things themselves. Some of these workarounds could have adverse consequences. For example, we heard about an admission ward that had a list of patients that had been admitted the previous day with no initial diagnosis about who was sickest. As a result, the list was seen sequentially, potentially leading to the sickest person being seen at the end of the day with potentially fatal consequences. This was a method of working around the lack of information and initial diagnosis.

Visiting staff regularly also creates more opportunities for the CEO to be seen role modelling good leadership behaviours. For example, not letting people pass in the corridor without saying *How are you today? What are you up to?* avoiding walking through corridors on their phone, always saying hello, and being open to questions.

The CEO unearths the culture of the trust (*the way we do things round here*) by being present with the staff from day one and actively observing the way in which work is carried out. Understanding the existing culture requires synthesising the particular ways in which people *talk* about their work and the particular ways in which they *do* their work.

At the same time, by walking about the organisation, being present with staff, asking questions and listening hard to the discussions that follow, the CEO is modelling a culture which will run throughout their improvement journey with the organisation.

*Physical presence is an important form of leadership because it positions staff as an integral part of the CEO's discovery process. Being very visible, asking questions, listening to answers, and always being open to conversation demonstrates that staff experience and quality are interdependent.*

*Being clear that the CEO doesn't want everyone to stop and change what they are currently doing is important.*

*The CEO also needs to build their knowledge and analysis of the situation. Finding a way of logging the detail of conversations and observations from day 1 is essential. This data will eventually become the basis of the improvement plan.*

*From day one, the CEO is both learning about and respecting the existing culture of the organisation, whilst at the same time modelling a new culture of improvement that prioritises active listening and openness.*

## FIRST WEEK

### Gathering allies inside and outside

CEOs agreed this role and task was even harder 'on your own'. One reported that they always took a small team with them, including a very senior nurse and a director of communications. This not only provides "*extra hands for the work*" but also means that there is someone every day with which to triangulate information. Over time, most CEOs depended on bringing in staff that they had known, some of whom came out of retirement.

The CEO needs to be supported by others in the senior governance of the trust in their approach to leadership. There were examples of both CEOs identifying support from existing leaders and relying on the support of staff who were coming with them into trust.

In one case, already knowing the Chair of the organisation helped. The CEO set their boundaries with the Chair before arriving and established what they were going to need to do. They had a joint plan for making the organisation safer for patients and improving leadership. This didn’t mean that they jumped into action, but the Chair and the CEO understood each other.

One CEO was very usefully allocated an Improvement Director for two days a week after a while into the post but said that it would have been good to have had this resource before the start of taking on the trust. They not only assisted the CEO a great deal but initiated and implemented important work on their own.

The CEOs depended on their networks to identify if there was anyone who could meet their requirements. Whilst this organic personal knowledge is important, some CEOs will have a much smaller personal network than they need. Other CEOs who are carrying out similar tasks play a role in both supplementing these networks and in identifying people who may be helpful in the improvement context. Several CEOs said that a group that facilitated this network sharing would be useful.

Early on, it is important to find out which members of the current executive leadership want to play a part in leading the improvement journey. The values of civility and care that the CEO is championing, critically inform how they work with the executive team to do this. As the CEO is giving the whole trust the opportunity to learn and move on from the problems of the recent past, this must extend to executive team members. The whole trust will be watching how the CEO works with existing executive colleagues, so it is a critical opportunity to model the culture that they want to see. Some CEOs noted that they would avoid hastening removal of Executive Directors from the trust – this was felt to be disrespectful and could contribute to a blame culture.

Looking back, one CEO felt that they should have instituted with their senior staff a ‘*truth and reconciliation committee’* where senior staff could discuss what they felt had gone wrong and what each of them might have done differently. They regretted not simply bringing the senior team together and getting to know them as a group of individuals. The senior staff were beleaguered and would have used some collective time together talking honestly about their experience. Whilst they may not agree with the CQC analysis of the size and depth of the problem, they, more than any other group in the trust, will feel responsibility for the experience of failure.

In developing the CEO’s executive team for the medium and longer term, one CEO strongly suggested the need to ensure that such a group was diverse. This was not just protected characteristics but ensuring that there were people in the team who would ask them awkward questions. Though often a difficult experience, having people around the CEO who think and act in diverse ways enables leading with differences.

*This task cannot be completed alone. The CEO both brings allies with them or finds them in the existing leaders who want to be actively engaged in the improvement. They will either find support from inside the trust or will bring their staff to be allies in their leadership style.*

*Regardless of the balance of new and old leadership, psychological safety amongst senior staff can be created early by giving people the opportunity to* *discuss what they feel has gone wrong and what each of them might have done differently. Getting to know them as a group of individuals also helps.*

*As with the whole trust, the existing executive directors must be given the opportunity to learn and move on from the past. The rest of the staff will be watching closely how the CEO works with them.*

*All these things are key to establishing an openness for thinking and acting in diverse ways across the team and leading with those differences.*

## Communicating, communicating, communicating

Failures of communication are one of the causes of many problems in NHS trusts. Information has failed to flow from where there are problems to the top of the organisation. It has failed to flow horizontally between those parts of the organisation in trouble to those parts of the organisation working well. Information has failed to flow from the organisation to the public and very often the information that patients are trying to give to the organisation in terms of feedback and complaints are not registered with the organisation.

It is likely that complaints from patients and the public may not have been treated with the importance that they deserve. An incoming CEO can demonstrate a change in their significance by taking a personal interest in the way public complaints are listened to and dealt with. Being more welcoming to public complaints, ensuring they are listened to, actioned, and then reported back to the public, and all of this with some speed, is very important. It is a signal of the wider cultural development of a more transparent and open culture in the organisation.

At this early stage of the process, whilst the public and the staff know that the trust is in trouble, there are often a lot of rumours and ill-informed chat. At the point the CEO has taken over, most local elected representatives will have heard about the problems with the trust and will need some immediate reassurance that a new leader will move everything forward. The local media will also have the story. Unless there is an immediate and trusted source of communication from the CEO to as many audiences as possible, the rumours, especially in the age of social media, will be treated as fact. The CEO must develop themselves as that trusted source of communication. Some CEOs felt this needed a new communication appointment from the very beginning.

Given the CEO is spending so much time in various parts of the trust, word will spread about how they are operating. Providing some structure to this word-of-mouth response needs different methods of communicating. Given that the first week’s activity is asking questions and listening to answers, any communications at this time would simply reflect this is what the CEO is about. At some stage the CEO will need to communicate this is what they have learned from their conversations.

One CEO wrote their own letter to the organisation every Thursday evening. This was a very personal note to the trust, reflecting what was in their head. They also went on Twitter and Facebook, discovering how much people engaged with those platforms. Telling stories about what was happening and what they were doing meant that staff could connect to those stories and want to play a role in completing them.

*Given most challenged organisations are challenged partly because of poor communication, opening new channels of communication between the CEO and a wide range of audiences is important. In these circumstances, it is difficult to see how there could be too much communication. The CEO needs to develop themselves as a trusted source of information. Given the CEO's activity is mainly asking questions and listening to answers, early communications need to reflect that.*

### Working with, and being seen to be working with what is already 'good' in the trust as well as what is problematic

Most staff will expect that the CEO will only be interested in problem areas. Yet trusts that have problems will also have successes. Those parts of the trust that are operating well are as much a part of the CEO's task as the parts that are operating badly. Therefore, at the start, some time needs to be spent searching for 'good,' asking the same questions, and listening to staff that are doing things well.

The CEO who spent a day with the junior doctor before starting discovered that all the junior doctors across the region wanted to be in this trust because the leadership from the consultants was so good and they learned how to do things well. In this trust, the junior doctors learned how to learn from mistakes and when going through this process were looked after. Their education and training were good. All of this in a trust that had real problems elsewhere.

*Every organisation however many problems it has, will have good services as well. These are as much a part of it as the problems. The CEO spends time, and is seen to spend time, with those good aspects of services as well as the others and works hard to acknowledge these good services.*

### The CEO must look after themselves and not ask too much

This work, leading a trust with service problems, can completely exhaust any person. How each CEO works with that exhaustion will be different. But if this is their first improvement CEO role, the CEO needs to recognise that this exhaustion is not caused by their personal failure. This is much harder work than running an organisation at a steady state. It is not uncommon to start days at 7:00 and finish the activity 12 hours later, followed by discussing with other staff for three hours in the evening what happened that day. This is not a way of working that can be sustained over a two-year or three-year period.

CEOs recounted experiences where regulators expected the CEOs to behave with little thought of their own lives (cancelling holidays to be able to meet the regulators' timetable for meetings). Leading such a trust is occasionally a brutal environment, and the CEO must look after themselves. It helps if there is someone is there to hold the CEO to account in looking after themself or they have a supportive colleagues and family, but if there isn't, the CEO must find ways to do this for themselves.

Despite this exhaustion, CEOs recognised that it was important that they were on their best behaviour. Given that one of the aims of the CEO is to want the organisation to adopt respectful, supportive behaviours, it is vital that the CEO models those behaviours. Given tiredness is an expected part of the role, it's important to be able to be supportive even when tired.

A CEO reported that sometimes they would want to chuck things at the wall and express great anger at people, but they didn't, and must role model the behaviours that they wish to be transmitted below. This can be hard when the CEO has been on the end of bad behaviours from above or below themselves.

One CEO suggested that CEOs leading improvement could all be offered some psychological support to provide a safe space for talking through their experience. This comes somewhere in between mentoring or coaching on the one hand and therapy but would provide the CEO with somewhere they could trust.

*Given how very stretching this work is for the CEO carrying it out, they must recognise that they will need some time and space during this period to recover themselves. Given they know that extreme tiredness cannot excuse bad behaviour, they must ensure they have sufficient support to see them through day by day and week by week.*

## Not telling people what to do (even though that is what they expect)

Nearly all NHS staff have an expectation about how a CEO works in a trust and have an expectation about how a CEO would work when they are under the pressure of being CEO of a trust with problems. These vary considerably but many of them contain an expectation that a new CEO in this position will tell people what to do. Telling others what to do comes with the danger of ensuring that leadership only exists in the person doing the telling. If the CEO wants a more distributed form of leadership, how the CEO works themselves will either confirm or disabuse the staff of where the CEO thinks leadership should exist within the trust. Given they are working in a new trust, the CEO cannot start off knowing what to do. The CEO and the staff need to be able to cope with not knowing that detail for some time.

Therefore, some of the first CEO meetings will be characterised by the absence of the behaviour (that is telling people what to do) that the staff expect. This absence provides an important activity for the staff. It doesn't mean that nothing happens. A lot will happen, but the activity will come from staff at all levels of the organisation and not just the CEO.

Several CEOs told us about how they had to appear unfazed by whatever they come across or see and hear. Their response had to be measured. If the CEO is seen to be frightened by something they have found, staff get frightened as well. Building confidence in the trust is vital and means being deliberate in their reactions and not jumping in and providing immediate solutions.

At the same time, the new CEO should be the person who is taking responsibility. One CEO talked about being the Accountable Officer as a very real description. This accountability matters in a very practical way. As far as the rest of the world is concerned, the CEO takes responsibility for the organisation, but the organisation must learn to take responsibility for itself.

*For a successful improvement, many levels of staff will have to play a strong leadership role. If the new CEO starts within the first week telling people what to do, they demonstrate that leadership just belongs to them and not to others. In this first week, they steer others to develop solutions that will become a hallmark of the whole leadership ethos.*

*Moderating their reactions to worrying practices and reserving judgment to things that they know they want to change is a key skill in this.*

## Sequencing what is happening now, what next and what after that

The improvement journey for a trust is a long one. No one, inside or outside the trust, should assume this can be achieved quickly. However, given the length of the whole journey, CEOs need to provide signposts on the different activities that will take place at various times. Most CEOs saw this as happening in three distinct stages which were called different labels by different CEOs. The three stages of this improvement work were described in one instance as *a hop, a skip and a jump* and *Stabilise, Sustain and Connect* in another. The three-part description demonstrated that the prolonged process would contain stages, rather than just one long haul.

In this way, the CEO is thinking about the future in terms of stages all the time. Whilst there maybe not a lot of discussion with the trust about that in the first week, planning for the future is always happening. One CEO felt that they looked into the future, from the very start, in blocks of 12 weeks (3 months), at least for the first year. Therefore, they could place what they were doing in week one into 12-week blocks.

Because everything cannot be achieved at once, this staging is important for the whole staff to understand. It all takes a long time, and different activities will take place at separate times.

For example, towards the end of the improvement process, it is hoped that continual improvement will take place through the activities of teams that everyone in the trust will be active within. But it is not good to expect all teams to work effectively from the beginning of the process. At the start, some staff members are either not in a team or float into several teams. Developing the sense of being in teams takes time before the CEO can begin to use teams to develop a new culture. This can’t be rushed.

Another CEO expressed this staging as they themselves being a bridge between the past, the present, and the future of the trust. The CEO is the past because they are exploring the past that needs acknowledgment and improvement. They are the present and the future. They need their trust to see that there is a future that contains hope.

A CEO has to organise and use different emotions at appropriate times. Whilst at the beginning, an emotion such as hope may be fragile, as the work of the CEO progresses, they need to be able to mobilise increased hope for their new trust.

Since the work of a new CEO often starts at the beginning of the month, one CEO had three clear goals by the end of their first month. By that time, every member of staff would visibly wear a name badge. Second, everyone who logged on to a computer could get to their files and work on them. Third, at the end of that first month everybody got paid the right amount. Of course, these are extremely limited goals, but if an organisation can’t achieve these three activities, then the staff will not believe that it can carry out more difficult tasks.

The CEOs emphasised the need to always be aware that unexpected events can blow a strategy away. These could be local or national issues and it is not unheard of to have simultaneous, rare events come along that will demand an alternative approach. However good the planning is, wider circumstances will mean it needs reworking and this demands agility.

*At the start of the improvement process, it is important to be able to stress that this will not be achieved in just a few weeks. Alongside this realisation of the long haul, the CEO needs to be able to split the process into periods of activity where progress can be made, and goals can be achieved.*

## FIRST FORTNIGHT

### Initial feedback on what the CEO is hearing – feedback on practice, not policy

The CEO is not just learning from what they have heard but they need to be seen to be learning. They need to demonstrate that the listening they have been carrying out has been a productive process. For the staff, this means that it has been worthwhile for them to spend time explaining what they are doing. Given silence from the leader can be scary, it is important to find ways of providing soft feedback to staff. This does not provide policy outcomes but demonstrates that for the CEO learning has taken place. It says, “*Since we have discussed your work, this is my understanding of it*.” This not only checks that CEO’s understanding is correct, but it creates parity. The listening process has not led simply to judgments but has developed ethnographic, person-centred understandings of the problem that is shared by both the CEO and the respective colleague.

At some stage, everyone asks the CEO for their first impressions of the trust. This mustn’t be played back in too much detail or too prematurely. In whatever feedback the CEO gives, they might include their experience of something good as well as something problematic.

Feedback may not have been happening under the previous CEO. This makes immediate feedback to the staff involved even more important, even if, for those members of staff, perhaps initially startling. A departmental meeting of a group of clinicians may never have seen and talked to a Chief Executive before.

This style of feedback is seeking to build capacity. If the CEO's actions take power to themselves, this can reduce capacity. Alternatively, simply playing back to staff what the CEO has observed and heard can provide the possibility of staff acting on that soft feedback themselves. Such action increases staff capacity.

One form of feedback is for the CEO to attend medical team meetings and give feedback on their previous week's experience. Again, these are short statements that come from their authentic experience "*This is what I have come across this week – it may be wrong, but I think you should know this is what I have found, and is it, right?"*

There are two important emotions contained in the relationship of providing feedback in this way courage and humility. Providing raw feedback face to face like this takes courage. Whilst the CEO may be feeding back something with hesitation, often, just by playing it back it arouses difficult emotions. Providing this soft feedback face to face, week after week is not easy, the CEO is playing back an understanding of the practice to those engaged in that practice. Occasionally there might be immediate actions that need to be taken. Staff may become defensive. They can always disagree and can sometimes do so vehemently. Going back the next week after a disagreement is important and again takes courage.

The second emotion, that of humility, helps this process. *This is my impression. I would be interested in what you think about this and whilst I am CEO, I could be wrong - but will only know that if you tell me.* The CEO's understanding may not be the right one and such phrases open up a discussion rather than close it down.

The feedback that is drawn from the observation of practice is given with the expectation that there will be a dialogue about what has been found. It is not given in the belief that it is in an uncomplicated way 'right'. It is given with a series of tough questions for the audience *Are you aware of this? Uhm, what do you think about it? Is that a problem or not a problem*?

The CEO should not jump to policy at this early stage. They must recognise that the trust needs to build a solution that is right for their current trust not simply '*what we did at my previous organisation.'*

One way of working with others to provide soft feedback is when the CEO could suggest to a team leader that they could present their departmental problems to the whole clinical leaders meeting. The first person to do that will have to be brave in describing their problems to all their senior colleagues. It is important that since the CEO has been involved in finding this out and suggesting the feedback, the CEO join with the lead clinician of that group in outlining the problems. The CEO stands next to the departmental leader's side while they deliver it. They are not alone.

The CEO over the first 3 months provides feedback regularly and it is likely to mean that the number of clinicians at these meetings grows. Once word gets around the trust about the way the CEO behaves at these meetings, they become interactions that staff want to see and hear.

If, however, what the CEO sees happening is unsafe then the CEO and staff have to agree that they need to act quickly. Only occasionally are there immediate actions that need to be taken after the CEO has given feedback.

*It is important to provide soft feedback to staff on what the CEO has heard. This is NOT the development of policy but reflections on practice. Even then there may well be defensive reactions and conflict which the CEO must expect and diffuse.*

## The CEO must have time to develop a detailed diagnosis and help staff share what they feel is wrong

All CEOs argued for the importance of doing their own diagnostics. It doesn't matter how many other organisations have carried out diagnostics of the issues with a trust, the CEO needs to understand these through their own experience and interactions. *Where are the strengths and weaknesses? What are the social problems that underly the technical ones? How has the culture developed?*

By conducting their own diagnostics and information gathering, the CEO starts to rebuild faith in having good governance. Failing trusts have often become atomised with information systems that do not work. By talking to staff, finding out what is happening and encouraging departmental heads to discuss their problems with the senior clinicians, the CEO creates additional governance information structures. The CEO being there, asking questions and hearing from staff about what is happening on the ground, is a practice which creates new information flows up and down (and along) a trust. This is not a long-term solution to existing governance problems, but it does demonstrate to a challenged trust, through the nature of a visible enquiring leader, that better governance relationships are not only possible but are helpful to the whole organisation.

Whilst a lack of clinical governance would have the biggest impact on the quality of patient experience in the trust's services, the failure of financial governance also demonstrates that previous governance did not work. This cannot be improved overnight, and the CEO needs to be confident on what detail is unknown as well as what is known when being called upon by regulators to make predictions. It is understandable that National Directors may want to know this information but, especially early into the improvement, governance may well not be good enough to give quality indicators. The new CEO needs to have the ability to stand behind what they do not know at that moment in time. It is better to disappoint early on by being honest, than to fail to meet a promise that has been made too early.

The first major medium term planning activity that the CEO is involved in is variously labelled, sometimes termed a *hop* or *stabilisation*. This part of the improvement plan aims at stopping services from getting worse and must implement immediate activities to ensure safety and improve quality. The CEO's information gathering starts to create a list of services that need to be stabilised. The broad clinical leadership of the trust needs to agree to each addition to this list because this is the list of activities that they will be focused on in the next six months.

But as we see below, in the 12-week period, the whole trust will need something that is more than a repair kit. They will need a vision. Given there are particularly good parts of the trust, the improvement plan must also include a trajectory to make those already very good services, even better.

As there was before getting started, there is still a challenge in managing regional and national priorities at this point. *How does the CEO maintain the importance and trajectory of the initial phase of discovery*? There is a challenge in balancing immediate change with the long term that people in an organisation need and deserve. The regulators may not notice that the CEO is building trust over the long term, yet it pays dividends when it comes to real change.

One CEO regretted that, at the very beginning, they had not had some assistance in developing their structured diagnosis of the trust. They carried out a governance review which involved the board in bimonthly development sessions. They also removed the burden of monthly meetings of the Board. These development sessions meant that the Board began to know each other and what they should be doing better - a different process than just expecting them to 'do it.'

This CEO also appointed a Director of Governance to highlight the importance and the change needed in relationships throughout the trust. Alongside this, whilst the trust thought of many relationships within it as a form of pyramid, the CEO asked that people should be able to demonstrate the real relationship between the capstone of the pyramid and the base. In many instances this could not be demonstrated and needed emendation to make it work.

*Over the first period, the CEO must not only listen and observe but must begin to develop their diagnosis of what needs to be done. Some of that will be long term and will need to reflect on the good parts of the trust as well as the problems but some of it will have to stabilise parts of the trust immediately. Building trust in patterns of governance information will be an important part of this process.*

## Setting the timetable for improvement and the development of the improvement plan.

The improvement process starts with the staff talking to the CEO from the offset. But at about 12 weeks, the CEO will have to put forward an improvement plan for the whole trust which will have to be, not only discussed but amended and agreed upon across the whole organisation. This plan and its publication are one of the '*big set pieces'* in the improvement process.

The CEO that talked about a *hop, skip and a jump* as the way of making sense of the full process, felt that early on they could tell the staff what the hop would look like and how long it would take to get to the improvement plan. It would take about six months and would contain a sizeable number of remediation actions.

Developing the plan will involve a wide range of managerial and clinical staff and provides the opportunity for concrete progress by identifying a sizeable number of remediation issues. By naming, in this case, 37 issues that need improvement it provides the trust with the opportunity to begin achieving them. As this process continues, the trust must start to get, when compared to its previous experience, a growing sense of success.

The improvement plan, by being a product of the first period, will also be a way to formalise the way of working and behaviours that the CEO wants to lead. Therefore, treating the first 12 weeks as something that will eventually become a published document is important.

For one CEO success depended on the spread of a *"restorative just culture*." From the beginning members of staff who had been involved in challenged practice in the trust, must be given the opportunity of moving on from that experience. Since the new CEO is always looking forward, those staff members involved with problematic practices of the past are given the opportunity to move on rather than be castigated for their past activities. Restorative justice gives the opportunity to restore what had gone wrong before rather than dwell on it. It recognises mistakes but looks forward.

Whilst the detail of *restorative justice culture* takes a long time to spread across the entire trust, if the CEO wants to create it, it needs to be started from day one. For example, if, at some stage in the future the CEO is going to develop the importance of civility, then they need to themselves act with civility from the very beginning.

*Beginning to develop the improvement plan that will be published at 12 weeks is an important early process. Whilst there is a recognition that this will take time, for the CEO who is committed to culture change, it's important to start the process early on.*

## FIRST MONTH

### Developing a central organisation in the trust for the expertise of change

The CEOs started to identify staff members who were like minded about change and improvement. If possible, the trust needs to establish their own programme and centre for learning about various aspects of improvement. From the beginning one CEO set up a *clinical support unit*. Such a unit (called different titles by different CEOs) develops the skills of improvement techniques, leadership development and is the centre of learning for improvement and organisational development. They run learning programmes demonstrating the new *way we do things around here* and develop in house expertise. This should include some accreditation for successful training.

## Developing the Board that did not appoint the CEO

Whilst the Board is responsible for the appointment of the CEO, it is often the case that the CEO has been strongly suggested to the Board by NHS England. This creates an unusual relationship for the CEO who is legally accountable to the Board but will also be expected to regularly report to NHS England on their progress. The CEO must spend the first several months managing this unusual relationship with the Board. The cultural change they are developing places the concerns of patients and staff at the core of their early work, and they take those concerns to the to the Board through which they are legally accountable.

Given the CEO has been appointed to improve the trust and given that improvement is likely to involve improving the Board itself, this legal accountability can create some complex experiences for everyone involved.

As the Accountable Officer, the CEO is responsible for establishing the controls in the trust. A significant part of the responsibility is ensuring that the Board has developed the relationships and capacity to carry out its role. Given the legal responsibility of the Board to have oversight and assurance of the organisation's governance, how the CEO works with the Board to review their own governance can be a challenge.

It is likely that the Board governance processes specifically have not been working as they are meant to and need to. If the Board, before the CQC report or the precipitating factor has recognised that there were problems in the trust, then the new CEO has a more straightforward task of developing good governance. If the Board has not raised concerns to the level that the CQC has, then the development of good Board governance is more problematic. The new CEO is legally accountable to a board which had not been meeting their collective obligations.

The CEOs shared that they needed to bring the Board into contact with different sorts of evidence about the trust and lead them to make their own decision about governance arrangements. As soon as possible, the CEO finds ways to give them opportunities and space to understand for themselves why they have not been obtaining the information that the CQC had found. There will be a variety of responses from existing Board members as they see the depth and breadth of the problems that they were responsible for (but didn't find out about).

One CEO asked a senior doctor who had organised a meeting of clinicians with the CQC to make the same presentation to the Board and framed this as an opportunity for the Board to learn. This could lead to a difficult Board experience since the Board may not have been sighted on these problems.

As one CEO suggested, it's important in those first few weeks NOT to be steered by the Board. It is important that the CEO maintains the independence of view and triangulates the information that they accumulate. Yet at the same time, the CEO is legally accountable to the Board.

Whilst these are difficult discussions, they are defining learning experiences for improvement at the Board level. The end of this process is that the Board comes to accept that there have been omissions in their oversight in the past and must improve that oversight in the present and the future.

This process benefits from a positive relationship between the Board Chair and the CEO. If the Chair of the organisation is staying, then they could be asked to concentrate closely on the Board structures that they are responsible for. *How is it the case that these structures did not work in such a way as to provide the Board with evidence of the problem? What is structural what is cultural? Will the Chair now sit on and observe how the subcommittees work? Will they listen to what is being said and what is left unsaid?* Some Boards, for example, hold nearly all their meetings in private. This may well be a part of the reason why the Board has not noticed the problems in the trust.

After a few weeks of work, the Chair needs to return to the CEO with an analysis of the changes that they think are necessary and be prepared to lead some difficult discussions.

The Chair is concerned with restructuring the Board so that by the time that the improvement plan is ready (around the 12-week period), the Board can be restructured to operate as improved governance. In this period the Board is NOT involved in the development of improvement beyond their own governance.

*The new CEO is legally accountable to the Board. Many will also have a strong accountability to NHS England who will have been important in putting their name to the Board. The CEO will also be involved in what may be necessary organisational and cultural changes to the Board itself. These changes will be an integral part of the improvement process. The Board will need to learn and acknowledge that there were elements of its previous oversight that were insufficient. On most occasions, the leadership of the board will play a significant role in this rejuvenation.*

## Developing the Governors who did not appoint the CEO

Governors of Foundation trusts are an important part of their governance structure. They often have a local set of relationships which can lead them to be defensive against criticism of the trust. It is possible that the Governors have not talked with clinical staff about the trust’s quality problems. This failure of communication needs to be changed and the information that the non-execs are getting about the problems in the trust need to be a part of the communications with the governors. Face-to-face communication by clinicians to governors has an impact here.

## Building a social movement in the trust

One of the CEOs suggested that, over time, they are working to build a trust’s social movement for change. This started in this first month when some members of staff experienced a new leadership who are hosting small group conversations to listen and question.  This is often a new personal experience for staff members. Over time as the numbers of staff grow, this moves beyond an individual experience for a few members of staff to a social one. As more staff are involved in these small group discussions, each staff member is encouraged to see themselves as a part of the collective process of improvement. This CEO felt that when this experience is replicated many hundreds of times, staff feel they are actively becoming a part of something bigger than themselves.

When all of these experiences become part of a direction for improvement, those increasingly social, rather than individual relationships can become a part of a movement.

This CEO argued that this would only work if the demanding work of day-to-day involvement by the leader with staff had been put in. The CEO is in no position to make the staff become that social movement; it only happens if the staff want to create it. The leader may start that process, but their day-to-day activity argues that their staff recognise them as a *part* of this overall process.

The social movement model also extends to how the CEO builds their networks and working groups. This approach argues for starting with small groups and building upon them until the movement reaches a point of action. One CEO talked about the medical staff committee as important in building agency in the change process. The committee meeting started as more or less empty in the first week of the improvement, and as its added content gradually encouraged people to attend, they told their friends, and their friends told others, etc. By 12 weeks the CEO had 500-600 people at the committee. At this point, they were ready for action. But it had to start small and build, and there was no big strategy to get more people to turn up other than to build relationships and connections.

The CEO was aware that change happens and spreads from small pockets, and that building connections and those pockets gradually upwards creates a far more sustainable model of change than spreading great ideas quickly across as many groups as possible.

*In the first few weeks, most of the CEO’s activities are conversations with individuals or small groups of staff. The CEO is picking up not only information but also the way people talk about the trust. The staff is getting a measure of their new CEO and how they work. On many occasions, these conversations lead staff to think about and practice their work differently. Over several weeks these conversations begin to join up. Staff talk to each other a lot about their content and form. Over time, these joined conversations stop being individual and become a collective, social, experience. As far as they are nearly all about improvement these joined conversations about improvement become a social movement. This cannot be created ‘from above’ but the conditions for its growth can come from now the CEO enables it to grow.*

### Creating an information governance that helps the trust to learn about what it is doing

One of the main reasons a trust is challenged is because the information flows within the trust are poor. There are many contributing factors to this, but in the modern world, failure of IT systems to talk to one another is one of them. In one trust there were over 200 different IT systems and a difficult mix of paper and clashing IT. In terms of the standing of the trust with the CQC, these systems cannot provide the information asked for by regulators. It is also a problem for all internal communication in the trust itself. The trust could not even show itself what it was doing. Early on in this trust the new CEO appointed a new Chief Digital and Information Officer who started to improve how the trust could provide evidence to itself about what it was doing. This knowledge was especially important internally since it allowed the trust to clearly tell itself what it was doing and when.

One of the consequences of the trust having better knowledge and information was a realisation that there were several, very good, small initiatives in the trust. Before the information flowed, the trust had not known this was happening. These small new innovative ideas became semi formalised through the creation of a ‘seed bank’ for the trust. Here all the small examples of good things trust were logged, could be looked at, and referred to by anyone. The analogy of the seed bank was such that anyone could take something from this information bank and then put it in their “soil” and help it to grow. With much better information flows the trust knew about the many innovative ideas that could grow.

*Creating better information flows does not just develop better formal channels of knowledge for the trust to account for itself to others and to itself, it also provides the opportunity trust to find out the good little things that are happening and to communicate those across the trust. In the modern world this needs an IT system that speaks to itself across the trust.*

## FIRST ONE HUNDRED DAYS/12 WEEKS/3 MONTHS

### Stabilisation: improvement through action grounded in values

The first 12 weeks usually marks the end of the first of three phases of the overall process. We heard *stabilise, sustain & connect,* or *hop, skip and jump* as different descriptors for these three phases.

Over this initial period, the CEO visits all or as many departments as possible. One leader had 104 departments in their organisation, a lot to visit in those 12 weeks. As many as possible need to be included not only to ensure all feel that they have been included in the formation of the improvement plan but also to allow the staff of all departments to talk with the CEO and become a part of the social movement.

Throughout this time, the CEO and their allies are starting to get lots of ideas for various improvement activities. These are logged continuously throughout this initial period and when reformulated, go on to form the draft improvement plan.

## Publishing the improvement plan that the CEO has been working on since day 1: A symbol of the work that has been achieved through managing upwards to the regulators and engaging with staff

The improvement plan is usually published at about the 12-week stage and marks the end of the first period. It is an important document since it outlines the work for the next few months and the direction for up to 2/3 years.

An improvement plan needs the technical detail of *what* needs and *how* it needs to improve but it also needs the values of the organisation that will drive the improvement. All of these need to be developed with the staff. Their inclusion should not be an abstract activity, but the staff needs to be able to hear their voice in the formal proposals. Therefore, this plan must reflect how the trust sees itself as it develops its future.

This formalising stage of writing down the detail of a plan mustn't be abstracted from the hundreds of conversations that the CEO has had with staff. For those conversations to matter, they must be heard and seen in the plan. This will demonstrate to the staff that this plan has not just come out of the head of the new CEO but has been created by them as well.

Most NHS trusts have a set of words that represent their values. But for too many, they remain just words. If the organisation wants those words to matter, then they must be created with the staff and not just thrust at them. Given the hundreds of conversations that the CEO has had with staff, it is very possible to develop these values as a part of those conversations.

Given the number of conversations that have taken place, most of the clinicians will see the discussions they have had on that sheet of paper, making an overall agreement with it a lot easier.

It’s likely that the overall structure for the plan was probably clear to the CEO before they started the role – they can start with a clear idea of *what* needs to happen. It is *how* the improvements will take that is coproduced with staff and stakeholders over the first 12 weeks that the plan details.

Given most of the improvement needs to focus on the quality of services for patients and improving their safety, listening to patients also provides this emphasis on values.

It is also a future-orientated document where the staff and the public can see the way forward not only as a vision but as a set of practical steps that many staff will have to play a role in their work. It is a demonstration of the leadership of the CEO and however this is labelled, (‘*Getting to Good’*) this will be a document that will echo around the CEOs’ work every day for the rest of their time in the trust.

The now established plan is the mechanism for prioritising the ‘must haves’ from the ‘nice to haves’ and staying true to the identified objectives that they own and are accountable to. Having a logical and clear plan is vital for staying on course doesn’t mean not being open to ideas and suggestions. As one CEO described it, *"your plan is your anchor when the waters get choppier."*

There will be many workstreams in this plan some of which will demonstrate real achievements over the last few months, some of which will be working in the immediate future (sustain) some of which will be long term (connect). It, therefore, acts as a transaction with the trust and regulators by demonstrating progress and that it is important to think and plan for the longer term.

It shows that there are no quick fixes, that it's important to improve in stages and sometimes over years. So, it is a key part of building trust and managing the relationship with all external stakeholders and regulators, to ensure they will work with them into the next 3 to 6 months. If they are going to help with resources, they need to know what is taking place all the time.

Usually, there is a Board meeting scheduled at the time of publishing where the agenda is cleared for this reporting and discussion. Having spent several weeks getting used to recognising the problems they have had in the past; the Board is now at 12 weeks being presented with the way forward in the future.

Immediately after that, all the communications within the trust need to have a single agenda item for what will be variously described as *'the improvement plan.'* It will also have helped that this has been seen as a moment in which the stabilisation process has been moving towards.

Reporting back with the 12-week plan is a 'big set piece' for the medical staff and all the nursing staff. "This" is the organisation you are working in. The CEO having published the improvement plan spends 2 weeks getting intensive feedback and immediately takes the newly published plan back to the main medical group in the trust and asks that they agree this is the reality both in terms of now and in terms of the future. In one instance the CEO – for the first time- took the Chair of the trust with them to this meeting and any of the Executive Directors from the past who were still there. It becomes a demonstration that everyone is on the same page and those that were there before hold with this analysis of both the past and the future.

This is an important moment because for 12 weeks the CEO has only rarely told staff they 'have to do' something. This plan marks a change in the way in which the work is experienced by CEO and others.

The improvement plan has two distinct sections: those services that need stabilising and those that are good and also need improvement. In CQC terms, the first group has to move from Inadequate to Requires Improvement, and the second group moves from Good to Outstanding. Identifying services that move from Good to Outstanding as well as already Outstanding services in the improvement plan is to provide the whole plan with hope and pride.

*The publication of the improvement plan is a pivotal moment in the improvement process. It is important that the staff can recognise their conversations with the CEO over the previous 12 weeks. It's equally important that they can see how their* *work contributes to the way forward. The values of the trust will not be abstract but will make the plan move forward and will have been created through the hundreds of previous conversations with staff. To move the whole trust forward, the improvement plan needs to include services that are already good as well as those that are inadequate. There must be an intensive period of communication and discussions – led by the CEO – after its initial publication.*

## Managing upwards and outwards: Defining expectations with external stakeholders

The publication of the plan brings with it an expectation within the regulators that something different will happen from now on.

The CEO will be able to define to the regulators what can and what cannot be done and will build on the momentum already created. The CEO will know what can be achieved in what time scale.It will need to be strong in standing behind their judgment. In discussions with the regulator, the longer-term trajectory must be owned by the CEO, and they must avoid being derailed by external expectations or short-term demands.

This means being able to stick to the actions which they know are right and within the best interests of the organisation. This requires bravery and a deep sense of direction that allows them to stick to their guns. Being able to draw on experiences of having done these things before is important. Or failing that personal experience, being able to point to the learning from others' experiences is useful. The plan brings attention back to the long-term change for the organisation.

The CEO will be required to speak the truth to power and push back against some demands. When this push back is to the people who directly or indirectly led to the CEO appointment (e.g. CQC and NHSEI), it requires strong self-belief.

These are relationship-building opportunities. We heard from CEOs that being able to maintain adult-to-adult conversations is important here as it is easy to descend into being unreasonable, especially in the face of what may be unreasonable or impossible demands. The goal of these conversations is to continue to get people to support the CEO, so being cooperative is important. Being able to say*, 'you are right'* is as important as being able to point out where demands are unrealistic. CEOs also demonstrated empathy with the position of the regulators in these conversations.

CEOs found ways of using the changes that they made to build trust in their process with external stakeholders whilst also reducing the pressure on themselves. One example we heard was establishing a Board position of Director of Patient Safety whose role was to focus on engaging with the regulators and the CQC around the improvement plan - a foreign secretary of sorts.

Another example was commissioning a review of external stakeholder relationships (local media, council, the entire system), in which they were all asked to contribute how they perceived their relationship with the trust. This set the tone for new relationships and a proactive approach to engagement.

*The regulators will have a key role to play in the development of the trust. How the CEO works with them is important at all times, but even more so when the improvement plan is published. The regulators will likely want a different rate and spread of progress than the CEO has achieved and is planning for. These are not easy conversations. But signing up to a timetable that is not feasible will create further problems down the line. The CEO needs to have the strength to stand up for the time that it will take to improve but needs to do that in such a way as to recognise the legitimacy of the regulator's rights in the overall process.*

## Action to improve first, new structures second: Real change happens in real work

The improvement plan concentrates on what the trust is going to do and *not* the structures that the trust will do them through. Between weeks 12 and 24 the CEO is thinking through the necessary original approaches to structure that can be discussed after week 12. This means that the improvements taking place between weeks 12 and 24 are taking place *despite* the structure of the old trust, and in carrying out those improvements they are butting up against the old structure. This gives all the staff good evidence of how that old structure needs to change.

This early emphasis is on the need for the real activity for improvement, rather than changing the structures is, over time, welcome. But at the beginning, it is counterintuitive. When the NHS hits problems it expects structural change, both at trust and national levels. Therefore, when a CEO comes in to improve a trust, many staff, in following that national model, expect that there will be changes to the structure as the answer to the problems. When this doesn't happen there is initial puzzlement as it confounds expectations.

One CEO describes these 12-24 weeks as the CEO being in a parallel world. The staff is energetically moving forward on a broad number of practical fronts and their main work is how to improve services. But the CEO is spending those 12 weeks, not only registering how services are being improved, but also trying to understand what changes there need to need the structure.

*The NHS as a whole often reorganises structures as a way of trying to improve services. Some staff have come to expect that of a new CEO when they are leading an improvement process. At this stage in the improvement process, it is important that the trust concentrates on the actual improvement of services whilst the CEO is looking at structural changes for the future. The experience of actually improving services rather than creating a new structure provides staff with an experience of achievement.*

## Concentrating on improving well led

After the publication of the plan, there will be some moving around of managerial staff to ensure that the best managers are in the areas that will need the most improvement. This is often a recognisable shift from past practice where it may have been the case that the managers with least capacity are in charge of areas with the poorest performance. This shifts part of the dynamic in the trust, since being put into a department that needs a lot of work is a form of a badge of success. Rather than *"Oh dear what have I done wrong I'm being asked to do this difficult task",* it becomes, "*If I'm asked by the CEO to take something difficult on then they must think I'm good".*

One practical example of how to use the frame through which the trust had been judged to improve it, was to use the CQC "*Well Led*" framework as a method of improvement. One CEO (and their Improvement Director) took apart the CQC Well Led framework and asked trust leaders to work with that framework to understand how they lead. This was then developed into a workshop so that people initially had a much better idea of how their own activities were a part of leadership. At a second stage, people recognised that their leadership activities could improve them, not just in a random way, but directly along the well led framework that they will be judged by. Since it provided a well-thought-out self-conscious framework for developing leadership, for this CEO this was one of the most authentic ways of improving the organisation.

Although the details of how the improvement is carried out are very contextual, there is a consistent emphasis on an Organisational Development lens and methodologies. These methodologies aren't always received or recognised by staff around them as important or significant, but there was a universal core belief of their benefit and impact of paying attention to behaviour and culture. "*Why do we need to have a masterclass on kindness*?" other members of senior leadership may ask them. The answer to this and other questions comes from a deep-seated belief that the best outcomes in the world can be traced back to the interactions of individuals.

*The reality of dispersed leadership is central to all the improvement strategies. Ensuring the best leaders are carrying out the most important improvement tasks is important. Developing a distributed leadership pattern needs a strong emphasis on organisational development with a variety of methodologies. Whilst initially staff may question some of the methods of Organisational Development, their experience of the useful outputs are good*.

## Working hard on the big problems which won't have quick fixes

Some issues need to be tackled urgently within the stabilisation period but whilst these are urgent, they are not necessarily quick fixes. These could be described as 'multifactorial' problems that are the product of relationships or sets of beliefs about what is important. However, these issues are so important that they can't wait for the longer-term cultural shift that will only take place over time. Relying on expert knowledge from the outside in dealing with these problems can be key. This is where the development of an improvement community of practice, and creating relationships with others who have worked in similar circumstances, becomes important. "*How do I tackle X problem quickly whilst respecting the complex reasons from which it has emerged?"*

A lot of time is put into these priority improvements. Identifying the safety breaches first, asking the external experts how they might be fixed, and talking seriously through the difficulties and demanding work of implementation. One example was the World Health Organisation checklist in theatres where CQC had said there was a disregard for patient safety. It was identified as *a priority to fix, whilst not a quick one* by the CEO*.* In this case, external experts recommended human factors training for the CEO staff. This ensured that everybody was involved in the training, and they developed into strategic groups based on their willingness to change. This example shows how the action taken goes beyond the technical issues and must consider the group relationships which contributed to the problem in the past. For these urgent priorities, the CEO attending the training alongside staff as much as possible shows the value placed on it and its priority.

*Some problems that need immediate solutions have often been caused by relationship factors that go back many years and therefore do not have a quick technical fix. It is possible to develop the relationships that have caused these problems by giving them a universal focus. Whilst the development of a new culture will take time, where necessary, relationships can be re-formed at pace.*

## FIRST SIX MONTHS

### Ensuring exceptionally long-term improvement issues are kept moving (if not by the CEO)

Trusts often face big issues that are not a central aspect of the improvement plan. Some trusts have long-term commitments to making and remaking the business case for a new building, and there may be existing business cases that go back many years. It could be another decade before such buildings open. However, these issues are an important part of the meaning of trust, and they need to be looked after and taken forward. Whilst this may not form a part of the improvement work, it is a significant part of how the trusts feel about their future. CEOs often employ competent managers to progress the various ongoing business plans, even though this is not a part of the improvement work that they are judged on.

### Using the improvement plan to give drive and a shared purpose

After the 12-week set piece, the staff has a clearer idea of what they are engaged in and who has to work on what. Because the CEO has based the improvement plan on conversations with staff, they recognise themselves in that plan. After the first six months, the culture of how improvement takes place and the values of *'how we do things around here'* (also known as culture) become more significant. It becomes a 'yardstick' where more staff judge themselves and others against that developing culture.

After the publication of the improvement plan, any regular discussions at the regular clinical summit discuss how the plan is or is not progressing. Where are there blockages, problems, and successes? This meeting becomes the place where suggestions about how the improvement plan is progressing will happen. The plan provides a focus for most meeting agendas.

## Developing some new structures

By the 6-month period the CEO starts to turn the improvement plan into new structures to reflect the improvement work happening. In some instances, the 6 months is celebrated more clearly as a mark in the improvement process than the 12 weeks because there is clearer evidence of the impact of the improvement and the new governance structures to which it has led. Staff are experiencing their achievement.

This demonstrates a principle of the work of all the CEOs. That is, achieving the necessary improvement only happens by getting staff to do real work. This may seem obvious, but so much of the improvement 'industry' resolves around structures, documentation, and plans that the necessary real work of staff seems submerged. The CEO needs to know that these new structures will only be taken seriously by staff if they see the work that the staff is now doing reflected in them.

By 12 weeks the CEO has been starting to think about the new structure that helps create improvement, but they usually allow another 12 weeks to see how people work with the improvement plan. By 6 months they can usually draw the structure but may even hold out longer before publishing this.

For example, a trust in trouble would probably not know how many teams were in the organisation. By the end of the 6 months, teams need to be clear and defined. People not only know what teams are in but also recognise that the team is the unit through which they can improve their work.

One CEO put great store in setting up a Clinical Policy Group with the 40 senior medical staff (this is a large specialist trust). This group takes the real responsibility that senior medics really have but it has not necessarily been reflected in the governance of the trust before. In the second 3-month period this group is set up with a constitution that reflects a representative approach. The group votes and is felt to be the senior representatives of the trust.

By the end of the 6-month period, this Clinical Policy Group operates as a representative body taking responsibility for the clinical work of the trust. Since the senior medical staff have a direct relationship with specific elements of power and decision making, this experience of taking responsibility is crucial. This builds on their different experiences of the previous 6 months, where they have had increasing direct responsibility both for being honest with the CEO about what is wrong and also about building the answers to improve.

As a part of this process, in a large trust, the different families of clinical work need to be organised. Often these collections of specialisms have come about for ad hoc reasons. *Is it right that emergency medicine and A&E come together? Or should one of them be with anaesthetics?* Over the 6-month period, conscious decisions must be made about these groupings so that people can work better together. When this had been achieved one large trust CEO went for 10 collaborative chairs of the family groupings. These were in place by the 9-month mark. They then play a role in discussions with regional NHS England staff around specialist commissioning with those bodies outside the hospital that are vital to the future of the hospital. The managers are then aligned to this clinical structure.

*New plans, documentation, and structures matter but improvement only really takes place when staff work differently. By this stage in the process, new structures can develop which reflect those different working patterns.*

## The new executive team

Part of the bridge from the stabilisation period to the later period is getting a functioning executive leadership in place. By the end of the first six months, the Executive Directors have usually concluded whether they want to work with the CEO in the process of change. Often the executives have been given a chance to make this decision and sometimes the CEO makes this decision for them. In some examples, the new executive team is developed by building on existing relationships, but in others, it was clearly about replenishing the executive team from the start. The CEO needs to build trusting relationships and a leadership team that fits the values upon which the CEO is building the improvement plan. It will often take longer than the first 12 weeks, but the priority changes are started here as the CEO works to change the perception of leadership.

A good relationship between CEO and Chair makes this process much easier, particularly if board members that were initially appointed by the Chair are being replaced. Equally, finding good executive leadership requires good networks across the country to ensure that high calibre staff can apply from elsewhere. Connections in national teams, such as NHS England, can be useful in accessing such networks if the CEO doesn’t already have them, and proactively seeking them out early can be helpful to the CEO in being on the front foot.

This is more than a purely technical or functional exercise. It becomes an opportunity to put the values of the organisation into action. In one example, the values which were drawn from the staff survey results were used to form the basis for the recruitment of new executives. In the case of both hiring and exit strategies, representing these values created a clear map back to the contributions of staff feedback. In this process, when the CEO needs to move an executive member on the CEO sits down and discusses with them what action they need to take about finding somewhere else for them to work. This involves the CEO working hard with the executive team member to find them another job. Senior people leave but they do so sympathetically. This is an important marker of how the trust will operate in a new way. If people are sacked brutally, the trust learns that this is how their business is carried out. There is no point in trying to construct a listening form of leadership on the one hand if on the issue of moving on leading staff there is no sympathy whatsoever.

Just as in the first few days the entire staff of the trust is watching how the CEO behaves, this will continue for much of the first year. If the trust is developing a much more collaborative set of values, that needs to continue in all activities.

*The replacement of executive staff is something managed very carefully. It is modelled compassionately, whereby the CEO ensures they are finding opportunities for departing staff and makes a concerted effort to make these changes as positive as possible. Similarly, interviews for new roles are largely based on the trust's new behaviours and values.*

## FIRST NINE MONTHS

### Mobilising the new executive team

Between 6 and 9 months a proportion of the senior team are likely new to the trust.

They may expect that as executive directors – perhaps in their first job at this level – to have more ascribed authority than they in fact have. If the trust is trying to build up a distributed style of leadership, new executive members may feel they should have much more power than this distributed system provides, The CEO may need to spend a lot more time with the new executive directors working this through in the practice of their new work.

The executive directors need to develop visibility in chairing some of the improvement activities, replacing the CEO in some of the visible work that the latter has been engaged in up to this point. This demonstrates a broadening of the board leadership in the improvement work. It symbolically shows that even if the CEO leaves something behind, the issue still progresses. Progression planning for when the CEO leaves needs to start with the introduction of these new directors and a willingness for the CEO to accept less salience in the improvement process.

*If the trust is developing a distributed leadership model, then any new executive directors may need the CEO to initially work with them on the detail of the practice of that model. The CEO will have to stand back on some issues and allow the new executive directors to visibly chair some of the improvement activities.*

### Time to start thinking about whether the trust needs an entirely different strategic approach

Whilst for the first 9 months (sometimes expressed as 3 lots of 12 weeks) the CEO has been developing a strategy, it has been a strategy based on improving the quality of the existing model of care. It is not often the case during improvement that the CEO will construct an entirely new model of care. However, the period of 9-12 months may be just the time to ensure that the trust has the time and space to explore not just the improvement of that existing model, but whether a new model of care with new partners is appropriate. This may need quite different skills and relationships than the previous work. Whilst some of the improvement issues for a trust are clearly within the control of the trust themselves, for others there are wider systemic issues that need a distinct set of interventions. This is revaluated at around the 9-month period.

*The CEO has been working to improve the existing model of care. At this point, it is important to reflect on whether the systemic issues outside of the control of the CEO outweigh internal ones, and therefore will require an entirely new model.*

# FIRST YEAR

## The engine for long term improvement: Getting our pride back becomes a cultural goal

The emphasis of the improvement plan has been on stabilising those parts of the organisation that are causing quality or safety problems (*'Inadequate' to 'Needs improvement' or 'Good')* and those that can improve from Good to Outstanding. Selecting both is important for the 12-week plan, but even more important in the whole of years 1 and 2 to help the whole trust feels as if it has an engine for wholesale improvement.

If, by the end of a year, a substantial number of staff have experienced being a part of a movement for change within the trust, then by this stage that significant proportion of staff will be talking about their work with phrases such as '*getting our pride back*' or '*we are back to our best'*. This change comes about initially because they have different experiences of how leadership works with them to improve their own work and secondly because there are much better communications around the wider achievements taking place.

Services that need to go from Requires Improvement to Good ('the sticky middle' as one CEO called it) that are the work of the next two years are the most difficult to motivate. So, they rely on the pride in improvement that the projects chosen in the improvement plan have helped to create which in turn creates a culture of improvement that spills over to the rest of the trust services.

*The CEO recognises the important interaction between cultural change and changes in performance. By the end of the first-year cultural change within the trust will begin to develop its dynamic beyond the performance changes that the trust had needed from the beginning. Cultural change is necessary to improve performance, but it then develops into wider areas of the way the trust sees itself and works.*

## Underlining the importance of an internal location for learning and sharing change

At month 1 we mentioned internal places to learn such as the Clinical Support Unit which are given different names in different CEO improvement stories. Over time, many more members of staff learn from these learning teams or courses and return to this unit to help others learn. It becomes the location where distributed learning takes place on all subjects of change. All new staff have a chance of learning something from such a place of learning.

One CEO said that after a year they were aiming to take this to a different level by using it as a location where internal campaigns were run to improve the trust. Staff would learn how to run such a campaign, for example, on quality and safety. Over time this CEO felt that they were creating a social movement for improvement within the trust. Very few members of staff in this trust would have felt it appropriate at the start of this process of change to have referred to internal campaigns or social movements, but after some time more were becoming comfortable with those descriptions and that learning.

### Working *with* existing values, beliefs and culture to deliver improvement

Whilst the CEO is facing cultural challenges, in some cases they are trying to directly challenge the culture as little as possible, rather bending it carefully in the desired direction. Building a strong awareness of the social context and identity of the trust into the delivery of the strategy is imperative to making otherwise quite technical goals resonate with the people working in that trust.

Some of this cultural awareness is seen as *valuing the little things*, which are a result of asking questions like, “*What does it take to do a good day’s work?” “What do you need?” “How can we look after you?”* Working with the existing culture is about the CEO understanding *what matters to you* and ensuring staff feels like they are being appreciated.

It also means understanding how relationships across the hospital means doing things in slightly different ways. In some trusts, some staff are married to each other, many are related, and many are friends outside their work. Talking to one person may be talking to several. The past culture of the trust may be reinforced by its relationship with the locality. *Do people live locally or not?*

These kinds of cultural nuances need to be learned over time and have a big effect on the delivery of change. It even affects the governance processes as people will take issues to different places depending on relationships. CEOs found ways to respect these and feed them into governance, rather than the other way around.

The CEO uses a place’s social specific to build a sense of belonging in the trust. Whilst the first 12 weeks are about starting to identify these through immersion, it is an ongoing process where the CEO needs to embed it in action a year in.

## FIRST TWO YEARS

### One example of changing culture: Developing a restorative justice culture through teams

The CEO that described the overall process as a ‘hop, a skip and a jump’ saw the ‘jump’ as a process of embedding a different culture in the organisation, by turning it from something abstract to something recognisably concrete. This helps to embed it within the movement for improvement and provides further opportunities for staff to see progress.

For this CEO, this culture was a *restorative justice culture*. One mechanism by which this was established was a team canvas, which began  with a one-page statement of what a team is about. *What standards and behaviours do you expect? What are your year's priorities and how are you going to achieve them?* Each team in the organisation had one of these, including the Board and the executive team. These statements were not just abstract values but were written and reported for different teams. They allow for behaviour that doesn't meet them to be called out. They are internal to the team and external to the trust's accountability mechanisms.

The team canvas in this case became the basis for Quality Review Visits, where each of the teams is visited on a peer review basis at least once a year, leading to CQC-type scores which are applied to all teams.

This process, of each team setting their goals and behaviours and then being judged by their peers against them, builds an interconnected understanding of the new values and what these translate to in terms of actions and behaviours. Thus the trust builds a strong data and evidence base to back up its new culture.

## Slippage can occur at any stage of the improvement process

There is a danger of slippage at any time, especially after a couple of years when the improvement hits new and different blockages. Slippage may happen when attention moves away from any part of the improvement process. Yet the long-term goal must stay important regardless of these changes or hurdles.

In one instance, the brand of the improvement process was changed from 'getting to good by 2020 [by three years]' to 'getting to good 2021 [by four years]'. This change was due to external pressures (namely CQC delaying their visit due to COVID-19). The trust physically crossed out all the dates and replaced them with the new ones to make light-heart of the situation, whilst maintaining the importance of the long-term goal.

## Bridging the gap between *work as imagined* versus *work as done*

It is important to stay open to where change isn't working or even happening at all throughout the process.

The CEO who had made the distinction between "*work as imagined*" and "*work as done*" was surprised by some results in the staff survey expressing that management went into 'witch hunt mode' when something in the trust went wrong. The Board and the executive team imagined they were acting with kindness, but some staff experienced it differently. Cultural change needs constant checking, listening to, and then restitution.

The CEO and the executive team took this very seriously. They recognised that their own "*work as imagined*" (kindness) was at variance with the "*work as done*." To continue to be authentic they had to not only hear this but had to change and be seen to change.

### Creating internal ambassadors for the specific culture that is being created.

Continuing to spread the new culture needs constant renewal. By this stage, more staff need to consciously be ambassadors for the change.

The ambassador model was used by several CEOs as a way of spreading new practices across groups of staff. One CEO that developed a particularly concrete and explicit culture, offering to make staff members ambassadors for this culture. Staff were offered training about the theory and practice and ambassadors were encouraged from right across the trust to become advocates for a different way of working.

Ultimately, the vision is for everyone to be ambassadors of a culture of safety. In another ambassador programme, any member of staff could become an ambassador for quality and safety by raising an issue. Other practices included asking all clinical directors to come back every fortnight with a story of where something has gone wrong.

*Staff at all levels can become ambassadors for quality and safety. The CEO creates space and time for learning about failure and raising issues is framed as positive.*

### Energy management

Many CEOs described this ask as taking an extraordinary toll on their time and health due to exhaustion. They recognised the importance of looking after themselves and their energy levels to remain compassionate leaders. Being able to deliver this type of work consistently requires great self-compassion and avoid succumbing to the idea of a ‘hero-CEO.’ It needs to be seen as being done by ordinary people.

Not putting energy into things that the CEO can’t influence or control is seen as important. Years of speaking truth to power and building confidence in the regulators, and wider stakeholders, builds up awareness about being smart with a CEO’s energy.

As such, these roles were seen as inappropriate for new or young CEOs. Many of the CEOs benefitted from ad hoc peer-mentor relationships from others in such positions to help understand where to maximise the efficiency of their efforts.

Having trusted peers involved in the process is especially important to managing a CEO’s mental wellbeing in what can otherwise be a lonely job. This is as important towards the end as it is at the beginning, and it can be proactively sought out. Peers could be other CEOs or executive directors, friends, specialist coaches, or psychologists who are used to offloading and reflecting on the experiences of the job.

*Given the demanding nature of the role, the CEO cannot afford to put energy into things that they can't influence. Being able to reach out to others who are in or have gone through these experiences helps to manage energy levels.*

## FIRST THREE YEARS

### Further developing middle management

In one example, developing the middle management was very much a focus of the third year, or at least once there is strong senior leadership in place. This means the development of internal staff as well as bringing in new talent to the organisation.

Junior talented staff are brought in from other organisations to come and cut their teeth and get an opportunity to try new things and innovate. The key to this is that there is a good executive team in place to guide them and intervene in the political/cultural situations where the junior person may not have developed the tact to do so.

### Is the CEO moving on?

From the very beginning of their tenure, being clear and honest about what the CEO is there for, enables the CEOs own moving on the process to happen. This may be demonstrating that their job is to create an environment in which any new CEO could take over.

A CEO also needs to build faith and confidence throughout the organisation as they prepare to exit. Whilst it is clear that the CEO has been key to successful change, showing humility that the change that has happened allows a view that the ‘new’ organisation that has emerged actually needs something different going forward.

One CEO 26 months into the project felt that their most recent 100 days were as important as their first 100 days. They felt that some people who had been appointed to improve services had not been up to the task. For the CEO this requires much greater focus on these new appointments to facilitate the transition.