

The Bevan Commission: its role in transforming health and care in Wales through disruptive leadership

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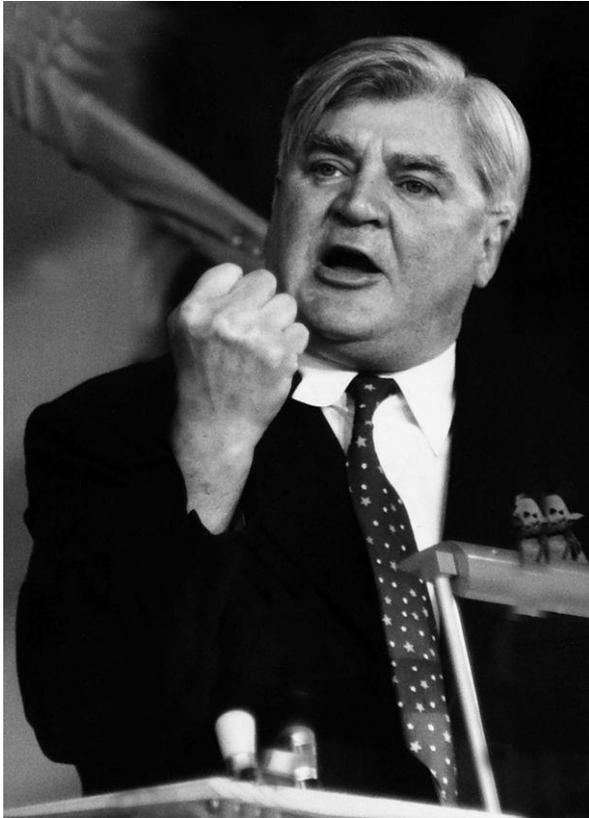
NHS turns 70



The original disruptive leader



Disruptive Leadership: what would Bevan think of the NHS?



Aneurin Bevan said:

“Free people can use free institutions to solve the social and economic problems of the age - **IF** they are given the chance to do so.”

Disruptive Leadership: what would Bevan think of the NHS?

The NHS didn't spring from the mind of one person, or conjured up in an office by a team of experts, the model was rooted in the realities of **a local community.**

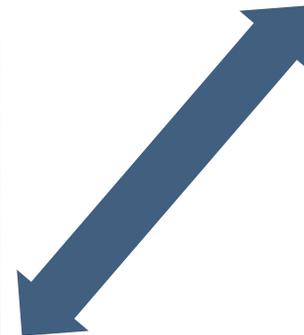
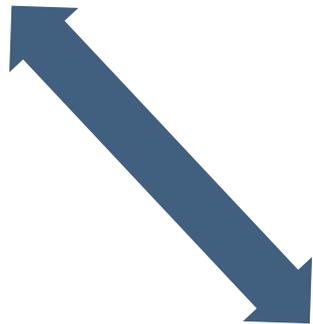


Disruptive Leadership: what would Bevan think of the NHS?

The NHS emerged from a model rooted in the realities and needs of a South Wales community – Tredegar.



Every part of the community
came together to address their
needs and find
a solution



A victim of its own success

- The NHS was set up to provide a comprehensive, integrated service free at the point of use. Its intention was to provide best care for all citizens and, wherever possible, prevent ill health.
- The NHS has treated more patients every year and introduced many new treatments. With limited resources it has had to deal with increased patient expectations, cost of new technologies and drugs and an ageing population.
- As such the NHS is often said to be “a victim of its own success”.



“No problem can be solved by the same kind of thinking that created it”

Albert Einstein



Disruptive leadership

Reflect on Bevan's original vision for the NHS - where every part of the community and society comes together to address needs and find workable solutions.



What is the Bevan Commission?

The Bevan Commission was established in 2008 to *'observe, interpret, analyse, scrutinise, advise and comment on health-related matters in Wales'*.

Now our role is to challenge provide independent, authoritative advice on health and care to the Welsh Government and leaders in NHS Wales, the UK and beyond.

Draw together the combined experience and expertise of our 22 internationally reknowned Commissioners



Bevan Commissioners

Professor Sir Mansel Aylward
CB, Chair

Chris Martin, Deputy Chair

Ann Lloyd CBE

Professor Dame Sue Bailey

Professor Ewan Macdonald OBE

Nygaire Bevan

Professor Bim Bhowmick OBE
DL

Professor Sir Michael Marmot

Professor Dame Carol Black
DBE

Professor Sir Anthony Newman
Taylor CBE

Professor Kamila Hawthorne
MBE

Sir Ian Carruthers OBE

Dr Helen Paterson

Mary Cowern

Professor Phillip Routledge OBE

Professor Baroness Finlay of Llandaff

Fran Targett OBE

Professor Hywel Thomas CBE

Professor Trevor Jones CBE

Sir Paul Williams OBE CStJ DL

Lt General Louis Lillywhite CB, MBE, OStJ

Professor John Wyn Owen CB



A breadth of influence

The Bevan Commission's commentary and analysis is shaping both today's and tomorrow's health and social care policies and delivery.

The Commission produced over 30 publications addressing vital policy areas such as:

- Forging Better Healthcare/ The Visible Hand
- Improving Primary and Community Care
- Redrawing the Relationship Between the Citizen and the State
- Workforce Fit for the Future
- A Quality System for Wales
- Prudent Health and Care
- Social Model for Health and Care



Prudent health and care: key principles



Achieving health and wellbeing with everyone as equal partners through co-production



Caring for those with greatest health needs first, making best use of all skills and resources



Doing only what is needed, no more, no less and do no harm



Reduce inappropriate variation using evidence-based practices consistently



Medical model vs social model



We must move away from traditional 'medical model of care' which places 'power' with professionals delivering care to people as passive recipients of care, not partners in their care.



To a social model which recognises the shared responsibility of society starting with the individual. A model which places the responsibility of improving health and wellbeing across society as a whole.



Everyone's responsibility



Using a prudent framework

The Prudent Social Model of Health & Care will:

- Actively encourage everyone to take collective action and responsibility to help us all live the healthiest lives for as long as possible
- Call upon all agencies to act together and assume joint responsibility to ensure we make the most of the resources we have to meet individual and population health needs
- Ensure we make the most effective use of all skills and resources available including local people, patients & 3rd sector
- Ensure those with greatest needs are prioritised and hard to reach groups are included



Question of rights and responsibilities

The Prudent Social Model of Health & Care will:

- We are all members of this special club
- A true co-operative
- We all have our own NHS number
- We all have rights and responsibilities

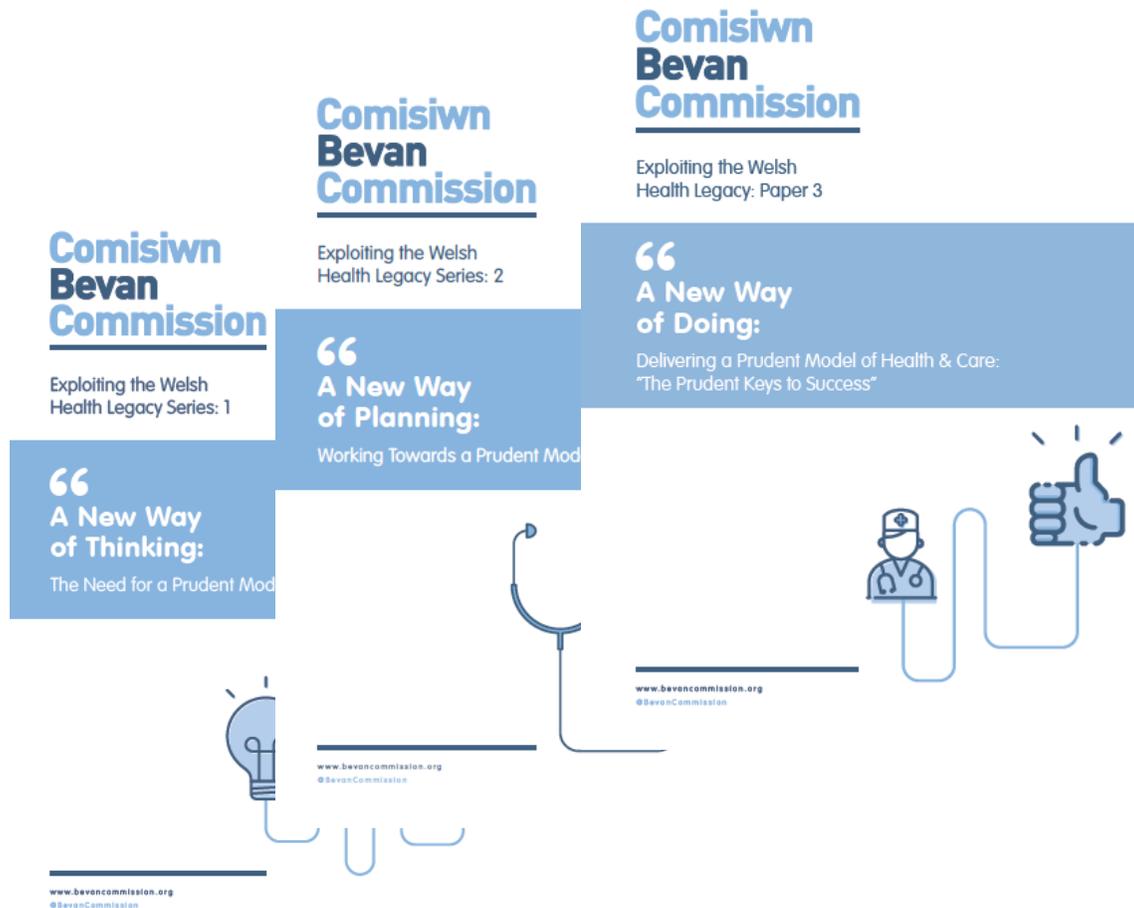


This is your NHS Number

9	4	3		4	7	6		5	9	1	9
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Exploiting the Welsh Health Legacy a social model of health and care



- **A New Way of Thinking**

- Called for a prudent, social model of health and care moving away from a traditional medical model.

- **A New Way of Planning**

- Set out the planning and approach needed to implement this new thinking; a social and prudent model of health and care

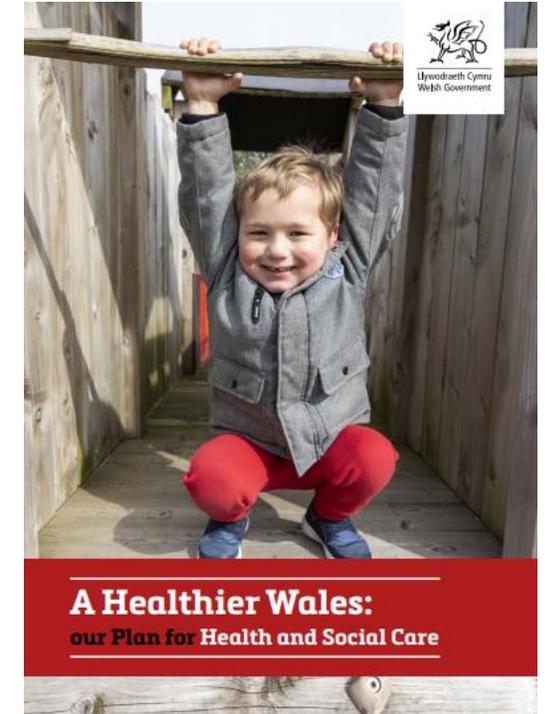
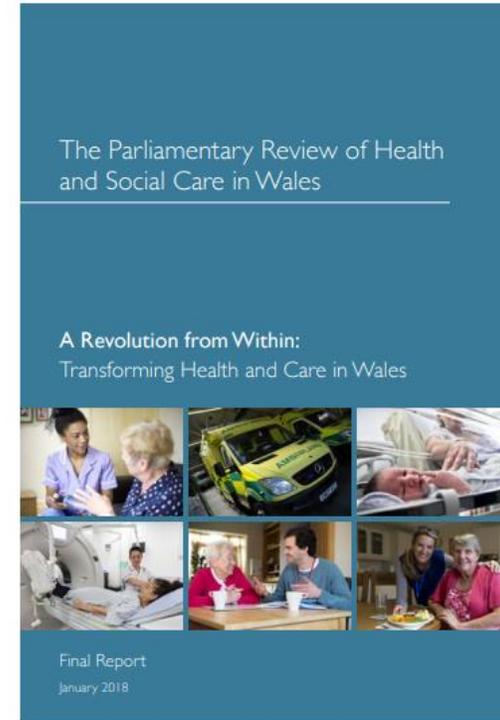
- **A New Way of Doing**

- Highlights how a prudent social model can be translated into action.



Impact on health and care policy in Wales

- Parliamentary Review
 - A cross-party call for radical change – revolution not evolution - in health and care, reflecting our belief in good health and care as everyone's responsibility.
- A Healthier Wales
 - The Welsh Government's Long-Term Plan for health and care has the prudent, social model at its heart.



“It is the people in the system and those who use the system that are best placed to change the system”

Bevan Innovators were created to encourage and engage people to come forward with their ideas to and try out new ways of working:

Bevan Advocates

Bevan Fellows and

Bevan Exemplars



Translating thinking into action:

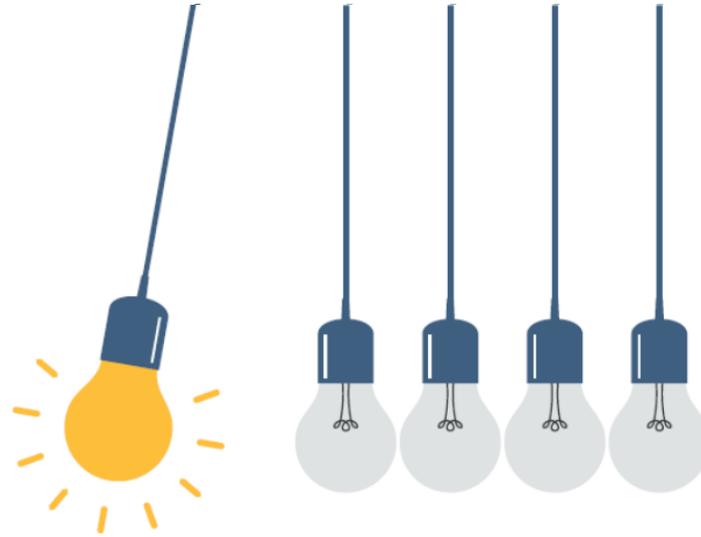
We support NHS professionals – from surgeons, to nurses, to porters, to physios - to trial and test out their innovative ideas in their own hospitals, GP surgeries, care homes and communities.



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Disruptive leaders: Bevan Exemplars



Find out more at
bit.ly/ExemplarEvaluation

#BevanExemplar



@BevanCommission

VR and AI technologies enable patients to shape their own cancer treatment

Velindre Cancer Centre is experimenting with Virtual Reality (VR) and Artificial Intelligence (AI) to enable patients to 'feel' experiences before they have them. An example of this is in radiotherapy treatment.

Artificial Intelligence (AI) technology will be used to power a chatbot that can engage patients in their healthcare and treatment by scouring the web for information and responding to psychological cues such as tone of voice.



Recycling hospital waste to generate revenue



Single-plastic usage is a major environmental challenge worldwide. For hospitals, the challenge to maintain sterile wards through single-plastic sheeting is both environmental and financial – as removing and recycling this waste inevitably costs money.

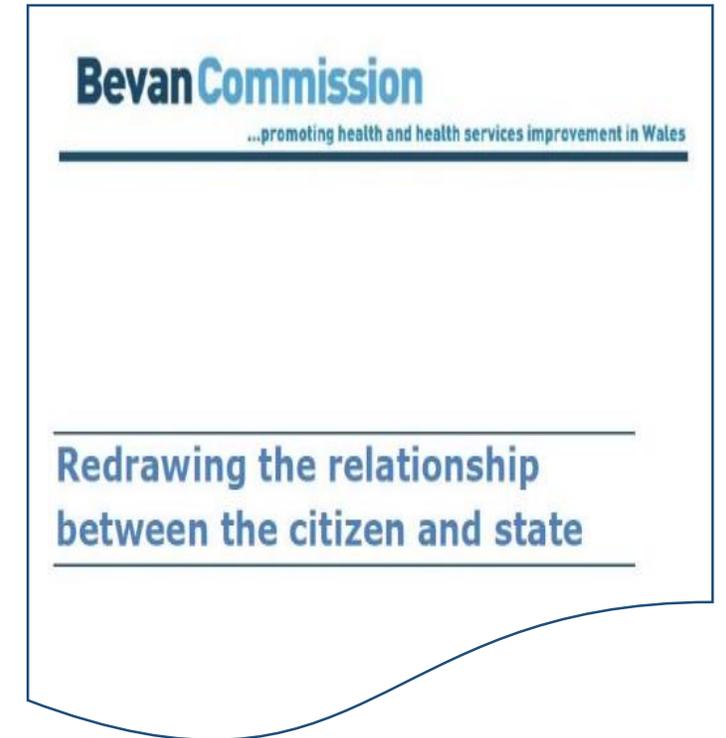
The partnership between TCG Ltd and ABMU Health Board turns hospital plastic waste (such as clinical wrap) into polypropylene blocks with a commercial value and can be used to develop new products.

As a result, recycling (which costs hospitals money) is transformed into a revenue stream.



Why Redraw the relationship between the citizen and the state?

- The current system is not working effectively or equitably for all
- Support implementation of Prudent Healthcare principles
- Access to knowledge, skills and expertise
- Improve service performance
- Design & deliver better public services
- Improve trust in public service
- Increase sustainability & manage costs
- Co produce patient care
- Reduce re-admissions
- Greater value for patient and professional



The challenge



The challenge therefore remains as to how we ensure we effectively rebalance the relationship between people and the state - in a meaningful and prudent way.



Disruptive Leadership: Redrawing the relationship

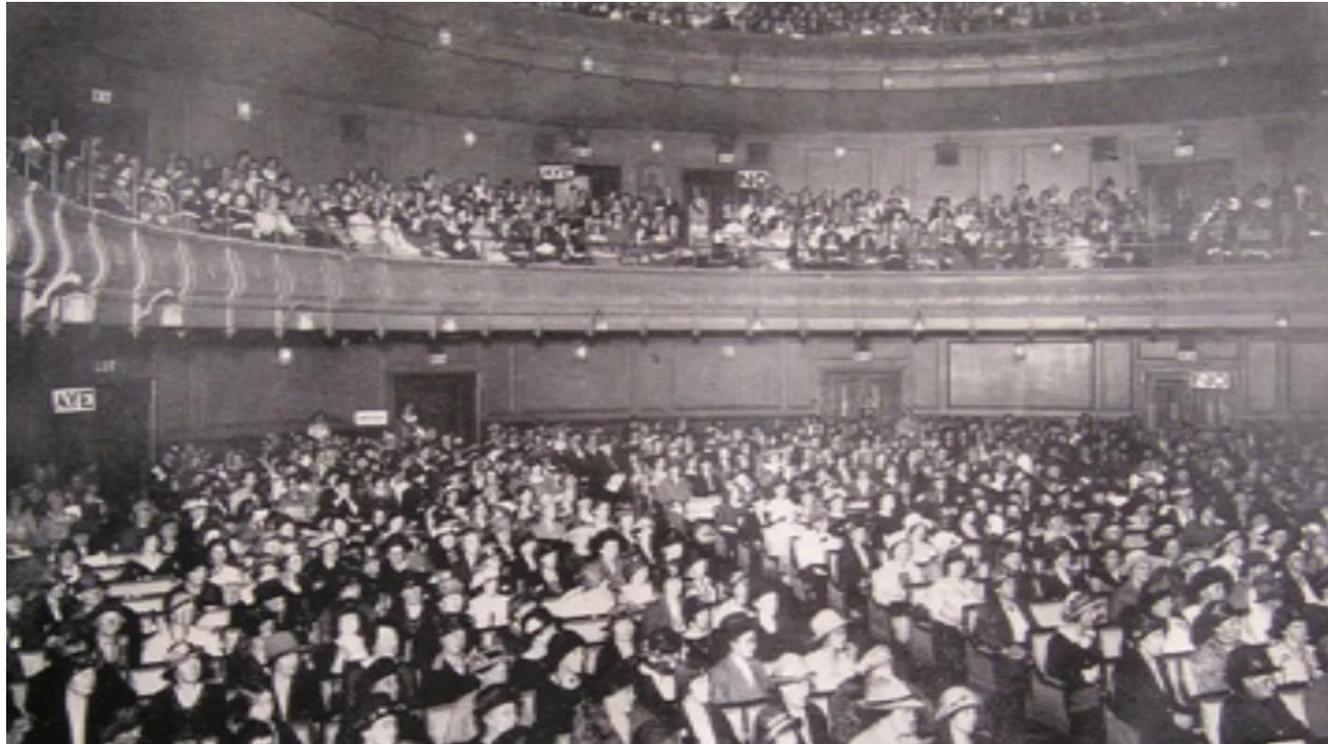
- Working with members of the public (Bevan Advocates) to share prudent healthcare with others and also feedback their experiences.
- Using networks, such as the WI in Wales to influence thinking and practice in communities and shape the delivery of health and care,
- Working with existing communities to start conversations about how we can all take responsibility for better health and well-being.

What will you do differently?



Creating a social movement for change

Case study: the WI



Case study: the WI



- Engagement programme, ‘Our Health in Our Hands’, has been rolled out to 16,000 WI members in Wales.
- Includes conversation prompts and exercises to spark ideas and community action to transform health and care.
- Builds on the proud history of campaigning, particularly in health.



Case study: Solva Care

- Solva Care is a not-for-profit social initiative, that offers friendly, local support and help to those who need it in Solva and the surrounding area.
- It is a community-based project focusing on social care, based in a rural area with a high proportion of elderly residents.
- It was set up in 2015, in response to wishes of the local residents, to support individuals and families with a variety of services.



Case study: Bevan Advocate report on patient-driven solutions

*“Our responses were discarded at the end of the sessions and it occurred to me - **wouldn’t someone be interested in hearing about these?**” Jules Horton, Bevan Advocate*

Patients in Wales want:



A more equal role in managing their own health and care



For frontline staff to reduce jargon and manage expectations



Improved health literacy for all



To review their own medical records before an appointment



To be made aware of specialist roles and services available to them



Delivering transformational change

- We are calling for “revolution not evolution”. Innovation allows people to find better solutions together.
- Transformation involves fundamentally thinking differently and then acting differently – not just a few initiatives on the side
- Improvement improves – innovation transforms.
- It involves everyone taking responsibility for change, driving innovation and supporting a wider learning environment where risks are managed and shared, and opportunities are explored and supported.
- We may not get it right in the first instance but we need to trust colleagues to have a go and to effectively manage that risk, not hide behind it.



Challenges in transforming thinking and practice: why is it so difficult ?

- Risk averse?
- Ideas?
- Permission?
- Priority?
- Incentives?
- Scope?
- Traditional Thinking?
- Treadmill?



“Insanity is doing the same thing
over and over again and expecting
different results ”

Albert Einstein



Any questions?

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