The role of Organisational Development in the NHS

A Do OD paper for discussion, debate, reflection and action
March 2018
Introduction

Welcome to this Do OD paper: a series intended to stimulate debate, discussion, reflection and action. Each paper focuses on an issue or theme pertinent to Organisational Development (OD) in the NHS of today and the future. The paper is authored by the Do OD Team in collaboration with members of our NHS OD community.

The purpose of OD in the NHS is to improve the quality of patient care. It is a big ask. The NHS faces unprecedented challenges and we need to ensure that OD can meet them. OD already makes a significant difference to the NHS, improving the performance and health of systems by strengthening the humanity of our organisations. OD enables people to flourish, thrive and have meaning in their work.

Our goal as Do OD is to support the healthcare system to enable people to transform systems. We want to continue to build our capability, magnify our voice and raise our ambition. We have a fantastic passion to deliver change in the NHS. As a community we continually strengthen our partnerships, capability and capacity.

It’s healthy to be challenged. We need to respond to the challenge of working more effectively with service improvement and transformation colleagues. We need to think creatively about how best OD can support new models of care in the NHS of the future.

It is the right time to delve further into all that we have learned and ask curious questions. The nature of change has changed. It is no longer an acute episode, but now a long-term condition. How we respond to and work with change is vital to the health, wellbeing and survival of our system. Our context is increasingly complex which will require us to practice in novel ways, foregrounding systems thinking and working.

This paper summaries our work so far and ends with an ask from you to contribute to the ongoing thinking about the future of OD in the NHS. We are grateful to everyone who has been part of these conversations and this work so far.

We hope you enjoy reading this paper and invite you to share your thoughts with us.

Paul Taylor-Pitt  
Assistant Director,  
Organisational Development  
NHS Employers

Karen Dumain  
National Organisational Development Lead  
NHS Leadership Academy
**OD in the NHS: building on strong foundations**

The NHS is constantly changing which means our context continuously shifts. We want to create new opportunities to keep making a difference. Practicing OD in the NHS is a privilege. Our work, when done well, has a direct impact on patient care. It is meaningful, valuable and provides the opportunity to work with dedicated people who come from a range of backgrounds and disciplines.

As OD practitioners, the NHS affords us three opportunities:

- The opportunity to make a real difference
- The opportunity to enable others
- The opportunity to work in a field we are passionate about.

As an OD community, we have the chance to shape our futures. Over the last twelve months we have been considering the role of OD in the NHS. It gives us the chance to pause, reflect and have dialogue about our work. We engaged with a wide range of colleagues across the NHS and generated a lot of discussion. At a time when OD is more vital than ever, it’s important to make space to critically think about our place in the NHS of the future.

Through this paper we seek to explore the space between our current practice and our future ambitions. Members of our OD community reflected on the current picture of OD in the NHS including our strengths and areas for improvement.

We seek to understand:

- How we can raise the currency of OD by adding extra value to the system
- What opportunities there are for us to build our influence
- How we can challenge ourselves to step up and take control of our destiny

As far back as 1974, a paper was written that said “The advantages of alleviating the behavioural problems of organisations are likely to become to beneficial that the OD function may equal or exceed the importance of traditional line operations such as finance and manufacturing”.

Almost half a century later, we are still working towards that goal. OD should not be seen as a stand-alone function; it should be seen as an integral part of every member of our workforce, complemented by practitioners with specialist expertise to guide and consult on the strategy. Our work in shaping this paper goes some way to understanding how to make this a reality.

Doing OD in the NHS

We asked NHS OD practitioners, “What is your purpose in your organisation?” The most common responses were:

- **Change**
- **Patients**
- **Enabler**
- **Diversity**
- **Growth**
- **Supporter**
- **People**
- **Strategic**
- **Disrupter**
- **Connector**
- **Improvement**
- **Innovating**

The practitioners described how they were often called on to undertake short-term ‘reparative’ work where problems had been identified. They were also often engaged in transactional activities which affected their capacity to engage at more strategic levels.

Perceptions from others in the system shape how OD is framed. We asked practitioners what the system thinks OD’s function is. The responses included:

- **Change**
- **Whatever**
- **Underground**
- **Culture**
- **Transformation**
- **Training**
- **Unknown**
- **Connectors**
- **Fixers**
- **Team builders**
- **Magic wands**

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**NHS Leadership Academy**

**NHS Employers**
Our strengths

Our work is both aspirational and practical. Practitioners in the NHS are ‘a well-qualified group with high-level thinking skills’. We bring hope into the system. Our work is person centred, supportive and makes a difference. We build bridges from now to the future, supporting new leadership styles and mindsets. We enable collective action which creates opportunity to align personal and organisational values. The humanistic values of our profession mean that we can be both nurturing and critical. We facilitate conversations across whole systems and work with power to improve healthcare delivery.

The practice of OD in the NHS is on a journey of development itself. We aspire to improve the connection between our work and patient outcomes. OD is valued when it is experienced, but we need to consider the balance between need and want. Whose needs are being met through our work in the system? Is our work strategically aligned and our practice is seen as an investment not a cost? Do OD’s ambition is for OD to contribute to the development and sustainability of the NHS, from individual through organisational to whole system.

Areas for development

Our review into OD practice also uncovered areas where we need to do some work. Our community felt uncomfortable that OD can be seen as light-weight. It is sometimes described as pink and fluffy; the magic pixie dust that is sprinkled over difficult situations. OD is often a backstage practice which can lead to our work being hidden. Sometimes OD is under-recognised and under-valued.

We are a small workforce and carry big workloads. This can lead to feelings of fear and anxiety that we aren’t making a big enough difference, or that we are chaotically juggling competing priorities. Although it is tempting to seek a homogenised one-size-fits-all approach, this could lead to us being robotic. One of the criticisms of OD is that our work is the ‘soft stuff’.
OD in the NHS of the future

What does the future look like? Our Do OD steering group recently undertook an exercise in future gazing where we identified a number of scenarios that are likely (probable), possible (predictable) and unexpected (wild card). This is a starting point for conversations which we hope will emerge from this paper.

While this brief intervention needs further discussion, we can already see some of the short and medium-term priorities that may shape our OD practice. The key question being, how much of our current and future work is in service of these priorities?

Our initial conversations on the role of OD in the future NHS revealed a number of themes. Our aspiration is for OD to be consistently strategic, agile and credible and impactful, practiced in different ways by the whole organisation and across systems.

1. Strategic OD

- OD supports the shared purpose of the NHS - patient care.
- Our work is a driver of strategic objectives and transformation.
- We are fully aligned to the needs of the business.
- OD is done in service of the performance and goals of the organisation.
- OD is embedded into the core of the organisation’s strategy.
- We are joined up across health and care systems and not just focused on separate organisations.

<table>
<thead>
<tr>
<th>Probable futures</th>
<th>Predictable futures</th>
<th>Wild card futures</th>
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<tbody>
<tr>
<td>Recruitment and retention continues to be a challenge</td>
<td>Exponential digitalisation</td>
<td>Flu jab is 100% effective. No more winter pressures.</td>
</tr>
<tr>
<td>Impact of Brexit</td>
<td>Impact of genomics reduces need for hospitals</td>
<td>Revolution in self management and autonomy for patients</td>
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<tr>
<td>Artificial Intelligence and Automation</td>
<td>Increasing use of technology in healthcare and self care</td>
<td>Corporatisation of health</td>
</tr>
<tr>
<td>Partnership working across organisations</td>
<td>Continued outsourcing of services</td>
<td>NHS interactive TV</td>
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2. Agile OD

- Our work is proactive and agile.
- We bring our technical expertise on change to a range of contexts.
- We operate in the front of house and shadow spaces of the system.
- Relationships are key to our work, offering high trust and high challenge.
- We are involved at all stages of change, recognising the finite and infinite games.
- We enable thoughtful action spaces, leading new ways of working in complex adaptive systems.

3. Credible OD

- OD is seen as a strategic partner that is valued and heard.
- We use our knowledge of the business and horizon scanning abilities.
- Our presence and position comes from our expertise in change.
- We simplify complexity while understanding that change across health and care is continuous and complex.
- Our work is evolutionary and integrated.

4. Impactful OD

- Our work is anchored in outcomes and makes a difference.
- We enable the system to learn from mistakes and connect to itself.
- The effectiveness of the NHS and its ability to deliver its goals is supported by OD.
- OD is known and seen as positive way to make change.
- OD is woven into the fabric of the organisation, not an add on or remote.
5. Inclusive OD

- We test and implement new models of OD where it takes place at all levels of the organisation and everyone can contribute to the development of the organisation.
- We demonstrate the core values of inclusion, diversity and participation in our work, expanding the range of voices in the conversation.
- OD is everyone’s business and people feel confident to contribute whether or not they have OD in their title.
- We all do it, without thinking about it. It’s a way of life for everyone.

Achieving our ambitions means that everyone from the CEO to the nurse on the ward will frequently say “I need my OD right now”. Everyone will play a part in OD.

What is the future vision of OD in the NHS?

Our Do OD community created an ambition statement for OD in the future:

We make positive change which all staff engage with to make services better for patients. Our work is integrated in the day to day business of our organisations. OD is systematic, innovative, proactive and enabling. We work across whole systems to support effective transformation. We are catalysts for change. Our practice is evidence based, inclusive and strategic.
Achieving our ambition

Moving from our already strong foundations towards a brighter future will take work, and we are certain that our NHS OD community has the ability to achieve its vision. We want to know how best we can work in service of that goal.

We invite you to give your thoughts on the following questions so that we can develop the conversation about the future of OD in the NHS. You can also visit our twelve big questions about the future of OD questionnaire.

1. How do we position OD as a go to resource for strategic and operational support for NHS leaders?
2. What’s our current alignment to CEOs and is it where we want it to be?
3. How do we change the perception that what we do is ‘soft’?
4. What is our strategy for alignment with other transformation functions?
5. How do we keep OD working in both our current context and improve it for the future?
6. How do we balance the conflicting nature of systems thinking in a climate of individual organisational scrutiny and accountability?
7. How do we confidently advocate OD values in a system that may not understand or appreciate them?
8. How can we better make use of OD in a preventative capacity?
9. How do we work within a culture of monitoring and inspection that may be counterintuitive to principles of change through conversation?
10. How do we as OD practitioners get ourselves ready for the future?
11. How do we get OD practices incorporated into daily thinking for everyone, every day?
12. How can we collaborate more effectively with our OD colleagues across health, social care and the third sector?

We will summarise and share the responses with the community, creating change through conversation. If you would like to be involved in shaping the future of OD in the NHS, please contact us and we will be in touch.
Contact us

This paper has been written by Do OD, the expert resource on organisational development delivered by NHS Employers in partnership with the NHS Leadership Academy.

Do OD enables people to transform systems. We support OD, HR, workforce colleagues and leaders to connect, share, learn and grow. Our work is driven by the strategic priorities of the NHS and shaped in collaboration with our OD Community. Do OD:

⚡ cultivates spaces to think and share ideas
⚡ invents tools and resources by and for the OD community
⚡ creates original thinking and content on the theory and practice of OD.

Our work can be found at www.nhsemployers.org/OD

Do OD is led by Paul Taylor-Pitt and Karen Dumain. We would like to thank everyone who has been part of the Role of OD inquiry so far.

Contact us by email
do.od@nhsemployers.org

or tweet @NHSE_DoOD

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