

Where

Excellence

Meets

Compassion



Manchester University  
NHS Foundation Trust



## Coming together as One MFT:

The importance of being a clinically-led Trust

Clinical Group Update and Vision  
Pack



## We are refreshing, evolving and improving how we work as one MFT to ensure our Trust is fit for the future and can deliver our mission of working together to improve the health and quality of life of our diverse communities.

- Our aim is to ensure the future stability of MFT to enable our staff to provide the best care we can, every day.
- The NHS is currently facing some of the most significant challenges in its history, and demand for our services at MFT is continuing to rise in the face of ongoing financial and operational pressures.
- A lot has changed since the creation of MFT in 2017. Our MFT Strategy sets out our long-term mission and we have been looking at how we can do things differently to deliver our strategy and meet the changing needs of our communities, patients and staff.



Through organisational change we are

•moving to a **standard operating model** for our Clinical Groups

Wherever possible we want to create consistency

With variation limited to where we are catering for genuine differences

•moving to a Trust-wide **clinically-led model**, working to strengthen clinical leadership and ensure there is a single point of accountability for our different Clinical Groups, Hospitals, Care Divisions and Clinical Departments

First and foremost, the **new model must work** – meaning it must be safe, sustainable and help tackle financial and operational challenges.



# Our journey so far

We are looking closely at the effectiveness of our ways of working to ensure that we can respond to the challenges and opportunities that we face. To ensure stability as we undertake organisational change, we are taking a **measured and sequential approach** to reviewing and refreshing our operating model. To move to a new clinical leadership model safely and sustainably we are working through the following:

- 1. Clinical Groups** – Through engagement and consultation the leadership arrangements for our Hospitals, Manged Clinical Services, and Local Care Organisations were reviewed and six new Clinical Groups were introduced on 30 September 2024, each with their own dedicated Senior Leadership Teams (SLT).
  - As part of this new model, a new Accountability Framework was embedded and the Chief Executives for each Clinical Group also joined our Trust Executive Directors as members of a newly established Trust Leadership Team, which enhances collaboration, unified decision making and ensures that we are prioritising the needs of our patients and the communities we serve.
- 2. Corporate Services** – The review of our Corporate Services followed, to ensure these important functions can support the effective running of our organisation and enable us to provide the best care possible across or Clinical Groups.
  - The review included both central corporate functions and those teams and individuals embedded in Clinical Groups.
  - Following consultation, the new model for corporate services and changes across teams were introduced.
- 3. Clinical Leadership** – With the new Clinical Group SLTs in place they then looked at their leadership structures to ensure that we can strengthen clinical leadership within our operating model, aiming to bring consistency, clarity and equity to our Clinical Groups.
  - Consultation on proposals for the new model ended on 26 May and outcomes were shared with affected staff on 19 June.
  - Many colleagues within Clinical Groups will be undertaking Assessment and Selection processes in advance of new leadership teams being confirmed – this process will be taking place over the summer.
  - The final structures will be implemented this autumn and all colleagues affected will be engaged in the lead up to this change.



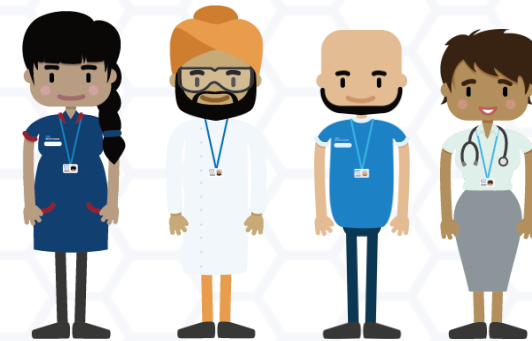
# Why become a fully clinically-led Trust?

**Strengthening clinical leadership and embedding a Trust wide clinically-led model represents a significant and necessary transformation for MFT.**

By placing those closest to patient care at the heart of decision-making, we can ensure better care for patients, stronger teams, and greater collaboration across the Trust. A strong focus on clinical leadership ensures our strategic direction is informed by clinical expertise whilst balancing the essential operational, financial, and governance structures needed to run safe successful hospitals and services.

As a clinically-led Trust we want to

- improve patient outcomes through clinically informed and accountable leadership
- reduce complexity to enable faster decision making
- create a structure where operational expertise and integrity is upheld
- provide more inclusive leadership opportunities across clinical professions
- ensure greater alignment with the NHS long-term goals for patient-centric care
- deliver on our strategic aims and objectives, ensuring we continue our strong work, in partnership, to improve care for our patients and in the communities we serve.



The NHS Long Term Plan emphasises the importance of strong clinical leadership to enable and assure the delivery of high-quality care; our work to strengthen our clinical leadership model ensures we align with this objective.

**A successful clinical leadership model relies on a collaborative effort between clinical leaders, other key roles within the structure, and our partners - each contributing expertise to enhance patient and community care, operational efficiency, and long-term success.**



# A new operating model for our Clinical Groups

By implementing a **consistent clinically-led operating model**, with **clear accountability**, across our Clinical Groups we can respond to the challenges and opportunities that we face, whilst meeting the changing needs of our communities, patients and staff.

We have sought to retain the elements of our current operating model which work well, whilst looking for opportunities to improve our model and leadership structures to be better placed to deliver high quality care.

The key changes to our operating model can be categorised into three themes and the following slides provide details of what these changes mean in practice:

1

Organising our services within a well-defined organisational structure with a consistent approach to combining services into **Care Divisions** and **Clinical Services**

2

Further **strengthening and embedding clinical leadership** through the implementation of a Trust-wide clinical leadership model

3

Delivering a **consistent approach to leadership roles** across MFT underpinned by clear roles and responsibilities.

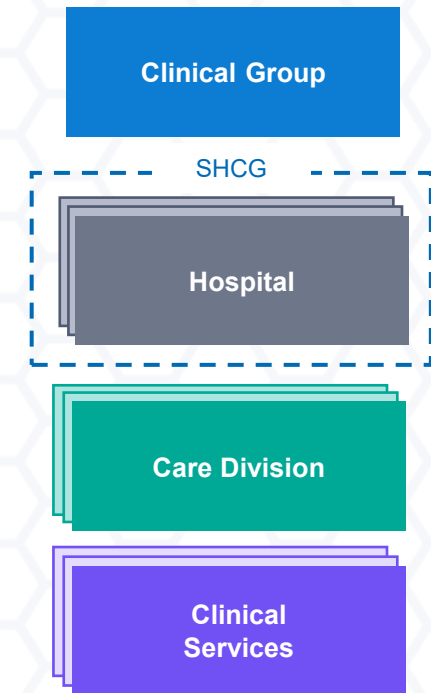


# What the new model will look like

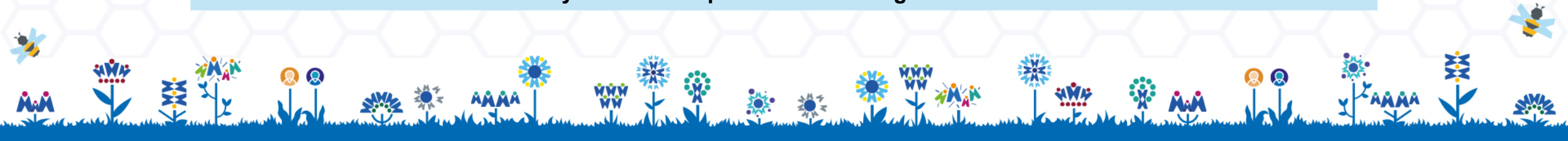
## A well-defined organisational structure

We want to reduce complexity and minimise the layers in our operating model – helping us to be more agile, with faster decision making. The new model reflects how patients most often access our services revealing opportunities to improve how they access and use these services.

- Clinical Groups will be organised into ‘**Care Divisions**’ and ‘**Clinical Services**’.
- ‘**Care Divisions**’ are large groupings of services; The number of proposed Care Divisions will depend on the size of each Clinical Group.
- Each Care Division is comprised of a number of ‘**Clinical Services**’. Clinical Services are single large service lines, or clusters of smaller interdependent service lines.
- Specialist Hospitals Clinical Group (SHCG) is also organised into ‘**Hospitals**’, to retain distinct leadership teams around our specialist hospitals.
- Care Divisions and Clinical Services will have differences across Clinical Groups, reflecting their unique set of services.



**If your current service/department is set to change in how it is grouped or named this will be shared with you directly as leadership teams and changes are finalised.**



## What the new model will look like

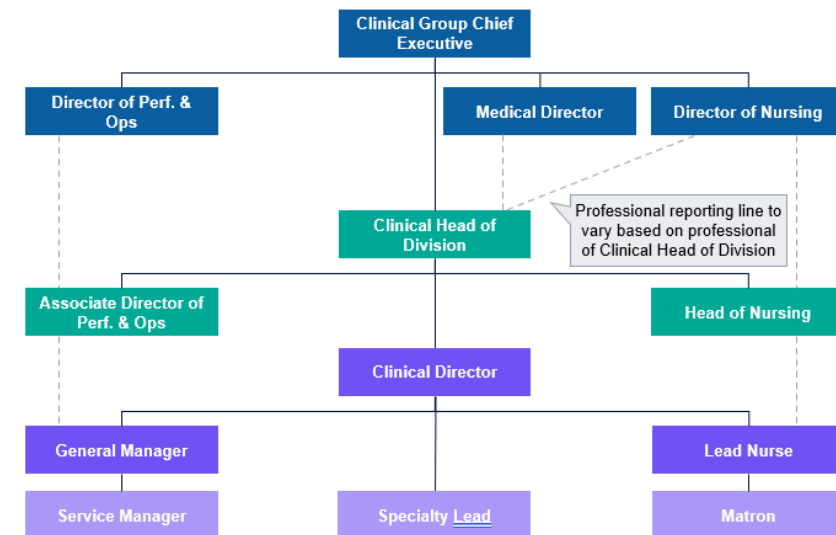
### Embedding clinical leadership through a Trust-wide clinically led model and Delivering a consistent approach to leadership roles

In the new model a lead clinician for each Care Division and Clinical Service will have ultimate accountability for all aspects of the service.

- This means that the leaderships teams for your areas may look slightly different to what you currently have, in some cases.
- Clinical leadership teams will, in general, be structured as a triumvirate, but in some cases, leadership teams may be made up of two or four people.
- Some of the new role titles you may see include the following:
  - For Care Divisions the clinical lead will be called the **Clinical Head of Division**
  - For Clinical Services this role will be called the **Clinical Director**
  - In the case of Specialist Hospitals Clinical Group, at the Hospital level this role will be called the **Hospital Medical Director**.

Where possible a **consistent set of roles**, will be underpinned by **standard job descriptions** and **job titles**.

### Example of triumvirate leadership

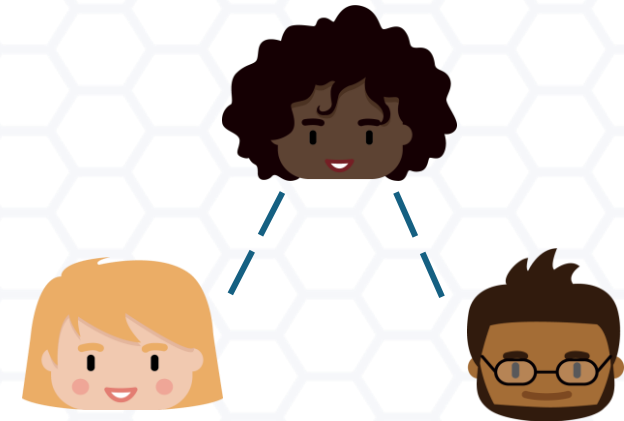


# What does a clinically-led team look like

A successful clinical leadership team relies on collaboration and balances clinical expertise, leadership, and operational efficiency to drive high-quality patient care.

- A clinically-led structure includes a **clinical lead** as the single point of accountability. They bring important clinical experience and expertise to the role.
  - This single point helps to reduce complexity and improve decision-making whilst a clinical lead brings important clinical experience and expertise to the role.
- Although ultimately accountable, the clinical lead does not lead alone. The leadership team is enhanced and empowered by other key individuals.
- Your clinically-led leadership team will often be structured as a triumvirate – three leadership roles (but sometimes two or four depending on a service or departments need) who work collaboratively ensure a hospital, service or department runs safely and efficiently.
- These additional leadership roles will often include other clinicians such as MNAHP or specialist roles, and operational and performance leads.
- A clinically-led model provides strong career development opportunities with structured leadership roles to progress to and invaluable strategic experience.

The clinical lead is ultimately accountable – bringing patient-centred experience to decision making whilst working closely with their leadership colleagues.



The wider leadership team continue to lead and deliver in their areas bringing their knowledge and expertise to the clinically-led team



# Organisational Development and Support

As we transition to the new operating model, it is important that we strengthen the professional development offer we already have and ensure we support all staff through change.

To enable colleagues to manage any potential change for themselves and their teams, the Workforce Organisational Development (OD) Team have designed and developed a **bespoke OD support** offer for the implementation of a Clinical Leadership Model.

The OD support offer has been developed into a comprehensive, interactive brochure outlining the full suite of support available. There are various development resources to manage change, enhance skills, and transition smoothly.

- You can access the brochure [here](#)

Key objectives of this support offer are to develop not only strong leaders but build strong teams who work with trust and collaboration for the good of their service, staff and patients.

To the right, you can see a high-level overview of the OD support available to all staff.

## MFT Colleagues Navigating Change



- Compassionate Leadership.
- Developing Psychological Safety in Teams.
- Themed listening events.
- How to be Change Ready.
- Leading through Change.
- Change Portal.
- Job Application & Interview Skills.
- Management & Leadership Portal.
- Management Brilliance: A self-assessment.
- Healthcare Leadership Model: A self-Assessment.
- Management Brilliance: A self-assessment.
- NorthWest Leadership Academy.



# Support available

We understand that change can be unsettling. Please take time to read through the consultation papers and keep connected with your Line Managers for support. In addition, you also have access to the following:

## Health and wellbeing resources:

A comprehensive wellbeing pack for staff who are experiencing change which covers MFT support services, programmes and resources as well as external, regional and national support offers. Find it [here](#), it is also appended to the consultation pack.

Our [Employee Health and Wellbeing \(EHW\) service](#) is here to support your physical and mental wellbeing, and includes a range of support:

- Dedicated [psychological wellbeing and mental health](#) support
- A selection of [training and education courses](#) to help improve knowledge of mental health and wellbeing related issues
- You can contact EHW on [ehw@mft.nhs.uk](mailto:ehw@mft.nhs.uk) or 0161 276 4289.

## General guidance:

**Staff Side** – the dedicated [Staff Side pages](#) on People Place provide help and support from your local trade union representatives. For general information please contact the Staff Side Office on x66400 / 0161 276 6400

**Employee Assistance Programme (EAP)** – You can call MFT’s EAP team 24/7 on 0800 028 2047 or access support through [People Place](#).

**Freedom to Speak Up** – Contact the FTSU team on [ftsuguardian@mft.nhs.uk](mailto:ftsuguardian@mft.nhs.uk) if you need to raise or escalate a concern.

## Change and development resources:

Our dedicated Change Portal has been created to support you and your team during periods of change. You will find many resources such as guidance, information, bite sized learning and videos to support you with your personal and professional journey during times of change.

There are also dedicated resources for you as a team leader or manager. Click [here](#) to access the portal now or [here](#) to visit the intranet page.

Dedicated line managers tools can be found here too:

[MFT Leadership and Management Academy](#)

[Management Brilliance Self-Assessment](#)

