Political context:
More stable than it has been but still volatile, with pressure on public finance and the cost of living crisis. The NHS (and calls for reform) remain central for all parties as we head into a general election.

Strategic change:
On the back of the 2022 Act, trust leaders continue to help embed system working, provider collaboratives and new place based arrangements to integrate care.

Operational pressures:
With demand rising, staff and patients have had to contend with long waiting times, and a shift in the levels of risk in the system across acute, ambulance, mental health and community services.

Pressures on staff:
Facing significant demands and years of below inflation pay, many NHS staff have felt compelled to take unprecedented industrial action.
The opportunities are clear

- **Workforce**
  - Long-term workforce planning can put the NHS on a more sustainable footing: real investment in wellbeing and retention, as well as recruitment and training, can support improvements in service delivery.

- **Quality improvement**
  - Can deliver sustained improvements in the quality, experience, productivity and outcomes of care, as well as in the lives of the people working in health care.

- **Provider collaboratives**
  - Can address unwarranted variation, bolstering service resilience, tackling health inequalities, and developing new ways of working with other local partners.

- **Prevention and population health**
  - Trusts can prevent the worsening of an existing condition, lessen the impact of a serious illness, and connect people with primary preventative services.

- **Health inequalities**
  - Health inequalities lead to poorer life expectancy, poorer healthy life expectancy, and higher prevalence of long-term conditions and mental ill health.

- **Race equality**
  - Racism adversely affects patient experiences and outcomes, including mortality rates. Workforce diversity and an inclusive culture increases innovation, profitability, and productivity.
Boards and directors under pressure

Risk

- Prioritisation problematic
- Tried and tested improvement methods/oversight difficult
- Breach of licence?
- Financial challenges

Inexpert: Unprecedented challenge

Moral injury

- Wary of increasing demands on exhausted workforce
- ‘Accepting’ the unacceptable
- Hard to see improvement

Leadership bandwidth

- Too many plans and central asks
- Representation at system/partnership fora
- Time to provide/seek assurance?
- Hard to make time for strategy, innovation, board development

Control and probity

- ICBs still forming – role, responsibilities, focus not always clear
- Conflicts of interest
- Delegations

Capacity stretched
Reflections and insights

The continuing and enduring importance of board effectiveness in provider organisations

The importance of boards connecting with the wider organisation

The role of provider boards in the context of place, provider collaboratives and ICBs

The importance of creating time for board development and strategy discussions

A greater focus on quality improvement at board level