



**Blood and Transplant**

# Board of Directors Skills and Capability Framework

April 2025

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# Introduction

Being an NHS Blood and Transplant (NHSBT) Board member means holding an extremely demanding yet rewarding leadership responsibility. NHSBT board members have both an individual and collective role in shaping the vision, strategy and culture of the organisation.

The Board of NHSBT is comprised of:

- The Chair and Non-Executive Directors (NEDs) appointed by the Department of Health and Social Care (DHSC)
- The Chief Executive appointed by the NHSBT Chair and Non-Executive Directors
- Executive Directors with voting rights, appointed by the Chief Executive or their delegate
- Executive Directors without voting rights, appointed by the Chief Executive or their delegate

The NHSBT Chair and NEDs are selected for the skills, experience and capabilities that they have developed from their professional and personal activities. DHSC have assessed them as being fit and capable to undertake their respective roles on appointment. Once appointed there are opportunities to expand their knowledge in relation to the breadth of activity undertaken within NHSBT.

Executive Directors are appointed for specific skills, experience and capabilities relevant to the area of accountability they will hold. It is not expected that Executive Directors will be experts across all capabilities identified as being relevant to NHSBT, however as a collective the range of capabilities should be covered sufficiently.

As NEDs have different roles and responsibilities to those of Executive Directors, and there are differences between Executive Director roles, this Framework supports the assessment of board members in their role as part of a unitary board. The elements of the Framework when assessed should take account of any specific role related responsibilities and nuances.

# Framework Elements

The Board of Directors Skills and Capability Framework (the Framework) has been developed to guide the Board as to the skills, knowledge, experience, personal attributes and diversity that NHSBT would collectively look to achieve in its Board membership.

The Framework comprises of the following elements:

## NHSBT Capabilities

Twenty-two capabilities have been identified as relevant to NHSBT. Twenty are considered 'tier one' being those that are important for the Board collectively to hold. These sit within the following five categories:

Clinical and Quality	<p><b>Quality Safety and Regulation</b> - Critical analysis and interpretation of data to facilitate continuous evidence-based quality improvement. Exposure to quality and safety processes in the health context. Ability to interpret and apply legislation relevant to health and administrative law.</p> <p><b>Clinical Governance</b> - Application, design and evaluation of clinical governance systems to ensure the provision of safe clinical care and drive continuous improvement of patient outcomes. Compliance with health regulations and laws.</p> <p><b>Blood, Organ and/or Stem Cells</b> - Design, implementation and oversight of, or significant experience and detailed knowledge from operating within, services for blood supply, organ and tissue donation and transplantation, and/or stem cell transplantation and cellular therapies.</p>
Governance, Finance, Risk Management & Strategy	<p><b>Corporate Governance and Internal Audit</b> - Design, monitoring and implementation of corporate governance to ensure the authority complies with statutory duties, laws and regulations, with clear separation of governance and management. Strong understanding of the framework of rules, relationships, systems and processes within and by which authority is exercised and controlled.</p> <p><b>Financial Performance/Commercial Acumen</b> - Financial strategy and oversight, financial management and internal control systems Governance of finances to accomplish the objectives of an organisation, including analysing statements, assessing financial viability, overseeing financial planning and funding arrangements. Financial oversight, budgetary planning, financial reporting including the external audit process.</p> <p><b>Strategy Development and Implementation</b> - Development and implementation of long-term vision. Identification and assessment of strategic opportunities and threats to an organisation and design, monitoring and delivery of objectives and strategies for such. Delivery of transformational programmes and improvements in efficiency and effectiveness. Dealing with risks to delivery of the strategy.</p>

	<p><b>Innovation/Continuous Improvement/Value for Money</b> - Leading on the development, planning and delivery of projects to enhance existing processes.</p> <p><b>Risk Management and Assurance Framework</b> - Identification, assessment and response to strategic, financial, operational and reputational risks so as to mitigate their impact or maximise the realisation of opportunities. Application of risk management including development of risk appetite/tolerances and processes for escalation of risks through the organisation for action. Evaluation of the effectiveness of risk management.</p>
Commercial (including Sustainability)	<p><b>Supply Chain Management</b> - Oversight of operations related to the flow and availability of goods throughout the supply chain.</p> <p><b>Logistics</b> - Delivery of effective and innovative logistics solutions that meet commercial needs and minimise costs for the organisation and customers. Stakeholder management.</p> <p><b>Manufacturing</b> - Oversight of production processes ensuring efficiency, quality, and compliance with regulatory standards.</p> <p><b>Procurement/Contract Management</b> - Design and implementation of frameworks for procurement, tendering, awarding contracts and contract management. Delivery of solutions that meet commercial needs and priorities and maximise value for money. Aligning market knowledge with current/future organisational needs to deliver results. Stakeholder management.</p> <p><b>Sustainability</b> - Assessing, designing and implementing strategies and actions to reduce adverse environmental and social impacts resulting from operations. Demonstrating improvements in environmental sustainability, including carbon footprint and other emissions, waste, and climate resilience.</p>
Data, Digital and Technology	<p><b>Digital Strategy and Governance/Technology</b> - Managing information and communications technology. Effective oversight, development, rollout and maintenance of digital, data and technology strategies. Technical experience in relation to the design and delivery of related projects. Understanding of privacy legislation.</p> <p><b>Emergency Planning and Resilience</b> - Ability and knowledge of information security and resilience management. Experienced planning and testing of procedures for responding to incidents to protect the organisation and its stakeholders, liaising with appropriate officials.</p> <p><b>Cyber Security</b> - Expertise in identifying and ensuring the security of IT Applications/ Digital Solutions. Effective oversight, development, rollout and maintenance of security infrastructure.</p>
People, Culture & Engagement	<p><b>Workforce and Organisational Development</b> - Leading programmes for recruitment, retention and development of people. Managing industrial relations, and overseeing and embedding organisational and cultural change. Ensuring compliance with employment and labour laws.</p>

	<p><b>Stakeholder Engagement/Partnership Working</b> - Effective delivery of key elements of communications and stakeholder engagement. Balancing the needs and priorities of the organisation with the requirements of stakeholders.</p> <p><b>Equality, Diversity and Inclusion</b> - Advocate for creating an organisation which has equity and “felt fairness” at its heart and understands and demonstrates the key principles of inclusion.</p> <p><b>Patient Experience and Consumer Engagement</b> - Leading design, implementation and management of strategies that enhance customer (donor) satisfaction and loyalty. Leading programmes of engagement to develop and enhance loyalty to the organisation to give stakeholders a voice with an aim of improving experience.</p>
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It is not expected that all Board members will be expert or proficient in all twenty capabilities, however there should ideally be at least two Executive Directors and at least one Non-Executive Director with this level of skill and experience across the ‘tier one’ capabilities, to ensure sufficient detailed understanding and challenge. A basic/competent level of skill and experience is sufficient for other Board members, such that they can understand general principles and more generally challenge proposals and performance.

Additional ‘tier two’ capabilities have also been identified which are desirable and may be prioritised by the Board based on its strategic focus. These relate to:

<b>Estates and Infrastructure</b>	Development and implementation of an Estates Strategy to actively manage associated risks, and ensure compliance with laws and regulations. Experience in relation to the construction, relocation and maintenance of property estates and facilities management.
<b>Research and Development</b>	Experience in leading programmes of innovative activities (often across a range of partners) to improve existing services or to develop and introduce new products leading to the improvement in outcomes.

All Board and Board Committee members will be asked to self-evaluate their level of expertise using the following ratings:

Expert Knowledge	Post-graduate related qualification or degree level related qualification with extensive experience. Professional registration in related field. 10+ years of experience succeeding in field. Current or past roles within this field. Peers would consider you an expert in field.
Proficient Knowledge	May hold qualification or professional registrations related to field. 5+ years of experience succeeding in field. Current or past management role in field. Peers would consider you highly knowledgeable and proficient.
Competent/Basic Knowledge	Not your specific area of expertise however you have sufficient knowledge and experience to add value in discussions on the subject. Able to understand and interpret reports and ask relevant questions to constructively challenge and support.
Little/No Knowledge	This is an area in which you have limited knowledge. To add value to discussions you would benefit from a greater level of subject awareness.

## General Skills, Attributes and Qualities

NHSBT has identified a number of core skills, behavioural attributes and qualities that are generally considered desirable to be an effective Board director. These are:

Strategic Thinking and Decision Making	Understands strategic plans and vision and rationally analyses and navigates flexibly through critical situations, envisioning long-term goals, and challenging plans to achieve those goals with an agile and dynamic mindset.
Constructive Challenge	Asks penetrating questions in an effort to clarify positions or reveal gaps in understanding of an issue with a purpose of providing scrutiny, testing an idea, or assuring decision making.
Financial and numeracy skills	Understands financial statements and data and is able to analyse financial data to form conclusions and make decisions.
Leadership	Strong leadership skills including the ability to effectively represent the organisation, influence Board and organisational culture, and take responsibility for decisions and actions.
Collaboration	Commitment to teamwork, collaboration and integrative diversity to strengthen organisational capacity.
Influencing and Negotiating	The ability to negotiate outcomes and influence others to agree with common organisational goals and objectives, including the ability to engage stakeholder to gain input and support for Board decisions.
Independent Judgement and Integrity	A common-sense approach. Whilst listening to other views is able to provide independent opinions and make independent decisions. A commitment to integrity and high ethical standards, particularly related to: <ul style="list-style-type: none"> <li>- Discharging the duties and responsibilities of a director and maintaining knowledge and competency in this area through professional development.</li> <li>- Being transparent and declaring any activities, interests and/or conduct that might be a potential conflict.</li> <li>- Maintaining Board confidentiality.</li> </ul>
Communication	Ability to actively listen. Ability to constructively and appropriately debate other people's viewpoints and develop and deliver measured, cogent arguments. Demonstrates strong verbal communication skills.
Interpersonal Skills	Ability to develop and maintain strong interpersonal relations, supported by high emotional and cultural awareness.
Commitment to Role	Commitment and capacity to devote time and energy to the role of NHSBTdirector.

All Board and Board Committee members will be asked to self-evaluate the level to which they demonstrate these skills, attributes and qualities using the following ratings:

Demonstrates Consistently	I regularly and consistently demonstrate the stated skill/personal attribute/quality and my peers would recognise me as someone with this personal attribute.
Demonstrates Variably	At times I demonstrate the stated skill/personal attribute/quality, but not always, and my peers would recognise me as someone who can have the personal attribute.
Not Demonstrated	I don't demonstrate the stated skill/personal attribute/quality and my peers would not recognise me as someone with this personal attribute.

Ideally, all Board members would consistently demonstrate the skills, attributes and qualities. Where this is not the case, they can consider opportunities to increase this.

## NHS Leadership Competency Domains

In 2019, the Tom Kark KC review of the fit and proper person test was published. This included a recommendation for 'the design of a set of specific core elements of competence, which all directors should be able to meet and against which they can be assessed'. The NHS Leadership Competency Domains responds to that recommendation and forms part of the NHS England Fit and Proper Person Test Framework for board members (FPPT). The six competency domains in the NHS Leadership Competency Framework seek to support board members to perform at their best and deliver better health and care for patients (and in NHSBT's case also for donors) by setting the tone for their organisation, team culture and performance.

The six leadership competency domains are:

Driving high-quality and sustainable outcomes	The skills, knowledge and behaviours needed to deliver and bring about high quality and safe care and lasting change and improvement – from ensuring all staff are trained and well led, to fostering improvement and innovation which leads to better health and care outcomes.
Setting strategy and delivering long-term transformation	The skills that need to be employed in strategy development and planning, and ensuring a system wide view, along with using intelligence from quality, performance, finance and workforce measures to feed into strategy development.
Promoting equality and inclusion, and reducing health and workforce inequalities	The importance of continually reviewing plans and strategies to ensure their delivery leads to improved services and outcomes for all communities, narrows health and workforce inequalities, and promotes inclusion.
Providing robust governance and assurance	The system of leadership accountability and the behaviours, values and standards that underpin our work as leaders. This domain also covers the principles of evaluation, the significance of evidence and assurance in decision making and ensuring patient safety, and the vital importance of collaboration on the board to drive delivery and improvement.
Creating a compassionate, just and positive culture	The skills and behaviours needed to develop great team and organisation cultures. This includes ensuring all staff and service users are listened to and heard, being respectful and challenging inappropriate behaviours.
Building a trusted relationship with partners and communities	The need to collaborate, consult and co-produce with colleagues in neighbouring teams, providers and systems, people using services, our communities, and our workforce. Strengthening relationships and developing collaborative behaviours are key to the integrated care environment.

People taking on first-time director roles may be unable to demonstrate all the competency examples. However, over time, directors can measure themselves and develop proficiency in all areas. Where development areas are identified, commitment to working on these will be important. The responsibilities and nuances of different director roles should be considered particularly as the role of Executive and Non-Executive Directors vary.



The competency domains reflect the NHS values and are also aligned to Our NHS People Promise, Our Leadership Way and the Seven Principles of Public Life (Nolan Principles).

All Board and Board Committee members will be asked to self-evaluate their level of competence using the scoring guide in Appendix 1.

## **Diversity**

The Board as a whole should ideally encompass diversity to ensure that a range of views and opinions can be brought to discussions. All Board and Committee members will be invited to share personal information in relation to ethnicity, gender, age, disability, religious beliefs and sexual orientation in order to monitor diversity and highlight any gaps that may need to be filled through future appointments, or engagement with networks.

## **Using the Board Director Skills Framework**

The framework has a number of purposes:

- The Board is able to evidence that annually it assesses its skills and capability needs and diversity. The assessment will provide a view of the strengths and gaps across the Board.
- The Board can assess the capability and experience level of its committees, identifying if there are any missing skills or additional skills that are critical to the functioning of the committee. Gaps can be filled by knowledge development or committee appointments, including consideration of appointing specific expertise of an independent member.
- Board members have the ability to self-evaluate their skills and capability and identify areas of knowledge development for the future, that may enhance their effectiveness, and that of the Board collectively. The results of self-evaluations can be discussed in appraisal sessions and be reflected in personal development plans.
- The skills assessments allow informed discussions and coaching related to development needs in appraisal sessions.
- The annual assessment helps to identify subject matter that would be beneficial for the Board as a whole to build their knowledge on. Sessions can be included in the Board Knowledge Development Plan as appropriate.
- NED appointments are made by DHSC. The annual skills and capability assessment report will identify any roles with a term of office expiring in the near future in order that the Chair may discuss such roles with DHSC and share a view of the strengths and gaps within the Board.

## **Annual Skills and Capability Assessment**

### **Self-Assessment**

On an annual basis all Board and Board Committee members will be asked to complete a self-assessment to confirm the Framework competencies, skills, attributes and qualities that they believe they possess.

Where Board members have previously sent a return they will be provided with the prior year's self-assessment in order that they can limit their response to highlighting any changes since the last assessment, and completion of any new elements.

Any new Board members joining during the year will be asked to complete a self-assessment shortly after joining.

## **Verification**

In order to ensure, so far as possible, a consistent approach to self-evaluation, definitions have been provided, where required, for ratings.

Once complete, the Chair and Company Secretary review the results of the self-assessment and will discuss with Board and Board Committee members any instances where they believe an assessment may be over or under inflated. In undertaking this review consideration will be given to the qualifications attained, prior and current roles held, and the performance of the Board member in their NHSBT Board role. In the case of Executive Directors any variance in perceived rating would be discussed with the Chief Executive/Deputy Chief Executive as appropriate.

In addition, Board or Board Committee members are offered the opportunity to discuss their self-assessment and be supported in completing the return.

## **Reporting and Knowledge Development**

The results of the self-evaluations will be recorded in a matrix to provide a view of the collective skills and capabilities of the Board, and its committees. While the Chair, Company Secretary and Learning and Development leads will have sight of the results for each individual, publication of the matrices within meeting papers will be in an anonymised form.

On an annual basis the Board and its committees will receive a report setting out the findings and raising any succession planning matters that should be considered.

The Board and Board Committees will consider the report and findings of the self-evaluations and determine any action required to address gaps for the Board or committees. This could take the form of:

- Site visits
- Board seminar sessions (internally or externally facilitated)
- NED specific sessions
- 1-2-1 sessions between NEDs and Executive Directors/directorates/networks
- In meeting knowledge builds
- Induction sessions and induction information
- Provision of key information for Board members
- Self-driven activity

A Board Knowledge Development Plan will capture group activities arranged for the Board.

Individual Board and Board Committee members should consider areas of personal knowledge growth and skills development and discuss these through the appraisal/PDPR process. Appraisal forms and Personal Development Plans will record any agreed development.

In addition to the above the Executive Team participate in a development programme organised by the Learning and Development team within the People directorate.

# Skills and Capability Framework Review

This Framework together with the capabilities, general skills, attributes and qualities will be reviewed annually to ensure that they remain aligned with NHSBT's strategic direction.

## Version Control and RACI view

Version	Owner	Approved by and basis of changes	Approved Date	Effective Date	Date of Next Review
1	Company Secretary	Initial version of Framework approved by Board	25/07/2023	25/07/2023	March 2025
2	Company Secretary	Conversion to new format to simplify assessment. Takes on board feedback from GIAA FPPR internal audit and BDO Board Effectiveness Review	01/04/2025 <i>Tbc</i>	01/04/2025	April 2026
(R) Responsible	Company Secretary				
(A) Accountable	Chairman				
(C) Consultees	People Directorate				
(I) Informed	All Board members and People Directorate (L&D)				

# Appendix 1: NHS Leadership Competency Domains Assessment

Domain 1: Driving high quality, sustainable outcomes						
	Competencies	Almost always	Frequently	Occasionally	Rarely or never	No chance to demonstrate
1	I contribute as a leader:					
1a	to ensure that my organisation delivers the best possible care for patients					
1b	to ensure that my organisation creates the culture, capability and approach for continuous improvement, applied systematically across the organisation					
2	I assess and understand:					
2a	the performance of my organisation and ensure that, where required, actions are taken to improve					
2b	the importance of efficient use of limited resources and seek to maximise: i. productivity and value for money ii. delivery of high quality and safe services at population level					
2c	the need for a balanced and evidence-based approach in the context of the board’s risk appetite when considering innovative solutions and improvements					
3	I recognise and champion the importance of:					
3a	attracting, developing and retaining an excellent and motivated workforce					
3b	building diverse talent pipelines and ensuring appropriate succession plans are in place for critical roles					
3c	retaining staff with key skills and experience in the NHS, supporting flexible working options as appropriate					
4	I personally:					
4a	seek out and act on performance feedback and review, and continually build my own skills and capability					
4b	model behaviours that demonstrate my willingness to learn and improve, including undertaking relevant training					

Domain 2: Setting strategy and delivering long term transformation						
	Competencies	Almost always	Frequently	Occasionally	Rarely or never	No chance to demonstrate
1	I contribute as a leader to:					
1a	the development of strategy that meets the needs of patients and communities, as well as statutory duties, national and local system priorities					
1b	ensure there is a long-term strategic focus while delivering short-term objectives					
1c	ensure that our strategies are informed by the political, economic, social and technological environment in which the organisation operates					
1d	ensure effective prioritisation within the resources available when setting strategy and help others to do the same					
2	I assess and understand:					
2a	the importance of continually understanding the impact of the delivery of strategic plans, including through quality and inequalities impact assessments					
2b	the need to include evaluation and monitoring arrangements for key financial, quality and performance indicators as part of developing strategy					
2c	clinical best practice, regulation, legislation, national and local priorities, risk and financial implications when developing strategies and delivery plans					
3	I recognise and champion the importance of long-term transformation that:					
3a	benefits the whole system					
3b	promotes workforce reform					
3c	incorporates the adoption of proven improvement and safety approaches					
3d	takes data and digital innovation and other technology developments into account					
4	I personally:					
4a	listen with care to the views of the public, staff and people who use services, and support the organisation to develop the appropriate engagement skills to do the same					
4b	seek out and use new insights on current and future trends and use evidence, research and innovation to help inform strategies					

Domain 3: Promoting equality and inclusion, and reducing health inequalities						
	Competencies	Almost always	Frequently	Occasionally	Rarely or never	No chance to demonstrate
1	I contribute as a leader to:					
1a	improve population health outcomes and reduce health inequalities by improving access, experience and the quality of care					
1b	ensure that resource deployment takes account of the need to improve equity of health outcomes with measurable impact and identifiable outcomes					
1c	reduce workforce inequalities and promote inclusive and compassionate leadership across all staff groups					
2	I assess and understand:					
2a	the need to work in partnership with other boards and organisations across the system to improve population health and reduce health inequalities (linked to Domain 6)					
3	I recognise and champion:					
3a	the need for the board to consider population health risks as well as organisational and system risks					
4	I personally:					
4a	demonstrate social and cultural awareness and work professionally and thoughtfully with people from all backgrounds					
4b	encourage challenge to the way I lead and use this to continually improve my approaches to equality, diversity and inclusion and reducing health and workforce inequalities					

Domain 4: Providing robust governance and assurance						
	Competencies	Almost always	Frequently	Occasionally	Rarely or never	No chance to demonstrate
1	I contribute as a leader by:					
1a	working collaboratively on the implementation of agreed strategies					
1b	participating in robust and respectful debate and constructive challenge to other board members					
1c	being bound by collective decisions based on objective evaluation of research, evidence, risks and options					
1d	contributing to effective governance and risk management arrangements					
1e	contributing to evaluation and development of board effectiveness					
2	I understand board member responsibilities and my individual contribution in relation to:					
2a	financial performance					
2b	establishing and maintaining arrangements to meet statutory duties, national and local system priorities					
2c	delivery of high quality and safe care					
2d	continuous, measurable improvement					
3	I assess and understand:					
3a	the level and quality of assurance from the board’s committees and other sources					
3b	where I need to challenge other board members to provide evidence and assurance on risks and how they impact decision making					
3c	how to proactively monitor my organisation’s risks through the use of the Board Assurance Framework, the risk management strategy and risk appetite statements					
3d	the use of intelligence/data from a variety of sources to recognise & identify early warning signals and risks					
4	I recognise and champion:					
4a	the need to triangulate observations from direct engagement with staff, patients and service users, and engagement with stakeholders					
4b	working across systems, particularly in responding to patient safety incidents, and an understanding of how this links with continuous quality improvement					
5	I personally:					
5a	understand the individual and collective strengths of the board, and I use my personal and professional knowledge and experience to contribute at the board and support others to do the same					

Domain 5: Creating a compassionate, just and positive culture						
	Competencies	Almost always	Frequently	Occasionally	Rarely or never	No chance to demonstrate
1	I contribute as a leader:					
1a	to develop a supportive, just and positive culture across the organisation (and system) to enable all staff to work effectively for the benefit of patients, communities and colleagues					
1b	to ensure that all staff can take ownership of their work and contribute to meaningful decision making and improvement					
1c	to improve staff engagement, experience and wellbeing in line with our NHS People Promise					
1d	to ensure there is a safe culture of speaking up for our workforce					
2	I assess and understand:					
2a	my role in leading the organisation’s approach to improving quality, from immediate safety responses to creating a proactive and improvement-focused culture					
3	I recognise and champion:					
3a	being respectful and I promote diversity and inclusion in my work					
3b	the ability to respond effectively in times of crisis or uncertainty					
4	I personally:					
4a	demonstrate visible, compassionate and inclusive leadership					
4b	speak up against any form of racism, discrimination, bullying, aggression, sexual misconduct or violence, even when I might be the only voice					
4c	challenge constructively, speaking up when I see actions and behaviours which are inappropriate and lead to staff or people using services feeling unsafe; or staff or people being excluded in any way or					
4d	promote flexible working where possible and use data at board level to monitor impact on staff wellbeing and retention					



Domain 6: Building trusted relationships with partners and communities						
	Competencies	Almost always	Frequently	Occasionally	Rarely or never	No chance to demonstrate
1	I contribute as a leader by:					
1a	fostering productive partnerships and harnessing opportunities to build and strengthen collaborative working, including with regulators and external partners					
1b	identifying and communicating the priorities for financial, access and quality improvement, working with system partners to align our efforts where the need for improvement is greatest					
2	I assess and understand:					
2a	the need to demonstrate continued curiosity and develop knowledge to understand and learn about the different parts of my own and other systems					
2b	the need to seek insight from patient, carer, staff and public groups across different parts of the system, including Patient Safety Partners					
3	I recognise and champion:					
3a	management, and transparent sharing, of organisational and system level information about financial and other risks, concerns and issues					
3b	open and constructive communication with all system partners to share a common purpose, vision and strategy					