Facilitated group work outcomes and Q&A panel

Group work was facilitated by Dean Royles, director of HR at Leeds Teaching Hospital. Groups were asked the following questions, feedback was captured as follows:

**Question 1: How do we want to take change forward in partnership?**

1.1 *At national level?*
- Never get the chance to embed change – need flexibility to change locally
- National direction & local implementation = partnership
- Cross party working / agreement to provide stability
- Legislation to match plans e.g. pooling budgets, Foundation Trusts competition
- All above backed up by a set of principles – shared understanding, ownership, appetite for change, governance, capturing good practise, integration, engagement
- Adopt national SPF principles
- Need to be clear what we are engaging about and where

1.2 *At regional level?*
- Need to be conduit for passing information between national/local
- Co-ordination and best practise – sharing nationally
- Engagement to a common vision – raise morale
- What’s regional – North SPF, NW/NE/Y&H, STPs?

1.3 *At local level?*
- Build up trust between staff reps and management – open conversations
- It’s about the future, what is going on?
- Need project management skills for all this change
- Skill up line managers/staff to have these conversations about change
- Joint JCNC – integration
- What’s local – organisations, local delivery systems, STPs?

**Question 2: What are the development needs for staff side and managers?**

2.1 *At national level*
- Making sense of the complexities to enable managers and staff side to have a coherent, clear and consistent message.

- Develop a joint hub where information and resources can be shared – more than SPF website (need to increase the use of this resource)

- Create a local pack/toolkit to support local conversations

- Directory of who is who to support the dialogue.

- Information is not always cascaded down from the national paid officers who attend the national meetings. Consistent approach from national level down - two-way flow of information needs to happen in a timely manner.

- Staff side need more communication and feedback on national matters

- Engagement & building relationships

- Skills development – how not the what!

- Consistent partnership approach

- Facilities time needs to feed up to national level. If the partnership agenda is to be taken seriously need to give the time to do this seriously.

2.2 At a regional level

- Lots of diverse groups and acronyms and not enough of us to feedback (staff side)

- Ability to influence up and down on both national and regional agenda.

- Translation of clear messages – how do front line get the message about level of change

- Build relationships and network

- Additional of staff side to existing (STP) groups

2.3 At local level

- Jargon buster for local level reps/managers

- Limited knowledge of national issues

- Communication, negotiation and skill development for local staff side, to enable them to know what is going on in the wider system.

- Sharing of SPF website at JNCC level as a useful resource

Question 3: Are there any messages that the North SPF want to raise with the national SPF around system change?

- Communication around the changes at system level

- Differing engagement across regions with staff side

- Need a workforce that understand the changes

- In terms of the wider workforce, good at public consultation lack in staff side consultation

- No national template – mandate to recognise engagement with TU’s
-Sharing of information from NSPF with regional and local SPFs i.e. good practice and feedback – feedback of key points/meeting topics, anything we need to escalate to the national SPF needs to link back to local groups.

-Understand the difference between urban and rural areas; need to ensure that the rural perspective is considered

-Recruitment and retention is a real issue across the country – London factor applies so even bigger cities can’t attract

-Difference between local authorities and NHS – when trying to bring community teams together, t&cs are an issue when working alongside each other. E.g. transfer council staff to health – are years of service maintained or continuous?

-More information about devolution – what is good/bad – lessons learnt across the system so we don’t all make the same mistakes

**Q&A Panel**

1. **How does the NHS Confederation link with NHS Employers?**

   The [NHS Confederation](#) is the authentic voice of [NHS](#) leadership, they are the only membership body that brings together, and speaks on behalf of, the whole health and care system. The [NHS Employers](#) organisation, part of the [NHS Confederation](#), is the voice of employers in the [NHS](#), supporting them to put patients first.

2. **In relation to the Valencia example above how will people access the platform if they don’t have mobile technology?**

   Patients are not obliged to upload information and is built on an easy to use platform. Rotherham, Doncaster and South Humber NHS FT run a similar system for people who have had heart attacks, where they monitor their own health. It helps people to understand and manage their own health.

3. **Agenda for Change vs. free market? How will we make it a more flexible market?**

   The consistency with Face What is Face? is helpful, but do we need to do something different to suit the workforce of the future? Can be quite inflexible when developing new roles.

4. **How can staff side get into more ‘rooms’ to engage in lots more conversations early on?**

   It is important to share when staff side engagement has gone well, as there are many examples in the system.