



**SOUTH WEST RSPF  
JUST AND LEARNING CULTURE  
WORKSHOP OUTPUTS**

**14 April 2021**

The South West RSPF held their second just and learning culture workshop on 14 April 2021. Over 100 enthusiastic delegates joined the session.

The aim of the workshop was to look at how the RSPF could support the region with embedding a just culture.

Thanks to the co-chairs of the SW RSPF and speakers: Alan Lofthouse, Clive Lewis, Leah Brewer, Alison Hackett, the NMC and GMC for their presentations. And thank you for your input and enthusiasm.





## SESSION 1 ALAN LOFTHOUSE, NATIONAL SPF

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### National SPF context

Alan Lofthouse shared the national SPF overview. The key points of which were:

- A just and learning culture is more than just an initiative, it runs through all the recommendations of the people plan;
- Organisations need to be courageous to hold the mirror up, and honestly assess how existing processes impact on their people;
- Successfully embedding a just culture relies on the principle being supported at all levels within the organisation;
- Yorkshire and Humber RSPF have produced a principle document, which is shared with the pack;




## Session 2: Clive Lewis: The 'Toxic Triad' and just and learning culture

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### Toxic: A Guide to Rebuilding Respect and Tolerance in a Hostile Workplace

Clive Lewis shared his work on 'The Toxic Triad' and made the link between tackling a toxic culture and the embedding of a just culture.

Clive Lewis: "A toxic culture at work can be heartbreaking"  
([peoplemanagement.co.uk](http://peoplemanagement.co.uk));


The Toxic Triad™ Pledge 

**Overview**

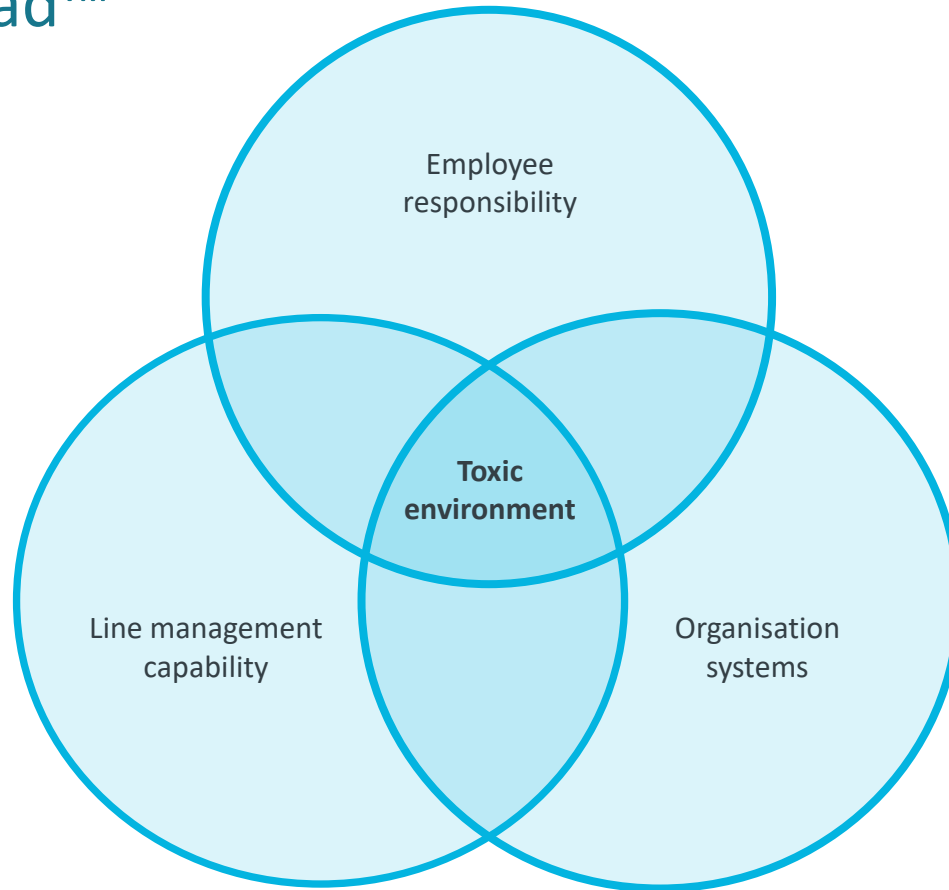
- Support NHS organisations to become less toxic
- Prepare for CQC Monitoring questions
- Consistent with the shift towards a Just Culture

**Objectives**

- Engage Trusts on reducing toxicity and to grow the Toxic Triad Pledge coalition
- To open source share Toxic Triad best practice and build a mosaic of success
- To drive action on toxic workplaces to help Trusts become more sustainable
- Make the link between lower levels of toxicity and improved patient care



# The Toxic Triad™



Your views on Clive's session are shared here:

I don't think we do enough to help people feel comfortable having a difficult conversations. Which is why we see more comfort in a formal process because it feels safer than the 'unknown' direction of a difficult conversation;

The ability to have those conversations confidently would prevent most formal processes even getting to that stage;

Where organisations have introduced a 'civility policy', is there a risk that this can be abused if a just/learning culture hasn't been fully enshrined within the organisation, ie. could it be used as a procedural tool for bullies to bully with?

What are some of the common mistakes that line managers make that perpetuate a toxic culture - and how to address these!

Not many organisations have people who are analysing data and what can be learnt from this in terms of organisational systems, what would your recommendations be for areas organisations could look at?

Can your tools be used in conjunction with staff surveys?

## We asked Leah Brewer from Cornwall Partnership NHS Trust to share the organisations work on just culture as an exemplar:

Leah Brewer presented the Cornwall Partnership NHS Trust journey to date:

Disciplinary policy revised to support a just culture approach with Trade Union input and support;

Now working on sickness absence and dignity at work

Trade Union input from the outset. Trade Union colleagues worked in true spirit of partnership working, taking the role of critical friend;

What have been the outcomes to date?

## Disciplinary Case Management for all staff (including bank)

Disciplinary Cases	Suspensions	ongoing	No of Cases	Resulted – no case to answer	Resulted – warning issued	Resulted – dismissal	Resulted – informal action	Resulted – resignation with no outcome
<b>2020/21</b>	March 2021 - 1	12	64	6	1	0 – 2 bank deregistered	42	1
<b>2019/20</b>	March 2020 - 1		69	7	3	1	44	5
<b>2018/19 Comparison</b>	March 2019 - 5		64	22	10	3	22	7
<b>2017/18 comparison</b>	March 2018 - 24		79	25	23	21	9	1

changes noted:

- Number of cases remain consistent year on year
- An increase in informal action being used that includes action plans, informal conversations and clarifying expectations. From 9 to 42, 466% increase in the use of informal and learning actions.
- A decrease in no case to answer following investigation or disciplinary hearings. From 25 to 6, a 76% reduction ensuring that disciplinary action is costing less to the Trust. All are established at initial review stage so no investigation or hearing costs.
- A reduction in dismissals from 21 to 0, a 100% reduction for 20/21 resulting in retention of staff and improvements being made. However, note that 2 bank workers for deregistered.

The above changes have resulted in reduction in costs associated with disciplinary issues, suspensions, recruitment as staff are being retained and improvements are made in their performance.

The last dismissal due to disciplinary action was August 2019. The last appeal was July 2019



In the Q&A session that followed, here are views on the presentation and the achievements of CPT:

Your passion is shining through Leah – what an achievement;

As a staff side rep with CPT I'm immensely proud that we have Leah Brewer championing Just Culture within our organisation. I concur with all she has said in her presentation re our partnership working. The twice weekly meetings with TU/HR (30 minutes) longer if required are invaluable to all.

As CNO BME SAG lead had conversations today with Region union re collaborative working on such issues, would be great to see the policy, the impact, how this links up and out to NHSE/I. This is a good opportunity to strengthen partnership working;

It is vital that the diagnostics are carried out in partnership with staff side;

Agree that joint working with managers is key to success;

Yeovil have recently revised their policy manual in partnership with staff side team, which includes a new policy called "supporting relationships at work". The hope is that the focus will be on repairing relationships rather than raising grievances to resolve issues which seemed to be what was happening at the Trust;

What other things have been put in place to support? Training, how to have 1:1 discussions or other operational processes, such as incident reporting and learning processes embedded as a result?

*We are now reviewing our disciplinary policy with the help of brave and willing staff members who have been through our formal processes. Our policy will go to the Board annually;*

What ER tracker system are you using?

*We use a system called Footprints. I'm happy to discuss how we use it anytime if anybody wants to contact me.  
leah.brewer@nhs.net.*

Alison Hackett, Head of Staff Experience, People Directorate, NHSI/E, South West Region: Just and learning culture and the NHSI/E Civility and Respect Toolkit;

Alison shared the NHS England/Improvement South West Regional Programme and the workstreams covered:



Cultural  
Diagnostic



Just and  
Learning Culture



Civility and  
Respect



Cultural  
Leadership



**Regulators perspective on a just and learning culture and what the potential barriers and challenges might be:**

Howard Lewis, Regional Liaison Adviser South East, General Medical Council

Michele Harrison, Regulation Adviser, Employer Link Service, Nursing and Midwifery Council (South West)

Paula Mansell, Employer Link Service Team Leader, Nursing and Midwifery Council

Howard Lewis, GMC, shared the following resources:

Supporting a Profession under Pressure - <https://www.gmc-uk.org/about/how-we-work/corporate-strategy-plans-and-impact/supporting-a-profession-under-pressure>

Stating that the GMC are taking action to address the issues that have been raised about the environments in which doctors' practice, and the impact of systems pressures.

Other resources shared include:

<https://www.gmc-uk.org>

<https://www.gmc-uk.org/about/how-we-work/corporate-strategy-plans-and-impact/supporting-a-profession-under-pressure/uk-wide-review-of-doctors-and-medical-students-wellbeing>

[https://www.gmc-uk.org/-/media/documents/caring-for-doctors-caring-for-patients\\_pdf-80706341.pdf](https://www.gmc-uk.org/-/media/documents/caring-for-doctors-caring-for-patients_pdf-80706341.pdf)

The NMC also shared links to their supportive resources - [here](#). Along with other linked resources:

**Employer Link Service (ELS):** Support with pre-referral concerns, fitness to practise thresholds, when to raise a concern and what support is available from the NMC when making decisions about concerns. Access to the ELS service is via: *ELS Advice Line contact telephone number: 020 7462 8850 or Email: [employerlinkservice@nmc-uk.org](mailto:employerlinkservice@nmc-uk.org)*

**Managing concerns: a resource for employers:** can be found [here](#). This outlines best practice principles for employers to consider when investigating and managing concerns about a nurse, midwife's practice.

**Caring with Confidence:** A series of bite sized animations can be found [here](#). They focus on **eight key themes** about the role as a registered nurse or nursing associate/midwife, and how the Code can support especially in difficult situations.

**New fitness to practise materials:** published 29 March with new referral forms to gather up-front information about context and new principles for decision-makers [Read the context principles](#) here.

**Raising Concerns guidance:** Can be found [here](#). **Openness and honesty when things go wrong: the professional duty of candour.** Can be found [here](#). There are a [series of case studies](#) to help the professionals on our register understand the professional duty of candour, what it means for their practice and how to meet it in a range of scenarios.

**Together in practice; Ambitious for change:** research commissioned by the NMC which examined NMC processes including education, overseas registration, revalidation and fitness to practise and identified disparities in people's experience and outcomes depending on who they are and also looked at how people can get different outcomes from our processes according to their protected characteristics. This research can be found [here](#).

**Keeping in touch:** sign up to newsletters [here](#)

## The key themes and comments from the panel discussion that followed were:

- Professional training curricula that reflect a just culture: Could regulators and Universities work more closely together to build on this?
- Induction is a great opportunity to set the scene for the organisations approach to raising and dealing with near misses, incidents, concerns and get ahead of any stories that could be told by colleagues.
- The NMC code requires registrants to 'uphold the reputation of the profession at all times'...While this is absolutely the goal, is it really reasonable to expect it to be reachable? It's the part of the code that can (and does) get used as a battering ram.
- Educating line managers to seek advice, rather than referral, whilst meeting safeguarding assurance vital;
- Managing public expectations when things go wrong, managing media when aim appears to be to seek to blame;
- Refreshing to hear from the professional regulators, need to see this translate into practice.
- A whole system approach (ICS) is needed if we are to achieve lasting improvement for our people, both in health and social care;

## **Break out session:**

### **How do we ensure all staff are engaged to apply a just and learning culture;**

Prompt questions shared in the breakout rooms, included:

- What are the barriers (eg. Procedural: Policies and processes, Structural: eg Triage system, behaviourally: eg resistance to change from staff or from line management) and strategies for overcoming them;
- What are the priorities and who should be deciding them;
- How do we take the first step, would RSPF developed principles be a useful start point;
- Training: what should be included and for whom;
- What's the timeline;
- How can the RSPF help.

# How do we ensure all staff are engaged to apply a just and learning culture;

staff need to trust that employers will truly live the values rather than play lip service

Canvas opinion on the areas for focus

It needs a full and demonstrably lived commitment from the top down. Managers supported to take a different approach and not blamed if it doesn't go to plan 1st time round etc.

Share please a practical programme or set of tools to enable an organisation to pick up and run with a JLC. These should say what needs to be done and what needs to happen in terms of ways of working and policies to seek to embed such a culture.

Encourage engagement through setting it out from executive level throughout all directorates and teams, by making the engagement events often, informal, employee led and support to include key themes for organization identified through surveys.

Suggest a clear Board level commitment to developing a J&LC then open and honest conversation about the current culture and the changes collectively required.

Top down commitment

Ensuring staff voice is heard; we use forums and workshops frequently to enable a collaborative approach when introducing new ideas, ensuring staff are involved from day 1 and feel they play a pivotal role. We ensure representation is inclusive.

You need the right CEO and leadership Team, if they don't have the right behaviours and values at the top, then each layer below won't behave as appropriate or really believe everyone is on board



# How do we ensure all staff are engaged to apply a just and learning culture;

Communicating the benefits for patients and staff, being clear and positive about the commitment

Line managers need to be brought with us - through training, mentoring and development. They are the crucial people implementing policies and influencing culture.

need belonging and a sense of collective responsibility

Gather feedback from colleagues who have been subject to a process  
Support line managers to have the skills/training to develop this

Board support & commitment to FULLY resource implementation  
National/regional principles incl. all stakeholders  
Partnership working agreements  
Ed/Training of all leaders of principles/values/benefits  
Civility in all mandatory training  
Communicate



## **Other comments and views shared in the breakout rooms:**

You need to start by being honest about the practices in your organisation, like Leah said. This includes gathering the data and using the diagnostics, with staff side involvement;

We have had staff side reps as champions and staff range across most grades and include medical staff, the champions must be representative of the organisation;

We need to talk to and gain views from all levels of staff; we did individual Board interviews with set questions as well as different staff groups sessions and incorporating staff survey and staff impressions survey;

Avon Wiltshire Partnership have introduced an HR App that people can have on their personal mobiles enabling them to link to policies, announcements and programmes.

Comms to support engagement on the ground is key, for example use of the information hubs used during Covid (wave 1) to gain staff opinions;

The most common theme of disciplinary processes is the allegation that the member of staff has not adhered to The Trust's Values, which is so far removed from the idea of a Just Culture. Whilst there are moments of enthusiasm from senior management for, say, Compassionate leadership, this appears fleeting. Which is in contrast to the apparent belief at board level that the whole trust is following on the initiative. Longevity of enthusiasm is needed.

## **Other comments and views shared in the breakout rooms:**

Communicating a credible vision, developed in partnership, of what a just and learning culture will look like for the organisation to ensure "buy in" from the outset;

Engagement of all staff groups, by all means necessary. All too often the lower banded staffing groups are missed due to their lack of IT access or ability to communicate with their managers. Not ensuring engagement and targeted communications with lower banded staff will lead to increased mistrust, dissatisfaction and disengagement, which will have a negative impact on embedding a just culture;

Embedding JLC will be a continual evolution, requiring short, medium and long term goals. Mersey Care have been very open about their journey and the length of time and investment that it has taken to effect real change.

Training on approach and revised policies for all staff;

Pulling staff experience stories together to support Board, and line manager buy in;

Consistently manage the saboteurs, at every level;

Support line managers to have difficult conversations rather than resort to the comfort of policies, causing unnecessary harm;

# Summary of Key themes from break out sessions

Collective engagement to support buy in at all levels;

Training and education for all levels of staff;

Joint vision on what a just and learning culture can achieve;

Unblocking the barriers and supporting a culture of belonging;

Consistency and honesty on diagnostic of where organisation currently really is – being courageous in holding up the mirror;

## NEXT STEPS

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- The SW RSPF will reflect on what was said at the workshop, with the aim of jointly setting out a high level vision for a just and learning culture in the South West; describing the aspirations for organisations to sign up to;
- To consider the Yorkshire and Humber principles with a view to potentially developing a South West version, for organisations to sign up to, as part of the above;
- To maintain momentum through establishment of regular, quarterly workshops to continue to track and support progress and share good practice;
- To develop actions/work streams to include:
  - Story telling to support engagement;
  - Share training and resources on embedding a just culture;
  - Potentially develop and share communications used to engage all levels of staff;
  - Use of diagnostic tools to support learning;
  - Development of a central resource hub of good practice examples

