

Collaborative Service Change Network

Wed 7 Nov 2018

Welcome and introduction

This was the very first meeting of this network. So had been programmed by Paul Sanguinazzi, Laura Ingham & Jonathan Wright.

Paul gave an overview of the work we had done to date on collaboration and shared the collaborative change model and the process a group of people had been through in order to produce it. The learning of the group that developed the model will be part of the input into this Network.

Changing Our Services Collaboratively

This is a guide to how Nottinghamshire Healthcare works collaboratively with our communities, our staff and our partners to develop and change services. It outlines the principles and processes so we can work successfully together. We will use all our skills, knowledge, experience and learning to develop the best services possible within the finances available.



There is more information with this model (checklist & principles) which takes you through each step; the whole document will be emailed out to the network.

Round the room – why have we come today?

- Embed collaborative working in my role 4
- Curiosity and understanding & learning 5
- Building relationships 2
- To learn how to effectively change services 2
- The empowerment of patients
- To shift perception about my own service
- To bring people together
- To share my experience with others
- To see the development of the model 3
- To break barriers across organisations – interested in developing a Recovery Wing in my area
- Because the public sector should work collaboratively

***concern about timeframe**

Group Agreement

- Respect confidentiality
- Create a supportive environment that brings about trust
- Respect diversity of opinions
- Agree to listen
- Views other than your own are valid
- Permission to bring us back to the agenda
- Keep to time
- No Jargon, but have personal responsibility to ask for explanation
- Have realistic goals
- Have an approach to ensuring all members can participate
- Be curious
- Think before speaking
- Attack the problem not the person
- Listen with an open mind
- Contribute to the meeting goals
- Record outcomes & follow up
- Close decisions and agree actions
- Attack the problem not the person
- Think before you speak
- Listen with an open mind
- Contribute to the meeting goal

Group reflections on collaborative working

Laura led a group discussion on our experience of collaboration to date

Collaborative working is Important:

- You have common goals
- Find better solutions
- Influences change
- Can change cultures
- Lead to better morale

Different voices can bring new viewpoints

Important that there is a broad spectrum of people

Gives volunteers a chance to make a positive contribution

A chance to voice and hear different views

Engagement & Learning from others

Promotes flexibility and compromise

When collaboration works it can be inspirational and create positive feelings and outcomes, it is also self-motivating

It is a way to listen to different views and a desire to move in a common direction

It is important to:

- Have trust & openness
- Have a framework to work to
- Keep a focus on what works best for patients

Personal reflection and Debate vs Dialogue

Jonathan then offered up his draft definition of collaboration:

Collaboration isn't simply about involving service users but about bringing together all stakeholders and having an agreed working process, which brings out in the open assumptions we all make, acknowledges power imbalance in the group and collectively agrees a way forward.

Jonathan spoke about us as individuals, us as a group and us as part of a system and asked the group to reflect on themselves as individuals

Individual

- What has been of interest?
- Have you found anything frustrating – why is that?
- Have you spoken or listened more, which do you usually do?

The group fed this back and a short presentation on Debate vs Dialogue took place

Debate v Dialogue

Click icon to add picture

Assumes that there is one answer and that you have it.

Assumes that many people have a part of the answer.

Tries to prove others wrong.

Tries to work with others to find common understanding.

Listens to find flaws and make counter arguments.

Listens to understand and seek agreement.

Defends assumptions as truth.

Reveals assumptions for examination.

Seeks closure around own view.

Seeks to discover options.

TheKingsFund > Ideas that change
health care

And a short TED lecture on listening presented by Celeste Headlee was shared and can be accessed again here: <https://www.youtube.com/watch?v=H6n3iNh4XLI>

Reflections from the group consisted of – it would be really good for teams to consider a dialogue approach, considering how global politics sits within a debate/dialogue model and that the tool of dialogue would be difficult to achieve were shared in the group.

Evaluation and feedback of first meeting

What worked well?

- Facilitators were good
- Use of a range of media
- Creating the network of people
- The film – dialogue/deabte

What would be good to include that we haven't?

- Board members
- Other areas of the Trust
- Spreading the network across the Trust and getting more people involved
- Communication workshop – offer of bringing some work in.
- A more diverse group

What should we stop doing?

- Biscuits as I eat them all

Even better if

- More services to be involved
- Managers to attend
- Shorter gaps between meetings
- There was a common aim
- Who, what, where, why and how?
- Having a co-produced event
- Updates/informed with model progress within Trust
- What is the purpose of today? How do we utilise this within the Trust? What is the goal of learning this as an involvement volunteer?
- More people
- Full day-head space, networking, reflection & case studies
- Kept to time
- Agreed outcomes at the beginning

The offer of shaping the agenda was made and we look forward to hearing about how you might like to contribute and support the agenda.

Next Meeting: Wed 27 Feb 2019, venue tbc