



# How to be a change team member

Phase 1: Discover

Culture and leadership programme

TheKingsFund

collaboration trust respect innovation courage compassion

We support providers to give patients safe, high quality, compassionate care within local health systems that are financially sustainable.

# How to be a change team member

This guide is for anybody interested in taking part in the NHS Improvement Culture and leadership programme.

It will help you understand what a culture programme is, and why it is important to your organisation and to you as an individual. It explores what it means to be a change team member and why it is important to understand this before you commit your time. The change team is a group of people drawn from across the organisation who ensure the delivery of the programme.

## What is a change team member?

The role of change team member is fundamental to the success of a culture programme in an organisation. A change team is a collection of individuals who have volunteered their time to make a difference for themselves and their colleagues by looking at their organisation's culture and how they would like it to be.

The diversity of the team can enable when diagnosing the current culture, to capture views from those who perhaps would not always feel able to put their point across.

If you are considering joining a change team you will need your line manager's support to protect your time and your ability to do the tasks you have volunteered for or may be asked to do.

# Create your change team

The change team should be a multidisciplinary team from across your organisation – championing a compassionate and inclusive leadership approach. It should cover different areas, occupational groups, levels of seniority and demographics. It is important to include operational ‘doers’ as well as influencers and administrative support. A diverse change team may help you capture views of those who feel marginalised in the workforce.

We suggest a team of 10 to 15 people (although the work will involve many others) including:

- at least one executive sponsor (executive director with responsibility for organisational development)
- a project manager or individuals with similar expertise
- organisational development and HR representation
- medical/clinical/service leads
- a communications professional or similar expertise
- analytical resource
- patient experience lead or similar
- administrative support.

Consider including a quality representative, patient/service user leaders, people from estates and facilities, other clinical, administrative or managerial staff or a non-executive director.

# What do the roles involve?

It depends which role the member chooses. There will be a chance to be involved in some or all six of the diagnostic tools (the culture and outcomes dashboard, board interviews, leadership behaviour surveys, culture focus groups, leadership workforce analysis and patient experience).

To help you decide whether taking part might be right for you we asked some current change team members what they thought of it.

The following hints and tips are from change team members that used and continue to use the toolkit from various trusts and members of NHSIs' own Internal Change Team.

## What are your hints and tips on being a change team member?

- Listen
- Understand the different perspectives people have on the same situation
- Keep an open mind
- Focus on the goal(s) not the means and be adaptable about achieving your ends
- Be proactive
- Many quick small changes can be better than a single grand vision that might never be implemented
- Take time in the beginning to build your team, get to know each other and clarify why you want to do this work together – in my

opinion any investment in this in the set up phase is likely to be rewarded tenfold

- Be clear and upfront about expectations
- Commit to modelling compassionate and inclusive leadership every day, in every interaction with everyone you meet
- Get your board involved
- Be prepared to help your colleagues: time is a commitment and team work is key to the success.

“Being a change team member requires a commitment of your time, but also a commitment of your belief in the way forward for improvement.”

## Responsibilities of a change team member

All team members should:

- disseminate learning and influence within the organisation
- demonstrate commitment to exploring ideas and assumptions about the culture of the organisation
- be committed to this work and to involving others
- be resourceful and dynamic
- use this work to support personal and professional development.

## What do you think was the best thing about working on this project so far?

“Taking part in this project was both exciting and scary. It is something new and designed to make an impact on my organisation and the people I work with. As I took part in the programme I began to learn and am still learning new things about how I looked at and worked with colleagues and most importantly how I saw myself. Development begins with you. I enjoyed and continue to enjoy making a difference and being part of positive change and continuous improvement.”

The best thing:

- building more contacts across the organisation
- gaining a good understanding of different perspectives
- working on joint approaches to developing solutions, collaborative working with people who you may not always work with
- developing a deeper understanding of the challenges facing different areas
- feeling inspired, feeling part of a growing change for the better
- getting to know team members you would not usually work with
- witnessing commitment from the executives
- it raises the trust involvement and makes the work very meaningful
- feeling part of a team all looking to achieve the same end goal.

## **Making a difference**

“In the change team you will be in a team that you may not be familiar with or may not have worked with some members of the team previously so in order for things to progress in a timely manner, be proactive. Don’t wait for other team members to contact you as they will have competing priorities too - so be the one to make contact first. Be organised, arrange meetings and as far as is possible stick to them to ensure everyone is clear on their responsibilities and timelines are followed and met. Set achievable targets and stick to them.”

“Find out or know your links and network. You don’t always have to start collecting data from scratch. Find out if the information you require already exists in the organisation.”

## Community of practice

As you embark on your own culture and leadership programme, we suggest that you join our self-sustaining community of practice, where NHS professionals across the country share best practice and learn from each other’s experience.

Email us at [nhsi.culture@nhs.net](mailto:nhsi.culture@nhs.net) to join.



## What changes have you seen so far in your organisation due to its work on culture?

“A change team is a group or many groups that work together to deliver an organised approach to culture change. Culture change begins in the diagnostic phase, and having a team working through the different tools as one helps to deliver as well as unite , which is the beginning of culture change”

Changes so far:

- greater desire by colleagues to work together, both on transformation projects and our business
- enhanced awareness and understanding of the importance of this work personally and at an organisational level
- acknowledgement that some issues remain but with an added willingness to address and work through them
- practical quick fixes
- a proactive approach taken at all levels
- greater awareness
- a real heart-centred approach to working together
- willingness to approach positive change.

“The findings of phase 1 of the project have helped us gain a wider understanding of the culture of our trust. It has provided insight into areas we can focus education and training and implement strategies where needed. We have already identified gaps in leadership and the need for talent management.”

# The NHS Improvement toolkit

The NHS Improvement toolkit guides change team members through the six diagnostic tools in the programme and takes them through the processes in phase 1. The diagnostic short guide has detailed information on each tool but in summary:

**Dashboard:** The wealth of data published nationally or collected by your trust can give you a high level picture of your organisations culture and related outcomes.

**Board Interviews:** Interviewing your board members ensures their engagement in the programme and identify key issues.

**Leadership behaviours surveys:** The surveys provide information on the 10 leadership behaviours across your organisation.

**Focus groups:** These help you look at culture and levels of compassionate and inclusive leadership.

**Leadership workforce analysis:** This analysis enables you to collect different types of information to develop the compassionate and inclusive leadership strategy and resulting talent management and development priorities in phase 2: Design.

**Patient experience:** Patient views can help you to understand the existing strengths of your organisation's culture and where you can improve.

You may be inexperienced or have some experience in a range of areas, but enthusiasm is the key to ensuring success, developing new skills and making the most of existing ones.

Visit the [culture and leadership page](#) on our Improvement Hub to access the full toolkit and get more information on the roles of the change teams.

# About the programme

NHS Improvement, the Center for Creative Leadership and the King's Fund are working on a two-year programme to help trusts (NHS foundation trusts and NHS trusts) develop cultures that enable and sustain continuously improving, safe, high quality, compassionate care.

Compassionate and inclusive leadership is the key to creating cultures that will give NHS staff the freedom and confidence to act in the interests of patients, and will lead to sustainable clinical, operational and financial performance. It will help to continually improve and redesign services and support organisations to develop the environments necessary to encourage the new care models envisaged in the Five Year Forward View.

The programme will provide practical support to help trusts diagnose their cultural issues, develop compassionate and inclusive leadership strategies to address them and implement any necessary changes. The programme will take place in three phases (diagnose/design/deliver) over a two-year period.

We will explore and link to existing resources and work programmes, for example the implementation of the Carter review. Where they add value we will build this into the programme.

To ensure the programme has lasting value for trusts we are working with three pilot NHS trusts that will help develop, design and test all aspects of the support.

The pilot trusts are:

- Central Manchester University Hospital NHS Foundation Trust
- East London NHS Foundation Trust
- Northumbria Healthcare NHS Foundation Trust.

Contact us:

**NHS Improvement**

Wellington House

133–155 Waterloo Road

London

SE1 8UG

**0300 123 2257**

**[enquiries@improvement.nhs.uk](mailto:enquiries@improvement.nhs.uk)**

**[improvement.nhs.uk](http://improvement.nhs.uk)**

 **Follow us on Twitter @NHSImprovement**

This publication can be made available in a number of other formats on request.