

Shared Ambition – Principles and Behaviours Consultation Version

Introduction & background

This is a consultation version of the principles and behaviours document which forms part of the Shared Ambition development process.

An original draft was developed using outputs from the first cross-sector Shared Ambition workshops, co-developed problem definition statements as well as broader feedback received from across the sectors. This document is an updated version of that original draft after gathering feedback from VCSE, NHS and wider Public Sector participants in second stage Shared Ambition workshops. It is now being distributed more widely to seek further feedback.

The final document is designed to be signed up to and adopted by members of all sectors. We will be exploring an appropriate sign-up process.

This 'Principles and Behaviours' document is designed to sit alongside a 'Plan' document bringing together the elements of solutions identified to help improve working between the sectors.

In drafting the principles and behaviours, emphasis has been placed on framing statements as positive acknowledgements or commitments going forward, rather than being defined around current problems. Emphasis has also been placed on framing statements in such a way that they are equally applicable to all sectors.

Principles and behaviours

Shared Ambition

We recognise that we have shared ambitions but are driven and constrained by different factors.

We acknowledge that Public Sector Health and Social Care organisations must fulfil Government policy and deliver mandated services. VCSE organisations will have individual social purposes, some legally binding. The scope of our shared ambition is to support the overall wellbeing of the residents of Norfolk and Waveney. We understand the importance of not conflating our individual drivers with our shared ambition.

We agree as part of our shared ambition the importance of creating a system-wide set of services that take a prevention focused approach, are built centred around responding to the needs of the individual client, and that integrate well.

We agree as part of our shared ambition to maximise the opportunities for self-care and self-improvement for individuals across our system.

By prevention we mean interventions that maintain or improve health and wellbeing before it is compromised. This includes interventions to prevent, delay, reduce or reverse conditions as well as

actions to create healthy and supportive environments. We acknowledge that our understanding of health and wellbeing should be built around factors that are important to that individual.

By integration we mean ensuring that all the services and support an individual needs are available at the right time and in the right way, and function effectively together to maximise the positive outcomes and experience for that individual.

By self-care we mean the actions that an individual can take to preserve or improve their own health and wellbeing.

We recognise that our system does not currently meet these criteria and we commit to transforming our services in order to achieve this.

We recognise that our Shared Ambition does not have an end point and requires an ongoing evolution of approach and relationships.

Whole system response

We recognise that individuals have a range of needs that require a response from the system as a whole.

We recognise that many of the challenges we face as organisations can only be responded to effectively through a system-wide response.

We are therefore committed to working towards a whole system response.

We recognise that a whole system response requires us to act not just across all sectors but also at all levels in our organisation.

We recognise that our system impact is not limited to our delivery but the way we behave in relation to our workforce. Our approach to purchasing, our use of assets of all types and our environmental practice are all opportunities to further our shared ambition.

Engagement and Consent

We recognise the importance of building positive and respectful relationships to achieving our shared ambition.

We recognise that given the on-going nature of our Shared Ambition; we need to invest in developing long-term relationships.

We recognise the importance of mutual understanding to building positive and respectful relationships. We therefore commit to investing in understanding different perspectives from across our system.

We agree that good early engagement and continuous dialogue are vital in building positive relationships.

We agree that where decisions both strategically and operationally impact on other parts of the system, those decisions should be based on consent and dialogue.

We agree that the shifting of demand without dialogue and consent is wrong and not consistent with our shared ambition.

We recognise that consent is not always achievable and recognise that this may result in organisations 'saying no' refusing referrals, requests or other obligations placed on them.

Resourcing needs to follow demand and transformation.

We recognise that as part of our shared ambition we need to transform our services to move demand into community based and prevention focused services.

We commit to ensuring system resources are distributed in order to meet our changing demand needs and support our transformation agenda.

Total capacity and demand model

We recognise there is a challenge over resourcing our system. By this we mean having the capacity in the right services to meet the needs of our residents in a sustainable way.

In overcoming this challenge, we recognise the importance of understanding our systems overall capacity, demand and needs.

We are committed to creating a total demand, need and supply picture of our system. This includes services delivered in the NHS, Public Sector and VCSE sectors.

We are committed to building a sustainable system which means we must understand future long-term demand, need and supply, alongside our current situation as part of our total system picture.

We commit that in approaching understanding both our challenges and solutions we must understand and include the impact on all elements of our system.

We commit that where we undertake transformation activity, we will seek to understand the total demand and supply picture on the system before committing to changes.

Integration

We are committed to the primary objective of integration being improved client experience and outcomes.

We commit to developing joint systems and processes and to sharing client information in order to make the client journey as seamless as possible. We acknowledge that integration may be limited by legal requirements, the preferences of clients or other constraints.

We acknowledge that integration can make services more efficient for individual providers. This is not the primary goal. We also acknowledge that integration can increase the burden on individual providers and commit to understanding and mitigating that additional burden.

Evidence-led

We recognise the importance of being evidence-led in achieving our shared ambition.

We are committed to using evidence to drive our planning and delivery.

We recognise that in selecting and interpreting evidence we often bring a particular set of pre-conceptions and biases. We recognise the importance of dialogue and inclusivity in minimising these biases. We recognise that diversity of perspectives and experience is valuable in achieving our Shared Ambition.

We recognise that evidence comes in different forms and from different sources.

We recognise that often decisions are evidence informed but that we may be constrained by other factors that mean we are not entirely evidence led.

We commit to creating a system that supports continuous improvement, investing in innovation, learning, development and the implementation and scaling of new insights.

Leadership

We recognise the importance of leadership in achieving our shared ambition.

We recognise that leadership is important at all levels and that our day-to-day operational behaviours are as important as our strategic discussions.

We commit to being good system leaders, working collectively to achieve our shared ambition.

We acknowledge as leaders we are constrained and have requirements placed upon us and need to meet individual organisational responsibilities.

We commit to being clear in distinguishing our organisational needs from the needs of the system as a whole.

Transparent

We recognise the importance of building positive relationships to achieving our shared ambition.

We recognise that positive relationships are built on trust and that transparency is an important part of building trust.

We commit to being as transparent as possible about our processes, structures and decision making.

We recognise the importance of good data and intelligence in achieving our shared ambition.

We commit to making data and intelligence, including specific client data where appropriate, as easy to access as possible.

Equality, Diversity and inclusion

We recognise that there are individuals and communities in our system that receive poorer outcomes than they should.

We recognise there are individuals and communities in our system whose voices are seldom heard and who are not active in our decision-making processes.

We commit to understanding the needs of all members of our communities and any inequalities.

We commit to ensuring all members of our communities receive a high-quality service and are treated with respect.

We need to commit to increasing the breadth of diverse experience within our decision-making structures.

Workforce

We recognise the primary importance of our workforce in delivering our shared ambition.

We recognise our workforce as included paid staff as well as volunteers across all sectors.

We recognise that supporting our workforce with actions to improve their lives contributes directly to our Shared Ambition.

We commit to creating parity of esteem between all roles across our system.

We commit to ensuring conditions, pay and support are equitable across our workforce.

We commit to supporting the wellbeing and development of our workforce.

Implementation and Consequences

We recognise that documenting our principles and behaviour is insufficient to achieve our Shared Ambition.

We commit to take meaningful actions to embed them within our organisations.

We commit that we will use these principles and behaviours to hold each other to account.

We recognise that our implementation of these principles and behaviour will not be immediate or perfect.

Where we do not believe these principles and behaviours are being adhered to, we commit to an initial assumption of good faith and to creating the opportunity for dialogue, understanding and improvement.

We recognise that an initial assumption of good faith is not the same and tolerating repeat patterns of poor behaviour, a failure to engage or commit to meaningful improvements.

We commit to creating a process to discuss concerns in a safe environment as well as escalate concerns where appropriate.

We recognise that a failure to live up to our Shared Ambition and these principles and behaviours will result in the deterioration of relationships. We recognise that this includes consideration of individual and collective responses to penalise transgressors for their behaviour.

Update Notes

V0-1 – Draft used with Shared Ambition workshop groups.

V1 – Updates based on workshop feedback.

Self-care component included in shared ambition. Framed as ‘maximise opportunities’ given differing perspectives on the responsibility for self-care versus responsibility to provide effect services.

Consequences and implementation section added.

Concept of anchor institutions (our impact as employers and purchasers) referenced in both workforce and whole system sections.

References to leadership at all levels and that there is no end point to or relationships or shared ambition.

Inclusion of innovation in system repose but to support continuous improvement. Also referencing the importance of implementing and scaling insights from innovation

Inclusion of need for response to be at all levels. Avoided referencing top down or bottom up to frame positively and avoid language that may be misinterpreted.

References to respectful relationships and mutual understanding added. Emphasis placed on importance of diversity of perspectives and experiences.

Expansion of consent elements to include that this may not always be achieved but also that organisation may say no in situations where it is not consent.

Expansion of defining prevention, integration and self-care. In particular not seen as simply aimed at demand management or acute services usage.