

Engagement matters

On Friday 14 March, medical staff from across the trust came together to discuss the findings of the medical engagement survey which was conducted in November 2013. The purpose of the meeting was to meaningfully discuss and debate ways in which the organisation could raise the levels of engagement with medical staff.

Dr Steve Feast, NELFT's executive medical director, opened the event by emphasising the board and executive management team's commitment to improving engagement. He set the scene, describing the very real challenges that face nearby organisations and painted a concerning picture of how disengagement can spiral out of control, should it not be addressed.



"As medical staff we are ambassadors of how the organisation is perceived. Our perceptions, comments and actions heavily influence the teams around us. This is why it is so vital that medical staff feel listened to, valued and engaged."

Dr Steve Feast

Feedback from the expert

Professor Peter Spurgeon, who is a director at the Institute of Clinical Leadership at the University of Warwick, has led the nationwide project that studies engagement levels of medical staff and measured these against the quality outcomes and success of their organisations. Peter gave feedback on the results of the NELFT survey and talked through what engagement means and how it can positively affect the outcomes for NELFT patients.

View the presentation of NELFT's results to each of the survey questions on the intranet here: [Medical engagement survey responses](#)

Engagement - what is it?

- *Engagement is a two way process:
The organisation has to create the opportunity to engage but there needs to be a desire for individuals to take part and reciprocate*
- *It takes time to be different, but the first step is to want to make the change, and want to make the change together.*
- *Competence is 'can do' but engagement is 'will do'*

Commitment to improve outcomes

Belief and pride in our organisation

Respect for colleagues

Willingness to go the extra mile

Understanding of the wider organisation, beyond our own jobs

What next and how we are going to make this work

The remainder of the workshop was an opportunity for the individuals in the room to exchange ideas and feedback about what changes we could implement here at NELFT.

The outcome of these discussions are below:

Senior leadership, organisational stability and communication

NELFT is a strong and stable organisation, both financially and at a senior management level. The new medical structure is in place and this should already feel like new relationships are being built and that important conversations are happening. Are you taking part in these?

For action:

- We pledge to listen to staff concerns and solutions that will help improve engagement.
- Set clear expectations, compel professional behaviour, with firm decision making.
- Create and maintain channels of two way communication.
- Involve people, capture good ideas and feedback developments.

Promote trust, respect and partnership between clinicians and managers

We need respect and shared leadership, lead at different times and in different roles.

For action:

- More management/ medical pairing at an earlier level in careers to encourage and nurture more prosperous relationships further on in careers.
- Find a catalyst for sharing the energy and experience accrued by years of medical training and in our clinical careers.
- More appropriate pairing of clinicians and managers, particularly on projects.
- Clinical involvement in interviews, particularly interviews of managers.
- Look into joint budget holding of medics and managers.

Up-skilling and personal development

Do we need to admit we don't know everything.

- We have started discussions with local acute trusts and CCGs on how we will design and build a medical leadership programme, owned and run by those who work locally and will benefit most from it
- Establish a pan Essex and London medical leadership skills, master classes, coaching, mentoring and thematic support programme. We have secured external funding to engage an ST4 GP trainee to drive this leadership programme .

For action

- Look into training on service improvements for example, Lean or Six Sigma.
- Learning through improvement projects outside clinical areas.
- Improve the reputation of moving between 'management' roles and clinical roles.

What next

- The meetings observations, recommendations and conclusions will be debated at the senior medical leadership team and will be discussed at the wider clinical executive.
- To maintain focus and measure improvements we will be creating an action plan. This will be presented to as many of the medical community as possible on Friday 6 June.

Take part

Share your feedback, solutions and comments with Steve Feast, Ben Smith or anonymously, by emailing yousaid.wedid@nelft.nhs.uk

Where we don't yet have the answers

Feedback your ideas and solutions on the following:

- How do we liberate staff to feel and behave differently?
- Medics often have strong and influential relationships with commissioners. Are we utilizing these enough and can medics help shape services and therefore positively impact workload issues?
- There are lots of very personal perceptions about recent changes which are influencing whole workgroups and departments. How do we move on, for the good of our patients?

The desire to improve
We want to improve engagement here at NELFT – but *it is a two way process that can't happen if you don't want it. Will you join in, be open minded, be committed to working together?*