

# Managing relationships and responding to crises on HWBs

# What this module is covering

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- Exploring emerging agendas, and potential crisis points
- Approaches for responding to emerging agendas and crises
- Fostering good working relationships
- Developing collaborate working as Health & Wellbeing advocates

As you go through this module we recommend you make notes in response to the following questions:

- What feels challenging now and in the future?
- Are all your board members acting together as HWB advocates?
  - \* *What role can you play?*
- How equipped in the board to deliver effectively with crises?
  - \* *What role can you play?*

## Have a think...

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- What is the biggest challenge you have had so far in your HWB?



## A changing landscape...

Themes that  
dominate  
national  
guidance and  
the future  
direction of  
services...



## A changing market...

A clear separation between commissioning and providing in local authorities and the NHS with councils arranging, buying, brokering and supporting services rather than delivering all of them 'in house'

Commissioner  
/ provider split

Greater  
involvement of  
the 3rd Sector  
in delivery

A greater emphasis on involving the voluntary and community sector in the delivery of a mixed economy of public services, and the emergence of newer models of independent delivery, for example social enterprises or mutuals

Empowering individuals and communities, including the "right to challenge" and "right to provide" - voluntary and community groups, parish councils and local authority staff will be able to challenge to take over the running of local public services

Focus on local  
communities  
and localism

Personalisation

Extension of personal budgets  
and payment by results

# So...

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- **How do you think your Health and Wellbeing Board is responding to / prepared for this different landscape?**
- **What are implications for the HWB of these national changes / drivers?**

## Ongoing challenges for HWBs?



- To drive forward efficiencies and improve outcomes.
- Facilitating the market.
- Aligning processes.
- Ensuring the right balance of investment.
- Finding new collaborative ways of working.
- Developing local partnerships.
- More targeted support.



## HWB partners will need to be:

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- Working together to integrate services around the end user; moving from command and control to influencing and facilitative leadership
- Leading the whole system
- Communicating the vision for all services/markets
- Cascading an understanding of health and wellbeing across all partners, including other parts of the council
- Securing effective engagement of service users
- Leading entrepreneurial thinking and service transformation
- Championing continuous improvement by remaining tenacious, open minded and challenging.





## High performing partnerships have...

### Purpose and Leadership

- Share a common vision and purpose, understood and accepted as important by each partner

### Outcomes and Customer Focus

- Always focus on outcomes and work together to satisfy the needs and expectations of customers

### Culture and Communications

- Promote 'can do' values and effective communications at all levels within the partnership and within partner organisations

### Learning and Innovation

- Continuously seek improvements in activities and ways of working, learning from each other and from elsewhere

### Management for Partnership Performance

- Put in place necessary management practices and resources, and manage changes needed to achieve partnership goals

# Working together on the board as HWB advocates

- As a board are you giving a consistent message and approach?
- Will external stakeholders get different messages depending on which board member they talk to?



- How might responses differ?

# How can you work more effectively together?

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**Have a think about how you could work more effectively:**

- **Across different partners (Council, CCG, Healthwatch)**
- **Across different disciplines (Adults Services, Children's, Public Health)**
- **Between elected members**



# How do board members influence each other?

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Consider the push-pull model:

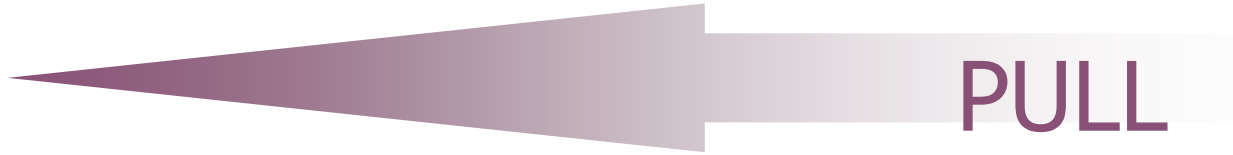
- Based on idea of pull and push energies
- Describes four positive influencing behaviours
- 'Push' behaviours are:
  - Rational persuasion – reason based
  - Stating expectations – assertive and explicit
- 'Pull' behaviours are:
  - Listening to others to understand their ideas and feelings and to build explicitly on that
  - Being open by sharing relevant facts, thoughts and feelings

Do you recognise the behaviours described in this model?

Can you think of examples?

## Which influencing style?

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### ■ Bridging – where...

- other's contribution is important to you
- other must be committed to outcome
- you are open to influence – final decision not yet made
- other will not lose out
- other is not upset

### ■ Attracting – where...

- you & other share common goals, values, aspirations
- other trusts & admires you
- other is unsure, directionless
- situation triggers important hopes, fears, values
- generating energy or sense of purpose is more important than other's specific actions

## Which influencing style?

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### PUSH



#### ■ Persuading – where...

- other respects your competence
- you have exclusive info
- alternative positions can be tested by facts & reason
- unemotional behaviour
- you are seen as objective, not competitive

#### ■ Asserting – where...

- both have a personal stake
- you have legitimate needs, requirements, expectations
- you can use pressures, incentives
- you are in control
- compliance is sufficient, not commitment
- other's need to control is low

# Thinking about these influencing styles...

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- Over use can be counter-productive
  - Too much push = aggression
  - Too much pull = passivity
- Which elements will be necessary at different stages or aspects of the HWBs work?
- What happens if we don't get these behaviours in balance?
- Which elements do you feel most comfortable with?



## Dealing with crises

It's important to distinguish between:

- an inconvenience (change of important board member for example)
- a failure (safeguarding?)
- and a crisis (systemic abuse?)



*“We live in the midst of alarms, anxiety beclouds the future; we expect some new disaster with each newspaper we read”*

**Abraham Lincoln**

**What's your nightmare crisis on the HWB?**

## 5 critical tasks in crisis management



Sudden

1. Sense making
2. Decision making
3. Meaning making
4. Terminating
5. Learning



Smouldering

Sudden crises are circumstances that occur without warning. Smouldering crises differ from sudden crises in that they begin as minor issues that, due to negligence, develop to crisis status. Should smoulderers be picked up risk management and regular monitoring? Any examples where this might not be the case?

‘Meaning making’ is really about how you frame / provide a narrative / communicate etc to the public what has happened (esp given there is often an assumption that you will be hiding something)

# Dealing with your nightmare

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**It has happened.**

**Discuss and record what you would do to:**

- **Understand what happened**
- **Ensure an appropriate decision is made of how to respond**
- **Communicate to the public and other stakeholders**
- **Resolve it**
- **Learn from it**

**What is your role in this?**

# This is one of six modules available to you. The other modules are...

## A. Introduction to HWBs for ward councillors

- Understanding key tasks of the health and wellbeing board, including the role of Healthwatch.
- Influencing the Health and Wellbeing Board

## B. Role of the Councillor on the HWB

- Understanding the different role and responsibilities of people on the HWB
- Building relationships with other stakeholders
- Exploring opportunities for joint working

## C. Leading and Chairing the HWB

- Agenda setting and planning when dealing with a diverse range of organisations
- Developing a workplan for the Board

## D. Focussing on HWB priorities in your area

- Understanding the Health & Wellbeing needs in your borough and the priorities set by the Board
- Exploring the key themes in delivering preventative services that reduce demand
- Ensuring the best use of resources in delivering services

## E. Managing relationships and responding to crises

- Exploring emerging agendas, and potential crisis points
- Approaches for responding to emerging agendas and crises
- Fostering good working relationships
- Developing collaborate working as Health & Wellbeing advocates

## F. Working with health

- Understanding the health contribution and governance
- Understanding the context and responsibilities of CCGs, LHIB, and NHS Commissioning Boards
- Overview of NHS budgets, and exploring what areas can be influenced