



FOREWORD



David Liddle CEO of the TCM Group and best selling author of Managing Conflict and

Transformational Culture.

Welcome to this eBook which has been designed for all NHS and healthcare organisations. As the NHS begins to build back after the pandemic, and as the focus is on resetting the NHS, this book argues that the focus should also be on respect and resolution. In other words, for the NHS to recover effectively from the past 12 months, and to be able to build for the future, it must focus on the three R's:

- Respect
- Resilience
- Resolution

The aim of this book is to shine a light on the urgent need for the NHS to reframe its current approaches for managing complaints, concerns, conduct, and conflict at work. Approaches which can at best be described as poorly designed and often poorly administered, to approaches which are dangerous, discriminatory, and woefully inadequate.

Having worked with the NHS and healthcare organisations for 30 years, I have spent my entire working life helping these organisations to integrate mediation and to develop a culture which is fair, just, sustainable, inclusive, and high performing - a Transformational Culture. I am a passionate advocate of restorative process, and I have witnessed the NHS slowly embrace and benefit from restorative processes, in an environment which still grips retributive justice (blame, shame and punish) so firmly.

The current focus in the NHS on respect and civility, and the amazing work of NHSE and people such as Chris Turner at Civility Saves Lives and Amanda Oates at Mersey Care, is shifting the dial. But it is not enough to drive the changes that we desperately need across the NHS. The received wisdom that we can drag hard working NHS staff through a formal performance, disciplinary and GBH (grievance, bullying and harassment) process, and expect them to come out of it the other side unscathed, is anathema. We can all see the harm they do, and the misery that these processes are causing. They offer an illusion of fairness and a mirage of justice. They do not protect the vulnerable, they undermine the human rights and the human needs of the most vulnerable within the NHS. It is not possible to apply a just or learning culture, or to call oneself a compassionate, progressive and humane leader, HR professional or union rep and still wield the destructive and insidious might of the formal processes on people who we know will sit at home sobbing for no other reason than: they fell out with a colleague; they dared to raise a concern; they tried to address poor performance; or they were the victim, or the alleged wrong doer, in an allegation of bullying or harassment.



This book offers NHS and healthcare leaders a new approach for handling these complex issues:

- A tried and tested Resolution Framework[™] to replace your traditional discipline and GBH (grievance, bullying and harassment) procedures.
- A Transformational Culture to replace the prevailing cultures of extensive inaction, or expensive overreaction.
- A new and exciting form of pluralism which unites leaders, unions, employees and HR in a connected and powerful alliance to make the NHS a safer and a better place to work.

This is an exciting opportunity for the NHS to think and act differently. Shifting from 'power over' to 'power with'. Recognising that adult to adult dialogue, compassion, respect and empathy are signs of strength and they offer some of the most powerful ways of holding ourselves and others to account.

Retributive justice has failed the NHS for far too long. It is time for a Resolution Revolution.

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A CRISIS IN HEALTHCARE

There's no doubt that workplace conflict is a serious issue in the healthcare sector – witness numerous press headlines over the past year alone about toxic working environments and bullying cultures. The impact of unresolved conflicts, complaints and concerns in the NHS is eye watering, the toll on hard working healthcare professionals is undeniable.

Sarah's story

Experienced nurse Sarah* was excited to be moving to a new ward in the hospital she had worked in for several years. A few weeks in, she noticed that procedures for drugs rounds were not always being adhered to and raised a concern with the ward sister. She had mentioned the issue with the best of intentions, but found it was met with anger and defensiveness, rather than as an opportunity to improve patient safety.

Before too long, Sarah's relationship with the ward sister started to deteriorate. Her work was constantly criticized, she was excluded from team meetings, given no flexibility over shift allocations and became aware that colleagues were deliberately being turned against her. Her attempts to resolve the situation informally failed, and she found herself hauled up before HR on a performance related issue. The worry and upset of the situation took a real toll on her mental health. She found herself unable to sleep, dreaded going into work and started having panic attacks. Six months after starting the new role she had so been looking forward to, she handed in her resignation. She has not worked for the NHS since.

The COVID-19 pandemic has exacerbated the problem. Staff are working under more pressure than ever before, battling against an unknown and deadly disease, often without the resources and support they need. People are stressed, anxious, frightened and tired. Emotions are heightened, and it's hardly surprising that relationships are being strained to the limit.

Health leaders have recognised the gravity of the situation and the impact it is having on both employee wellbeing and patient care. The latest iteration of the NHS Interim People Plan outlines some key initiatives that have been designed to create a culture of civility and respect and make the NHS "the best place to work".

There are plans to support managers in developing fair and inclusive environments where people are confident to speak up without repercussions, to wipe out bullying and to eradicate blame cultures.

These are all laudable initiatives, but one potentially transformational issue has been overlooked. Namely, the need for radical change in the way the healthcare sector handles conflicts, complaints and concerns.

The sector is still relying on antiquated, reductive and corrosive HR policy frameworks to deal with everything from minor fallouts between colleagues to serious allegations of misconduct. These policies are based around blame, shame and punishment – retributive justice, rather than the constructive, compassionate dialogue that helps people sort out their issues and get back to caring for patients.

At a time when the healthcare sector, more than ever, needs its people to be engaged and functioning at their best, we cannot allow this situation to continue. The health care sector urgently needs to embrace the restorative principles which underpin a fair, just, inclusive, sustainable and high performing culture – a Transformational Culture. It's time for HR, leaders and employee representatives to wake up and smell the conflict – and to radically change the way they resolve difficult issues. Changes which:

- Protect relationships and maintain trust, respect, and communication.
- Protect people's self-esteem and their dignity.
- Create psychologically safe places to resolve complaints, concerns and conflicts free from fear of retribution or retaliation.
- Reduce the stress, anxiety and trauma associated with traditional disciplinary and grievance procedures.
- Encourage adult to adult dialogue and remove the stigma of mediation and restorative principles.

STATISTICS AT A GLANCE

We must admit that we have hurt people. Staff are being harmed and we are doing this to them through our continual application of formal procedures. It's time to put the policies away and adopt a common sense point of view. Very few staff come to work in order to make a mistake. We must listen to what our colleagues have to say, allowing them to fully explain their circumstances, rather than being forced to try and prove their innocence. When things go wrong, the question shouldn't be who to blame, but who has been hurt by what has gone wrong?

NICKY INGHAM, EXECUTIVE DIRECTOR AT THE HEALTHCARE PEOPLE MANAGEMENT ASSOCIATION

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1IN 5 NHS workers are thinking about leaving the profession.

MORE THAN HALF

of NHS staff report a worsening of their mental health since the beginning of the pandemic.

72%

of staff are reluctant to raise a concern for fear of negative consequences.

ALMOST 3/4

of staff have reported being exposed to bullying, either as a victim or an observer.





FROM RETRIBUTIVE TO TRANSFORMATIONAL

In a highly complex and pressurised healthcare sector, it would be unrealistic to expect that conflict would never arise. And of course, not all conflict is bad. Respectful, healthy debate between colleagues is the key to finding new and innovative ways of tackling some of the massive challenges facing the sector right now.

The problem arises when people don't understand how to 'disagree well', and when managers don't have the skills to facilitate constructive dialogue in their teams.

If a disagreement on a ward or a clinic is allowed to fester, and is left unaddressed, people dig their heels in, positions become entrenched and normally supportive relationships between staff break down.

If something goes wrong in a clinical setting and the focus is on pointing the finger of blame, talented staff risk career-changing consequences and the opportunity to learn from mistakes is lost.

And let's not forget the impact on patient care of allowing a toxic atmosphere to take hold. Research from Civility Saves Lives shows an average 62 per cent drop in cognitive ability occurs when staff are exposed to rude, aggressive, belittling or undermining behaviour.

At times of trouble and strife, when people are already feeling anxious, upset and vulnerable, instead of treating them with compassion and trying to get to the bottom of issues, the typical response is to pull out the official disciplinary, grievance, bullying and harassment policies.

This is akin to pouring a bucket of cortisol over already stressed people. These formal procedures literally plunge people into damaging and divisive right/wrong, win/ lose mindsets. The reality is that no-one wins. Hours of HR time are wasted, valuable staff go off sick, and relationships are irretrievably broken. Those on the edges of the conflict are negatively impacted too. Morale plummets, productivity suffers and team spirit is broken. Everybody loses.

These tired, old systems provide a mirage of justice and an illusion of fairness. They have failed, and are broken and unfit for purpose in a healthcare sector that has been vocal about its promise to look after its people and foster a culture of psychological safety and belonging.



There is a better way

- We need to change the organizational dynamic from retributive to restorative. Where the instinct to blame, shame and punish, is replaced with a desire to learn, grow and improve.
- We need to shift the culture in the NHS from extensive inaction or expensive over reaction, to a culture that is fair, just, inclusive, sustainable and high performing – a Transformational Culture.
- We need to bring key stakeholders (HR, managers, unions and employees) together in a combined effort to put people and values firmly at the heart of the way the sector operates. A new and exciting form of organisational pluralism.
- We need to balance the need to manage risk with the need to instil confidence, courage, and compassion. It can be done but it requires a new way of thinking, a new vernacular and a new set of rules and processes which are used to manage the NHS.

TCM's ground-breaking Resolution Framework[™] can help the NHS and other health and social care organisations to make this transformational shift.



KEY STATISTICS AT A GLANCE

In 2016/17, almost 16,000 STAFF entered the formal disciplinary process within NHS trusts across England. The typical cost of one employee relations case equates to an average of £44,125 It is estimated the total financial burden of formal procedures to the NHS is **£706** MILLION per annum



THE RESOLUTION FRAMEWORK™: A PRACTICAL SOLUTION

A Transformational Approach

A leading NHS Trust recognised last year that its current HR processes were effectively providing a roadmap towards potentially dismissing people – rather than a route to resolving issues constructively so that staff could focus fully on their jobs.

The approach was causing division within teams and damaging relationships – and was also completely off kilter, given that only one to two per cent of the trust's cases actually ended in someone being fired. It was leading to a blame culture, and affecting motivation and engagement at a time when grievances within the hospital were also rising as a consequence of the extreme pressures caused by the Covid-19 pandemic.

The Trust took a decision to break away from traditional policies and to completely redefine the way it handled workplace conflict with the introduction of a ground-breaking Resolution Framework[™].

The new framework is designed to give managers the tools and confidence they need to resolve conflicts, complaints and concerns quickly and effectively. It replaces existing disciplinary, grievance, bullying and harassment policies and underpins wider efforts within the trust to create a fair, just and inclusive culture.

Introducing such a radically different approach has not been without its challenges. There were concerns about whether the framework would be legally compliant if challenged – and managers were worried that the process was too "fluffy" and relied on them to do a lot of work.

The Trust's legal team ensured the new process would be compliant with the ACAS code engaged with unions early to secure their involvement and commitment.

They are currently in the early days of implementing the new system, which they hope will help them get away from a blame culture and learn from problems instead. The TCM Group has helped over 300 NHS Trusts and health/social care organisations transform the way they respond to conflicts, complaints and concerns.

The hallmark of this work is our ground-breaking Resolution Framework[™], which replaces traditional disciplinary and grievance procedures.

The Resolution Framework[™] is a values-based, outcomeoriented and person-centred process. It promotes adult to adult dialogue and encourages key stakeholders to work together to reach resolution.

The framework gives users the ability to:

- ✓ Triage cases, using a tried and tested Resolution Index[™], which delivers objectivity, rigour and fairness.
- Identify an appropriate route to resolution, depending on the individual circumstances of each case.
- Increase their use of early resolution techniques, such as facilitated conversations, mediation and restorative justice.

The Resolution Framework[™] is compliant with the ACAS code and employment and equality legislation. Organisations who have embraced this approach are finding it is helping them to deliver high-performing, happier, healthier and more harmonious workplaces.



TCM really are the experts in the mediation field. I have worked with them several times and always get good results from them. David and his team always go the extra mile for you. If you do a costs benefit analysis, TCM are able to save organisations considerable amounts of money. It is also highly rewarding to see staff working together in a really positive way.

Steven Shaw, HR Business Partner at the Royal College of General Practitioners



How it works in practice

The diagram below illustrates the core elements of the Resolution Framework™.

The process is typically driven and managed by a **Resolution Hub™** - a multi-disciplinary unit who support the design, development, integration and evaluation of your Resolution Framework™.

The hub brings together HR, managers and employee representatives, all of whom work together to drive a culture of cooperative and constructive resolution of complaints, concerns and conflict.

The TCM Model Resolution Framework™

Local Resolution: attempts made to resolve issues as early and constructively as possible. Support and training is provided to encourage managers, union reps and colleagues to resolve issues as early as possible.

Request for Resolution (RFR) submitted to Resolution Hub™/Unit.

Resolution champion allocated. Route to resolution identified using agreed triage process (Resolution Index™)

Resolution assessment to determine appropriate route to resolution.



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Local resolution

In a highly pressurised NHS and healthcare environment, it is inevitable that conflict will arise from time to time between colleagues, clinical leaders and their teams and sometimes between staff and patients. Leaders may disagree about the way a particular unit should be run and which patients should be prioritised. Front line nursing staff may feel they are being bullied or harassed by a colleague or manager. Patients may complain that they are not being communicated with effectively.

We believe the first and most important step in resolving a concern, a complaint or a conflict in a healthcare setting is to have a prompt, informal conversation with the person that is causing the concern, to try to find an outcome that is acceptable to both parties.

The outcomes from local resolution may include:

- 🧭 A verbal resolution/agreement.
- An agreed action plan between the parties which sets out the nature of the agreement and the agreed timescales.
- A first and second reminder issued by the line manager.

Find out more about how local resolution works

What happens if people aren't prepared to talk?

The whole point of person-centred resolution is for the engagement to be voluntary. This is why it is important to show people the benefits of early resolution channels, and equally as importantly to assure them that the use of early resolution channels does not prejudice their case in the event they are still not happy. Our advice would be to reassure the party that this process does not waive any rights. Should the early resolution process not meet with agreement, the party is at liberty to escalate. Also remind them that the process is totally confidential to give them the chance to say all that they need to, and that they remain in control of any outcome – they cannot be railroaded into an agreement if they feel uncomfortable.

Submitting a request for resolution

In the event that local resolution is not successful, a request for resolution (RFR) should be submitted to the Resolution Hub[™] who will triage the case. The Resolution Hub[™] will then recommend an appropriate course of action.

Depending on the circumstances, this might include a facilitated conversation between peers, mediation, coaching, team facilitation or an early resolution meeting, resulting in an agreed action plan.

Find out more about requests for resolution

In one healthcare trust we have worked with, a grievance over a manager's style, was beginning to impact on patient care. After a team facilitation, colleagues were able to recognise that the manager's job was more complex than they thought, and that much of the conflict arose when they considered their own perspectives as paramount. The team was able to reconcile by agreeing that whenever there was a sense of unfairness, they would first have a direct informal meeting to understand the context. The manager, in turn, realised that by not communicating a bigger picture, she was limiting the capability of the team members to collaborate with her.



The Resolution Triage™

Once a request for resolution is received, a member of the Resolution Hub[™] will triage the case and identify the most appropriate route of resolution. The following factors, which make up the Resolution Index[™], will be considered.

- The seriousness, frequency and complexity of the issues being raised.
- 2. The impact of the situation
- 3. The needs and expectations of the parties.
- 4. Previous attempts to resolve the situation.
- Any perceived risks to the employees and/or the organisation.

Find out more about the Resolution Triage™

A recent triage exercise in a healthcare organisation highlighted that a bullying and harassment issue was leading to, among other consequences, stress related absenteeism. The shift manager was struggling to cover shifts and patient care was being directly affected. The organisation's Resolution Hub™ scored the case at a medium to high level, and recommended formal mediation. The party was not convinced, but after some discussions with the Resolution Champion allocated to the case, she agreed. Through the mediation it became clear that her own behaviours were contributory to the defensive approach from the manager, who was also feeling very vulnerable. In a tense but cathartic session, the two reconciled and were able to develop a strong relationship thereafter. When asked, the employee said that she had no idea so much could be achieved, in hindsight, so easily! Had she demanded the formal investigative channel, the relationship would likely never have been rebalanced.



Informal resolution

Early Resolution Meeting

Many workplace issues can be resolved at the Early Resolution Meeting stage. It provides an opportunity for managers and employees to discuss issues in a supportive and constructive forum. If those involved have not already tried to informally resolve their issue, they may be encouraged to have a direct conversation



with the other party to try to secure a resolution to the situation. If the involvement of a third party is required, this would lead to one of the other stages below.

Find out more about how Resolution Triage[™] works

Facilitated Conversations

The Facilitated Conversation is a confidential discussion between all parties which draws on the same principles as mediation. However, it is shorter and less structured than mediation and brings parties together at an earlier stage of the dispute. It provides a safe, confidential, environment where concerns can be discussed in a supportive, constructive way.

Most facilitated conversations are completed in half a day. The facilitation process is confidential, and the facilitators are trained to a high standard. They will remain neutral and non-judgemental throughout the process.

At a London based NHS Trust, a long-standing interpersonal conflict was brought to the Resolution Hub[™], who recommended a Facilitated Conversation, to take place over a half-day. The parties had previously collaborated well, until a specific incident, after which there was overt hostility between the two. As soon as the more senior party had the opportunity to listen to the hurt that had been caused, she was immediately able to explore, with the help of the facilitator, where the root cause lay. Following an open apology, the two were able to work out a way to deal with any breakdowns in the future. Simultaneously, the senior party in the conversation was able to point out where she had been affected, allowing both to understand that the problem lay not within them, but with a communication breakdown they had never felt able to explore on their own.

Find out more about how Resolution Triage[™] works

TCM

Mediation

Mediation is a more in-depth resolution process which is proven to be highly effective at resolving workplace disputes, disagreements, complaints or concerns. It is a voluntary and confidential process. If all parties agree to take part in mediation, the issue will be referred to an external, accredited mediator. The mediator will contact both parties by phone and explain the principles and processes of mediation. The mediation process includes:

- A phone call with the mediator(s).
- 🔗 Two separate private meetings with the mediators(s).
- 🧭 A facilitated face to face meeting.
- \checkmark Reaching agreement and closing the meeting.

Most mediations are completed in one full day, although it may take longer if more than two people are involved.

Some organisations choose to set up internal mediation schemes and train a cadre of accredited mediators who can manage cases. East London NHS FT, West Midlands Ambulance Service and James Paget University Hospitals NHS FT are among organisations who have gone down this route.

What if people involved in a dispute refuse to go into mediation?

Mediation must be recognised to be absolutely voluntary. Our advice is to re-explain the essentials – that mediation is a voluntary process, that it is absolutely confidential, that the parties remain in control, and that no rights to further action are eliminated, should the process not result in a genuine agreement. The presence of an impartial mediator plays an important role.

If this discussion remains unsuccessful in at least getting the parties to "give it a go", you could explore other supportive mechanisms, such as inviting a chaperone to sit in on the mediation process.

Find out more about how mediation works

Formal resolution

In an ideal scenario, workplace issues would be resolved through the options described above. A formal process is, however, available where this has not been possible, due to the complexity or serious nature of the complaint, or unsuitability of other approaches.

This process will be co-ordinated by the Resolution Hub[™], who will appoint a chair to manage the next steps, which may include one or more of the following:

Investigation/fact finding

- 🏹 🛛 A referral back to mediation
- Formal Resolution meeting with the right to appeal the outcome
- Referral to an alternative policy/procedure.

The outcome of a formal resolution hearing or appeal will be confirmed in writing, without delay, after the meeting.

What to expect from a formal resolution process



Investigation / fact finding

If an issue is particularly sensitive or complex, an investigation may be appropriate prior to the formal meeting. The purpose of the investigation is to discover all the relevant facts and information in a fair, reasonable and objective manner. Investigators will be trained, unbiased and neutral without personal or close professional links with the main parties or any other perceived conflict of interest with the case.

Once the investigation is concluded all the evidence will be analysed objectively and with impartiality by the investigator and presented in an investigation report for use by the Resolution Unit and/or chair of the formal resolution meeting (see below).

At one healthcare organisation, pressure of day-today work was making it difficult to assign managers to investigations, which ultimately was leading to delays in responding to complaints. To improve the response to complaints and reassure staff that investigations would be acted upon promptly and fairly, the organisation asked TCM to support it by providing an external investigation service. This has ensured investigations are conducted impartially and that outcomes are fair and unbiased. The relationship has also led to general improvements in policy and process.

More about the investigation process

Deciding the outcome

Following the formal resolution meeting, the chair will review the facts and decide the outcome and recommendations for resolution. Decisions will be communicated in writing and, where appropriate, will set out what action will be taken to resolve the issue.

Right of appeal

Parties have the right of appeal against the outcome of the formal resolution meeting within five working days from the date of notification.

Grounds for an appeal might include:

- Procedural errors where there is evidence the process was incorrectly followed
- New evidence has come to light that may change the outcome of the original decision
- · Fairness and reasonableness of the outcome

Appeals should be heard without unreasonable delay, where possible, by a manager who is senior to the chair who made the original decision and from a different part of the organisation. At the appeal meeting, the appeal manager will clarify their understanding of the basis for the appeal and ask relevant questions. Through discussion, they will explore solutions and attempt to achieve resolution. The decision of the appeal manager will be conveyed in writing and will be the final stage of the process.

How right of appeal works





How it works on the front line

Organisations including the Solent NHS Trust, Chelsea and Westminster Hospital, London Ambulance Service and Northumbria Healthcare Trust are embracing this new approach. It is a radical move, but one that encourages healthy, restorative dialogue and underpins development of a fair, just and inclusive culture. The following case study shows how a resolution approach is working in practice at the Royal College of Paediatrics and Child Health (RCPCH).



CASE STUDY: Royal College of Paediatrics and Child Health

An informal approach to resolving workplace conflict is helping the Royal College of Paediatrics and Child Health (RCPCH) develop a collaborative, progressive workforce in support of its aim to transform child health around the world.

The RCPCH has 19,000 member paediatricians, supported by a staff of 165, and plays a major role in postgraduate medical education, professional standards, research and policy.

The organisation places strong emphasis on having a fair and just culture where employees are able to engage in constructive debate and solve any concerns or complaints that may arise through open, respectful dialogue.

The first step to establishing this collaborative approach was a reframing of the organisation's formal grievance procedure – a move instigated by Director of People Louise Frayne, who was concerned that a 'blame culture' may take hold.

"There wasn't a particularly high level of grievances when I joined, but there were a lot of unhappy staff and a great deal of griping going on beneath the surface," she said. "As a relatively small organisation, we can't move people around. If you are aggrieved with someone you are still going to have to work with them, so it was important we found ways to nip issues in the bud and rebuild relationships."



RCPCH introduced an over-arching resolution policy, which required employees to demonstrate they had tried all avenues to sort out their differences informally before making a formal complaint.

To support the shift, three of the HR team trained with The TCM Group as mediators, so that they could facilitate conversations between staff who had fallen out with each other and help get relationships back on track.

"We really wanted to avoid having to go through lengthy grievance processes because there is never a winner," said Louise. "It dilutes trust, leads to a lot of bad feeling and inevitably there is a ripple effect with other people in the team being affected."

Since the introduction of the resolution approach, the majority of mediations have been conducted internally, although in a few particularly challenging cases, RCPCH has called in professional external mediators from The TCM Group.





CASE STUDY: Royal College of Paediatrics and Child Health (continued)

"Just having that independence and objectivity has meant we've been able to progress some really difficult conversations and get people to take a step back and think about things from each other's perspective," said Louise.

The RCPCH places a strong emphasis on all its managers also having the skills to facilitate constructive dialogue themselves, and has made training in conflict management and difficult conversations mandatory as part of its management development training.

"We stress to managers that if conflict is well managed, it has huge benefits in terms of being innovative and creative, because you are able to get everyone's views on the table. Just because a direct report doesn't agree with you, doesn't mean they are wrong," said Louise.

The organisation has also trained nine of its staff as mental health first aiders, a move which the organisation believes has also had an impact on the number of people pursuing complaints, as staff are able to reach out confidentially and discuss issues.



Having experienced mediation herself in a previous role, Louise is a strong advocate of the process. **"I really do** believe in it – and if more organisations would embrace it, they would not only save themselves time and money, but would be able to improve engagement, enhance goodwill across the organisation and develop high performing teams."

She believes the shift to a resolution approach has been transformational for the RCPCH, and has meant the organisation has been well placed, with focused, supportive staff, to deal with the challenges of the Covid-19 pandemic.

"We have developed a very open and transparent culture where people work collaboratively and respect each other's opinions, even if they don't agree with each other. It's a very modern, progressive place to work."





Louise Frayne, Director of People, RCPCH

MAKING THE BUSINESS CASE

If a Resolution Framework™ is to achieve its full potential, it needs endorsement from the top, as well as support from across the wider organisation. Leaders may well buy into the ethos and principles of a resolution-focused approach, but they will also want to understand the implications, costs and benefits before giving their full approval.

There are some key steps to building a strong business case:



Setting out a clear and compelling **VISION** for the shift in approach the cultural transformation will help to achieve.



Presenting **EVIDENCE** of the need for change (i.e. how much is managing conflict currently costing the organisation? What is the data about staff absence, employee engagement and turnover telling you? What is the impact on customers and the risk of reputational damage?)



Exploring how a resolution-first approach supports the aims of the organisation's **HR STRATEGY** (the NHS Interim People Plan, for example, stresses the need for HR to drive efforts to develop fair, just and inclusive cultures).



BENCHMARKING your organisations key people metrics against other health sector organisations who have implemented a Resolution Framework[™].



Engaging **KEY STAKEHOLDERS** in the development of a tailored Resolution Framework[™] from the earliest possible stage.



SCOPING the project and the internal and external resources that will be needed to bring it to fruition.



EMPOWERING LEADERS AND MANAGERS

Managers play a vital role in creating fair and just cultures where conflicts, complaints and concerns can be resolved informally and collaboratively.

Sadly, however, many lack the confidence and skills to facilitate dialogue in their teams. They are ill equipped to manage the difficult conversations and high emotions that characterise workplace conflict. They worry that if they intervene they may exacerbate the problem or fall foul of employment legislation.

This skills gap is borne out by recent research from the Chartered Institute of Personnel and Development (CIPD). When employees were asked how effective their manager was in dealing with conflict, one in three said the manager's involvement actually made the situation worse.

If health sector organisations want to transform their culture and look after their people, they need to invest in developing the courage and competence of their managers.

Leaders need to be able to:

- Promote a culture of co-operative and collaborative problem solving
- Role model the behaviours they want their people to demonstrate
- Understand the difference between functional conflict and dysfunctional disputes
- Spot the signs of conflict arising so they can intervene early
- Facilitate compassionate and respectful conversations between their employees, using techniques such as mediation.
- Develop their understanding of core principles such as positive psychology, emotional intelligence, nudge theory and Non Violent Communication (NVC), so they can draw on these to support development of fair and just cultures.

Investing in developing these skills will have benefits way beyond just dealing with conflict. The principles of mediation, for example, can be applied to the way managers lead their people and negotiate and communicate with colleagues.

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Medical care is complex and difficult and we need to have people who know how to handle conflicts and concerns kindly," he says. "It's a tough skill, but one that people can be trained in and if you instil that approach into your managerial and supervisor training, it morphs from being something that is part of your HR process into something that can directly improve healthcare.

CHRIS TIPLADY, CONSULTANT HAEMATOLOGIST, NORTHUMBRIA HEALTHCARE TRU

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Taking the grief out of grievance: An action plan for NHS and healthcare professionals

Thank you for working your way through the content of our E-Book. We hope that we have inspired you that transformational change is possible. A change that is fully legally compliant, yet person-centred.

Many healthcare organisations are well on the way to making such changes. For others, we understand that embarking on such a journey may involve large-scale change within your organisation. We are here to support you on that journey.

FREE RESOLUTION FRAMEWORK

In celebration of our 20th Anniversary year, we have made the decision to make the Resolution Framework[™] freely available to all healthcare organisations across the UK.

You can request your FREE copy here

There are no strings attached, the Framework will be yours to keep, and we very much hope that you are able to put it to good use.



After you have received your copy of the Resolution Framework, we suggest that you work through the following key steps, to ensure that your move to a resolution-first culture is a successful one:

- 🕑 Develop the business case
- У 🛛 Engage your stakeholders
- Create a Resolution Policy and embed co-operative resolution into other relevant policies and practices
- Train HR, union representatives and managers in conflict management skills
- Recruit, select and train a multi-disciplinary team of in-house mediators
- Publicise and communicate your new resolution scheme
- 🧭 Measure, evaluate and report on its ROI

Some organisations may be equipped with staff with the necessary skills, knowledge and available time to make these changes of their own accord. Others we find, benefit from working alongside The TCM Group, with varying levels of support.

We have a team of expert consultants, with a wealth of experience working in the healthcare sector. Please contact us today if you would like us to support you with any of the areas outlined above. We are also available to answer any questions you may have, in relation to the Resolution Framework[™], and beyond.

We wish you the very best of luck on your journey to creating a happier, healthier, and more harmonious culture within your healthcare organisation.

RESOURCES

A unique range of NHS and healthcare sector-specific training courses

In recognition of the unique challenges posed for those working within the healthcare sector, we have developed a portfolio of sector specific courses, tailored around the likely scenarios your staff will encounter within their dayto-day roles. These will assist in the development of leaders and HR staff who are equipped to succeed in their roles under the Resolution Framework[™]. We help support clinical teams to become able to perform at their very highest, while remaining resilient to conflicts.



The National Certificate in Healthcare Mediation

Developed as the UK's first ever fully accredited mediation skills programme, designed specifically for NHS and Healthcare organisations. Delegates will become equipped to mediate even the more complex disputes, involving staff and/or patients.

Duration: 5-6 days Delivery: Online or face-to-face for in-house groups

View details



Practical Investigation Skills (for Healthcare)

When more serious issues arise within your healthcare organisation, you'll need staff who are trained to deliver a fair, thorough and robust investigation. When training your staff on the UK's first ever fully accredited healthcare sector-specific investigation skills training programme, you'll ensure you get your investigations right, first time of asking.

Duration: 2 days **Delivery:** Online or face-to-face for in-house groups





Confident Conversations (for Healthcare)

Our highly interactive communication skills training course equips leaders across all disciplines to respond to difficult situations calmly and confidently. These skills are central to a healthy conflict culture, where issues are resolved in their earliest stages before they have the danger of impacting upon patient care.

Duration: 1 day Delivery: Online or face-to-face for in-house groups



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View details

Engage Leadership: A unique range of leadership and management development programs

An effective leadership approach enables conflict to be resolved in its earliest stages, and very often, prevented. A good healthcare leader will role model the behaviours they expect from their employees, driving high performance and behaviours in line with the values of your organisation.

Engage Leadership is a complete suite of leadership and management development programmes, training and consultancy services. We support leaders at all levels to develop the confidence, competence and courage to engage their teams for sustained high performance. We offer a wide range of short courses on key leadership topics, in addition to longer-term modular leadership programmes, which can carry Institute of Leadership and Management (ILM) accreditation.

Supporting the development of the Resolution Hub™

Under the Resolution Framework[™], the Resolution Hub[™] will become the multidisciplinary team, representative of the various levels of seniority and diversity within your organisation. In order to succeed in their role, we would recommend that a level of formal training should be rolled out across the entire team. We have carefully tailored two training courses, designed to develop the specific skills needed to succeed as a member of the Resolution Hub[™].



Routes to Resolution

A 2-day programme designed to equip trainees with the skills and strategies to identify the most appropriate resolution method for each unique case. Trainees will develop a full understanding of the Resolution Framework[™], and the conversational skills to support parties through its processes.

View details



HR as Coach & Mediator (for Healthcare)

This 2-day course provides delegates with the skills to respond calmly and neutrally to the various stages of conflict. We use the very latest coaching principles to enable trainees to support managers involved in resolving conflict amongst their teams.

View details





ViPAR: Violence Prevention and Resolution for Healthcare Professionals

The World Health Organisation estimates that up to 38% of healthcare workers suffer physical violence at some point in their careers. Many more are subjected to verbal abuse and aggression. We developed this unique program to support healthcare employees under their duty to protect staff from threats of violence at work. Trainees will develop the conversational skills to prevent and resolve risks of violent behaviour.



REFERENCES

The following books, texts and organisations have provided the backdrop for development of the Resolution Framework™.

Managing Conflict: A practical guide to resolution in the workplace, David Liddle.

Just Culture: Restoring trust and accountability in organisations, Sidney Dekker.

Discipline without Punishment: The proven strategy that turns problem employees into superior performers, Dick Grote.

The Fearless Organisation: Creating psychological safety in the workplace for learning, innovation and growth, Amy C Edmondson.

The Human Moment: The positive power of compassion in the workplace, Amy Bradley.

Systems Thinking for Social Change: A practical guide to solving complex problems, avoiding unintended consequences and achieving lasting results, David Peter Stroh.

Interim NHS People Plan

https://www.longtermplan.nhs.uk/wp-content/ uploads/2019/05/Interim-NHS-People-Plan_June2019. pdf

Being Fair: Supporting a just and learning culture for staff and patients following incidents in the NHS, NHS Resolution

https://resolution.nhs.uk/wp-content/uploads/2019/07/ NHS-Resolution-Being-Fair-Report-2.pdf

Civility Saves Lives www.civilitysaveslives.com



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Please contact us for more information:



Call: 0800 294 97 87 +44 (0)20 7404 7011



Suite 206/207 Business Design Centre,

52 Upper St, London, N1 OQH



Email: info@thetcmgroup.com



Website: thetcmgroup.com