Six ways to create a culture for integration

The six ways to create a culture for integration have been developed in partnership to help systems understand how they can create an environment where integrated working can thrive.

It's important to acknowledge that integrated care systems (ICSs) are at various stages of development. What unites all ICSs is the need for individuals from different organisations to work collaboratively to create a culture where integration can thrive. We have been engaging with partners across health and social care to learn what is most important in attaining a positive culture, how we can bring it to fruition, and how we can benefit from hearing and working with the diverse roles across our sector. Our six ways were drawn from systems currently planning and developing integrated working and collated by NHS Employers and Skills for Care (SfC).

In October 2022, we published the guide Integrated workforce thinking across systems which offers tips and insights to help system leaders start thinking about integrated working. Since the publication of the guide, we have received feedback from members that building the right culture and creating strong relationships can sometimes be difficult to achieve but presents new opportunities if done well. That is why we have created a resource to prompt thinking and to provide the tools we feel

are needed to create a culture that supports collective and collaborative action, working beyond traditional teams and organisation boundaries.

We extended our engagement and collaborated with more partners to explore the impact that peak demand has on people and partnerships, with colleagues from a wide range of organisations/sectors including, community health, acute, primary care, mental health, system organisation development leads, integrated care boards (ICBs), NHS wellbeing leads, residential care, domiciliary care, voluntary sector and the learning disability sector. This collaboration allowed us to bring a wide range of experience and expertise to the table. The quotes detailed throughout the six ways are pulled from our two round table discussions where we discussed how peak demand impacts both the people and partnerships.

In the 2023 Hewitt review into integrated care systems: An independent review of integrated care systems, Hewitt stated: 'ICSs represent the best opportunity in a generation for a transformation in our health and social care system. Effective change will require the combination of new structures with changed cultures. Everyone needs to change and play their part. It is important to create the right culture for integration and encourage health and social care to work together. An integrated approach to health and social care provides people in communities with a better quality of life, rather than a service.'

ICSs are partnerships of organisations that come together to plan and deliver joined-up health and social care services to improve the lives of those who work and live in their community. Included in ICSs are the Integrated Care Partnership (ICP), ICB, local authorities and place-based partnerships that design and deliver integrated services across their localities or neighbourhoods.

Collaboration is not enough, organisations and the people within them are the system and they need to invest time in building meaningful relationships across different teams and organisational boundaries. Genuine partnerships and

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collaborative working with shared outcomes can help build a culture that truly improves the quality of life for people who draw on care and support:

"Ensuring we have strong relationships is where we focus our energy, so we know that when things get tough, we can work together effectively."- ICB CPO network member.

Achieving a culture that improves integration and builds trust in the complexity of the health and social care system can be challenging. This resource shares tips on how ICSs and the people who work within them can begin to work towards this goal.

1. Be prepared to experiment and learn together

ICSs are still evolving; therefore, it is important to be open to new ideas to find what is going to work for your system. All ICSs vary in population size, health needs, and geographical scale, as well as in rural, coastal, and urban challenges. This means that what works for one ICS might not work for another. Bearing this in mind, it is important to adopt a test and learn mindset, as what works for your system may take some time to achieve. To do this, we must ensure that we move away from a historical way of thinking to become more innovative in ideas and how we work.

It is important that we work together, learn from our mistakes, and share what we do and how it went, to enable others to build on this and make further improvements. Innovation often happens when there's no budget, where leaders encourage staff to risk trying new things, even if they fail. Being part of a learning community enables us to avoid some of the pitfalls and achieve more than we can on our own. This test-and-learn and share mindset should still be developed on sound governance but not on restrictive compliance.

"Current policies make people anxious about who is responsible for risks, especially in a crisis. We need processes that encourage shared responsibility instead of shifting blame." – focus group member.

"During stressful times, people tend to stick to familiar methods out of fear and lack of time, which limits creativity and trying new things."- focus group member.

"There's a training gap in how workers and partners see and handle risks, especially during busy times. This includes understanding unusual risks."- focus group member.

Top tips

- Share best practice across the system through innovation champions, community of practice, peer group coaching and mentoring, sharing and learning sessions and training and development opportunities.
- Implement joint training in risk management.
- Enhance risk management training - shared ownership of risk: current policies make people anxious about who is responsible for risks, especially in a crisis. We need processes that encourage shared responsibility instead of shifting blame.
- Foster creativity and collaboration in multi-disciplinary teams (MDTs) meeting to discuss the impacts of risk decisions
- Team understanding and trust: MDTs help members understand each other's roles and perspectives, fostering diversity, mutual respect, and trust.

Case studies

Humber and North Yorkshire ICB

Find out how Hull and North Yorkshire ICB integrated their health and social care services to establish a centre for frailty to meet the needs of their population in this

case study: [A place to meet the needs of people living with frailty: Jean Bishop Integrated Care Centre.](#) This idea was born from the team agreeing to test a new way of working to meet the needs of their elderly population. This model around frailty has been recognised as a great piece of work that is being adapted in other areas across Hull and North Yorkshire.

Surrey ICB

Surrey ICB has created a clear shared vision for health and social care integration, focusing on ICS and digital/data initiatives with a strong emphasis on collaborative workforce strategies. They developed a three shifts model for preventive care to address workforce and budget challenges.

To do this, an innovation fund was secured and supported by the council, which facilitated the development of a co-created strategy with equal input from various sectors. They launched this in July 2022, and since then, the strategy has seen mostly positive outcomes from 32 pioneers. Key learnings highlight the importance of cross-sector collaboration for cultural change, the impact of small funding on innovation, and the need to scale successful initiatives.

One of the most successful pioneer programs in Surrey involves the use of acoustic monitoring in care homes. This non-intrusive digital system enhances resident safety by using sound detection to alert carers when a resident moves or makes noise, allowing staff to respond quickly to potential issues like falls without needing regular checks. Since implementing this technology, falls have been reduced by 50 per cent, lowering hospital admissions, improving safety, and allowing for more efficient care by freeing up time for personalised attention. This system has significantly improved fall rates within Surrey, alleviating pressure on the wider system.

2. Have a clear shared vision

Person-centred care is a key principle that brings services together. From this, it is important to develop a shared purpose and agenda. Developing some objectives

around what you want to deliver together can help you create a shared vision. Agree and understand that relying on the same approach will not provide the necessary results for an integrated system. It's vital to have good leadership and a statement of purpose or vision that focuses on improving integration, working collaboratively and planning together. This should be communicated clearly through integrated care systems along with shared performance indicators. Partners should embrace and adopt person-centred care as the principle for working together, and this should be the focus for all policy and practice solutions.

"Make sure people who access care and support are at the centre of what you do and enabling choice and control."- focus group member.

"During COVID-19, there was strong unity, but now people are focusing more on their own organisations. It's important to keep working together."- focus group member.

Creating a shared vision is crucial as it ensures all partners are aligned and agree on their goals. When partners set a shared goal, they can work together more effectively to achieve it. The pandemic helped break down siloed working, leading to greater collaboration within the health and care system to provide safe and effective care. Feedback has shown that this collaborative approach was successful because everyone was working towards the same goal. However, since then, historical ways of working have resurfaced, creating barriers to integration.

To overcome these challenges, it's important to focus on what each person needs and how to ensure they receive the care and support necessary for a good quality of life. Integrated working is highly beneficial to the workforce as it allows for the sharing of skills and strengths that others may not have.

Top tips

- Focus on the individual receiving care and support. What are their needs? What would be the best outcome for them? How would they feel about integrated services? Use this as the starting point for your approach.
- Improve communication: clear and accurate communication is crucial for building trust and morale, especially during busy times.
- Focus on individual needs: ensure all parties work together to support individuals effectively, rather than viewing them in isolated terms based on their specific conditions.

Not sure where to start? Access our self-reflection tool, which encourages you to explore your own behaviour and culture and see how they might be impacting services and person-centred care.

Case studies

Devon ICS

Read this case study from One Devon: Devon ICS' approach to integrating their workforce across the system to find out how Devon ICS established the One Devon partnership, to transform care for people who live and work in their communities now and for future generations.

Humber and North Yorkshire

Humber and North Yorkshire 180 Days of Action identified practical solutions for common challenges. Humber and North Yorkshire - care connected and 180 days of action 2024

Staffordshire Stoke on Trent ICB

Staffordshire and Stoke-on-Trent ICB are fostering a culture of experimentation and learning. To do this, they are working collaboratively across three NHS trusts, several GPs, two local providers, and social care providers to ensure that everyone has been included. The system uses volunteers and a people hub to

support the whole workforce, including bringing back retired staff through a national scheme to assist in various roles such as GP practices and vaccination centres during periods of peak pressure such as sickness, the summer holidays and flu/COVID-19 outbreaks.

The ICB has championed their health and wellbeing offer with a psychological wellbeing hub, a catalogue of resources, and training needs. They aim to develop a system where support is easily accessible, including information on walking groups and other resources. The health and wellbeing (HWB) steering group is addressing issues like anxiety, burnout, and stress through resilience training, which is being implemented to support staff better. This offer is targeted at all staff within the health and social care system, with social care staff being invited to attend wellbeing days in hospital bases.

Further reading

- [NHS England - Building a shared purpose and vision](#)
- National Voices' [A narrative for person-centred coordinated care](#) provides a definition of what good integrated care and support looks and feels like for people.
- [Person-centred approaches in health and care](#)
- [Self-reflection toolkit](#)

3. Set the tone

Integrated working allows you to do things differently. We are all limited by our existing experiences so taking a step back to think about different approaches and how working together will encourage a shared sense of identity and belonging.

It's important to be clear on what we mean, from a language perspective to both colleagues and the individual being supported, to share accurate information, being clear on roles and responsibilities through a shared statement of purpose - avoid 'it's not my job' and focus on the outcomes for the individual – if this were a member of my family what would be their aspirations?

Maintain respect so that we don't lose sight of the strengths and talents that each partner can play in supporting someone to achieve their outcomes, including that individual themselves – set this tone in your behaviours.

We need to write the narrative, lead by example and focus on prevention and shared goals around outcomes for an individual. Ensure language is accessible and responsible, with consideration given to the impact of language like 'bed blockers' and 'corridor care' on morale.

"It's always important to ensure that everyone understands what we saying, especially the person receiving care or any one part of the system... this can cause a barrier to integrated working."- focus group member.

Attention should be given to identifying jargon, breaking down system speak, acronym busting and creating effective communication systems. This focus on language should be applied when developing strategies, recording minutes, sending communications, meeting discourse and inviting views and feedback. Integrated working should be anchored on person-centred care.

"The most successful teams are also those which foster leadership and accountability at every level, and where everyone is encouraged to be an agent of something bigger than themselves." The Messenger Review, 2022.

Case studies

Leeds ICS

Leeds Health and Care Academy brings together the design and delivery of learning and development opportunities and collaborative workforce projects for all health and social care staff and organisations across the city of Leeds. The Academy team have found that fostering a sense of shared purpose and accountability has helped to unite its partners and worked to ensure that health and care initiatives across the city are truly inclusive and collaborative at every stage.

Further reading

- Access NHS Employers DoOD OD practitioner and culture change toolkit which provides a variety of questions to inspire thinking on culture change.
- Read Michael West, senior fellow at The King's Fund blog on Psychological safety, compassionate leadership and inclusivity in teams.
- Caring To change: how compassionate leadership can stimulate innovation in health care | The King's Fund
- IHI framework for improving joy in work

4. Get to know each other and understand each other's worlds

Getting to know one another increases the likelihood of successfully navigating difficult challenges and resolving issues together. Remember that you are planning for the workforce in a complex system and that no one person understands all areas of it.

Everyone has their own map of the local area that they live and work in. For example, some people's maps will put the local hospital at the centre of the map with everything else feeding into the hospital. Other people's maps might put a small social enterprise in the centre and not even refer to the hospital. Both maps are valid based on the perspectives of those who created them. However, when we overlay these maps, we can identify new opportunities for collaboration by recognising each other's perspectives and service needs.

To make sense of these maps, you need each to understand the other's knowledge, understanding and different ideas and perspectives. Focusing on the person who draws on care and support and the lives they want to live means creating space and time to understand their individual needs as part of any multi-disciplinary conversations.

"It's important to spend time getting to know one another outside of peak demand times, do not underestimate the importance of this, go out and shadow a colleague from another sector or look for an invitation to an existing network" – focus group member

"I can't book you an appointment today because we've closed our lines - all our appointments are full, ring back tomorrow between 8am and 11am."- focus group member

"It just really struck me that most of us have no idea what each other's legal responsibilities are, and the frameworks that govern our practice. This can impact on

relationships if you have to start by saying, 'I can't do this because of X'."- focus group member

"Offer joint training opportunities from leadership programmes, rotational apprenticeships and shadowing, to themed multi-agency networks – it's a place where you can find out what each other does without any pressure."- focus group member

Case studies

Belong Morris Feinmann

Read this blog from Chloe Wynn, a registered manager at Belong Morris Feinmann, on how she believes integration and collaboration between health and social care can prevent hospital admissions and result in a higher standard of care for those being supported. Chloe followed the journey of a 92-year-old person with dementia as they travelled through the department over the course of 15 hours to receive treatment. Access the full case study on the SfC website.

South Yorkshire ICS

South Yorkshire ICS has revolutionised local healthcare with a coordinated approach. This case study highlights their innovative efforts, fostering collaboration among professionals to enhance care quality, streamline services, and address health inequalities, benefiting the community.

Further reading

- Building trust between social care and health organisations - top tips to help you build effective relationships and refine current ways of working with different organisations in your integrated care system.

5. Use data to facilitate the conversation and prompt discussion

Gaining insight into the health and social care needs of your community through population health data is an effective approach.

Data comes in many forms and everyone will interpret the data slightly differently depending on their own experience and confidence with using it.

Each ICS is different with different populations and differing needs. Workforce data alongside population health data can help identify workforce gaps and prepare for future demand. Factors such as the presence of rural or coastal areas with high retirement populations may result in increased demand for care homes and hospital admissions for vulnerable patients. Alternatively, if your system consists of more urban areas with higher student populations, the demand for mental health services may be greater.

When we start digging, we can become overwhelmed by the volume of data available from different parts of the system or that some data isn't available or it's collected in different ways. There is value in collective discussion about what data we want and why, getting everyone around the table to have a conversation to increase people's understanding of the data.

When we expect people to give us data on a particular issue without explaining to them what we are going to do with it, this can lead to a reluctance to share and less effort being made to ensure the data is accurate.

"When we fail to explain what the data means to us and to understand how it may be interpreted differently by colleagues in other parts of the system, misunderstandings can arise, making the data less helpful than expected."- focus group member.

"Trusting relationships are essential for effectively sharing data, as they determine what data is shared, when it is shared, and how it is interpreted."- focus group member.

Case studies

NHS Black Country ICB

NHS Black Country ICB have developed their joint forward plan. Access the plan on their website.

Sussex ICS

The adult social care workforce data set from Skills for Care has been valuable in facilitating discussions among health and social care partners within the ICS in Sussex. Because of the different structures and funding sources involved, it can be challenging for those less familiar with adult social care to understand the wide range of individuals that comprise the social care workforce. Read about the case study on the Skills for Care website.

Further reading

- Take a look at the data section in our Integrated workforce thinking guide for information and links to further resources on how to provide a shared understanding of the challenges across the system.
- Skills for Care workforce data ICB area summary reports

6. Share your challenges and your strengths

By bringing people together from different parts of the system and providing the opportunity to set out their challenges and strengths, you achieve two important things. It will give you a good sense of where you are across the system and help

to create a sense of connection between people as they recognise they have more in common than they have that is different.

"In sharing my challenges, I found out that lots of people had the same challenges."- focus group member.

"By listening to my colleagues, I discovered strengths I didn't know I had."- focus group member.

Top tips

- Create a culture that allows people to make mistakes and to take risks, acknowledging that not everything will work the first time and knowing that you need to invest a lot of time to create a better culture.
- Take time to understand each other's challenges and strengths.
- Be aware of how your status and place in the systems hierarchy impacts people's willingness to share their challenges and strengths.
- Take time to understand how people's cultural heritage impacts how they approach challenges and understand their strengths.

Activities

We've designed a selection of activities for you to explore with your teams and partners, aimed at fostering thoughtful discussions about your culture. Before diving in, we recommend setting clear ground rules to ensure a productive and respectful experience. These activities are versatile and can be carried out either one-on-one or in small group settings.

Activity one

What makes collaboration work for you and me?

Allocate 45 minutes to do this.

1. Write down three words that describe how collaboration works for you.
2. Write down three words that describe how you support others to collaborate with you. (five minutes to do these two exercises)
3. Share your words with another person and ask them to share their words with you. (25 minutes)
4. Discuss as a whole group and ask how we can improve how we collaborate with each other. (15 minutes depending on the size of the group)
5. If doing this in a group, ask people to share their reflections on the exercise. They don't have to share the details of their one-to-one conversation.

Activity two

Do different partners have shared goals, and can we align them?

NOTE it's important to establish ground rules before starting. This activity can be done one to one and in small groups.

Allocate an hour to do this.

1. In pairs imagine a day in five or ten years, when you've successfully achieved integrated working. Describe what you can see, what it feels like, what conversations are happening etc. (10 minutes)
2. In pairs think about how you would describe this from different perspectives, e.g., the person with care and support needs, someone working in the system, a leadership, practitioner, support worker, or organisation/system perspective. (20 minutes)
3. Use these questions to guide your discussions.
   - What has changed?
   - What has stayed the same?
   - How do your thoughts and others differ? Which thoughts are the same?
   - Does this reflect what you have done before, or is this new?

4. As a group - How can we foster a positive feedback culture? Make decisions together and avoid one partner dominating for a cohesive partnership. (30 minutes - this will vary depending on the size of the group)

5. Ensure one partner does not dominate the conversation. You might consider independent facilitation and rotate facilitation from different parts of the system.

Activity three

Listening and valuing diverse ideas

NOTE: It's important to establish ground rules before starting. This activity can be done one-on-one and in small groups.

Allocate one hour to do this.

1. Listening and valuing diverse ideas, thinking and perspectives will mean you're more likely to get to solutions that work.

2. In pairs, consider each of these discussion questions: (20 minutes)

   - Are we using the right language in these spaces and communicating in a jargon free way?

   - What will help you come together to understand where you are trying to get to and what will help you get there?

   - How do you start from a strength-based approach and build on the great examples that are already happening?

   - How do you create spaces where people feel comfortable to suggest new and different ideas and approaches – and create a culture where people feel comfortable asking questions?

   - How could you re-write the narrative so that everyone can understand?

3. As a group, repeat this exercise, enabling people to feed their one-to-one discussions into the whole group discussion. (40 minutes)

4. Here are some more conversation ideas for you to consider in your organisation

How can we...
- create psychologically safe spaces where people feel comfortable to speak, suggest new ideas and approaches?
- go out to existing networks to build communication channels?
- create a sense of system belonging through induction, joint learning opportunities, embed it into all communications?
- ensure we have the right people in the room or find out where to go to get a range of perspectives?

Activity four

Taking time to understand each other's data and what it means to us.

NOTE: It's important to establish ground rules before starting.

Workshop objectives
- Participants will have a better understanding of the data each organisation collects.
- Participants will have a better understanding of why each organisation collects the data they collect.
- Participants will know how they can support each other with understanding the impact different forms of data can have on each other.

1. Session one - what data do we collect? (1 hour)
   In small groups, get everyone to set out all the different forms of data they collect.
2. Session two - why do we collect the data? (1 hour)
   In small groups, get everyone to explain why they collect certain forms of data (it's ok to not know why).

3. Session three - as a group, provide feedback on what people have discovered. (30 minutes)

4. Session four - how can we support each other with data collection and understanding the data? (1 hour)

5. In pairs, ask participants to reflect on what they have learnt from the sessions and how they think they could support partners with collecting data and understanding it. (30 minutes)

6. As a group, share feedback and set two shared actions for the group to take back to their workplace.

Notes

This workshop outline is about collectively making sense of what the data is telling you, and just as importantly, what it's not telling you.

- o   A good place to start for the adult social care workforce data at ICS level is the Skills for Care tableau which includes information on size and structure, recruitment and retention, pay, qualifications and training, analysis by care need and workforce projections.
- o   You can see a breakdown of your own ICS area or do a comparison with other ICS areas. This data can be used to support workforce planning.
- o   Different organisations and people will have different perspectives on which data is most important. Never assume that everyone will value the same data, ask people.
- o   Data isn't just about numerical data. The story is just as important and a source of data as the numerical data.
- o   Co-producing an overview of what data you need and how you collect it can lead to surprising changes in that data you collect and why you collect it.

- o   Finally, always check out with each other your understanding of what the data means. Never assume your understanding is the same.

Activity five

Challenges and strengths (one hour)

NOTE: it's important to establish ground rules before starting.

1. Individually ask people to write down two challenges and strengths they have experienced when working in partnership with others. (15 minutes)
2. In groups of three, ask people to share things they are comfortable sharing. (15 minutes)
3. As a whole group have a very general conversation about challenges and strengths that people find about working in an integrated/partnership way. (30 minutes)

We want to hear from you

Every system will be at a different place in their journey, from creating a culture for integration to developing a fully integrated workforce plan. Our work relies on your insight and our cross-partnership work aims to identify emerging lessons, challenges, opportunities and best practice. Similar to your journey, the guides we create are an ongoing, evolving process. We want to hear from you to help shape our work and share best practice. Tell us:

- What's your experience in creating a culture for integration?
- How have you found the implementation of the six ways?
- Do you have any reflections on the six ways? What do you find helpful? What's missing?
- Are there examples of best practice you would but forward on building a culture for integration?

If you have any reflections, please do not hesitate to get in contact at system.working@nhsemployers.org.