



# Growing your influence in the care system

#### Welcome and Introduction

- Aim of the workshop:
  - To support you to grow your influence in the care system
  - To understand who you are trying to influence and have relevance to
  - Why it is difficult to influence or have relevance
- Ground rules and team etiquette:
  - Respect different views & opinions
  - The importance of feeling safe & speaking freely
  - Raise (virtual) hand to ask a question
  - 'Acting with integrity by behaving in an open, honest and ethical manner'
  - No right or wrong views we are all learning



# The NIHR 'HeLPA' Study

- Implementing system change is difficult ... system leaders face lots of challenges, especially competing interests and agendas
- System leadership involves balancing different positions to engender coordinated and consensus-based change
- The HeLPA study has investigated the acquisition, use and contribution of leadership with 'political astuteness' in the implementation of major health system change
- The findings are informing the co-production of resources for current and future service leaders



# The main study themes

- System leaders face lots of 'controversies' issues where people tend to disagree
- System actors often have divergent agendas that makes change difficult
- Systems leaders need to influence a large number of people and groups to bring about change
- System leadership involves personal and shared responsibility for making change happen



# Today's Workshop

- Understand your purpose in the care system
- Understand your stakeholders and their interests, perspectives and power to influence change
- Understand how you can have influence with your stakeholders and explore the difficulties in achieving influence
- Thinking about working as a whole team at Healthwatch, develop strategies to help you to influence more effectively



# <u>Activity 1</u>: Your purpose

- Talk us through your purpose (see prepared slide)
- What are you trying to achieve and how are you trying to achieve it?
- Use the chat function to reflect on your purpose and the challenges in realising this.



# Discussion: Thinking about your work ahead

Where do you want or need to **grow your influence** and relevance?

- To influence and hold the NHS and care system to account
- To connect to and increase our relevance to local communities

**Key communities**: people with mental health problems, young people, BAME communities?



#### Part 2: Understand your stakeholders

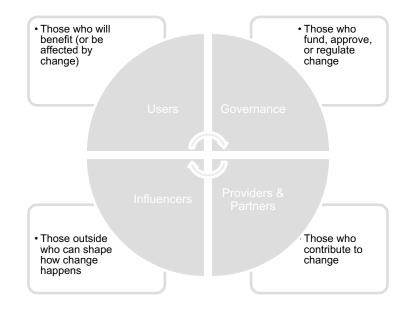
- It is important to understand your stakeholders including their interests, perspectives and power to influence change
  - Community groups & Organisations representing community groups
  - Community Voluntary Sector organisations
  - Organisations & Boards in the wider health and care sector
- Your stakeholders will be for, against or indifferent to the work of Healthwatch
- So, your stakeholders will also vary in terms of:
  - Their interests and agenda what is motivating them
  - Ways of work and how they seek to influence the system
  - Positional power, skills and capabilities to influence the system



# Activity 2a: Identifying your Stakeholders

 In your groups can you identify your stakeholders

- You might think 5-10 who are your upward (strategic) and downward (community) stakeholders?
- (We will then focus on your top 3)

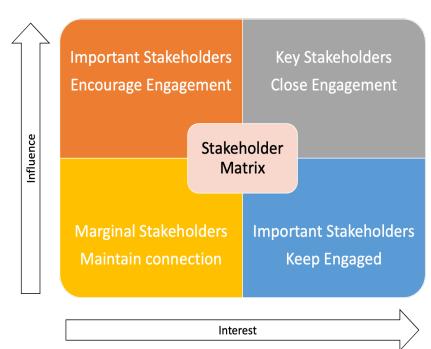


#### Stakeholder matrix

It is important to determine your key stakeholders: those who are integral to the change

*Influence*: the ability to influence or shape the change

Interest: the extent to which change aligns with or is at odds with their goals



# Activity 2b: Identifying your **key** stakeholders

- In the same groups, and focusing on the same controversy or issue:
- Discuss your stakeholders according to their influence and interest....who are your key 3 stakeholders
- 2. Are you 3 key **stakeholders** promoters, defenders, latents, apathetic
- 3. Feedback the **combined stakeholder analysis** the rest of the group

# Thinking about 'what's in it for them'

- Stakeholders have different interests and agenda that motivates their response to change – their notions of right or wrong
- Change can be perceived as a threat so it is important to consider the benefits and costs for each stakeholder group
- Stakeholders will adopt different approaches to influence the system what have they done in the past
- It is important for you to think about how to tailor your activities to each stakeholder group – counter-strategies



# Activity 3: What's in it for them

Key people or group	W.I.I.F.T	Why may they not engage with us?	What could/should we do to engage their support
E.G. Communities – to be specified	Influence decisions made on future health and social care services		



# Part 3. Developing influence

- Influence is not about heroic or transformational leadership, it is a team activity that involves working together and with others to achieve influence
- It is about 'seeing the big picture' and appreciating the ways different parts of the system can work together and helping them to realise their potential to make improvements that matter to local people
- It involves influence without authority building relationships, shaping a vision, negotiating conflict
- Thinking about your collective or combined skills and capabilities to make change happen



## Developing influence

- 'Social astuteness: 'being diligently observant of others and keenly perceptive of even subtle social situations, and thus adjust their behaviours accordingly
- *Interpersonal influence*: 'the ability to produce desired changes in other people. These individuals use a subtle, convincing style to exercise influence over others
- Networking ability: access to information, resources and other assets based on a person's social networks and relationships, including the ability to identify and build relations with other people with useful resources, and to build connections amongst others
- Apparent sincerity: perceived as possessing a high degree of integrity and sincerity, to the extent that induvial trust them as their actions are not perceived as manipulative



# Developing influence in the health system

Self	Strategic Thinking	Comms& Engage.	Networks & Networking	Relational	Rules & Resources
Self-belief	The landscape	Listening	Know stakeholders	Dealing with the egos	Stick to the rules
Resilience	Want is	Open-up dialogue			
	priority		Access	Negotiating	Use resources
Emotional int.		Allowing others to set	networks and		
	What is	agenda	resources	Deal-making	Report up the
Inter-personal	possible				chain
Style		Using authority figures	Building	Manipulating	
	Defining problem &	& patient voice	alliances		
	solutions		Create alignments		



# Activity 4: Growing your influence

- Building on the last activity:
- Focusing on 2 or 3 stakeholders, what strategies you will adopt to either 'win them over' or 'bring them to the table'?
- What skills and resources do you have that appeal to your stakeholders?
- How will you use your skills and resources individually and collectively?
- What will success look like?



# Activity4: Planning your influence

Stakeholder	Key interests	What is your relationship with them	How do you enhance influence and change your relationship	How and how will enhance the influence

## Next Steps

- Today is about trying out different techniques and tools on a 'snap shot' of issues and stakeholders
- The hope is you will keep using these tools in your future planning activities
- Reflect on how you can grow your influence as a whole team



# Acknowledgements

Study Team:

Justin Waring, Simon Bishop, Jenelle Clarke, Mark Exworthy, Naomi Fulop, Jean Hartley, Angus Ramsay, Georgia Black, Bridget Roe

The research was funded by the National Institute for Health Research, Health Services & Delivery Research Programme. The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health and Social Care.



