

# Making the NHS the Best Place to Work: Creating Cultures of Civility and Respect

**Sherwood's Civility Learning and Sharing Event**

16 September 2021

NHS England and NHS Improvement



# Speaker Bios



**Radhika Nair** (she/her)

NHS Civility and Respect Programme Lead, NHS England and NHS Improvement

Radhika.nair1@nhs.net

**Mel Baldwin**

Project Manager, Civility and Respect Programme, NHS England and NHS Improvement

Mel.baldwin@nhs.net



**Delicia Egboh**

Interim Programme Manager, Civility and Respect Programme, NHS England and NHS Improvement

Delicia.egboh@nhs.net

**Jonathon Simpson**

Programme Manager, Civility and Respect Programme, NHS England and NHS Improvement

Jonathon.simpson@nhs.net



## The NHS Long Term Plan



### WE ARE THE NHS: People Plan 2020/21 - action for us all



## We are **compassionate** and **inclusive**

We are kind and respectful. We all feel the pressure at times, but we care for each other, as we care for our patients. We don't tolerate any form of discrimination, bullying or violence, and call out inappropriate behaviour.

We are open and inclusive. We understand, encourage and celebrate diversity, making the NHS a place where we all feel we belong.



*People Promise*



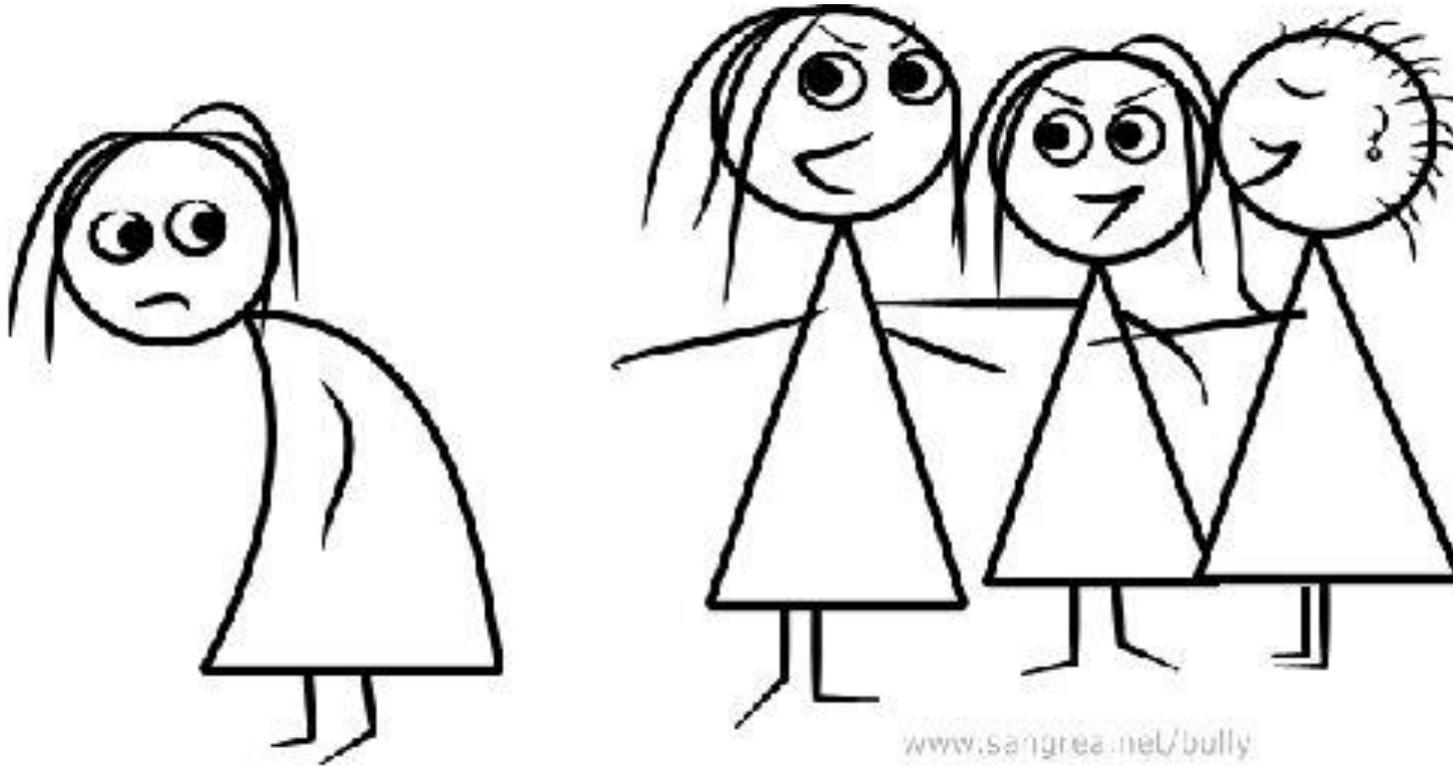
➔ **Bullying and harassment:** All employers are responsible for preventing and tackling bullying, harassment and abuse against staff, and for creating a culture of civility and respect. By March 2021, NHS England and NHS Improvement will provide a toolkit on civility and respect for all employers, to support them in creating a positive workplace culture.

Survey  
Coordination  
Centre

## NHS Staff Survey 2020 National results briefing

Published: March 2021

# Does it really matter?



# What words would you use to describe civility?



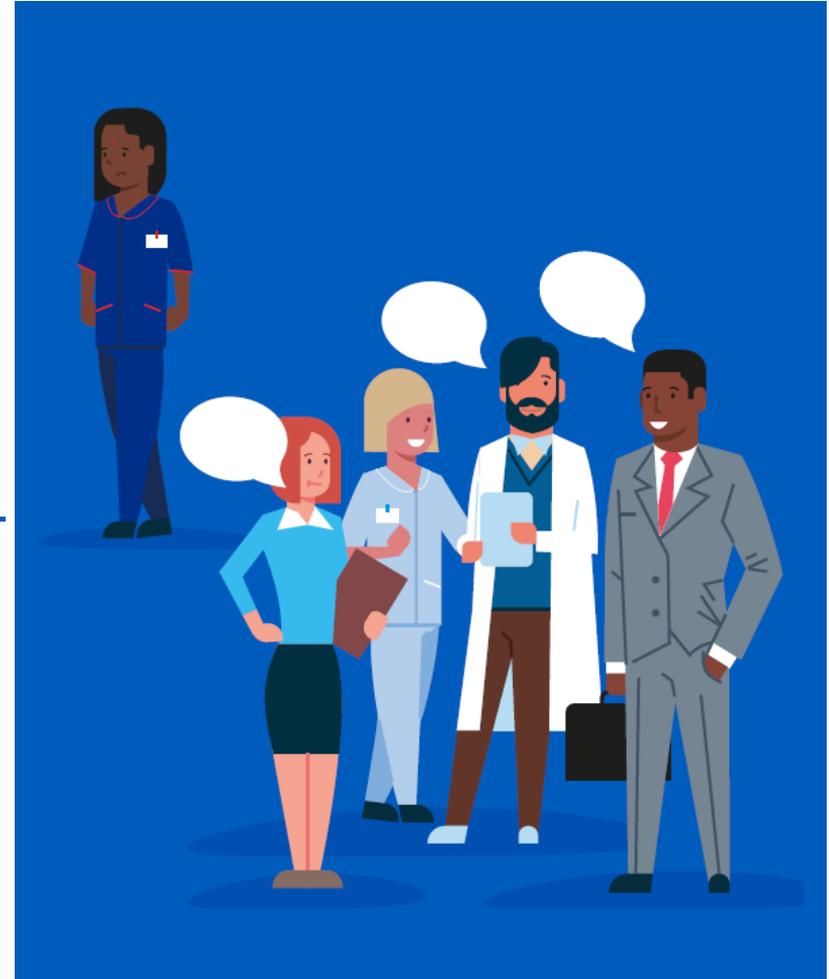
# Civility and Respect

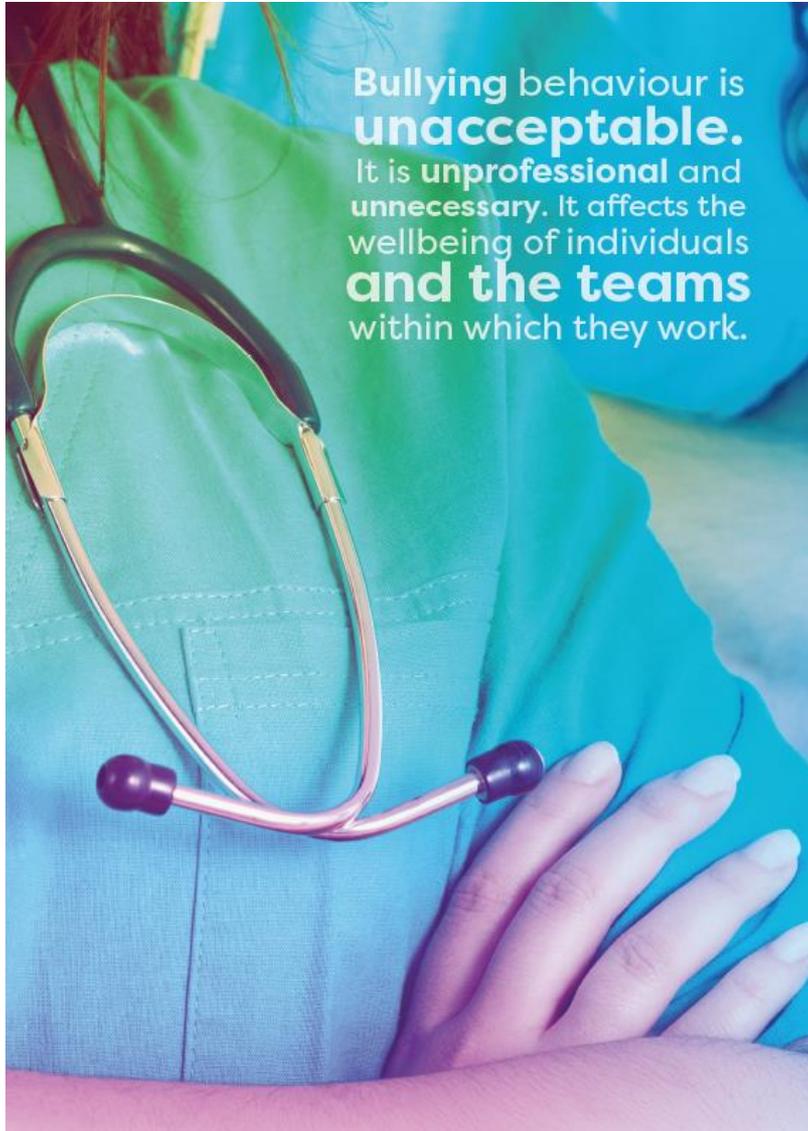
Incivility and disrespect – range of low-level poor behaviours

Shift in language – reducing bullying and harassment

Not just the minimum standard – create cultures of civility and respect

Detrimental impact on patient outcomes





Bullying behaviour is **unacceptable**. It is **unprofessional** and **unnecessary**. It affects the wellbeing of individuals **and the teams** within which they work.



**INCIVILITY**  
THE FACTS

**WHAT HAPPENS WHEN SOMEONE IS RUDE?**

**80%** of recipients lose time worrying about the rudeness  


**38%** reduce the quality of their work  


**48%** reduce their time at work  


**25%** take it out on service users  


**Less effective clinicians provide poorer care**

**WITNESSES**

**20%** decrease in performance  


**50%** decrease in willingness to help others  


**SERVICE USERS**

**75%** less enthusiasm for the organisation  


**Incivility affects more than just the recipient**  
**IT AFFECTS EVERYONE**

**CIVILITY SAVES LIVES**

Porath C, Pearson C (2013) The price of incivility

# The financial cost

Item	Cost per annum
Cost of sickness absenteeism	£483.6 million
Cost of sickness absence to employer	£302.2 million
Impact and cost of bullying to employee turnover	£231.9 million
Impact of bullying on productivity	£575.5 million
Impact of bullying on sickness presenteeism	£604.4 million
Industrial relations, compensation and litigation cost	£83.5 million
<b>Total</b>	<b>£2.281 billion</b>

## Supporting our staff

# A toolkit to promote cultures of civility and respect

### Purpose

The Long Term plan and NHS People plan recognise that levels of bullying and harassment in the NHS must be tackled and it is everyone's responsibility to do so. To promote a culture of civility and respect, it is important to support our workforce to adopt behaviours and demonstrate values in everyday life, that will lead to better staff experience and patient care. The toolkit will support NHS organisations with practical guidance and resources to help tackle bullying and harassment and to create civil and respectful workplaces.

### A Shift in Language

The change in language from bullying and harassment to civility and respect is purposeful. It brings focus on a broad range of negative workplace behaviours. It aims to give individuals the ability to understand their experiences more clearly and speak up when things are not right for them and for others. It can aid conversations in teams to identify and embed positive behaviour change.

### Civility and Respect Framework

The framework offers an evidence-based and practical overview to thinking and action. It uses the improvement approach making underlying issues easier to analyse, intervene and plan for when working towards creating civil and respectful cultures. There are four themes:

- Theme 1: Data and analysis
- Theme 2: Policy and process
- Theme 3: Staff management and support
- Theme 4: Just and restorative culture



The Analyse, Intervene and Measure (AIM) approach is used to support organisations to develop action plans aligned to the four framework themes.

- Analyse:** understand the issues  
Guidance on interventions will help identify and establish those which are right for the organisation:
  - Primary
  - Secondary
  - Tertiary
- Intervene:** take action to address the issues
- Measure:** evaluate the impact of interventions.

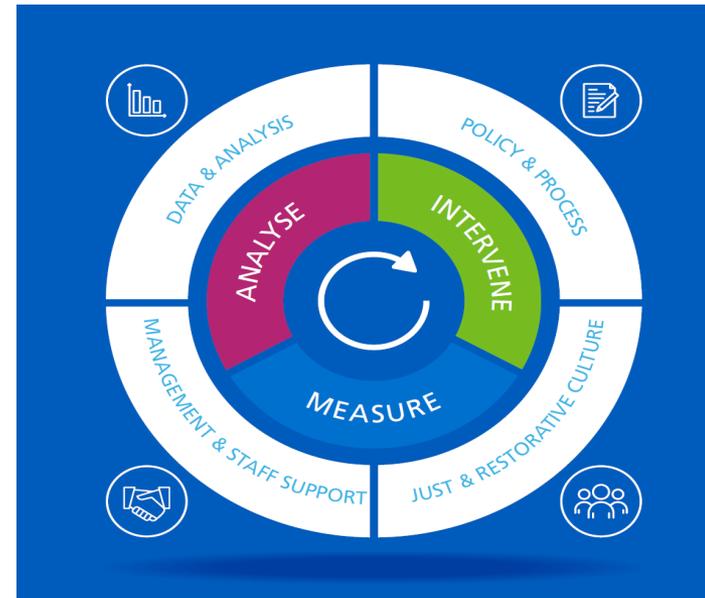
### Promoting Professionalism

The pyramid demonstrates a Restorative and Just approach to enable NHS organisations to take a supportive and corrective stance. The tools are intended to support staff to bring about understanding and a change in behaviour, not to blame and punish.



The toolkit can be found at:  
[NHSi-Civility-and-Respect-Toolkit-v9.pdf \(socialpartnershipforum.org\)](#)  
[Bullying Cost Calculator for NHS organisations \(socialpartnershipforum.org\)](#)

## People Promise



[Bullying Cost Calculator for NHS organisations \(socialpartnershipforum.org\)](#)

[NHSi-Civility-and-Respect-Toolkit-v9.pdf \(socialpartnershipforum.org\)](#)

# NHS Civility and Respect Programme: Our Offer to Trusts / ICSs



## Vision

To tackle bullying and harassment in the NHS and to promote and create positive workplace cultures of civility and respect which will improve staff experience and ultimately patient care.

## The Opportunity

To work with ICS/Trusts in all seven regions to support these organisations to adopt the NHS Civility and Respect Framework to drive continuous improvement and positive culture change. Through this support, ICS/Trusts will commit to adopting and implementing the four framework themes via the [NHS Civility and Respect Toolkit](#) to address bullying and harassment in the local context.

## Support from NHS Civility and Respect Programme will involve:

- Guidance and support during production of a workforce strategy and Board-level business case strategy to improve workplace cultures and staff experience
- Guidance and support during production of local action plans for priority issues, interventions design and implementation
- Use of NHSI Civility and Respect Framework Diagnostic Tool and Bullying Cost Calculator
- Guidance from NHS evaluation experts on best practice to monitor and identify improvements and progress
- Development of methods to ensure effective governance at Board level through effective monitoring of risks and actions
- Connecting with other NHS organisations for sharing learning and best practice
- Access to NHS case studies on promoting cultures of civility and respect
- Access to dedicated support from General Medical Council and Nursing & Midwifery Council towards improving patient safety
- Priority access to national offers
- Be linked to other national teams for enhanced support and guidance to address specific challenges (such as Violence & Safety, WRES, Health and Wellbeing Culture, Retention etc)

## Civility and Respect Framework

The framework offers an evidence-based and practical overview to thinking and action. It uses the improvement approach making underlying issues easier to analyse, intervene and plan for when working towards creating civil and respectful cultures. There are four themes:

- Theme 1: Data and analysis
- Theme 2: Policy and process
- Theme 3: Staff management and support
- Theme 4: Just and restorative culture



## The Benefits of ICS-wide working:

This approach will serve as an enabler in supporting the development and adoption of collaborative ICS-wide solutions to creating positive work cultures which will:

- Improve system working and shared learning to improve staff experience, wellbeing and retention
- Opportunities for shared intelligence gathering, interoperability and capability
- Consistency of approach and economies of scale
- Improved patient care and experience
- Opportunity for financial support from CR programme

## Commitment from ICS/Trust :

- Be able and willing to commit to this work with senior support from its People Board/ Committee
- Must identify a dedicated internal resource to lead and undertake the work, with support and guidance from the NHSI Civility and Respect Team.

# Who is in this space?

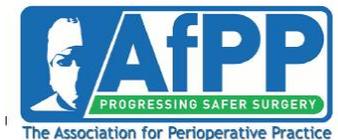


British Orthopaedic Association



Practitioner Health Programme

General Medical Council



# Civility Saves Lives

**CIVILITY** (noun)

*"Politeness and courtesy  
in behaviour and speech"*

<https://www.youtube.com/watch?v=Ta-Ve9E9IZE>

# Mentimeter questions

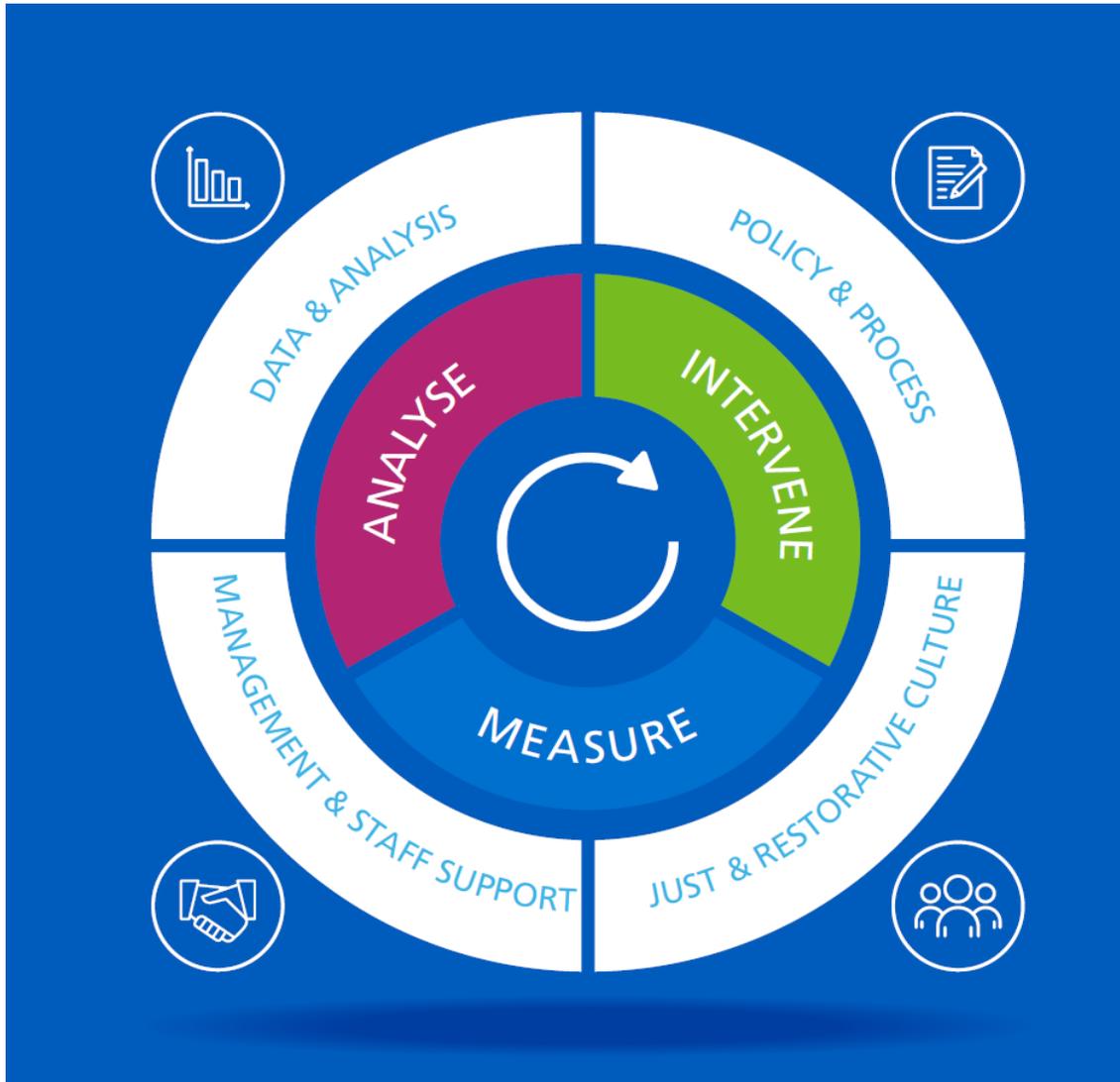
1. Have you personally experienced incivility at work?  
(Yes or No)
2. If you witnessed incivility or bullying behaviour how did this make you feel? (Word cloud)

# Supporting our staff: A toolkit to promote cultures of civility and respect

16 September 2021 – Mel Baldwin

NHS England and NHS Improvement





# Civility and Respect Framework and the AIM model

# Data & Analysis

Understand what bullying looks like in your organisation

Use data in a proactive and preventative way so that organisations/team can be interventionist and address emerging hotspots

Triangulation of data is key to understanding it and developing a process for measuring interventions



# Policy and Process

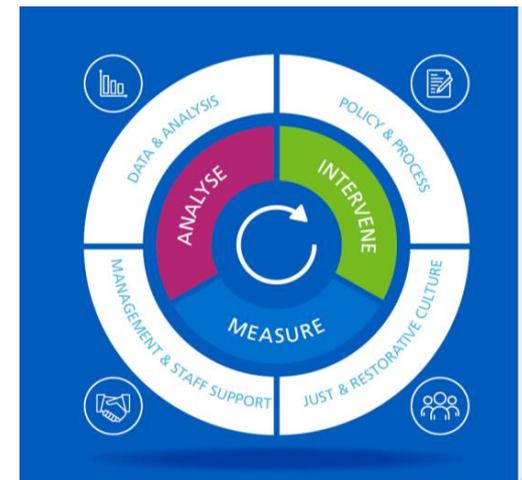
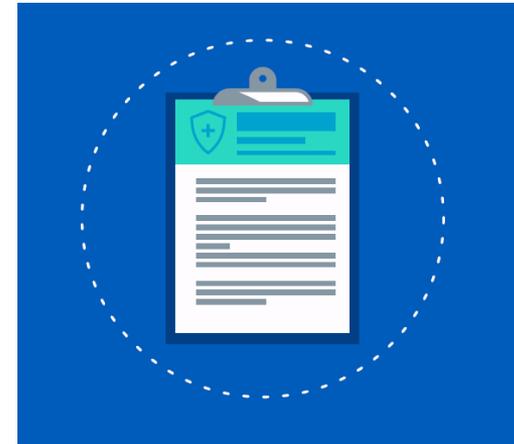
Move towards supporting staff in the restoration of relationships

Formal processes – can impact on health and wellbeing of everyone involved

Enable early intervention

Leaders and managers must have skills to address inappropriate behaviours

HR must have skills to coach managers in the restorative approach



# Staff and management support

Creating cultures of civility and respect – importance of leaders, role-modelling behaviours

Every interaction by every leader at every level, everyday



# Just and Restorative Culture

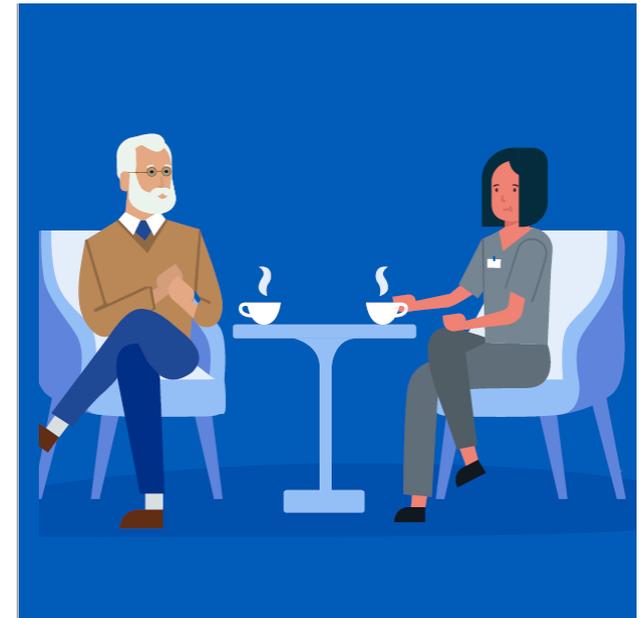
Growing compassion in the workplace

Inclusive and compassionate leadership creates a psychologically safe workplace

Leading with compassion  
Attending  
Understanding  
Empathising  
Helping

Staff can listen and support each other – less bullying, better patient outcomes

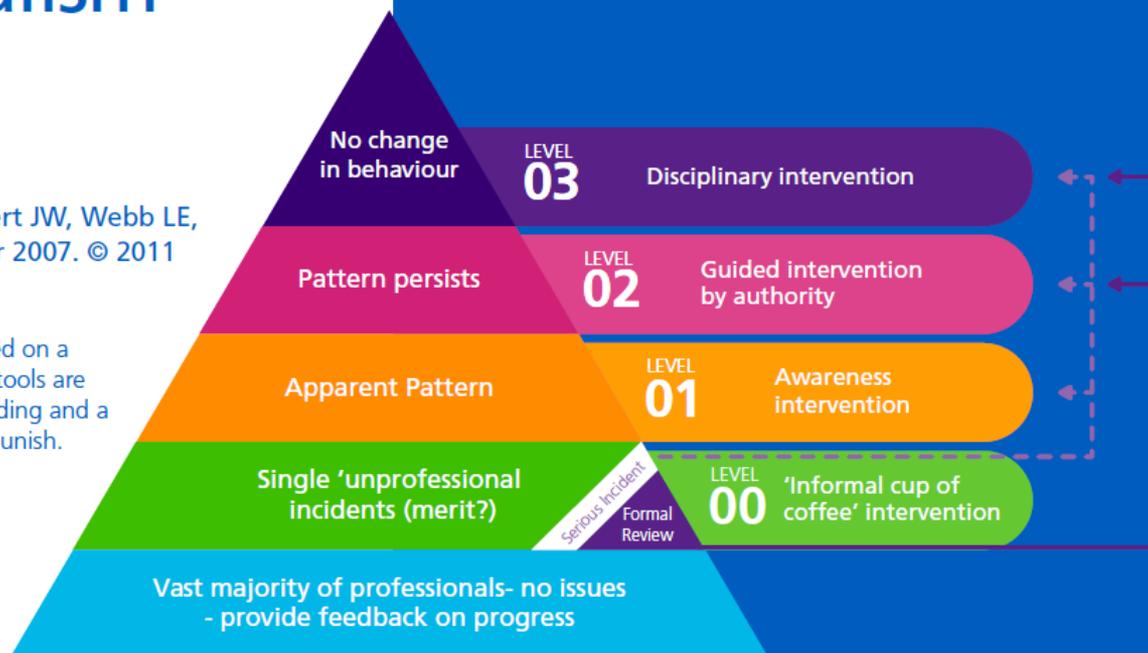
Learning rather than blame



# Figure 1: Promoting professionalism pyramid

Adapted from Hickson GB, Pichert JW, Webb LE, Gabbe, SG. Acad Med November 2007. © 2011 Vanderbilt University

The approaches in this toolkit are based on a supportive and corrective stance. The tools are intended to bring about an understanding and a change behaviour, not to blame and punish.



**Level 0**  
**'Informal cup of coffee' intervention**

The Vanderbilt University School of Medicine's professional behaviour model visualises how you can address unprofessional/disruptive behaviours at an early, informal level. The aim of the 'cup of coffee' conversation is an early discussion about a single concern or observation that lets the employee concerned know that a negative/unpleasant/unprofessional behaviour was observed. It promotes accountability for a single observation of what seems to be unexpected/unprofessional conduct or behaviour. The Vanderbilt research has shown that most unprofessional behaviours in the workplace can be resolved at this level with a higher likelihood of success in changing the behaviour than more formal approaches.

For creating compassionate cultures in the workplace, the informal early conversation provides a respectful and supportive environment for the individual to reflect on their behaviour and try to identify its cause, e.g. work pressure, hierarchical incoherency, etc. The aim is to help the individual to reflect on their behaviour and impact, and to think about an alternative approach and coping strategy for the primary causes behind their behaviour.



**Employee scenario**

You walk into the intensive care unit (ICU) as a patient alarm is sounding and a colleague shouts at you "Turn that thing off, they're always going off and driving me crazy!" How do you react in this situation?

As a colleague, consider the following options:

- How did the incident make you feel?
- Are these behaviours professional and safe?
- How can you approach your colleague to establish professional working boundaries between you?
- What would you say to your colleague to explore this in a professional manner?
- What behaviours would you like to see upheld by yourself and colleagues?
- How can you maintain these professional working behaviours between your colleague and yourself?



**Manager scenario**

After a particularly busy shift in the intensive care unit (ICU), your employee is taking patient notes at shift change. As you're leaving the unit, a patient's fall alarm goes off and you hear them shout "Someone turn that thing off, they're always going off and driving me crazy!"

As the line manager, consider the following questions:

- How should you approach the employee about this situation?
- What informal discussion would you have with them?
- What would you ask them to find out what is going on right now for them?
- What would you say you have observed?
- What would you say are the expected behaviours required?
- Can you identify the primary causes behind the employee's behaviour?
- What primary action/intervention can you identify to support the situation?
- Has the employee accepted responsibility for the outburst?
- Is any further action needed?



**Practical actions you can take:**

- This situation is within your control to address directly and informally. The best route is to approach the employee and work with them on restoring the working relationship in a professional and supportive manner. You would aim to agree the boundaries of your working relationship and set professional behaviour expectations you can both agree to and work on.
- Approach the employee directly and in a professional manner. Ask to speak to them about the behaviour/incident that has caused you concern. Outline how it has made you feel; work with them towards a better way of working together and agree to move forward together.
- If you are not able to speak to the employee directly, other options include:
  - Speak to your line manager who can provide you with support and guidance and help you work through the best approach to resolve the issue at an early stage.
  - Speak to your Freedom to Speak Up Guardian who can provide you with support and guidance and can speak to HR and/or your line manager with you or on your behalf to agree a way forward.
  - Speak to your local union representative who can provide you with support and guidance and speak to HR and/or your line manager with you or on your behalf to agree a way forward.
  - Speak to a colleague who can provide you with moral support and help you speak to HR and/or your line manager



Level	Focus	Stress interventions	Bullying interventions
<p style="text-align: center; color: white; font-weight: bold; font-size: 24px;">Primary</p>	<ul style="list-style-type: none"> <li>• Addressing the root cause of the workplace issue (stress, bullying)</li> <li>• Aimed at modifying or eliminating stressors/ root causes in the work environment</li> <li>• Targeting organisations and the changes they can make</li> </ul>	<p>Workplace changes: Reducing workload Team working Supervision Facilities</p>	<p>Understand the employee's experience and what bullying looks like in your organisation (incivility, negative workplace behaviours)</p> <ul style="list-style-type: none"> <li>• Staff survey on workplace behaviours, civility and bullying (Appendix 1)</li> <li>• Listening events and staff support (Shwartz Rounds, focus groups Appendix 2)</li> </ul> <p>Develop organisation and team values and behaviour agreements</p> <ul style="list-style-type: none"> <li>• Develop a behaviour framework (Appendix 3)</li> <li>• Develop shared team objectives</li> <li>• Establish team development and team reflection opportunities</li> <li>• Promote civility and respect</li> <li>• Promote compassion and inclusion</li> <li>• Establish Values Ambassadors</li> </ul> <p>Implement a just and learning culture approach:</p> <ul style="list-style-type: none"> <li>• Identify harm caused by policy, process, systems, structures, culture</li> </ul> <p>Peer support arrangements</p> <p>Support managers and employees to have courageous conversations about acceptable behaviour in the workplace</p> <p>Team-based interventions:</p> <ul style="list-style-type: none"> <li>• Boxes workshop (Appendix 6)</li> <li>• Value in action discussion (Appendix 7)</li> </ul>
<p style="text-align: center; color: white; font-weight: bold; font-size: 24px;">Secondary</p>	<ul style="list-style-type: none"> <li>• Focused on an individual's response to the issue (stress, bullying)</li> <li>• Reducing the effects of stressors by making them more resilient</li> <li>• Targets individuals/ employees</li> </ul>	<p>Mindfulness Yoga Exercise Health and wellbeing programmes</p>	<p>Resilience training (Building resilience workshop Appendix 8)</p> <p>Unconscious bias training</p> <p>Respect and Support Workshop (Appendix 4)</p> <p>Behavioural Self-Assessment (Appendix 5)</p> <p>Leadership training</p> <p>Courageous conversations workshops (Appendix 9)</p> <p>Personal reflection log (Appendix 10)</p>
<p style="text-align: center; color: white; font-weight: bold; font-size: 24px;">Tertiary</p>	<ul style="list-style-type: none"> <li>• Treating the resulting ill health</li> <li>• Focused on helping individuals cope with the consequences</li> <li>• Targets individuals/ employees</li> </ul>	<p>Employee assistance programme</p>	<p>Employee assistance programme</p> <p>Occupational health service</p> <p>Counselling service</p> <p>Fast-track cognitive behavioural therapy/counselling</p> <p>Respect and Support helpline (Appendix 14 and 15)</p> <p>Targeted Civility at Work campaign</p> <p>Routes to address the conflict arising from incivility and bullying</p> <ul style="list-style-type: none"> <li>• Mediation service</li> <li>• Coaching</li> <li>• Round table discussions (Appendix 11, 12 and 13)</li> </ul>

## Analyse: Check in

### 6. Can you identify the primary causes/underlying issues?

For example incivility, work pressures (resources/time/workload), command and control culture, band bias

### 7. What further data do you require?

For example qualitative and quantitative

### 8. What do you need to do to gather/access this data?

For example, workforce analyst input, bespoke staff survey, focus groups

### 9. Have you engaged with your employees directly to understand their primary concerns?

### 10. Have you engaged with your FTSU Guardian and staff side representatives to understand concerns expressed through these staff support routes?



## Analyse: Check in

### 1. What qualitative and quantitative data do you have access to?

### 2. Can you break the data down to look at the detail?

For example, by geographical area, profession, protected characteristics?

### 3. How can you analyse the data through different lenses to identify/understand employee experiences?

For example, looking at the staff opinion survey data for bullying and harassment or employee relations cases by protected characteristics, to try to understand the differences in employee experience.

### 4. Are you able to triangulate your data to get a deeper understanding of the issue?

For example, doing a geographical or protected characteristics comparison of data for the staff survey, numbers of and reasons for employee relations cases, absence absence provisions/terms, Freedom to Speak Up concerns.

### 5. What is your data telling you or indicating?



## Measure: Check in

### 1. What benchmark data can you look down to create a measure of your starting point?

### 2. What measure points can you identify for each intervention you have planned/are planning?

### 3. Does this measure point tell you if you are meeting your objective?

- How do you know this?
- What projected measure outcomes can you aim for?
- What control measures can you set around these data points to ensure your projected outcome is achievable (qualitative and/or quantitative)?

### 4. Does this measure point indicate an expected point of improvement?

- Have you defined this?

### 5. How will you monitor this data during the intervention phase?

### 6. What will you do with your results how will you share learning?

- Internal – staff, FTSU Guardian, staff side representatives, board
- External – sharing learning, networks



## Intervene: Check in

### 1. What is your data analysis telling you is the primary cause(s) to be focus on?

- What are your priority areas of employee need?

### 2. What primary interventions do you need to address the primary causes of activity and bullying identified?

### 3. Do your primary level interventions correctly focus on the primary cause(s)?

- What data and points of measure will help you understand this?

### 4. How will you appraise the options to get the best intervention for the specific issue identified?

- Have you engaged with staff, staff representatives and your Freedom to Speak Up Guardian to test what would best fit?

### 5. What secondary level interventions do you already have in place?

- For example, training in resilience, unconscious bias, difficult conversations?
- Do these need to be refined to address the primary cause(s)?
- Who do you need to support you with this?

### 6. What tertiary level interventions do you already have in place?

- For example, counselling service, mediation services, occupational health service
- Do these need to be refined to address the primary cause(s)?
- Who do you need to support you with this?



# Further information, links and resources

- Case studies
- E-learning
  - Mersey Care – Just and Learning Culture and e-learning modules
- Links to relevant websites
  - Civility Saves Lives
  - Social Partnership Forum – A Call to Action
  - GMC – Professional behaviours and patient safety programme
  - Freedom to Speak Up Guardians
  - Antibullying Alliance
  - Patient voices – bullying and harassment stories
  - The Point of Care Foundation
  - Whistleblowers' Support Scheme
- Estimating the cost of bullying calculator is also on the website
- Guidance on commissioning external consultants to review bullying and harassment in NHS organisations

# Civility and Respect Framework Diagnostic Tool

16 September 2021 – Delicia Egboh

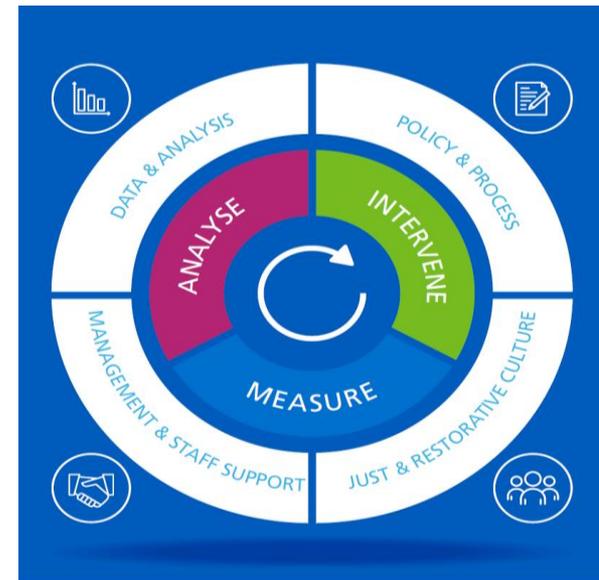
NHS England and NHS Improvement



# The Diagnostic Tool



- Civility & Respect Framework Diagnostic Tool developed by the NHS Civility & Respect Programme
- Self – assessment tool
- Designed to help your organisation know where you are against the Civility & Respect Framework
- Highlights areas to focus and improve on



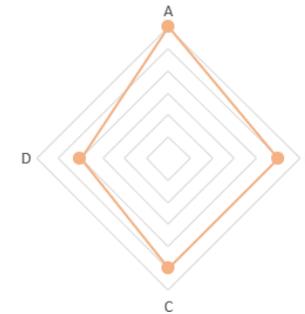
# The Diagnostic Tool

## Policies and Processes tab snapshot



### Policies & Processes

Research and good practice show the impact of cultures of civility and respect in going beyond the formal policy to a restorative approach, enhancing informal stages and support structures for staff. Refer to pages 15 - 19 in the NHS Civility & Respect [Toolkit](#)



- A. The organisation follows good practice by reviewing its policies and processes regularly to ensure it is effective, relevant fair, supportive and independent
- B. Thinking of the Dignity at Work Policy, the organisation regularly reviews the balance between the formal and informal aspects to managing conflict in the workplace
- C. The organisation reviews the investigation processes related to Dignity at Work cases (for length and complexity) \*
- D. The organisation has a strategic approach to managing conflict in the workplace to enable early intervention and promoting the restoration of working relationships before problems escalate.

Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# The Diagnostic Tool

## Summary tab snapshot

Export to PDF

This page provides a summary overview of each section and theme

The chart to the right gives an overview of each question score split by section and theme

The charts below show the most common value selected per section. Users can then investigate further on the individual section pages or use the chart to the right

The purpose of this page is to provide insight into which themes might present the greatest opportunity to drive improvement and to record what actions or next steps will be taken towards this



### Theme 1: Data & Analysis | Data Collection



### Next Steps:

- Action 1
- Action 2
- Action 3
- Action 4
- Action 5

# Model Hospital

Wellbeing > [More](#)

Peer group: CQC - Good

## Healthy Working Environment Alpha

Metrics that benchmark organisational culture with reference to civility and respect, speaking up, and, bullying and harassment.

Civility & Respect	Data period	Trust value	Peer median	National median	Chart
I receive the respect I deserve from my colleagues at work.	2019	72%	74%	73%	
Relationships at work are strained.	2020	6.0	5.9	5.9	
My immediate manager (who may be referred to as your 'line manager') values my work.	2019	75%	75%	74%	
Freedom to Speak Up (FTSU)	Data period	Trust value	Peer median	National median	Chart
FTSU Index	2020	82.2%	80.0%	79.7%	
Bullying and harassment cases reported to FTSU Guardians	Q3 2020/21	3	4	4	
Bullying and harassment cases reported to FTSU Guardians as % of total cases	Q3 2020/21	19%	25%	25%	
Bullying and harassment cases reported to FTSU Guardians per 1,000 WTE	Q4 2020/21	0.88	0.94	0.92	
Bullying, Harassment & Violence	Data period	Trust value	Peer median	National median	Chart
In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from managers?	2019	12%	11%	12%	
In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from other colleagues?	2019	19%	18%	18%	

# The HWB dashboard

The screenshot shows the HWB dashboard interface. At the top, there is a blue navigation bar with the following elements: a home icon, the text "Model Hospital", a grid icon, the text "Browse", a bookmark icon, the text "Bookmarks", a search bar with the placeholder text "Search for a metric", and a magnifying glass icon. Below the navigation bar, there is a white header area with a blue arrow icon, the text "People", a red warning triangle icon with the number "5", the text "Key metrics triggering notifications", and a "Close" button. The main content area is a grid of white cards, each representing a different metric. The cards are: "Allied Health Professionals" (with a blue hexagon icon), "Culture & Engagement" (with a purple group icon and a red warning triangle with "1"), "Doctors" (with a green first aid kit icon), "Equality, Diversity & Inclusion" (with a yellow balance scale icon and a red warning triangle with "1"), "Nursing & Midwifery" (with a purple stethoscope icon and a red warning triangle with "1"), "People Promise" (with a purple cross icon, a "Beta" badge, and a red warning triangle with "1"), "Retention Analysis" (with a red circular arrow icon and a red warning triangle with "2"), "Wellbeing" (with a purple cross icon, an "Alpha" badge, and a red warning triangle with "1"), and "Workforce Analysis" (with a colorful group icon). At the bottom of the dashboard, there is a blue question mark icon. The Windows taskbar is visible at the very bottom, showing various application icons, the system tray with the date "12/07/2021", time "12:37", and temperature "20°C".

# Civility and Respect Programme Areas of work

16 September 2021 – Jonathon Simpson

NHS England and NHS Improvement



# Key areas of focus this year

## Supporting our staff

A toolkit to promote cultures of civility and respect



## Just and restorative culture

'Just and restorative culture' concentrates on the culture and leadership elements of organisations and how they can support organisations to grow compassion in the workplace, modelled by leaders. It also emphasises working with partners such as local union representatives, Freedom to Speak Up Guardians, employee engagement leads and health and wellbeing leads.



# NHS Midlands QR Code

**NHS Midlands** region, 14 Oct 1.30 – 4.30pm  
Click [this link](#) or scan the QR code to Register

