

BRISTOL, NORTH SOMERSET AND SOUTH GLOUCESTERSHIRE LEADERS EVENT

26 November 2018, 2.00- 6.00pm

The Holiday Inn, Bond Street, Bristol, BS1 3LE

2.00pm	Welcome and introductions
2.05pm	Integrating care - the national context • Roger Davidson, Director, Health System Transformation, NHS England
	Every system has a story to tell but not all of them are confident at telling it, either because they are not entirely clear what their story is or behind the narrative there lies an actual strategic problem.
	Today is designed to clarify the nature of your story and improve your capacity for telling it. It will consider the dynamics of a multiple audience and many ambassadors who tell that story. The alternative to getting this wrong is not that there is no story. It is that your story is told by critics instead.
2.15pm	BNSSG – our story to date • Julia Ross and Robert Woolley, Joint Chief Executive STP leads
	The story of partnership working in Bristol, North Somerset and South Gloucestershire to date, drawing out what is working well, what some of the challenges are and why focusing on the 'why we are doing this' not 'how are we doing this' is critical to improving health, wellbeing and care for all our communities. This will include some vox pops from our recent citizen event.
2.25pm	Part I - insight and understanding • Anastasia Knox, Director of Research, Britain Thinks
	An overview and findings on a series of focus-group and insight sessions. The research will shed light on public perceptions and understanding of integrated care and changes to primary care, and also gives a better understanding of the thoughts, feeling and priorities of key NHS staff groups and local authority colleagues.
	This session will present the headline findings of the research and reflect on words to lose when telling the story of integrated care.
3.00pm	Part II - how to construct a story • Phillip Collins,
	A short introduction to the elements of good story telling followed by an interactive session with colleagues who will be asked to collectively tell a story. The approach will demonstrate that everyone already knows what is meant by a narrative - they know its conventions, they know how it works, they know how to construct one.
	It will underline that often we begin to complicate these procedures when we encounter the demand for narrative in a less familiar setting. At the end of the session the group will be left with an aide-memoire and checklist.
3.30pm	Break
3.40pm	Part III - a narrative for BNSSG • Phillip Collins
	This session will focus on application and requires a little preparation. Participants will need to

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	have given some thought to the narrative they think their organisation/ the STP ought to be following. Over the course of the session, the group will work through the narratives available given trubric of a good narrative covered in the first session. This will have seven parts:		
	 Agreement on the system NHS narrative and agreement on where this area will need to specify and differ. 		
	 Critique of the narrative as it stands - what is good and what is missing. 		
	 Collective critique of the narrative as it stands to come to a consensus conclusion of where the story as it is being told falls short of the need. 		
	 Individuals to read out their paragraphs, for a critique by the group. 		
	 Consideration of the counter-narratives, the critiques that are often heard. 		
	The construction, under Phil's guidance, of an agreed paragraph that tells the story.		
	Different groups then translate that paragraph into a slogan, a sentence and a page.		
5.55pm	Feedback and closing remarks		
•	Julia Ross/Robert Woolley		
6.00pm	Close		