Dear colleagues,

I know that in the coming weeks we will all be reflecting on the findings of the Francis report into what happened at Mid Staffordshire NHS Foundation Trust. I am determined that this will not be another report to Government that creates a lot of short-term noise but no long-term change. We need to seize this moment and ensure that the legacy of Mid Staffs is a safer, more open and compassionate NHS.

Robert Francis has been clear that to achieve this, significant cultural change is required. We all know how hard this will be – and that it depends on us finding ways to talk about things that may be uncomfortable. This is a moment of truth for the whole system and we must not shy away from it.

I know that Sir David Nicholson, NHS CE, has written to all Chief Executives in the NHS today to ask them to consider the report carefully in a public board meeting, and to work with us as we take forward our response.

We know that staff who feel engaged, supported, involved and listened to are able to provide more compassionate care to patients. We must care for staff to care for patients. The first step in engagement is listening. To prevent another Mid Staffs, I believe that we need to start by really listening, to patients and families, and to all the dedicated NHS staff working on the frontline in the NHS whatever their seniority or experience.

Many organisations already provide absolutely brilliant care. But I know this is becoming ever more difficult as the NHS gets busier and the needs
of patients more complex, so I want to thank you for your continuing effort and commitment.

If you are not already doing so I would like to ask you to hold internal events to listen to staff and ask them not just what we can learn from Francis, but also how, in an ever busier NHS, we can make sure that we provide every patient with a service that stays true to our core values of care and compassion. I believe this needs to be a conversation in every team, in every ward of every hospital, to ask ourselves if we really are listening to our patients and giving them the care we would want for our own loved ones. Many wards - indeed I am sure the majority - already do this, but for all of us there is a great deal to learn from this challenging moment for the NHS.

Along with my Ministerial team and the most senior NHS leaders, I really want to hear the insights from your discussions, and we will be visiting hospitals up and down the country over the next year, to listen and understand what more needs to be done to make a lasting difference for staff and, most importantly, patients.

I also ask you to set out for your local community the ways in which you are listening to staff and patients, to rebuild public confidence in the safety and quality of NHS care. I hope that we can find ways to tell people the kinds of inspiring and moving stories, which I hear about care every time I visit an NHS hospital, and which remind people of the meaning and the challenging reality of the work that NHS staff do every day.

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JEREMY HUNT