

EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST**REPORT TO: BOARD OF DIRECTORS****DATE: 26 JUNE 2015****SUBJECT: CULTURAL CHANGE PROGRAMME UPDATE****REPORT FROM: DIRECTOR OF HUMAN RESOURCES****PURPOSE: Information****CONTEXT / REVIEW HISTORY / STAKEHOLDER ENGAGEMENT**

This paper provides an update on the cultural change programme. It includes a detailed action plan, requested by Monitor and shared with the Improvement Director.

SUMMARY:

This report provides an update for EKHUFT's Cultural Change Programme. It includes an updated action plan for the programme and demonstrates progress against the plan. Next steps are covered and integration with other major change programmes at the Trust is highlighted. Finally, suggested measures for the programme are given.

RECOMMENDATIONS:

The Board is asked to note the progress made, next steps and measures.

NEXT STEPS:

The action plan will be used to keep track of the programme and progress will be reported to Monitor, the Board, the Improvement Board and Strategic Workforce Committee on a regular basis.

IMPACT ON TRUST'S STRATEGIC OBJECTIVES:

S02 Stakeholder Engagement, S03 Innovation & Improvement, S01 Quality

LINKS TO BOARD ASSURANCE FRAMEWORK:

AO3: Improve the overall score in the annual staff survey and embed engagement into everyday practice in the Trust

IDENTIFIED RISKS AND RISK MANAGEMENT ACTIONS:

Included on HR risk register

FINANCIAL AND RESOURCE IMPLICATIONS:

These have been considered and allocated to the cultural change programme

LEGAL IMPLICATIONS / IMPACT ON THE PUBLIC SECTOR EQUALITY DUTY:

N/A

PROFESSIONAL ADVICE TAKEN ON ANY NOVEL OR CONTENTIOUS ISSUES

N/A

ACTION REQUIRED:

To note

CONSEQUENCES OF NOT TAKING ACTION:

Trust's rating with Monitor & CQC may be affected

1 Introduction

This report provides an update for EKHUFT's Cultural Change Programme. It includes an updated action plan for the programme (appendix 1) and demonstrates progress against the plan. Next steps are covered and integration with other major change programmes at the Trust is highlighted. Finally, suggested measures for the programme are given.

2 Progress against the action plan

2.1 Phase one – diagnosis and planning (Jan-April 2015)

Phase one of the Cultural Change Programme is now complete, spanning January to April 2015. This phase provided EKHUFT with an analysis of staff experience of bullying and harassment, feedback they had given as part of the staff Friends and Family test. Actions to address the identified issues were incorporated into the action plan. The analysis was undertaken by The Hay Group, one of the Trust's external partners, who also held a number of stakeholder interviews and focus groups which led to the development of a behavioural framework which links to, and supports, the We Care values. As a result of this work the Executive team have agreed to strengthen the current values; Care, Safe, Making a difference, with a fourth value; Respect.

The Hay Group produced their final report in May 2015. This detailed the process they had used in their work along with findings and recommendations, which have informed phases two and three.

Communication and engagement activities in phase one focused on increasing senior executive visibility, with walkabouts and regular blogs and also on ensuring a more 'joined up' approach with the Trust's wider 'Improvement Journey'. This was achieved by producing a monthly staff newsletter, 'Our Improvement Journey', which covers key messages for cultural change and the CQC action plan.

The activity and planning completed in phase one provided a firm foundation for the second phase of the programme.

2.2 Phase two – implementing recommendations & actions (May – August)

Phase two progress can be reported in each of the Cultural Change Programme's areas of focus:

2.2.1 Progress in Leadership & Management

Progress in this area has focused on the development and delivery of a leadership programme, starting with the Executive team and cascading throughout the Trust. The Executive team began the programme in early May and have spent time focusing on priorities and how they will achieve them. A development programme for the divisional management teams, and their corporate group colleagues, is due to begin in early July and will be facilitated by The Hay Group. This programme will both develop these senior leaders of the Trust and also provide the space and time for them to agree priorities, ways of working and measures, to enable them to effectively lead the cultural change within their divisions and groups.

A 'People Manager' programme has also been developed and delivered to all middle managers (Band 8) to provide an opportunity for them to consider their role in achieving the cultural change, the importance of communicating with and engaging their teams, their

preferences around leadership styles and how they can look after themselves in challenging times.

2.2.2 Progress in Communications & Engagement

As well as continuing a focus on senior leader visibility, a significant amount of progress has been achieved in this area.

In order to increase the effectiveness of two-way communication, a new Team Brief process 'Let's talk...' has been piloted in the UC<C division. The aim is to ensure people managers hold face-to-face meetings with their teams and discuss important topics. Feedback is currently being sought and analysed and there is the intention to roll out the process across the Trust over the next few months.

A number of forums have been set up to deliver important messages and gain feedback from key staff groups.

The first Consultant's Forum was held at the beginning of May with the aim of delivering the results of a recent medical engagement survey, and gaining feedback on how consultants see their role in clinical leadership and also, in developing the clinical strategy. An action plan is currently being developed based on the results and feedback. The next forum is planned for early July, the focus being the Trust's clinical strategy.

Forums for administrators were held in early June at four sites. Presentations on EKHUFT's challenges and the clinical strategy were given, and there were interactive sessions to gain feedback and ideas for the future. The feedback is being analysed and will be communicated before the next forums, which will be held on a quarterly basis.

The first People Manager's Forums have been developed to take place throughout June and early July, across the three main sites. The first forum will focus on the 'Respecting Each Other' campaign, developing a deeper understanding amongst managers and their role in addressing bullying and harassment. The forums will provide an opportunity to launch a DVD which has been produced, tailored for the Trust, to further raise awareness of bullying behaviour and the impact it can have.

To ensure immediate face-to-face communication and engagement with new staff, the Learning & Development team have developed a 'Welcome Day' for all new starters. These will be held on a fortnightly basis, providing a 'welcome to EKHUFT' from the CEO, an introduction to '*a great place to work*', and essential 'getting started' information. The days began at the beginning of June and are receiving very positive feedback.

2.2.3 Progress in addressing Bullying & Harassment

The 'Respecting Each Other' campaign has developed a number of options to support staff and has also been raising awareness of bullying and the impact it can have. A confidential telephone line, workplace contacts and mediators are now available to those staff seeking support. A staff charter was launched during road shows across the Trust where staff also had the opportunity to 'pledge', with a handprint, against bullying & harassment. The Trust's Dignity at Work policy has been revised and a staff handbook has been produced. These, with the aforementioned DVD, will be launched over the next month.

Bullying 'hot spots' and individuals have been identified, and targeted interventions are taking place.

Overall, progress against the agreed action plan has been good and provides the first steps towards achieving the desired culture. However, it is recognised that phase three of the programme needs to provide the Trust with a robust plan to embed and sustain the changes.

3 Phase three - embedding and sustaining change (Sept 2015 onwards)

Phase three will not only need to continue to deliver the actions on the current plan, but also provide a longer term strategy to ensure continuous development and improvement. An Organisational Development strategy is currently being developed for EKHUFT, which will include plans for implementing change in the divisions.

The 'Cultural Change' leadership development programme, designed for the divisional management teams, will be cascaded to middle managers to ensure a common understanding, language and approach to leading individuals, teams and change in the Trust.

The We Care values, with the addition of 'Respect', and the supporting behavioural framework will be re-launched in July and will then be incorporated in key HR processes; recruitment, induction appraisal, talent management and development. This will ensure that the values and behaviours are embedded in our 'people processes', helping managers to recognise effective behaviour and hold to account those that are behaving inappropriately. The introduction of a Trust-wide recognition scheme will reinforce the importance of the values and behaviours, recognising not just what people achieve but how they achieve it. Progress of both phases two and three will be reported on a monthly basis to the Improvement Board, Strategic Workforce Committee and Board of Directors.

4. Integration with other programmes

It is essential that the Cultural Change Programme is seen to integrate and support other major change programmes. This is being done in a number of ways. Internal communications aim to bring the improvement journey, clinical strategy and culture work together, for example, 'Our Improvement Journey', the monthly staff newsletter which reports on each of the programmes.

The forums that have been set up provide another means of communicating in a cohesive way - the clinical strategy being presented at the Administrator's forum and being the key focus of the next Consultant's forum, aiming for increased medical engagement.

As part of the Trust's overall improvement journey, each site has developed an 'Improvement Hub', a physical space where staff can visit to learn more. These hubs include information and resources from the ongoing culture work.

A monthly meeting also takes place between senior leaders responsible for the clinical strategy, improvement journey and culture change, ensuring alignment and a 'joined up' communications plan.

5. Measuring success

There are a number of existing measures that we can draw on to measure progress against the aims.

The annual NHS staff survey will be used to gauge overall staff engagement and other areas, such as the extent of bullying, on an annual basis.

The staff FFT provides quarterly feedback on how staff feel about working at EKHUFT – whether they would recommend as a place to work or to be treated. Additional questions will also be added to this survey to gain feedback on the effectiveness of our internal communications (Q2 & Q4) and on how well we are addressing bullying and harassment (Q1). (NB FFT is not run in Q3 as this is when national NHS staff survey goes out). The survey for Q1 has recently been sent and results are expected at the end of June.

The Trust's balanced scorecard includes a number of measures relating to staff, for example, % of staff sickness, appraisal rates and appraisal quality. We have taken these and added % of turnover and exit interview data. All of these are indicators of both manager effectiveness and, in turn, staff engagement and are tracked on a monthly basis.

In addition to these existing measures, others will be added, integral to the ongoing work, rather than in addition to it.

All aspects of the leadership development programmes will be evaluated, both in terms of immediate and longer term impact on an individual, their team and division. The divisional management teams will be required, as part of their leadership programme, to develop success criteria and ways to measure progress.

The forums that have been set up, which will be held on a quarterly basis, will provide a means of gathering ongoing feedback. A standard questionnaire will be developed with 'yes/no' answers to gain hard data on the key areas of the programme. The same questionnaire will be used with the same groups i.e. attendees of the forums, over a period, to identify trends. These questionnaires will be included as part of the next forums, due to be held in September.

It is recognised that the scope of these measures give an indication of the progress and success of the Cultural Change Programme. However, the '*great place to work*' vision is intangible, based on feeling, not possible to measure. As Einstein said, '*Not everything that can be counted counts, and not everything that counts can be counted*'

1. Leadership & Management									
CQC KF ref	Plan Ref.	Action Planned	Date Starting	Target Completion Date	By whom	RAG rating	Action taken to date- March 2015	Key Measures	Impact RAG*
Key Finding 01: There was a concerning divide between senior management and frontline staff KF01.01 Understand the culture of the Trust and identify the root causes of the cultural gap KF01.02 Develop and implement a revised engagement and involvement plan with staff, including the WeCare engagement programme	1	Focus Groups/stakeholder interviews for root cause analysis							
	1.01	21 Focus groups planned and facilitated by the Hay Group on all 5 Trust sites	Feb-15	Feb-15	HG		Feb 15- 24 Focus Groups & 22 Stakeholder interviews held in January/February '15 by Hay Group. Initial findings presented back to Cultural Change Steering Group for consideration in February group meeting. Feedback given and resonated with SG.	1. Monthly Pulse Surveys	
	1.02	22 stakeholder interviews planned and facilitated by the Hay Group	Jan-15	Feb-15	HG			2. Monthly updates on the CQC dashboard over:	
	1.03	Emerging themes feedback to Cultural Change steering group	Feb-15	Mar-15	HG			Staff Turnover	
	1.04	Final analysis of interview & focus group data	Mar-15	Mar-15	HG		Mar 15- final report produced by Hay detaing process, findings and reccommendations for phase 2&3	Staff sickness	
	1.1	Behavioural framework/Trust Values developed						Annual appraisals (quality & quantity)	
	1.11	HayGroup to present Behavioural framework to EKHUFT	Mar-15	Mar-15	HG		Mar 15- Behavioural Framework presented to Cultural Change Steering Group in March Meeting. Copy sent to and discussed by Exec Team.	3. Quarterly FFT survey results	
	1.12	Review of proposed behavioural framework	Mar-15	Apr-15	SG/ET		Apr 15- Exec team reviewed framework. Framework to be rolled out July 15 trustwide.		
	1.13	Leadership and management development programs developed using behavioural framework as foundation (including structured learning opportunities)	Mar-15	May-15	JW / HG		Mar 15- identified staff for management leadership program . Training booked and initial content approved/developed for a 'middle management leadership program' May 15- programmes designed. Please see ref 1.3		
	1.14	Sign-off Behavioural framework	Apr-15	Apr-15	ET		Apr 15- framework signed off by ET	4. Annual NHS Staff Survey	
	1.15	Review We Care Values in light of behavioural framework	Apr-15	Jul-15	JW		May 15- We Care values strenghtened by adding 'Respect'. Values to be launched after CQC inspection	5. Project activities feedback/evaluation:	
	1.16	Relaunch of We Care in light of review	Jul-15	Aug-15	JW				
	1.17	Behaviours launched throughout Trust	Jul-15	Aug-15	JW, GS		May 15- behaviours to be launched after CQC visit		
	1.2	Senior Leadership Development (Deloitte R1, R3, R4, R18)						Listening Events	
	1.21	Develop an executive development programme for BoD review	Mar-15	Apr-15	CB/ SLB		Executive Awaydays took place in May. Structured development Programme to be developed aligned to the Board Development Plan	Training days	
	1.22	Develop a board development programme to include listening skills and individual coaching	Apr-15	May-15	NW/CB		Board Development Plan is in draft stage.		
	1.23	Develop an internal stakeholder engagement plan aimed at enhancing the internal engagement for all Executive Directors	Jul-15	Sep-15	CB/SLB				
	1.24	Develop strategy to ensure full engagement with satff & key stakeholders on a 'Great Place to Work' and 'Clinical Engagement Strately'	Feb-15	Jul-15	SLB/LS		Mar 15- clincial engagement strategy started- Medical Engagement Survey (MES) sent to all doctors in Trust and Consultant's forum booked and planned for May to discuss results of MES. May 15- consultant forum held, MES survey fed back/discussed at forum.		
	1.25	Longer term engagement strategy to be developed	May-15	Jul-15	SLB/LS		May 15- communications review underway,		
	1.3	Leadership and Management Development Programmes							
	1.31	Develop and deliver exec leadership programme	May-15	Dec-15	HG		May 15- leadership programme started		
	1.32	Develop and deliver leaderhsip programme for divisional management teams/corporate colleagues	Jul-15	Dec-15	HG				
	1.33	Develop and deliver 1 day 'Getting Started' management development programmes for middle managers (Bands 6-8)	May-15	Dec-15	JW		May 15- Programme started being rolled out to band 8 across the Trusts.		
	1.4	Board Processes and Systems (Deloitte R19, R40)							
	1.41	BoD meetings will have monthly update regarding cultural change project as agenda item	Mar-15	On-going	JW/SLB		Mar 15- monthly updates started at March BofD meeting and is standing item on BofD meeting agenda		
	1.42	Ensure all staff receive regular training on risk management particularly in relation to the application of registers	Mar-15	Apr-15	SLB/SS				
	1.5	Organisational Effectiveness (Deloitte R55)							
	1.51	Strengthen the clinical leadership development programme in light of the medical engagement issues at the Trust	Mar-15	Jun-15	PS/SS/ SLB				
	1.52	Ensure time is protected from operational duties for Key Clinical Leaders to attend	Apr-15	Jun-15					

	1.6	Engagement with individual teams and leaders/managers throughout the Trust in a structured programme					
	1.61	Develop Team 'Toolkit' for Management to help produce effective teamwork	Mar-15	Jun-15	HG		Mar 15- HG fed back to CC steering group intitial thoughts of what Team toolkit to include at March meeting. May 15- on hold due to budget constraints.
	1.7	HR Systems and Processes					
	1.71	Develop Organisation Development strategy for EKHUFT	Aug-15	Sep-15	JW		
	1.72	Review Trust reward & recognition schemes	Sep-15	Oct-15	RE		
	1.73	Launch Trust-wide recognition scheme	Nov-15	Nov-15	RE		
	1.74	Re-launch flexible working policy	Sep-15	Oct-15	RE		
	1.75	Embed values into employee life-cycle e.g. recruitment, induction, appraisal)	Jun-15	Sep-15	JW		

2. Communications & Engagement

CQC KF ref	Plan Ref.	Action Planned	Date Starting	Target Completion Date	By whom	RAG rating	Action taken to date- Feb 2015	Key Measures	Impact RAG*
Key Finding 01: There was a concerning divide between senior management and KF01.01 Understand the culture of the Trust and identify the root causes of the cultural gap KF01.02 Develop and implement a revised engagement and involvement plan with staff, including the WeCare engagement programme	2	Behavioural framework/Trust Values developed						1. Monthly Pulse Surveys	
	2.01	HayGroup to facilitate development of accepted behaviours/values with staff	Apr-15	May-15	HG		Feb 15- Focus groups produced set of stop/start/continue behaviours. Mar 15- HG presented behaviours to CC Steering Group to gain feedback.		
	2.02	Engage staff throughout the Trust with the values and behavioural framework through communication campaign, focusing work on engaging people managers	Apr-15	May-15	HG		Feb 15- Produced a ‘great place to work’ wheel with staff to show what they feel makes a great place to work. May 15- 6 month plan agreed to cascade values/behavioural framework to Trust. Exec team leading cascade.		
	2.1	Increase the Board, Exec and Divisional Director’s visibility and communicate purpose, vision and passion						2. Monthly updates on the CQC dashboard over:	
	2.11	Regular Blogs by Exec Directors	Jan-15	On-going	ET		Feb 15- Regular blogs have begun from Paul Stevens, Sandra Le Blanc and Julie Pearce. High open rates from online users. Staff responding with comments, concerns and questions. May 15- Chris Bown and other execs also regularly blogging.	Staff Turnover	
	2.12	Board Photos on all sites	Jan-15	Mar-15	GS		Feb 15- Boards are in place at sites. Request to medical photography for print of photos in process. Photo format measured and ready to go. Mar 15- Photos are now in place at most sites, others waiting to go up. May 15- boards in place and photos in.	Staff sickness	
	2.13	Back to the floor job shadowing to be rota’d in to Board/Exec’s diaries	Feb-15	On-going	GS, ET		Feb 15- Job shadowing up and running	Annual appraisals (quality & quantity)	
	2.14	Regular interview with Exec Director/Board member in monthly staff newsletter	Feb-15	On-going	VC		Mar 15- regular interview in both Mar and April edition of 'our improvement journey' which goes out to all staff, plans for this to continue	3. Quarterly FFT survey results (Q4 2014/15 & Q2 2015/16)	
	2.15	Board and Exec ‘meet and greets’ in frontline and support areas	Apr-15	On-going	GS		Mar 15- New CEO beginging to meet staff on frontline, plans for this to continue in April. May 15- over 2500 staff met		
	2.16	Review use of other channels, e.g. social media, for Board and Exec input	Apr-15	Jun-15	GS			4. Annual NHS Staff Survey	
	2.17	Ensure Board plans and progress are effectively communicated and staff have opportunity to contribute, e.g. annual plan, annual report	Apr-15	On-going	GS		Apr 15- initial annual plan not available in April, has been put the agenda of the comms plan for July 15		
	2.2	Develop forms of 2 way communication and engagement between senior management and frontline staff						5. Project activities feedback/evaluation:	
	2.21	Structured opportunities for listening to staff occur on a regular basis and staff receive timely feedback	Jan-15	On-going	ET		Feb 15- Two further ‘staff listening meetings’ held in February. As of May 15- staff suggestion cards permanently in place. CE's forum now on a monthly basis on 2-3 sites and format has changed to a listening style focus.	Forums	
	2.23	Develop effective mechanisms for capturing and responding to staff feedback in a timely way	Jan-15	On-going	GS		Feb 15- Staff suggestion cards delivered on all sites Jan/Feb. Online version set up and publicised. Staff suggestions being analysed by Verve and presented at March Board. Mar 15- Verve analysis of SSC presented at Board	Listening Events	
								Training days	

	2.24	Introduce a revised team brief communication tool systematically throughout Trust, incorporating communication training for people managers	Mar-15	Jan-16	VC		Feb 15- Planning underway for piloting new style team brief in UCLTC – staff involvement in planning and implementation being sought . Mar 15- Team Brief Pilot meetings underway for UCLTC division. May 15- first phase of pilot complete. Evaluation underway before full roll out	
	2.25	Develop use of social media (particularly Yammer) and mobile technology (including BYOD) to communicate with hard to reach staff	Mar-15	Jan-16	GS			
	2.26	Evaluate effectiveness of new team brief tool as 2 way communication	Jun-15	Mar-16	VC		May 15- evaluation begun of first phase of pilot	
	2.27	NEDs and Trust Governors to host 6 monthly listening forums on individual sites with reps from different staff groups	Sep-15	On-going				
	2.28	Set up administrators forum to increase engagement of hard to reach staff groups	May-15	On-going	KD		May 15- Admin forums set up and 120+ attendees due to come in early June	
	2.29	Set up people managers forum to increase engagement of hard to reach staff groups	Jun-15	On-going	JW, CB		May 15- PM contacted and booking on to forums happening in June/July	
	2.211	Support the Improvement board to facilitate the consultants forum to increase medical engagement in the Trust	Apr-15	On-going	JW		As of May 15- 1st consultants forum complete in early May, 125+ consultants attended. Second forum being set up for early July. Reprot and analysis of feedback from 1st forum complete.	
	2.221	Support each site with the Service Improvement Hubs as a tool to increase staff communication/engagement	May-15	On-going	GS		May 15- materials provided for hubs, regular attendance from team to talk/listen to staff	
	2.231	Develop communication & engagement training for managers at all levels of the organisation	Apr-15	Jan-16	JW/GS		May 15- 'Getting started' people manager programme started which includes elements of communication and engagement	
Key Finding 03: The staff survey illustrated cultural issues within the organisation that had been inherent for a number of years. It reflected behaviours such as bullying and harassment. The staff engagement score was amongst the worst 20% when compared with similar trusts.	2.3	Publicise the 'Respecting each other' anti-bullying programme						1. Monthly Pulse Surveys 2. Monthly updates on the CQC dashboard over: Staff Turnover Staff sickness Annual appraisals (quality & quantity) 3. Quarterly FFT survey results (Q1 2015/16) 4. Annual NHS Staff Survey 5. Project activities feedback/evaluation: Forums Listening Events Training days
	2.31	Advertise campaign via various communication channels	Feb-15	On-going	GS, VC		Feb 15- 'Respect' campaign launched in Trust News, topical coverage in exec blogs, focus of March edition of ‘Our Improvement Journey’. Mar-May 15- continued advertismtent of campaign through blogs, improvement journey, trust news and new dedicated staff zone page.	
	2.32	Launch ‘sign up to the staff charter’	Apr-15	Apr-15	CBe, GS		Mar 15- Equipment and organsation of staff charter launch plan devised, visits to each site planned. Articles in April's 'Our Improvement Journey' to advertise campaign. Apr 15- staff charter launched on all 5 sites. Hundreds of staff pledged to the charter. cmpaign well recieved. team have been asked to return to sites, which will be done in September.	
	2.33	Video on bullying awareness to be produced using real life staff examples	Apr-15	Jun-15	CBe, VC		May 15- video scripts etc produced. Filming began late may and video to be complete for roll out in People Manager forums mid-June.	
	2.34	Dedicated staff zone page for REO set up	Mar-15	Apr-15	GS		Apr 15- Staff zone page up and running at end of April to coincide with staff charter launch	
	2.35	Distribution of staff charter with on going communication referencing the charter	Apr-15	on-going	GS		Apr 15- staff charter distributed with launch week. May 15 Continued distrubution to hard to reach staff groups, plans to give all new starters a copy of the charter on corporate induction.	
	2.36	Advertising workplace contacts with continued reminders for staff	Apr-15	on-going	GS		May 15- Workplace contacts advertised amongst corporate HR, occ. Health, and trustwide.	
	2.37	Run visual reminders for staff regarding the REO campaign	Jun-15	on-going	GS			
	2.38	Produce a staff handbook to show expected behaviours/values and as a point of reference	Feb-15	Apr-15	CBe		May 15- staff handbook draft complete, due to be reviewed by Staff committee by end of May.	
	2.4	Recognise excellence under the We Care banner, e.g. awards, celebration of success						
	2.41	Recruit we care champions	Feb-15	May-15	JW		Feb 15- Advertisement for role in February edition of ‘Our Improvement Journey’ May 15- this action put on hold whilst values and behaviours are discussed/decided/rolled out	
	2.42	Good news stories and staff profiles in key communication channels	Mar-15	On-going	GS		Mar 15- 'Day in the life of...' started and continuing in 'Our Improvement Journey'	
	2.5	Respond to Staff Survey						
	2.51	Analyse 2014 results by division	Mar-15	Mar-15	VC		Mar 15- Verve completed divisonal analysis which was fed back to team	
	2.52	Support management teams to develop divisional plans	Apr-15	Apr-15	HRBPs			
	2.53	Implement plans	Apr-15	Oct-15	DIVS			
	2.6	Review communication channels and on-going measurement of channel effectiveness						
	2.61	Review effectiveness of internal communication channels	Mar-15	On-going	GS		Feb 15- Communication survey incorporated into Quarter 4 Staff Friends & Family Test. Mar 15- results from FFT identified clear needs, which an action plan is being developed to address this.	
	2.62	Develop measurement mechanism for communication reach and effectiveness as feedback areas can be identified and acted quickly	Jun-15	On-going	GS			

		effectiveness so 'problem areas' can be identified and sorted quickly						
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3. Bullying & Harassment

CQC KF ref	Plan Ref.	Action Planned	Date Starting	Target Completion Date	By whom	RAG rating	Action taken to date- Feb 2015	Key Measures	Impact RAG*
Key Finding 03: The staff survey illustrated cultural issues within the organisation that had been inherent for a number of years. It reflected behaviours such as bullying and harassment. The staff engagement score was amongst the worst 20% when compared with similar trusts. KF03.04 Agree a set of Trust Staff Values and Behaviours aligned to the ‘We Care’ values and implement throughout the organisation. Develop and implement a ‘culture change’ programme to address the results of staff survey	3	Analysis of existing B&H data to gain fuller picture of how staff perceive the bullying culture within the Trust						1. Monthly Pulse Surveys 2. Monthly updates on the CQC dashboard over: Staff Turnover Staff sickness Annual appraisals (quality & quantity) 3. Quarterly FFT survey results (Q1 2015/16) 4. Annual NHS Staff Survey 5. Project activities feedback/evaluation: Forums Listening Events Training days	
	3.01	Hay Group to analyse B&H data from FTT Q2 2014	Jan-15	Jan-15	HG		Feb 15- Hay Group analysis happened and fed by to HR Director & Exec Team- informing and influencing project work e.g. focus groups, reviewing policies etc.		
	3.1	'Respecting Each Other' Anti-bullying programme							
	3.11	'Respecting Each Other' Steering group to be set up	Feb-15	Feb-15	CBe		Feb 15- Now meeting on a monthly basis		
	3.12	Advertise campaign via various communication channels	Feb-15	On-going	GS, CBe		Feb 15- 'Respecting Each Other' campaign launched in Trust News, topical coverage in exec blogs, staff zone page on website produced. May 15- see comm & engagement ref 2.3		
	3.13	Produce a staff charter to outline rights and responsibilities	Feb-15	Apr-15	CBe, VC		Feb 15- Staff charter being drafted to outline expected. Mar 15- Charter finalised and ready for Launch in April.		
	3.14	Produce a staff handbook	Feb-15	Apr-15	CBe		May 15- staff handbook draft complete, due to be reviewed by Staff committee by end of May.		
	3.15	Create a confidential & external telephone line for staff to report concerns and get advice over bullying & harassment behaviours	Feb-15	Mar-15	CBe		Feb 15- Confidential Telephone Line being set up for staff to raise any concerns. Mar 15- Telephone line up and running, staff informed via various channels		
	3.16	Review Dignity at Work policy and managers guidelines	Feb-15	May-15	CBe		Apr 15- reviewed and gone to staff committee for sign off		
	3.17	Recruit and train ‘workplace buddies’ and ‘in-house mediators’ to help tackle bullying with peer support	Mar-15	May-15	CBe		Feb 15- Recruitment process for Workplace Buddies has begun and potential training is being developed. Dignity at Work Advisors also have been informed of re-launch of the role Mar 15- Buddies interviewed. Apr 15- interviewing continues and training started. May 15- interviews completed and final training due June/July. Name changed to workplace contacts.		
	3.18	‘Hot Spots’ identified for additional input & support	Mar-15	Apr-15	HRBPs		Apr 15- hotspots identified and heat map produced from staff survey results		
	3.19	Specific interventions implemented in ‘hotspots’	Apr-15	On-going	HRBPs				
	3.101	‘Respecting Each Other’ module developed for leadership/management programme	Sep-15	Nov-15	JW, SB				
	3.111	Video on bullying awareness to be produced using real life staff examples	May-15	Jun-15	VC		May 15- video scripts etc produced. Filming began late may and video to be complete for roll out in People Manager forums mid-June.		
	3.121	Define Bullying	Apr-15	Apr-15	CBe		Apr 15- included in staff handbook		
	3.131	Issue staff handbook	Jun-15	Jun-15	CBe				
	3.141	Awareness Video to be rolled out at Team Meetings	Jul-15	Jan-16	HRBPs				
	3.2	Review & Implement key HR policies							
	3.21	Review raising concerns policy	Feb-15	Feb-15	ML		Feb 15- Policy has been reviewed and updated with accompanying slideshow to let staff know how to use the policy.		

Key	
Chris Bown	CB
Claire Berry	CBe
Executive Team	ET
Gemma Shillito	GS

Hay Group	HG
HR Business Partners	HRBPs
Jane Ely	JE
Jane Waters	JW
Kerry Diamond	KD
Liz Shutler	LS
Martin Luff	ML
Nick Wells	NW
Paul Stevens	PS
Rob Eames	RE
Sally Smith	SS
Sam Bessant	SB
Sandra Le Blanc	SLB
Steering Group	SG
UK Medical Engagement Survey	UKMES
Verve Communications	VC
* We will RAG rate the impact of the Programme using the results from Friends and Family Tests. As of March 2015 we are currently waiting for the first set of FFT results to come through.	