

IIP Storyboard

**“To be one of the safest, most effective and
compassionate health and social care organisations”**



INVESTORS IN PEOPLE RE-ACCREDITATION



respect & dignity



openness & trust



leading edge



learning & development



accountability

February 2019

Foreword

As a three times IIP accredited organisation we are delighted to welcome the Investors in People Assessment Team back to the Belfast Trust. Achieving and retaining Investors in People accreditation has been a key strategic priority for the Belfast Trust since it came into existence in 2007, less so because of the badge, but more so because the IIP Standard continues to provide the Trust with the ideal framework to support it in achieving its vision of being *'one of the safest, most effective and compassionate health and social care organisations'* and being in the *'top 20% of high performing Trusts by 2020'*

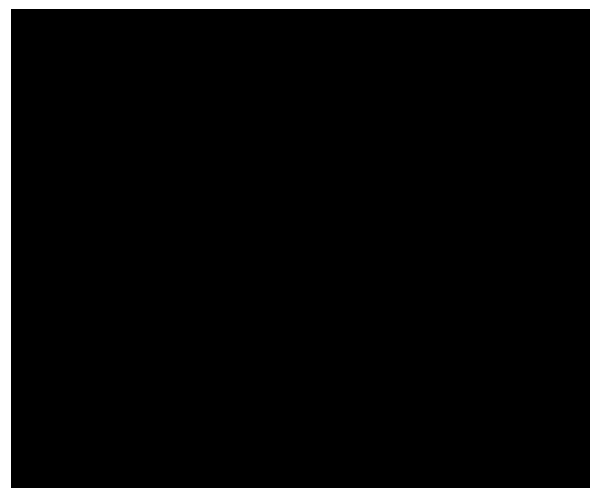
We have always viewed our IIP Assessment as a vital part of the Trust's journey to excellence and our ambition to become a high performing organisation and we look forward to your feedback on where we are performing well against the Standard and where we need to continue to improve.

As a Senior Management Team we are very proud of our highly professional and committed workforce and the dedication of our staff in meeting the health and social care needs of service users and communities and all against a backdrop of political uncertainty, increasing demands and expectations, and ongoing cost pressures and external scrutiny.

We firmly believe we have a good story to tell and this IIP Storyboard provides a strategic and corporate narrative on the wide range of critically important and diverse services we offer and the wide range of approaches the Trust has in place to ensure our staff are well led, managed and developed.

We believe you will find the Storyboard to be an invaluable and rich source of information as you work to re – acquaint yourself with the Trust while also being a useful starting point for Gill, the new member of your IIP Assessment Team.

On behalf of our senior team and all leaders and people within Belfast Trust, we would like to welcome you and very much look forward to meeting you all in the coming days.



Welcome

As the newly appointed Director of Human Resources & Organisational Development I would like to join with the Chief Executive in welcoming the IIP Assessment Team to the Belfast Trust.

As a Trust we have always viewed achieving and retaining IIP accreditation as being an outstanding achievement, requiring as it does a genuine commitment from leaders, passionate employees and everyone being focused on the ambitions of the organisation.

When as a Trust you receive such feedback as *'the Trust epitomises the Investors in People philosophy. Not because everything it does is right, but because there is a constant drive to do things better'* (IIP Assessment Report 2016) it acts as an affirmation of all of the excellent work staff have been involved in as well as a motivation to learn and work to become even better.

In a very large and complex organisation it is difficult to adequately reflect the range and scale of the excellent work our large and diverse workforce undertakes on behalf of service users and the communities the Trust serves. It is equally challenging to capture the wide range of approaches and practices the Trust has in place to support staff in its pursuit of excellence in the way it leads, supports and manages its people.

The Storyboard includes an introductory section which provides an overview of the Trust and the context within which we operate and the challenges we continue to face as a Trust. This section also presents you with an overview of our workforce and structure as well as a flavour of the scale of activities we are involved in as a Trust. We believe this section of the Storyboard will support you as a team of assessors with the Discovery and Context requirements of the IIP Assessment Process.

The rest of the Storyboard allows us to give you a flavour of our approaches and practices across the three principles of the IIP Standard, namely *'leading, supporting and improving'*, principles which align very well with our corporate strapline of *'caring, supporting, improving, together'*.

The Storyboard provides an overview and insight into the scale and complexity of the work the Trust is involved in. It also provides an overview of, both the well established people processes and practices which continue to ensure people and leaders know what is expected of them, whilst also showing how people are actively engaged in ensuring the appropriateness and consistency of the principles and practices across the Trust and across all staff groups and the positive outcomes the Trust continues to realise from its ongoing investment in its people.

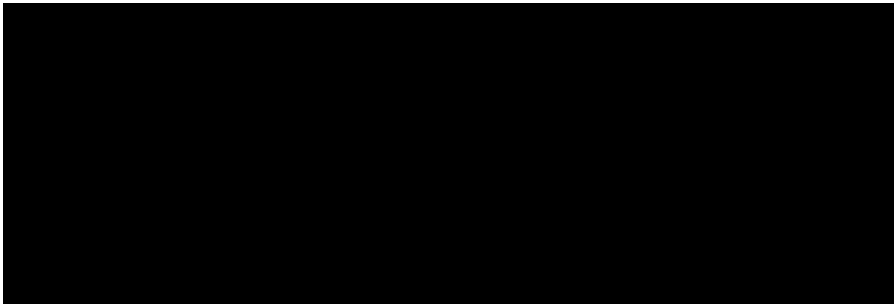
Like the transition to Generation 6 of the IIP Standard, the Assessment Team will find people practices that are now well – established, practices that are new and practices that are different and improved since our last review in 2016. To mirror the language of IIP the Trust is constantly moving, constantly improving and constantly trying to keep ahead.

This Storyboard presents a corporate overview of people processes and practices and is not exhaustive. The Assessment Team will hear from Directorate teams and staff about additional Directorate specific approaches and practices in how staff are led, managed and developed across Directorates. In addition you will have an opportunity to hear from Professional Leads

on specific strategies, policies and approaches that are in place and are being applied for differing professional groupings.

We have always viewed our IIP Assessment as a vital part of the Trust's journey to excellence and our ambition to become a high performing organisation and we look forward to your feedback and report as you work to deliver an independent and objective picture of our performance against the IIP Standard.

Once again you are welcome to the Belfast Trust and we look forward to supporting you in whatever way we can while you are on site and to receiving your feedback once you have had a chance to consider all your findings.



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Introduction



1.1 About the Belfast Trust

The Belfast Trust is the largest integrated Health and Social Care Trust in the United Kingdom, delivering integrated care (both health and social care) to a population of approximately 340,000 across the City. The Belfast Trust provides the majority of regional specialist services across Northern Ireland including the Regional Trauma Centre. It has an annual budget of £1.3billion and a workforce of over 20,000 staff (full time and part time). The Belfast Trust also comprises the major teaching and training hospitals in Northern Ireland.

The Belfast Trust provides integrated and joined up health and social care through both acute services (hospital based) and community based services (in people's own home or through locally based health centres and facilities). In order to deliver these services in the best way the Trust has a devolved structure which has been grouped into 11 Directorates (see further details on structure under Indicator 6 Structuring Work) namely:-

- Adult Social and Primary Care Services
- Children's Community Services
- Specialist Hospitals and Women's Health
- Surgery and Specialist Services
- Unscheduled and Acute Care
- Medical Directorate
- Nursing and User Experience
- Finance, Estates and Capital Redevelopment
- Human Resources & Organisational Development
- Performance, Planning and Informatics
- Corporate Communications

1.2 The Trust's Executive Team

The Trust's Executive Team is responsible to the Board for the day to day operational management and development of the Trust.

Belfast Trust Executive Team:

The Executive Team is led by the Chief Executive Mr Martin Dillon and includes the Trust Directors and their respective Directorates as set out below:



Around 20,000 employees
£1.3 billion revenue
340,000 population base
650 consultant doctors
750 'looked after' children

For a 'bio' of each Director see the attached document:

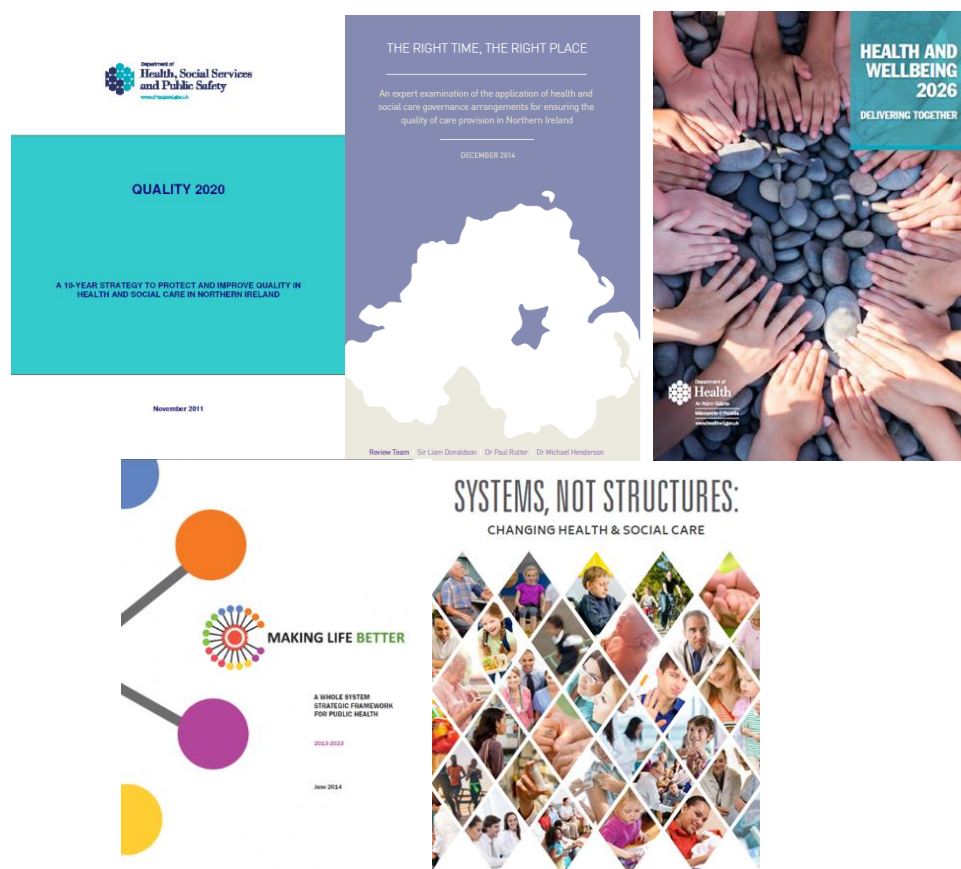


Executive Team
Profiles.docx

1.3 Strategic Context

When you operate in a sector which is very fluid, dynamic and always changing, it is critical that a Trust like the BHSCT continuously reflects and responds to the [external environment](#) within which it operates. In a sector which is highly political, where changes in demographics, technology and service users and stakeholders' expectations have to be reflected in current plans and future priorities, scanning the external environment is a critical imperative for the Trust when it comes to strategic planning.

Since it was formed in 2007 the Belfast Trust has worked effectively to ensure its strategic and operational plans and priorities reflect and respond to the needs, expectations and aspirations of its many and diverse stakeholders as well as responding to the changing direction of travel for health and social care provision and delivery as set out in such critical regional and national reports as set out below.



The Trust in its [Corporate Management Plan \(2018 – 2021\)](#) 'Section 2: Strategic direction' has set out some of the [big 'influencers'](#) on its future direction of travel and priorities, with the common and unifying thread being the need 'to deliver care in the community, as close to the person's home as is possible, with hospitals working as part of a network arrangement and all in partnership with its key stakeholders and the communities the Trust serves.'

Since it was formed in 2007 the Belfast Trust has worked effectively to ensure it identifies and proactively responds to the ongoing [challenges](#) all HSC organisations face. Once again the Trust in its [Corporate Management Plan \(2018 – 2021\)](#) 'Section 3: The Challenges' has set out some of the challenges it has to grapple with everyday as it works to deliver safe, high quality and compassionate care to all its service users.

While the above may provide an insight into the backdrop within which the Trust operates, the focus of regional documents is more about [the where](#) (destination of travel) and [the why](#) (the rationale for any proposed change in direction). Driven by a commitment to stakeholder involvement and engagement the BHSCT in 2008 started a conversation with its many stakeholders as to the future shape of service provision and delivery across the Trust's area (including the provision of regional services).

For example '[New Directions 1](#)' (2008) was the Trust's first coordinated plan to engage with its many stakeholders, services users and communities in a conversation about the future shape of service provision and delivery across the Belfast Trust. In retrospect this process and the output and outcome of '[New Directions 1](#)' (2008) has had a profound impact on the shape of service provision and delivery for service users, staff and the communities the Trust serves, including service users accessing the Trust's regional based services.

The Trust's service provision and delivery model has been radically reconfigured over 2008 – 2018 as the Trust worked to deliver care in the community, as close to the person's home as is possible, with hospitals working as part of a network arrangement and all in partnership with its key stakeholders and the communities the Trust serves, changes which are all in line with the recommendations of the above mentioned regional and national reports.

In 2018 the Trust has embarked on its second conversation with its many stakeholders, services users and communities about the future shape of service provision and delivery across the Belfast Trust for the next ten years and beyond - '[New Directions 2](#)' (2018). The scale of changes in relation to service provision and service delivery over the next ten years – 2018 – 2028 are likely to be as dramatic as they have been in the last ten years. The challenge and the opportunity for the Trust is to ensure the organisation has the capabilities and people to respond to such challenges and opportunities in proactive and effective manner, for the benefit of all its stakeholders.

In addition recently completed [regional reviews](#) have identified the [four vital elements of service improvement](#) for our service users, carers, and wider community, that is, creating and supporting the development of:

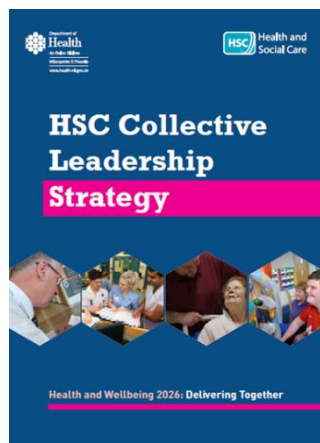
- Skilled clinical leadership
- Cultural change, where quality improvement is second nature
- Data linked to goals, measuring quality locally and in real time
- Standardisation of processes where possible.

These [four vital elements of service improvement](#) are the building blocks for achieving our vision and the Trust has undertaken extensive work in taking all four elements forward since our last review.

The Belfast Trust continues to work on and has contributed along with its partners to improvements against the four regional transformational priorities:

- Improving the health of the population
- Improving the quality and experience of care
- Ensuring the sustainability of the services delivered
- Supporting and empowering our staff delivering health and social care services.

In addition to the above 'service provision and service delivery focused Reports' the Trust has contributed to and is responding to [Regional Based Strategies and Frameworks](#) including the HSC Collective Leadership Strategy and the Healthcare Leadership Model (See Indicator 1) and HSC Workforce Strategy (See Indicator 7). These strategies and frameworks set out a direction of travel and a road map as to where the Trust aspires to get to in the critical areas of Leadership and Workforce.



1.4 The Challenges we face as a Trust

In addition to responding to the recommendations flowing from the above reports the Trust continues to proactively engage with all its key stakeholders in responding to a wide range of ongoing challenges such as: -

Service Demand

Regional estimates are that the cost of demand for services increases at 6% per annum whilst funding levels rise at approximately 1-2%. This challenge is demonstrated by, for example, the 9% increase in unscheduled care activity between 2014/15 -2016/17. Demand has increased across community and acute services and this is reflected in, for example, increased waiting times for domiciliary care and elective waiting lists.

Increasing Cost of Quality Care

Funding is currently not keeping pace with new and modernised models of care, updated service standards, developments in drug treatments and technology and changes to workforce levels and delivery. Over the last decade, Belfast Trust has made recurrent productivity and efficiency savings of approximately £300 million.

Service Transformation

All the recent strategic reviews have identified that transformation of service delivery, supported by investment, is key to delivering high quality health and social care provision in Belfast and NI. The Trust is committed to an ongoing programme of transformational change. In parallel with this is the need for new investment if the expected benefits to service users are to be realised.

Workforce

Our core workforce of 20,000 staff incorporates a wide range of skills and training and we support the development needs of staff as well as supporting staff to live well. Our 'bwell' campaign includes fitness, mental health and wellbeing, smoking cessation support etc. We are also working to address the regional challenges in recruitment areas such as senior trainee doctors, nursing and home care workers. (See Indicator 7 for more on Workforce).

Digitalisation

Our adult acute sites have three different Patient Administration systems and our Community information systems are also under development. While 'Encompass', the new HSC Digital strategy will focus on the delivery of a digital health and care record, linking information across primary, secondary, community and social care. As a Trust we are continuously re-examining the way we use technology in supporting more flexible and efficient working as well as increasing access to real time information for all staff.

Data Analytics

We want to continue our pro-active approach to using and sharing data, whilst still complying with our obligations in terms of confidentiality and information governance. Work in the area of data analytics supports the Trust in progressing one of the **four vital elements of service improvement** for our service users, carers, and wider community, that is, creating and supporting the development of data linked to goals, measuring quality locally and in real time referred to above.

Innovation and Being Leading Edge

Key to our further development is a commitment to new and innovative practices in an environment which supports staff with the necessary time, skills training and support. As a major Teaching Trust we are heavily involved in the training and ongoing professional development of all clinical based staff and in addition to this investment we are extensively involved in research. We continue to work to ensure our practices are in line with best practice guidelines and in many cases we are proud to a leader across several fields of clinical care.

One of the Trust's core values is '*being leading edge*' which in practical terms means 'actively seeking out innovative practice', 'participating in new approaches and service development opportunities', 'sharing best practice with others' and 'promoting the Trust as a centre of excellence'.

Our Estate

As well as our ambitious programme to develop our hospitals and community services over the next 3-5 years, we also need to maintain all Trust buildings and equipment, including ICT infrastructure, to ensure safe working conditions and a suitable environment for delivering our varied services.

As a Trust we are committed to having an estate which is modern and fit for purpose supporting the delivery of 21st century care to all our service users.

Many of the above challenges have required major transformation in how the Trust operates. Having a culture that encourages and embraces innovation and a workforce that embraces change have been key to the ongoing transformative work the Trust continues to engage with.

1.5 Internal Drivers for Change

The Trust is committed to providing clarity around the organisation's purpose, ambitions, vision, values and objectives and in its [Corporate Management Plan](#) the Trust sets out its ambitions and strategic priorities for 2018 – 2021. In its [Quality Improvement Strategy for 2017 – 2020](#) the Trust sets out it intends to create the conditions to become a leader in providing safe, high quality and compassionate care. While in its [Organisational Development Framework](#) the Trust sets out its plans and organisational development priorities as it works to realise its ambition of becoming a world leader in the provision of health and social care.



2018-21 Corporate Management Plan.p



QI Strategy 2017-2020.pdf



BHSCT-Organisational-Development-Framework.pdf

In its draft [People and Culture Strategy](#) the Trust looks at how it will work to create the conditions that truly engage and inspire its people and carers. This work will be further informed by the work in progress on “[discovering](#)” culture. The Trust has long declared its ethos of developing a [community of leaders](#), this means having leaders at all levels of the organisation working towards achieving high performance and improvement for our patients and clients. In the [Leadership and Management Framework for 2016 – 19](#) the Trust sets out its plans and priorities for supporting the development of collective leadership across the Trust and its intentions of Growing a Community of Leaders at all levels.



 People & Culture Strategy_DRAFT UPC



 Leadership and Management Frame



[click here for online framework](#)

The Trust places a very high premium on continuously reviewing its strategies and approaches and ensuring the right strategies, systems, principles and practices are in place and are being consistently deployed across the Trust and across all areas of service provision. In addition all such reviews consider and report on the extent to which deployed approaches are actively driving positive outcomes. The [Annual Quality Report](#) outlines the progress the Trust has made in improving the quality of services over 2017/18. It also identifies the key quality improvement areas the Trust will focus on over the coming year.

Through collaborative working the Trust is using measurement and real time data, to learn and improve at every level in order to achieve these objectives to support it in realising its aim of being '[recognised as a leader in the provision of safe, effective and compassionate healthcare](#)'. The purpose of the [Annual Report](#) is to capture a flavour of what the Trust has achieved in the preceding 12 months. It highlights a range of the Trust's new services, priorities and sets out the financial position of the Organisation. In line with Indicator 4 Managing performance – the Annual Quality Report and the Annual Report give a flavour and insight into how the Trust sets its objectives and how performance is measured and feedback is used to support accountability reviews and future plans and priorities.



 Annual Quality Report 2017-18.pdf



 BHSC Annual Report and Account

1.6 Our Annual Activity

The Belfast Trust is the largest integrated Health and Social Care Trust in the United Kingdom, delivering care to a population of approximately 340,000 across the City. We provide the majority of regional specialist services across Northern Ireland including the Regional Trauma Centre. We have an annual budget of £1.3billion and a workforce of over 20,000 staff (full time and part time). The Belfast Trust also comprises the major teaching and training hospitals in Northern Ireland.

The following activity levels begin to give you a flavour of the range and scale of the work the Trust delivers over any given year:

- 330,000 District Nurse Visits
- 7,500 people supported in their own homes
- Responsible for 350 children on the Child Protection Register, 750 Looked After Children and over 4,000 children and young people in need
- 160,000 + new attendances at Emergency
- Departments
- Care for 65,000 day case patients
- Care for 150,000 inpatients
- Care for 600,000 outpatients
- 15,000 critical care bed days
- 140 partnerships + over 1000 contracts with community, voluntary and private sector organisations
- Supported by 400 volunteers
- Our staff are supported in delivering care by over 40,000 family carers
- 7.8 million Laboratory test results processed annually

1.7 Our Investors in People Ambition

2016	2019	2022	2025
IIP Bronze level accreditation (Gen 5)	Our 'As Is' Position Established level Silver level accreditation	Our 'To Be' Position Advanced level Gold level accreditation	Our 'To Be' Position High Performing level Platinum level accreditation
	 INVESTORS IN PEOPLE Silver	 INVESTORS IN PEOPLE Gold	 INVESTORS IN PEOPLE Platinum

Our Key Strengths	Our Weaknesses/Areas in Need of Development
1. A highly committed workforce whose commitment to the provision of high quality, safe and compassionate care is a unifying thread across all sites, services and professional groups 2. The movement towards 'an ambition' to be <i>'amongst the top 20% of providers of health and social care by 2020'</i>, while being challenging, provides a greater sense of clarity and direction for staff. 3. Positive evidence of the Trust's values being more embedded into everyday practices from the Trust's last Healthcheck 3 years ago. 4. Improving use of innovative approaches to engage and involve staff and to make information more accessible, simple and easy to access and use. 5. The Trust has and operates to a well – established 'Performance Management and Accountability Framework' 6. Ongoing efforts to develop a culture of recognition and appreciation where people feel valued and are recognised for their efforts and performance. 7. The work undertaken on 'Structuring Work' and the introduction of collective leadership and divisions while still in its infancy is positively viewed by staff.	1. Recruitment across all professional groups continues to be a challenge for the BHSCT specifically and the NHS generally. 2. The challenge of translating the Trust's laudable ambition of being <i>'amongst the top 20% of providers of health and social care by 2020'</i>, into tangible, measurable and meaningful objectives and KPIs for all areas of service provision and delivery. 3. Still need to do some work on supporting staff to be comfortable in challenging behaviours that are not in line with the organisation's values. 4. Some evidence of staff being informed about decisions as opposed to them participating in and contributing to decisions especially those decisions that impact the individual and/or where the person feels their contribution and input would be of value and would make a difference. 5. Opportunity to improve the use of real time performance data and analytics to prospectively improve the performance of people, teams, services and the organisation. 6. Opportunity to roll out the findings of the 'culture assessment' findings once finalised. 7. Ongoing challenge of ensuring all staff have an opportunity to avail of learning and development opportunities. 8. There are always ways to improve the Trust's approach to change and transition leadership and management to ensure the Trust continues to be change – ready and change – able. 9. The importance of optimising the Trust's approach to succession planning to ensure critical roles are filled and people can progress.

- | | |
|--|--|
| <p>8. Sustained commitment to building staff capabilities to meet current and future role and service requirements.</p> <p>9. A culture of continuous improvement and quality, where innovation is welcomed and encouraged and where people across the Trust are open to new ideas and approaches to improving service provision, service delivery and service user experience</p> <p>10. Leaders have a clear understanding of the external environment within which they operate and the impact this has and will continue to have on the Trust generally.</p> | |
|--|--|

1.8 Key Performance Metrics

The Trust has set the four vital elements of service improvement for its service users, carers, and the wider communities it serves as the building blocks for achieving its vision.

- Creating and supporting the development of skilled clinical leadership
- Creating and supporting the development of cultural change, where quality improvement is second nature
- Creating and supporting the development of data linked to goals, measuring quality locally and in real time
- Creating and supporting the development of standardisation of processes where possible.

These are four key macro and longitudinal performance metrics for the Trust. i.e. the extent to which the Trust has succeeded in delivering on these four critical building blocks

The Belfast Trust will continue to work with its partners in fulfilling its mission of improving the health and wellbeing of the population it serves: its four key objectives and metrics in this area are the extent to which the Trust along with its partners has contributed to:

- Improvements in the health and wellbeing of the population
- Improvement in the quality and experience of care
- Ensuring the sustainability of the services delivered
- Supporting and empowering its staff delivering health and social care services.

These are four key regional transformation priorities set in outcome terms for the Trust and against which the Trust measures itself and against which the Trust is measured.

The Trust in its Corporate Management Plan for 2018 – 2021 has set out its five strategic themes, which are further defined into twenty nine strategic objectives.

In its Corporate Plan the Trust sets out the 13 separate metrics which it will use to measure success across the five corporate themes and against the twenty nine strategic objectives namely: - Improved access to community & social care services

1. Improved access to unscheduled care
2. Improved access to elective care
3. Improved service user and carer experience
4. Improved service safety & quality
5. Improved staff engagement
6. Improved use of resources
7. Break even on Capital and Revenue
8. Financial Sustainability
9. Workforce Sustainability
10. Increased internal financial awareness
11. Delivering on Capital Projects eg.
 - i. New Maternity Hospital
 - ii. New Children's Hospital
 - iii. New Acute Mental Health Unit
12. Securing capital and revenue resource to progress investment in services, workforce, Information Communication Technology (ICT) and Estates

1.9 Our hopes and expectations from this IIP Review – What the Trust would like to gain from this IIP Review

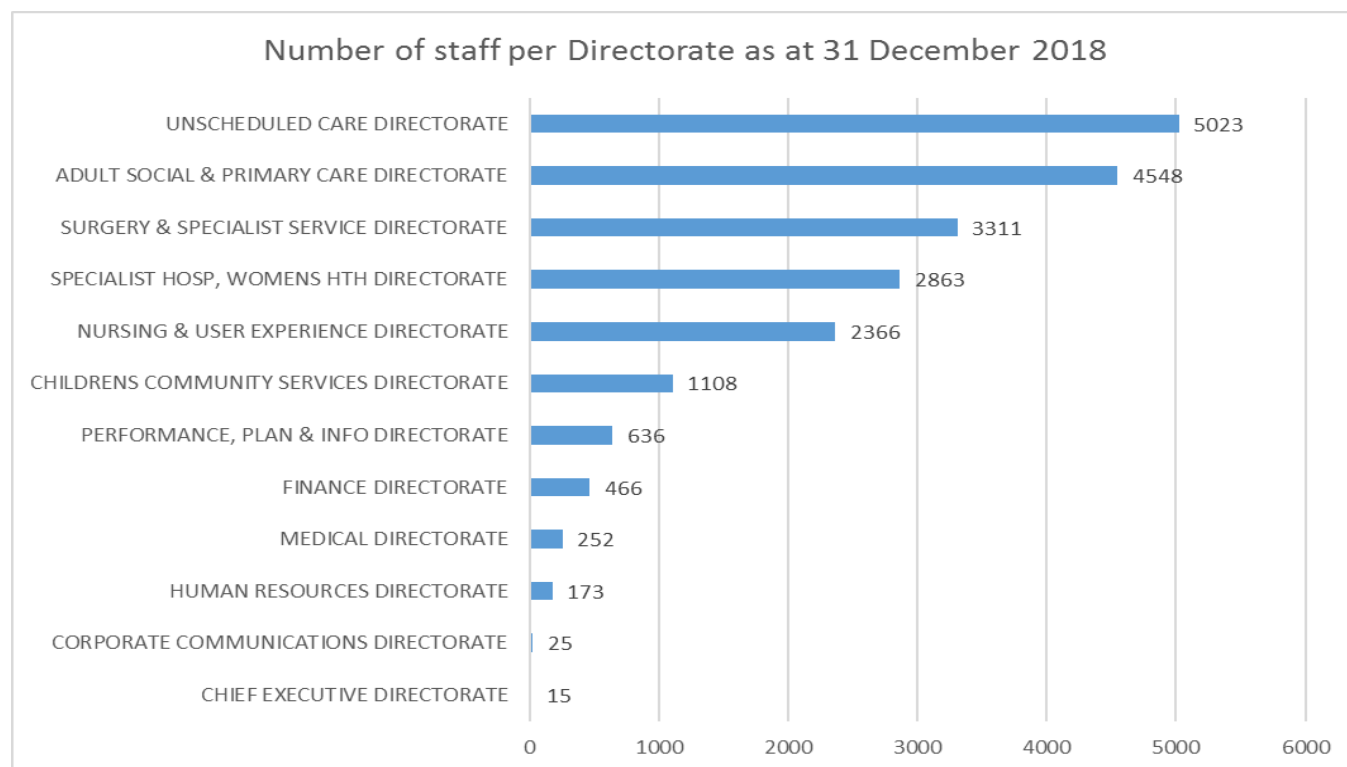
We have always viewed our IIP Assessment as a vital part of the Trust's journey to excellence and our ambition to become a high performing organisation and we look forward to your feedback and report as you work to deliver an independent and objective picture of our performance against the IIP Standard.

Our four primary objectives from this Review are: -

1. To gain independent and objective feedback of our performance against the IIP Standard.
2. To highlight those areas where we are performing well against the Standard and where we need to continue to improve.
3. To retain IIP Accreditation and hopefully concur with the Trust's own self – assessed position - our 'As Is' position of being at an Established level against the Standard.
4. To receive practical next steps on how we move to our ambition of achieving Advanced (Gold Level Accreditation by 2022) and High Performing (Platinum Level Accreditation by 2025).

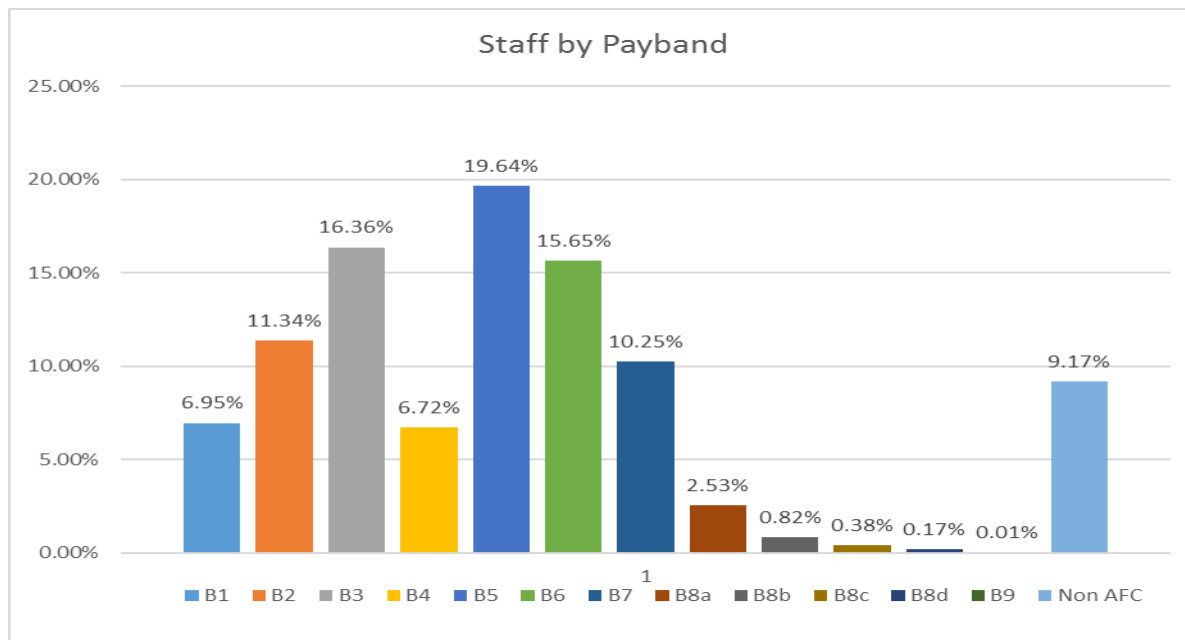
1.10 Our Staff

The organisation has over 20,000 staff. The following graph shows the headcount by directorate:



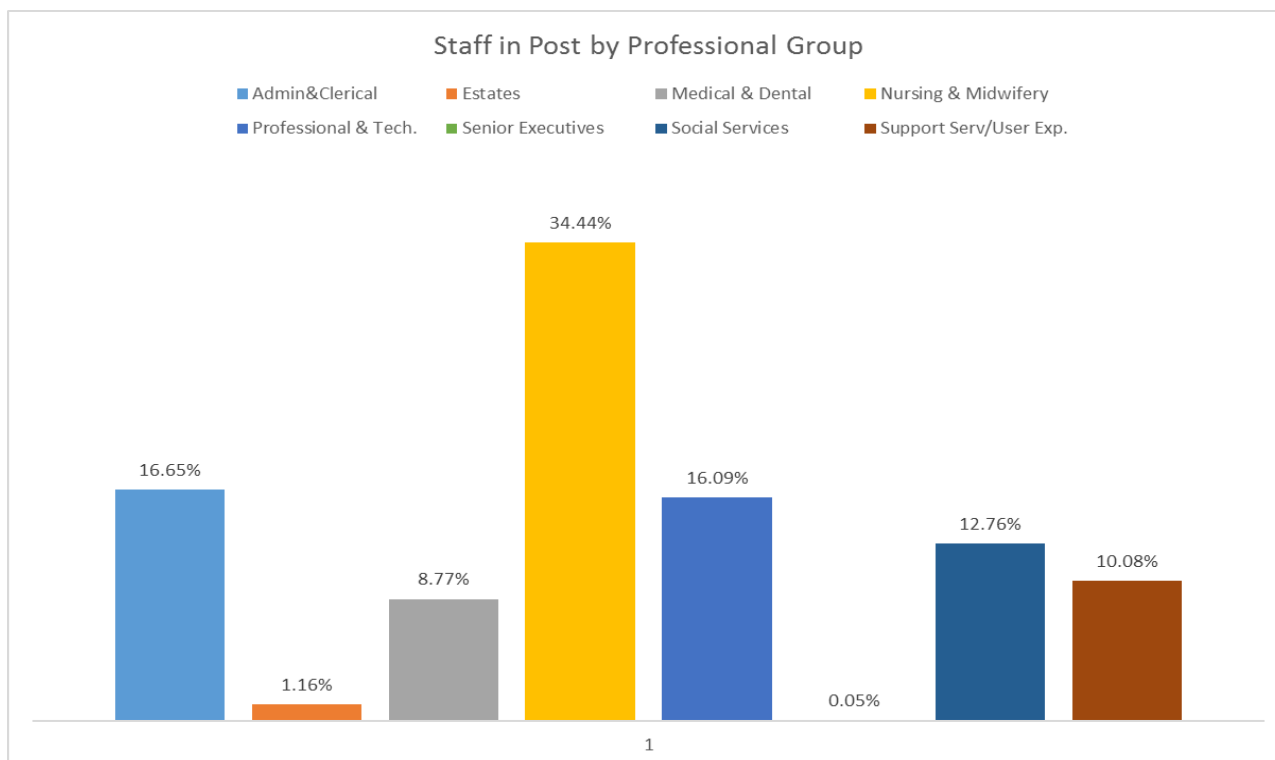
19,219 out of the 20,785 staff (92.4%) of the Trust's workforce work in the six service directorates that provide front-line care namely the Unscheduled & Acute Care, the Adult Social & Primary Care, the Surgery & Specialist Services, the Specialist Hospitals & Women's Health, the Nursing & User Experience (mostly made up of Patient & Client Support Services) and the Children's Community Services Directorates.

The remaining 1567 (7.6%) of the workforce are employed in the six corporate support Directorates namely the Performance, Planning & Information Directorate, the Finance, Estates and Capital Development Directorate, the Medical Directorate, the Human Resources & Organisational Development Directorate, the Corporate Communications Directorate and the Chief Executive's Directorate.



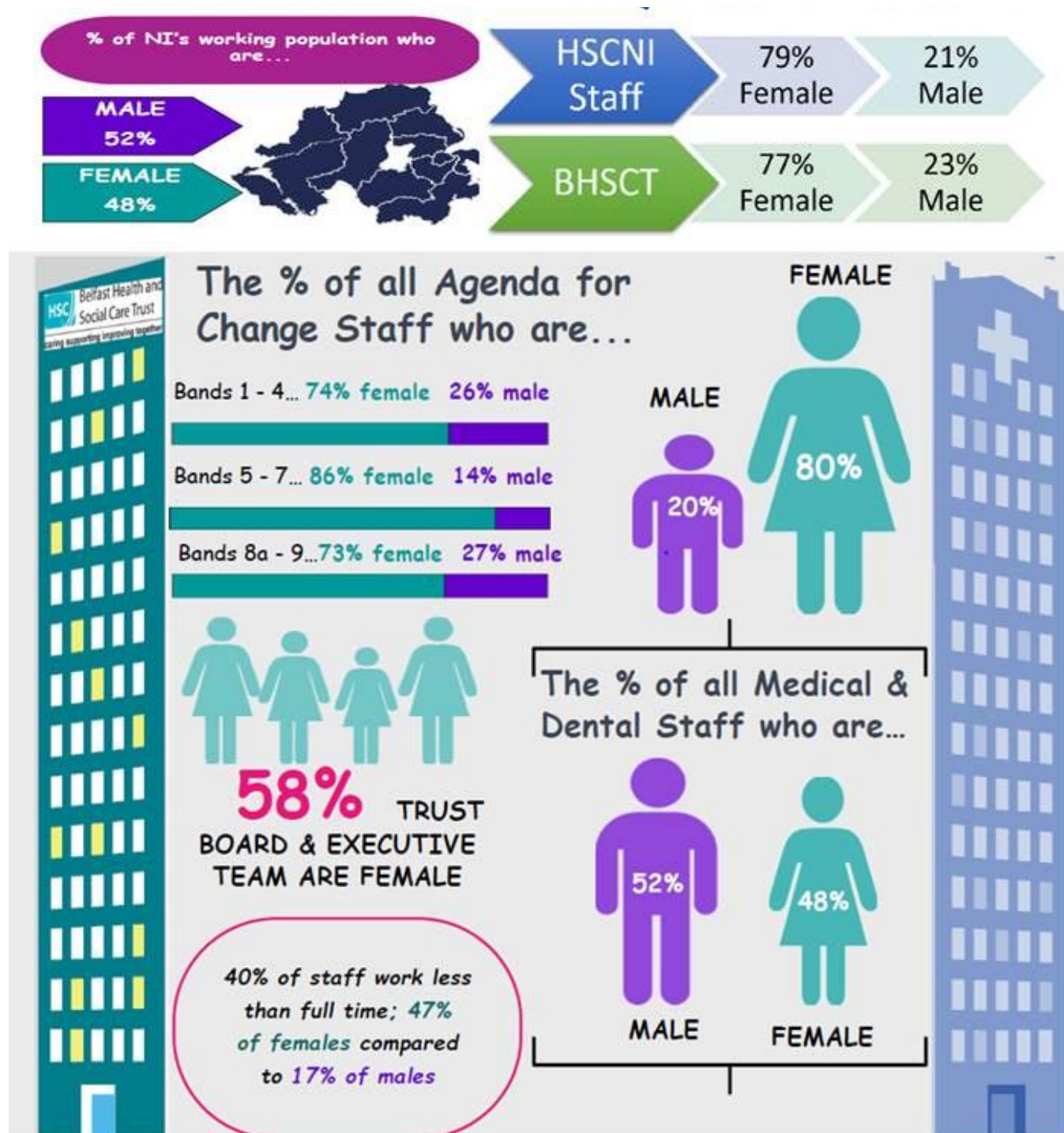
Most staff are Band 5 in the Trust, particularly as staff nurses are employed at this grade. “Non AFC” means those not on an Agenda for Change contract which includes medical doctors and dentists.

The graph below shows the proportion of the Trust headcount by professional group:



Over a third of staff are nurses/midwives, one in eleven staff are doctors.

The infographic below gives a snapshot of the Trust's headcount by equality characteristics:



Leading



Leading

Leading & Inspiring People

- Creating Transparency and Trust
- Motivating people to deliver the organisation's objectives
- Developing leadership capability



Living the Organisation's Values

- Operating in line with values
- Adopting the values
- Living the values



Empowering & Involving People

- Empowering people
- Participating and collaborating
- Making decisions



Leading

LEADING & INSPIRING PEOPLE

Overview of this Indicator

Creating purpose in a changing environment, whilst motivating through change, have become essential skills for many roles. High performing organisations foster leadership skills at every level of the organisation to deliver outstanding results. The indicator explores the clarity of vision and purpose and how well the leaders in the organisation inspire employees to perform



Theme 1: Creating Transparency & Trust

The Trust has a clear direction of travel which is well known. People trust leaders in the organisation and there is a coherent vision 'to be one of the safest, most effective and compassionate Health and Social Care organisations' and staff feel inspired to deliver this.

Theme 2: Motivating People to Deliver the Organisation's Objectives

The Trust has a consistent approach, through its leaders at all levels, to align, review and improve performance objectives.

Theme 3: Developing Leadership Capability

A significant amount of resources are invested in developing current and future leaders. The engaging culture of the organisation ensures that feedback is received up, down and across the organisation and also from patients, clients and other service users to develop leadership capability.

Leading

 Indicator 1: Leading and inspiring people Leaders make the organisations objectives clear. They inspire and motivate people to deliver against these objectives and are trusted by people in the organisation.				
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Creating transparency and trust	Leaders provide clarity around the organisation's purpose, vision and objectives	There is clear and regular two way communication between leaders and people at all levels	Leaders ensure that there is a consistent level of trust at all levels of the organisation	Leaders are active role models, leading by example and trusted by people in the organisation
Motivating people to deliver the organisation's objectives	Everyone understands the organisation's objectives	Line managers support people to deliver the organisation's objectives	Leaders are passionate about delivering the organisation's objectives and motivating people to deliver against them	Leaders motivate and inspire people to achieve results above and beyond what is expected of them
Developing leadership capability	Line managers know what is expected of them to lead, manage and develop their people effectively	People know what to expect from their line manager and provide feedback on how they are managed and developed	People have confidence in the leadership and management capabilities within the organisation	Future leadership capabilities are defined in line with the organisation's values and leaders meet these challenges

Leading

Indicator 1: Leading and inspiring people Leaders make the organisations objectives clear. They inspire and motivate people to deliver against these objectives and are trusted by people in the organisation.				
Themes	Developed	Established	Advanced	High Performing
Creating transparency and trust	Leaders provide clarity around the organisation's purpose, vision and objectives	There is clear and regular two way communication between leaders and people at all levels	Leaders ensure that there is a consistent level of trust at all levels of the organisation	Leaders are active role models, leading by example and trusted by people in the organisation

Theme 1: Criteria 1: Leaders provide clarity around the organisation's purpose, vision and objectives

The Trust's [Corporate Management Plan for 2018 - 21](#) clearly sets out the Trust's [purpose, vision, values and its strategic direction and priority areas](#) (its five revised Corporate Themes).

To further enhance clarity and transparency the [five strategic corporate themes](#) are further defined into [twenty nine strategic objectives and thirteen separate outcomes or success metrics](#) which the Trust will use to measure success across the five corporate themes and against the twenty nine strategic objectives.



The [One - Page Corporate Management Plan \(CMP\) Summary](#) at the back of the Corporate Plan in SOAP format allied to the [Easy Read Version of the CMP](#) available on the Trust webpage are just two examples of the how the Trust continues to make its critical documents more accessible and available to all its staff and stakeholders.

The Trust has a well - established approach to aligning and cascading objectives throughout the organisation through the use of [annualised directorate and service and team planning processes](#) as well as through the use of [a wide range of processes](#) which are used to agree aligned performance objectives with individual members of staff such as annualised SDR, Supervision and Team Meetings etc.(see picture opposite)



Leading

Directorates will separately outline their specific approach to the involvement of staff in the development of their respective Directorate, Service and Team Plans and their approach to cascading and aligning objectives to ensure people are clear of their team's objectives and how they contribute to developing and achieving these objectives. The focus on the Trust's approach to cascading and aligning objectives is to ensure all staff have a clear line of sight between the organisation's ambitions and priorities and how individual members of staff can and do contribute to their achievement.

The Trust has a well – established and continuously improving approach to involving and consulting with staff, managers, key stakeholders including representative groups and other sources (such as recommendations from relevant reports, feedback from internal and external sources) in the development of its key strategic and operational plans (See also the section below on two – way communication).

For example top managers engaged with and involved staff in the review and development of the 2018 - 2021 Corporate Management Plan through the use of a 'Let's Talk Vision' exercise across the organisation.

The 'Let's Talk Vision' exercise was an initiative to involve and engage staff in a review of the Trust's previous vision and strategic objectives to ensure they continued to be relevant and fit for purpose. The 'Let's Talk Vision' exercise allowed senior leaders and managers to revisit and review the Trust's vision and corporate themes at a cross-divisional directorate meeting (a fore runner to the now established Senior Leadership Team). From that meeting the consensually arrived at output was taken to the Executive Team with a proposed revised vision and a revised set of corporate themes. A draft of the current vision and revised corporate themes were an output from this engagement exercise with the senior leadership team.

At the monthly Chief Executive briefing on 20 February 2018 staff were provided with hard copies of the new proposed wording of the Trust vision and corporate themes to take away and share with their teams.

On 27 February 2018 the Chief Executive published a pod cast on the Hub to the Trust staff explaining the consultation process to date and setting out the proposed Vision, and why the Trust was considering changing the wording of the vision and corporate objectives.

Dear Colleague,

We deliver care in an ever-changing environment. The Trust's vision and corporate objectives are fundamental to how we deliver care. As demands and priorities increase and change, so too, should we seek to ensure that our vision and objectives - the things that ground us and set out our stall - are fit to take the Trust forward in the right direction. We will ensure in the coming years that we deliver care as we know it should be and, equally, that our vision describes the type of organisation we want to be.

To support us in the next phase of our Trust development, we want to explore with staff whether our vision and objectives help to describe the type of culture we want here in Belfast Trust.

I laid out the Trust's aim - that by 2020 Belfast Trust will be in the top 20% of high performing Health and Social Care organisations for the delivery of safe, effective and compassionate care.

So, how are we going to do this and does our current vision and objectives enable us to realise that aim?

This is our current vision and beside it is the proposed 'new' vision. Further along this document, you will see our current objectives beside the proposed 'new' ones. Over the next few weeks we want to hear from you. What do you think of the proposed vision? Can you identify with it? The same goes for our corporate objectives which we want to change to corporate themes. These 'themes' are cross-cutting and guide each of us no matter what directorate we work in and regardless of our banding. Working across them will help us realise our vision and our aim.

let's talk Vision

Our current Trust Vision	Current Trust Objectives
'To continuously improve health and social care delivery and foster innovation in pursuit of this goal. We will seek to achieve the right balance between providing more health and social care in, or closer to, people's homes and supporting the specialist delivery of acute care, thereby delivering positive outcomes for the people who use our services'	1. A culture of safety & excellence 2. Continuous improvement 3. Partnerships 4. People 5. Resources
Proposed Vision 'To be known as one of the safest, most effective and compassionate health and social care organisations'	Proposed Themes 1. Safety, Quality and Experience 2. Service Delivery 3. Strategy & Partnerships 4. People & Culture 5. Resources

We want to hear your views
Please email stakeholdercomms@belfasttrust.hscni.net

Tell us what you think

Support & Rights | Information & Advice | Feedback & Complaints | Training & Development | Governance

Following the Podcast from the Chief Executive, staff were invited to post back their comments, or to email them to a dedicated email address – stakeholdercomms@belfasttrust.hscni.net.

Leading

As a result of feedback from the engagement exercises, the vision was confirmed as, **'To be one of the safest, most effective and compassionate Health and Social Care organisations'**. The revised corporate themes were also fully endorsed. Every member of staff who replied to the email address was acknowledged and thanked for their feedback and taking the time to comment.

Another key strategic document for the Trust and its staff is **New Directions 2 (2018)** which follows on from **New Directions 1 (2008)**. **New Directions 2** is the continuation of an ongoing conversation between the Trust and its many stakeholders, first formally held in 2008 on the future delivery of health and social care services in Belfast.

New Directions 2 is the **Belfast Trust's strategic plan for future service delivery**. Proposals will be developed for service areas provided by the Trust. **New Directions 2** is designed to ensure the Trust service provision and delivery model for the next decade and beyond supports the delivery of **'the right care in the right place'**, resulting in safe, high quality outcomes for the people and communities the Trust serves. As a starting point staff and other key stakeholders have been consulted on a set of design and delivery principles, principles which will support decision making going into the future around service design, provision and delivery. To date 350 staff have been engaged in over 40 meetings in various sites across the organisation. In addition staff have been kept updated on **New Directions 2** via staff newsletters and the circulation of updates via email to staff.



The Consultation Process around **New Directions 2** has been increasingly devolved down through the organisation with several engagement events taking place across Directorates to engage staff in a conversation about the future direction and design of their services – the output of which will inform and shape the section with **New Direction 2** on their particular service.

Leading

Theme 1: Criteria 2: There is clear and regular two-way communication between leaders and people at all levels

Since Belfast Trust was last accredited in 2016, [internal communication](#) – both corporate and local – has continued to evolve as the Trust has worked with its many stakeholders to optimise the use of the technology available to the organisation including social media platforms to continue the Trust's conversation with its many stakeholders including staff. Embedding and continuously improving the Trust's approach to internal communication is important in its own right and it is also a key part of the Trust's approach to ensuring [it lives its values](#), for example, being leading edge, maximising learning and development, being accountable and displaying openness and trust.

Corporate Communication has continued to build on very solid and well-established communication foundations and to encourage strategic internal communication across the Trust and at all levels. In parallel, external communication is demonstrably thriving. It is not possible to discuss internal communication, without referencing external. The Trust's internal stakeholders – its staff - are also service users and carers. Therefore, staff often become our external stakeholders. What a member of staff may be aware of from a team meeting may be significantly different to how the issue is represented on the evening news, therefore a robust and savvy use of all communication channels is essential if the Trust is to become a high performing organisation by 2025.

The Trust uses a variety of approaches to ensure there [is clear and regular two way communication](#) between the organisation, its leaders and people at all levels.

The Trust's well established, regularly reviewed and continuously improving [induction processes](#) at corporate, team and professional levels are a vital part of the [on – boarding process](#) for the Trust. The various induction processes allow the Trust to welcome staff that are new to the organisation and new to role to the Trust and their service, while also affording the Trust the opportunity to ensure all new staff are aware of the Trust vision, aims, values and priorities.

[Team meetings](#) continue to be an effective approach to ensuring effective two – way communication.

[Newsletters](#) at Trust and Directorate levels are in many instances produced by staff and reflect issues and topics which are important to staff – Newsletters continue to be a popular way of communicating with and hearing from staff.

[Monthly briefing](#) from the CEO allows staff to hear key messages and feedback from the CEO and supports the cascading down of all critical messages to all staff across the Trust.

[Noticeboards](#) continue to be used across the Trust as a useful and well – established way to keep staff up to date and informed about developments at team, service and Trust levels.

Leading

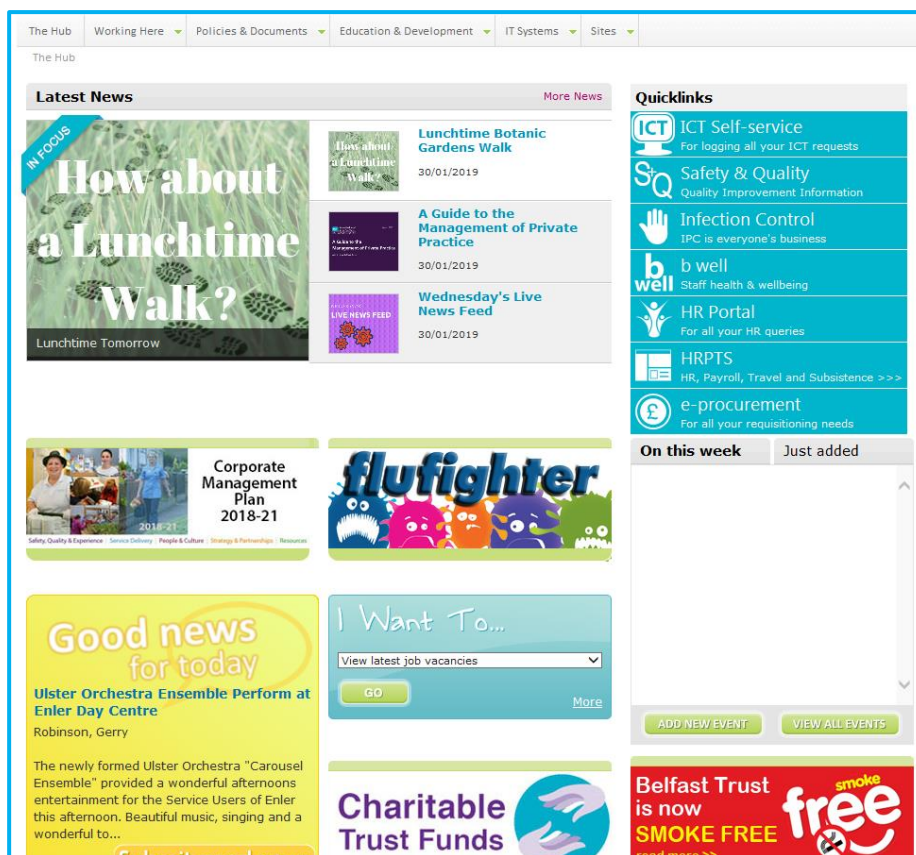
Publications – especially the SOAP version of the Corporate Management Plan and other critical documents have been made more accessible to staff at all levels across the Trust in line with one of the Trust's commitment to staff within the Trust's Employee Engagement Framework of making critical documents more user friendly and accessible.

Podcasts – such as the CEO podcast on the 'Let's Talk Vision' have also been used to good effect to engage staff in a conversation about the Trust's vision and corporate priorities.

The roll out of **engagement forums** for example 'What matters to you', 'Let's talk' and **focus groups** have been well – received by staff and the output and feedback from staff from such forums have been instrumental in the development of such frameworks as the Employee Engagement Framework and the revised Trust vision and corporate themes.

The Trust engages its staff around the key objectives of safety and quality (using for example visible leadership, SAFETemember, learning events, QI Hub), research and innovation (using new and established partnership arrangements) and collective leadership (using the various engagement forums and the 10 online channels now available to the Trust).

The 'hub' is the main online communication mechanism with staff and includes internal news articles every day while the Corporate Management Plan 2018-21 is on the front page.



Leading

Digital technology is advancing. In **2013** Belfast Trust had **5** online channels available to communicate with both staff and service users. In **2016** it had **8** and today, in 2019 the Trust has **10**. In the space of less than 6 years the number of online channels used by the Trust and available to staff and stakeholders has doubled. The 10 online channels are: YouTube, Twitter, Facebook, Trust website, the Hub (intranet), Good News for Today Blog, Live News Feed, Instagram, LinkedIn, and info@. In addition, an electronic recap of the monthly '**Chief Executive's Briefing**' is circulated to all staff via the Hub. While Corporate Communications does not use **WhatsApp** as an official internal communications channel, it is software which is widely used by Trust staff for team broadcasting and messaging.

Statistical evidence demonstrates that these online channels and tools form an integral and vital part of the Trust approach to Corporate Communication and they have a broad and influential reach. For instance, in **2013** the Trust had **60** staff trained as content managers tasked with keeping their corporate sites fresh and up-to-date with information for their staff and other internal interested parties. Today, we have **529** content managers, which also demonstrates the burgeoning number of internal sites on the Hub – **57** in 2016 and **65** today. Significantly, today, **6,187 staff** visit the Hub each day. That is an increase of 3.5% from 2017/18. These users visit an average of 41,540 pages each day on the Hub. Clearly, the demand from staff is there and the Hub is responding to that need.

The Belfast Trust's website averages **100,000 website visits each month** compared with 2013 when it averaged 60,000. In 2018 these visits total 2,556,482 page views on the site over this period.

This is testimony to the variety of information – both corporate and service user – that is available on the website. In addition, the site has undergone significant work to enable **compliance with sensory disability guidance**. In 2019, in response to the changing communication needs of our audiences, and in keeping with the Trust's value of **being leading edge**, the website is undergoing a significant restructuring and revamp. A major flagship communications tool, not only does its content need to modernise, but how the **end user interacts** with the Trust has changed. The website needs to **be 'mobile responsive'**, meaning it needs to be viewed, used, and interacted with, not only from a PC which is traditional, but from mobile phones, laptops, iphones, and smart phones. The Trust anticipates that much of its traffic will be directed to the website from the Trust's social media pages, which are now a significant part of its external communication.

When Belfast Trust was last accredited in **2016**, the Trust's Twitter account had over **3000 followers**. Today, we have **8500 followers** a growth of **65%** over a 3 year period, and we average 200 new followers a month. This is growth in the right direction. Facebook is on a similar trajectory with **5000 followers in 2016** compared to **21000 for 2019** a **76%** increase in the last 3 years. In 2013 an impactful story on Facebook saw Belfast Trust getting just over **3000 'likes'**. Most recently, one of the Trust's stories on Facebook netted the Trust almost **400,000 'likes'** and high numbers of 'likes' is now common for the Trust's Facebook presence. That is indicative of the reach and influence social media channels have in terms of communication and how important a tool they are for the Trust.

The newest addition to the Trust's social media stable is **Instagram**, recently launched in **October 2018** with a steady and growing complement of **1685 followers**. We now also use **LinkedIn** and have recorded **4674** followers.

Leading

Digital channels – both internal and external – are being used more and more by staff and service users as a means of [providing feed back to the organisation](#). It is now commonplace for the Trust to receive [compliments](#) through social media, and by contrast, careful monitoring allows the Trust to pick up on complaints, expressions of dissatisfaction and any criticism (implied or explicit). . Corporate Communication forwards all such feedback (positive or negative) to the service in the same way that it manages the Trust’s reputation when negative comments are highlighted.

Every article going on to the Hub, the Live News Feed, Good News for Today, Twitter, Facebook, LinkedIn, and Instagram, is accompanied by [an invitation to staff](#) (and where appropriate, the public) to post a comment.

Comment on this article:
We would love to hear your views or queries on this article, so please add your comment below.
Problems adding a comment, [click here](#) to open the comment box in a new window.

To build on the use of Noticeboards used in some facilities and responding to a communications gap for communicating [light and interesting Trust-themes](#), two new channels were established.

There is also renewed effort in encouraging staff to retweet or to ‘like’ external messages and to post their own and so [‘talk up’](#) the organisation externally and internally. One specific example of this is the Trust’s newly established [‘Live News Feed’](#).

The [Live News Feed](#) launched in [2018](#) capitalises on that collegiate approach to communication. Swapping ‘news’ across the organisation, it is that half-way house between official corporate messages and disseminating all the common linkages which connect staff. Evidence suggests the blog and the Live News Feed is responding to a gap in our corporate communication and that is, communicating the ‘softer’ side of the organisation, a key part of building a culture where people feel connected and have a feeling of belonging. In fact, in establishing an organisational culture built on clear and indisputable values it is imperative that channels exist to allow the Trust to celebrate and recognise its success as a corporate family which are in addition to, and in support of directorates living Belfast Trust’s Recognition Policy.



Leading



'Good News for Today Blog' is a daily blog which anyone with an internal email address can post to. At its launch in **October 2015** there was a very deliberate move to encourage staff that no story or comment was too small or insignificant to post. Equally, staff are moved to **tell the Trust** about the really big successes of their team, department, or colleagues. The majority of posts are 'shout outs' to advertise a coffee morning, or to congratulate a team on a recent success, and even to wish colleagues a happy birthday.

Looking to the future, Corporate Communication has plans to link with Human Resources and IT to use **Microsoft 365** for staff engagement. This would allow the organisation to establish a secure social network available for all staff to use.

Communication plays a central role in the strategic life of the organisation and has a vital role in communicating the Trust's purpose and vision. **Broadcast and print media** remain recognised as powerful stakeholders for the Trust and a rigorous proactive agenda has enabled the Trust to air over **500 'positive' stories** since its last accreditation. It should be noted that while the media is an external channel, those the media engages with directly and indirectly as service users and carers are often Trust employees.

Internal communication takes a variety of forms in Belfast Trust. Since 2016 **300 major corporate events** have been designed and managed. One such example of a now well – established, highly valued and continuously improving event is the Trust Annual Leadership Conference – in collaboration with HR Directorate as well as the Annual Chairman's Awards ceremony. The Leadership Conference is *the* key event in the annual corporate calendar and the vehicle whereby the Chief Executive has traditionally set out the Trust's strategic direction, priorities, challenges and opportunities to **250** of his most senior leaders – both clinical and managerial – throughout the Trust.

In **2019** the Leadership Conference will change to reflect the Trust's new leadership model – collective leadership. Responsive to the leadership needs of the organisation, the Leadership Conference programme will change to a truncated and more focused agenda and rather than a one day event, the programme will now be 2.5 hours long. Significantly, the conference will run three times in the one day and each session will have approximately 250 staff at each event (morning, afternoon, evening). This means that rather than 250 people attending the conference, the Trust will have **750 – 800** people attending the Leadership Conference, another clear and tangible step to the roll out of the Trust's collective leadership model and collective leadership arrangements. Rather than the delegates comprising of the Trust's top leadership team, the criteria to attend has been changed. Delegates will reflect the span of staff bandings and professions from across the organisation (band 1 – band 9). The audience will practically and symbolically reflect the theme, '**Being Belfast – Leadership for all, by all.**' See more on the Leadership Conference under Theme 3 - Developing leadership capability.

Leading

The annual [leadership conference](#) – is an important and highly valued opportunity for the Trust to engage with its leaders and managers while also providing leaders and managers with an opportunity to engage and network with colleagues from across the Trust.

The Chairman's Awards is a unique event designed solely to celebrate and recognise quality improvement from within the Trust. Since the inception of the Trust in [2007](#), the Chairman's Awards have been based on [the organisation's objectives](#). In [2015](#) this was altered to reflect an organisational drive [to embed our values](#) and the event pivoted solely around the Trust's five values – respect and dignity, openness and trust, leading edge, learning and development, accountability. In communication terms, this action had three very significant outcomes: as a celebratory event it embodied the Trust's Recognition Policy; it was a further vehicle for embedding the values; and it further emphasised quality improvement and made it central to the life of the Trust, ensuring it was owned by those who have a corporate function as much as those from a professional social care or medical background. Most recently, in [2018](#), the Chairman's Awards changed again. This time to reflect the Trust's new corporate themes again assisting in embedding them. Additionally, as a recognition event, staff were provided with a meal, rather than nibbles and a new category was introduced – the WOW category

(What Outstanding Work). This category highlighted individual staff and teams who had gone that extra mile. Again, this was a huge success with staff who felt that the event was a gala evening which recognised their huge contribution to patients, clients, carers, and to the realisation of the Trust's Vision and ambition. (See more on the Chairman's Awards under Indicator 5).

The Trust is increasingly [using social media platforms](#) (Facebook, Twitter and more recently Instagram) to engage with the public and staff members who keep in touch with what is happening and comment on topics using such social media platforms.



[Emails](#) continue to be a much used approach to two way communication –and despite the suggestion that it reduces face to face communication the use of emails continues to be a valued and effective approach to two-way communication.

The Trust Executive Team, Non-Executive Directors and other Senior Managers regularly undertake [Safety Quality Visits](#) to wards and units in acute and community sites. These visits support the identification of best practice at ward level, help the senior team understand what matters to the staff, service users and patients and also highlight suggestions for improvement. Learning and best practice is then shared across the Trust.

Leading

You will hear from Directorates and Services/Team about [business planning and values workshops](#) – such workshops allow Directorates to actively involve and engage with staff in setting their ‘business and service priorities’ for their own services while in the values workshops staff have been able to translate the Trust core values into behaviours which are meaningful for the teams/services participating in these workshops – see Indicator 2 for more details on Values Workshop.

Other [people processes](#) such as SDRs, job planning reviews, supervision, coaching sessions provide staff with an opportunity to engage in two way communications with their line manager as do such clinical processes as audits, peer reviews, case conferences etc.

The Trust engages with and hears from staff through the use of [staff surveys](#) – IIP and NHS Staff Surveys for example and the Trust values and learns from all such forms of feedback.

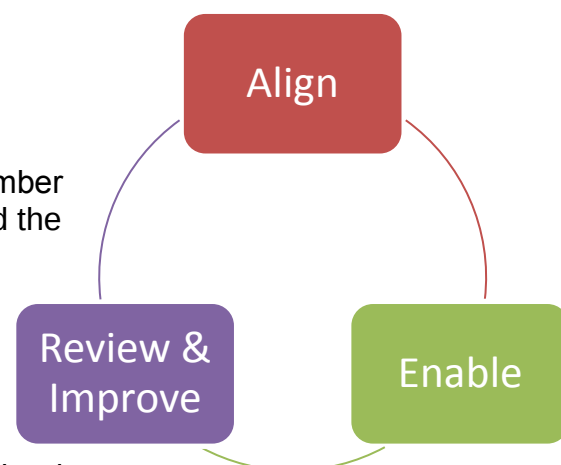
Leading

Indicator 1: Leading and inspiring people Leaders make the organisations objectives clear. They inspire and motivate people to deliver against these objectives and are trusted by people in the organisation.				
Themes	Developed	Established	Advanced	High Performing
Motivating people to deliver the organisation's objectives	Everyone understands the organisation's objectives	Line managers support people to deliver the organisation's objectives	Leaders are passionate about delivering the organisation's objectives and motivating people to deliver against them	Leaders motivate and inspire people to achieve results above and beyond what is expected of them

Theme 2 Criteria 1: - People understand the organisation's objectives

The Trust's approach to motivating people to deliver the organisation's objectives can best be described as a three – step cycle

- Align
- Enable – capacity and capability
- Review and Improve.



Align - The Trust's approach to ensuring each and every member of staff has a clear line of sight between the work they do and the contribution they make to supporting the Trust in realising its ambition and delivering on its priorities has already been described under the '**Creating transparency and trust**' theme above. The purpose of such processes as SDR, Supervision, Job Planning is to ensure each and every member of staff is able to explain the objectives of their team and the organisation at a level that is appropriate to their role and how they are expected to develop and achieve them. Alignment is a critical first step in ensuring all people understand the organisation's objectives. Feedback from staff during such processes as IIP health checks indicates that is the case for the majority of staff.

Enable – Having ensured staff are clear as to what is expected of them in performance terms, the second part of the Trust's approach to motivating people to deliver the organisation's objectives is to ensure they are **able to** deliver on what is expected of them. Enablement has two component parts namely capacity and capability. **Capacity** is about ensuring each and every member of staff has the resources they need (time, equipment, budget, personnel, information, and support) to succeed. The second part of enablement is about ensuring each member of staff is able to deliver on what is expected of them i.e. they have the **capabilities they need to succeed** – see Indicator 7 for more details).

Leading

Theme 2, Criteria 2: Line managers support people to deliver the organisation's objectives

Operationally line managers **support** their staff to deliver on their agreed and aligned objectives through a range of supportive actions including: -

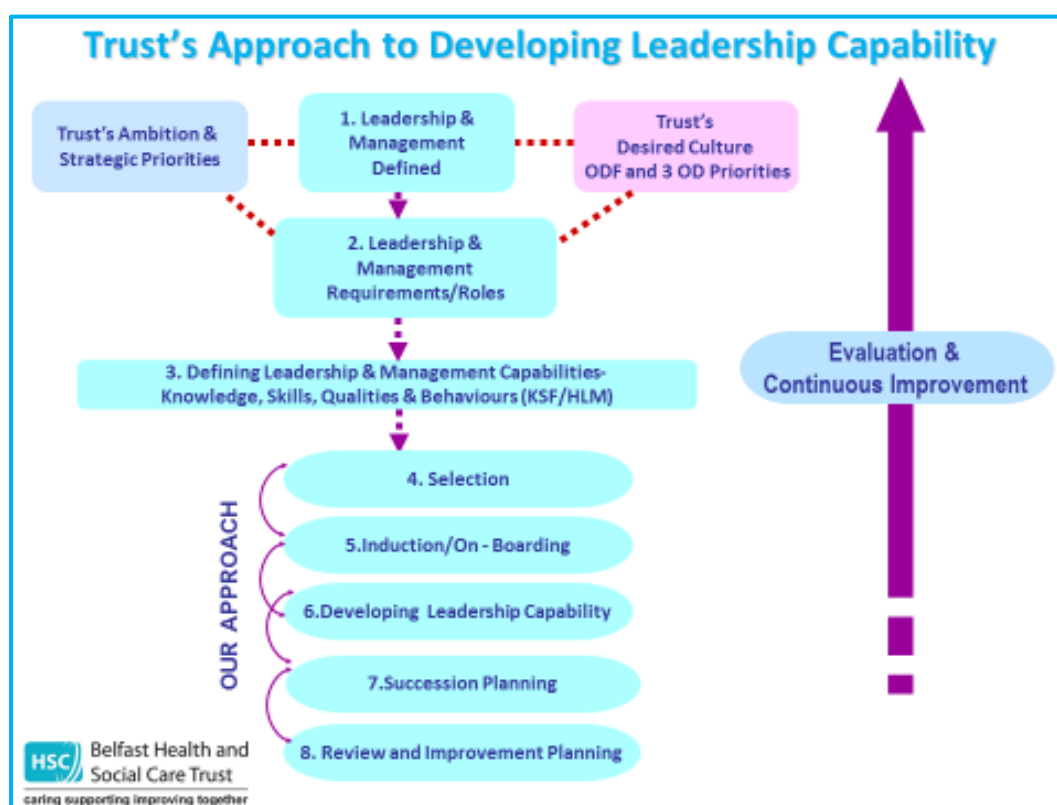
- Provision of and/or signposting to **relevant information and data** in a timely and accessible manner to support successful completion of agreed workload.
- **Regular contact** with and regular checking in with and updates between line manager and member of staff
- **Resourcing all objectives** – working to identify and agree resource implications (time, resources, budget) etc before signing off on objectives
- A **weekly brief/ team conversation** to share key organisational messages and any work related concerns
- Regular **face-to-face meetings** with staff at all levels to discuss organisational objectives, change, performance and values.
- **Local site visits** to explain and discuss organisational objectives, and change, and to find out about front-line issues and how staff are progressing with their objectives
- Offering **coaching and mentoring** sessions as needed
- Supporting all staff to identify and action their agreed, aligned and **prioritised learning and development needs**
- Supporting with **prioritisation and re – prioritisation** when needed
- Agreeing appropriate levels of **authority, autonomy, and accountability** for all delegated tasks
- **Involving people in decisions** that impact them and/or where their contribution is likely to make a positive difference.
- Encouraging and facilitating **collaborative working** to support achievement of agreed objectives
- Ensuring staff are involved in **interesting work** offering stretch and progression opportunities.
- Acting as **a positive role model** and living the Trust's values.
- Finding out **what motivates individual team members** and using this knowledge to motivate staff
- Ultimately you cannot motivate another person – they are responsible for their own motivation – but a line manager is responsible for the creation of an environment and set of relationships within which their staff can strive for high performance at all times.
- Managers in **meeting the person's needs** where possible, in **setting agreed work and personal goals and objectives**, in **encouraging high performance** at all times and in **measuring, assessing and recognising high performance** creates a virtuous cycle where staff continue to be motivated.

Leading

Indicator 1: Leading and inspiring people Leaders make the organisations objectives clear. They inspire and motivate people to deliver against these objectives and are trusted by people in the organisation.				
Themes	Developed	Established	Advanced	High Performing
Developing leadership capability	Line managers know what is expected of them to lead, manage and develop their people effectively	People know what to expect from their line manager and provide feedback on how they are managed and developed	People have confidence in the leadership and management capabilities within the organisation	Future leadership capabilities are defined in line with the organisation's values and leaders meet these challenges

Indicator 1: Theme 3: Developing Leadership Capability

The Trust's approach to leadership and management development is linked to and supports the realisation of its [Corporate Management Plan and OD Strategy](#). It takes account of external strategies and best practice and clearly aligns with the critical role leader managers have in supporting the Trust in realising its ambition of being 'in the top 20% of health and social care providers by 2020'. The Trust's approach to developing leadership capability is set out in summary form in the slide below:



Leading

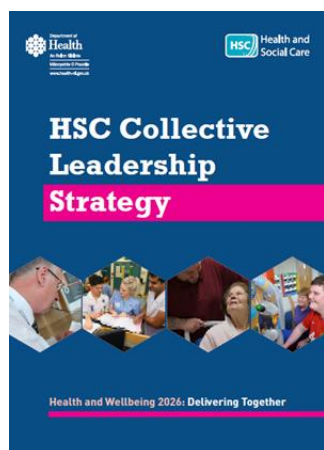
Leadership and Management Development within a Strategic Context:

One of the priorities in 'Health and Wellbeing 2026: Delivering Together' was the development of a leadership strategy which would enable transformation by creating an organisational culture that recognises and promotes collaboration and quality improvement.

The HSC Collective Leadership Strategy was launched on 18th October 2017, with strong commitment from the Transformation Implementation Group (TIG).

The need for collective leadership has never been more important and was seen by Bengoa and the TIG as a key enabler and indeed prerequisite in transforming NI's health and social care system. Implementation of the strategy is seen as a key enabler in helping to improve the health and wellbeing of the people of Northern Ireland by harnessing the strengths of all staff across the HPSS and creating a culture across the HSC system and within individual Trusts based on staff working collaboratively and effectively across traditional boundaries as one system.

Rationale underpinning the HSC Collective Leadership Strategy



Evidence has shown that where a culture of Collective Leadership thrives it yields benefits for staff, leads to improved quality of care, results in a better experience for those who use HSC services and creates sustainable success for services and organisations. At no time has the need for Collective Leadership been more important. The Health and Social Care system faces considerable challenges and there is no doubt that HSC services and staff are under extreme pressure.



hsc-collective-leadership-strategy.pdf

It is accepted that redressing this position will not be easy but over time staff across the HSC generally and within the BHSCT specifically are united in their determination to make it better for those who use HSC services and those who work in HSC. Delivering Together has provided the Trust with the roadmap for transformation and the Trust has always recognised that leadership is key to achieving success.

The vision set out within the HSC Collective Leadership Strategy (of which the Belfast Trust has been a key contributor and driver) is for the development of a culture which values leaders, regardless of hierarchy or experience, location or discipline. It is one in which people strive for continuous improvement, and are enabled to be innovative and take some risks along the way. The Belfast Trust wants to see staff flourish and take pride and joy in their work. This HSC Collective Leadership Strategy provides a framework to achieve that ambition and the Belfast Trust through its Chief Executive who is a member of the TIG has given his personal commitment to creating the conditions to make that happen within and across the Belfast HSC Trust.

Leading

In taking a far - sighted and strategic view of what was needed to become a top 20% HSC provider, the Belfast Trust developed its [Organisational Development Framework](#) in 2015. The aim of the [Trust's Organisational Development Framework \(ODF\) 2015 – 2025](#) is 'to improve outcomes for our patients and clients through positive changes and improvements across *three core priorities*': -

- **Safety and quality** – to deliver safe and high-quality care to all
- **Research and innovation** – to drive continuous learning through research and innovation
- **Collective leadership** – to grow a culture of collective leadership where everyone at every level has the capability to deliver improvements for our Trust as a whole, not just in their own roles or work areas



The above organisational development priorities which pre – date the HSC Collective Leadership Strategy have been identified through discussions with staff, patients and clients. They have been influenced by and are in response to findings from a range of reports Francis, Berwick, Donaldson and others, while also taking into consideration leading-edge research by The King's Fund, Dalton, the Institute for Healthcare Improvement and West et al.

Since 2015 the Belfast Trust has had to respond to and address three separate critical areas of concern and failure namely 'The O Hara Report - The Inquiry into Hyponatraemia-related Deaths Report January 2018 (<http://www.ihrdni.org/Full-Report.pdf>), the Neurology Recall 2018, and currently the Trust is addressing major concerns and failures in the provision of care to patients in Muckamore Hospital.

The Trust is committed to learning from all of these three failures and fully accepts the recommendations of the outcomes of all these three investigations. The recommendations from the O Hara Report are prefixed with this statement which is appropriate to all three investigations. 'The lessons of these sad cases must be learnt because it cannot be assumed that such tragedy could not happen again. Although much has been achieved, much remains to be done. These O Hara Report recommendations have been guided by the following principles:

- (i) That healthcare services exist to serve the patient.
- (ii) That quality of healthcare is dependent upon both clinical and nonclinical services.
- (iii) That the particular needs of children must be addressed.
- (iv) That leadership and candour must be accorded the utmost priority if the fullest learning is to be gained from error.
- (v) That progress should be subject to regular external review.

Leading

A summary of the planned activities to support the implementation of the [ODF](#) are outlined below. It is interesting to note the planned activities as set out below map across with several of the IIP Indicators (see for here Indicator 1 Themes 1, 2 and 3) while also mapping across with several of the Dimensions that make up the [Healthcare Leadership Model](#) namely Sharing the Vision, Connecting our service, Inspiring shared purpose, Developing capability, Influencing for results, Evaluating information.

1. Inspiring vision and compelling strategy

- Integrated programme planning (including benefits, outcomes and measures) across the three priority areas
- Increase safety and quality capability (e.g. quality improvement advisers, quality improvement hub), in keeping with the Q2020 Attributes Framework
- Co-design and begin roll out of a Research and Innovation strategy (involving a Trust-wide review of existing capacity and areas for improvement)
- Develop and roll-out our people strategies (including the Trust's Corporate Management Plan for 2018 - 2021, New Directions 2, People Management Strategy, and Collective Leadership Strategy).

2. Clear priorities and objectives at every level

- Build awareness of our OD framework and priority areas at all levels in our Trust
- [Establish the baseline position](#) for each of the priority areas and define 'stretch' targets for each
- [Engage](#) our staff around the key objectives of safety and quality (using for example visible leadership, SAFETember, learning events, QI Hub), research and innovation (using new and established partnership arrangements) and collective leadership (using our various engagement forums and online channels)

3. Supportive management coaching and leadership

- Develop ways to better support staff when care goes wrong (e.g. standardised approaches, skills development, eLearning)
- Support the roll-out of service improvement methodologies and training
- Build on our experience from Investors in People to embed our Trust values and define our required culture and behaviours

Leading

Theme 3: Criteria 1 and 2: Line managers know what is expected of them to lead, manage and develop their people effectively and People know what to expect from their line manager and provide feedback on how they are managed and developed

1. Steps 1 & 2: Defining Leadership and Management and the requirements of staff in leadership and management roles in line with Trust's ambitions and preferred culture. Letting line managers know what is expected of them to lead, manage and develop their people effectively and Letting people know what to expect from their line manager

The belief that you cannot become a high performing organisation without effective leaders and managers continues to be central pillar in the IIP framework. For the Belfast Trust a central premise underpinning its ODF is the belief that *'the development of a culture which is based on collective leadership is a prerequisite if the Trust is to realise its ambition of 'being in the top 20% of HSC providers by 2020' and 'being recognised as a high performing organisation by 2025'.*

The Trust has involved and engaged staff in an ongoing conversation as to what leadership and management means to the Trust and what it requires of people in leadership and managerial positions.



Leadership and Management Frame

For example the Trust's **Leadership and Management Framework (LMF) 2016 – 19**, which builds on the Trust's Leadership and Management Strategy (which was developed following consultation with staff) clearly defines/sets out: -

- What Leadership and Management means to the Trust as well as clearly setting out the Trust's commitment to developing collective leadership.
- The **capabilities** (knowledge, skills and behaviours) managers need to lead, manage and develop people effectively in line with the Trust's Values.
- The **plans and priorities** the Trust has in place to make sure all leaders and managers have the necessary competencies.

The Trust has developed a user - friendly and more accessible version of its Leadership and Management Framework which is available to all staff in Page Tiger format online - [Click here](#).

Leading

The Trust's Leadership and Management Framework (LMF) 2016 – 19:

- Is aligned with the Corporate Management Plan and Organisational Development Framework and takes account of external good practice.
- It outlines the broad range of innovative, cost effective and tailored approaches the Trust will use to support leadership and management development.
- It sets out the Trust's priorities for leadership/management development.
- In addition the [Leadership and Management Charter](#) (which was an integral part of the Trust's first Leadership and Management Strategy) has been revisited and revised in the development of the 2016 – 2019 LMF. The Charter sets out 'the principal actions and behaviours required of all leaders and managers. The Charter supports the Trust's strategic direction as set out in the Corporate Plan and complements the [Knowledge and Skills Framework](#) which focuses on the application of knowledge and skills to meet the particular demands of a post. In addition the L&M Framework & Charter have been promoted through various Trust forums including Executive Team, Learning, Development & Education Committee and Leadership Development programmes and at in house management skills training.

ENGAGING MANAGERS

As an engaged line manager in the Belfast Trust I will



- Set clear objectives for the team and individuals
- Be accessible and visible to my team
- Provide clear and regular feedback to staff
- Thank and recognise staff for their work and efforts
- Role model positive behaviours that engage and value staff
- Meet with staff regularly to discuss their performance and development needs
- Support team by holding regular team meetings
- Respond to staff in a timely manner
- Respond proactively to resource issues
- Explore options for use of social media including Facebook and Twitter.



Research from MacLeod & Clarke (<https://engageforsuccess.org/engaging-for-success>) demonstrates that Line Managers are a major determinant of employee engagement. As a result, the Belfast Trust is committed to supporting its Managers to improve their skills and the behaviours required for enhancing employee engagement.

The Trust in its [Employee Engagement Framework](#) (which was the result of an extensive consultation exercise with staff from across the Trust) clearly sets out what is expected of [engaging managers](#) and this is a very useful guide to staff as to what they should expect from their line manager.

Since April 2016, the HR Learning & Development Team has facilitated [29](#) Engaging Manager programmes with [519](#) managers receiving training.

Leading

National or Regional Frameworks/Models such as the [Healthcare Leadership Model \(HLM\)](#) have been developed and are being used to help those who work in health and social care to become better leaders, while also offering a very useful communication tool for managers and staff in shaping a set of mutual expectations - this is what the Trust expects from me as a leader manager and this is what you have a right to expect from me as your leader manager. The majority of leaders recruited by the BHSCT have been recruited against this framework and this framework continues to support the ongoing development of staff in leadership and management positions across the Trust. This Model clearly sets out key roles of staff in leadership positions and the related nine dimensions of leadership behaviour namely:-

- (1) Inspiring shared purpose
- (2) Leading with care
- (3) Evaluating information
- (4) Connecting our service
- (5) Sharing the vision
- (6) Engaging the team
- (7) Holding to account
- (8) Developing capability
- (9) Influencing for results

NHS Healthcare Leadership Model

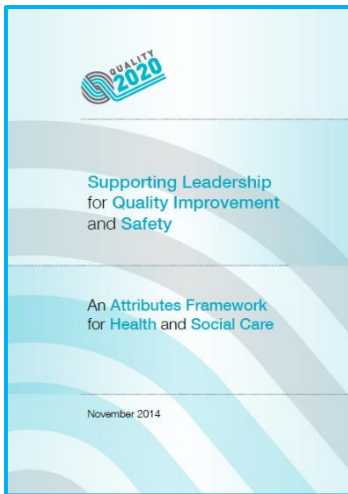
The [Healthcare Leadership Model](#) is an NHS wide framework designed to support those who work in health and care to become better leaders. It is useful for everyone – whether you have formal leadership responsibility or not, if you work in a clinical or other service setting, and if you work with a team of five people or 5,000.



NHSLeadership-LeadershipModel-colour



Leading



Other leadership and management frameworks such as the [Medical Leadership Competency Framework](#) and the [Q2000 Attributes Framework](#) have also been extensively and effectively used to set out requirements of current and/or aspiring leaders and managers

The [Medical Leadership Competency Framework \(MLCF\)](#) for example is designed to support those doctors who work in health and social care to become better leaders. This framework is useful for all medical grades from undergraduate to consultant level.

The framework covers five key competency areas:

- Demonstrating Personal Qualities
- Setting Direction
- Working with Others
- Managing Services
- Improving Services



Similar to the HLM the Trust uses the MLCF when recruiting Medical Staff into leadership and management positions while also using the framework in the ongoing development of Doctors in leadership and management positions across the Trust.

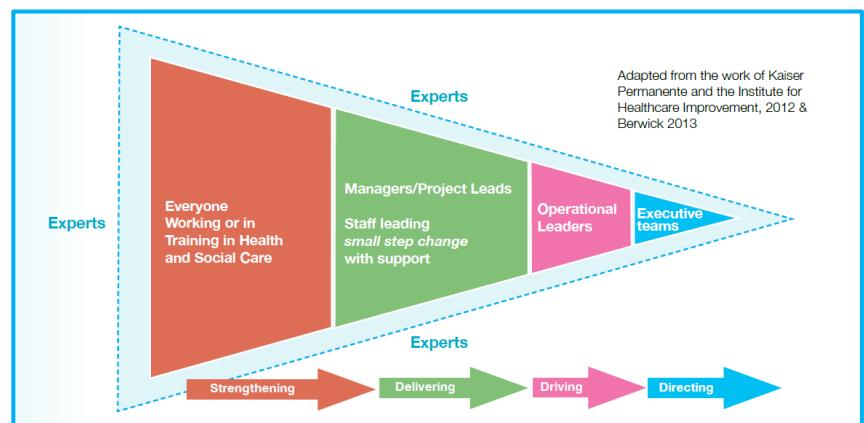
Leading

2. **Step 3: Defining the capabilities (Knowledge, skills, attributes and behaviours) leaders and managers need to lead, manage and develop people effectively.**

Each of the above frameworks in addition to the [Knowledge Skills Framework](#) clearly set out the [competencies and attributes](#) leaders and managers need to 'have' and 'be' within a HSC context. The Healthcare Leadership Model for example is made of nine leadership dimensions against which leadership behaviours are aligned on a four – part scale ranging from 'essential', through 'proficient' and 'strong' and exemplary'.

The [2020 Qualities Attributes Framework](#) is informed by the principles and values within the Quality 2020 strategy (DHSSPS 2011). It is designed to enable staff and those in training, to fulfil the requirements of their role and, as a result, put patients and service users where they are entitled to be – the first and foremost consideration of our service (Francis, 2013). The Quality 2020 Attributes Framework can also be used in conjunction with other competency frameworks relevant to a person's role (see diagram below), and the DHSSPS has recommended the attributes contained within the Framework should also be included in educational curricula for those in training.

The attributes in this framework have been converted into a competence assessment tool - [The Attributes Competence Assessment Tool](#) a tool which can and is being used to help staff and their manager or supervisor choose learning and development activities suitable to enhance a person's competence in the attributes at the level appropriate to their role. The intention is to assist a person's progress on their journey to competence in quality improvement and safety.



3. **Step 4: Recruiting and selecting the right people at the right time with the right capabilities, potential and fit.**

The importance of recruiting and selecting the right leaders and managers is critical for the Trust if it is to secure its long term ambitions. While a focus on competencies, knowledge, skills and qualifications continue to be an integral part of all selection processes for the Trust other variables such as values, traits, behaviours and motivational drivers are equally – and in some cases more – important. While the competencies and knowledge provide valuable information and insight about an individual's readiness for a particular role, traits and drivers help to reveal a person's potential for leadership. As complexity in health and social care increases, the Trust requires leaders (at every level) who can shift and adapt quickly and who are resourceful. The Trust places an emphasis on those people who have a track record

Leading

and/or who have the potential to be able to thrive on change and can make sense out of uncertainty for those they lead while at the same time being able to manage the day to day operational realities and priorities. The importance of having agile leaders who lead with purpose and meaning are more likely to support the organisation and its staff in being change – able and change - ready. Agile leaders and managers are guided by their values and supported by strong relationships with the people around them, empowering those whom they lead to make a difference.

4. **Step 5: Importance of effective on – boarding for new starts (new to Trust and new to role).**

Research and conventional wisdom both suggest that employees get about 90 days to prove themselves in a new job. The faster that new hires feel welcome and prepared for their jobs, the faster they will be able to successfully contribute to the organisation's vision. According to research the first 90 days of an executive leadership transition will make or break a new-to-role leader's success. The Trust continues to review, learn and work to continuously improve its Induction/On Boarding process (See Indicator 7).

Either way, the Trust's onboarding program begins prior to Day One — even before work begins — to have a lasting, sustainable impact on the new leader's resilience in the position. Whether you are **pre-boarding** your new leader for the new role before he or she arrives, **onboarding** the leader/manager the moment he or she enters the building or **re-boarding** an existing leader/manager into a new position in the Trust every day — every hour — is crucial to the leader's success in the new role and the Trust's success with their newly chosen leader.

One of the greatest dangers of not fully preparing a new or transitioning leader for Day One is that the leader might develop what Hogan Assessments people would call “reputational scars.” If new leaders are not prepared long before they start making impressions in their new roles, they can be infected with a reputational virus that they will not be able to contain

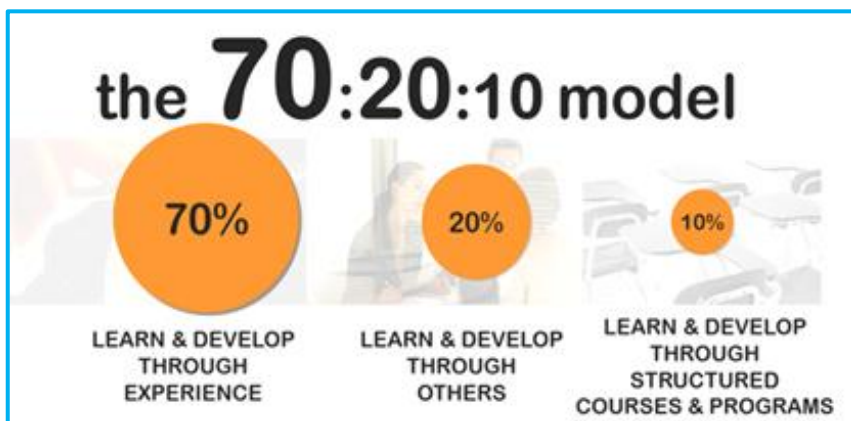
Onboarding has four distinct levels, the Four C's: • **Compliance** is the foundational level and includes supporting new leaders and managers understand the basic legal and policy-related rules and regulations which are applicable for them in their new role as leader and manager. This is particularly important for leaders and managers new to the Trust – for whom such policies etc may all be new. • **Clarification** refers to ensuring that new leaders and managers understand their new jobs and all related expectations. • **Culture** is a broad category that includes providing new leaders and managers with a sense of the Trust's values and culture — both formal and informal. • **Connection** refers to the vital interpersonal relationships and information networks that new leaders and managers must establish. In a very large and complex organisation establishing such connections is vital and is very much in line with the Trust's commitment to supporting collaborative working and cross team/divisional working for the patients' and service users' benefit.

Leading

5. Step 6: Developing leadership capability

As in all learning and development within and across the BHSCT the **70:20:10 model** best describes the Trust's approach to developing leadership capability.

Many leaders and managers are **recruited** with the necessary competences, attributes and experience on taking up their new role.



Most of what leader managers learn, they learn **on-the-job** and **in – the- job** during the course of doing their work—that is where they spend most of their time. A smaller percentage comes from **mentoring, coaching or stretch assignments (work or learning that is outside the norm/outside the day - job)** and the smallest fraction in % terms and this vitally important component part comes from **formal training, development programs**, since that is where they spend the least time.

Because of the scale, complexity and variety of the Belfast Trust its leaders and managers are afforded opportunities to learn, grow and develop on a daily basis – ‘learning is an everyday activity’. The range of approaches to learning and development cited below is evidence of the flexible and innovative approach the Trust has in place to support leaders and managers in meeting their learning and development needs. The following list of activities and solutions gives you a sense of the range of opportunities leader managers and indeed all staff have to learn and develop in the BHSCT in the first two parts of the 70:20;10 Learning Model namely learning through experience (70%) and learning through exposure (20%).

Learning and developing through experience 70/20/10 – Learning

- From trying new approaches
- From their efforts, mistakes and successes
- From putting learning into practice – theory into practice
- From applying new skills
- From increases in job scope/additional stretch – being given additional responsibilities
- From horizontal moves
- From involvement in project work/new initiatives
- From case reviews

Learning and developing through exposure to others – 70/20/10 Learning

- From others – line managers, peers, colleagues, staff a person line manages,
- From feedback
- From involvement in forums
- From involvement in continuous improvement projects – Impact, IIP LSITs etc.
- From clients, service users, patients
- From involvement in Mentoring, Coaching, Shadowing, Networking, Secondments, Conferences, Observation, Instruction and Practice

Leading

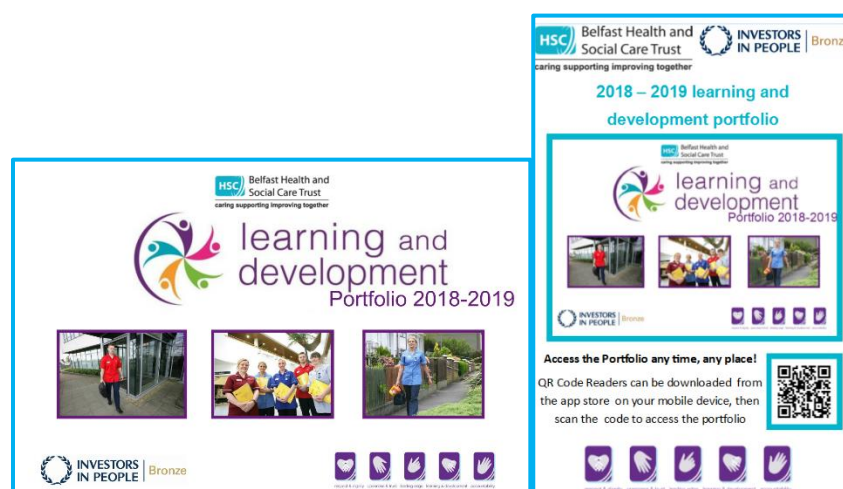
- From reports, audits, critical incidence reviews, complaints, compliments
- From ethical dilemmas
- From failings in how patients experience services e.g. the Trust's own Hyponatraemia, Neurology, Muckamore Hospital cases or external reviews such as Mid Staffordshire
- From feedback from internal or external reviews such as IIP, RQIA, Inspections
- From personal and life experiences
- Involvement in Problem solving projects
- Action learning sets
- Visits to other departments and/or organisations and visits from external personnel to a leader/manager's department
- Dissemination of toolboxes for leaders and managers e.g. Employee Engagement Toolbox.

Learning and developing through structured courses and programs - 70:20:10

The Belfast Trust is proud of its commitment to the ongoing personal and professional development of its leaders and managers. In the year 2017 – 2018 for example the Belfast Trust invested £49,023,954 in learning and development provision and support. This includes structure courses and programmes.

Over the last few years the Belfast Trust has worked hard and effectively to develop the **capacity and capability** of its own learning and development team to design and deliver the majority of management and leadership development programs in Trust based facilities across the Belfast Trust – '**Designed and delivered by in – house staff in 'in house facilities'**'.

The range and scale of learning and development opportunities that are open to leaders and managers are set out in the Trust's annual Learning and Development Portfolio. This is communicated to staff via a number of channels. It is published on the hub, posters and flyers are distributed to venues to be displayed Trustwide. Business cards are also produced with a QR code that staff can scan using their own mobile device to have instant access. Click on the image below or scan the QR code to access the online portfolio.



Leading

The next section of the Storyboard gives a flavour of some of the in-house Leadership and Management Development Programmes available to staff from 2016- Dec 2018 in leadership and management positions. In addition there are a range of programmes available through the HSC Leadership Centre. Staff can also access support to attend conferences or undertake professional study in line with the Assistance to Study Policy. The Table below gives a sense of the variety and scale of the leadership and management development programs the Trust has invested in since its last review.

Name of Programme	Course Duration (hrs)	No. of Programmes	No of Participations	Work days invested (@7.5hr day)	Av. Staff cost (mid-point B5)
Coaching Skills for Leaders	7.5	13	89	1157	£159,145.35
Communication skills for Line Managers	7.5	17	212	3604	£495,730.20
How to develop a High Performance Team	7.5	3	31	93	£12,792.15
Making the Transition into Management	7.5	5	48	240	£33,012.00
New Managers Toolkit on HR Processes	7.5	6	138	828	£113,891.40
Resilience Training for managers	7.5	8	97	776	£106,738.80
The Engaging Manager	3	22	195	1716	£236,035.80
SDR Development Reviewer Skills	3	46	613	11279.2	£1,551,453.96
Courageous Conversations	7.5	8	96	768	£105,638.40
Presentation Skills	7.5	3	31	93	£12,792.15
Managing & Leading Change with your Team	7.5	1	7	7	£962.85
Resolving Conflict with Colleagues	7.5	9	98	882	£121,319.10
ILM 2 Award in Leadership & Management	22.5	12	106	3816	£524,890.80
ILM 3 Award in Leadership & Management	33.5	12	111	5949.6	£818,367.48
ILM 4 Award in Leadership & Management	26	9	80	2496	£343,324.80
ILM 5 Award in Leadership & Management	37.5	9	114	5130	£705,631.50
ILM 3 Award in Coaching Skills	34.5	6	108	2980.8	£410,009.04
CLIME (Clinicians Leading, Improving & Managing Effectively)	37.5	2	40	400	£55,020.00
Nursing and Midwifery Leadership Programme	30	12	300	14400	£1,980,720.00
Attendance Management	3.5	17	274	2173.73	£298,997.02
Carrying out Investigations Training	3.5	1	6	2.8	£385.14
Dealing with Harassment & WWT Issues	3.5	1	3	1.4	£192.57
Disciplinary, Grievance Panel Member	3.5	3	2	2.8	£385.14
Managing Disability in the Workplace	3.5	4	43	80.27	£11,040.68
Managing People's Performance	3.5	34	2	31.73	£4,364.92
Mandatory Equality Training for Managers	3.5	19	418	3706.27	£509,796.98
Sickness Absence Management for Managers	3.5	15	208	1456	£200,272.80
Recruitment & Selection Training	7.5	31	508	15748	£2,166,137.40
Workforce Planning Training	1	6	49	39.2	£5,391.96
Quality 2020 Level 1 Team Workshop	1.5	258	3450	178020	£24,486,651.00
TOTAL			7,477	257,877.80	£35,471,091.39

Leading

For solely the programmes that the HR directorate deliver there was a huge investment in building leadership capability.

‘Leading With Care’ programme: Page 27 in Learning & Development Portfolio

The Trust launched a new Tier 5 ‘Leading with Care’ programme in October 2016. This programme is targeted at post holders in Tier 5 positions across the organisation from all professions, and builds on the roll out of ‘Leading with Care’ programme that has already been implemented for Tier 3 and 4 post holders.



It is a truly multi-disciplinary approach, including medical, managerial, nursing, social care, admin, AHP and all other professions. The programme recognises the importance of working as a collective leadership group and the impact of leadership on patient and client experience and outcomes.

This bespoke programme is delivered over 10 months using a blended approach of exciting and leading edge methodologies. The seven core modules are complemented by one-to-one coaching, a frontline visit and the opportunity to participate in a collective challenge. All participants undertake 360 feedback.

This programme is underpinned by the following principles:

- Based on the values of our Trust to ensure leaders consciously consider, act and motivate staff in line with the values
- Focus on behaviour (individual and collective) and the impact on delivery of care
- Builds on the ethos of the Trust’s Collective Leadership approach to ensure collaboration, participation and engagement with all staff
- The programme aims to support achievement of the Trust’s first priority: Safe, effective and compassionate care.

The [evaluation](#) of this program demonstrated considerable gains in building leadership capability, embedding the Trust values and a development of collective leadership culture. Since its launch in October 2016 [206](#) Tier 5 managers have completed or are currently participating on ‘[Leading with Care](#)’ initiative.

The Leading with Care programme aimed to develop collective leadership capacity through the completion of a team challenge known as a [Collective Leadership Challenge](#). Participants worked in small teams to implement a quality improvement project that would benefit colleagues, patients, or service users. This aspect of the programme encouraged participants to look beyond their own business environment and engage with various stakeholders to focus on continuous improvement projects. [48 collective leadership challenges have been completed.](#)

Leading with Care was shortlisted for a national HPMA award in 2018.

Leading

6. **Step 7: Succession Planning.**

The Trust is committed to [succession planning](#) as an integral part of its business continuity and sustainable success strategy. One way it does this is by ensuring critical roles are filled and people are supported to progress in their professional and managerial careers so that the needs and aspirations of both the individual and the organisation can and do co – exist and are mutually supported.

The Trust recognises the importance of deepening its talent pool and ensuring top talent exists at every level of the organisation. [‘Developing our People today for tomorrow’ –succession planning programme for Tier 4, 5 and 6 post holders](#)’ is a good example of the Trust’s proactive response to the critical issue of succession planning which feeds into the more critical priority of business continuity and sustainable success.

This recent succession planning initiative aimed at [Tier 6 post holders](#), commenced in September 2018 and is designed to maximise the possibility of having a high quality pool of applicants who can apply for future Manager/Senior Manager vacancies. This will support the filling of posts in a timely way. In addition, it will have the benefit of building and strengthening leadership capacity across the Trust.

This initiative is an extension to the [Tier 4 and Tier 5 Succession Planning](#), which concluded in December 2017 and February 2018 respectively. The outcomes include:

- 8 Senior Managers participated on the Tier 4 Succession Planning Initiative
- 75% of these participants have now secured permanent promotions
- 12 Managers participated in the Tier 5 Succession Planning Initiative
- 58% of these managers have now secured permanent or temporary promotions
- 18 members of staff are currently undertaking Tier 6 Succession Planning initiatives

Qualitative feedback included:

“Programme has helped me to feel in a better position to apply for more senior roles”

“I have a more enhanced feeling of control, for example, being able to use my own skills, encouraging and motivating others to use theirs, and feeling able to use a calm rational approach”

“A brilliant programme which helped me to identify my strengths and areas for development and an opportunity to put new skills and knowledge into practice.”

The [‘Developing our People today for tomorrow’](#) programme continues to be evaluated and reviewed after each cohort and the impact of the programme is demonstrated in the movement of the participants through the organisation. The [70:20:10 model of learning](#) continues to be embedded into the design of the programme with most of the learning derived from experiential opportunities and coaching and peer learning through action learning sets. This ensures participants have the opportunity and support to put new skills and knowledge into practice. Technology enhanced learning techniques such the provision and access to online materials encourages and supports participants in taking ownership for their own learning.

7. Step 8: Review and Improvement Planning.

An integral part of the Trust's approach to developing leadership capability is reviewing and measuring performance improvement at individual, team and organisational levels - assessing the extent to which involvement in leadership and managerial development activities has improved the performance of the participating leader manager at an individual level and the subsequent hoped for positive impact on the performance of their team, service and ultimately the organisation. Such positive impacts are critical evaluative criteria for the Trust from all its investment in leadership and managerial development.

The use of self – assessment questionnaires and 360 appraisals for example using such tools as the Healthcare Leadership Model (HLM) that allows participants to form their '**As Is**' position against the nine dimensions of this Model, also supports the participant in working with coaches and line managers in developing a continuous improvement development plan to support their progression and ongoing development across agreed and prioritised dimensions. The fact that the HLM describes leadership behaviours across all nine dimensions of the model on a four - part scale which ranges from 'essential' through 'proficient' and 'strong' to 'exemplary' provides both a progression route map and a set of descriptive behaviours to support each participant to continuously improve their capability and performance.

LIVING THE ORGANISATION'S VALUES & BEHAVIOURS

Overview of this Indicator

People and leaders in the Trust act in line with the organisation's values at all times. They have the courage and support to challenge inconsistent behaviours.

Theme 4: Operating in Line with the Values

The Trust's values and behaviours have been clearly communicated and inform the leadership approach and our development offering.

Theme 5: Adopting the Values

The Trust approach to encourage behavior in line with our values. This includes how values inform the entire staff life cycle from recruitment to retirement.

Theme 6: Living the Values

An outline of some of the key ways that the Trust creates a values based culture and people hold each other to account. Some of the key interventions are the Values Workshops for Teams (Phase I and II) which allow teams to charter their expected behaviours and challenge where improvement is needed.



Leading



Indicator 2: Living the organisation's values and behaviours

People and leaders act in line with the organisation's values at all times. They have the courage and support to challenge inconsistent behaviours.

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Operating in line with the values	Leaders clearly communicate the organisation's core values and how they should be applied	People are led, managed and developed in line with the organisation's values	Leaders consciously consider and act in line with the organisation's values when making decisions	The organisation's values are at the heart of everything it does. They shape the way it operates at every level
Adopting the values	People know and understand what the organisation's values are	People are personally motivated to behave in line with the organisation's values.	People do the right thing in accordance with the values, not necessarily the easiest or most convenient thing	People make decisions based on values rather than self interest
Living the values	People understand how to behave in line with the organisation's values	People are encouraged to demonstrate the organisation's values in the way they behave	Leaders create a culture of openness and trust where people consistently behave in line with the organisation's values	People feel comfortable challenging behaviours that are not in line with the organisation's values and people are held to account

Leading

Our 2019 'As Is' Position for Indicator 2 = Established				
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Operating in line with the values	Leaders clearly communicate the organisation's core values and how they should be applied	People are led, managed and developed in line with the organisation's values	Leaders consciously consider and act in line with the organisation's values when making decisions	The organisation's values are at the heart of everything it does. They shape the way it operates at every level

Theme 4 (Criteria 1) Leaders clearly communicate the organisations core values and how they should be applied.

Themes 4 (Criteria 2) People are led, managed and developed in line with the organisation's values.

The Belfast Trust has a set of clear well – established **core values** that support its purpose, vision and aims and which lie at the heart of the Trust's Corporate Management Plan and others strategies (See Corporate Management Plan and below). The Trust's five core values inform the Trust's decision making processes and govern the way the Trust operates.

Leading

Organisational Culture within a Strategic Context

It is now accepted that healthy cultures in NHS/HSC organisations are crucial to ensuring the delivery of high-quality patient and client care. The Belfast Trust has been working with the Kings Fund who have developed a tool to help organisations assess their culture, identifying the ways in which it is working well, as well as the areas that need to change.

This Assessment Tool sets out the 6 fundamental characteristics of a healthy NHS/HSC culture, namely:

1. Inspiring vision and values
2. Goals and performance
3. Support and compassion
4. Learning and innovation
5. Effective teamwork
6. Collective leadership

In the Trust's OD Strategy the Trust has aligned many of its planned activities to support the implementation of the ODF which will be informed by the output of the Trust IIP Review in May 2019 as well as from the output from the Cultural Assessment based on the King's Fund Assessment Tool which has recently been undertaken.

Some of the key priority areas within the Trust's ODF includes the development and roll-out the Trust's people strategies (including the Trust's Corporate Management Plan for 2018 - 2021, New Directions 2, People Management Strategy, and Collective Leadership Strategy) as well as establishing the baseline position for each of the priority areas and defined 'stretch' targets for each. This includes establishing a baseline of the Trust's position against the '6 Characteristics of a Healthy Organisation'.

The work the Trust has been involved in over the last few years in working to embed its values and ensure its values are at the heart of everything the Trust and its people do is aligned with and supports the aspirations set out in the ODF.

TheKingsFund» Developing Leaders»

The Tools



Leading

VALUES	EXPECTED BEHAVIOURS	NON-ACCEPTABLE BEHAVIOURS INCLUDE BUT ARE NOT LIMITED TO:
 respect & dignity	- Being respectful to others - Showing compassion for those who need our care - Acting fairly - Acknowledging the good work of others - Supporting others to achieve positive results	- Avoiding patients/clients/service users or colleagues who need our help - Being rude and shouting - Criticising colleagues in front of others. - Talking down others during discussions - Failing to listen or trying to understand others' views
 openness & trust	- Communicating openly and consistently - Listening to the opinions of others and acting sensitively - Being trustworthy and genuine - Ensuring that appropriate information is shared honestly	- Communicating something that knowingly isn't true - Saying one thing and doing another - Failing to share information in a timely and appropriate manner - Making decisions which affect others without involving them - Making comments to patients / clients / service users or visitors that may undermine the reputation of the Trust
 leading edge	- Actively seeking out innovative practice - Participating in new approaches and service development opportunities - Sharing best practice with others - Promoting the Trust as a centre of excellence	- Refusing to work with individuals and/or teams - Disregarding data and best practice - Dismissing good ideas without even thinking them through - Reluctance to look for better ways of doing things
 learning & development	- Acting as a role model for the development of others - Continuing to challenge my own practice - Fulfilling my own statutory and mandatory training requirements - Actively support the development of others	- Showing lack of interest in the value of learning for myself or others - Not recognising the need for change for the better. - Refusing to comply with statutory and mandatory training
 accountability	- Taking responsibility for my own decisions and actions - Openly admitting my mistakes and sharing learning from others - Using all available resources appropriately - Challenging failures and poor practice courageously	- Not accepting individual responsibility - Turning a blind eye and tolerating poor performance "Passing the buck" or blaming other people, departments or the Trust

In its Corporate Management Plan which includes the Trust's Core Values (which has been inclusively developed and widely disseminated to all staff) the Belfast Trust says this about its values

'Our Values underpin everything we do – how we work with each other and how we deliver our services. Our values define the overall culture of our organisation and ultimately support our commitment to provide safe, effective and compassionate care'.

Clearly communicating the organisation's core values and how they should be applied

Operating in line with and living the Trust's core values has been a key priority for the Trust since it came into existence in 2007. The Trust's commitment in its 2013 – 16 Corporate Plan - *'to review and embed our Trust Values focusing on living and demonstrating the values throughout the Trust'* was a key catalyst in ensuring the Trust acts with integrity in the David MacLeod and Nita Clarke 'Engaging for Success' sense of the word when it comes to its values i.e. – *'the values on the wall are reflected in day to day behaviours. There is no 'say – do' gap. Promises made are promises kept, or an explanation given as to why not'.*

In developing the Corporate Management Plan for 2018 – 21 the Trust's, vision, corporate themes and core values were revisited and reviewed. These identity elements which together set out the Trust's ambition, defines why the Trust exists and where the Trust is going as well as what the Trust believes in and stands for (the type of culture it is working to create). As explained earlier the Trust revised its vision and corporate themes as a result of this review, while finding its core values continued to be relevant and fit for purpose. How the Trust's

Leading

Corporate Management Plan was developed and disseminated has been explained under Indicator 1 above.

Agreeing the Trust's core values was only ever half of the equation. The Trust has worked hard to ensure the roll – out of its core values through consistent messaging, dissemination through a range of communication channels and methods and the consistent reinforcement of these values every day.

Here are some ways the Trust has worked to communicate and integrate its core values into the everyday fabric of the organisation's operations and practices: -

1. The Trust core values are integrated into all key Trust [documents and communications](#) – the use of the Trust's 'hands' strapline is now well established and recognised by Trust staff. The Trust values are highly visible and are displayed in prominent places in departments and facilities across the Trust.
2. Ensuring the Trust's core values are an integral part of the [Trust's induction processes](#) (Corporate, Team and Professional). The Corporate Induction process for example which is a key part of all new staff's onboarding process clearly communicates to all inductees that the Trust 'values matter' and the attendance of the Chief Executive at Corporate Induction talking about the importance of these values reinforces this message i.e. values matter. Approximately 1000 people attend the Corporate Welcome each year. The message that 'values matter' is reinforced through team and professional induction processes.
3. Leaders and managers being [a positive role model and living and leading by example](#). Staff are more likely to be influenced by what they see and experience rather than what they hear. Indeed not living one's espoused values minimally creates cognitive dissonance amongst staff whilst also being evidence of a lack of integrity – the 'saying doing' gap. Such behaviour in turn can lead to a loss of trust in such leaders and managers.
4. Integrating the Trust's values into key people processes such as the use of [Values Based Recruitment](#) (VBR) - an approach to help attract and select staff, whose personal values and behaviours align with the Trust's core values as outlined in the Trust's Corporate Plan.
5. The Trust's [Welcome & Information Site](#) whose purpose is to provide newly appointed staff with a central repository of important information they will require to support their employment in the Trust. The site also includes a short electronic message from the Chief Executive in which he highlights each individual Trust Value and the importance of ensuring our behaviours reflect these values.

Leading

6. **Appraisal** - The Trust has brought together the knowledge and skills framework (KSF), the Personal Contribution Framework (PCF), the Personal Development Plan (PDP) and the Trust Values into a 'Staff Development Review' (SDR) process. This new approach is currently being rolled out across the Trust. The addition of the Trust Values gives the manager and member of staff an opportunity to discuss behaviours against the values and reinforces the importance and understanding of acceptable and non-acceptable behaviours.
7. **Development Programmes** - Where appropriate, in-house Learning and Development programmes now cover the Trust values and associated expected aligned behaviours into Personal and Professional Development programmes. The 'Leading with Care' programme for example which is aimed at Senior Managers/Clinicians is underpinned by the Trust's core values.
8. **Engagement / Involvement** - 'Living the Trust Values' is one of the core tenets of the Trust's Employee Engagement Framework (See Indicator 3). **The Trust's Employee Engagement Framework** which is based on the MacLeod and Clarke's 'Engaging for Success' Report is based on the 4 enablers for Employee Engagement. The fourth of the employee engagement enablers in MacLeod's report relates to 'Integrity', which was described thus *'behaviour throughout the organisation is consistent with stated values, leading to trust and a sense of integrity. As a key engagement enabler 'organisational integrity' means that the values on the wall are reflected in day to day behaviours and these expected behaviours are explicit and bought into by staff.'* Incorporating the Trust's Values into the Employee Engagement Framework is further evidence of supporting our staff to have a clear understanding of the Trust's Values and how staff are expected to behave in line with the Trust's values. Development and roll out of values based workshops. Since the launch of the Values Based Workshop the Trust's Learning and Development Team has supported 452 teams in the design, delivery and follow up from 452 Values Based Workshops
(<https://view.pagetiger.com/LDPortfolio2016-2017/LD-Portfolio2018-2019>)
9. In total 3,022 people from across the Trust across all bands have participated in these workshops. These workshops provide teams from across the Trust with an opportunity to have a greater understanding of the values and how their behaviours impact on the overall quality of the care provided by the Trust as well as having an impact (positive or negative) on the patient's/service users' experience. It is also important to remember that the Trust's values are equally applicable as to how staff should relate to and interact with each other. During the Values based workshop team members have an opportunity to identify and discuss the positive behaviours against each of the 5 Trust values and at the same time recognise what is not acceptable. Each team ends up with their own personalised Core Values descriptors which supports staff in understanding the Trust's core values and how they are expected to behave to demonstrate the organisation's values in the way they behave within their roles (see two examples for Values Charter from teams who have participated in these workshops). The demand for these programmes remains high and over the next few months a more in-depth evaluation to determine the impact of these values workshops will take place

 Belfast Health and Social Care Trust caring supporting improving together		
Mental Health Community Teams		
VALUES	EXPECTED BEHAVIOURS	WE WILL:
 respect & dignity	- Being respectful to others - Showing compassion for those who need our care - Acting fairly - Acknowledging the good work of others - Supporting others to achieve positive results	- Say hello, good morning & good night - Recognise & value each other by praising each other & saying thank you - Be self-aware & consider the impact of our actions on the team - Show an interest in each other - Offer support to each other when someone is struggling - Not take sides & not expect people to take sides - Give each other compliments - Be compassionate in our actions with each other - Show empathy – people may have things going on - Be fair & reasonable in our actions & expectations
 openness & trust	- Communicating openly and consistently - Listening to the opinions of others and acting sensitively - Being trustworthy and genuine - Ensuring that appropriate information is shared honestly	- Be honest in our communications - Listen and respect opinions - Keep confidentiality of patients and co-workers - Not add on taking away information – reducing gossip and bad feelings - Ask for information that you require - Not leave anyone out – the whole team is always invited - Not gossip about people or listen to gossip
 leading edge	- Actively seeking out innovative practice - Participating in new approaches and service development opportunities - Sharing best practice with others - Promoting the Trust as a centre of excellence	- Seek out training - Recognise the positives of the Trust as an organisation - Use our own initiative to learn & find out about learning - Talk about good experiences, staff & patient wide - Keep morale up - Help to support new ideas - Be positive about values of the organisation & what they aspire to - Take on new initiatives to promote the excellence of the Trust - Be fully informed of known pathways of care
 learning & development	- Acting as a role model for the development of others - Continuing to challenge my own practice - Fulfilling my own statutory and mandatory training requirements - Actively support the development of others	- Welcome new staff & support them to become competent in their role - Help each other by sharing knowledge of our experiences - Try to improve our skills - Keep training up-to-date - Support colleagues with their learning journey - Dedicate time to learn & develop - Be open to change - Look at ways to improve things - Reflect upon our practice & look for opportunities to embed quality improvement
 accountability	- Taking responsibility for my own decisions and actions - Openly admitting my mistakes and sharing learning from others - Using all available resources appropriately - Challenging failures and poor practice courageously	- Take ownership of our actions - Learn from mistakes - Stand up to gossip - Stand up for the values - Be accountable for our health & well-being - Being punctual - Apologise for bad behaviour - Challenge with honesty, without fear - Share the stationery - Commit to regular team meetings & effective communication within the team
Improving Health and Wellbeing and Reducing Health and Social Inequalities		

 Belfast Health and Social Care Trust caring supporting improving together		
Adult Safeguarding Team - Knockbracken		
VALUES	EXPECTED BEHAVIOURS	WE WILL...
 respect & dignity	- Being respectful to others - Showing compassion for those who need our care - Acting fairly - Acknowledging the good work of others - Supporting others to achieve positive results	- Maintain the current level of respect within the team - Continue to encourage industry among all staff - Expect and ask for respect from other teams - Maintain a compassionate approach - Continue to provide positive feedback - Continue with the coaching/open door policy/peer support - Enhance communication within the team
 openness & trust	- Communicating openly and consistently - Listening to the opinions of others and acting sensitively - Being trustworthy and genuine - Ensuring that appropriate information is shared honestly	- Strive for consistency in all safeguarding processes - Be open and honest regarding disagreement about procedures - Provide and encourage feedback from all members of the team about development
 leading edge	- Actively seeking out innovative practice - Participating in new approaches and service development opportunities - Sharing best practice with others - Promoting the Trust as a centre of excellence	- Continue to be proactive in developing the service - Maximise IT potential - Continue peer support/team meetings/reflective group - Continue to promote our service through awareness sessions/workshops - Continue to share learning within the team & beyond - Develop strategies to share information within the team - Continue to review the duty process
 learning & development	- Acting as a role model for the development of others - Continuing to challenge my own practice - Fulfilling my own statutory and mandatory training requirements - Actively support the development of others	- Maintain high level of mandatory training - Continue to share learning within the team - Continue to proactively engage in team meetings/reflective sessions/supervision/peer support groups - Avail of the coaching service within the team - Continue to develop areas of specialism within the team - Continue to review team processes and learn from any issues identified
 accountability	- Taking responsibility for my own decisions and actions - Openly admitting my mistakes and sharing learning from others - Using all available resources appropriately - Challenging failures and poor practice courageously	- Continue to respectfully challenge practice issues in a timely manner - Consider complaints as an opportunity for learning - Openly share complaints and compliments within the team - Be open to learning from mistakes avoiding defensiveness - Promote an environment of team accountability - Continue to foster a positive, supportive culture within the team
Improving Health and Wellbeing and Reducing Health and Social Inequalities		

10. To further embed the Trust's values the Trust revamped its very popular Chairman's Awards in 2015 so that the Chairman's Awards were categorised under the five core values as opposed to the previous five corporate pillars. (See Indicator 5 for more). The re - categorisation of the Chairman's Awards until 2018 when they have been changed to reflect the corporate themes. They have been very central in raising awareness of the Trust's values and the range of submitted projects over that three year period provides clear evidence of the Trust's staff operating in line with, adopting and living the Trust's values.

	2018	2017	2016
TOTAL NO. OF ENTRIES	162	111	110
SHORTLISTED ENTRIES	28	25	24
SERVICE REINVESTMENT	£112,000	£101,000	£101,000

Leading

11. [BHSCT Whistleblowing Policy](#) recognises when “*concerns are raised and dealt with appropriately at an early stage, corrective action can be put in place to ensure safe, high quality and compassionate care*”. This policy reinforces the Trust’s Vision, aim and values as it particularly reinforces the values of accountability, openness and Trust.

The information above highlights the approaches the Trust has used and continues to use to ensure all staff clearly understand the Trust’s core values and how they should be applied in behavioural terms. In addition to supporting the criteria linked to Indicator 2 the above approaches also support a range of additional criteria from across the IIP Standard e.g. Criteria 1.3.1, Criteria 4.3.2, Criteria 4.3.3.

Leading

Our 2019 'As Is' Position for Indicator 2 = Established				
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Adopting the values	People know and understand what the organisation's values are	People are personally motivated to behave in line with the organisation's values	People do the right thing in accordance with the values, not necessarily the easiest or most convenient thing	People make decisions based on values rather than self interest

Theme 5 (Indicator 1) People know and understand what the organisation's values are

Theme 5 (Indicator 2) People are personally motivated to behave in line with the organisation's values

In the Trust's 2016 IIP Review the Trust was proud that it 'satisfied the people related evidence requirement 1.19 that says *'people can describe the organisation's core values and what this means to the way they are expected to work'* and 1.24 *'people believe in and share the organisation's vision and values'*. The Trust feels this continues to be the case and it equally believes it has built on the very valuable feedback it has received from its last IIP review.

The Trust believes that its people are led, managed and developed in line with the organisation's values – a belief borne from feedback from the Trust LSITs and internal IIP Healthchecks, which indicate that the biggest perceived and experienced improvement since the Trust's last review in 2016 has been the extent to which people across the Trust know and live the corporate values. Our leaders and managers clearly communicate the organisation's core values and how they should be applied as demonstrated above. Our leaders and managers consciously consider and act in line with the organisation's values when making decisions. Our leaders and managers continue to work to create a culture of openness and trust where people consistently behave in line with the organisation's values. Our story under Indicator 8 'Delivering Continuous Improvement' will clearly demonstrate how the Trust continues to live its value of 'being leading edge'

Leading

The Trust has a clear set of core values that support the Trust's purpose, vision and aims. The Trust core values are at the heart of the organisation's Corporate Management Plan and all other critical strategies and these values govern the way the Trust and its leaders and managers operate. Providing clarity on the organisation's core values and how they should be applied and lived is a critical part of leadership and the Trust believes it continues to succeed in this regard. The work the Trust is involved in the areas of culture is further evidence of the importance the Trust attaches to developing a culture which supports the achievement of its vision and aims and seeing its core values as the building blocks of its preferred culture.

Managers understand and have a sense of ownership of and responsibility for the Trust's core values – in some ways they are a key guardian of the Trust's values. They also understand what the values mean to the way they are expected to manage. In practice terms managers work to make sure the Trust's values are the heart of how they lead, manage and develop their teams and individual team members. Managers are recruited and recruit staff against the Trust's values. Managers ensure the Trust's values are an integral part of on - boarding process for all new recruits during their team induction process. Managers include a discussion around how people are living the Trust's values during staff appraisals, staff supervision and staff meetings.

Managers request and undertake [values based workshops](#) for their teams and services – allowing each team to explore and agree what the Trust's values mean to and for their team in practical terms, asking 'how can we be leading edge?', 'how can we be open and transparent?', 'how can we hold each other to account?', 'how can we support each other's learning and development?', 'how can we ensure we treat each other and all we interact,with with respect'.

Values Workshops for Teams

The purpose and objective(s) of the Values Workshops is primarily an opportunity for teams to familiarise themselves with the values and explore how these values are reflected in their work and behaviours of the team. The workshops also afford participating teams with an opportunity to reinforce positive team behaviours and identify/challenge unacceptable team behaviours. The workshops are facilitated by the Trust's HR Learning and Development team. The output of the workshop is the development of a team charter which sets out the acceptable and expected behaviours against the Trust's core Values.

The Trust also offers Values Phase II Workshops for teams that have had phase 1. The content of Phase II includes how to review and reinforce acceptable and expected behaviours as well as identify non acceptable behaviours within the team. The workshop reminds team members of the importance of personal accountability.

Since the launch of the Values Based Workshops in 2014 452 Values workshop have been held, with 452 teams and 3,022 members of staff participating from right across the Trust. Living the Trust values and teams implementing their Values Charter has contributed to improvements in communication and engagement with staff while also supporting the development of a culture and set of agreed and aligned behaviour which staff, service users and all stakeholders have a right to expect from staff across the Belfast Trust.

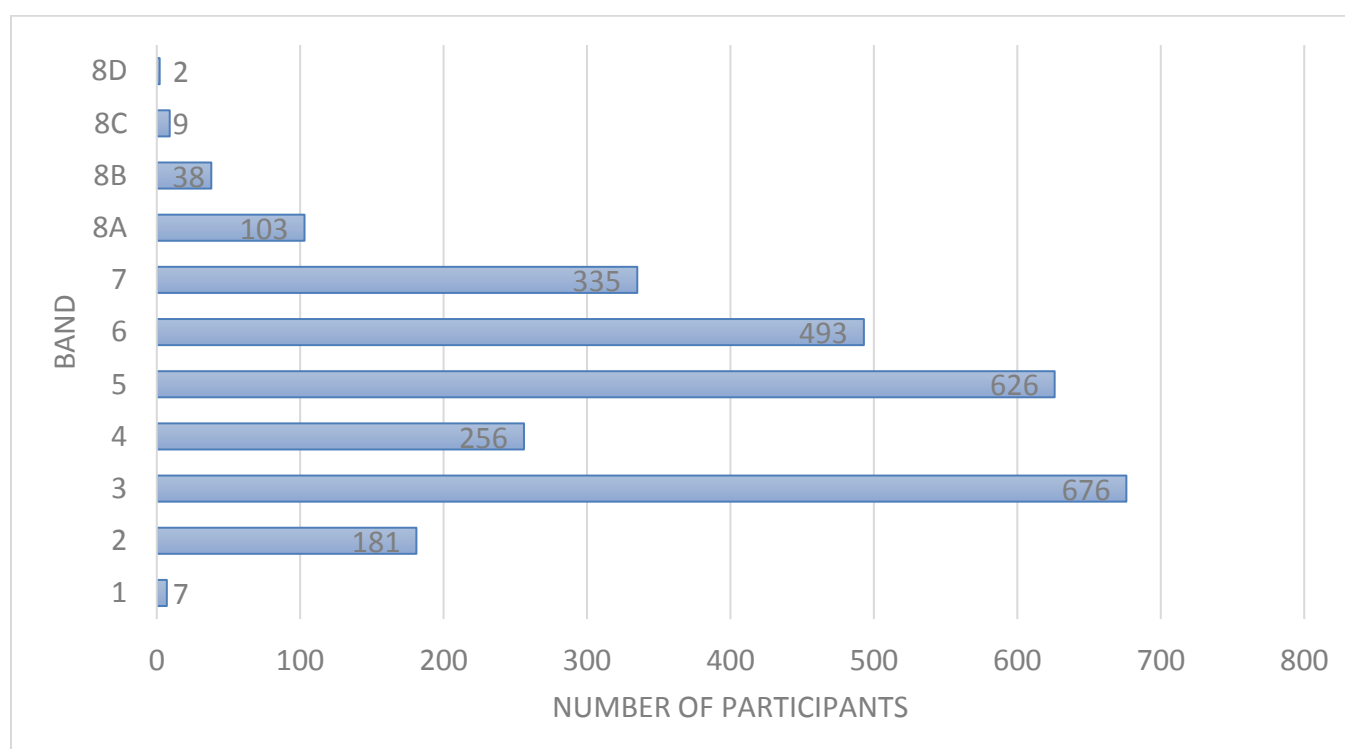
Leading

Common themes identified from review of Team Charters have supported a number of improvements including:

- Open, honest and stronger team communication,
- Greater focus on multi-disciplinary team learning, including sharing of learning
- Raised awareness of dignity and respect and how behaviours impact across the team
- Giving and receiving feedback in a professional manner
- Supporting a no blame culture and learning when things go wrong

The graph below shows the banding of staff who have attended a Values Workshops since April 2016:

Number of Participants by Band in Values Workshops April 2016-Dec 18



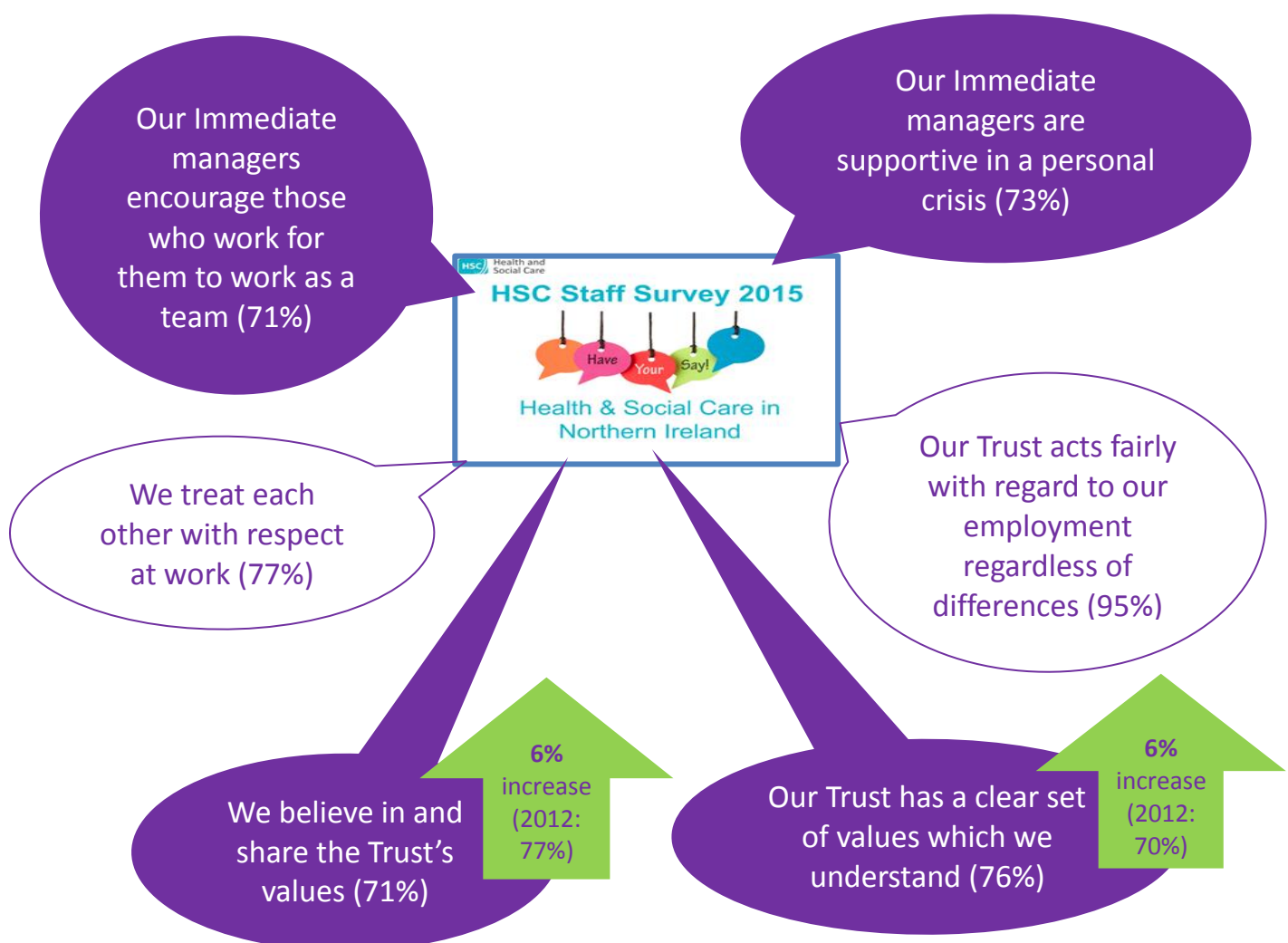
Of the 2,726 staff who attended a workshop 64% were made up of staff at bands 1-5. These staff include staff nurses, nursing assistants, porters and other support services throughout the Trust.

Leading

People are **developed** in line with the organisation's values by ensuring all people are clear as to what is expected from them in behavioural terms and then working to support staff through development activities such as SDRs, supervision, coaching, mentoring and involvement in learning and development activities such as values based workshops as to how each person can become an ambassador for the Trust's values. The work the Trust is involved in the area of whistleblowing is also of critical importance as it is designed to welcome and support people to challenge behaviours and practices that are not in line with the Trust's values.

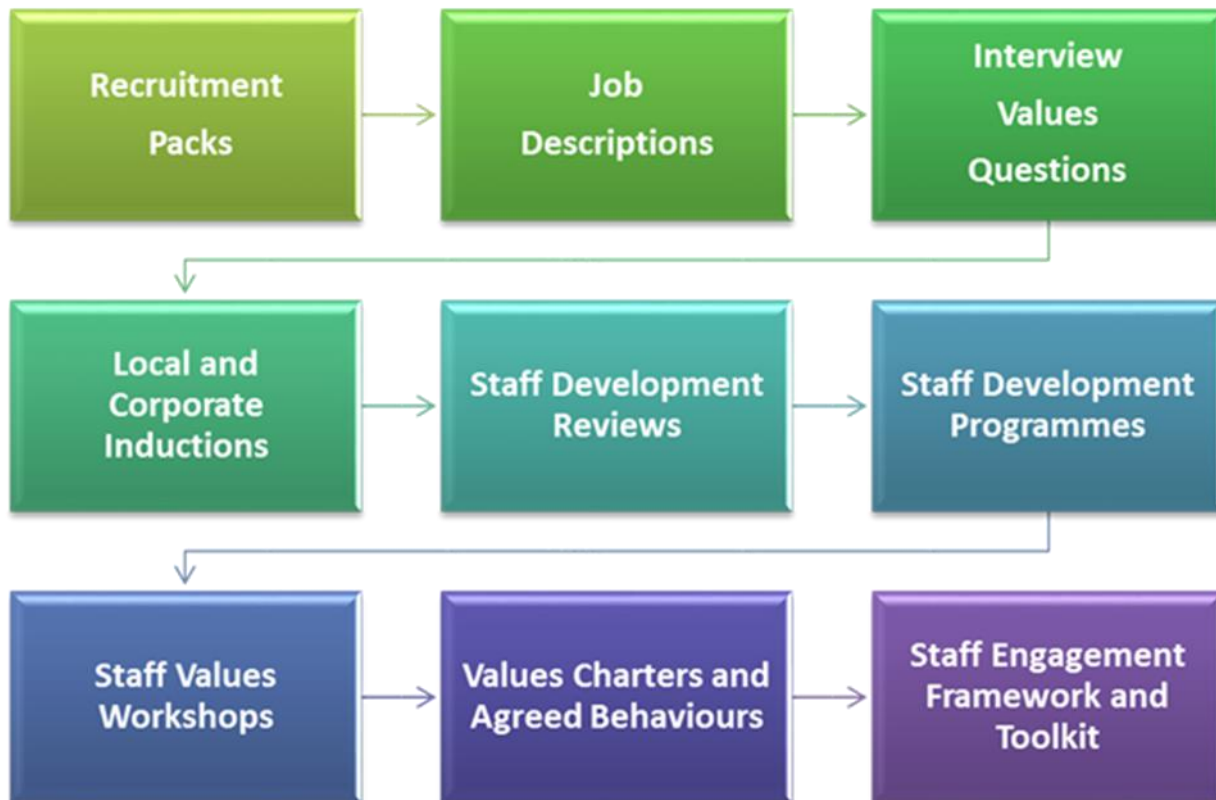
Feedback from internal IIP 40 surveys indicate that the majority of staff who responded '**are personally motivated to behave in line with the organisation's values**' and '**are encouraged to demonstrate the organisation's values in the way they behave**'. The in-house IIP 40 survey results showed that the Trust scored 5.43 on a 7-point Likert Scale in this indicator of Living the organisations values and behaviours.

Our HSC Staff Survey in 2015 further supports this. Respondents agreed with the positive statements below:



Leading

The diagram below gives a flavour of how the Trust has worked to integrate its core values into its people practices:



Leading

EMPOWERING AND INVOLVING PEOPLE

Overview of this Indicator

The Trust has a culture of trust and ownership in the organisation where people feel empowered to make decisions and act on them.

Theme 7: Empowering People

The Trust fosters innovative behaviours and the Organisational Development Framework encourages individual and collective innovation and leadership so that people feel empowered to improve. The Trust also has a coherent approach to empowering staff through communication to share knowledge and information.

Theme 8: Participating & Collaborating

The Trust ensures that people feel that their contribution makes a difference. Consistent mechanisms to involving staff in decision making such as the Industrial Relations structure and the Chief Executive's briefing are outlined.

Theme 9: Making Decisions

Leaders allow people to make decision themselves with the appropriate support to improve the organisation's performance. The Trust employs a plethora of ways to do this including our Collective Leadership approach, 'What Matters to You?' and other Engagement initiatives.



Leading



Indicator 3: Empowering & Involving People

There is a culture of trust and ownership in the organisation where people feel empowered to make decisions and act on them.

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Empowering people	People have access to the knowledge and information they need to do their job well	People feel empowered to identify ways to improve how they do their job	People are encouraged to take the lead and have the opportunity to develop their leadership skills	People use their initiative to lead and take ownership over delivering the organisation's objectives
Participating and collaborating	People or their representatives are consulted about decisions which have an impact on them	People are involved in decisions that have an impact on them and feel their contribution makes a difference	People consistently participate in decisions and feel their contribution makes a difference	Participation, collaboration and teamwork are at the heart of the organisation's approach to decision making
Making decisions	Leaders trust and support people to make decisions in line with their level of responsibility	Leaders involve people when establishing their level of decision making, in line with their role	Leaders are open and transparent about sharing information which enables people to make and act on decisions themselves	People are empowered to challenge the status quo to improve the organisation's performance

Leading

Our 2019 'As Is' Position for Indicator 3 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Empowering people	People have access to the knowledge and information they need to do their job well	People feel empowered to identify ways to improve how they do their job	People are encouraged to take the lead and have the opportunity to develop their leadership skills	People use their initiative to lead and take ownership over delivering the organisation's objectives

Theme 7 Criteria 1: People have access to the knowledge and information they need to do their job well

Earlier in this Storyboard (under Indicator 1/Theme 1 – 'Creating transparency and trust'), we have set out how *'there is clear and regular two way communication between leaders and people at all levels'*. We also set out how *'managers support people to deliver the organisation's objectives'*.

The importance of information sharing is specifically referenced in one of the Trust's core values namely displaying openness and trust where it states 'ensuring that appropriate information is shared honestly'.

Managers use a range of methods to ensure staff have access to the knowledge and information they need to do their job well.

- In team and department *induction and on – boarding processes* all staff are introduced to the responsibilities of the Team/Service and the expected contribution of each member of staff. During these processes staff learn about the requisite knowledge and information they need to do their job well and how to access this.
- Most teams will operate *standard operating procedures* which provide all staff with clear guidance on how they should carry out each task they have been allocated.
- Through the use of team information hubs and the Trust's communication hubs and team huddles, as well as the Trust's internet page all staff have ready and easy access to a wide range of documents, procedures and policies which support staff in doing their job well – this for example is particularly important for staff who need easy access to Trust's policies.

Leading

- Experienced members of staff have learned from experience the types of knowledge and information needed to do a job well and such staff are an invaluable [source of support](#) to staff who are new to a role or new to a task.
- Line managers when [delegating and/or allocating](#) work to staff, will walk and talk delegates/staff through the task in hand – such conversations will cover the knowledge (what do you need to know and understand) and information (what information you need to be able to do that particular job well).
- [Handovers](#) are a critical part of most clinical staff's roles and such communication channels are vital in passing on critical information and knowledge to staff coming on a shift.
- The use of 'diaries', 'WhatsApp groups', 'calendars', 'activity logs', 'patient's notes' 'case notes' etc are other ways by which staff learn and are kept informed about planned activities, people's whereabouts etc.
- Staff involvement in [team meetings](#), [team briefings](#), [team huddles](#) are other methods used to ensure staff are kept involved and informed ensuring they have the knowledge and information they need to do a good job.
- People having access to knowledge in the learning sense of the word (people know what to do and how to do it safely) beyond factual or work specific knowledge is covered in more detail under [Indicator 7 – Building Capability](#).

Theme 7: Criteria 2: People feel empowered to identify ways to improve how they do their job

The Trust as a three times IIP accredited organisation has worked consistently since it came into being to develop a culture where staff are involved, engaged and empowered to identify ways to improve how they do their job which includes supporting staff in making decisions and acting on them. The premise which underpins [collective leadership](#) is that decisions are best made by the person/people with the knowledge and information closest to the patient/service user/service etc. The Trust has long been committed to devolved responsibility and through the new divisional structures and collective leadership arrangements this is becoming the accepted norm.

Supporting and encouraging staff to identify ways to improve how they do their job is 'enshrined' in the Trust's [core values](#). For example under '[leading edge](#)' it states staff should - 'actively seek out innovative practice' 'participate in new approaches and service development opportunities' while under '[being accountable](#)' staff are encouraged to 'take responsibility for their own decisions and actions', 'openly admit mistakes and share learning from others' and 'challenge failures and poor practice courageously'.

Leading

The idea of involving staff in business planning, team and service planning, continuous improvement work and identifying learning and development needs are all examples of involving staff in identifying ways to improve how the team/services perform and how individual team members do their job.

Involvement in such work and workshops are also designed to support staff in bringing about any identified improvements for the benefit of patients, clients, service users (both internal and external).

The following list though not exhaustive are some of the practical approaches used by managers and confirmed by staff as to [how staff are involved in identifying ways to improve how they do their job](#): -

- Staff are asked for their opinions and ideas about work related matters and/or potential areas for improvement through such processes as SDR, Appraisal, Job Planning, Supervision, Mentoring, Team Meetings, Team Building Away Days, Business Planning Workshops.
- Some teams use suggestions schemes to encourage and facilitate ideas generation
- Learning from debriefing sessions following attendance at a training event
- Using staff surveys to listen and learn from staff e.g. NHS Staff Survey, IIP 40 Healthcheck Survey, what matters to you.
- Involving staff in decisions that are made at work that impact them, their team or service and where their contribution is likely to add value and make a positive difference.

[Other practical approaches](#) identified by managers during IIP Healthcheck Conversations included 'involving and engaging staff in discussions on such topics as':

- [Employee impact](#): Are employees aware of how they impact on and contribute to the Trust achieving its ambition, priorities and objectives? Such a conversation helps staff to find meaning in their role and contributes to a greater appreciation that what 'you' do matters and what 'you' do makes a difference. It also identifies what a person/team is doing well and what they need to improve upon to enhance their impact. Employee impact can be an important part of a SDR discussions, or a Coaching session.
- [Efficiency savings ideas](#): The Trust has managed to deliver £320 million of efficiency/ productivity saving through such initiatives as the MORE projects – this very impressive achievement has required extensive input and support from staff from across the Trust in generating 'cost savings suggestions and ideas'.
- [Process improvements](#): Staff have been extensively involved and engaged in continuous improvement projects through such initiatives as IMPACT, the Chairman's Awards. A detailed description of such work is housed under Indicator 8 later in the Storyboard.

Leading

- **Patient needs, requests and feedback:** How can employees and teams/services learn from and work to respond to the needs, requests and feedback from service users? Such feedback is often the catalyst for improvement projects which will be highlighted under Indicator 8 as well as through Directorate presentations
- **The need and opportunity to offer new services or new products:** What ideas exist for new products or services? How could those new ideas be better developed and implemented? – Technology continues to advance, treatment modalities continue to evolve, the needs and expectations of service users continue to change. The IIP Assessment Team will find numerous examples of teams who have led the way in offering new and leading edge services and/or responding to service users needs in new and innovative ways (Directorate Presentations). In some instances these were in response to an expressed need, in other instances developments and improvements flowed from staff being proactive in suggesting leading edge practice and in several cases being a world leader.
- **Enhancing Team effectiveness:** How effective are we as a team? What do we do well and what do we need to do better? Involving the team members in improving the performance of the team enhances ownership and follow through on improvement ideas. Since 2016 there have been 159 team effectiveness workshops, these are currently delivered in-house and through HSC Leadership Centre. These workshops provide an opportunity to improve how the team delivers its service and how individual team members do their job.

Another rich source of improvement ideas generated by staff have come from the '[what matters to you](#)' conversations the Trust continues to have with its staff. In addition earlier in the storyboard we have heard about all the invaluable learning and improvement opportunities identified through social media platforms.

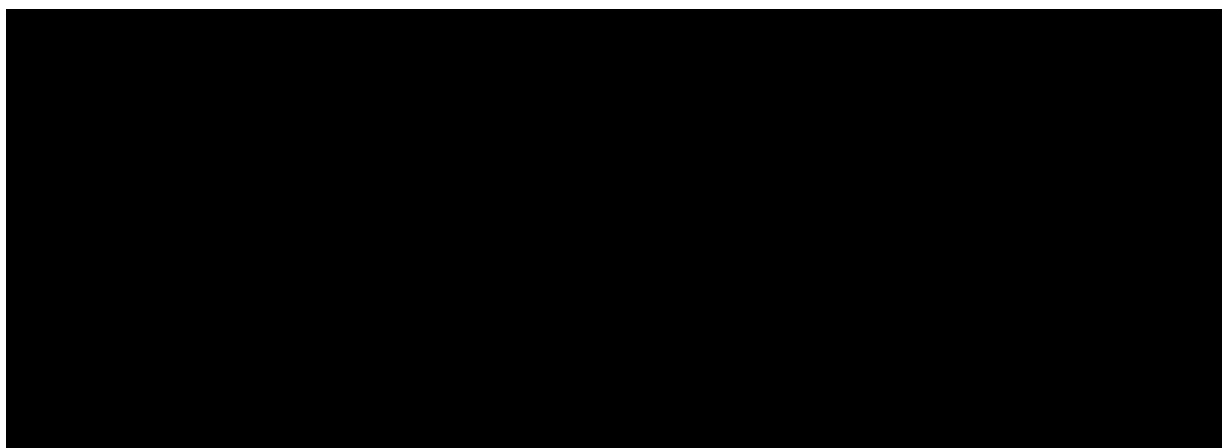


Leading

Our 2019 'As Is' Position for Indicator 3 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Participating and collaborating	People or their representatives are consulted about decisions which have an impact on them	People are involved in decisions that have an impact on them and feel their contribution makes a difference	People consistently participate in decisions and feel their contribution makes a difference	Participation, collaboration and teamwork are at the heart of the organisation's approach to decision making

Theme 8: Criteria 1: People or their representatives are consulted about decisions which have an impact on them



The Trust has a separate consultative forum for medical and dental staff, the Local Negotiating Forum (LNC), which is chaired by [REDACTED]

Each of the above groups are productive in fully undertaking their functions, roles and responsibilities. Both management and Trade Unions share the responsibility for making the committees work effectively and productively.

Leading

The success of the industrial relations machinery is demonstrated in the numerous outputs of each of the relevant committees.

One key success story is that of the review of the Alcohol & Drugs in the Workplace Policy. A highly contentious and sensitive policy, a sub group of the Health and Safety Committee was set up, consisting of representatives from management, Staffside and HR. The policy is now live with effect from November 18, and training is being designed in partnership by the group for roll out to staff and managers.

The support Representative Groups continues to offer in relation to IIP is a clear demonstration of effective partnership working for the benefits of staff and ultimately service users.

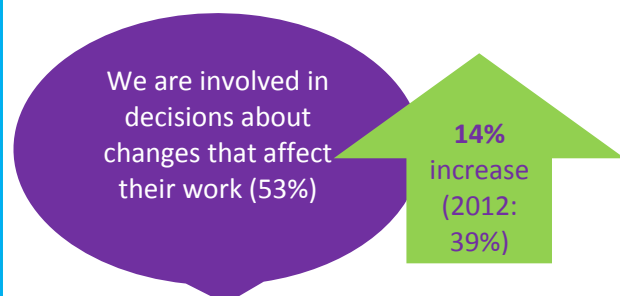
The Trust continues to work effectively with representative groups and it has a well established and effective approach to consultation with representative groups about decisions which have an impact on staff such as policies, corporate plans, working arrangements, structures etc. through the TJNCF

Leading

Theme 8: Criteria 2: People are involved in decisions that have an impact on them and feel their contribution makes a difference

One of the building blocks of the Trust's Employee Engagement Framework is 'Employee Voice – Your Ideas Matter – Your Voice Counts'.

The wide range of approaches the Trust has in place and uses to involve staff in decision making have already been described above and are summarised in the Infographic below. Feedback from staff during the IIP Healthchecks in 2018 were positive in that they 'were involved in decisions that have an impact on them and they largely felt their contribution does makes a difference'. The HSC Staff Survey, cited below, also received a similar response:



Leading

Our 2019 'As Is' Position for Indicator 3 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Making decisions	Leaders trust and support people to make decisions in line with their level of responsibility	Leaders involve people when establishing their level of decision making, in line with their role	Leaders are open and transparent about sharing information which enables people to make and act on decisions themselves	People are empowered to challenge the status quo to improve the organisation's performance

Theme 9: Criteria 1: Leaders trust and support people to make decisions in line with their level of responsibility.

Theme 9 Criteria 2: Leaders involve people when establishing their level of decision making, in line with their role.

The Trust's approach to involving people in decision making has been outlined above. Through its values especially 'being accountable' the Trust sets out the climate and culture it is trying to create which is designed to support staff 'in taking responsibility for their own decisions and actions'. Trust in decision making is dependent on the person's trustworthiness, which is a combination of character, competence, confidence on the part of the decision maker, allied to the importance of and any possible risk associated with the decision itself.

Under Indicator 6 which appears later in the Storyboard, the Trust's approach to getting the three 'A's' of autonomy, authority and accountability right are explained in greater detail and all of these are critical parts in any decision making process.

To ensure the right decision is made by the right person, in the right place at the right time the Trusts ensures

- Decision makers have access to the relevant knowledge and information they need to make the best decision.
- Guidelines and pathways and NICE guidelines offer guidance to clinical staff as to what constitutes the best, the optimum decisions based on the information available.
- Staff are encouraged to consult with others when making critical decisions as appropriate especially if they have limited experience in such areas.
- Staff are not asked to take on roles or tasks they have not been trained for and/or for which they have no experience of or competencies in.

Leading

At an organisational level the introduction of collective leadership and collective leadership arrangements are designed to support decision making as close to the service user as is possible. Staff with hands on experience and knowledge are ultimately in the best position to make informed decisions.

Managerially, managers continue to support staff in taking on more responsibility by expanding their areas and scope of responsibilities and by offering stretch assignments. The idea of reviewing and learning from decision making and decisions made are all critical part of supporting staff in being better decision makers.

Managers, during the IIP Healthcheck conversations, talked about some guiding principles they used to support effective decision – making which is commensurate with the person's level of responsibility, confidence and competence as well as taking into consideration the possible risk involved in any decision. The following principles apply to those decisions which are outside the norm and which are new to the staff member and/or for which the staff member has limited experience in the particular area.

Some guiding principles:

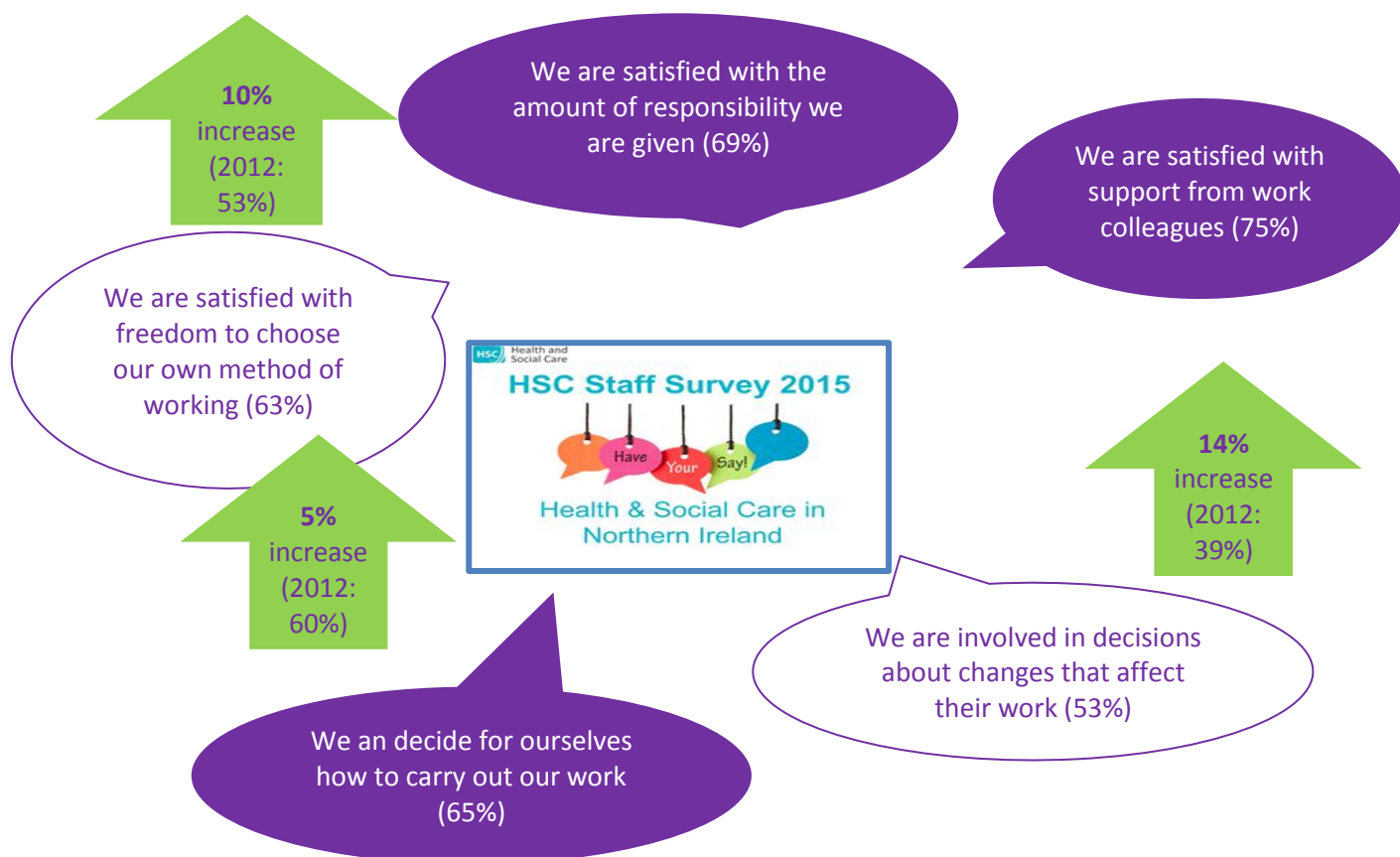
- Managers talked about the **importance of preparation**. Employees can't deliver quality results if the task delegated to them isn't fully thought out, or if expectations keep changing. Managers talked about the importance of 'taking the time and developing the discipline to map out exactly what you're asking for and expecting of the member of staff'.
- **Assign** - Once you've taken the time to map out exactly what you're looking for, managers talked about how important it is to convey that information to your staff member in a manner which is appropriate to their role and responsibility. *'I have learned the importance of ensuring you provide clear information on timing, budget, and context, and set expectations for communication and updates, including frequency, content, and format'*.
- **Confirm understanding on the part of the staff member** - One of the most common mistakes made in delegating is assuming that employees understand what you want, rather than making sure that they do. Confirming understanding only takes about 60 seconds, but is the most important determinant of success or failure. The best way to confirm understanding is to ask your employees to paraphrase the request or assignment in their own words. If you're not comfortable doing that (many managers feel—often correctly—that it makes them sound like a kindergarten teacher), you should, at the very least, ask questions to make sure employees understand all aspects of what's required.
- **Confirm commitment – some managers talked about how they in the past skipped this step with negative consequence**. Confirm that the employee has accepted the tasks they've been given. The most important part of a relay race is the handing of the baton to the next runner. Runners spend a huge amount of time learning this skill. It should be no different in the workplace. Commitment means making sure you've successfully handed over the baton. Confirm that employees are committed to the expected results,

Leading

- and to the process that's been set out (including the schedule, budget, and tools), and that their overall goals for the task are aligned with yours. Make sure they're aware of any consequences (for the Trust, service, team or service user and for the staff member themselves) that may result if they fail to deliver on the desired outcomes.
- **Avoid "reverse delegating"** - Many managers are extremely overworked. Sometimes, this is because their employees are better at delegating than they are: Managers often end up completing tasks they had delegated to others, because those tasks somehow end up back on their plate. This is called "reverse delegating." Staff cannot develop if managers continue to use reverse delegating and managers will continue to feel overburdened if they allow reverse delegation. It's rarely, if ever, necessary for a manager to take back a task that he or she had delegated to someone else. (If this is necessary, it likely means that not enough time was spent on the preparation stage, and that time, resource, or other constraints have led to problems that you did not foresee). If an employee reaches an impasse, treat it as a learning opportunity. Coach the employee through it, making sure he or she has the resources and knowledge needed to complete the task. That way, you'll still be free to focus on other things, and the employee will be better equipped to carry out similar tasks in the future. The bottom line? Don't take tasks back.
- **Ensure Accountability** - Two-way communication is a key part of delegating. Finding out at the completion date that a deliverable hasn't been completed or has been done unsatisfactorily is the nightmare scenario of delegating. That's why you need to make sure your employees are accountable for the task. Accountability is key to the process of delegation: It means employees are regularly communicating with you about the status of the deliverable and the timing of delivery so that there are no surprises at the eleventh hour. The delegation process becomes faster and more fluid the more you do it. Once you've mastered it, it will become a part of your managerial DNA, and you'll consistently reap outstanding results.

Leading

In conclusion trust in decision making is earned – ultimately it is the result of staff consistently delivering on time every time to the standards and expectations agreed at the outset. The HSC Staff Survey allowed staff to feed back how they felt:



A sizeable majority of leaders interviewed during the IIP Healthcheck in 2018 believe they were *'trusted and supported in make and taking decisions in line with their level of responsibility'* and they were involved *'when establishing their level of decision making, in line with their role'*. They equally believed that they in most cases *'trusted and supported the staff they line managed in making and taking decisions in line with their level of responsibility'* while also confirming that they invariably *'involved their staff when establishing the person's level of decision making, in line with their role'*.



Supporting



Supporting

Managing Performance

- Setting objectives
- Encouraging high performance
- Measuring and assessing performance



Recognising & Rewarding High Performance

- Designing an approach to recognition and reward
- Adopting a culture of recognition
- Recognising and rewarding people



Structuring Work

- Designing roles
- Creating autonomy in roles
- Enabling collaborative working



MANAGING PERFORMANCE



Overview of this Indicator

The previous section on the Leading principle shows that we align our objectives and how the Trust involves staff in designing and empowering them in delivering the organisation's ambition to be one of the safest, most effective and compassionate health and social care organisations.

Theme 10: Setting Objectives

The Trust has a multi-layered approach to setting that objectives at an organisational, service, team and individual level. Through engagement and a future focus, this 'stretch' percolates up, down and across the organisation. This includes through performance management and assurance structures and how agendas are aligned.

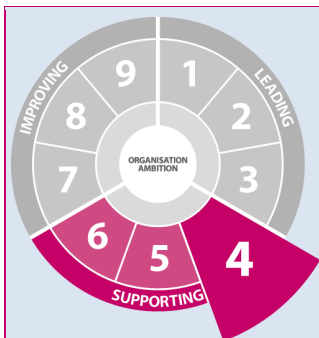
Theme 11: Encouraging High Performance

The Trust supports high performance at individual and team levels. This includes some pivotal process in Staff Development Review/Appraisal (SDR), to professional supervision, professional revalidation, and team development interventions.

Theme 12: Measuring and Assessing Performance

The Trust uses data and evidence of behavioural evidence to improve performance. This includes key people metrics of engagement, absence, Quality Improvement Level 1, and SDR compliance, and key service metrics which indicate our progress to being one of the Top 20% of high performing Trusts.

Supporting



Indicator 4: Managing Performance

Objectives within the organisation are fully aligned, performance is measured and feedback is used.

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Setting objectives	People know what is expected of them and understand how their individual objectives fit the organisation's objectives	Leaders involve people in setting clear and achievable objectives. People are regularly reviewed against these objectives	Stretching individual and team objectives are aligned to the organisation's objectives and performance measures. People take responsibility for monitoring their own performance	People take the lead in setting stretching objectives that support and respond to the organisation's goals and plans for change
Encouraging high performance	Line managers invest time in managing performance and ensure people understand the performance process	Line managers have open and honest conversations with people about their performance	Line managers are highly effective and consistent at supporting high performance and addressing underperformance through effective, constructive and open dialogue	People are expected and actively supported to strive for high performance at all times
Measuring and assessing performance	People's performance is regularly measured and assessed against objectives. People receive feedback on their performance	People's behaviours are assessed against the organisation's values	Performance data and evidence of behaviours are captured and used effectively to improve the performance of people and the organisation	Giving and seeking timely feedback on an informal basis, engaging in performance discussions and coaching are a core part of the day-to-day running of the organisation

Supporting

This section of the Storyboard will set out to demonstrate how the Trust is using flatter structures in line with the Collective Leadership framework and arrangements to enable faster decision - making, improved agility and an even stronger patient/service user focus. This section of the Storyboard will demonstrate how the Trust supports its people to perform through the way jobs are designed, reward is structured and performance is managed. It will also set out how the Trust is continuously working to get the balance right between the level of authority, autonomy and accountability given to staff as the Trust works to develop a culture where decisions are made as

Performance Management within a Strategic and Regional Context:

Before describing how performance is managed within and across the Belfast Trust it is important to set Performance Management within a Health & Social Care NI context.

The Department of Health (DoH) in a DOH Policy Circular has outlined the new draft HSC Performance Management Framework for the HSC Sector. The DoH will now take lead responsibility for the performance management of the HSC Sector (*Reference; draft DOH Policy Circular*). The general accountability structure as set out below illustrates how regional strategic objectives are set, aligned and cascaded within HSC.

The DoH plays a key role in the performance management process on behalf of the Minister and Executive. The DoH has set out an enhanced **performance management and accountability system/framework** which is designed to more clearly identify where accountability and responsibility for performance management rests.

- The **draft Framework** sets out that:
 - The central responsibility of Trusts is to manage their own performance, and therefore the DoH does not envisage any need for a large regional performance management function.
 - Where Trusts do not deliver against agreed performance levels, this should be managed through the Department's accountability sponsorship arrangements.
 - The DoH will be supported / advised in its accountability arrangements by the HSCB/PHA who will focus on day-to-day engagement with Trusts in relation to service improvement, through which it will be able to assess if under-delivery against agreed improvement objectives and targets is a performance issue or legitimate exceptional circumstances.

Supporting



Having set out how performance is set, encouraged, measured and assessed at a Regional HSC level, the diagram below provides an overview of the internal performance management and governance arrangements that exist within the BHSCT.

The diagram below gives a broad overview of the Trust's accountability mechanisms:

Going forward the key regional forum for holding Trusts to account will be through the DOH Accountability Review meetings. The format for these meetings will review organisational performance across five domains of accountability, i.e.

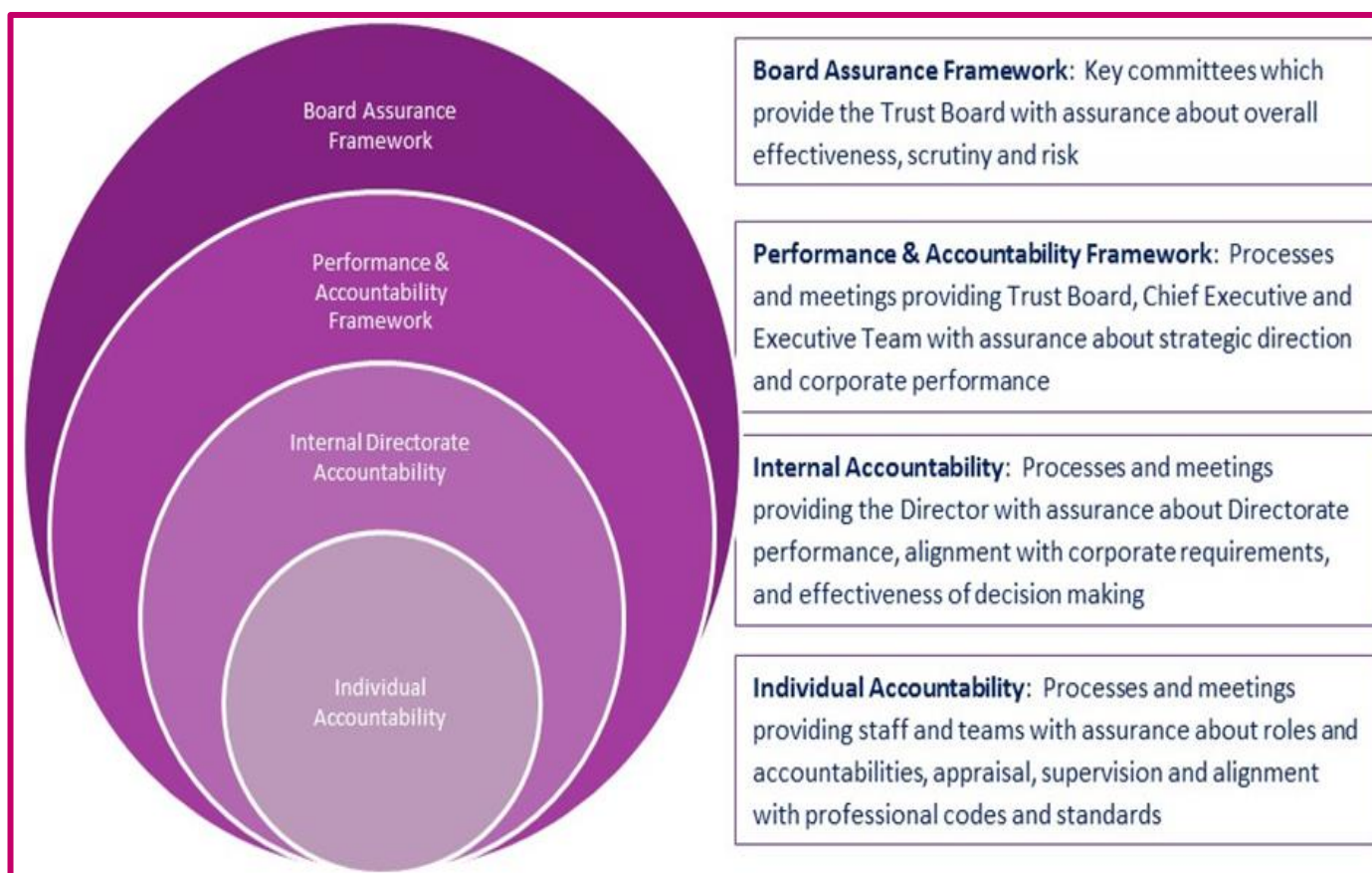
- Safety and quality
- Finance and Use of Resources
- Operational Performance and Service Delivery
- Strategic Change
- Leadership and improvement capability

The DoH has outlined that the DoH's approach to accountability will be underpinned by the principle of **earned autonomy** and issues will only be considered by DoH where Trusts performance is not in line with agreed Performance Trajectories. Where agreed levels of performance are not achieved, or where deviation from annual trajectory is of such concern, the issue will be escalated to the **bi-annual accountability meeting** between DoH Permanent Secretary and Trust Chair and Chief Executive.

Supporting

Performance and Accountability in our Trust

The Belfast Trust Internal Performance and Accountability Framework involves a range of measures which provides the Trust Board, the Chief Executive and the Executive Team with assurance that the Trust is meeting its corporate performance objectives and moving in the right strategic direction/trajectory. This Internal Performance and Accountability Framework and process provides the Trust's senior leaders with an opportunity to identify where objectives are being met, or where the Trust is under-performing in certain areas, with a focus on identifying the reasons for under - performance and agreeing action plans to address and improve performance where necessary.



The framework includes the reporting and meetings arrangements below:

- **Trust Board meetings (Bi-monthly)** – at which Trust Performance Scorecard is presented for review. It is used to provide the Trust's Board with assurance that there is a focus on the delivery of key organisational objectives, in particular, objectives and goals for improvement as set out in the DOH Commissioning Plan

N.B. The draft HSC Performance Management Framework proposes that DOH and PHA officers should have a regular presence at Trust Board meetings to seek assurance that the Trust Board is effectively fulfilling its performance management function.

- **Chief Executive Performance and Accountability Meetings** – held at least midyear and at year end with each Director reporting to the Chief Executive their Directorate's performance against agreed objectives. These bi - annual review meetings focus on the overall performance of each Directorate across the Trust's five corporate themes, namely:

Supporting

- Safety, Quality and Experience
- Service Delivery
- Strategy and Partnership
- People and Culture
- Resources

These **bi - annual review meetings** also include a review, discussion and the provision of updates on each Directorate's performance against their previously agreed performance improvement objectives.

Directorate Performance and Accountability Review meetings

Each Director and each Directorate continues to be responsible for ensuring their Directorate's objectives are fully aligned with the Trust's objectives and that the Directorate's performance is measured and reported on in line with the agreed performance management arrangements and processes. Each Director is responsible for the provision of assurance to the Trust's CEO and Board in line with the accountability arrangements set out above.

With the introduction of collective leadership and divisions the above arrangements are now cascaded to a divisional 'management team' (see Indicator 6 for Structures and reporting arrangements).

Each Director continues to hold overall responsibility for the performance of the Divisions within their Directorate. The use of a scorecard approach is used with formal reporting to the Director by each Division, midyear and end of year as a minimum (and more frequently as determined by the Director). This supports the Director with their Performance and Accountability meeting with the CEO.

Supporting

Our 2019 'As Is' Position for Indicator 4 = Established				
Theme	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 10: Setting objectives	People know what is expected of them and understand how their individual objectives fit the organisation's objectives	Leaders involve people in setting clear and achievable objectives. People are regularly reviewed against these objectives	Stretching individual and team objectives are aligned to the organisation's objectives and performance measures. People take responsibility for monitoring their own performance	People take the lead in setting stretching objectives that support and respond to the organisation's goals and plans for change

Theme 10: Criteria 1: People know what is expected of them and understand how their individual objectives fit the organisation's objectives

Theme 10: Criteria 2: Leaders involve people in setting clear and achievable objectives. People are regularly reviewed against these objectives

Having explained the Trust's approach to making sure the 'Trust's objectives are clear' under Indicator 1, and the accountability and reporting arrangements at HSC and Trust level, this section of the Storyboard describes in more detail the range of approaches the Trust deploys to ensure people know what is expected of them and people understand how their individual objectives fit with the organisation's objectives. This theme illustrates how the Trust works to ensure that all staff have a clear line of sight between their contribution and the Trust's ambition and priorities.

The range of approaches the Trust's uses to align individual contribution with team, service and organisational objectives include:

Supporting



The Trust's Revised Staff Development Review/Appraisal Process

The recently revised Staff Development Review/appraisal process is one of several approaches the Trust uses to align individual and team, service and organisational objectives. The objectives for the appraisal process are twofold – firstly to ensure each member of staff has a ringed – fenced opportunity to meet with their line manager to discuss and agree what is expected from them in aligned performance contribution terms. A second critical part of this conversation is the opportunity to explore and agree prioritised and aligned learning and development needs for each and every member of staff, designed to ensure that each staff member is capable of meeting their agreed performance expectations.

An output from the SDR is the production of an agreed **Personal Development Plan**. This plan contains the individual staff member's agreed learning and development needs for the coming year, the activities planned to meet those needs and the hoped for and expected outcomes and impact from the staff member's involvement in the agreed learning and development activities. (See Indicator 7 for more details).

Following feedback from staff on the need to simplify the SDR process and to support improved recording of SDRs the Trust has recently revised and rolled out its revised SDR process across the Trust. After gathering feedback from staff it was identified that further improvements to our approach and the recording of SDRs could be made. In essence, staff wished to have it simplified.



A review of the paperwork was carried out; which led to the redesign and restructure of the paperwork. These changes enhanced the experience of carrying out SDR with staff talking about 'SDR now being a more structured and meaningful experience'. The Trust is currently implementing a new recording and monitoring process to increase the staff engagement in the SDR process. SDR training for reviewers was redesigned to reflect the new processes and to date **809** staff have attended reviewer training.

From the HSCNI 2015 staff survey

- **76%** of staff confirmed that 'they had agreed clear objectives of work with their managers'.
- The 2015 staff survey also showed a 29% increase from 2012 (58%) to 2015 (87%) of respondents who agreed that their appraisal comprised a Personal Development Plan.
- In 2018 using the IIP 40 questionnaire 74% of the staff who responded said they been involved in setting their objectives with their line manager 72% of the same poll stated that 'their performance was reviewed regularly'.

Supporting

Key Document Staff Development Review Paperwork

The paperwork is an easy to use template for staff development reviews/appraisal conversations. It includes objective setting, feedback, Trust values, Knowledge & Skills Framework as an integral part.



SDR_Process_updated 2018final.pdf

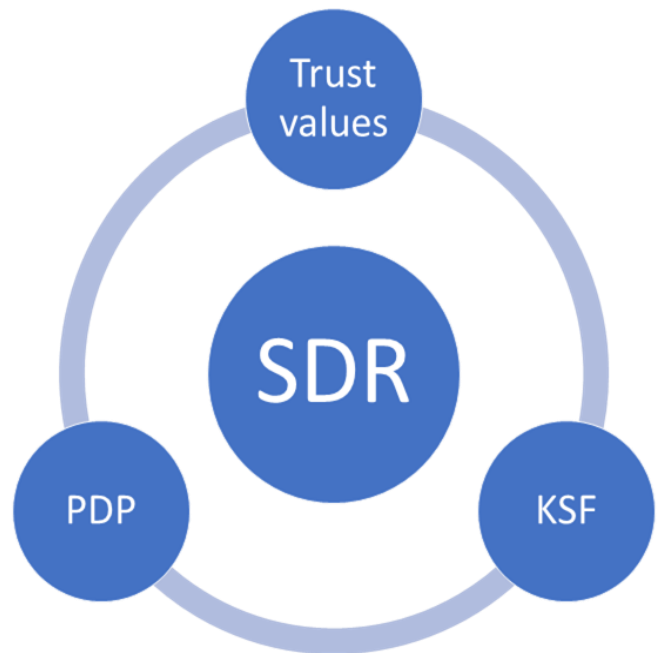


Supporting

The updated and improved **Staff Development Review Process** is aligned with the Trust's Five Corporate Themes, while also encouraging both reviewer and reviewee to have a focus on the future and consider improvements to and the impact of changes on service provision and service delivery.

The revised SDR has been implemented throughout the Trust and integrates three key elements namely the **Knowledge & Skills Framework (KSF)**, **Trust Values**, and **Personal Development Plan (PDP)**.

An integrated approach to Staff Development Review, which brings together the Knowledge and Skills of staff with a robust Personal Development Plan for the delivery of organisational objectives alongside Trust values ensures staff are supported to deliver safe, compassionate patient and client centred care.



It is recognised by the Trust that there is a clear link between staff development and the ability of the organisation to modernise and improve.

Other Trust based approaches to align individual contribution

Other approaches the Trust uses to align individual contribution with team, service and organisational objectives include: -

- Professional Supervision
- Professional Mentoring

These processes are governed by profession specific policies and are usually mandatory as part of the professions' codes. The majority of staff in the Trust are part of a regulated profession, e.g., nursing, medical, social care, AHP.

Supporting

Supervision in Social Work

The quality of supervision, management and leadership is one of the key factors affecting the retention of Social Workers. Social Workers need to be enabled to understand the value of their work; they need to explore the link between feelings, thoughts, and actions and they need to use critical reflection in supervision to frame their practice and their continuing personal and professional development. The manager plays a pivotal role in the quality of the workforce and outcomes for service users.

To underscore the importance of the managerial role, NISCC have the following requirements for those supervising/managing staff:

- Social Workers who are appointed as a first line manager shall undertake learning and development activity in professional supervision and appraisal of staff within two years of appointment to post or within 6 months in Children Services.
- Social Workers who are first line managers or managers in other grades above this shall undertake, within the period of registration, learning and development activities appropriate to their post. These development activities should include professional leadership and management.

The Trust meets the above requirements and reports on compliance in its annual Delegated Statutory Functions report.



The knowledge base of the social work profession has expanded, and the needs of the diverse population staff serve has become ever more complex. Therefore, it is important to the Trust and the SW profession to have assurance that all social workers are equipped with the necessary skills to deliver care, support and interventions which are safe, compassionate and effective. Equally important to the Trust and the Social Work professionals is the responsibility to protect clients and families. For the Belfast Trust supervision is an essential and integral part of the training and continuing education required for the skilful development of professional social workers.

Supervision is used to ensure all staff understand what is expected of them in performance terms and in how they are expected to behave. It protects clients, supports practitioners while ensuring that professional standards and quality services are delivered by competent, safe and compassionate social workers.

Clinical Supervision for Nurses

The three most commonly referred to types of supervision used across the Nursing family are clinical, managerial and professional supervision. The terms used in this area may sometimes overlap and in practical terms, it may sometimes be difficult to separate them from each other. **Managerial supervision** is carried out by a supervisor with authority and accountability for the supervisee (for example Ward Sister with a staff nurse). It provides the opportunity for the supervisor and supervisee to:

- Review the supervisee's performance.
- Set priorities/objectives in line with the organisation's objectives and service needs.
- Identify training and continuing development needs.

Supporting

Clinical supervision provides an opportunity for the supervisor and supervisee to:

- Reflect on and review the supervisee's clinical practice.
- Discuss individual cases in depth.
- Change or modify their practice and identify training and continuing development needs.

Clinical supervision for nurses is about maintaining the professionalism of individual nurses and the nursing profession in working with people who use services.

Professional supervision is often interchangeable with clinical supervision. This term is sometimes used where supervision is carried out by another member of the same profession or group. This can provide staff with the opportunity to:

- Review professional standards.
- Keep up to date with developments in their profession.
- Identify professional training and continuing development needs.
- Ensure that the Supervisee is working within professional codes of conduct and boundaries.

Across the Trust, staff are actively engaged in innovative and meaningful ways to ensure supervision is valued and integrated into day-to-day practice. In 2017/2018, the percentage of Registered Nurses who completed two Supervision sessions was **83%**, an increase of 4% from the previous year.

A continued focus and commitment throughout 2017/18 to support Bank Only Registrants resulted in a significant **42% increase** in compliance of registrants who have completed two supervision sessions.

Supervision in Allied Health Professions

Allied Health Professionals include Physiotherapist, Occupational Therapists, Radiographers, Speech & Language Therapists etc. Once established in post, staff have access to regular supervision in line with regional AHP policy and best practice guidelines. Following a successful probationary period of 6 months staff then complete Staff Development Reviews with their line manager, this is supported by individualised training plans with training needs identified during induction and the staff development review process.



There is a regional **AHP Supervision policy** which determines the need for staff supervision four times per year.

Professional Group	% of staff who have had 4 supervisions sessions per year –
• Dietetics	69%
• Diagnostic Radiography	70%
• Orthoptics	100%
• Occupational Therapy	100%
• Podiatry	100%
• Therapy Radiography	31%
• Speech & Language Therapy	91%
• Physiotherapy	85%

Supporting

Professional leads are asked to report on their professional groupings performance against the 4 Supervision sessions per year when the grouping fell below the 100% compliance target and all leads include proposed actions to address underperformance. Sometimes underperformance is due to absence/illness, maternity leaves etc. There were indications of compliance with up to 3 sessions x yearly supervision and / or assurances that the process was happening but that the documentation required to evidence the process required further work.

Medical Appraisal

The Trust is in the process of fully implementing the new Regional Appraisal System for Doctors and Dentists. An E Learning tool is also being developed.

Appraisal is intended as: *“A positive process of constructive dialogue, in which the doctor or dentist has a formal, structured opportunity to reflect on their practice and consider how their effectiveness might be improved. It should support in the aim of delivering high quality care whilst ensuring safe and effective practise”*.

While the primary purpose of appraisal is developmental, it is also the main evidence source to inform the Responsible Officer’s revalidation recommendation to the General Medical Council.

Appraisal is a process of facilitated self-review supported by information gathered from **all** aspects of a doctor’s work, therefore:

- Demonstrating that they continue to meet the principles and values in *Good Medical Practice*
- Demonstrating that they are working productively and in line with the priorities and requirements of their working environment
- Enhancing the quality of their professional work by planning their personal and professional development

The requirement for Medical Appraisal applies to the following grades:

- Consultants
- Associate Specialists
- Specialty Doctors
- Clinical Academics
- Locums in post over 3 months
- Trainee Grades in service roles eg LAS, TAS, Clinical Fellows
- Retirees returned as locums
- Dental Consultants
- Specialty Dentists
- Dental Officers

Supporting

The graph below shows the completion rate of Medical Appraisal across the Trust:



The graph above shows that the completion rate has consistently surpassed the target over the last five years

Underperformance of Staff

Each professional grouping has a clear definition of underperformance and professional groupings such as Nursing and Doctors have a rigorous and robust process for supporting staff who for whatever reason are underperforming. The Trust has a series of policies and guidelines in place which are well understood and applied when necessary to address underperformance including its '**Doctors in Difficulty**' policy and the regionally agreed **Capability Procedure** and **Disciplinary Procedure**.

Supporting

Team Development Opportunities

The Trust also uses Team Development and Effectiveness Workshops as a well perceived approach to align individual and team objectives. Over the past 3 years, approximately **159 teams** have completed a team development initiative, either facilitated by the HSC Leadership Centre or the HR Learning and Development team.

Examples of the outputs from Teams following their involvement in the Team Development and Effectiveness Framework Workshops included:

- Quality improvement actions plans
- *Visions and objectives in teams aligned to the Trust's ambition for High Performing Teams*
- Engagement & communication actions plans to bolster Collective Leadership

Key Document Team Development and Effectiveness Framework

The Trust has a framework to ensure key organisational priorities are reflected. These interventions empower teams to make decisions collaboratively and learn.



Team Development
framework_revised_1



Supporting

Our 2019 'As Is' Position for Indicator 4 = Established				
Theme	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 11: - Encouraging high performance	Line managers invest time in managing performance and ensure people understand the performance process	Line managers have open and honest conversations with people about their performance	Line managers are highly effective and consistent at supporting high performance and addressing underperformance through effective, constructive and open dialogue	People are expected and actively supported to strive for high performance at all times

Theme 11: Criteria 1: Line managers invest time in managing performance and ensure people understand the performance process

Theme 11: Criteria 2: Line managers have open and honest conversations with people about their performance

As demonstrated under Indicator 1 (Creating transparency and trust and motivating people to deliver the organisation's objectives) above and under Theme 10 Criteria 1 and 2 above, line managers invest time in managing performance and in understanding the performance process.

Practically line managers work to:

- Provide clarity and alignment of individual objectives with the organisation's ambitions, values and priorities through their involvement in the processes described above (see Theme 2.1 and Themes 10.1. 10.2 above)
- Support their people to deliver the team's, service's and organisational priorities (See Theme 1.2 above).
- Through the use of supervision meetings, coaching sessions, team meetings, one – to – one check in and check up (both formal and informal) to track performance against agreed objectives).
- Track and report back on performance against agreed objectives at team and individual levels using performance data which are used to recognise positive performance and/or to improve the performance of the individual/team where appropriate.
- Address underperformance through effective, constructive and open dialogue and feedback.
- Seek and offer timely feedback on an informal and formal basis to staff on their performance.
- Confirm that staff members who are involved in the alignment processes described above such as SDR, supervision, coaching, team meetings, understand the performance process.

Supporting

- Compile annual reports, team performance graphs posted on staff noticeboards, etc to act as a valuable and visible way of providing staff with feedback on the team's achievements over a defined period of time.

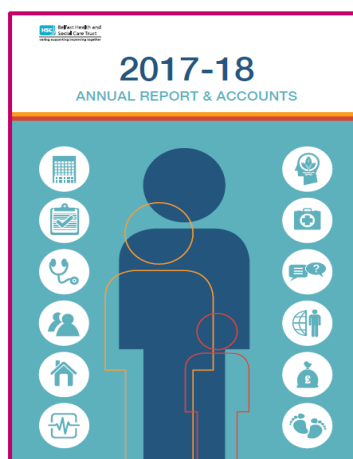
Supporting

Our 2019 'As Is' Position for Indicator 4 = Established				
Theme	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 12: Measuring and assessing performance	People's performance is regularly measured and assessed against objectives. People receive feedback on their performance	People's behaviours are assessed against the organisation's values	Performance data and evidence of behaviours are captured and used effectively to improve the performance of people and the organisation	Giving and seeking timely feedback on an informal basis, engaging in performance discussions and coaching are a core part of the day-to-day running of the organisation

Theme 12: Criteria 1: - People's performance is regularly measured and assessed against objectives. People receive feedback on their performance

Themes 12: Criteria 2: - People's behaviours are assessed against the organisation's values.

The processes described above by which the Trust sets and encourages high performance, are the same processes by which the Trust measures and assesses performance. At Trust level through the Trust's Accountability Arrangements described above and through the production of its Annual Report and its Annual Quality Reports, the Trust sets out in great detail how it has performed in overall terms against its key objectives and improvement objectives.



Key Document

Trust Annual Report 2017-18

The purpose of the Annual Report is to capture a flavour of what the Trust has achieved in the preceding 12 months. It highlights a range of our new services, priorities and sets out the financial position of the Organisation.

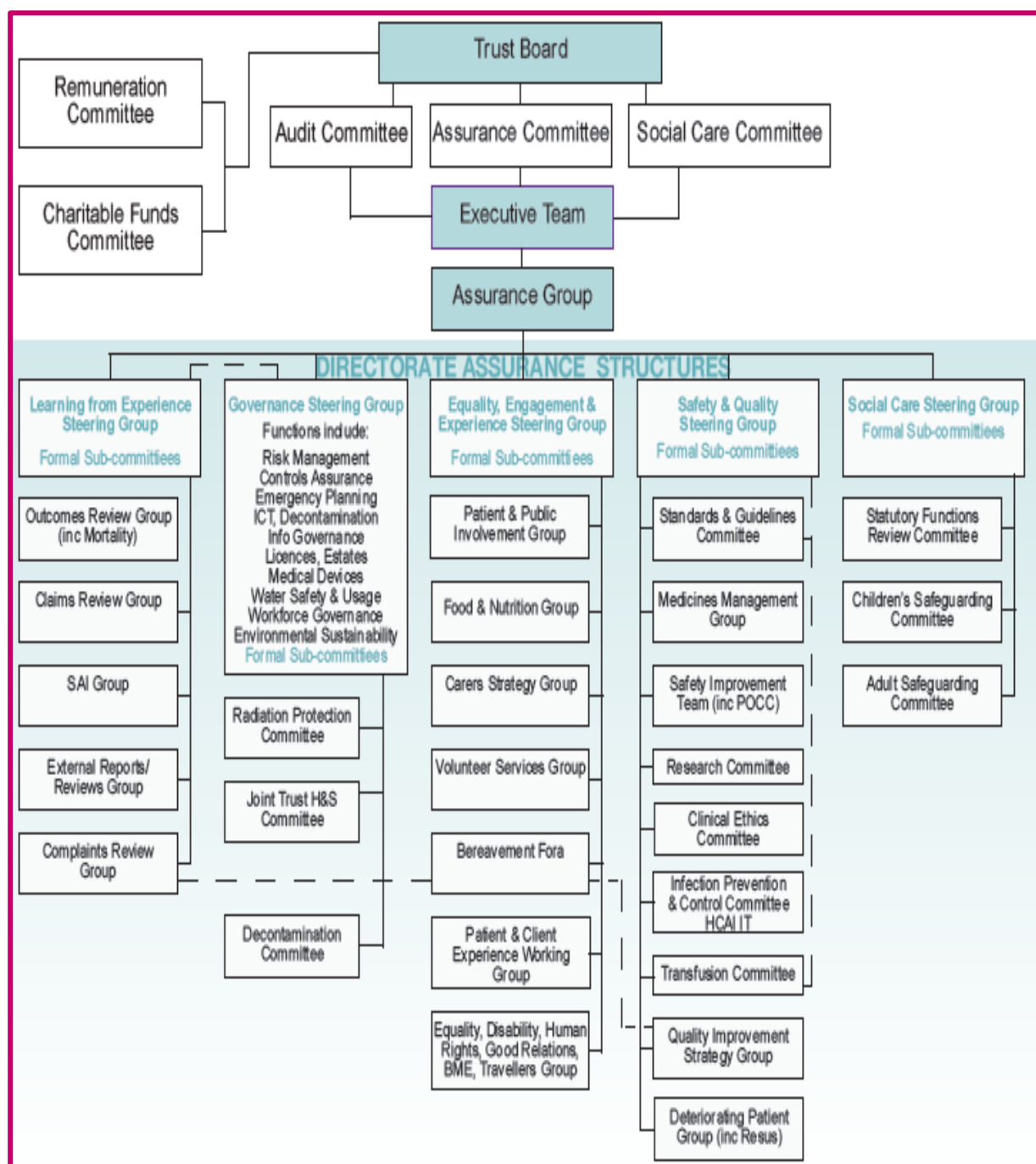


BHSCT Annual
Report and Account

Supporting

The annual report is an effective way, at an organisational level, to show how objectives are understood and how services have been reviewed against these. Similarly, these feed into individual objectives:

The Assurance sub-committee structure is laid out below. Each of these sub – committees are responsible for the delivery of particular work – streams and there is a detailed reporting mechanism from the Assurance Group up to the Executive Team and ultimately up to the Trust's Board. The groups are required to produce regular update reports on progress against their Terms of Reference.



Supporting

Other approaches the Trust, through its staff, use to measure and assess its performance include:

UK and GAIN audits

All Belfast Trust staff are encouraged to participate in regional and national audit projects. Audit is a quality improvement process that seeks to improve patient care and outcomes. It is systematic review of care, comparing current practice against explicit criteria and implementing change where appropriate. It allows quality improvement to take place where it will be most helpful and will improve outcomes for patients.



During 2017/18 Trust staff participated in 19 regional audit projects and 18 national audits. The Guidelines and Audit implementation Network has now been subsumed into the work of the Regulation & Quality Improvement Authority (RQIA).

There were 667 audits carried out by the medical directorate Audit team 1 April 2016-End Jan 2019. Some outcomes were:

- Further work to be done to secure funding for Hysteroscopy and Bx facilities in an Outpatient Clinic.
- Results to be disseminated within Belfast Trust MH directorate results also be presented at Irish college of psychiatrists in early November.
- Nursing staff to be encouraged to complete and insert a HI proforma into the notes at the point of triage.
- Training will continue with a head injury awareness week running within the department on 9th January 2017.
- Outcome was to continue with Kiwi training rather than introducing metal cup vacuum.

Many of our services are licenced or heavily regulated by a myriad of different regulatory bodies. For example, RQIA conduct unannounced inspections of hospital wards and other facilities in our Trust to ensure quality of care. There are other regulatory bodies such as the Medicines and Healthcare products Regulatory Agency (MHRA) which has a role in the production of medicines and use of medical devices in the Trust. Once again the MHRA measure and assess the performance of the Trust in the area of Medicines and Healthcare Products.



RQIA Inspections

The Regulation & Quality Improvement Authority (RQIA) have conducted nearly 40 hospital inspections in the period April 2016 to December 2018:



- Belfast City Hospital – 7
- Mater Infirmary Hospital – 9
- Musgrave Park Hospital – 6
- Royal Victoria Hospital – 8
- Royal Belfast Hospital for Sick Children – 7

Supporting

HSC Internal Audit



**Business Services
Organisation**

The HSC Business Services Organisation also conducts non-clinical audits across the Trust, including Finance and Human Resources and the Trust is required to deliver on and report on a wide basket of Controls Assurance Standard to the DOH on an annual basis.

Internal Audit for Hand Hygiene

The Infection Prevention Control Team carried out 81 independent HH audits during 2017/18. The results of these audits were reported back to the HCAIIT on a quarterly basis. The audit scores ranged from 55% to 100% and the average scores over the quarters were 81% Q1, 88% Q2, 77% Q3 and 79% in Q4. The annual average score was 81%.

Accredited Services



Many services in the Trust go beyond the minimum standards and achieve accredited status for their service.

These 'stretch' objectives indicate high quality services and reinforce the organisation's ambition.

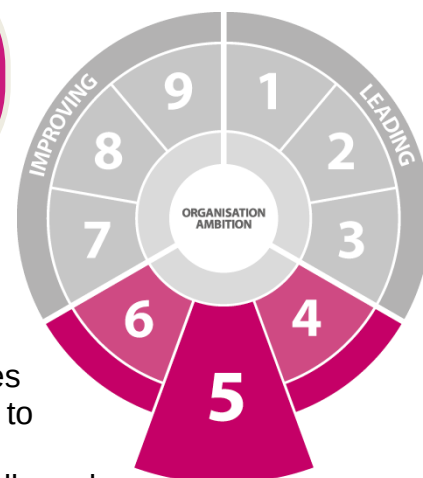
NICE National Institute for Health and Care Excellence

For example, medical laboratories in the Trust have such an accreditation from UKAS. Additionally, Royal Colleges and National Institute for Health & Care Excellence (NICE) set standards for best practice in providing standards which many of our services comply with.



Supporting

RECOGNISING AND REWARDING PERFORMANCE



Overview of this Indicator

This section of the Storyboard will demonstrate how the Trust continues to work to create a culture of appreciation where people are motivated to perform at their best through the development and deployment of approaches to staff recognition and reward which are clear and culturally and public sector appropriate.

Theme 13: Designing an approach to recognition & reward

We will show how the Trust's approach to staff recognition and reward supports the Trust's ambitions, values and priorities.

Theme 14: Adopting a culture of recognition

We will demonstrate the work the Trust continues to undertake to develop a culture of appreciation where people feel valued for the work they do and the contribution they make.

Theme 15: Recognising & rewarding people

We will demonstrate how people are recognised for their behaviour as well as their performance on an informal and formal basis.



Supporting



Indicator 5: Recognising & Rewarding High Performance

Recognition and reward is clear and appropriate, creating a culture of appreciation where people are motivated to perform at their best.

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Designing an approach to recognition and reward	The way the organisation recognises and rewards people supports its objectives	Leaders continually review how the organisation recognises and rewards its people	The approach taken to recognising and rewarding people is flexible and tailored to meet individual motivations	People are involved in designing the organisation's approach to recognising and rewarding people
Adopting a culture of recognition	The organisation has an appropriate and clear approach to recognition and reward.	Individual and team achievements are rewarded and celebrated with financial or non-financial benefits	People feel confident that individual and team achievements are consistently recognised and encouraged across the organisation	There is a culture of appreciation where people feel valued and are recognised for their efforts and performance
Recognising and rewarding people	People know how they are recognised and rewarded and the criteria have been clearly	People are recognised for their behaviour as well as their performance on a formal and informal basis	People are motivated to perform at their best as a result of the approach to recognition and reward	High performing people and teams receive greater financial or non-financial recognition and rewards

Supporting

Our 2019 'As Is' Position for Indicator 5 = Established

Theme	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Designing an approach to recognition and reward	The way the organisation recognises and rewards people supports its objectives	Leaders continually review how the organisation recognises and rewards its people	The approach taken to recognising and rewarding people is flexible and tailored to meet individual motivations	People are involved in designing the organisation's approach to recognising and rewarding people

Theme 13: Criteria 1: The way the organisation recognises and rewards people supports its objectives

Theme 13: Criteria 2: Leaders continually review how the organisation recognises and rewards its people

The Belfast Trust recognises that it cannot become 'a high – performing organisation' without consistently high – performing staff. The Trust recognises that it cannot become 'a top 20% organisation by 2020' without staff who feel appreciated and valued for their efforts and performance. The Trust recognises that it cannot become a 'healthy organisation' unless staff have a positive work experience as there are now clear and well - established links between staff experience and patient outcomes. The higher the levels of satisfaction and commitment that staff report, the higher the levels of satisfaction that patients report. If leaders and managers create positive, supportive environments for staff, where they feel appreciated for the work they do, they in turn create caring, supportive environments and deliver high-quality, safe, compassionate and effective care for patients.



The newly revised **Reward and Recognition Policy** sets out the ways the Trust recognises and rewards its people in support of its objectives. This revised policy is a result of a review of the Trust's practices in the area of staff recognition and reward, as to their appropriateness and effectiveness. The review also took into consideration developments within the Trust in terms of its new ambition, its revised corporate themes (for example the Chairman's Awards will in 2019 be re – categorised to increase awareness of the new corporate themes as well as to embed the new themes by bringing them alive). The revised policy reflects feedback from our last IIP review and ongoing feedback from staff through surveys and IIP Healthchecks. It is important to note that while the Trust's revised policy provides a clarity as to how the Trust will recognise and reward its staff, it is neither exhaustive or narrowly prescriptive. The IIP Assessment Team will hear from Directorate Teams in their presentations as to how they have worked to ensure staff at Directorate level benefit from the Trust based approaches to staff

Supporting

recognition and reward while at the same time hearing about how Directorates have been innovative in their approaches to staff recognition and reward.

The development and deployment of an appropriate and clear approach to recognition and reward supports the Trust in meeting its objectives in several ways.

- It supports the Trust is developing a culture of appreciation where people feel valued and are recognised for their efforts and performance.
- It supports the development of a high performing culture which is at the heart of the Trust's ambitions as well as being at the heart of Indicator 5 of the IIP standard.
- It motivates staff to perform at their best as a result of the feedback, recognition and reward they receive in their roles.
- A clear and appropriate approach to staff recognition and reward has a positive impact on staff recruitment and retention while also positively impacting on staff satisfaction, engagement and motivations levels.
- It affords the Trust an opportunity to acknowledge and celebrate successes and achievements – which is important in getting the right balance between the excellent staff and excellent work that is going on across the Trust 24/7/365 and the need to be courageous in responding to public expectations, concerns and system failures.
- Committing to staff recognition and celebration acts as affirmation of the pressures and difficult and challenging circumstances staff work under on a daily basis, and yet these same staff find ways to deliver better, safer, more person centred care to service users, despite such constraints and pressures. The Trust recognises in its approach to staff reward and recognition the importance of such affirmation.

The Belfast Trust is committed to rewarding and recognising its staff and to ensuring that staff feel valued and appreciated. The Trust's approach to staff recognition and reward is as much bottom - up as it is top-down. It is as much person – driven as it is policy- driven. It is as much spontaneous as it is planned. The approach is both informal and formal, it is both internal and external, it is individual and team based. It attempts to reflect the wide diversity of staff who work across the Trust as the Trust attempts to tailor its responses to meeting individual motivations.

Supporting

Our 2019 'As Is' Position for Indicator 5 = Established

Theme	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 14: Adopting a culture of recognition	The organisation has an appropriate and clear approach to recognition and reward	Individual and team achievements are rewarded and celebrated with financial or non-financial benefits	People feel confident that individual and team achievements are consistently recognised and encouraged across the organisation	There is a culture of appreciation where people feel valued and are recognised for their efforts and performance

Theme 14: Criteria 1: - The organisation has an appropriate and clear approach to recognition and reward

According to Gallup, 65 percent of surveyed employees reported that they received no recognition over the last 12 months for their work. In the same report, 89 percent of employers feel that most employees leave their companies to earn more money. But, most workers who leave their jobs cite lack of employee recognition as a major concern.

<http://www.hrmonline.com.au/section/strategic-hr/10-ways-improve-employee-recognition/>

As a learning organisation and as an organisation for whom recruitment of staff continues to be a major challenge (as it does for the NHS generally) the Belfast Trust acknowledges the importance of staff feeling valued and appreciated. Staff recognition and reward is seen as a key motivation in people joining the Belfast Trust. An equally important reason as to why people choose to stay working with and in the Belfast Trust.

The Trust views it's recently reviewed and revised Reward and Recognition Policy as a key part of its approach to creating a culture of recognition and appreciation that motivates and rewards employees in a way that extends far beyond material incentives.

Steps the Trust continues to take to create a culture of appreciation where people are motivated to perform at their best include: -

- The Trust, through its planning and accountability arrangements (see Indicators 1, 2 and 4), has worked to establish solid criteria for work performance including having a basket of balanced key performance metrics. This supports the organisation, Directorates, Divisions, Services, Teams and individuals in **understanding what constitutes high performance.**

Supporting

- Through the work the Trust has been involved in to **embed its values** across the Trust (see Indicator 2) the Trust continues to see its values and how people live those values and behave as a central part of its approach to staff recognition. For example from 2016 – 18 the **Chairman's Awards** were all 'categorised' against the Trust's core values and a review of how individuals live the Trust's values through their behaviours is an integral part of the SDR process.
- As will be seen in the **'picture celebration gallery'** below and from the Directorate's presentations, staff from all staff groupings, from all levels, are recognised and appreciated for their contribution and achievements. Recognising and rewarding staff from all areas of operations and from across all sites has always been important to the Trust and is now a well – embedded part of the Trust's approach to recognition and reward.
- Fostering a recognition culture where informal feedback is frequently offered.
- The work the Trust and Directorates are involved in aligning their performance with **internal and external performance benchmarks** in support of its ambition to be a top 20% HSC organisation by 2020 supports the provision of feedback on comparative performance to services and teams, feedback which acts as either a positive affirmation of the great work staff are involved in, or as a catalyst for further effort and further improvement e.g. see patient experience surveys and real time feedback.
- **Providing opportunities for advanced training and career development** is also seen as a critical part of the Trust's approach to staff recognition, as supporting career aspirations is a key motivator for many staff. It is also an integral part of the Trust's 'total reward' package, given the constraints on rewards within the public sector.
- **Recognising staff's personal and family circumstances** and offering supportive arrangements including family friendly policies, flexitime etc to support staff in achieving a positive work – life balance. When staff are asked about what they like about working for the Belfast Trust, a common response is the supportive nature of the family friendly policies (See below for more details).
- Recognising the importance of **staff wellbeing** and offering a range of health and wellbeing initiatives that support staff to be 'healthy' such as 'bwell' etc recognises the importance of an organisation whose purpose it is to improve the health and wellbeing of the population it serves supporting the health and wellbeing of its staff.

Providing opportunities for stretch and progression:- In line with 'Indicator 6 Structuring work' and the importance of 'creating interesting work for all employees' the Trust has a positive track record in supporting employees who perform well in their job in taking on

Supporting

- expanded responsibilities and training for job advancement. The numbers of staff who have progressed in their roles and careers is testament to the effectiveness of this approach and supports the Trust with succession planning.
- **Magnify recognition** - While verbal communication is clearly the most effective way to recognise employees, the Trust is also keen to recognise, publicise and celebrate achievements and employee accomplishments across multiple forums such as newsletters, in team meetings, through planned recognition and celebration events – as is demonstrated in the picture gallery below etc.
- **Using technology and social media to publicise accomplishments** – as demonstrated above under Indicator 1 Criteria 2: people don't live in a vacuum in today's environment of instant communications, so the Trust through its various social media platforms has worked effectively to publicise, recognise and celebrate important accomplishments and even human interest items in the Trust's social media forums – 'what matters to staff – matters to the Trust – we want to hear and share your good news stories'.

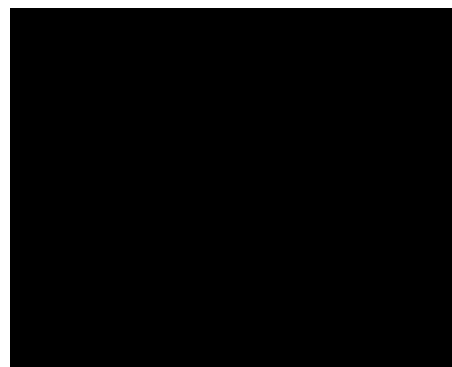
The content and more importantly the picture gallery which follows can only give a flavour of the range and scale of recognition events which take place across the Trust on an ongoing basis. The following are just a flavour of some of the specific ways staff are recognised and rewarded for their contribution.

- **Immediate Recognition** e.g. A "thank-you" for consistent good performance; undertaking special projects; recognition of success nationally/internationally
- **Staff Development Review** - Staff Development Reviews allow line managers to formally and individually acknowledge performance and contribution of staff in achieving individual objectives and in contributing to team /service success.
- **Award Ceremonies** e.g. Chairman's Awards, Learning and Development Awards; Safety Quality Belfast Recognition Event; Recognition and Learning Events are all opportunities for the Trust to acknowledge the great work staff and teams are involved in across the Trust, while also joining with staff and teams in celebrating their efforts and achievement.



Supporting

- **Service Recognition Awards – Long Service Recognition** further recognises the commitment and loyalty of staff who have achieved 25 years' service with an additional one week's annual leave and a certificate of Loyalty signed by the Chief Executive. During the period 01 April 2016 – present 390 staff achieved 25 years long service recognition certificates.
- **Service Recognition Awards** All staff retiring from the Trust receive a letter from the Chief Executive which personally thanks them for their service and recognises the contribution they have made during their career. 396 staff retired after 30 years' service from 01 April 2016-present.
- For staff retiring and who have 30 years' service or more the Trust also provide a **retirement gift** to acknowledge their dedication and long service to the Trust.

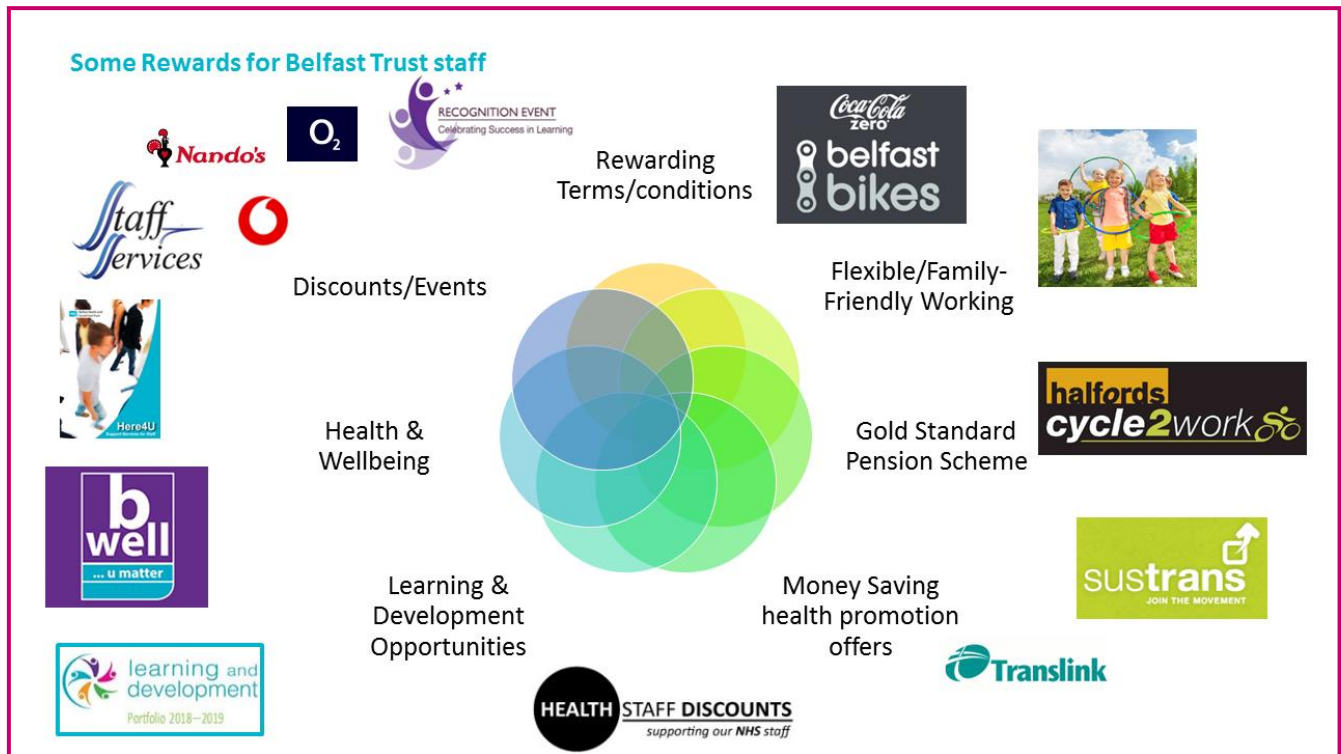


The range of initiatives cited below shows that the approach that the organisation takes to 'reward' is flexible, tailored and works to offer staff access to a range of benefits which allows the Trust to live within the financial constraints all public sector organisations must live within while also acting in accordance with good governance requirements.

- Staff can save 20% discount on the cost of annual bus and train travel with Translink
- Vodafone offer NHS discounts with 15%-30% off all pay monthly SIM only and phone contract deals
- By joining cycle2work with Halfords staff can save up to 42% on the cost of a bike and accessories
- The HSC Pension Scheme is a defined benefit scheme and an important and valuable staff benefit for people working in the health service. Being a member of the HSC Pension Scheme is one of the ways in which staff can prepare financially for their retirement. Both staff and the Trust (who make a substantial payment) contribute towards the cost of the pension.

Supporting

Below is representation of some of the many ways the Trust works to reward staff for the contribution they make:



Supporting

Recognising the importance of a positive 'Work Life Balance' to staff

As part of the BHSCT's commitment to becoming an employer of choice the Trust is proud of the work it has and continues to do in supporting work-life balance which meets the needs of the Trust and its people. For an organisation for whom **77%** of the workforce are female and **40%** are less than full time, and many with caring responsibilities, supporting the efforts of employees to positively split and balance their time and energy between work and other important aspects of their lives is self-evident. The Trust believes that its commitment to and positive track record in the area of family friendly policies and practices is a key part of its approach to recruiting and retaining talented staff.

BHSCT Belfast Health and Social Care Trust	
Contents	Pages
Work Life Balance Flexible Working Cover Sheet	1- 4
Information Pack	6-13
Application Form - Flexible Working	14-15
Sample Letters	16-20
Guidelines for Managers and Staff	21-27
Policies	
Compressed Working Policy	28-31
Employment Break Policy	32-38
Flexi Time Policy	39-46
Flexible Retirement Policy	47-52
Home Working/Teleworking Policy	53-73
Job Sharing Policy	74-78
Part-Time Working	79-82
Term Time Policy	83-88

Our work-life balance initiatives are not just nice additions to the range of benefits the Trust offers staff who join and stay with the Trust; they have proven to be one of the most important and valued investments the Trust makes in its employees and have been a positive and powerful recruitment and retention tool. This is essential in a sector where recruiting and retaining staff is always going to be a challenge.

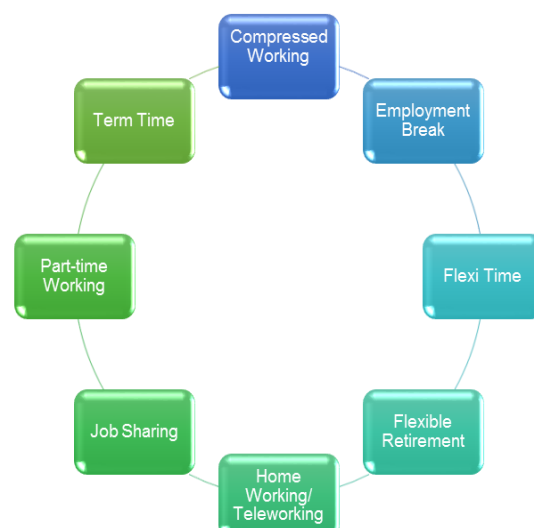
The Trust has worked hard to customise its approach to work – life balance to reflect the performance needs of the Trust and the personal needs of its staff. The Trust's experience has been that supporting work – life balance needs has positively impacted on recruitment and retention, employee engagement and productivity and a feeling amongst staff that they are recognised and valued as a person with outside demands and needs.

The following is an overview of the strategies, approaches the Trust has in place and the actions the Trust continues to take to support work – life balance which meets the needs of the organisation and its people in a way which allows the Trust to deliver on its vision, mission and priorities.

The Trust offers a wide range of 'Flexible Working' Arrangements

The provision of family friendly policies and other initiatives enable staff to balance both work and home commitments and improve their working lives.

There are eight work-life balance policies which staff can avail of:



Supporting

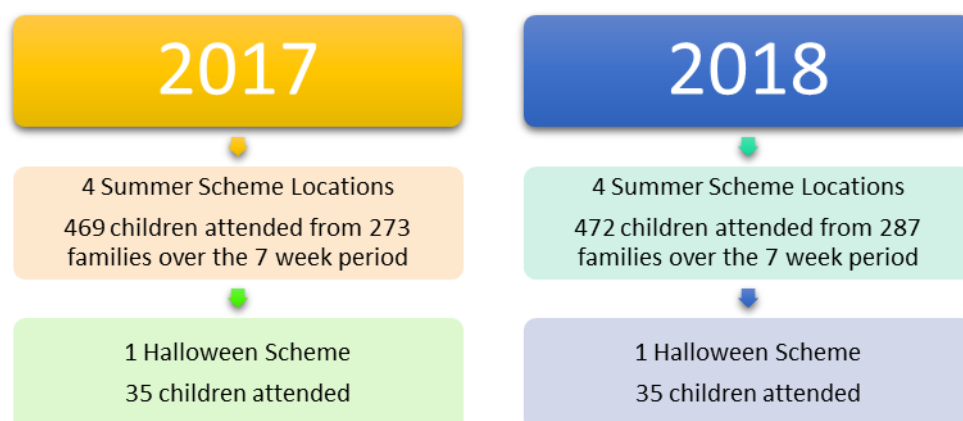
In 2017/18 a total of **1588** work-life balance applications were made, with a **78%** approval rate. For 2018/19, **1264** applications have been received to date, with a **77%** approval rate.

The Trust promotes its flexible working and work-life balance policies via Corporate Welcome, the 'bwell' website, the Hub, health fairs, HR Drop in Clinics and at a wide range of training programmes for managers and staff.

Recognising the importance of support to families during summer and other Breaks

The Trust's Childcare Schemes support staff with childcare needs during the summer holidays and Hallowe'en half term break.

Due to demand for places, a 4th location for the Summer Scheme was added in 2017. The below statistics illustrate the rising demands for the Childcare Scheme in both the Summer and Halloween, as well as the positive feedback received.



Following an evaluation of the 2018 **Summer Scheme** results indicate that:

- 75% of respondents had used the scheme previously
- 99% agreed the scheme was value for money
- 96% confirmed it was sufficiently flexible to meet their childcare needs
- 97% rated the overall scheme as excellent/ very good
- 98% of respondents strongly agreed/ agreed that the scheme provided by the Trust enabled them to balance their work and family responsibilities
- Only 2% of respondents did not intend to use the scheme next year

Supporting

Congratulations to all the team. My 2 absolutely loved the scheme in Methody and are looking forward to next summer already.
(August, 2018)

Super organisation and hard work from your team who go the extra mile every year to ensure Summer Scheme runs smoothly
(August, 2018)

HR Improving Working Lives, and her team on their successful organising and management of staff and children for the 2018 Belfast Trust Summer Scheme.
(August, 2018)

Following the **Halloween Scheme**, the following feedback was provided:

- 100% of Parents confirmed that providing a Halloween Childcare Scheme enabled them to balance their work and family more effectively.
- 95% stated that they were able to work their usual hours.
- 80% of parents said that the Halloween Childcare Scheme ensured that they did not have to take any unpaid leave or apply for term time.
- 91% of Parents said that the Halloween Childcare Scheme meant that they could use annual leave for a reason other than for childcare.

Recognising the importance of supporting staff with childcare costs

The Trust works in partnership with Employers for Childcare to offer a number of benefits to staff. On average, in 2018/19, the Trust has provided childcare vouchers for 1110 staff per month.



The total amount paid to Employer for Childcare for 2018:

Jan 18	£10784.72
Feb 18	£10902.32
Mar 18	£11500.08
Apr 18	£11478.72
May 18	£11338.24
June 18	£11195.83
July 18	£11088.61
Aug 18	£10821.28
Sep 18	£11529.22
Oct 18	£11216.97
Nov 18	£10969.67
Dec 18	£10830.82
TOTAL	£133656.48

Additionally, staff can avail of the Employers for Childcare Family Benefits Advice Service. This is a free, impartial and confidential service for parents to help maximise income and inform them on their rights and entitlements.

Supporting

Recognising the need for information Maternity Information Sessions

Maternity Information Sessions are held bi-annually and are open to all female members of staff within the Trust who are pregnant or who are interested in finding out more regarding maternity related issues and regulations. The session is facilitated by members of the Human Resources and Health Promotion teams. The aim of the session is to provide information to staff on:

- Maternity leave entitlements
- Paternity leave entitlements
- Shared Parental Leave
- Flexible Working policies
- Physical activity
- Smoking cessation

The sessions are scheduled for different hospital sites and the 2 sessions in 2018 were attended by **48** members of staff.

Recognising that some of our staff may experience Domestic Abuse and/or they may know someone who does

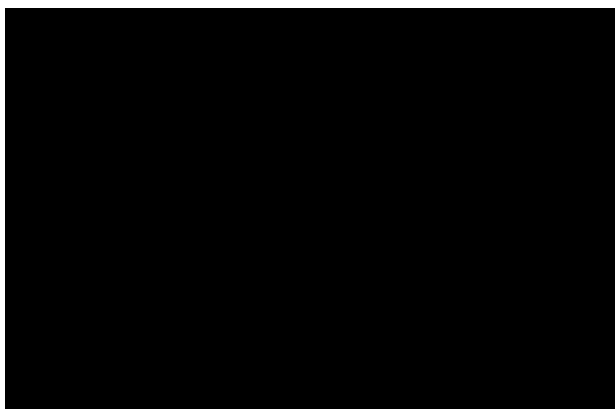
Statistics indicate that 1 in 5 women in Ireland who have been in a relationship have been abused by a current or former partner. While domestic abuse is not confined to females, it is probable that with a workforce of 20,000 plus staff, that some of the Trust's staff may be included in such statistics.

The Domestic Abuse Support Service consists of a range of fully trained staff from a wide range of disciplines and across the geographical spread of Belfast Trust and from different service and corporate groups who can offer emotional support and practical information to anyone suffering domestic abuse.

While the uptake of the service has been low, it has made a significant difference to many of those who have come forward. In December 2018 the Trust celebrated the 10th anniversary of its domestic abuse service for staff and the services event launched its revised Domestic and Sexual Abuse Workplace Policy on this terrific milestone in its history. This was attended by the CEO, with staff who are Domestic Abuse Support Officers being recognised for their contribution to this important service.



Supporting



The Trust also supports Women's Aid "Silent Night – Violent Night" Christmas campaign, with staff donating gifts, clothes, toiletries, toys and cash donations. In 2018, the Trust broadened out its campaign to include a collection for the Welcome Centre to include people who are homeless for a variety of reasons. The men and women in the Welcome Centre were gifted with warm socks, hats, toiletries and confectionary.

Recognising the importance of living our values and our purpose – supporting our staff's wellbeing B well



The Trust's Employee Health and Wellbeing Strategy supports the Trust's Corporate Management Plan (2018-2023) and the Trust's People Strategy of "caring, supporting, improving, together", where the Trust's people are at the core of everything we do for the benefit of the communities we serve. The Trust aspires to create a culture where health and wellbeing becomes a priority for its diverse workforce and which in turn supports the Trust in realising its overarching corporate OD objectives of Safety & Quality, Research & Innovation and Collective Leadership.



Final Draft b well Strategy August 201



Framework for Staff With a Caring Role.

The demands of reconciling work and care for adult family members are becoming increasingly important. According to 2011 Census data, one in nine workers in the UK has informal caring responsibilities. Eighty per cent of UK carers are of working age, and nearly half undertake paid work as well as providing unpaid care.

For many individuals, reconciling work and care is difficult; over a quarter of carers of working age report that caring responsibilities affect their ability to take up or remain in employment. Over two million people have given up work at some point to care for family, and three million have reduced working hours.

The Carers Framework Strategy supports the Trust's Corporate Management Plan (2018-23) and the Trust's People Strategy of "caring, supporting, improving, together", where our people are at the core of everything we do for the benefit of the communities we serve. We aim to ensure that a culture of health and wellbeing becomes a priority for our diverse workforce and supports our five corporate themes.



Supporting

As a Trust we have a well-established Health and Wellbeing structure in place. Through a collaborative and partnership approach, across services and with trade unions and external stakeholders, we have a significant number of key policies, support services and initiatives to support employee health and wellbeing: (see below). The range of supports fall into three distinct categories namely: Policies and Guideline, Provision of Support Services, Roll - out of Initiatives (see below)



The Trust's **bwell app** and **website** provides a suite of employee health and wellbeing supports. These two interactive tools for staff are free of charge and can be accessed on any smart phone or pc in any location, internal or external to the Trust.

<http://www.bwellbelfast.hscni.net/>

Here4U Activities and Events



Here4U is a health and wellbeing initiative for Trust staff designed to give staff the opportunity for exercise, relaxation and enjoyment. A range of extensive free activities and events are available to staff, to address physical, emotional and mental health and wellbeing.

Supporting

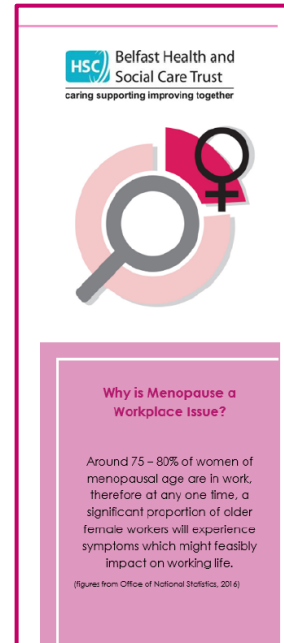
In 2018, **535** staff took part in 23 different activities across the Trust. Ad hoc sessions were also organised on a range of topics throughout 2018, including:

- Two sessions on Chronic Pain held on 5 October 2018 attended by 22 staff.
- Type 2 diabetes on 29 October 2018 attended by 30 staff
- Financial wellbeing on 8 November attended by 18 staff

Menopause Leaflet

According to the Office of National Statistics (2016), 75-80% of women of menopausal age are in work. Therefore, in supporting our staff during this normal and natural life stage, the Trust has developed a leaflet which:

- Outlines the symptoms of the menopause
- Provides advice for staff and managers in managing symptoms during work; and
- Signposts to additional sources of support and guidance.



Health Fairs & HR Drop In Clinics

A poster for 'DROP-IN CLINICS FOR STAFF & MANAGERS'. It lists various HR topics on the left: Childcare Scheme, Attendance Management, Terms & Conditions, Equality & Diversity, Special Leave, Paternity Leave, Maternity Leave, Work Life Balance, Health & Wellbeing, Pension/Retirement, and Employee Support Services. The central text says 'Meet representatives from Human Resource Teams and get your questions answered'. On the right, it lists four drop-in sessions: Shankill W&T Centre - Atrium (Wednesday 14 February 2018, 12-2pm), ROYAL VICTORIA HOSPITAL - Main Foyer (Thursday 15 February 2018, 12-2pm), Knockbreda Centre, 3rd Floor Staff Canteen Area (Tuesday 20 February 2018, 12-2pm), and Arches W&T Centre - Atrium (Tuesday 20 March 2018, 12-2pm). At the bottom, it lists Beechall (Staff Kitchen, Level 4) on Wednesday 21 March 2018, 12-2pm.

HR Drop in Clinics took place across a range of Trust venues in 2018, aimed at making HR and information about terms, conditions and Trust policies more accessible to both staff, managers and trade union representatives. Staff from a number of HR Teams attend, providing advice and guidance on a variety of HR policies and employment related queries.

Supporting

Since 2015, over **1400** members of staff have attended a Health Fair. In 2017/18, eight fairs were arranged, with over **505** staff members attending. Thus far in 2018/19, 4 fairs have been attended by over **240** staff members. The Fairs provide a one-stop-shop for staff to get the answers to the following questions (and more!):



- When can I retire?
- How can I give up smoking?
- How many units of alcohol should I drink per week?
- Do I eat too much?

Theme 14: Criteria 2: - Individual and team achievements are rewarded and celebrated with financial or non-financial benefits

Recognition of Learning Achievement

The Trust has a long and proud record and tradition of investing in and celebrating learning and development achievements. The Trust is committed to the continuous development of its people to ensure each person accessing Trust services has a positive experience and each person is provided with safe, compassionate and effective care at all times. Undertaking and successfully completing a program of studies is a source of pride for the individuals concerned and their families, as well as being something the Trust takes great pride in. “Recognition of Learning” events take place regularly throughout the Belfast Trust. Below is just a flavour of some of these celebration of learning achievements events and awards.

Nurse Mentor Celebration Event

The BHSCT Practice Education Team Annual Mentor Celebration Event was held in October 2018. Executive Director of Nursing, [REDACTED] gave the keynote address before presenting certificates to the mentors and sign off mentors who successfully completed the programmes. The Nursing Team would like to congratulate all participants who ‘graduated’.

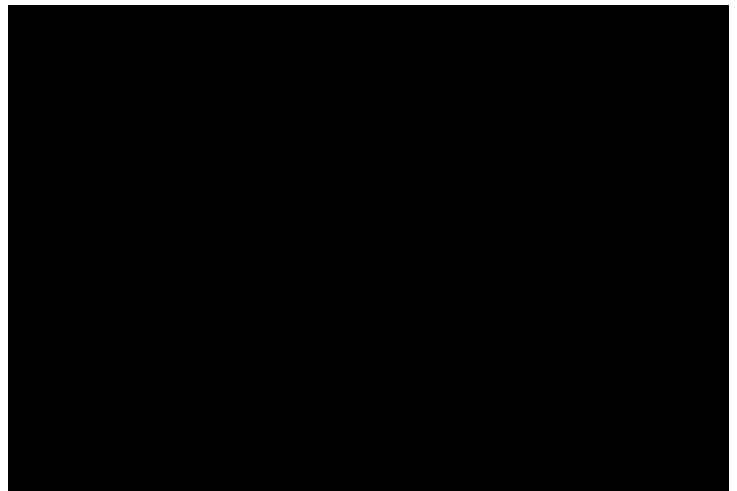
Key Facts:

- **306** registered nursing staff have completed the Regional Mentorship Preparation Programme
- **64** registered nursing staff progressed to become signed off mentors to support management and specialist practice students
- **1797** nursing staff have had mentorship annual updates

Supporting

10th Anniversary Practice Education Team (PET) in Nursing

2018 marked both the ten year anniversary of the Standards to Support Learning and Assessment in Practice and also the establishment of the Practice Education Team to implement the Standards. In recognition, each member of the PET nominated an area or mentor, who they felt had consistently provided excellent support to students over the last ten years. Those nominated were presented with a special recognition award at the recent celebration event.



Celebration of Nursing and Midwifery:

The Trust held a Nursing and Midwifery celebration event in March 2018 with over 150 staff in attendance. Feedback from attendees and celebrants was very positive and included such comments as:

“Loved this celebration. It makes me feel I am part of something positive & worthwhile. I felt motivated to keep going on”

“The day was extremely well organised and I enjoyed all of the speakers. It definitely makes me proud to work in the Belfast Trust”

88% gave an excellent rating of their overall experience of the celebration

Belfast Health & Social Care Trust Celebrating Nursing & Midwifery Friday, 9 th March 2018 – Riddell Hall, Belfast PROGRAMME	
8.30 am – 9.00 am	Registration and refreshments
9.00 am – 9.10 am	Welcome & Overview
9.10 am – 9.20 am	Chief Executive Address
9.20 am – 9.50 am	Enabling Professionalism in Nursing & Midwifery Practice
9.50 am – 10.00 am	Dress for Success
10.00 am – 10.10 am	Freedom & Hope
10.10 am – 10.20 am	My Journey
10.20 am – 10.30 am	Refreshments, Abstract Poster viewing and b
10.30 am – 10.50 am	Keynote Address: My Leadership Journey & the Development of Nurse Leaders around the World
10.50 am – 11.35 am	Celebrating Art
11.35 am – 11.45 am	SMART Pack
11.45 am – 11.55 pm	Support our Future Patients on Cancer Clinical Trials
11.55 pm – 12.05 pm	Jean's Journey
12.05 pm – 12.15 pm	12.15 pm – 1.35 pm Lunch, Abstract Poster viewing and b well Fa
1.35 pm – 2.35 pm	Guest Speaker: Effective, Mindful Communication: A fun workshop on how to use what you've got, to get what you want!
2.35 pm – 3.05 pm	The Strategic Approach to Patient Experience Going Forward
3.05 pm – 3.15 pm	Supporting Progress – District Nurses Journey
3.15 pm – 3.25 pm	Nurse Led Telephone Triage



Supporting

Celebration of Nursing: Nurses Deserve an Oscar Nomination

“It’s my humble opinion that nurses deserve an Oscar nomination. After all, it’s a symbol of excellence and distinction. Without a camera rolling, nurses stand on the battle lines of prevention, treatment and recovery. Day in and day out, a nurse holds the hand of a patient to offer hope, to encourage faith, to assure safety. From bringing new life into the world, to emergency codes, to end of life palliative care, a nurse is there to see it through”

██████████, CEO

Unscheduled and Acute Care	
CELEBRATION OF NURSING	
Knockbracken Hall	
21 st September 2017	
"The Nursing Oscars"	
12:00-13:30	Lunch & Visit Stands
13:30-13:35	Welcome
13:35-13:45	Message from CEO 'The Belfast Experience' (video)
13:45-14:45	"The Psychology of Success and Performance"
14:45-15:30	Commissioned Courses – Certificate Presentations BSc Hons Specialist Practice, Short Courses, Stand-alone Modules & Specific bespoke courses.
15:30-16:15	Award Presentations
	Ward Sister/Charge Nurse of the Year
	Deputy Sister/Deputy Charge Nurse of the Year
	Specialist Nurse of the Year
	Mentor of the Year
	Nursing Auxiliary /HCSW of the Year
16:15	Raffle
16:30	Final address & Close

Supporting

2016 & 2018 Learning Recognition event

The 2018 recognition event for HR Learning & Development programmes took place in Girdwood Community Hub welcoming more than 150 (100 in 2016) attendees included managers, external representatives and of course, our recognised staff in attendance.



Key Document

Recognition of Learning Event 2018 Newsletter

This online newsletter recognised each achiever who attained a qualification through the HR Learning & Development team.

[Click Link](#)



The Belfast Trust is committed to developing a community of leaders and supporting staff to ensure they have the opportunity to demonstrate leadership qualities and reach their full potential. We have developed a suite of ILM qualifications ranging from Level 2 through to Level 5 that are focused on culture, values and behaviours, continuous improvement, collaborative working and further developing capability.

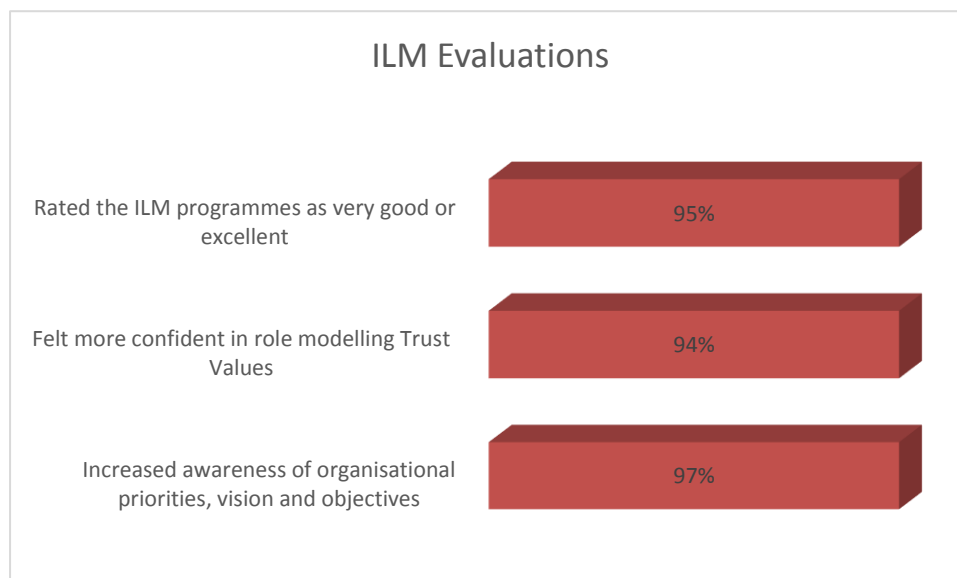
411 Trust staff have completed an **ILM** course since 2016.

Our HR Learning and Development offering combines formal learning with practical application on the job, designed in line with the 70:20:10 model for learning, leading to an accredited qualification through the Institute of Leadership and Management. These qualifications allow participants to develop skills and capabilities that ensure Belfast Trust have the right people at the right time, for the right roles.

Qualification	Participants
ILM Level 2 – New	106
ILM Level 3	111
ILM Level 4 – New	80
ILM Level 5	114

Supporting

The chart below shows a summary of ILM evaluation feedback:



Learners have fed back that:

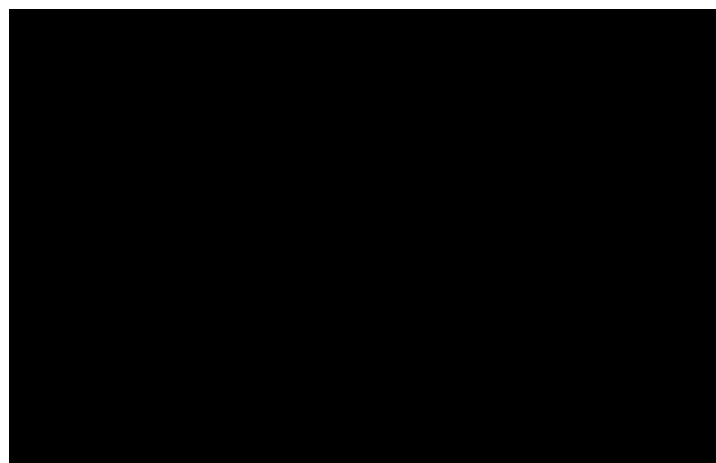
"I have now undertaken new courses to give me a greater knowledge of improving people skills, leadership skills, managing performance and getting the best out of underperforming staff."

"I now feel more confident taking on challenges and encouraging others to try new approaches. I understand the change management process and can see why previous changes have not worked! I am excited about trying out new innovative approaches and engaging my team to do the same!"

There is a persistent focus on continuous improvement within learning and development. All our ILM courses are built around the 70:20:10 mode of learning which has helped to create a culture of continuous learning through various mediums.

Social Care Vocational Training Team held their 16th Awards Ceremony in Belfast Castle

On Friday 7th December 2018, Belfast Trust's Vocational Training Team held their 16th Awards Ceremony in Belfast Castle. This was a celebration of **101** Social Care Workers receiving their RQF [Regulated Qualifications Framework] Diploma in Health & Social Care at Levels 2, 3, 4 and 5. "We were delighted that they could acknowledge staff achievements and present the awards".



Supporting

Our 2019 'As Is' Position for Indicator 5 = Established

Theme	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 15:- Recognising and rewarding people	People know how they are recognised and rewarded and the criteria have been clearly communicated	People are recognised for their behaviour as well as their performance on a formal and informal basis	People are motivated to perform at their best as a result of the approach to recognition and reward	High performing people and teams receive greater financial or non-financial recognition and rewards

Theme 15; Criteria 1: People know how they are recognised and rewarded and the criteria have been clearly communicated

Theme 15: Criteria 2: People are recognised for their behaviour as well as their performance on a formal and informal basis

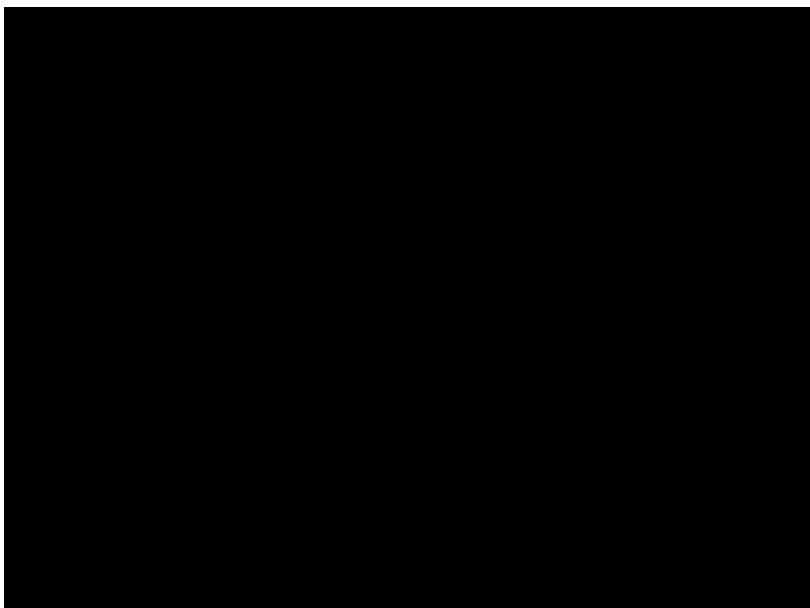
In the IIP Healthchecks carried out across the Trust in 2018 the majority of staff were able to explain how they are recognised and rewarded and they understood the criteria that is being used to define and communicate performance expectations – both performance and behaviours.

In the same IIP Healthchecks a majority of staff were able to explain and provide example of how they have been recognised for their behaviour as well as their performance on a formal and informal basis. The picture gallery below gives a flavour of some of the recognition and celebration events the Trust has been supported over the last year or so. The gallery also highlights the continuing success of Trust staff in achieving Awards and external recognition for the excellence of their work and that of their teams and services.

Supporting

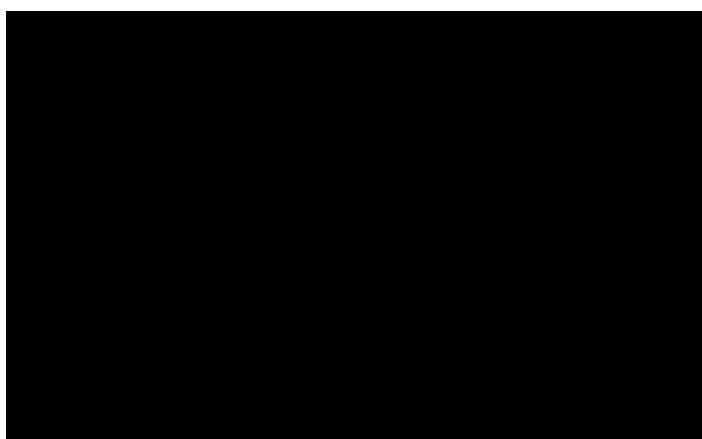
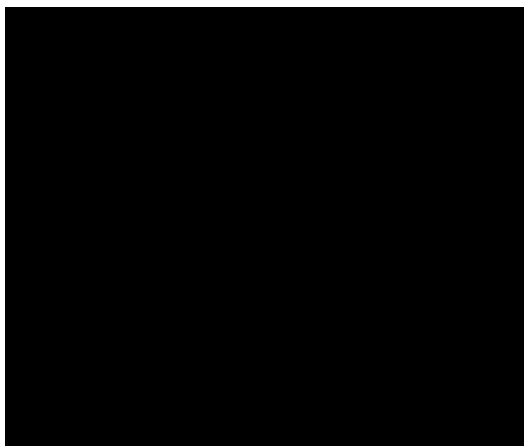
Advancing Healthcare Awards - What Can My Child See?

██████████ and The Neuro-Ophthalmic Visual Impairment Clinic Team (NOVIC), who won their category 'The Macmillan Award for Innovation in Service Redesign to Improve Patient Care', at November's Advancing Healthcare Awards NI 2018.



Advancing Healthcare Awards - Moonlight to Twilight

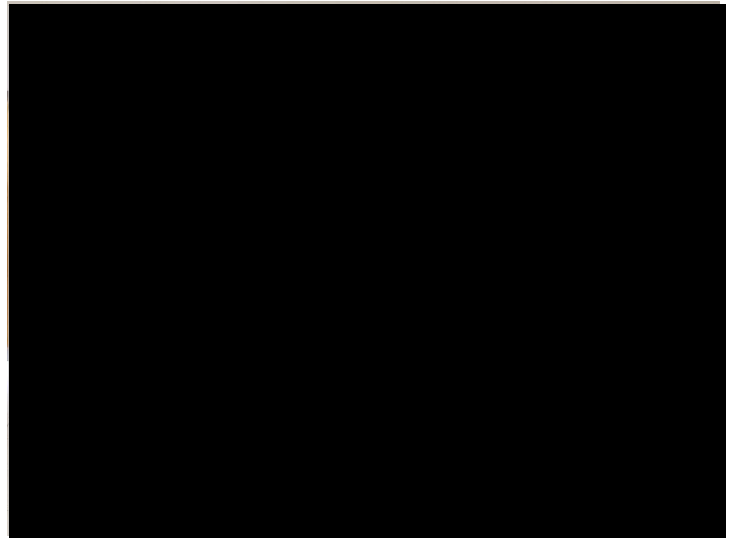
██████████ (ASM Physiotherapy) and ██████████ (Team Lead Physiotherapy) and Team who were shortlisted for their project 'Moonlight to Twilight' at the Advancing Healthcare Awards NI 2018.



Supporting

Advancing Healthcare Awards - Neonatal AHPs Aiding Holistic Partnerships

██████████ and ██████████, who along with colleagues from the PHA and other Trusts, won two awards at the recent Advancing Healthcare Awards NI 2018.



Chairman's Awards 2018

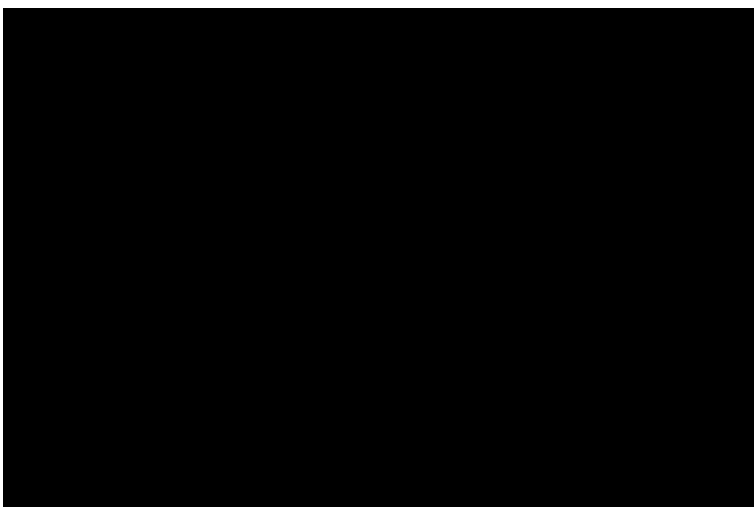
A glittering awards dinner was held in Belfast City Hall where the winners of the 2018 Chairman's Awards were announced. This year the Trust had an incredible 162 entries, the highest number of submissions ever, reflecting the outstanding work happening across all services in Belfast Trust.



MacMillan Professionals Excellence Award

07/11/2018 11:00

██████████ a Macmillan Work Support and Vocational Rehabilitation Project Manager in Belfast Trust, has been shortlisted for a Macmillan Professionals Excellence Award.



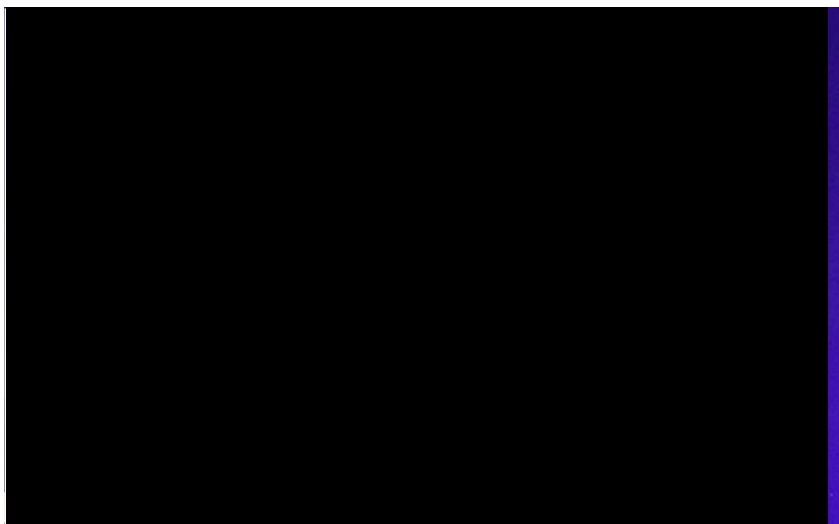
Supporting

Safetember - Chairman's Awards Celebration Events

During Safetember there were two celebration events to showcase some of the excellent improvement work that staff are carrying out throughout the Trust. Some of the Chairman's awards entrants from 2017 will be presenting their improvement work to the rest of the Trust.

IRMS Lifetime Achievement Award

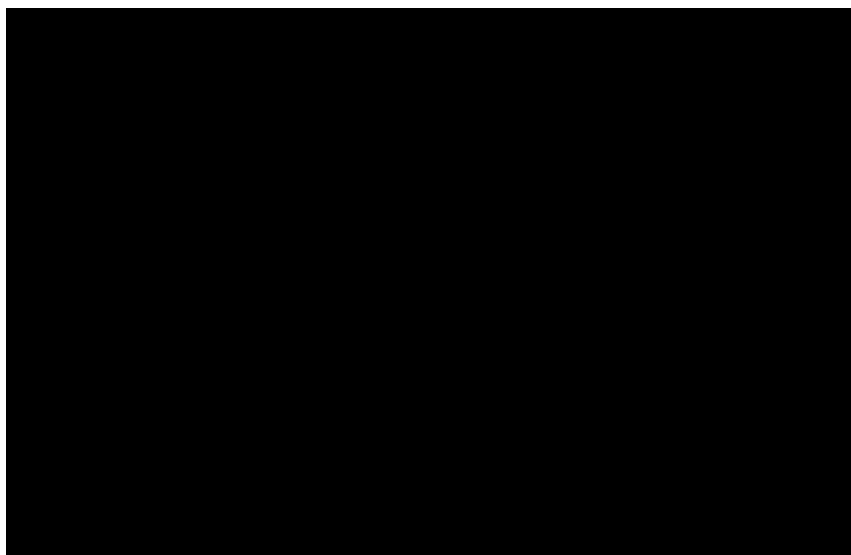
██████████, General Manager Health & Social Care Records has been awarded the prestigious Lifetime Achievement Award through the Information Records Management Society (IRMS), at their Annual Conference.



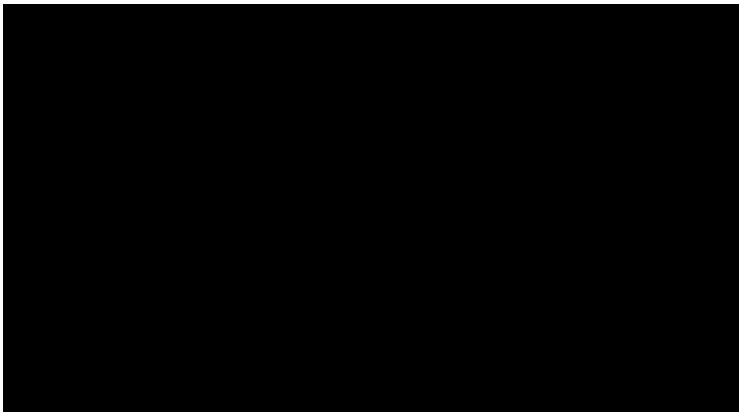
HSJ Patient Safety Awards

Those delivering excellence in patient care and safety were honoured at the 2018 Patient Safety Awards, which recognise and reward outstanding practice in patient safety.

Belfast Trust entered the Cancer Category with the project 'Improving the safety of chemotherapy prescribing through implementation of a standardised electronic assessment proforma'...and won.



Supporting

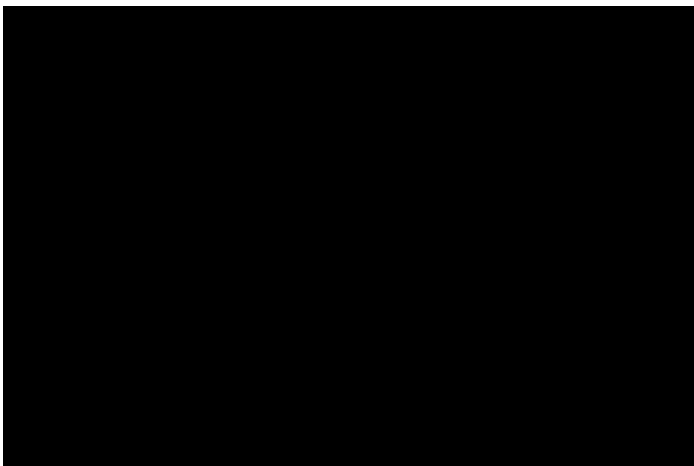


Iris Colvin Lifetime Achievement Award for Health

██████████ received the Iris Colvin Lifetime Achievement Award for Health, presented by the Women's Forum NI on 21 April 2018 at Belfast City Hall.

MRI app picks up Innovation in Healthcare Science award

██████████, a Clinical Scientist with Belfast Trust, won a major award for co-developing a free Virtual Reality app that prepares children for their MRI scan.



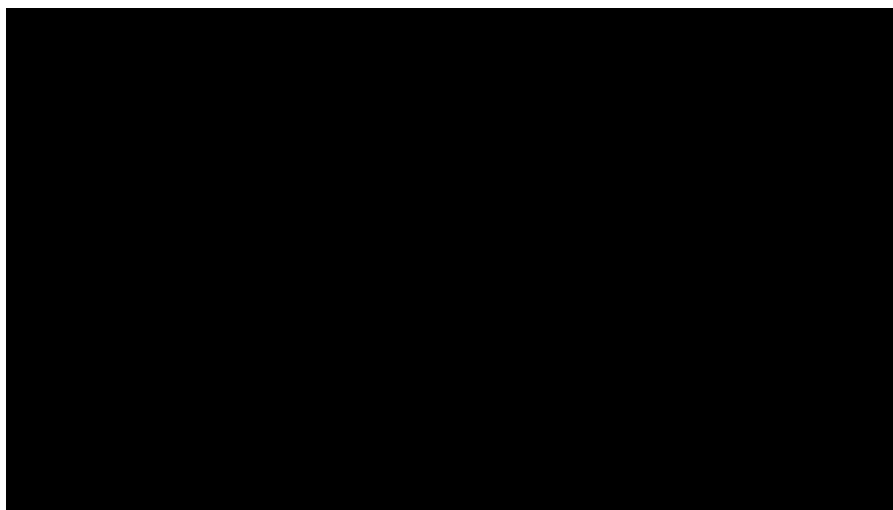
Trust wins 'Best Gender Initiative' award

Belfast Trust has won the 'Northern Ireland Equality and Diversity Awards 2018' for 'Best Gender Initiative' and highly commended for 'Best Disability Initiative'.

Supporting

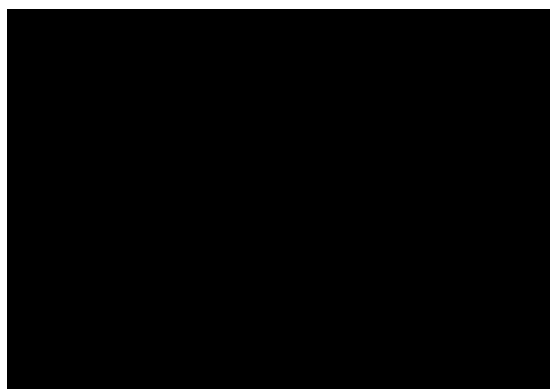
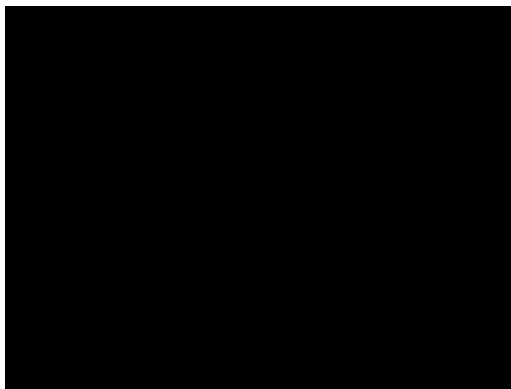
Children's MRI app wins healthcare award

A virtual reality app for children who need an MRI scan scooped a prestigious honour at the Northern Ireland Healthcare Awards this week.



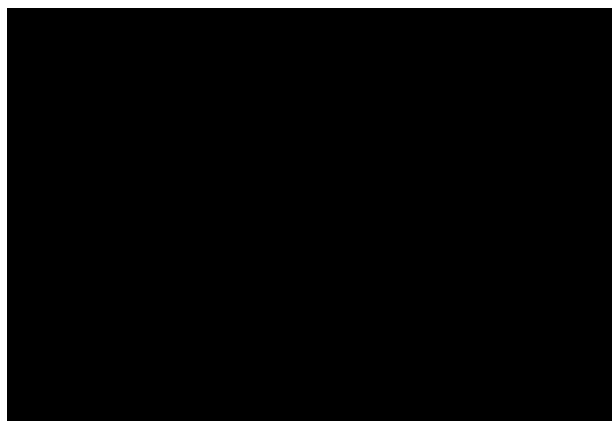
Diabetes projects Shortlisted for healthcare awards

Two trust diabetes projects have been shortlisted for the diabetes project of the year section of the prestigious Northern Ireland Healthcare Awards. This award is open to primary and secondary care throughout Northern Ireland and the shortlisting is recognition of the progressive work by our diabetes service.



Block Room wins Radox Healthcare Award

The Belfast Block Room at Musgrave Park Hospital has won the Innovation Award at the Radox Health Healthcare Awards 2018.



Supporting

World Habitat Awards

Hemsworth Court, a specialist housing development for people with dementia and cognitive impairment, provided by Radius Housing in partnership with the Belfast Trust who manage and deliver the service, was the only UK finalist.

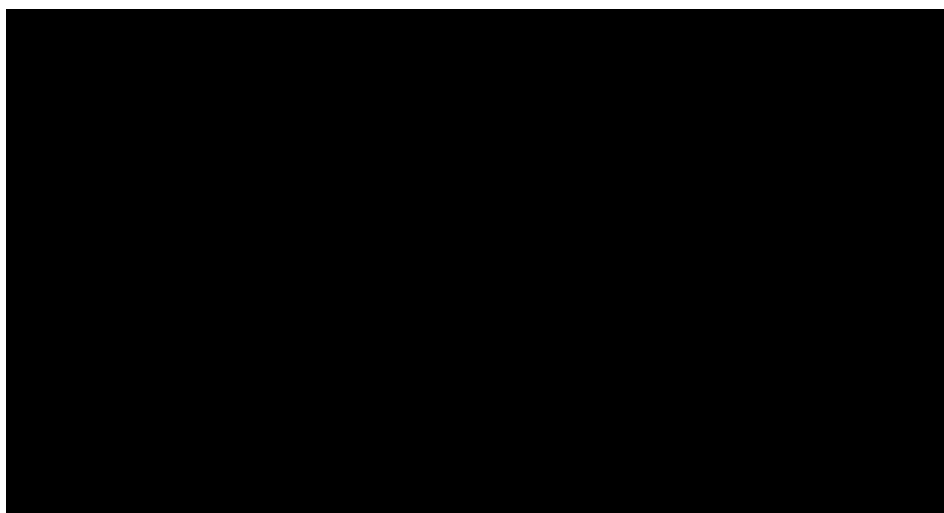


Celebrating staff at Chairman's Awards 2017

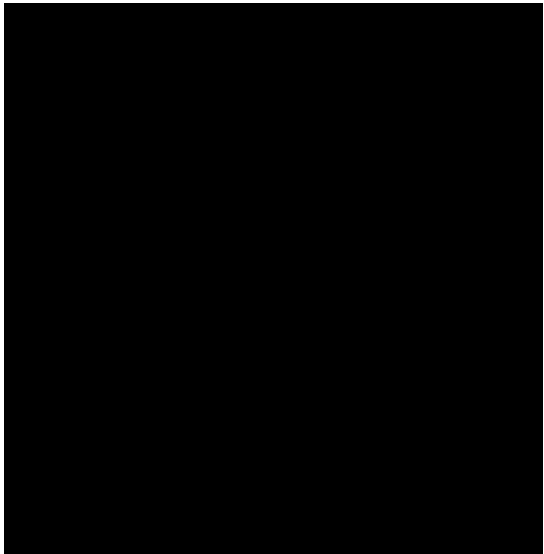
A glittering Awards ceremony was held in Belfast City Hall where the winners of the 2017 Chairman's Awards were announced. This year again, there were over 100 entries, reflecting the ongoing outstanding work happening across all services in Belfast Trust.

Trust Dietitian Wins Ulster University Award for Leaders in the Making

██████████, Specialist Dietitian within the Trust's Nutrition and Dietetic Health & Wellbeing Team recently won the Ulster University award for Leaders in the making.



Supporting

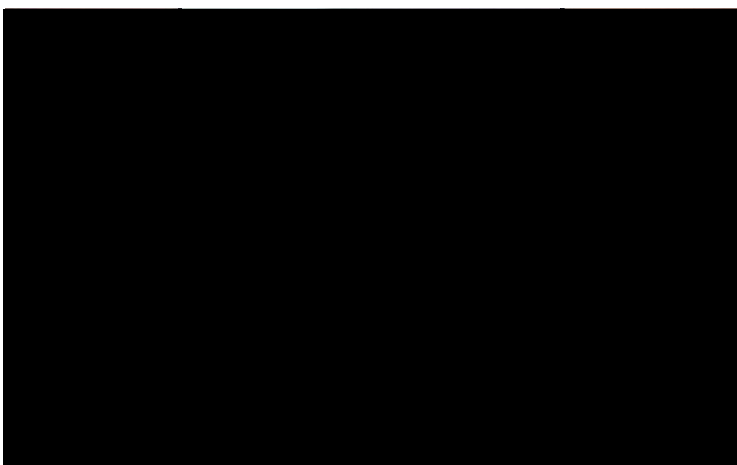
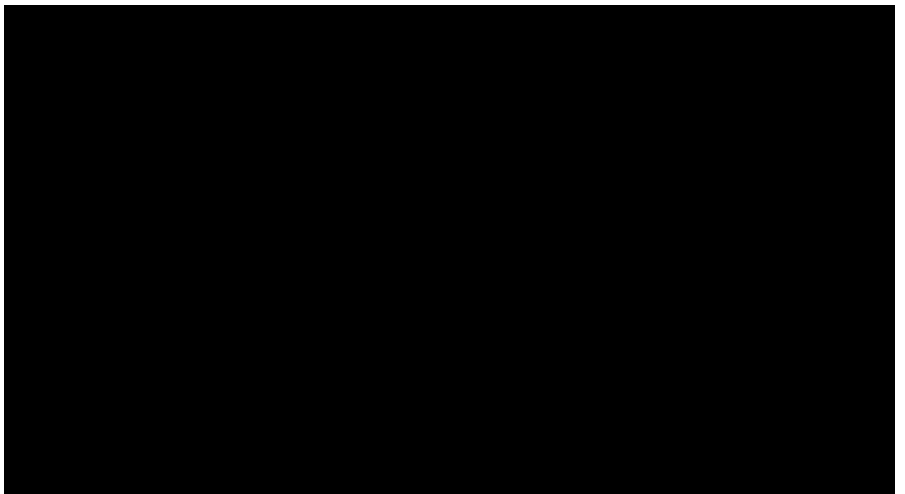


Win at Nursing Times Awards in London for the Trust's Cardiac Surgery Assessment Team

The Trust's Cardiac Surgery Pre-Assessment Team, won an award at the Nursing Times Awards in a glittering ceremony held at the prestigious Grosvenor House, Park Lane.

Trust's Clinical Scientist Wins Major Award

, Consultant Clinical Scientist at the Trust, recently won The Belfast HSC Trust Science Driving Innovation in Healthcare Delivery Awards, part of the Advancing Healthcare awards programme in Northern Ireland.



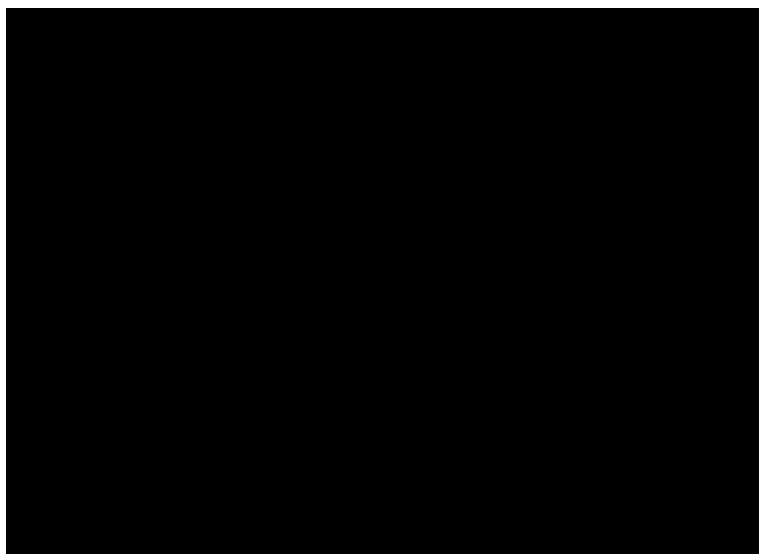
Trust's Programme Wins Public Health Agency Award

The Trust's Regional Wheelchair Training Programme for Children recently won the Public Health Agency award for 'Building Capacity in Communities and in Prevention' at the 2017 Northern Ireland Advancing Health Care Awards.

Supporting

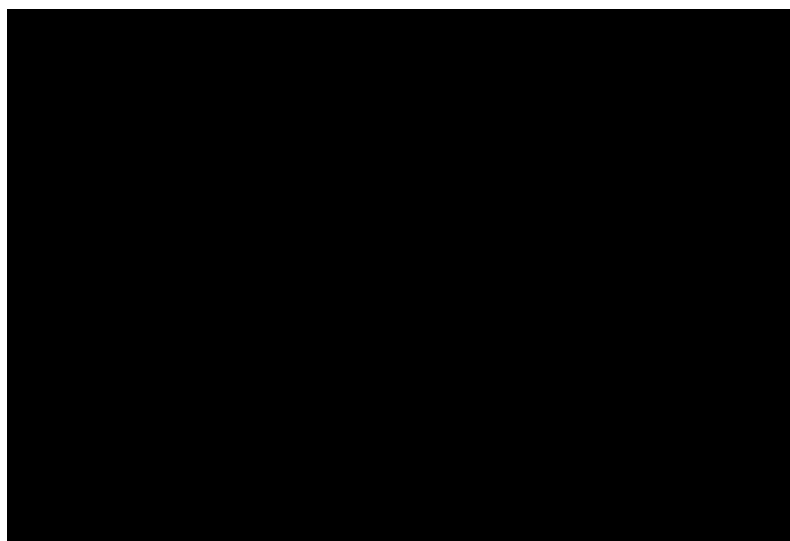
Major Award Win Success for Trust Physiotherapist

A North Belfast health and wellbeing organisation, the Bridge of Hope, was the overall winner of the Advancing Healthcare awards programme in Northern Ireland, having also won the Seating Matters award for innovation and creativity.



Trust Physiotherapists Win Advancing Healthcare Award

The Trust's [REDACTED], Clinical Lead Physiotherapist and [REDACTED], Advanced Physiotherapist, who recently won the Macmillan Award for Leadership and Innovation in Cancer Rehabilitation.



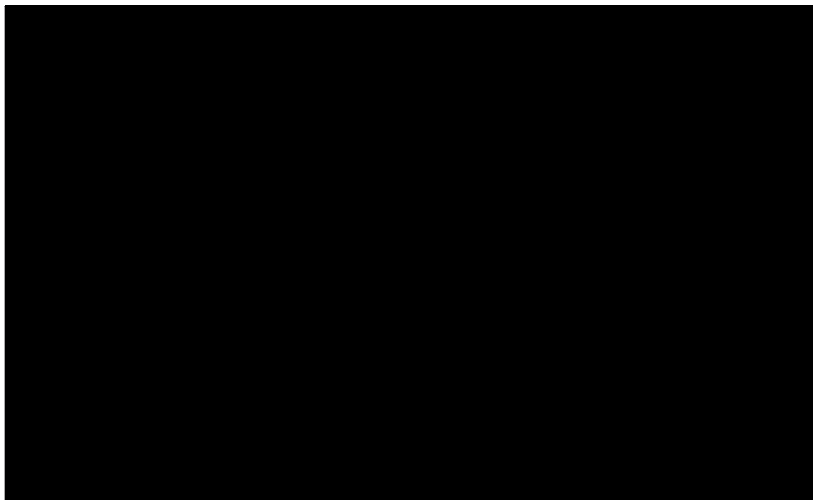
Trust Clinical Scientist wins Patient Benefit Award

The Trust's [REDACTED] has jointly received the Institute of Physics and Engineering in Medicine's 'Roy Ellis Patient Benefit Award.'

Supporting

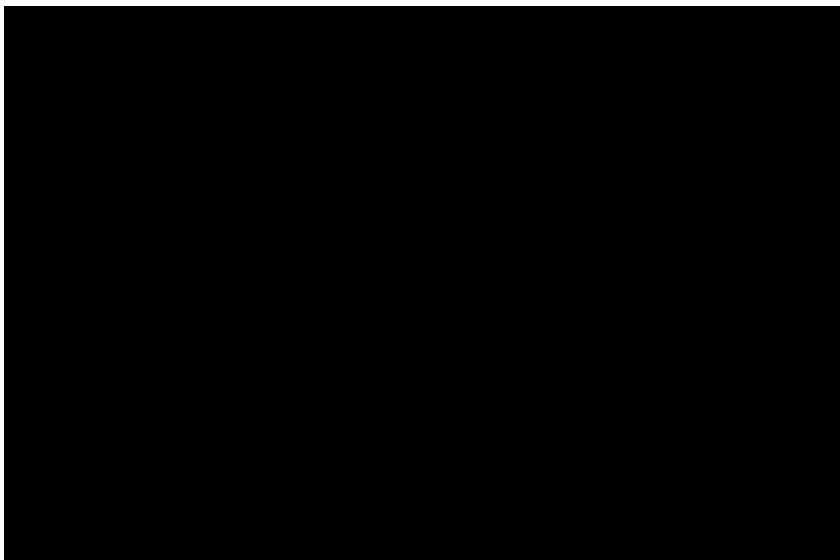
Belfast Trust Cleans Up at BICSc Northern Ireland Nation's 2017 Awards Ceremony

On Thursday 7th September, The British Institute of Cleaning Science (BICSc) Northern Ireland Nation named Trust employee, [REDACTED], of Muckamore Abbey Hospital, as its 2017 Cleaning Operative of the Year.



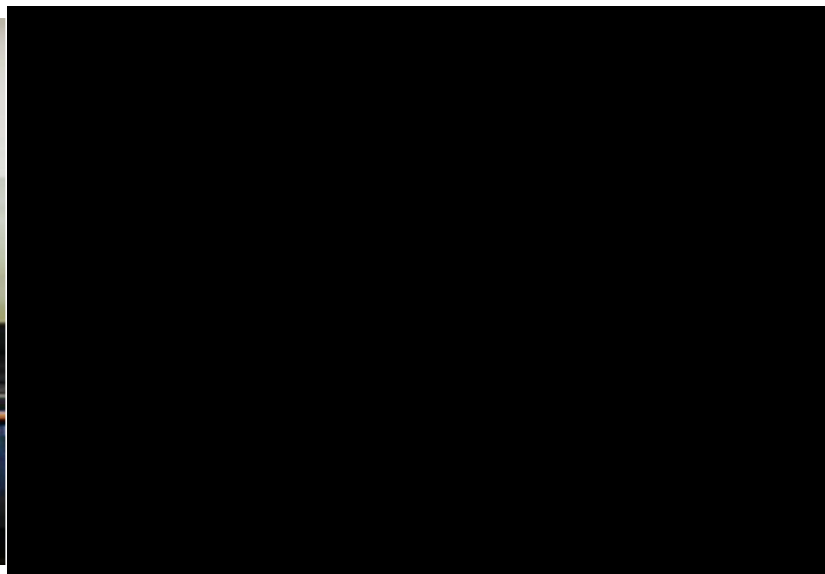
Suffolk Day Centre Wins '2017 Best of Best' Kept Day Care Facility Award

The staff at Suffolk Day Centre have been awarded the '2017 Best of Best Kept Day Care Facility' in Northern Ireland. This is the first time that any of the Trust's facilities have won the award and the staff are delighted to have been given this accolade.



Photographic Win at Biomedical Science Day

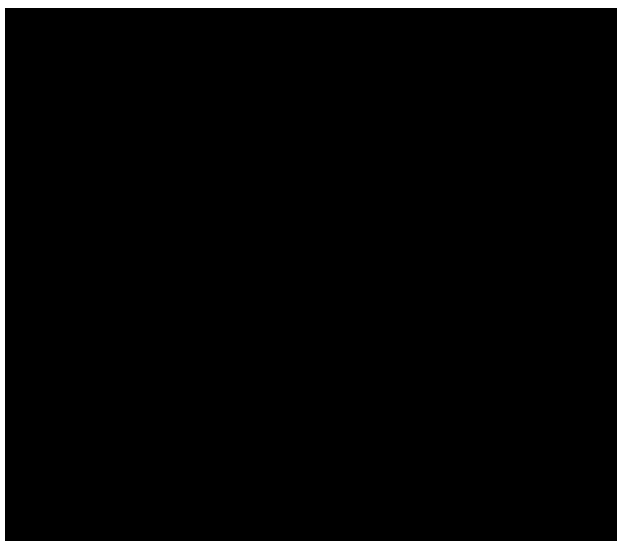
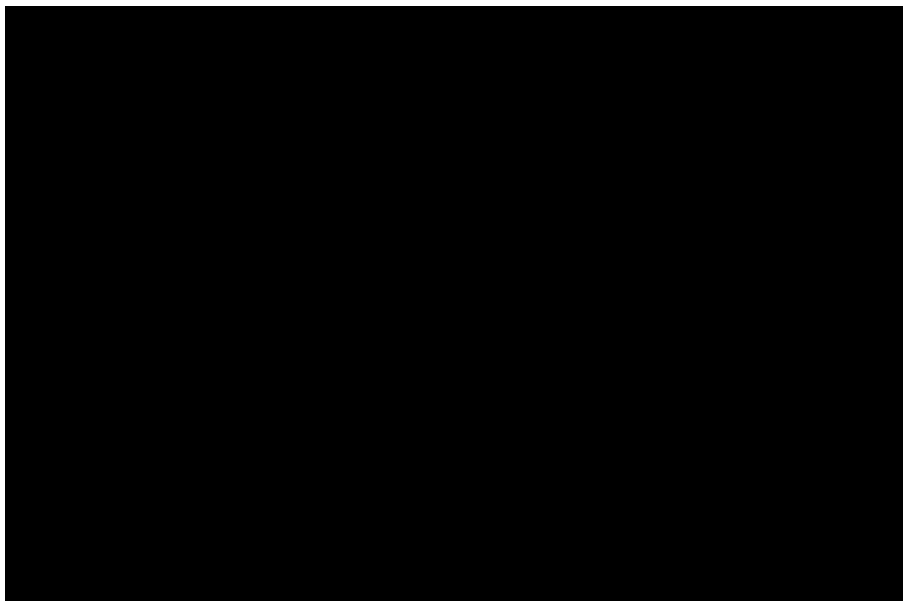
Belfast Trust's [REDACTED] was recently awarded the Best Artistic Interpretation Award for his photograph of Trust colleague [REDACTED] by the Institute of Biomedical Science (IBMS).



Supporting

Learning Disability Project Picks Up National Patient Safety Award

Iveagh Unit, Belfast Trust Learning Disability Services have been awarded the prestigious Health Service Journal Patient Safety Award for Learning Disability Services at a glittering award ceremony in Manchester.

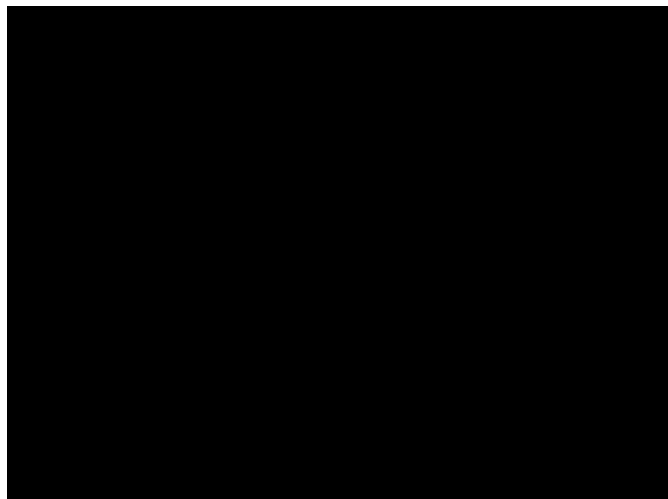


Gold Award for Specialist Registrar

██████████ was awarded the Gold Award in the Final FRCR in Clinical Oncology. This award is presented to the trainee, taking their first attempt, who achieved the best performance UK-wide in that sitting in the Final FRCR.

Top honour for ██████████ with HIV Trainer Award

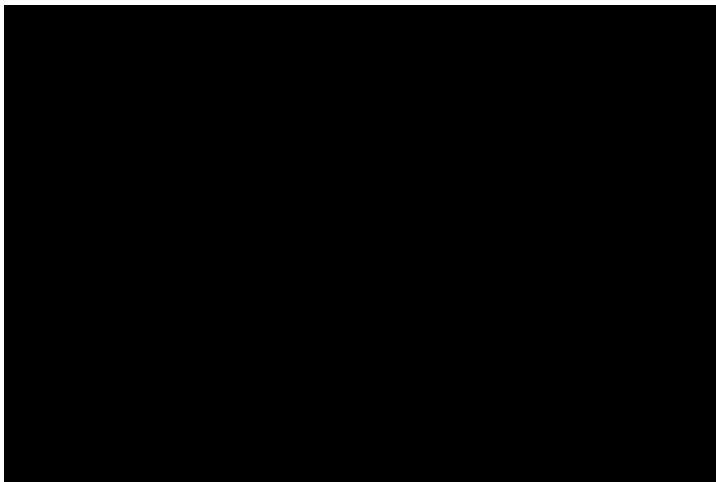
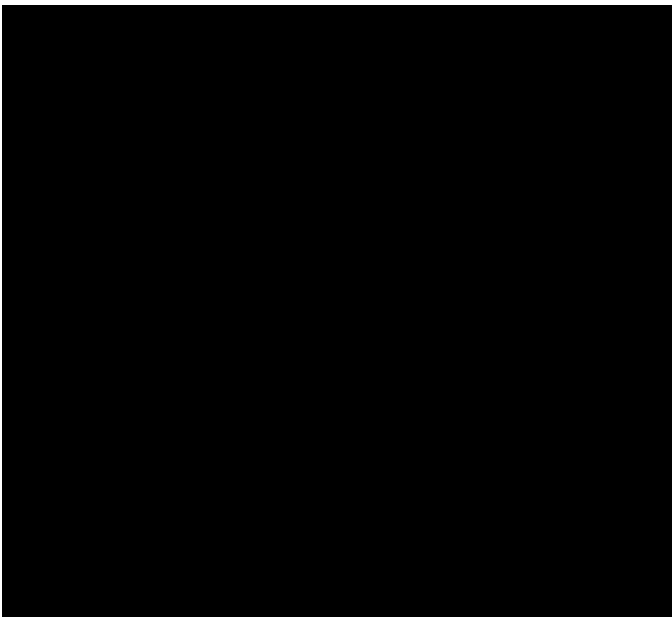
Belfast Trust HIV Awareness Trainer, ██████████, has been awarded the HIV Trainer Award to recognise his outstanding contribution to HIV Awareness Training within the Belfast Trust Sexual Health Team's 'HIV Awareness Project'.



Supporting

awarded Neonatal Nurse of the Year

Belfast Trust staff nurse, , has been named Northern Ireland Neonatal Nurse of the Year by the Neonatal Nurses Association.



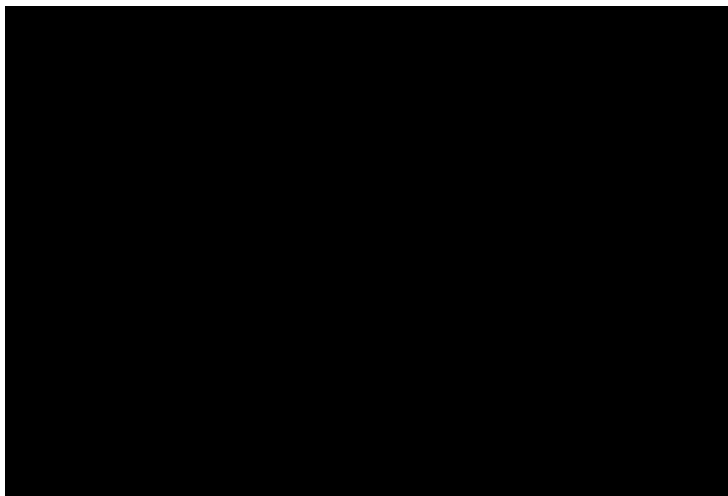
Trust Shortlisted for the Business in the Community Wellbeing at Work Award

The Trust's b well app and website has recently been shortlisted for a Responsible Business Award in Northern Ireland.

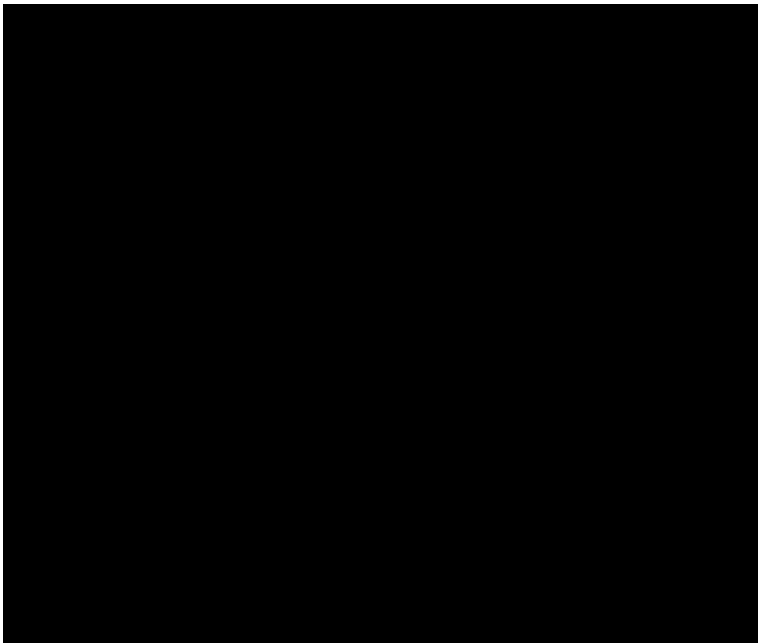
Laboratories Success at Annual Impact Excellence Awards

Belfast Trust Laboratories win at the Ulster University's Annual Impact Excellence Awards for 2017.

The Laboratories of the Belfast Trust received the award for Placement Employer in the Public Sector category at the awards ceremony.



Supporting

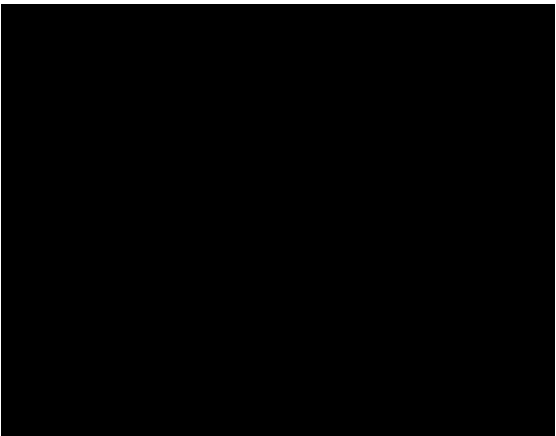


Ulster University Impact Awards

A Belfast Trust Physiotherapist was a member of a team shortlisted for the recent Ulster University Impact Awards for their collaborative work.

A Winning night at RCN Nurse of the Year Awards 2017

At an awards ceremony in the Culloden Hotel, Holywood on the 8th June, 2017, Belfast Trust celebrated multiple winners and finalists in this year’s RCN Northern Ireland Nurse of the Year Awards. As ever, these awards provide the opportunity to highlight excellence within nursing in Northern Ireland and the contribution that nurses make to the health and well-being of the people of Northern Ireland.



Student Nurse Award

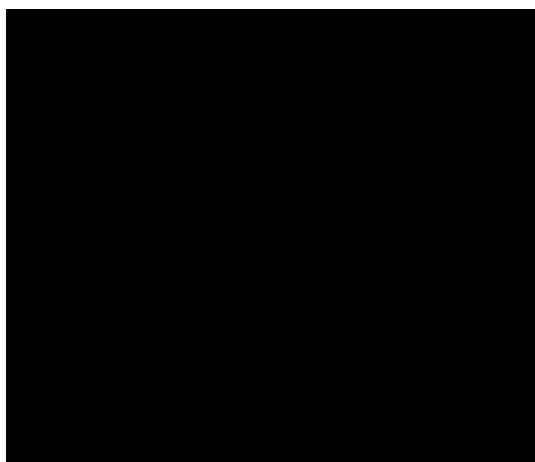
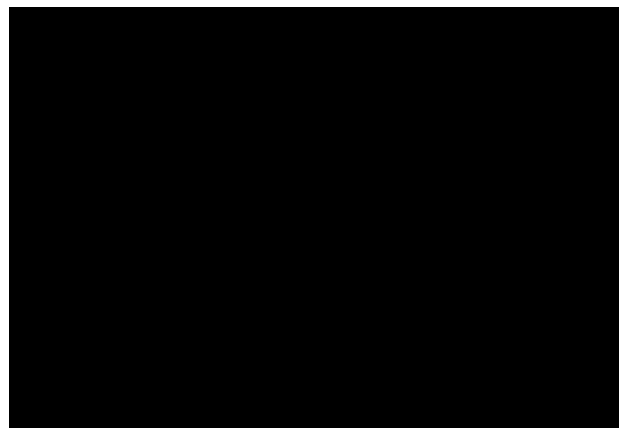
██████████ was awarded the RCN Student of the Year. ██████████ is currently based in Allen Ward, Royal Belfast Hospital for Sick Children. ██████████ demonstrated a great role model for all students and displays an international perspective and goes the extra mile to make the difference.

Supporting

Team Manager Award:

██████████ was runner up in this category. ██████████ is Ward Sister in the Regional Acquired Brain Injury Unit at Musgrave Park Hospital in the Belfast Trust, and is described by her nominator as “truly inspirational and motivated”, ensuring that “the patient always comes first”.

L-R: ██████████, Director of the Royal College of Nursing in Northern Ireland, ██████████, runner-up in the Team Manager Award and ██████████, LV.



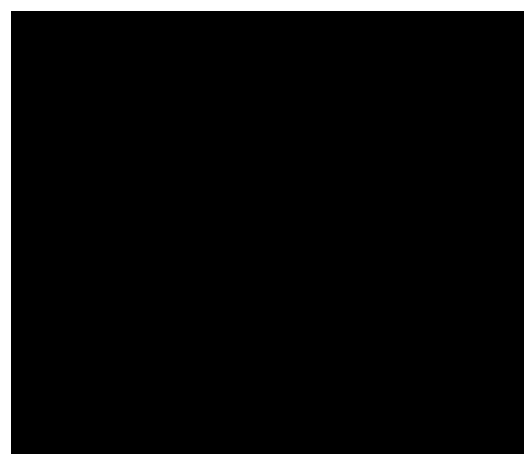
Chief Nursing Officer's Award:

██████████ won first place in the Chief Nursing Officer award. Gerry currently works as Planning & Performance Project Co-ordinator in Unscheduled & Acute Care.

██████████ was nominated for his leadership role in establishing a nurse-led Alcohol Recovery Centre in Belfast city centre (ARC) and developing partnership working between multiple agencies in caring for the intoxicated patient.

Learning in Practice Award

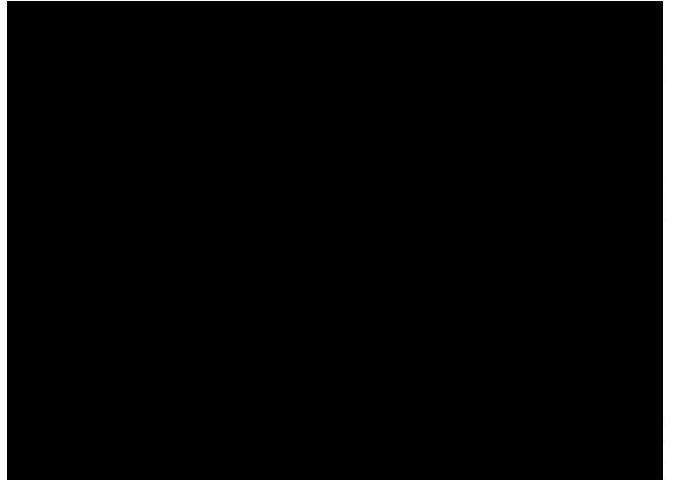
██████████ was runner up in the category. ██████████ was nominated by a nursing student who undertook a six-week practice placement in his ward. During the six weeks, the student said he gained “an incredible wealth of hands-on experience” in chest drains, venepuncture, care and discharge planning, and the administration of medicines. Conor provides constant reinforcement to students through their work experience.



Supporting

Cancer Nurse Award:

■■■■■ jointly won the Cancer Nurse Award category. ■■■■■, a Clinical Nurse Specialist, based in the Cancer Centre, Belfast City Hospital is the first clinical nurse specialist in Northern Ireland caring specifically for young people aged 16-24 with a cancer diagnosis. Her post is funded by the Friends of the Cancer Centre charity and this support has recently been extended to enable Renée to undertake the role on a regional basis. Recognised as a clinical leader, expert and champion for young people, she provides a truly holistic service.



Supporting

Chairman's Awards

The table below shows an overview of the Chairman's Awards' entries:

	2018	2017	2016
TOTAL NO. OF ENTRIES	162	111	110
SHORTLISTED ENTRIES	28	25	24
SERVICE REINVESTMENT	£112,000	£101,000	£101,000

Reinvestment per category in 2018:

Category	Total Reinvestment
Safety, Quality & Experience	£30,000
Service Delivery	£17,000
Strategy & Partnerships	£17,000
People & Culture	£25,000
Resources	£17,000
WOW	£5,000
Special Recognition	£1,000
TOTAL	£112,000

Reinvestment per category in 2017:

Category	Total Reinvestment
Safety & Excellence	£20,000
Continuous Improvement	£24,000
Resources	£18,000
Partnerships	£23,000
Our People	£15,000
Going the Extra Mile	£1,000
TOTAL	£101,000

Reinvestment per category in 2016:

Category	Total Reinvestment
Safety & Excellence	£17,000
Continuous Improvement	£17,000
Resources	£25,000
Partnerships	£24,000
Our People	£17,000
Going the Extra Mile	£1,000
TOTAL	£101,000

Supporting

Chairman's Awards 2018

A glittering awards dinner held in Belfast City Hall where the winners of the 2018 Chairman's Awards were announced. 2018 had an incredible 162 entries, the highest number of submissions ever, reflecting the outstanding work happening across all services in Belfast Trust.

It was down to the judging panel to make the difficult decision as to the winners in each of the six categories along with a special recognition award. The categories reflect the Trust's objectives – safety, quality and experience, service delivery, strategy and partnerships, people and culture, resources and finally the WOW category, which recognises a member of staff or team who have gone the extra mile and consistently demonstrates the Trust values.

The Trust Chairman, [REDACTED], said. "I believe firmly in the exceptional achievements of our staff, either as individuals or as a team and these awards are an opportunity to celebrate these and recognise all that is being done for our patients, clients and carers."

The category winners were:

➤ **Safety, Quality and Experience**

Breech Clinic

Promoting family-centred care in PICU

➤ **Service Delivery**

Time our most precious resource

➤ **Strategy and Partnerships**

Connected Community Care – Empowering Local Wellbeing

➤ **People and Culture**

Tackling the confusion around delirium

Educating and supporting patients awaiting elective cardiac surgery

➤ **Resources**

Packing a punch pouch! In Central Decontamination Services

➤ **What Outstanding Work (WOW)**

Transforming the culture of care in Brae Valley

Operation Feathered Friend

Jeans Experience

'If you feel it you can heal it!' – From Patient to Peer Support Worker

Heart of Gold

➤ **Special Recognition**

Flu Fighters Making it Better

Supporting

STRUCTURING WORK

Overview of this Indicator

This section of the Storyboard will illustrate how the Trust is structured to deliver on its ambition of being in the 'top 20% of HSC providers by 2020'. It will show how the Trust designs roles to deliver on the organisational objectives and how the Trust works to create interesting work for people, while also encouraging collaborative ways of working.



Theme 16: Designing Roles

We will show how the Trust designs roles to deliver organisational objectives and create interesting work.

Theme 17: Creating Autonomy in Roles

We will show how the Trust works to create autonomy in roles and how the Trust supports its people to make the decisions required in their specific roles.

Theme 18: Enabling Collaborative Working

We will show how the Trust enables collaborative working as it works to create a culture of safe, effective and compassionate care through a network of skilled and engaged people and teams.



Supporting

Indicator 6: Structuring Work



The organisation is structured to deliver the organisation's ambition. Roles and designed to deliver organisational objectives and create interesting work for people, while encouraging collaborative ways of working.

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Designing roles	Roles are designed to deliver organisational goals by creating clear accountability and avoiding duplication of effort across teams	Roles are designed to create interesting work for people, with skills and capabilities for each role clearly identified	Roles are designed to help people develop the skills and capabilities needed for progression	Roles are designed in order to meet the changing needs of communities, markets, organisational strategy and employees
Creating autonomy in roles	Each role is designed with clear decision-making authority	Policies and practices across the organisation support people to make the decisions required in their specific roles	Policies and practices are aligned to help people take individual ownership and act quickly and effectively	Policies and practices are regularly reviewed and improved to speed up decision making and increase individual ownership
Enabling collaborative working	It is clear how roles enable people to work together to achieve the organisation's objectives	People are encouraged to work across the organisation to share information and expertise	Open communication and flexible work practices make collaboration across the organisation easy and effective	The organisation's structure encourages people to create formal and informal networks to maximise collaboration

Supporting

Structuring Work within a Strategic and Organisational Context:

We have already described the Structure, Accountability and Reporting Arrangements that exists within and across the HSC system under Indicator 4 – Managing Performance above. As a result of these revised arrangements the Belfast Trust is now very clear as to its levels of **authority, autonomy and accountability**. The Belfast Trust is now responsible for managing its own performance, and there will no longer be a large regional performance management function. Where the Belfast Trust does not deliver against agreed performance levels, this will be managed through the Department's accountability sponsorship arrangements.

The DoH will be supported / advised in its accountability arrangements by the HSCB/PHA who will focus on day-to-day engagement with the Belfast Trust in relation to service improvement, through which it will be able to assess if under-delivery against agreed improvement objectives and targets is a performance issue or legitimate exceptional circumstances.

Going forward the key regional forum for holding the Belfast Trust to **account** will be through the DOH Accountability Review meetings. The format for these meetings will review the Belfast Trust's performance across five domains of accountability, i.e.

- Safety and quality
- Finance and Use of Resources
- Operational Performance and Service Delivery
- Strategic Change
- Leadership and improvement capability

Supporting

The DoH has outlined that the DoH's approach to accountability will be underpinned by the principle of **earned autonomy** and issues will only be considered by DoH where Trusts performance is not in line with agreed Performance Trajectories. Where agreed levels of performance are not achieved, or where deviation from annual trajectory is of such concern, the issue will be escalated to the **bi-annual accountability meeting** between DoH Permanent Secretary and Trust Chair and Chief Executive. These new arrangements demonstrate how the HSC is structured to deliver the overall DOH regional priorities, outcomes and ambitions.

Performance and Accountability in the Belfast Trust

The Trust has clear accountability to the Department of Health for delivery of Ministerial objectives to ensure safe, high quality health and social care services for the population served, as shown in the summary diagram below:

How?

- Regular Chair and Chief Executive/ Executive Team Accountability meetings with Department of Health

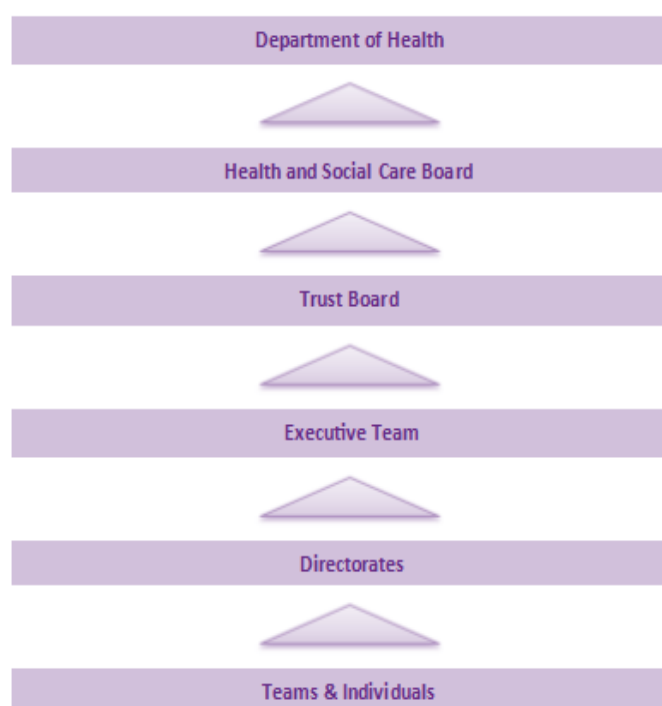
- Regular monitoring meetings between Trust & Health and Social Care Board

- Review of Trust Performance Report monthly
- Public Meetings bi-monthly

- Review of Trust Performance Report monthly
- Ongoing Performance Review of all Directorates

- Bi-annual Accountability Review with Executive Team
- Internal Accountability processes

- Local Accountability within Directorates
- Staff Development Review



The Corporate Management Plan is supported by Directorate Management Plans. These local plans define Team objectives as well as the relevant corporate objectives and all staff will contribute to their achievement, defined through their Staff Development Review.

The Belfast Trust Internal **Performance and Accountability Framework** (see above) involves a range of measures which provide the Trust Board, the Chief Executive and the Executive Team with assurance that the Trust is meeting its corporate performance objectives and moving in the right strategic direction/trajectory. This Internal Performance and Accountability Framework and process provides the Trust's senior leaders with an opportunity to identify where objectives are being met, or where the Trust is under-performing in certain areas, with a focus on identifying the reasons for under - performance and agreeing action plans to address and improve performance where necessary. These structural and reporting arrangements are designed to provide oversight and assurance at different levels within the senior leadership structure that the Belfast Trust is continuing to deliver on its five domains of accountability, thereby retaining its '**earned autonomy**' status.

Supporting

The Accountability and Reporting Structural Arrangements within the Trust

Details of these arrangements have been described earlier in the storyboard under indicator 4 Managing Performance.

In line with the theme of collaborative working the Trust has in place well – established **business partner arrangements** between service directorates and support directorates. For example, senior personnel from HR/OD and Finance and Performance Management are specifically aligned with particular directorates, and this even works down to each directorate having their own allocated learning and development lead from the Trust's learning and development team.

Internal Organisational Structure designed to support delivery of the Trust's ambition.

In line with the ethos of Collective Leadership the Trust has since 2016 developed, populated and is now operating collective leadership management arrangements across the Trust. There are now 11 Corporate and Service Directorates, supporting the Trust's teams and 13 Divisions (see Collective Leadership Management Arrangements diagram below and also see page 7 of the Corporate Management Plan 2018 – 2021).

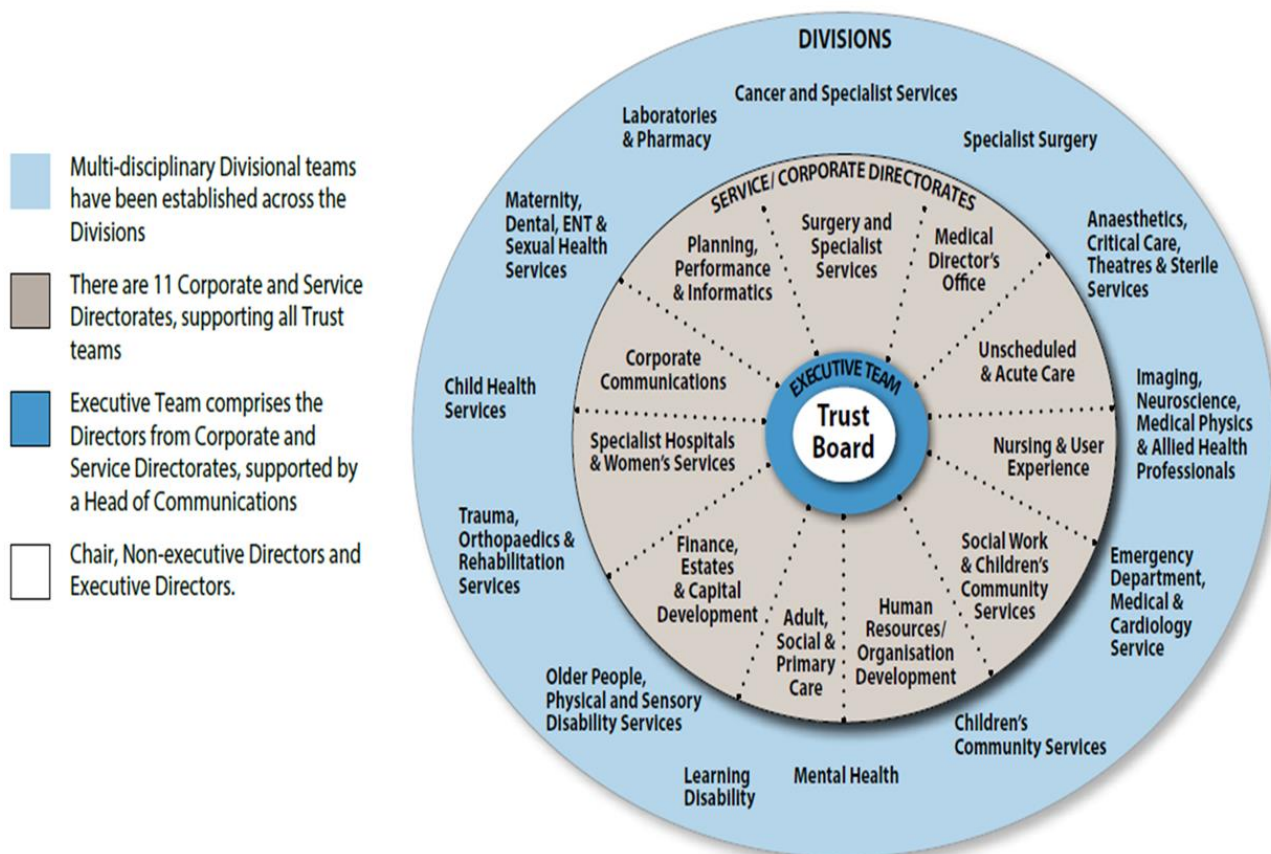
Each Service Directorate is now organised into **Divisions** (Tier 3). Divisions are clinically led and managerially supported distinct units of activity. Those in Chair of Division roles are medical staff. New job descriptions have been designed and put into place for Chair of Division, Divisional Nurse and Divisional Social worker. All members at Tier 3 report to and are **collectively accountable** to the Director for care delivery, improvement and performance in their Division (and associated budget). Professional reporting lines are unchanged however.

These thirteen service Divisions are then organised into **Care Delivery Services** (Tier 4). Members at Tier 4 report to and are collectively accountable to their Divisional Leadership Team for care delivery, improvement and performance in their unit (and associated budget). Professional reporting lines are unchanged. Enhanced leadership structures are implemented at Tier 3 before moving to Tier 4 in each Division. Members of each Divisional leadership team will work together to support the establishment of high performing collective leadership teams at Care Delivery Service level (Tier 4).

Collective leadership at Division and Care Delivery Service level is provided by those experts who provide care (e.g. doctors, healthcare professionals, nurses, social workers, AHPs), supported by experienced Co-Directors/Senior Managers.

In these leadership teams, those with the right expertise take leadership responsibility depending on the situation or task in hand, working collaboratively with other members. Teams have a collective responsibility to reach a consensus on important decisions in their area, and work collaboratively with other teams to reach consensus about opportunities and issues within and across Directorates. Escalation of key decisions to the next level is likely to be exception.

Supporting



The Trust has invested heavily in the establishment of Collective Leadership Management Arrangements (Divisions). Below are some of the actions that were taken to support the establishment of the new divisional structures and the ongoing support the Trust has put in place to ensure each Division and each collective leadership team is 'change – able' and 'change – ready'.

Key Actions and Supports

The key set up actions and supports included:-

- Completion of various site visits to GB Trusts by a range of senior leaders
- Completion of Directorate proposals for improving the delivery of safe and high quality care through enhanced leadership structures. Discussed at Collective Leadership Operational Group, and Executive Team.
- Finalisation of the change readiness/development tool to support the change process.
- Ongoing development of HR Guidance to support recruitment at Tiers 3 and 4
- Job descriptions for new roles including Chair of Division. Divisional Nurse, Divisional Social worker, Clinical Director, Governance Lead, Safety Lead have been developed.
- Development of communication and engagement support materials
- Ongoing engagement events within Directorates to identify opportunities for collaborative working within and across Directorates, and the support required to make it happen
- Development of interventions to support teams regarding the practicalities of enhanced leadership roles, responsibilities, processes and reporting relationships (e.g. patient experience, financial management and stewardship).
- Establishment of Tier 3 Strategic Leadership Forum.
- Provision of team development workshops for newly created teams.

Supporting

Our 2019 'As Is' Position for Indicator 6 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 16: - Designing roles	Roles are designed to deliver organisational goals by creating clear accountability and avoiding duplication of effort across teams	Roles are designed to create interesting work for people, with skills and capabilities for each role clearly identified	Roles are designed to help people develop the skills and capabilities needed for progression	Roles are designed in order to meet the changing needs of communities, markets, organisational strategy and employees

Theme 16: Criteria 1: Roles are designed to deliver organisational goals by creating clear accountability and avoiding duplication of effort across teams

The Trust through the use of clear job descriptions, robust team on- boarding and re- boarding induction processes and involving staff in such processes as SDR (see Indicator 4) works to ensure that each role and each post holder has a clear understanding of what they are responsible for and how their work is aligned with and contributes to the team/service achieving its objectives. When a vacancy arises managers revisit and review the needs of the team and they ensure all job descriptions reflect what the team needs currently and going into the future as opposed to replicating a job description which no longer reflects the duties of the new post.

While some work is ongoing and recurring, teams and individual team members through team/service planning and team meetings and one – to – one meetings with their line manager/supervisor etc can identify new needs and priorities, and work with the team members to allocate work with clear lines of responsibility in terms of what needs to be done, by whom, by when, and to what standard. The line manager/supervisor is in an ideal position to ensure staff time and expertise is optimised and there is no duplication of effort across the team – the team leader knows what needs to be done, they know who they have asked to do it and they thus avoid the dangers of role overlap, role ambiguity or duplication of work.

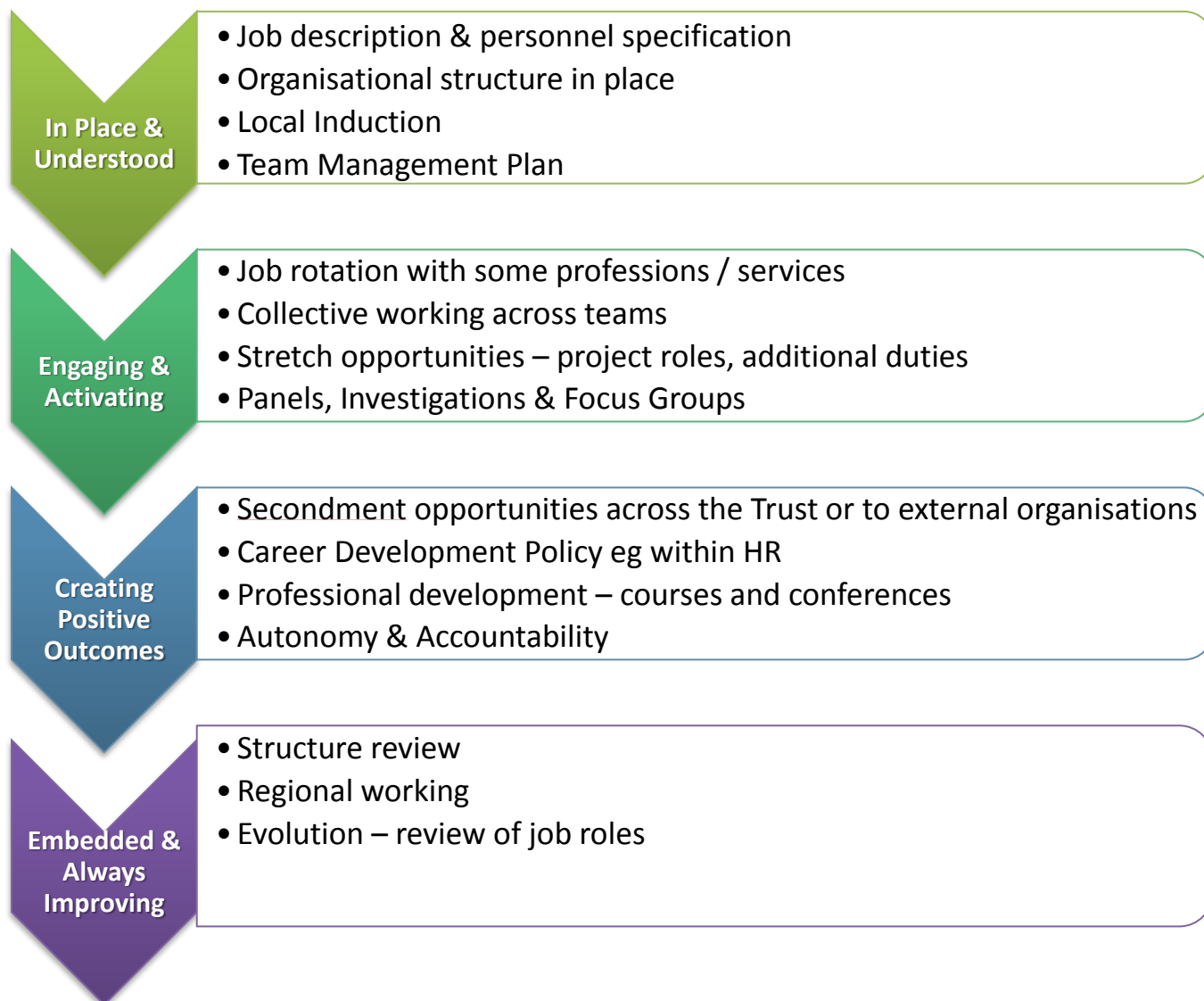
Team structures and team structural trees (who is responsible for what and to whom) are also helpful in ensuring all staff are clear as to what they are responsible for, to whom they report and the boundaries of their decision making autonomy and authority

The Trust involves staff in project based/improvement team work and such teams are established to deliver organisational objectives and project goals with clear lines of accountability, which in turn ensures that projects and improvement work is delivered on time, in budget and to agreed specification.

Supporting

Trust Approach to Designing Roles

An overview of elements the Trust's approach to designing roles even in regulated services is set out below:



Theme 16: Criteria 2: Roles are designed to create interesting work for people, with skills and capabilities for each role clearly identified

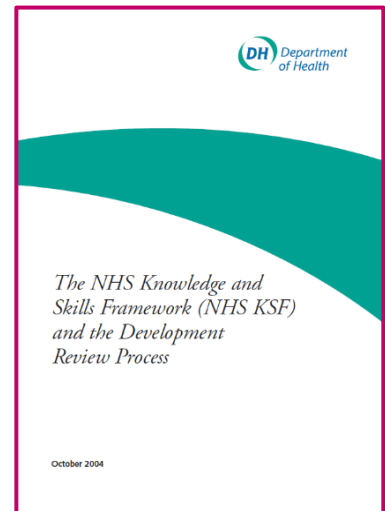
All roles across the Belfast Trust are designed with specific capability and skills profiles in mind so that the necessary knowledge, skills and capabilities are clearly identified and the post holder or potential post holder has either the requisite competencies or they have the potential to acquire these competencies. Roles are also designed so that they are interesting for the individuals within these roles. Given the nature and scale of the work the Belfast Trust is involved in, staff often talk about **'no two days being the same and how they enjoy the variety of work within each role'**.

Supporting

It is important that staff enjoy their work, that they find it interesting and managers work with staff through such processes as SDR, Supervision, one – to –one meetings to ensure there is a balance achieved between what the person is able to cope with and being stretched to optimise each person's potential as most if not all teams continue to respond to ever changing demands and expectations.

The **Knowledge and Skills Framework (KSF)** is a UK-wide agreed framework for the HSC and NHS that requires the development of KSF post outlines for each (non medical) post. The post outlines set out the minimum knowledge and skills required for a job. KSF supports the development of individuals in their work and in the post they currently hold. The KSF outlines are used during the review process with reference to how the duties and responsibilities of the post are being undertaken based on an individual's current agreed objectives. KSF also supports the **individual's career progression** throughout their working lives.

In February 2016 80% of staff had a KSF outline, in January 2019 this figure is 91%. There have been 181 outlines agreed in partnership with Trade union Colleagues to cover the 91% of staff.



The Trust operates a range of approaches to ensure staff are motivated in their roles and continue to find their work interesting.

For example in Human Resources a career development scheme has been developed, consulted on and implemented to facilitate a sideways move for staff to a new team in HR. Nursing also have in place a transfer scheme to facilitate band 5 nurses to move to a different service area to develop their skills and support their career aspirations.



Staff are supported & encouraged to avail of internal and external **secondments** – there is a recognition that people can develop skills and knowledge which will benefit the organisation and the individual concerned. The Trust also offers a wide range of temporary 'Acting' opportunities to cover short term vacancies.

Some staff participate in **regional working groups** with the ability to inform and shape the HSC going forward e.g. lead employer model for Junior Doctors is in the planning stage. Staff are also involved in improvement work such as the IIP LSITs, and other continuous improvement projects.

Supporting

The significant programme of work to improve **safety and quality** has provided opportunities for multi disciplinary teams to work together on improvement projects.

As Senior Managers undertake **service reviews** to ensure the service model continues to be fit for purpose – changes in structure has a knock on impact on roles and responsibilities. The Trust has also been fortunate to have secured Transformation monies from the DHSSPS and as a result are in the process of recruiting 348 staff to support new service projects.

Changes in role due to **technological advances** also ensure the continuing development of roles and responsibilities. The world within which staff operate within the Trust continues to evolve at break – neck speed - often driven by changes and advances in technology. Professionals continue to take on new roles and responsibilities such as nurse prescribing, more and more staff being responsible for the content management of their service's social media platforms with more and more content and information going on line etc.

How Do Our Staff Know Their Role & Responsibilities?

- Job description
- Departmental induction
- Organisational structure – knowing their role, the role of their team & other teams

Taking Ownership

- Staff make suggestions & take responsibility for implementing the changes
- Staff are accountable for managing their work
- Learning rather than blame

Through secondments, internal promotions, staff are given opportunities to broaden their capabilities and experience.

Lastly roles are designed to meet the changing needs of the external environment. We will demonstrate under Indicator 9 how the Trust continues to respond to the changing external environment within which it operates. The introduction of collective leadership arrangements and structures is a very good example of an internal response to an external need – i.e. the need to devolve decision making to levels closest to service provision, service delivery and patient and client contact. Collective leadership is a clear example of how structures and job roles need to be reviewed, changed, or even new roles introduced, as a consequence of such reviews.

Supporting

Striking the right balance between accountability, autonomy and authority – A Belfast Trust perspective

In working to develop 'a culture of safe, effective and compassionate care through a network of skilled and engaged people and teams' the Belfast Trust continues to work with its staff as it attempts to strike the right balance between **accountability, autonomy and authority**. The arrangements that are now in place between the DoH and the Trust strikes an effective balance between levels of authority and accountability and the concept of '**earned autonomy**'.

Disengaged employees are a cost to organisations every year in lost productivity. As a result, there is often a tendency to search for better ways to increase employee accountability and develop more processes and checks and balances for holding people to account. But increased accountability on its own can create **a culture of micromanagement** that can lead to unhappy employees. This, in turn, has a negative impact on employee productivity.

Creating **a culture of autonomy** increases employee engagement and ownership of the work. Employees in such a culture feel a high sense of ownership for the success of the organisation and they tend to be more productive, because they take greater pride in their work.

But there can be a danger in this approach when an organisation discovers that their autonomous employees aren't all necessarily on the same page. As a result, their work doesn't align with the Trust's vision, ambition and priorities. In some cases, their productivity suffers because they have too little oversight. In [REDACTED] words '**macro – leadership is every bit as dangerous as micromanagement**'

The Trust through the introduction of **Collective Leadership** is working to devolve responsibilities to those closest to the patient and service users. The establishment of Directorates, Divisions and Care Delivery Services supports the '**proximity principle**' – in a large and complex organisation people are more likely to understand, support, have a sense of ownership and passion for and deliver on that which is 'closest or most proximate to them'.

Supporting

Our 2019 'As Is' Position for Indicator 6 = Established				
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 17: - Creating autonomy in roles	Each role is designed with clear decision- making authority	Policies and practices across the organisation support people to make the decisions required in their specific roles	Policies and practices are aligned to help people take individual ownership and act quickly and effectively	Policies and practices are regularly reviewed and improved to speed up decision making and increase individual ownership

Theme 17: Criteria 1: - Each role is designed with clear decision-making authority.

Theme 17: Criteria 2: Policies and practices across the organisation support people to make the decisions required in their specific roles.

Under Theme 16: Criteria 1: above, we have set out how the Trust ensures each staff member has clear lines of **accountability** within their respective roles and responsibilities. Using similar processes as SDR, one – to – one meetings, pre – briefings for delegated tasks, allocation of work duties, line managers work with their staff to create as much **autonomy** in roles as is appropriate by providing all staff with clear decision- making authority in relation to their duties and the decisions they will have to make in their roles.

The Trust continues to support staff in balancing employee autonomy with clear and meaningful levels of authority and accountability designed to support clear decision making for the benefit of patient and service users. Staff in taking on decision making responsibilities are supported through training, access to and knowledge of standard operating procedures and Care Pathways and having access to experienced staff (both managers and peers).

The work the Trust is involved in to support staff with decision making is complemented by the professional guidance offered to all professionals through their respective Professional Codes of Conduct – e.g. in the NMC Code of Professional Conduct there is a section which reads 'be accountable for your decisions including delegated tasks and duties and only delegate and/or accept tasks and duties that are within your/the person's scope of confidence/competence /experience/expertise'.

Supporting

The following actions gives a flavour of how the Trust is working to get the balance right between authority, autonomy and accountability as it works to ensure each role is designed with clear decision-making authority: -

The Trust encourages, supports and enables its managers to:

- Give employees the freedom to determine **how to** reach their agreed and aligned objectives within established boundaries and guidelines.
- Only delegate or allocate tasks and duties that are within the delegatee's **scope of competence/confidence/experience/expertise**.
- Agree **reporting and accountability arrangements** to review, report on and measure success – the 'what', 'the when', 'the how' as to how the person will be held to account and asked for updates on their work
- **Support staff** who for whatever reason fall short of performance expectations – this support includes the development of an action plan whose goal it is to help the employee get back on track, but also provide clear consequences if improvement doesn't occur within a specific time frame – e.g. capability review and potentially in extreme cases possible disciplinary action.
- Undertake **job evaluations** to ensure job descriptions reflect changed roles and post holders understand their freedom to act (see below).
- Review decisions made and outcomes/results achieved as often a part of peer reviews, supervision, coaching sessions and responding to 'negative' feedback such as complaints, critical incident reviews. All such processes are designed to be supportive but are also underpinned by the principles of 'courageous conversations' where appropriate and always with the intention of identifying learning and scope and requirement for improvement.
- It is important to note that within the **Trust's OD Framework** it talks about **leadership style** and sets out what collective leadership means to the Trust and how collective leadership is designed to empower staff to become leaders in their own right and to trust themselves when faced with an opportunity to serve others – putting patients and service users first.

Collective leadership for the Trust means:

- **Shared responsibility** – by anyone with the right expertise taking responsibility when appropriate
- **Shared leadership** – within and across teams that prioritise safety and quality above all else
- **Better decision making** – at wherever the right capability sits within our Trust, depending on the situation or task in hand

Supporting

These 'guiding principles', are designed to provide clarity as to what collective leadership means across the Trust while at the same time encouraging and supporting staff to make and take decisions as appropriate and when people feel comfortable doing so.

NHS Job Evaluation Handbook

The Job Evaluation framework is operated in HSCNI, including Belfast Trust, and ensures for all new and revised posts that:

- job descriptions and person specifications are up to date and accurate
- the design reflects the demands of the post
- pay structures are consistent and non-discriminatory
- all of the above is carried out in partnership with staff representatives in Trade Unions



As part of the Job Evaluation scheme the factors analysed include the post holder's **freedom to act**; their knowledge, training and experience required; key responsibilities; and communication and relationship skills. The analysis allows for post holders to take individual ownership and act quickly and effectively by being cognisant of other aligned roles in teams and services.

Within the Trust the NHS Job Evaluation Scheme was used to determine the pay bands for all posts on Agenda for Change contracts and continues to be used for new posts and posts which have significantly changed since they were last evaluated. In the last three years **388** new/revised job descriptions were received for AfC banding.

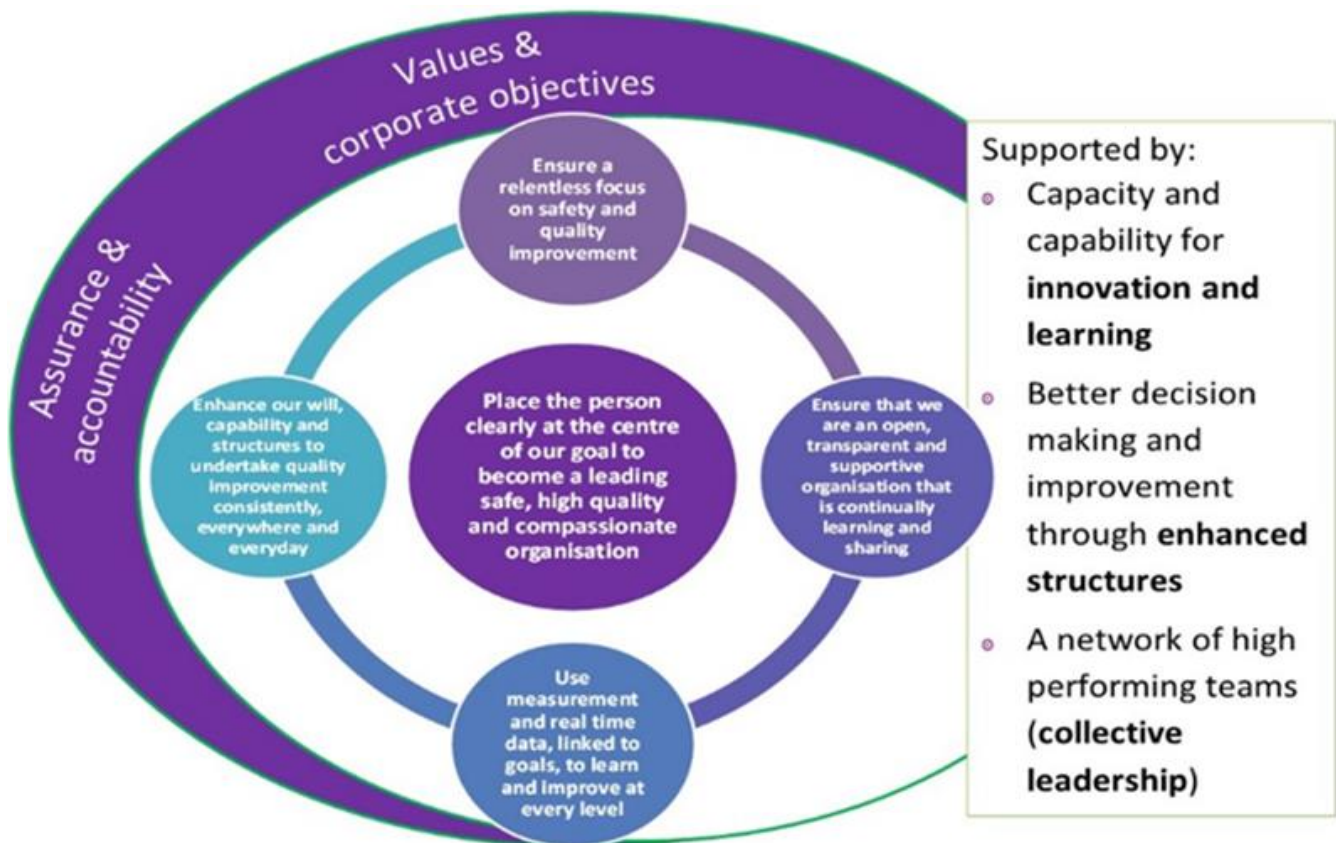
Supporting

Decision making and improvement closer to the point of care

Collective leadership is about everyone at all levels taking responsibility for the success and improvement of the Trust as a whole and improvements to the patient and client experience, and not just for the individuals job or work area.

To enable greater empowerment and accountability at local level, Directorates have been organised into Divisions each led by a Divisional Leadership Team. Divisions are further organised into Care Delivery Services (CDS), led by CDS Leadership Teams.

By enhancing its leadership structure in this way, the Trust has been able to apply the principles of safety and quality which have been adopted by leading Trusts across the UK. For Belfast Trust this means:



- ✓ Directors continue to have ultimate responsibility for Directorate performance, supported by Divisional and Delivery Service Leadership Teams.
- ✓ These local leadership teams are responsible for important decisions in their area.
- ✓ They work collectively to plan service activities, empower their wider teams and service users to improve outcomes, actively manage their financial and operational activity, and take action to improve performance when necessary and within available resources.

Supporting

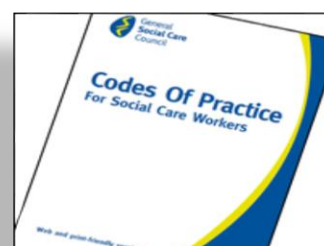
The role of these leadership teams is to empower staff at all levels with **clear paths for decision making and accountability**; enabling local teams to operate with more flexibility, whilst ensuring collaboration and learning across areas. These leadership teams are responsible for ensuring the Division remains focused on the Trust and local level priorities required to deliver a culture of safe, high quality and compassionate care.

The work commenced within the Trust is aligned with, and supports the regional HSC Collective Leadership Strategy and, through the regional Organisational Development network, we have supported an engagement exercise with staff and service users, to establish a core set of values and associated behaviours. These will be confirmed and implemented in 2019 and will be common across the full HSC sector.

Staff are supported to make decisions by policies and procedures



HSC Staff Health and Safety Policy		Approved by: [Signature]	
Author:	Health and Safety Committee	Approved:	[Signature]
Version:	1.0	Reviewed:	[Signature]
Effective Date:	1st January 2019	Next Review:	1st January 2020
Policy Title:	Health and Safety Policy	Policy Number:	HS/001
Policy Scope:	All staff and visitors to the Trust	Policy Status:	Active
Policy Objectives:	To ensure the health and safety of all staff and visitors to the Trust	Policy Owner:	Health and Safety Committee
Policy Details:	This policy sets out the responsibilities of all staff and visitors to the Trust to ensure the health and safety of all staff and visitors to the Trust. It covers all aspects of health and safety, including fire safety, first aid, and general health and safety. It is the responsibility of all staff and visitors to the Trust to read and understand this policy and to follow the instructions contained within it. It is also the responsibility of all staff and visitors to the Trust to report any health and safety concerns to the Health and Safety Committee.		
Policy Review:	This policy will be reviewed annually by the Health and Safety Committee. Any changes to the policy will be made in consultation with the Health and Safety Committee and will be approved by the Health and Safety Committee.		



Supporting



There are 1,122 different Policies and Procedures

All are easily accessible to staff on the HUB

Different policies are featured each month

External guidelines are highlighted for staff

Featured Policies

Belfast Health & Social Care Policy & Procedural Arrangements relating to Display Screen Equipment (DSE)

Prescription Safety Spectacles Trust Policy & Procedural Arrangements

The Control of Substances Hazardous to Health (COSHH) Trust Policy & Procedural Arrangements



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External Guidelines



Royal Marsden
Click to go to the Royal Marsden Nursing Manuals



NICE
Click to be taken to the NICE website



GAIN Guidelines
The Guidelines and Audit Implementation Network provide a range of documents and tools to help you provide best practice.



DHSSPS Guidelines
Regional guidelines available from the Department of Health

Supporting

Our 2019 'As Is' Position for Indicator 6 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 18: - Enabling collaborative working	It is clear how roles enable people to work together to achieve the organisation's objectives	People are encouraged to work across the organisation to share information and expertise	Open communication and flexible work practices make collaboration across the organisation easy and effective	The organisation's structure encourages people to create formal and informal networks to maximise collaboration

Theme 18: Criteria 1: - It is clear how roles enable people to work together to achieve the organisation's objectives

Theme 18: Criteria 2: - People are encouraged to work across the organisation to share information and expertise

As demonstrated in earlier Indicators, particularly Indicators 1 and 4 the Trust works through its alignment processes to ensure that all staff are clear as to their team and service's objectives and how they contribute to developing and delivering on these objectives.

While team working is not always appropriate or necessary, there are times when collaborative working within and/or across teams is both appropriate and necessary. The idea of multi disciplinary working is a well – established approach to care delivery within and across the Trust. Teamworking and collaborative working is indicated when the following factors are present or a combination of them are present:

- **The nature of the task**– the task may be complex and large scale and can only be delivered by a team working collaboratively to achieve the particular objectives.
- **Timescale available for task completion** – while a person or persons may be able to deliver on particular objectives, if time pressure is an issue it will require the input from the team to deliver the work on time.
- **Multidisciplinary Working**: The range of professional inputs that are required to look after a patient when they come into hospital for example for surgery requires inputs from medical, nursing, physiotherapist, dieticians, radiography, laboratory staff, administrative and domestic staff – all working together for the provision of safe, effective and compassionate care and a positive outcome for the patient and their family.

Supporting

- **Expertise required** – to complete certain tasks requires input from people with differing yet complementary skills.
- **Large scale projects:** - the Trust continues to undergo major building work across different sites. The building of the New Children's Hospital on the Royal site is both a complex and an exciting project. It continues to require input from a wide range of staff including engineers, architects, nursing staff on helping with design features, estate staff managing the project and ensuring it is delivered on time and in budget.
- **Supporting continuous improvement work** – the Trust as will be demonstrated under Indicator 8 'Delivering continuous improvement' invests heavily in continuous improvement working groups. The composition of such groups are designed to ensure that inputs from all staff groups are included, thereby improving levels of engagement, ownership and outcomes.
- **Establishment of Divisional and Care Delivery Unit Teams** which are clinically led and managerially supported is another good example of how newly established structures and newly agreed roles enable people to work together to achieve the organisation's objectives **while also** encouraging staff to work across the organisation to share information and expertise

Working within such teams encourage individual team members to share their expertise, insights and information with others from across the Trust/Division or Care Delivery Service or across Project Teams.

The evidence of collaborative working that is involved when teams submit projects for consideration for the **Chairman's Awards**, or when teams work together to gain or retain accreditation such as **IIP, Laboratories re – accreditation** etc. is positive evidence of how the Trust supports and enables collaborative working to achieve organisational objectives.

The work of **committees and sub – committees** across the Trust is further evidence of people from diverse professional backgrounds working across teams to progress organisational objectives and/or to support the Trust in becoming the organisation it aspires to become.

The advances the Trust has made in **making information more accessible** and user friendly through the use of the Hub supports the sharing of information within teams and across teams, further enabling more effective cross working.

The use of social events, project groups, the leadership conference as well as the use of internal and external benchmarking and working on regional projects encourages the creation of cross-practice/ cross-organisational networks to enable collaborative working. Working with outside agencies such as the Kings Fund ensures that teams across the Trust do not work in isolation but are connected to other teams who are working towards similar goals or have dependencies on each other.

Supporting



Improving



Improving

Building Capability

- Understanding people's potential
- Supporting learning & development
- Deploying the right people at the right time



Delivering Continuous Improvement

- Improving through internal and external sources
- Creating a culture of continuous improvement
- Encouraging innovation



Creating Sustainable Success

- Focusing on the future
- Embracing change
- Understanding the external context



Improving

Building Capability



Overview of this Indicator

This section of the Storyboard will illustrate how the Trust actively manages and develops people's capabilities. It will show how the Trust supports its people in realising their full potential. It will show how the Trust works to ensure it has the right people at the right time, for the right roles, doing the right thing.

Theme 19: Understanding people's potential

We will show how the Trust supports people in realising their potential and how the Trust actively manages and develops people's capabilities to support organisational objectives.

Theme 20: Supporting learning and development

We will show how the Trust supports learning and development for all.

Theme 21: Deploying the right people at the right time

We will show how the Trust has the right people with the right capabilities, at the right time, for the right role, doing the right thing

Improving



Indicator 7: Building Capability

People's capabilities are actively managed and developed. This allows people to realise their full potential and ensures that the organisation has the right people at the right time, for the right roles.

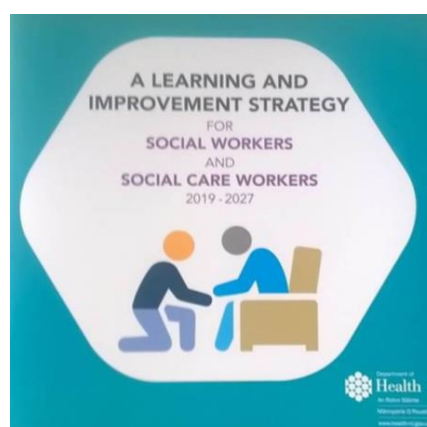
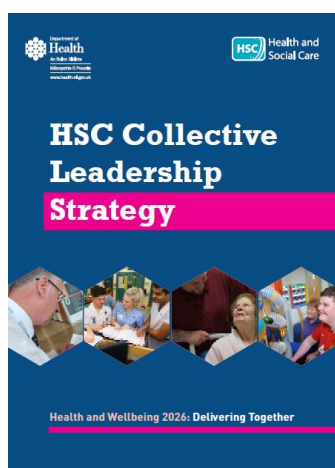
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Understanding people's potential	Line managers have development conversations with people to identify their potential and ensure learning and development needs are met	Learning and development opportunities are provided in line with the organisation's objectives and enable people to achieve their full potential	The organisation is flexible in the way it develops people, using innovative solutions that meet learning and development needs	People take ownership of their own learning and development to effectively support the organisation's objectives
Supporting learning and development	Development advice and guidance is well communicated throughout the organisation	People have the opportunity and support to put new skills and knowledge into practice	Investment in learning and development is evaluated to understand the impact on people's progression opportunities	Continuous learning is part of the culture of the organisation
Deploying the right people at the right time	Recruitment and selection is fair, efficient and effective and fits with the organisation's objectives	Resource planning is actively managed to support the organisation's objectives	The organisation uses succession planning to ensure critical roles are filled and people can progress	Leaders continually look to the future to identify and plan the capabilities people will need to deliver success

Improving

Building Capability within a Strategic and Corporate Context:-

Building capability within the Belfast Trust takes place within a strategic and corporate context. Ultimately investment in building staff capability is designed to build the organisation's capability to achieve its vision, its aim and to support the Trust in delivering on its ambitions and key strategic priorities as set out in its [Corporate Management Plan \(2018 – 2021\)](#), its [OD Framework](#) and in its [Safety and Quality Strategy](#) etc.

In addition the Trust is committed to the roll out of the recommendations and implications that flow from a series of [regional and professional strategies/frameworks](#) (see a sample below). Each of these key documents sets out the direction of travel for such areas as collective leadership, medical education and training in Northern Ireland, ensuring registered nurses are proficient practitioners, and the importance of learning and development for Social Workers and Social Care Workers. These key documents also provide a route map of how to 'get there' in the form of key recommendations and agreed milestones.



Improving

Internal Responses and Strategic Learning and Development Drivers:

The Trust in its revised Draft **Learning and Development Strategy (2018 – 2021)** which builds on its reviewed and evaluated predecessor, focuses on how learning and development can support the Trust in critically identified areas such as culture and leadership, safety and quality, learning ecosystems and digital learning, management skills, mandatory training skills and vocational progression.

'Supporting Belfast 2 Strategy – A Learning and Development Strategy for Support Workers' recognises the vital role of support workers in the provision of safe, high quality care. The **Supporting Belfast 2 Strategy**, which is a very positive example of effective partnership working between the Trust, Trade Unions and other key stakeholders has focused on such critical areas as 'essential literacy, numeracy and ICT skills', 'delivering accredited QCF programmes for Nursing Assistants', etc while the Trust is working in partnership with Trade Unions and others to scope the introduction of Apprenticeships. Both of these 'internal' strategies are important as they set out the strategic learning and development priorities for the Trust outside of the Clinical Learning and Development priorities which are agreed and delivered through professional leads and learning and development teams with responsibility for professional/clinical training.



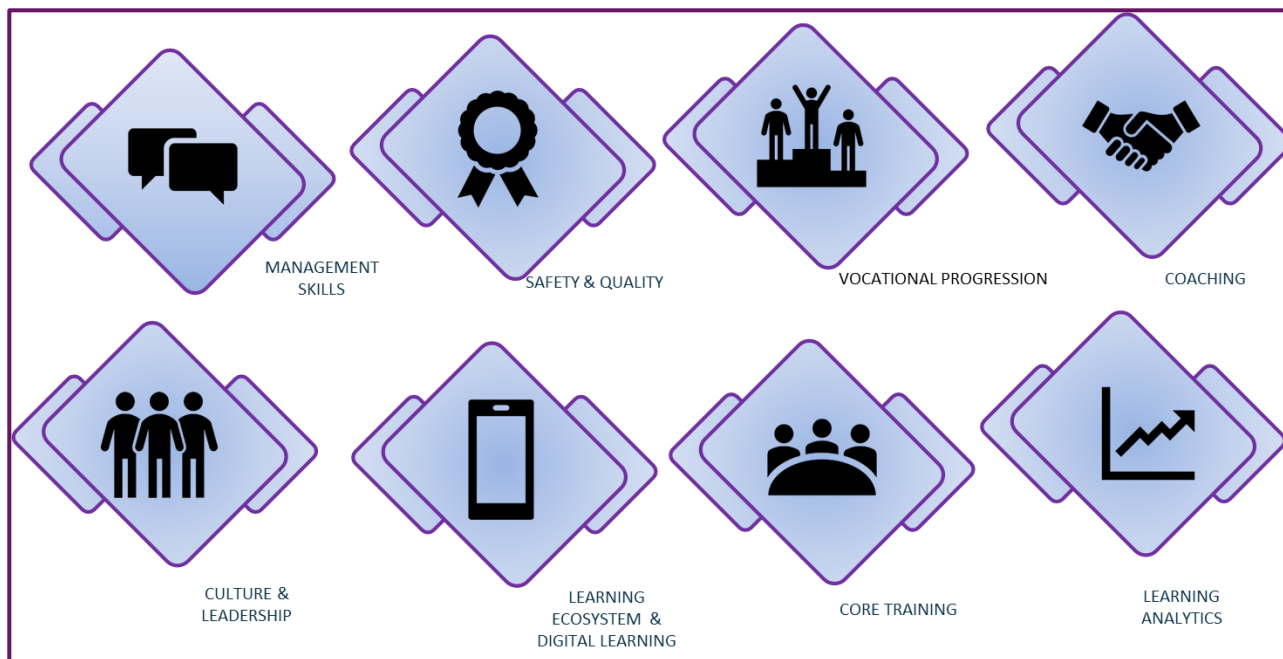
LD strategy slides
Apr.pptx



Supporting Belfast
Strategy 2016.pdf

Improving

At a glance the priorities contained within the Learning and Development Strategy include:



Before line managers have **development conversations** with their people to identify their potential and ensure learning and development needs are identified and met, they will be aware of the aligned corporate and top down level learning and development needs the Trust continues to prioritise and which managers are responsible for meeting. These priorities include **Mandatory Training**, the critical importance of **Continuing Professional Development** for all staff and especially those professional staff groups whose profession mandates them to undertake a prescribed minimum amount of continuing professional development each year. The Trust's commitment to continuous improvement and quality is evidenced by the high levels of investment and activity in training which supports the Trust's in '**Delivering Quality Improvement**' which continues to be a priority area for the Trust. For the Trust's Corporate L&D priorities see diagram over page.

For example the Trust recognises that statutory and mandatory training is of vital importance in the provision of high quality services to its patients and clients and is essential for effective risk management and the maintenance of required standards.

All employees, regardless of contract type, including those engaged in a regular volunteer capacity, are required to attend, within the specified time frames, all mandatory training as defined within the Trust's **corporate training matrix** or as identified specifically for their post. (Information on **Statutory Mandatory Training** can be found in the **Statutory Mandatory Training Policy and Statutory Mandatory Training matrix**).



Statutory
Mandatory Training

Improving

There are **four imperatives** that govern whether or not training is classified as Statutory or Mandatory:

1. A **statutory obligation** – where the law defines that training must be undertaken.
2. A **Health and Social Care mandate** – where a formal, official directive has been handed down within the Health and Social Care sector.
3. A **corporate mandate** – where the Trust has identified training as being essential to organisational priorities.
4. Training which is regarded as being **a requirement of individual professions** for their members to maintain core occupational competences. (Professions and service managers will determine and record separately what training is mandatory to cover core role skills).



Mandatory Training

The Statutory & Mandatory Training Policy is at the final stage of review and consultation and contains a revised version of the training matrix. It now lists the 10 core pieces of training that must be completed by all staff who work in the organisation.

This creates a clear and consistent approach for all staff and promotes accountability across the service – one of the Trust's core values. Mandatory training is a building block to ensure that we are one of the safest, most effective and compassionate health and social care organisations.

Improving

The table below shows an overview of our mandatory training requirements for all staff:

	Training Programmes	Frequency	Method	Lead Contact	Senior Responsible Officer*	Director
CORE (ALL STAFF)	Corporate Welcome	Once	f			Director of HR & Organisational Development
	Fire & Environmental Awareness	Annually	f/e/walk talk			Director of Finance & Estates
	Health & Safety Awareness	Once	f/e			Medical Director
	Adverse Incident Reporting	Once	f/e			Medical Director
	Data Protection	3 yearly	f/e			Director of Planning, Performance & Informatics
	Equality for Staff/Managers	5yrlly	f/e*			Director of HR & Organisational Development
	Manual Handling Theory (RVH & Mater)	2 yearly	f/e			Director of HR & Organisational Development
	Manual Handling Theory (MPH & BCH)	2 yearly	f/e			Medical Director
	Safeguarding Adults Awareness	Variable	f			Executive Directors/All Trust Directors
	Infection Prevention & Control for staff with direct patient care	2 yearly	f			Director of Nursing & User Experience
	Quality 2020	Once	f/e			Director of HR & Organisational Development

The importance of Continuous Professional Development - Information about Lifelong Learning

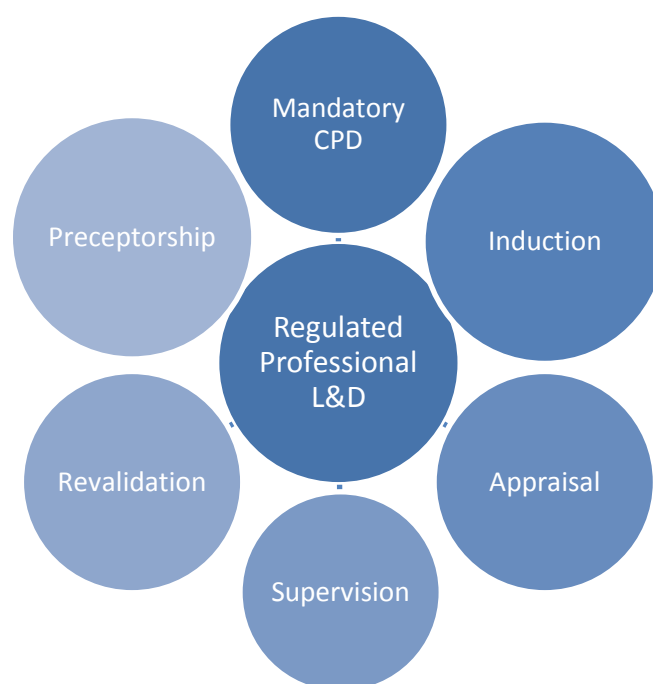
One of the Trust's values is 'Maximising learning and development'. The Trust is proud to be a learning organisation and encourages all staff to use their personal development plan to continuously build their knowledge and skills. Lifelong Learning which includes CPD is a journey of many steps and can be about learning on the job, learning from others as well as formal types of learning such as attending courses. Staff can talk to their line manager or they can contact the HR Learning and Development team for **advice and guidance** on all learning and development opportunities available to staff. Staff can also access the Trust's Learning & Development Portfolio 2018-2019 on the interactive PageTiger document [click here](#)

Regulated Professions – Requirement for CPD

Continuous Professional Development remains a requirement for professionally qualified staff to maintain an updated skill set in order to remain fit to practice, and to respond to the changing technologies and demands of health service delivery. Different Professional Bodies/Regulatory Bodies will have different requirements for their members to maintain their registration, e.g., The Nursing and Midwifery Council (NMC) stipulate a minimum of 35 hours of CPD every three years for nurses, whilst the British Medical Association (BMA) recommend that Clinicians acquire CPD 50 points through a variety of learning interventions on an annual basis.

Improving

The diagram below represents how the Belfast Trust is committed to the Continuing Professional Development of our staff. It highlights the range of approaches available for professional grades of staff working in the Trust.



Information about Leadership and Management development

Leadership and Management development continues to be a priority for the Belfast Trust. Developing leadership and management capabilities and capacity across the Trust is imperative and is an integral part of improving quality to enhance patient and client safety and people's experience of our services, while also being critical in the Trust's ambition of developing a culture of collective leadership. The scale and range of investment in leadership and management development has already been set out under Indicator 1: Theme 3.

The HR Learning and Development team offers a wide range of managerial skills programmes and specific details are contained within the [annual Learning and Development Portfolio](#). In addition, the Trust also offers a number of development programmes for Senior Managers through the service level agreement with the HSC leadership Centre.

The above are just some examples of the learning and development priorities for the Trust.

Such corporately driven priorities inform and provide a context for all development conversations between line managers and their staff. They also provide some critical success metrics for learning and development across the Trust such as compliance levels with mandatory training requirements, the number of nurses that are revalidated and the number of Doctors that are revalidated.

Improving

Corporate Welcome (Current)

The Trust recruits up to 2,000 new staff each year and is committed to providing them with a warm, professional and engaging welcome into the organisation as part of their onboarding experience. The Chartered Institute of Personnel and Development states that 'a well-designed welcome programme results in a positive first experience of an organisation. This means that the employee integrates into their team, becomes productive quickly and works to their highest potential.'

Research has shown that early assimilation to an organisation allows new employees to feel more connected to their employer in the early stages of their employment.

As well as running a Corporate Induction every eight weeks the Trust also completes an element of pre-boarding with all new employees through a digital corporate welcome. All new staff receive a digital document ([click link](#)) introducing them to Trust and some key information about the organisation including

- A welcome from the Chief Executive
- An overview of the Trust Values
- An introduction to the Senior Management Team
- An overview of the Key Priorities for the organisation



Since the launch of the digital publication in June 2017 it has been viewed by over 3000 staff (both new recruits and current staff) with extremely positive feedback:

'I feel really positive, motivated and inspired when watching this'

'Brilliant. Best ever.'

'It is great....really glad I watched it'

New Corporate Welcome (from April 2019)

Throughout 2018 the Trust has been reviewing how it welcomes new staff into the organisation (supports Indicator 8.1.1). The HR Learning & Development and Recruitment teams are leading on the development of a new approach to the welcome and induction of new employees joining the Trust.

The team are working in partnership with key stakeholders from across the Trust, statutory/mandatory training providers and the Corporate Communication's team to develop a 'Welcome to Belfast Trust' event that all new employees will attend on their first day of employment.



Improving

This event has been designed to improve the end to end experience of our new employees from application stage through to starting their first day in the organisation and will support the Trust in building capability across the workforce and deploying skilled and effective people at the right time to the right place (see Theme 21). It will also:

- Provide a more positive and engaging new start experience
- Introduce new employees to our vision, values and culture
- Support increased compliance with core statutory & mandatory training

Having described the strategic and corporate context for learning and development across the Trust, the challenge for all line managers is how best to work with their staff to ensure a balance is achieved between often competing learning and development needs while ensuring equality of opportunity for all. It is also important that all line managers ensure all staff continue to participate and fulfil their **mandatory training requirements**, while also ensuring staff continue to be able to **fulfil their role** effectively and safely through the provision of role related training and development including effective induction, on – boarding and re-boarding. This is particularly important for those staff whose roles and responsibilities continue to evolve and change.

The completion of such prioritised training is a critical part of ensuring staff feel welcomed and supported and they can continue to provide safe, effective and compassionate care and to do so in a manner which is in line with Trust values and best practice guidelines. The importance of ensuring all staff are supported to be **'role – ready'** once again will inform development conversations between line managers and the staff they line manage.

Improving

Our 2019 'As Is' Position for Indicator 7 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 19: - Understanding people's potential	Line managers have development conversations with people to identify their potential and ensure learning and development needs are met	Learning and development opportunities are provided in line with the organisation's objectives and enable people to achieve their full potential	The organisation is flexible in the way it develops people, using innovative solutions that meet learning and development needs	People take ownership of their own learning and development to effectively support the organisation's objectives

Theme 19: Criteria 1: Line managers have development conversations with people to identify their potential and ensure learning and development needs are met

As discussed earlier under Indicators 1 and 4, the Trust uses a range of approaches to align individual contribution with team and service objectives, and these same processes are used to ensure learning and development needs are identified and met.

At a Corporate Level, professional groups such as nursing and social workers undertake a **learning needs analysis** with their professional grouping to identify professionally based learning and development needs and priorities. The emerging agreed learning and development needs are then prioritised, commissioned and delivered as part of a professionally driven learning and development commissioning cycle. The Trust's approach to the identification of potential needs and ensuring professional learning needs are met will be described in more detail during Directorate Presentations, namely Nursing and User Experience, Children's Community Services and the Medical Directorate where the Professional Leads for these three professions are also the Directors for these particular Directorates as well.

At an individual level the **Staff Development Review** process (recently revised) continues to be a key critical process for aligning and agreeing performance expectations and offering line managers a ring fenced opportunity to sit down and have a development conversation with their staff to identify their potential and ensure learning and development needs are met. This conversation looks back in reviewing what learning needs were previously identified and have these needs been met effectively. It also looks forward – discussing how the agreed learning and development needs will be met in terms of timelines, methodology etc.

Improving

An output from the SDR is the production of an agreed **Personal Development Plan**. This PDP contains the person's agreed learning and development needs for the coming year, the activities planned to meet those needs and the hoped for and expected outcomes and impact from the staff member's involvement in the agreed learning and development activities.

The Staff Development Review Process is used for all staff groups across the Trust apart from Medical and Dental Staff (see below). As at February 2019 the Trust was 50% compliant with completion of SDR and Personal Development Planning against a DOH target of 77%.

It is important to note that while development conversations are planned and 'formal' they can also be informal and opportunistic, when a particular learning need arises and there is an opportunity to meet that need, line managers where possible will support their staff in availing of such opportunities when they present themselves. In such instances the member of staff or the line manager may initiate such a development conversation.

Medical and Dental Staff are involved in an annual **Job Planning and Appraisal Process**. As a result of these processes each Doctor and Dentist is working off a Job Plan which sets out agreed performance expectations and a PDP which identifies agreed learning and development needs. The undertaking of continuing professional development for Doctors and Dentists is seen as critical by their respective professional governing bodies and the necessary completion of training and development is required for revalidation purposes.

Other processes such as **supervision** (clinical, managerial and professional), **coaching** (which can throw up learning and development needs), team meetings, peer reviews, audits, **negative feedback or poor performance** arising from complaints, critical incidents review etc offer line managers with opportunities to have **development conversations** with their staff to identify their potential and ensure learning and development needs are identified and met. The use of such processes highlight the fact that development conversations are not one - off events and are ongoing throughout the year in response to opportunities. For example those that arise from a potential change in role or arising from service reviews, or from situations such as underperformance or disclosure from a staff member who is concerned about aspects of their role.

The '**potential**' part of the above outlined conversations is about encouraging the staff member to look forward and begin to identify their professional and personal aspirations, where they would like to be in a defined number of years, what post would they like to be in, what they would like to achieve over the next five years etc. Conversations around potential can often focus on the staff member's aspiration, ability and engagement/motivation levels or in CIPD terms AMO (Ability, Motivation and Opportunity). The potential part of these conversations can also afford line managers with an opportunity to share new developments with team members and the need for someone to take on new roles and new responsibilities. This is very much in line with the idea of stretch as covered under Indicator 6, designed to 'make work interesting'.

For an organisation aspiring to be high performing – potential is about working with all staff to support them in becoming the best they can be and in doing the best they can do so that they and others all benefit. It is about finding out what each person is best at or is passionate about and ensuring this potential is identified and optimised for mutual benefit.

Improving

Above and beyond this, high potential is different from high performance. It may include but goes beyond a person's ability to advance up the ranks. High potential employees are those who are likely to make a crucial contribution to the rest of the organisation and they are likely to become a key *driver* of organisational performance. [Hogan Assessments](#), a leader on personality assessments for business, defines high potential as 'the ability to build and lead teams that can consistently outperform the competition'; while [Deloitte](#) describes a high potential employee as one who has 'the potential, ability, and aspiration to hold successive leadership positions in an organisation'.



Theme 19: Criteria 2: - Learning and development opportunities are provided in line with the organisation's objectives and enable people to achieve their full potential

As in all learning and development within and across the BHSCT the **70:20:10 learning model** best describes the Trust's approach to ensuring learning and development opportunities are provided in line with the organisation's objectives to enable people to achieve their full potential. Most staff are recruited with the necessary competences, attributes and experience on taking up their new role (see Theme 21 below).

Once in post, most staff develop their capabilities through '**Experience**' – '**on the job and in the job learning**' during the course of doing their work—that is where they spend most of their time. In line with the **70:20:10 learning model** such experiential learning equates with the **70%** figure in the 70:20:10 learning model. The range and scale of **learning opportunities** available to all staff in such a large and complex organisation is one of the selling points of the Trust and supports both recruitment and retention of staff. Staff during the Trust IIP Healthcheck in 2018 regularly referred to 'the experience of everyday being a learning day on the job'.

The **20%** of learning in the 70:20:10 learning model comes from **Exposure** to others from mentoring, coaching or stretch assignments or involvement in project work (work or learning that is outside the norm/outside the day – job). If you take into consideration that in 2018 alone, **120 improvement projects** were undertaken across the Trust, all involving teams of people from all staff groups, it gives you a flavour of the learning opportunities that staff involved in project work can and do derive from their involvement in such projects.

Improving

All projects provide involved staff with wonderful opportunities to contribute, to share, to network and to learn the importance of working collaboratively as a cross - discipline team for the benefit of service users. If you take into consideration the numbers of staff that supported all the excellent work **Directorate LSITs** were involved with in supporting the Trust's work around 'People and Culture and IIP' you can begin to see the wonderful learning opportunities such involvement presents. Such '**project work**' provides staff with a wonderful opportunity to learn

about themselves, their directorate, their Trust and what best practice looks like in terms of how people are led, managed and developed across the Trust. Bringing back and replicating best practice from their involvement in the People and Culture work is tangible evidence of how their involvement is creating positive outcomes and impact for teams and services across the Trust.

If you take into consideration the **range of facilitative approaches** the Trust uses to support staff including **coaching (see below)**, **supervision**, **Preceptorship and mentoring**, it not only demonstrates how flexible the Trust is in the way it develops its people, but also how it uses innovative solutions which are tried, trusted and continuously improving to enable people to full their potential.

One to One coaching for Performance

Coaching is a **one to one confidential conversation** where the Coach facilitates the development of the Coachee (person being coached). Coaching is a positive form of development that helps individuals who are already performing well to reach their highest performance level. It is designed to be supportive and helps Coachees to deal with their particular work issue.

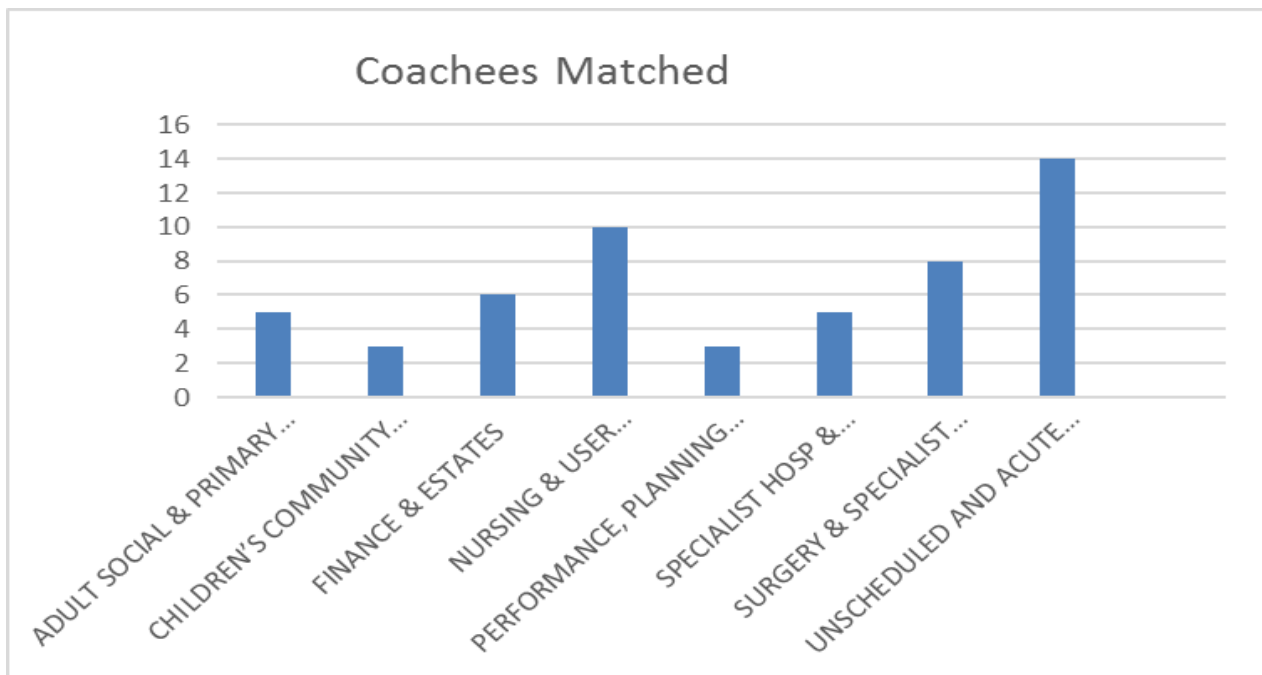
Approximately **327** staff from Band 1 upwards have availed of individual coaching sessions since 2016. Coaching sessions are available to staff that attend a range of our Leadership & Management Development programmes such as the 'Leading with Care' programme and the 'ILM accredited programmes'.

What Coachees (staff) have said....

- *"The questions asked by my coach were probing but not intrusively so"*
- *"I feel that my coaching experience enabled me to gain a greater self-awareness and helped me to work through resolutions for myself."*
- *"The coaching sessions have given me ideas on how I will resolve my current issues and helped me achieve my goals"*
- *"I hope that I can access this service again in the future as I found it very helpful"*
- *"My coach was excellent, she helped to guide the experience so that I got what I wanted out of the experience and more! – I would highly recommend coaching to all my colleagues"*

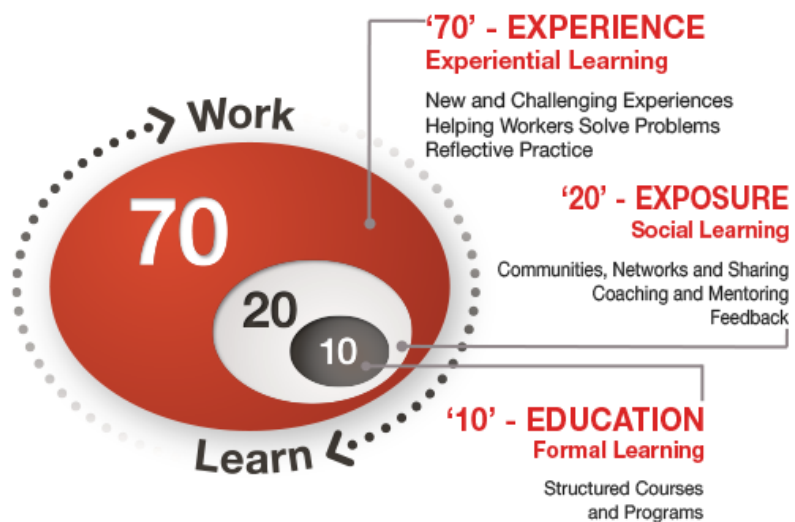
Improving

The chart below shows the number of coachees matched to internal coaches in 2018/19:



70:20:10 learning model

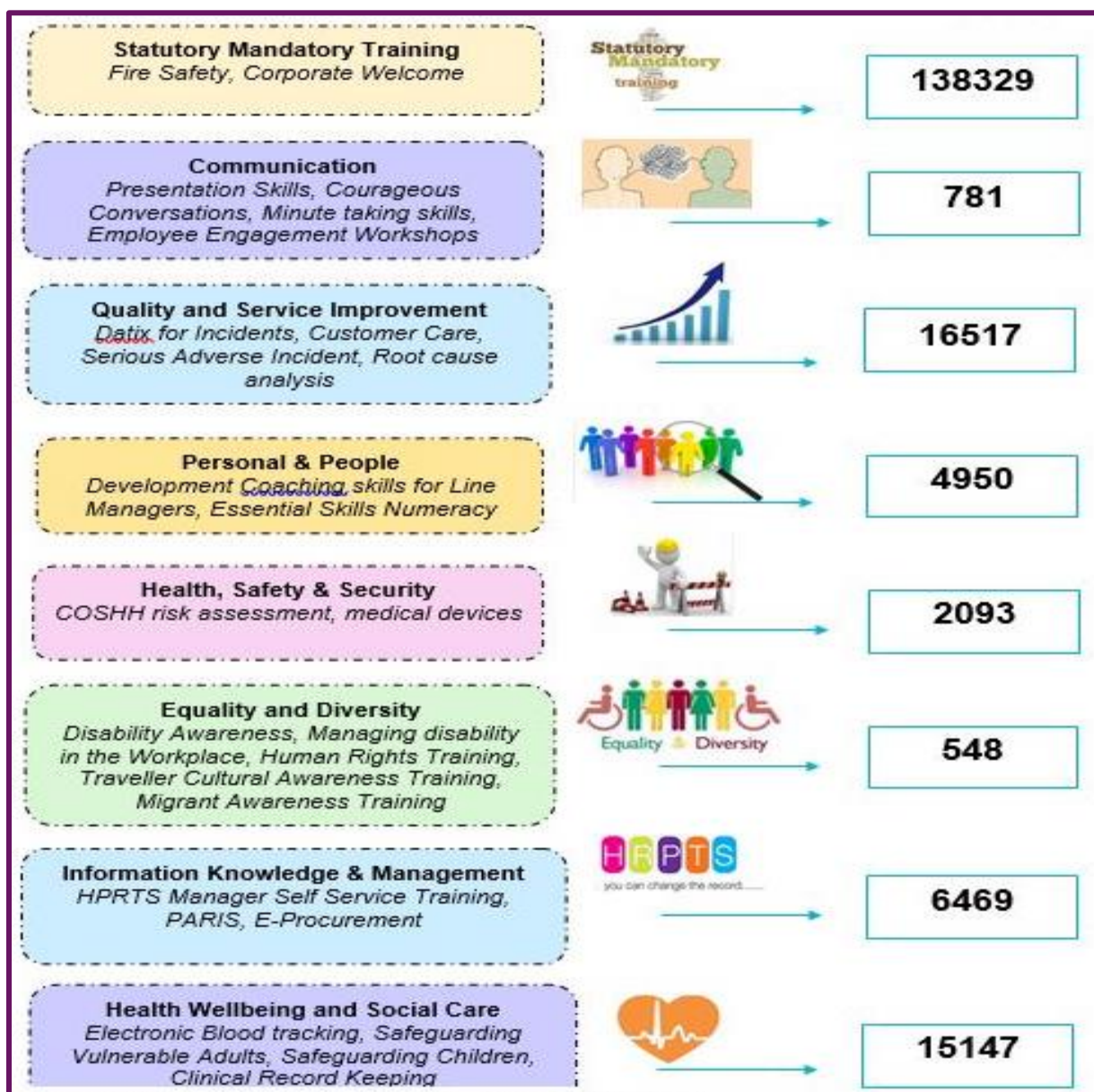
The remaining **10%** of the 70:20:10 Learning Model comes from **E**ducation, which involves participation in planned structured learning activities or approaches designed to help individuals or groups to do things differently or to do different things leading to more effective performance & results. When you consider the scale of investment the Trust makes in learning and development, allied to the scale of learning and development activity it is clear that **learning and development opportunities** are provided for all, which enables staff to achieve their full potential. The table on the next page gives you a flavour of the range and level of activity in the area of staff learning and development that falls under 'Education' delivered by Trust training teams.



© 70:20:10 Forum

Improving

Training Activity April 2016 – December 2018



The Trust works to provide learning and development opportunities in line with the organisation's objectives. For example one of the strategic priorities for the Trust as set out in its Corporate Management Plan for 2018 – 2021 is to 'work continuously to improve safety, quality and experience for those who access and deliver our service'.

To support its Quality and Safety Strategy objectives the Trust provided and supported over 13000 staff to complete Quality Improvement training across the 4 levels of the Quality Attributes Framework. This is evidence of our commitment to deliver continuous improvement.

To support the roll out of the Trust's 'Employee Engagement Framework' and to specifically address the pillar on 'Engaging Managers' within this framework the Trust has run '22 Engaging Managers Workshops' attended by 195 Line Managers, Team Leaders and Supervisors over the last three years.

Improving

The large scale investment the Trust makes in **leadership and management development** is planned and delivered to support the development of a culture of collective and effective leadership and management across the Trust.

The large scale investment the Trust has made in its **People and Culture** work including the well – embedded and always improving IIP LSITs, supports the Trust in its aspiration to achieve established level IIP accreditation in 2019 and advanced level accreditation in 2022.



We are satisfied with the opportunities we get to use our skills (66%)

Theme 20: Criteria 1: - Development advice and guidance is well communicated throughout the organisation

People are encouraged to take ownership of their own learning and development to effectively support the organisation's objectives. For example the NMC in its recently published '**Future nurse: Standards of proficiency for registered nurses**' stated 'registered nurses must continually reflect on their practice and keep abreast of new and emerging developments in nursing, health and care'. In the GMC's '**continuing professional development Guidance for all doctors**' it states 'The purpose of continuing professional development (CPD) is to help improve the safety and quality of care provided for patients and the public. Doctors are responsible for **personal learning** – 'You are responsible for identifying your CPD needs, planning how those needs should be addressed and undertaking CPD that will support your professional development and practice'. **Reflection - Good Medical Practice** requires you to reflect regularly on your standards of medical practice'.

While advice and guidance on learning and development is readily available for staff through their line managers, peers, learning advisers, various learning and development portfolios, through the HUB etc staff are ultimately responsible for taking ownership of their own learning and development to support them in achieving their agreed and aligned performance expectations.

Line managers are a readily available source of development advice and guidance for staff. Experienced line managers will know the range of learning and development options and opportunities that are open to staff and may well have been involved in such training themselves. Such advice may involve advising and signposting staff to learning and development opportunities which exist on the job as well as learning derived from working with others or lastly, involvement in formal off - the - job training. Line managers as part of development conversations, team meetings, one – to – one meetings with staff will alert and signpost staff to learning and development opportunities as appropriate.

Improving

The Trust has a well – understood and well – established ‘**infrastructure**’ to support staff learning and development across the Trust which includes the provision of advice and guidance as needed. For example the Trust’s own HR Learning and Development Team based in McKinney House provides a wide range of learning programmes, all of which are publicised through the Team’s annually produced Learning & Development portfolio (see below). This portfolio is also available on the Trust’s HUB. Other approaches used to communicate learning and development opportunities include the use of flyers, and communication through **learning and development personnel** within each of the Directorates (see diagram below). Courses can be booked through the HRPTS system.

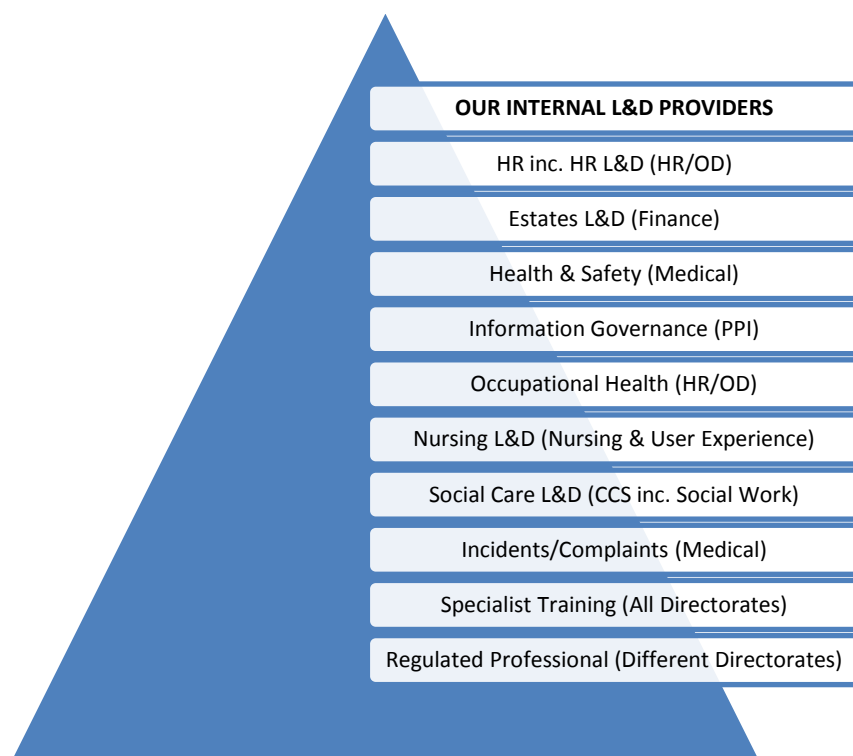
Key Document Learning & Development Portfolio 2018-19

The L&D portfolio sets out the courses, programmes and interventions provided to staff by the HR L&D department.

[Click here for portfolio](#)



The Trust has an extensive **array of teams** whose main function is the provision of learning and development training across the Trust:



Improving

In addition to the above 'personnel' there are other **in-house specialists**, such as **Nurse Development Leads, Clinical Educators, Practice Education Facilitators** and others whose primary role is to support the service to which they are aligned through the provision of educational support, guidance, advice and the provision of on the job mentoring and shadowing. In addition, there are many roles in the Trust in which some of the post holder's time is regularly used to facilitate learning and development to their peers and across services. For example, many senior clinicians deliver on education programmes for other staff and professions. Each of these internal L&D providers will use their own approaches to communicating advice and guidance to staff on what learning and development opportunities are available to them.

Digital - eLearning provides a flexible platform to support people development across the Trust, using innovative solutions to support staff in accessing learning at a time of their choosing through '**always - on**' learning for staff. The Trust currently uses '**always - on Digital – eLearning**' to deliver the majority of Statutory Mandatory training across services, as it allows staff the option to complete modules at a time and a place that suits them, rather than having to attend in-person training sessions which may be offsite and outside of their normal working pattern. Recruitment & Selection refresher training and Equality, Diversity & Human Rights training are both accessed online.



Programmes can be accessed through the eLearning site on the Trust hub and all staff have a **personalised learning page** which outlines the programmes they have completed to date. In addition to the Trust's eLearning offering staff can also access other Health and Social care programmes through the HSC Leadership Centre platform such as Quality 2020.

Across both platforms the Trust offer access to **89 different programmes** that support the personal and professional development of our staff.

The Trust has partnership arrangements through service level agreements with a range of external providers such as the Clinical Education Centre for Nurses and AHPs <http://cec.hscni.net/>, the HSC Leadership Centre for Leadership and Management Training <http://leadership.hscni.net/> while also working in partnerships with external organisations such as the Kings Fund, Universities and Belfast Met to support the provision of learning and development for its staff.

Staff will be familiar with most, if not all, of these external providers and advice and guidance on courses provided by these external bodies is well publicised through these organisations' own webpages.

Improving

Theme 20: Criteria 2: - People have the opportunity and support to put new skills and knowledge into practice.

As 70% of all learning and development that takes place across the Trust takes place in and on-the-job, staff have both the opportunity and the support to put their new skills and knowledge into practice. In nursing for example through the support of preceptors, mentors and facilitators, nurses just out of training are supported to transition from competent practitioners to being proficient practitioners through the provision of continuing support from mentors and preceptors.

Similar arrangements are in place for Social Workers. For example during a Social Care Worker's five-year registration period, they must complete 90 hours of **Post Registration and Learning Requirements** (PRTL) that focuses on five core Continuous Learning and Development Standards namely:

- Principles of Care
- Safeguarding (for example, Safeguarding Adults).
- Communication (for example, Recording Skills, Makaton).
- Social Care Skills (for example, working with Dementia, Capacity and Consent, Awareness of Mental Health).
- Health and Safety (see below).

<https://niscc.info/registration-standards/standards-of-conduct-and-practice>

Newly qualified social work graduates are transferred to the social work part of the register with 'a condition' on their registration that they complete an 'Assessed Year in Employment' (AYE). They are initially registered for one year and will not be a fully registered Social Worker until the AYE is successfully completed.

The AYE is designed to provide the foundation for career progression and professional development and comprises two core elements:

- Support to newly qualified Social Workers in their first year of practice following qualification to put their newly acquired skills and knowledge into practice
- A framework for formative and summative assessment of newly qualified Social Workers against the National Occupational Standards for Social Work. This will ensure that newly qualified Social Workers have made the transition from student to employee and have demonstrated sustained, continuous and effective competence in the workplace.

To assist with this transition stage employers are asked to allocate a '*managed caseload*' that incrementally increases during the year. In addition, professional/line management supervision is provided every two weeks in the first six months of employment and thereafter every month. Employers must confirm to the NISCC that the registrant is fit to practice as a fully accountable Social Worker before the AYE condition can be removed.

Improving

Throughout the year the Trust Social Work Learning and Development (L&D) Consultants host monthly support meetings. The focus is on support, building networks and providing short inputs on professional practice. These sessions provide an opportunity for the L&D Consultant to build relationships and to pick up on concerns that the new worker may be experiencing.

An exit questionnaire and an annual audit of the formative and summative assessments provides insight and governance into the AYE learning phase *'Attended all meetings-great experience. Was an opportunity to share information integrate with AYE Staff from other Services. Learned from different speakers- each month and of course enjoyed the lovely coffee and cookies. AYE Forum was a great guidance through my AYE Journey.'*

Training, such as mandatory training, provides participants with an almost instant opportunity to put their new skills and knowledge into practice as such training is role – related and practical – lifting, moving, handling for example.

Several of the learning and development programmes offered by the Trust are designed to enable staff to put their learning into practice. For example the 613 managers who attended the 46 Staff Reviewer Development Skills workshops over the last three years, would be able to put their learning into practice when conducting SDRs. The 208 line managers who participated in the 15 workshops on attendance management for managers workshops over the last three years are able to put their learning into practice when dealing with episodes of absence.

The 508 managers who participated in the 31 recruitment and selection workshops for managers over the last three years are able to apply their knowledge and skills when involved in a recruitment episode within their team. The 519 staff who participated in 48 ILM accredited programmes from ILM Level 2 to ILM Level 5 over the last three years are encouraged and supported to put their learning into practice as an integral part of their particular ILM programme. The 12373 staff who participated in the 345 Quality 2020 Level 1 Team Workshops run over the last three years have a greater appreciation of quality and the drive for continuous improvement within their team/service and the number of continuous improvement projects e.g. 120 improvement projects across the Trust over 2018 as well as a record number of 162 submissions for the Chairman's Awards is evidence of how investment in such training for staff is creating positive outcomes in terms of creating a culture of continuous improvement and continuously improving practice and patient experiences.

Improving

Key Document

Assistance to Study Policy

The policy aims to provide a mechanism to support staff in the acquisition of knowledge, skills and competence required to provide modern, efficient and safe health and social care. The policy ensures a consistent level of support is given to staff subject to service pressures.

Staff can avail of financial and paid/unpaid time off for studying.



Study Assistance
Policy.pdf

Improving

Our 2019 'As Is' Position for Indicator 7 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 21: - Deploying the right people at the right time	Recruitment and selection is fair, efficient and effective and fits with the organisation's objectives	Resource planning is actively managed to support the organisation's objectives	The organisation uses succession planning to ensure critical roles are filled and people can progress	Leaders continually look to the future to identify and plan the capabilities people will need to deliver success

Theme 21: Criteria 1: Recruitment and selection is fair, efficient and effective and fits with the organisation's objectives

'Recruitment isn't just an HR matter anymore. Getting it right – or wrong – is a bottom line issue too' (IIP Recruitment and Selection Model literature).

If you ask most organisations their top five issues, recruitment is invariably on the list. It's not surprising, a general skills shortage, and the lack of relevant experience, all at a time when organisations are waking up to the fact that people are their more valuable resources. Finding the right people and keeping hold of them is a key challenge facing all organisations currently and in the years to come. This section of the Storyboard sets out to describe what the BHSCT has been and continues to do to get recruitment right and ensure its recruitment process is fair, efficient and effective.

The Trust takes a strategic view to recruitment and selection

Belfast Trust recognises its staff as being fundamental to its success. A strategic and professional approach to recruitment processes helps to enable the Trust to attract and appoint staff with the necessary skills, behaviours and attributes to fulfil its strategic aims and objectives. This supports the delivery of exceptional and appropriate levels of care to our patients and users. It is therefore important that the Trust recruits and selects the right number of people, with the right skills, attitudes and values at the right time.

Improving

The Trust believes in providing equity in its services, in treating people fairly with respect and dignity and in valuing diversity both as a provider of Health and Social Care and as an employer. The Trust also recognises that to attract, develop and retain high calibre staff, the diversity of the workforce must be respected and valued. Selection in all cases will be objective and based on merit and the individual's ability to perform the job at the required standard.

The Safer Recruitment and Employment Group (a sub-committee of the Trust Governance Steering Group) promote and encourage a multidisciplinary Workforce Governance culture within Service and Corporate Directorates in respect of all aspects of Safer Recruitment and Employment. This group oversee recruitment activities across the organisations and take decisions to ensure the appropriate implementation of policies, procedures and protocols and in so doing minimise risk to patients, clients and staff.

The Trusts HR Workforce Governance team carry out yearly audits on recruitment activity to ensure that the standards set within the Safer Recruitment and Employment Practices are complied with.

In addition, the recruitment services is subject to audits by both the Regional Internal Audit team and RQIA to ensure the required standards of service are met.

All of these audits are invaluable and enable us to continuously improve the service provided.

The Regional **Recruitment and Selection Framework** has been developed to support these principles and are designed to ensure all appointments are made in accordance with merit principle.

Intrinsic to the Recruitment and Selection Framework and associated Procedures is the principle of equality and it commits the Trust to ensure equality is fairly and consistently applied to all job applicants throughout the recruitment process.

This new framework was launched on the 29th October 2018 along with a suite of 6 managers guides. The guides were developed in response to feedback from recruiting managers and the aspects of the process they most need guidance and assistance with. The framework and associated guides have received excellent feedback from our managers to date which is fantastic.



[http://www.hscbusiness.hscni.net/pdf/18023 - HSC Recruitment \(Web\).pdf](http://www.hscbusiness.hscni.net/pdf/18023 - HSC Recruitment (Web).pdf)

Recruitment and Selection Training / Support for Managers

Within the BHSCT it is important to us that anyone undertaking recruitment activities have the necessary skills to select candidates with the appropriate skills, behaviours and attributes. We have therefore included recruitment and selection training into our mandatory training matrix and managers are not permitted to undertake a recruitment exercise without having first been trained.

Panel members are required to fill in a governance form to confirm they have been trained to ensure this standard is met.

Improving

The Trust offers managers comprehensive recruitment and selection training and detailed below is a summary of the numbers trained from 1st April 2016 up to the end November 2018:



The team have sought new and innovative ways to support managers this year. Working in partnership with colleagues from the Recruitment Shared Services Centre (RSSC) we have delivered workshops directly to recruiting managers on the scrutiny, requisition, selection and pre-employment processes. Feedback from the sessions has been very positive and more workshops are planned.

Recruitment and Efficient and Effective / Innovation in Recruitment

Quality Improvement continues to be a focus for the team with several projects ongoing to improve both the manager and candidate experience of the service. This includes projects to improve the financial scrutiny/approval processes, requisition pathways, redeployment checks, the development of job descriptions and dealing with complaints. These projects are going extremely well and we hope to be in a position to expand their learning across the whole organisation during the next financial year.

The Belfast Trust continues to strive for excellence in its vision of being known as one of the safest, most effective and compassionate health and social care organisations.

The attraction of candidates to the Trust is one aspect of our overarching approach to talent management and is essential if we are to deliver high quality services to our patients and clients. Traditional methods of attracting applicants are no longer effective due to changing job seeker preferences and the development of new and emerging technologies. To address this the Trust have established a new attraction team to help promote the Trust as an employer of choice and to look at new and innovate approaches to this.

Improving



Talent in Health and Social Care

A new approach to talent management in the Belfast Trust



Attraction

- Use of digital marketing to build the brand
- Social media plan – LinkedIn, Twitter, Facebook
- International recruitment initiatives
- Regional collaboration
- Partnership development with education
- Showcase existing talent



Selection

- Process design and optimisation
- Innovation in selection – benchmarking exercise
- Testing as a means of selection
- Alternative skills assessment
- Personality profiling
- Values based recruitment



Induction

- Early engagement and candidate nurture
- Applicant tracking
- Onboarding



Retention

- Values based culture
- Performance management
- Continuous professional development
- Employee engagement



The nursing shortages in the labour market have had an impact on all Trusts in Northern Ireland and in response the team have expanded the search for talent to previously untapped markets. Labour markets where English is either the national language or a prevalent and widely spoken second language has been of particular interest. The Trust attended a number of national and international job fairs in Dublin, Glasgow and the United Arab Emirates.

These events have resulted in offers being made to band 5 nurses as follows:

- Dublin, March and October 2018 – 26 offers
- Glasgow, June 2018 – 10 offers
- Dubai, November 2018 – 33 offers
- Abu Dhabi, November 2018 – 37 offers



The attraction team have already made great progress this year so far and have supported the promotion of the Trust as an employer of choice in a number of ways. They have attended local job fairs and are working with the University of Ulster and QUB to develop our placement and graduate opportunities and promote them within the student population.

Improving

The team has also planned for and supported the regional HSC stand at this year's SkillsNI job fair. This interactive and inspiring two day event at the Titanic Exhibition centre is aimed at 14 to 19 years olds to help them achieve the career of their dreams. This year's Health and Social Care Zone show-cased a range of careers in the HSC and asked those attending if they wanted a "career that makes a difference" and invited them to "start their journey" with us. Approximately 8,000 young people attended the event over the two days and saw demonstrations from Laboratory, Emergency Department, Social Care and Ambulance Service staff to entice them into a career in the HSC.



Feedback from the event was extremely positive with 75% of visitors to the stand rating the Health and Social Care Zone either nine or ten out of ten. We also were given the "best stand" award for the event.

Trust Open Days

In early 2018 a different approach for the now annual Nursing Recruitment fair was agreed and focused primarily on improving two aspects of the recruitment fair;

- Awareness of the event and the number of candidates attending

The candidate experience in the application process

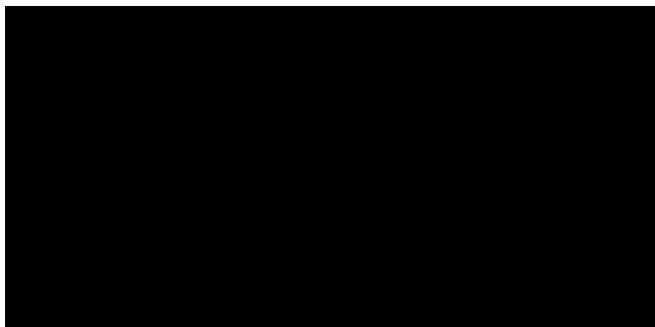
The Trust engaged a partner organisation, Health Sector Jobs, who designed unique branding for the event including the "Belfast Nursing Jobs" concept. This brand was accompanied at all times by the Trust's corporate identity. Health Sector Jobs designed and supplied digital artwork for all digital marketing associated with the event and used this in paid for advertising on a range of social media platforms



The Trust's communications team also used this artwork when promoting the event on the Trust's Facebook page and via its Twitter account and developed social media posts with embedded videos of nursing staff, speaking about their positive experiences as a Belfast Trust employee, and promoting the Trust as a great place to work and an employer of choice.

A radio advertising campaign ran in parallel with a 40 second commercial aired over a three local stations (Cool FM, Downtown Radio and Downtown Country) with a total of 52 spots per station.

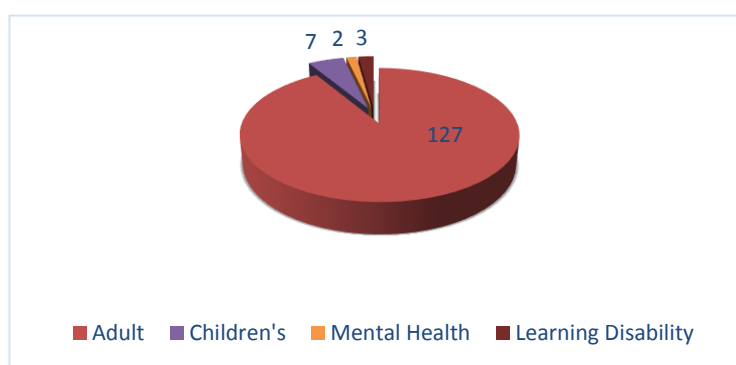
Improving



As an employer of choice and the overall winner of the 2016 Employers for Childcare family friendly awards, the event was an opportunity to showcase our progressive and attractive family friendly working policies and practises. A group of Play specialists and health care support workers from the Children's hospital set up a "family room" where our future workforce could be entertained while their parents/carers were interviewed.

Areas of jobs offered

139 candidates were successful at interview and offered band 5 nursing posts, with a further 14 people appointed to the waiting list. Candidates for band 3, 6 and 7 posts in the community were also interviewed and offered posts following the event.



This innovative approach has since been replicated to promote a bespoke event to recruit to a range of community nursing vacancies. A social media and radio campaign was launched in October and with the support of the resourcing team, 47 band 5 nurses and 33 band 3 nursing support staff were recruited.



Community Nursing

INSPIRING, CHANGING & REWARDING

RECRUITMENT OPEN DAY

Saturday 13th October
The Arches Health & Well Being Centre
Interviews: 8.30am-3.30pm

Community Nursing is Inspiring
Ready for a new direction in your healthcare career? Good – because in BHSCT right now we have a number of exciting opportunities within our Community Health Nursing Teams:

- Band 6A, Band 7, Band 6, Band 5*, Band 3 across District Nursing
- Nursing Home Support Team
- Acute Care at Home Team
- other Specialist Community Teams

Community Nursing is Changing
Community healthcare services are transforming, with a greater focus on prevention and self-care. So your knowledge and expertise will play a significant role in the lives of patients – and their families.

Community Nursing is Rewarding
You will be employed on A/C terms and conditions, with generous holiday allowances and work/life balance opportunities. You'll also have access to professional learning and development, and a range of health and wellbeing initiatives.

All applicants must hold a full driving licence and have access to their own car.

We particularly welcome applications for Band 5 Posts from registered nurses, new registrants and nurses who will have qualified by July 2019.

For more information and to apply, visit hscrcareers.com

Closing date: Thursday 4th October at 4.0pm

*Band 5 Posts only. Applications accepted up to and including the Recruitment Open Day.

For informal enquiries contact: deborah.mclaughlin@belfasttrust.hscni.net

WE ARE AN EQUAL OPPORTUNITIES EMPLOYER



Belfast Health and Social Care Trust
caring supporting improving together





INVESTORS IN PEOPLE | 

Improving

In addition to this the team have supported social care colleagues in the Children's Community Services directorate and the Adult Social and Primary Care Directorate to organise and run their own events to fill a large number of vacancies. 38 and 110 respectively.

The introduction of "Open day" style events in more areas of the Trust has been welcomed as candidates can attend, apply, be interviewed and receive an outcome from that interview all in one day. In an increasingly competitive labour market this one stop shop approach is preferable for candidates and can make the difference in their choice of employer.

Our desire to be innovative and improve how we attract staff is huge and we have during December 2018 appointed a marketing professional to join our attraction team. This professional will be of great support to the team and will work with our hard to fill areas to help sell the Trust as great place to work through a multitude of channels.

We still have a lot to achieve in terms of attraction but we are delighted to now have a dedicated team to focus on this and are excited in terms of the opportunities this presents us as an organisation.

The table below shows the activity for the last two financial years:

	No. Job Requisitions/Posts	Time to fill (days)
2016-17	3199	167
2017-18	3760	125
Difference	561	-42

The data shows that there was an increase in job requisitions/posts recruited of 18% whilst at the same time 25% reduction in the time to fill. Thus, our recruitment is more efficient whilst throughput increases.

Transformation Posts

The Department of Health has temporary monies to help with innovative new models of service.

The Recruitment team in our Trust, working with clinical services, BSO Recruitment Shared Service Centre and others have rolled out a slick process for getting these posts 'shovel ready' in short time frames.

Join our team and help make a difference

Social Workers

Family and Child Care



The Social Work team within Belfast Health and Social Care Trust is committed to providing quality services to support children, young people and their families. We work with and support local families so that children can live in a safe, nurturing environment and we now have a number of opportunities to join our growing team.

The successful applicants will be primarily responsible for managing their allocated caseload, undertaking assessment and case planning and also be responsible for the direct discharge of statutory duties in respect of children in need.

You will be currently registered with the Northern Ireland Social Care Council (NISCC) (Social Work part of Register) or have current registration with one of the Social Care Regulatory Bodies in England, Scotland or Wales and be eligible to register with NISCC.

Rewards and benefits should be added here, including the line, 'We support our staff in their professional development through training, supervision and learning.'

For more information and to apply, please visit hscrecruit.com

Closing date for applications: **Thursday, 2nd August 2018**
Interviews will be held: **week beginning 20th August 2018**

WE ARE AN EQUAL OPPORTUNITIES EMPLOYER

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   INVESTORS IN PEOPLE

An expedited recruitment process for Transformation Posts

40% of 325 Transformation Fund Roles in active Recruitment

180 Transformation fund Roles Pending Final Confirmation

From 12 November 8 Transformation Recruitment Workshops took place with 22 managers in attendance

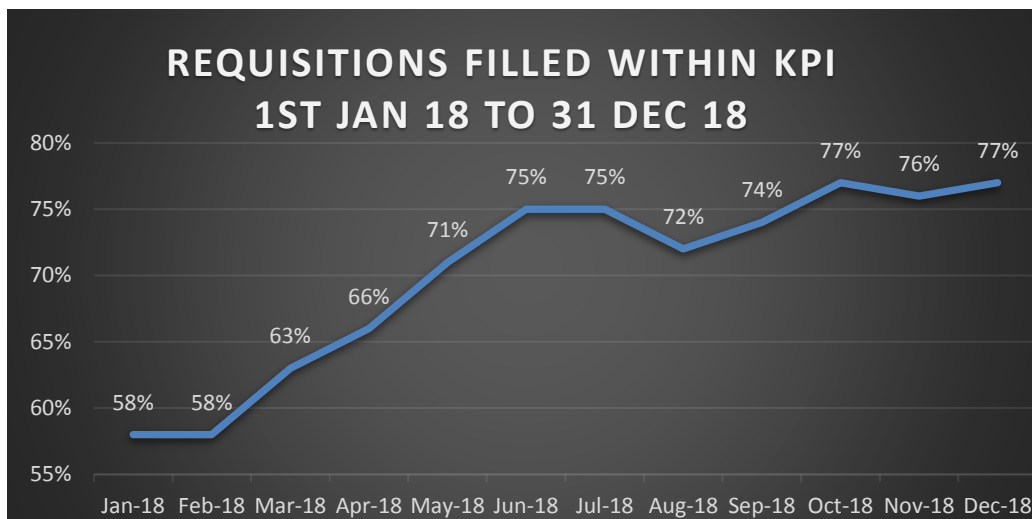
Improving

All transactional recruitment work is carried out by Shared Services

The Trust has undergone a significant transition within recruitment and all **transactional activity** for posts excluding Medical/Dental and Senior Executive has been moved to a Regional Recruitment Shared Service Centre (RRSSC). The Shared Service Centre has been established to standardise the process for all organisations whilst recognising that there is a diversity of need, to deliver real, measurable efficiencies & performance improvement and to ensure all Health and Social Care organisations receive a Shared Service that not only meets but exceeds expectations and is responsive and proactive

To realise this and to ensure activity and performance is monitored, the Trust has agreed **Key Performance Indicators with the RSSC**. All stages of the process are documented and are subject to ongoing review via monthly customer forum meetings with Head of RSSC and the Senior HR Manager for Recruitment to identify key issues and hotspots. Service Managers from across the Trust are also involved in this forum to enable them to help influence the shared services teams performance.

Alongside the important developments within the Trust we continue to work with our regional colleagues in improving the processes that cross organisational boundaries. The team This collaboration has led to the performance of the RSSC has consequently improved over the twelve months to December 2018 by almost 20%.



Improving

Value Based Recruitment



Research strongly indicates that if you appoint staff using a value based assessment, then their success in the role will be much higher and the level of attrition will be lower. This will therefore have a positive effect on our patients and customers. In addition, reports such as the Francis enquiry stated the NHS should recruit in line with the values.

Within the Trust our values are promoted on all Trust job descriptions and specifications and the retained recruitment team ensure that this and other standard messages are included before being forwarded to the BSO for processing.

In addition, managers are encouraged to question and measure staff on the Trust values during their recruitment and selection training.

The Trust have completed a pilot on value based recruitment within the CAMHS service and within nursing auxiliary recruitment. This pilot provided

managers with additional training and support. A survey was undertaken with both applicants and managers of this pilot and the feedback was really positive. In addition, staff appointed via this approach have been better suited to the service and there has been a reduction in attrition.

We are keen to further develop our value based approach to recruitment further within the Trust and our new attraction scheme are currently working on a proposal on how we can expand and spread across the Trust.

Improving

Theme 21: Criteria 2: Resource planning is actively managed to support the organisation's objectives

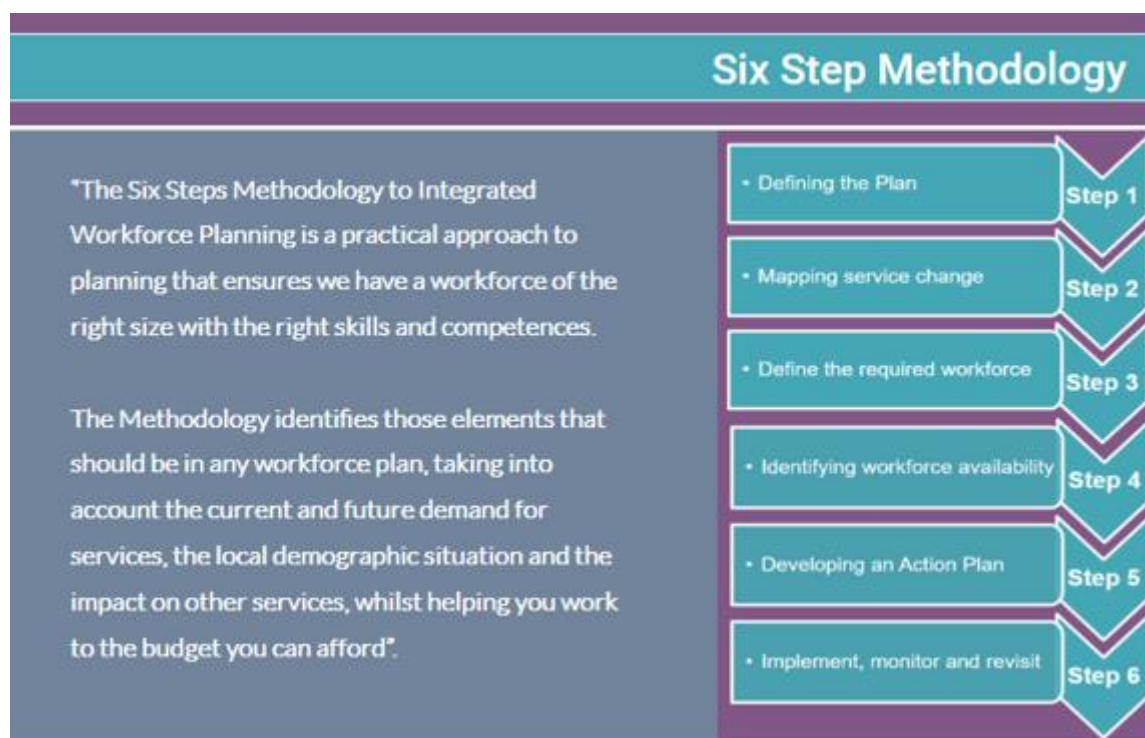
Our Workforce Planning Approach

In relation to resource planning the Trust has adopted a **six step approach to workforce planning** in line with the Regional HSC Workforce Planning Framework.



The six step approach to workforce planning was first launched in 2009 when the Department of Health commissioned a number of staff to undertake a Post graduate certificate in strategic workforce planning. The course was delivered in conjunction with Skills for Health and Thames Valley University. A second cohort of students are currently undertaking the course with a further cohort commencing in the new year. The Belfast Trust's HR Modernisation and Workforce Planning Team have delivered in-house Awareness Training for Managers and are currently developing an e-learning awareness programme for managers who are wishing to develop a workforce plan for their service area.

Below is a snapshot of the six step methodology:



Workforce planning activity is currently underway within the Specialist Hospitals and Womens Health Directorate in readiness for both the new Maternity Hospital and the new Children's Hospital which are planned to open in 2022 and 2023 respectively.

Improving

DELIVERING CONTINUOUS IMPROVEMENT



Overview of this Indicator

This section of the Storyboard will illustrate how the Trust's commitment to continuous improvement is integral to its values, its revised corporate themes and its OD priorities.

Theme 22: Improving through Internal and External Sources

We will show how the Trust uses learning and feedback from a wide range of internal and external sources to learn and improve its performance.

Theme 23: Creating a Culture of Continuous Improvement

We will show how the Trust continues to work with its staff and external sources to create a culture of continuous improvement where people are encouraged to come up with new ideas and approaches to improve service user experience and outcomes.

Theme 24: Encouraging Innovation

We will show how the Trust continues to encourage, support and facilitate innovation at individual, service and organisational levels.

Improving



Indicator 8: Delivering Continuous Improvement

There is a focus on continuous improvement. People use internal and external sources to come up with new ideas and approaches, supported by a culture that encourages innovation.

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Improving through internal and external sources	The investment in people is evaluated and the results are used to improve performance	The organisation uses information from internal and external sources to improve how it manages and develops its people	Leaders look beyond the current business environment to learn from the outside world and bring in knowledge to improve the organisation's performance	People take responsibility for continuous improvement. They look to the world around them for new ideas and innovation then deliver change in line with this
Creating a culture of continuous improvement	People are aware of how they can contribute to improving their performance and the ways of working within the organisation	People are encouraged to try new approaches and learn from their efforts, mistakes and successes	People are supported by their leaders to take reasonable risks when trying new and innovative approaches	The organisation nurtures innovation and acts quickly in response to new ideas and opportunities
Encouraging innovation	People are encouraged to come up with new ideas	People work together to generate new ideas	People are passionate about innovation and volunteer new ideas	New ideas deliver positive outcomes for the organisation

Improving

Our 2019 'As Is' Position for Indicator 8 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 22: - Improving through internal and external sources	The investment in people is evaluated and the results are used to improve performance	The organisation uses information from internal and external sources to improve how it manages and develops its people	Leaders look beyond the current business environment to learn from the outside world and bring in knowledge to improve the organisation's performance	People take responsibility for continuous improvement. They look to the world around them for new ideas and innovation then deliver change in line with this

Theme 22: Criteria 1: The investment in people is evaluated and the results are used to improve performance

As was demonstrated under Indicators 1 and 7 above, the Trust's investment in people is substantial in actual and relative terms. The Trust continues to evaluate its investment in people and the results of all reviews and evaluations are used to improve performance at individual, team and organisational levels. Evaluation of the Trust's investment in people includes, but goes beyond evaluation of learning and development. For example the Trust has reviewed, updated and improved several of its key strategies, policies and/or people processes such as the [Trust's Employee Reward and Recognition Policy](#), the [Trust's Leadership Conference](#), the [Chairman's Awards](#), the [SDR process](#), [Employee Health and Wellbeing Strategy](#) and [Safety and Quality Strategy](#) since its last review in 2016

Improving

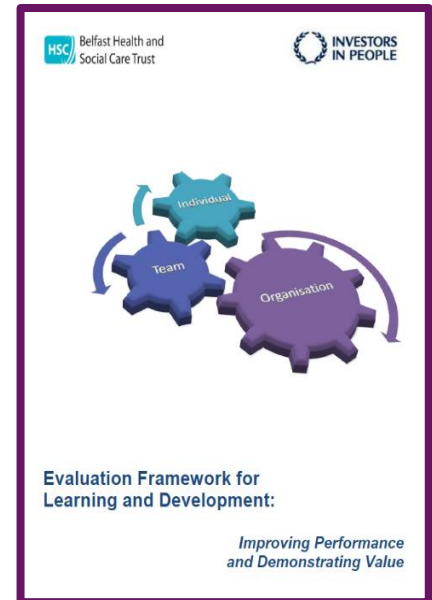
Evaluation of Learning and Development within a Strategic Context – what you need to know: -

The Trust in its **Evaluation Framework for Learning and Development – Improving Performance and Demonstrating Value** - sets out the broad principles regarding evaluation and best practice guidance to ensure that the processes the Trust uses to review and evaluate its investment in learning and development are robust and provide sufficient direction especially to those who are responsible for the delivery of learning and development activities.

The Evaluation Framework reinforces the importance of ensuring all learning and development is designed to support individuals, teams and the organisation in achieving objectives and priorities. This Framework sets out the importance of evaluation at individual, team and organisational levels with the ultimate aim of bringing about improvements in performance at individual, team and organisation levels.



Evaluation_Framework
ork Sept 2012 Finalv



The Trust's **Learning, Development and Education Committee** (which is made up of a range of senior managers and trade union representatives) is corporately responsible for ensuring the Trust's Learning and Development Strategies, both the Trust's '**L&D Strategy for 2016 – 2018**' as well as the Trust's '**Supporting Belfast Strategy 2016 – 19**' are fully implemented. The committee requests regular updates on progress against agreed priorities for both of these Strategies from those with corporate responsibilities for the Strategies as part of their accountability and good governance arrangements for the successful roll – out of both of these strategies.

Improving

Evaluation of the Learning & Development Strategy 2014-17 – The investment in people is evaluated and the results are used to improve performance

The updated Learning and Development Strategy “Growing our People today for tomorrow” was implemented in 2014 after extensive consultation with staff and other stakeholders. This was evaluated with qualitative and quantitative data including feedback from key stakeholders across the Trust.

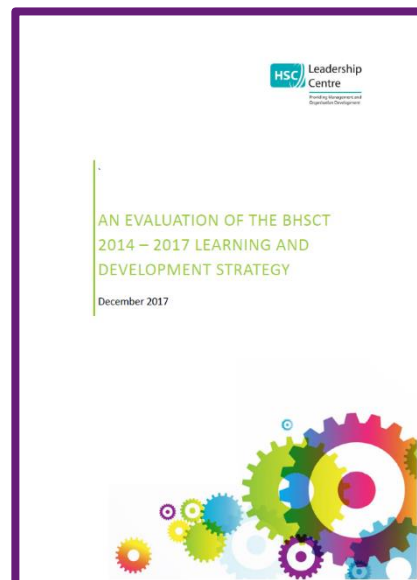
The Evaluation Report that was completed independently by the HSC Leadership Centre found that 35 (67%) of the key strategic actions within the L&D Strategy implementation action plan were completed by March 2017, and that a further 15 (29%) were started with work continuing. Only two priorities were not met or activated.

Looking forward some of the improvement recommendations contained within the evaluation report included:

- The 2018 – 2021 Learning and Development Strategy which is designed to support the Trust’s Corporate Management Plan for 2018 – 2021 should have a clear focus on supporting the Trust in realising its new ambition of being in the top 20% of UK Health Trusts by 2020.
- The 2018 – 2021 L&D Strategy should focus on supporting the Trust’s Quality Improvement Strategy, embedding a culture where collective leadership can thrive, and building research and innovation capabilities.
- The Trust should further develop initiatives commenced but not completed during the existing Strategy. This included engaging with staff to address the perceived or actual gaps in the learning and development provision for middle band staff at bands 5 and 6.
- Continue to improve access to Learning & Development through investment in technology and developing new approaches to learning
- Update the Learning & Development Evaluation Framework in line with the 2018 – 2021 L&D strategy and also the learning and development in the area of evaluation.
- Enhance the presentation of the Strategy to ensure all staff can understand what it is trying to achieve and how it plans to deliver on the key priorities contained within the Strategy.

The above recommendations along with other recommendations contained within the Evaluation Report informed the management plan for the HR Learning & Development Department, whilst also informing the Trust’s 2018 – 21 Learning & Development Strategy.

The Learning, Development and Education Committee is also responsible for identifying those L&D programmes (which it deems to be of high strategic importance) which it requires to be formally evaluated. For example over the lifetime of the last L&D Strategy the Committee requested that the following programmes be formally evaluated, Leading with Care and Succession Planning. Having outlined the strategic context, framework and approach used for evaluation, the next section gives you a flavour of how the Trust has evaluated its investment in people and how it uses feedback and learning derived from such evaluations to continuously improve its performance.

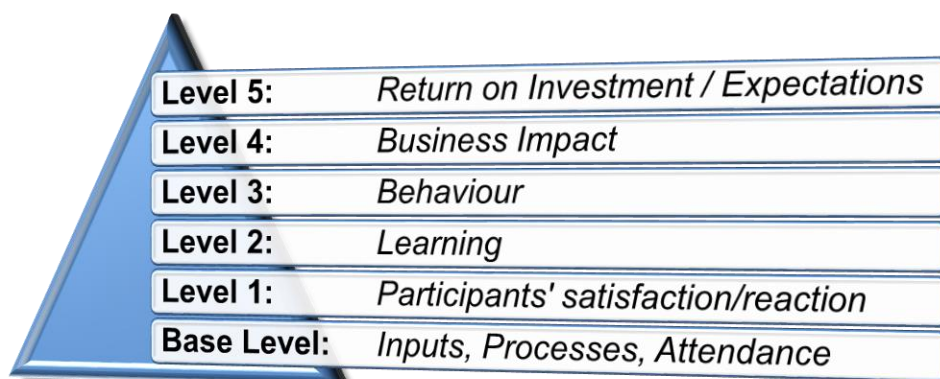


Improving

The Trust uses Kirkpatrick Evaluation Model as its preferred framework for the evaluation of all its investment in learning and development.

<https://www.mindtools.com/pages/article/kirkpatrick.htm>

For example all in-house HR Learning and Development programmes from April 2016 – December 2018 were evaluated at **Level 1 – Reaction Level**. Achieving a **98%** satisfaction level from the **11,000+** staff attending programmes over the last three years is seen as a very positive source of '**entry level**' **feedback** to Trainers and the L&D Team. Nearly 8,000 staff completed stand-alone eLearning in the same period and once again the reaction level feedback has been positive and affirming.



Programmes are also evaluated at **level two – learning** where participants are asked to identify what they have learned, in terms of improved knowledge, skills and attitude.

Below are some examples of L&D programmes which have been evaluated at levels 2, 3, 4 and 5 using Kirkpatrick's evaluation model

Directorate / Team level Review and Evaluation

At Directorate level, investment in people is evaluated by monitoring the Directorate's performance against key performance metrics such as 'delivering on its service level agreements with the commissioner', 'the Directorate's performance against its financial targets including the target of staying within budget and contributing to efficiency savings contributions'. Another key impact metric at individual, team, service and organisational levels is the range and extent to which teams across services and directorates are contributing to 'continuously improving quality' and thereby improving the quality of service user experience and the provision of safe, effective and compassionate care to all service users.

Improving

Investment in leadership and management development continues to be measured against the introduction of collective leadership structures and arrangements across the Trust and ultimately the improved and improving performance of divisions and service delivery units. Performance is people metrics such as absenteeism, compliance with mandatory training requirements, employee engagement ratings are all monitored and reported on as part of the Trust's internal accountability review cycle with a formal mid-year and year-end review.

At a Trust level the impact of the Trust's investment in staff learning and development can be demonstrated through other macro metrics such as: -

- The success of the Trust in progressing its modernisation and transformation programmes.
- Staying in budget and meeting its efficiency saving targets.
- Delivering on its Service Budget Agreements with the HSCB across all programmes of care.
- The Trust's performance against the objectives as set out in its Corporate Management Plan.
- Positive trend data in the staff surveys
- Achievements of External Recognition, Accreditation and Awards
- Achievements as set out in the Trust's Annual Report and the Trust's Annual Quality Report
- Development of a culture which reflects the fundamental building blocks of a healthy culture as set out in the Kings Fund Culture Assessment Tool, a culture which reflects the principles, philosophy and requirements of the IIP standard, and a culture which has collective leadership at its core.

Institute of Leadership & Management Programmes refreshed

The Trust provides a suite of ILM qualifications ranging from Level 2 through to Level 5 that are focused on culture, values and behaviours, continuous improvement, collaborative working and further developing capability.

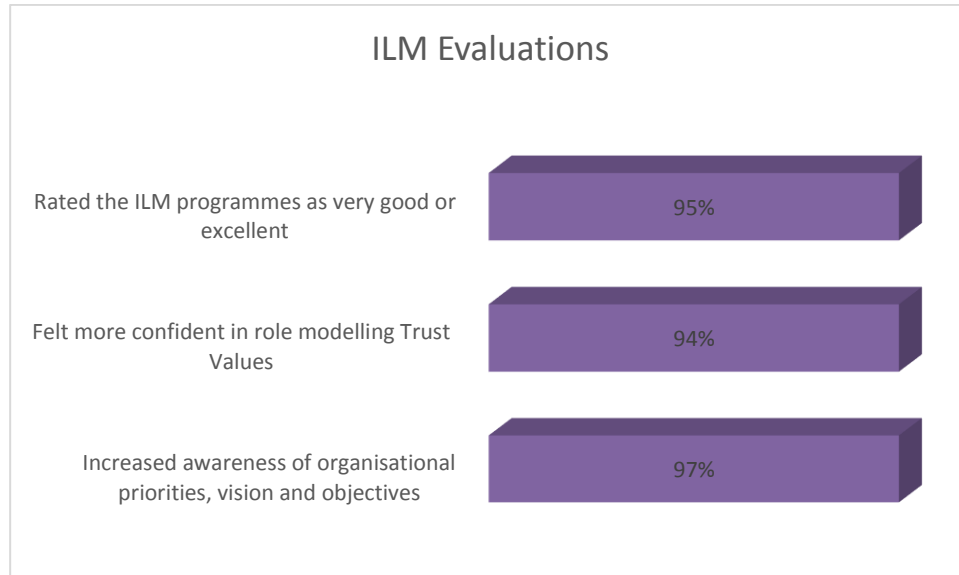


A total number of **411** staff participated in ILM Accredited Leadership and Management Development programmes over the last three years. A summary of the ILM programmes from April 2016 shows **400 out of the 411 (97%) participants who commenced the ILM programmes** achieved an accredited ILM qualification from their participation on the various programmes - a very tangible learning outcome and a vital part of the Trust's commitment to developing collective leadership across the Trust.

Qualification	Participants
ILM Level 2 – New	106
ILM Level 3	111
ILM Level 4 – New	80
ILM Level 5	114

Improving

The reaction and learning outcomes from the ILM programmes were very positive and included the following examples:-



Learners also talked about the following learning outcomes (Level 2 Evaluation):

"I have learned the importance of engaging with my work colleagues in order for them to be working to their full potential"

"Realised how important it is to develop the management skills that will allow me to reach my full potential as a manager and even as an individual to achieve aims, objectives, standards and a successful, strong reputation as a manager within Belfast Trust."

"I now understand the importance of positive behaviours and promoting the values to help deliver positive results."

In level 2 and level 3 evaluation terms, participants on ILM programmes talked about changes and improvements in their knowledge, skills, attitude, behaviours and practice.

"I have now undertaken new courses to give me a greater knowledge of how to improve my people skills, my leadership skills, how to manage performance including how to address and get the best out of underperforming staff."

"I now feel more confident taking on challenges and encouraging others to try new approaches. I understand the change management process and can see why previous changes have not worked! I am excited about trying out new innovative approaches and engaging my team to do the same!"

Improving

There is a persistent focus on continuous improvement within learning and development. All the Trust's ILM courses are built around the 70:20:10 model of learning which has helped the Trust through its 'ILM Graduates' to create an attitude and culture of continuous learning and improvement through the use of work based projects, changes in practices, completion of audits etc. These are just some examples of how and where evaluation of investment in learning and development is creating positive outcomes for participants and their teams and ultimately positive impacts for patients and service users.

The ILM Level 5 was **revised** in 2017 as a result of evaluations from ILM programmes which highlighted the need for participants to become more aware of **how 'they can personally contribute to a culture of continuous improvement'**. Participants on the ILM 5 programme are now encouraged to get involved in a continuous improvement project during and post ILM training. Feedback from participants evidences **'improvements in personal effectiveness or an improvement in how they lead, manage and develop people and processes'**. **'24 service improvement projects'** have now been initiated as a result of participants involvement in the revised ILM programmes, activities which support the transfer of learning through the application of learning into real life work situations and challenges.

Below are two **case studies** which illustrate improvements in individual performance and service impact terms:

"A service Improvement – A how to and not to!" – an example of how one member of staff tried to implement a service improvement in addressing the parallel rotas between Belfast City Hospital tower block and the NI Cancer Centre. The first approach failed and the learner then, through the ILM programme, developed their capability to retry using new approaches to achieve their project objectives and they learnt from their mistakes. The service improvement project was then started for a second time, using Kotter's 8-step change model, and with a more successful outcome that improved the individual's performance and the effect on quality patient care.

"Getting comfortable being uncomfortable" – this Project was an example of how one member of staff used the learning from their ILM programme to develop greater personal effectiveness and improve their performance in their specialist physio department. In particular this project highlighted the value they derived from reflecting on their practice as it helped them to increase their self-awareness particularly in the areas of their approach to problem solving and leadership.

This self-reflection has allowed the learner to go on and commence regional work on a spinal and lower back pain pathway borrowing from pilots in England, best practice research. This participant as a result of her project work has now achieved clinical consensus for their approach from clinicians across NI. The learner feels that the ILM programme which included the service improvement project, has allowed them to become a more effective leader, while also benefitting colleagues, the team and service users.

Improving

Quality Improvement programmes evaluated and improved in 2017-19

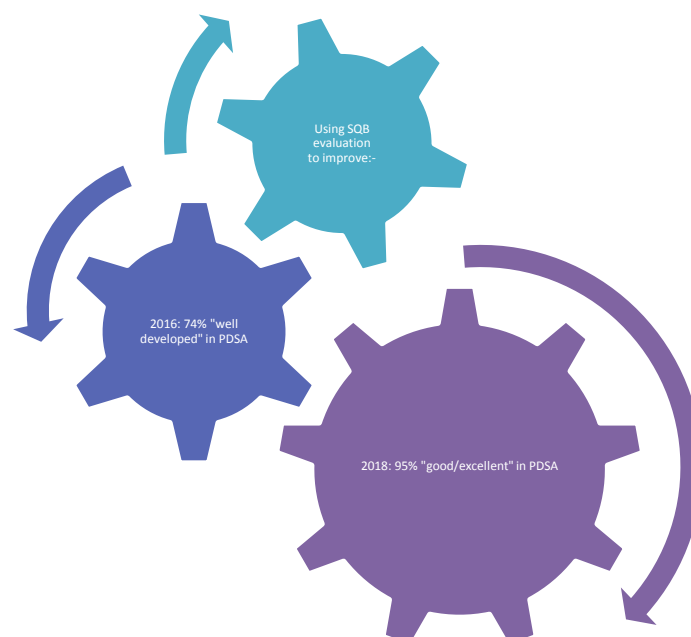
Safety Quality Belfast (SQB)

Safety Quality Belfast was evaluated in August 2016 and changes were made to subsequent programmes. The evaluation was used and the results were used to improve performance. This included front-loading some of the digital learning (IHI modules) before the course commenced and further improving in-programme support.

Improved performance was then tracked. For example, Plan-Do-Study-Act (PDSA) methodology has been employed throughout our QI programmes. The 2016 evaluation found that what was most notable is the increase of participants who feel confident in explaining and using the PDSA cycle to make small step changes to care and services. Before the programme only 16% of the participants felt they were “Well Developed” in this area but Post programme this increased to 74% an improvement of 58% across all participants, which in turn improves the Trust’s capability and capacity in relation to its ‘continually improving quality’ agenda.



Evaluation of the 2018 SQB programmes found that learners who had a good/excellent knowledge of implementing a PDSA cycle was 18% pre-course and this jumped to 95% after the course – a very impressive rise of 77% in knowledge gain over the course of the programme.



Improving

Evaluation of the 2018 SQB programmes have resulted in further changes and improvements to the quality of the programmes themselves and the quality of the participants experience on the programmes. Some of these improvements are set out below.

Mentors, coaches and teaching faculty

The Trust has continued to grow its QI teaching faculty and develop staff who have been trained in QI and are interested in teaching others. Each year the Trust ask graduates from SQB to become mentors for the project teams in the following cohort – an approach which keeps graduates on – board and engaged. The Trust provides support and coaching training to these ‘SQB STAR’ mentors which will continue to develop their skills in QI and as leaders. The Trust has continued to expand its QI teaching faculty as it delivers more programmes to more staff each year. A business case for QI was approved in the summer of 2018 which will add up to 5 more QI trainers.

Measurements of an increase of staff skills and capability for QI are laid out below as part of the evaluation of the SQB programmes:

Safety Quality Belfast: Delivering Improvement					
Looking at the participants’ self – assessed knowledge levels pre course and post course against 17 key metrics demonstrates dramatic improvement in knowledge across all areas tested.					
	1 = No knowledge, 2 = Some knowledge, 3 = Good level of knowledge, 4 = Excellent level of knowledge and could teach others about this	1	2	3	4
Pre	The impact of errors on patients / clients, families and care providers (Pre Course Questionnaires)	2%	36%	56%	6%
Post	The impact of errors on patients, families and care providers Post Course Questionnaires).	2%	2%	50%	46%
Pre	Methods of improving patient/client safety	5%	54%	40%	2%
Post	Methods of improving patient safety		7%	43%	50%
Pre	How a focus on improvement can influence the culture of an organisation	3%	46%	50%	1%
Post	How a focus on improvement can influence the culture of an organisation		2%	57%	41%
Pre	Human factors	2%	57%	39%	2%
Post	Human factors		2%	52%	46%
Pre	Methods of mitigating how human factors can contribute to errors	7%	64%	29%	0%
Post	Methods of mitigating how human factors can contribute to errors		4%	59%	37%
Pre	The attributes of a high performing team	5%	51%	42%	2%

Improving

Post	The attributes of a high performing team		9%	54%	37%
Pre	Characteristics of effective team leaders	1%	41%	54%	4%
Post	Characteristics of effective team leaders		2%	54%	43%
Pre	The four phases of an improvement project	18%	56%	22%	3%
Post	The four phases of an improvement project		2%	46%	52%
Pre	The components of IHI's Framework for Spread	57%	38%	6%	0%
Post	The components of IHI's Framework for Spread		15%	50%	35%
Pre	Common barriers to change	3%	53%	42%	2%
Post	Common barriers to change		2%	46%	52%
Pre	The Model for Improvement	35%	52%	11%	2%
Post	The Model for Improvement		2%	46%	52%
Pre	Methods of involving patients/carers/service users in improving quality of services	15%	65%	16%	3%
Post	Methods of involving patients / carers / service users in improving quality of services		11%	51%	38%
Pre	The rationale behind measurement for improvement	12%	65%	23%	1%
Post	The rationale behind measurement for improvement		7%	41%	52%
Pre	Planning a PDSA (Plan - Do - Study - Act) cycle	29%	51%	19%	1%
Post	Planning a PDSA (Plan – Do – Study - Act) cycle		4%	39%	57%
Pre	Implementing a PDSA cycle	34%	48%	18%	0%
Post	Implementing a PDSA cycle		4%	41%	54%
Pre	Interpretation of a run chart	52%	33%	14%	1%
Post	Interpretation of a run chart		7%	57%	37%
Pre	Production of a run chart	56%	34%	10%	1%
Post	Production of a run chart		9%	52%	39%

Improving

Quality Improvement Support for Teams (QIST)

The Trust's Safety Quality Belfast (SQB) Programme has gone from strength to strength and has proven to be hugely popular with all grades of staff. The range and scale of improvement projects completed in both acute and community services continue to create positive outcomes for staff, patients and service users alike. The cohort size had increased to 150 in year 2 from 54 in year 1. For cohort 3, 2017/18, the Trust had 326 applications for 150 places. Taking feedback from staff, the Trust recognised that a 'one size fits all' approach is not always appropriate and so the Trust has developed and launched a Level 2 QI training programme with similar content as SQB, named QIST (Quality Improvement Support for Teams). Rather than undertaking a half day workshop each month for 9 months, the teaching content has been organised into 2 full days several months apart with support inbetween with a Project Surgery. This format suits many of our busy clinical staff. QIST trains 6 project teams (approx 24 people) and has more hands-on support, 'all teach, all learn', from a QI mentor compared to SQB which is classroom teaching for up to 150 people. QIST will continue and will be used in 2019 to support the Trust's corporate improvement priorities.

Scottish Improvement Leader (ScIL)

Level 3 training in QI (see Quality Attributes framework) is the most complex and detailed QI programme the Trust offers, producing as it does improvement experts and advisors. There are only a few providers of quality improvement training to this level across Europe and the Trust would typically have sent a small number of staff each year to be trained via the Scottish Improvement Leader, Scottish Patient Safety Programme or to the Institute for Healthcare Improvement (IHI) Improvement Advisor programme. These programmes are very expensive costing up to £15,000 per person.

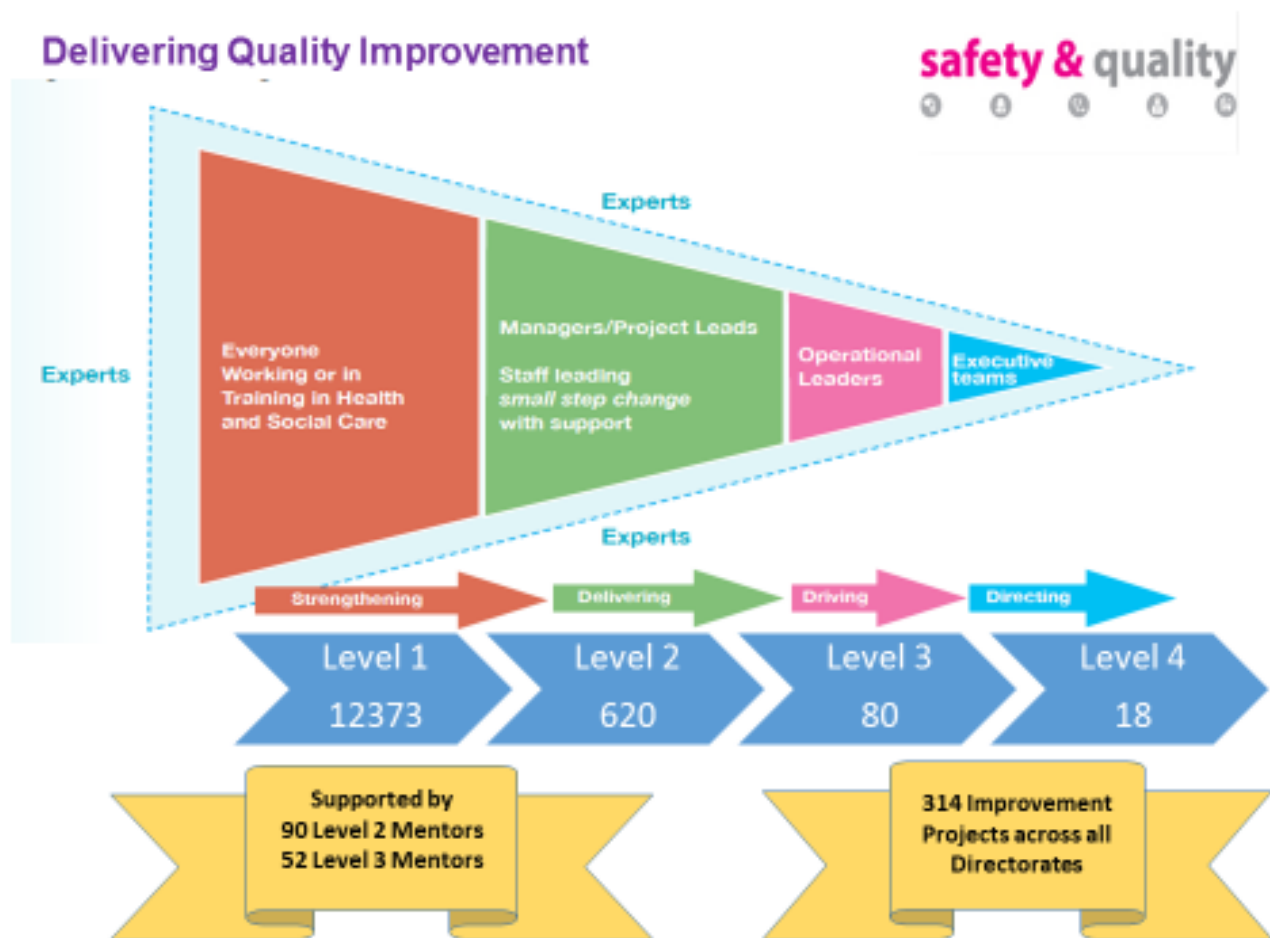
In 2017 the Trust made an agreement with NHS Education for Scotland (NES) that they would deliver the ScIL programme to two cohorts of staff in Belfast. This meant that 60 of the most senior staff in the Trust would be trained as quality improvement experts and would have further capability to lead and direct improvements to the services we deliver to our patients and service users.

Scottish Coaching and Leading for Improvement (SCLFI)

In addition to ScIL, the Trust has also contracted with NHS Education for Scotland (NES) to deliver two cohorts of training (60 staff) in coaching and leading teams to improve. The Trust has referenced best practice across the world and identified a cohort of staff who would require slightly different skills to deliver improvements and drive change. The SCLFI course provides a knowledge of QI methodology and also skills to coach teams to improve. The Trust targeted this course to its middle managers, Clinical Directors and Service Managers, staff who are responsible for service delivery and who manage several teams and wards. Such an approach also aligns two key Trust priorities namely continuously improving quality and the introduction of collective leaders and collective leadership structures and arrangements. Participation on the SCLFI is designed to enhance the capability of the 60 'undergraduates' to direct and also support their teams to improve services for patients and service users.

In 2019 the Trust plans to deliver SCLFI through its own inhouse teams.

Improving



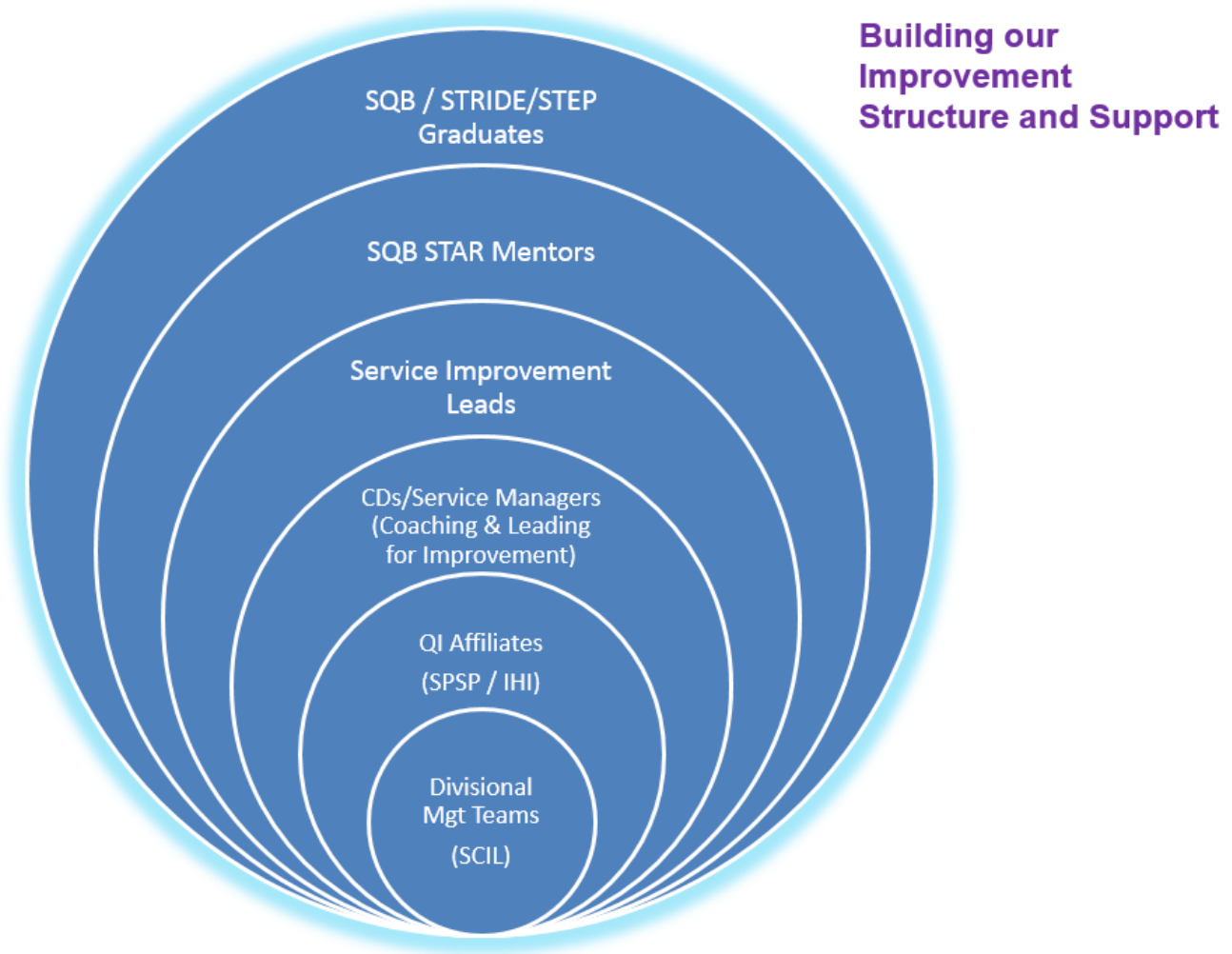
These revised programmes will enhance our quality improvements and performance:

The Trust is building a network of people trained in QI to deliver change on the frontline of services. Don Berwick, former President and Chief Executive Officer of IHI, said in his report to the NHS when asked as 'to how can we improve patient safety?', replied thus '*..the staff at the frontline should not just be involved in the change, they should be leading the change..*'.

Such an ethos is very much at the heart of the Trust's Collective Leadership model. The Trust has trained staff in all teams throughout the Trust at Level 1, 2 and 3 of the Q2020 matrix. Therefore when any team identifies an area for improvement or have an inspirational idea for change they have a cohort of colleagues at hand to guide and support them to use a QI approach on delivering on that change or bringing about that improvement.

Improving

The revised programmes are now housed in a structure to sustain higher performance (see below):



There is clear and sustainable evidence that increased capacity and staff engagement in QI initiatives and projects is having a positive cumulative effect and is creating positive outcomes across the Trust for staff, patients, service users, families and communities. The diagram below for example shows a collection of projects which were showcased at the in house QI Project Awards 2018 which show improved performance in light of the application of the QI methodology and the improvements made:

QI Training Project Awards 2018: STEP, STrIDE and Safety Quality Belfast (SQB) winners

	SQB Winner: Reducing Use of Oral Psychotropic PRN Medication in Young People - Dr [REDACTED]
	SQB Winner: Food first in focus: Preventing/treating undernutrition in a nursing home setting – [REDACTED] [REDACTED]
	SQB Winner: Medicines reconciliation on discharge CAU – [REDACTED] [REDACTED]
	STEP Winners: 1. Emergency sign in Cardiac arrests to direct responders promptly to exact location of patient – [REDACTED] 2. Improving attendance at retinal screening in patients with diabetes on maintenance <u>haemodialysis</u> – [REDACTED]
	STrIDE Winner: T.P.N.S. - Test to Prescribe Nutrition Safely – [REDACTED]

Improving

Theme 22: Criteria 2: The organisation uses information from internal and external sources to improve how it manages and develops its people.

You cannot become and remain a top 20% HSC organisation without a commitment to continuous improvement. The theme of continuous improvement is now seen as a thread that runs through the Trust's five revised and updated corporate themes and objectives namely safety, quality and experience, service delivery, people and culture, strategy and partnerships and resources.

In the foreword to the Trust's CMP for 2018 – 21 the plan identifies the **four elements of service improvement** for the Trust's services users (which includes its people), carers and wider communities that is, creating and supporting the development of: -

- Skilled clinical leadership
- Cultural change, **where quality improvement is second nature**
- Data linked to goals, measuring quality locally and in real time
- Standardisation of processes where possible.

These **four elements** of service improvement have now become the **building blocks** for the Trust's approach to delivering continuous improvement and in achieving its vision, aim and priorities.

The Trust in its OD **Framework for 2015 – 2025** sets **improving** safety and quality and enabling research and innovation as two of its three corporate OD priorities along with developing a culture of collective leadership. The scale, range and level of activity in the area of QI has been set out under Indicators 1 and 7 previously and will be expanded on later in this indicator. The Trust now believes that as a result of its commitment to and investment in quality improvement across all services the Trust has a critical mass of people in terms of capability and capacity to ensure **quality improvement becomes second nature** and change is viewed '**as business as usual**'.

The Trust was very pleased to note that in its 2016 IIP review that the Trust was able to demonstrate how:-

- The **evaluation of its investment** in people has resulted in improvement in the organisation's strategy for managing and developing its people.

We are equally pleased to be able to showcase and demonstrate how the Trust continues to evaluate its investment in its people throughout this Storyboard and to be able to demonstrate how such evaluation continues to result in improvements in the Trust's performance, in its people processes and practices – see Indicator 8. Theme 1, Criteria 1 specifically and throughout the Storyboard generally.

- It uses information and learning from **self – review and internal sources** to improve the Trust's strategies, policies, processes and practices for managing and developing its people.

This now well – embedded and always improving approach to continuous improvement which is centrally supported but locally delivered supports the Trust in its pursuit of people improvement goals designed to improve staff experience within and across the Trust.

Improving

- The Trust since its last IIP Review in 2016 has continued to invest in and support its People and Culture Leading Supporting Improving Teams (LSITs) to work with staff at Directorate levels to identify and share areas of good to excellent practice while also identifying and addressing improvement opportunities and what needs to improved upon.
- It uses information, feedback and learning from **external reviews**, including but going beyond its Investors in People review in 2016 e.g. re – accreditation inspections in Labs, feedback from RQIA Inspections etc to improve the Trust’s strategies, policies, processes and practices for leading, managing and developing its people.
- As a **learning organisation** the Trust is outward looking, keen to work with, share and learn from others. The Trust’s leaders have a long and proud record of looking beyond its current business environment to **learn from the outside world** and bring in knowledge to improve the organisation's performance. Examples of this include the exciting work the Trust is involved in with the **King’s Fund** in terms of its Culture Assessment as part of its OD priority of ‘building a healthy culture’.

The exciting, innovative and leading edge partnership work the Trust is involved in with the **NHS Education for Scotland (NES)** has allowed the Trust to deliver all of the excellent SQB related programmes including SCLFI etc.

The embedded partnership working with Representative bodies in supporting staff learning and development as evidenced throughout the **Supporting Belfast Strategy** has resulted in benefits for staff in such areas as essential literacy, numeracy and IT literacy skills. Such work complements the excellent partnership working the Trust continues to be involved in with the HSC Leadership Centre, local and international Universities and the Belfast Met, all of which has allowed the Trust to bring in external knowledge and expertise to continuously improve the organisation’s performance etc.

The Belfast Trust is fortunate that because of its size, scale and complexity it is ‘information and feedback rich’. The table below provides a flavour of the range of sources of feedback, learning and improvement the Trust can and does avail of to continuously improve its performance.

Improving

Sources of feedback, learning and improvement:	
Internal Sources • People and Culture LSITs self – assessment and CI IIP project work • Feedback from the IIP 40 Questionnaire • Feedback from the IIP Internal Healthchecks in 2018 • Feedback from the HSC Staff Survey • Feedback and learning from Internal Experts • Trust based learning events • Internal Reviews/Audits • Mortality review meetings • Learning templates • Case management reviews • Monthly safety messages • Safety briefings • Incident & risk mgt training • Safety Matters Newsletters • Quality Visits • Quarterly & annual complaints, incidents, SAI reports • Reading – articles, books, professional webpages etc • Learning from mistakes, systems failures such as Neurology recall, the O'Hara Report, and the most recent work in relation to Muckamore Hospital.	External Sources including regional/HSC system sources: • IIP Review 2016 • Inspections e.g. RQIA, Laboratories re-accreditation process • Audits • Research • Regional learning events • Benchmarking • Expert Reviews/Inquiries • Coroner's inquests • Ombudsman complaints • Feedback and learning from external experts such as the King's Fund • Feedback and learning from involvement in networks, infomal and formal benchmarking and visits to and from externally based personnel and teams. • Learning from involvement in Development Programmes • Learning from professional bodies and guidance • Feedback from Reports – Mid Staffs, Berwick, • Learning from successes such as the Trust excellent record in kidney transplants.

Improving

Our 2019 'As Is' Position for Indicator 8 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 23: - Creating a culture of continuous improvement	People are aware of how they can contribute to improving their performance and the ways of working within the organisation	People are encouraged to try new approaches and learn from their efforts, mistakes and successes	People are supported by their leaders to take reasonable risks when trying new and innovative approaches	The organisation nurtures innovation and acts quickly in response to new ideas and opportunities

Quality Improvement within a Corporate and Strategic Context – what you need to know:

We hope that we have throughout this Storyboard demonstrated the excellent, extensive and evidence based work the Trust continues to undertake in creating a culture of continuous improvement, where QI is everyone's business and responsibility and where **quality improvement is second nature**.

All of the QI work the Trust has and continues to be involved in, is designed to support the Trust in delivering on its vision, ambition and priorities. It also supports the Trust is delivering on its OD priorities and the priorities as set out in its Quality Improvement Strategy.

Quality Improvement (QI) Strategy

The Trust's QI Strategy 2017 – 2020 was launched in June 2017 and outlines how the Trust will create the 'conditions for success' as it works to create a culture where **quality improvement is second nature**. The five main strategic conditions for success are set out below (see Diagram below). The QI Strategy is about ensuring these five strategic conditions for success are in place and that they become embedded within and across the Trust thereby developing the conditions for sustainable success.

Improving



Key Document Quality Improvement Strategy

The aim of our Quality Improvement Strategy (QIS) is to create the conditions for the Belfast Health and Social Care Trust to become a leader in **providing safe, high quality and compassionate care in the UK.**

Delivering safe, high quality and compassionate care is the first order priority for the Belfast Trust. We will realise this ambition by developing a culture of excellence in safety and quality by engaging, inspiring and supporting our workforce to deliver improved outcomes and experience for those in our care.


QI Strategy
2017-2020.pdf

Improving

The Trust's Quality Improvement Plan

In 2016 the Trust looked at the areas where we have caused harm to our patients and service users and have had complaints, incidents or Coroners Inquests. We asked the question, 'how safe are we today and how safe are we going to be tomorrow?' These questions informed the development of a Trust wide Quality Improvement Plan, which focuses on six work – streams from reducing harm from medication errors to ensuring the Trust develops an open, transparent and learning culture (see QI Improvement Plan overview below).



The Trust has worked with staff and other stakeholders in further defining what it means 'to be in the top 20% of high performing Trusts by 2020'. It has identified and is beginning to set out the core macro metrics the Trust will use to baseline its 'as is' position on its journey to excellence. For hospital based services, for example these macro metrics are:

- (1) Patient Experience
- (2) Hospital Standardised Mortality Rate
- (3) Safety Thermometer
- (4) NHS Staff engagement
- (5) Elective Waits
- (6) Unscheduled Care Waits
- (7) Resources.

QI is the approach the Trust has adopted to drive improvement across all the above seven macro metrics, all designed to improve the quality and safety of patient care and patient experience. Improving across all of these areas will also contribute to the Trust achieving its ambition of being in the top 20% of HSC providers by 2020.

Improving

Theme 23: Criteria 1: - People are aware of how they can contribute to improving their performance and the ways of working within the organisation

Theme 23: Criteria 2: - People are encouraged to try new approaches and learn from their efforts, mistakes and successes

From a capacity and capability perspective, 13,093 staff (65%) of the Trust's total workforce has been involved in some form of QI training, which has certainly contributed to a heightened level of awareness and appreciation of QI and how they can contribute to improvements in their performance and the ways of working within their team and across the Trust. The levels of improvement amongst the SQB participants who completed pre and post workshop knowledge level questionnaires (see Theme 22 Criteria 1) also evidences how these participants were more aware of how they can contribute to improving their performance and the ways of working within the organisation

With the support of continuously improving QI training and 90 level 2 mentors and 50 level 3 mentors the Trust has delivered 314 improvement projects across the Trust, which all staff from across all teams and all services contribute to and improve their performance and the ways of working within the organisation.

Patients, service users, families and communities are the ultimate beneficiaries of all of these QI Projects. As a Team of Assessors you will have an opportunity to hear from staff across the Trust on how QI projects are creating positive outcomes and benefits for patients and service users including staff.

In the earlier part of this Storyboard we have demonstrated the wide range of methods the Trust uses to involve, engage and encourage staff to try new approaches and learn from their efforts, mistakes and successes, all of which the Trust believes is creating positive outcomes for patients and service users. Below is one example of a well - embedded approach to involving staff in the generation of improvement ideas through an initiative called 'What matters to you' – see below –

The Trust runs a '[what matters to you?](#)' initiative for one week every year during Safetember.



All teams are encouraged to talk to patients, service users and staff to ask, 'what matters to you'? Emerging priorities are then included in an Improvement Plan where the Team takes action to improve the services we deliver and the working environment for staff in response to feedback from patients, service users and staff.

Examples of actions arising from asking 'what matters to you?':

Improving

Action	How will we do this	Who will lead
Continue to embed "My name is initiative"	We will continue to encourage staff to introduce themselves to their colleagues and to patients. We will also ask patients for their preferred name.	Chairs and Divisional nurses
Patients' Own Drugs	Pharmacy fully support the use of POD and the use of lockers at ward level to efficiently manage patient medicines. However, we also recognise the capital investment and staff costs required at ward level and will work with wards to support them.	Pharmacy supported by Divisional teams
Patient details are correct on investigation request forms	Invitations to be sent out to wards and department for a <i>Tour of Our Labs</i> event on 9 November to coincide with World Laboratory Day	Shauna McAuley, Labs
Develop a plan to engage and involve staff to seek their ideas for improvement initiatives and savings	We will establish a task and finish group within the Directorate to take this forward	Divisional teams
Praise and recognition incentives	Suggestions and feedback from staff will be discussed further at the Directorate's IIP group in October	Our People Development group (IIP)

Issue	Action	Lead
Knowing the value of the data and reports we provide	Get feedback from Service Directorates on the various information we provide	
Space to improve / freedom to implement changes / More social contact with colleagues	Have a monthly team huddle to take time to improve. Joy in work.	
Too many last minute, urgent tasks / Being able to meet deadlines and achieve daily tasks	Protect desk time to complete tasks and move things forward	
Service User feedback	Complaints Improvement Plan	
Student Feedback / NTS	Trainee Strategy	
Too many emails	Develop Directorate email policy	

Improving

Our 2019 'As Is' Position for Indicator 8 = Established				
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 24: - Encouraging innovation	People are encouraged to come up with new ideas	People work together to generate new ideas	People are passionate about innovation and volunteer new ideas	New ideas deliver positive outcomes for the organisation

Theme 24: Criteria 1:- People are encouraged to come up with new ideas

Theme 24: Criteria 2: - People work together to generate new ideas

One of the Trust's five core values is 'being leading edge'. Under this value the Trust talks about 'actively seeking out innovative practice', of 'participating in new approaches and service development opportunities'. It talks about 'promoting the Trust as a centre of excellence' and about sharing best practice with others'.

'Evidence' previously provided in the Storyboard across all the Indicators has demonstrated how the Trust has worked with its staff to ensure the value of 'being leading edge' is adapted and lived throughout the Trust (see particularly Themes 22 and 23 above) and Indicator 3 and Theme 18 (Enabling Collaborative working) previously.

The Assessment Team will have an opportunity to hear from Directorates in their presentations about the excellent work they are involved with in encouraging innovation across their Directorates. Staff during one to one meetings with assessors will have an opportunity to describe how they have been encouraged to come up with new ideas to improve their performance and that of their team/service.

Improving

The principle of ensuring patients and clients receive the right care in the right place by the right team is a key part of the Trust's approach to ensuring the provision of safe, effective and compassionate care. The poster below shows one of many examples as to how people are supported in creating and implementing quality improvement projects across the Trust:



Ensuring a Safe, Effective Oncology Helpline Telephone Service

Debbie Wightman, Divisional Nurse, Cancer and Specialist Medicine, BHSC

The National Confidential Enquiry into Patient Outcomes and Deaths (NCEPOD) & the National Chemotherapy Advisory Group (NCAG) in 2005 recommended:

"All patients should have access to 24-hour telephone advice with active management of access to appropriate emergency care. Service providers should strongly consider establishing proactive telephone support for patients to identify problems before they become serious"

Background

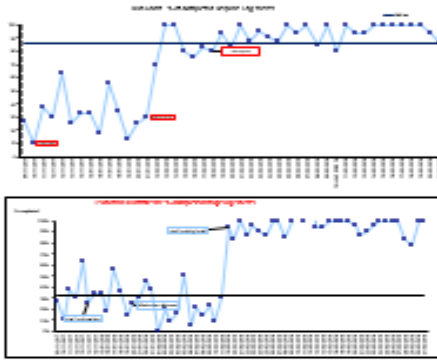
The Oncology Helpline service was introduced within the BHSC in 2005. Oncology patients can access the service 24/7 and are triaged by an Oncology trained nurse using the UK Oncology Nurses Society (UKONS) 24-hour triage tool. This is a risk assessment tool which determines the severity of the patient's clinical condition, empowering the nurse to direct the patient to ensure they receive the most appropriate care, in the right place at the right time.

A review of the helpline triage log sheets in November 2017 demonstrated that only 33% of patients received a full, robust, documented triage using this approved tool.

Therefore in order to improve patient safety and care our aim was ensure each patient who contacted the Oncology 24/7 Help line service received a robust reliable assessment, consistent through 100% completion of the UKONS triage tool.

Results

The results of the data gathered from November 17 are presented using a P chart below.



AIM

To ensure 100% of callers to the Oncology helpline have a full telephone triage completed by May 2018.

Methodology

Focus group formed with team from assessment unit (AOHU) was established, this included nursing, medical and administrative staff.

Analysis of the base line data using QI methodology.

Identifying the outcome, process and balancing measures.

Process change

With the use of a driver diagram, change ideas and measures were identified providing the team with a clear focus based upon the Aim. E.g. change ideas, PDSA cycles - competency training for nursing staff, introduction of a minimum data set to be audited, and inclusion on safety brief.

Key learning points

Understand subject matter, without assumptions
No failure in improvement, many learning opportunities
Is a means of motivating staff, keeping patients and the centre of all we do



Achievements:

- Increased staff confidence and decision making
- Patient satisfaction
- Robust governance processes.
- Greater understanding and appreciation of QI methodology.

References:

UKONS Oncology Nursing Society [UKONS Oncology Haematology Telephone Helpline V2 Nov 2016](#)
The Health Care Data Guide, Provost and Murray
Cohort Scil 14 and faculty



Scil

Scottish Improvement Leader

Improving

Another example of a QI project which was both innovatory and patient focused includes an improvement in patient experience – ‘reducing noise at night in hospital’:

Reducing Noise at Night in Hospital

Glen Lyttle: Lead Nurse for Governance & Patient Experience,
Ruth Finn, Lead Nurse for Infection Prevention & Control,
Colin Jackson: Patient and Client Experience Manager,

Aim Statement:
To achieve a consistent average noise level of 55dB during the night in one ward by June 2018.

Background to the Project

The Patient Experience team within the BHSCT regularly receive negative feedback relating to noise levels at night. Many patients report difficulty sleeping and at times require night sedation to help them sleep. Given these realities, there is a significant opportunity to improve the patient experience and reduce noise levels in our hospitals.

Noise at night is a nightmare mostly down to monitors and drips etc.

The World Health Organisation (WHO) recommends that noise levels in the hospital environment should not rise above 55dB at night (interim target).

Incentive to improve

There is broad consensus that noise causes stress and has physiological and psychological effects on patients.¹ Ambient noise is the primary cause of sleep deprivation and disturbance for patients causing confusion and increased use of medication. Sudden noises like doors banging or alarms sounding often cause the “Startle Reflex”² where patients exhibit increased heart rate, respiratory rate and blood pressure.

Belfast Health and Social Care Trust

carling supporting improving together

Baseline Measure

Initial baseline monitoring of noise levels in the ward :-

- Metal bins closing: 49dB
- Patient/Staff talking: 52dB
- Pump alarms: 59dB
- Keys on desk: 62dB
- Chute pod arriving: 82dB

What were are measures of improvement?

Outcome

- Highly noise level measurement
- Instances over 60dB
- Average noise
- Patient/Service user qualitative feedback

Process

- How many nights per week achieve an average of 55dB?

Balancing

- Staff feedback regarding change of practice
- Patient feedback / Does their experience improve?

PDSA Cycles

Cycle 1
Independent baseline measurement of current noise levels on the ward.

Cycle 2
Installation of a traffic light noise monitoring system

Cycle 3
Introduction of a 5 ‘Tips’ to reduce noise poster

Cycle 4
Development & introduction of Nurse in Charge checklist

Cycle 5
Design and distribution of new patient leaflet.

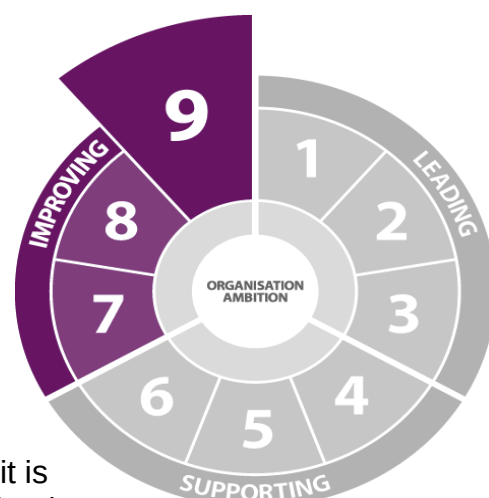
Initial Results

- Keep momentum going!
- Collect further patient experience feedback
- Begin to scale up project to enable other wards to benefit from improvement work.

1 Pilkington, A. (2016). Causes and consequences of sleep deprivation in hospitalised patients. *Nursing Standard*, 31(48), 39-41-42.
 2 Johnson, A. You made noise in the hospital? Patients and personal suffer equally. *Standard*, 30.07.16(3) 12-18-20.

Improving

CREATING SUSTAINABLE SUCCESS



Overview of this Indicator

This section of the Storyboard will illustrate how the Trust creates sustainable success by having a clear and informed focus on the future and by being responsive to change. It will show how by working on developing organisational capabilities it is in a place where it is able to effectively and proactively respond to the challenges and opportunities presented by the external environment within which the Trust operates and the impact such challenges have on the Trust.

Theme 25: Focusing on the future

We will show how the Trust has a clear, coherent and compelling set of future priorities and the organisational capacity and capabilities to achieve its vision, aims and priorities.

Theme 26: Embracing change

We will show how the Trust continues to work on developing a culture where change is viewed as 'business as usual' and where change is seen as an opportunity for learning and improvement.

Theme 27: Understanding the external context

We will show the Trust has a clear understanding of who its stakeholders are and how the Trust continues to work with its many partners to create positive outcomes for service users and the communities the Trust serves.

Improving

 Indicator 9: Creating Sustainable Success The organisation has a focus on the future and is responsive to change. Leaders have a clear understanding of the external environment and the impact this has on the organisation				
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Focusing on the future	Leaders communicate future priorities	People are actively engaged in both short-term and long-term planning	People believe the organisation is a great place to work and are committed to its future success	Leaders are aware of future challenges for the organisation and consciously develop their own capabilities, and partner with stakeholders to respond to these
Embracing change	Where change happens it is communicated in a timely and transparent way across the organisation	Benefits of change are measured and captured. Successes and failures are openly communicated	People that demonstrate optimism and drive are selected to champion change and support others to understand and engage with it	Change is viewed as 'business as usual', where mistakes are accepted and valued, as an opportunity for learning and improvement
Understanding the external context	Leaders have a clear understanding of who the stakeholders are in the communities and the markets the organisation serves	The workforce is diverse and reflects the communities and markets the organisation services	People understand the relationship between the organisation and the wider community	The organisation has a positive impact on the communities and markets it serves

Improving

Our 2019 'As Is' Position for Indicator 9 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 25 - Focusing on the future	Leaders communicate future priorities	People are actively engaged in both short- term and long- term planning	People believe the organisation is a great place to work and are committed to its future success	Leaders are aware of future challenges for the organisation and consciously develop their own capabilities, and partner with stakeholders to respond to these

Theme 25: Criteria 1: Leaders communicate future priorities

Theme 25: Criteria 2: - People are actively engaged in both short term and long term planning

The Trust in its various strategies and plans including in its [Corporate Management Plan](#) for 2018 – 2021, in its [Organisational Development Framework \(ODF\)](#) for 2015 – 2025, in its [New Directions 2](#) document, in its [Quality Improvement Strategy 2017-20](#), and through its other key strategies such as its [People and Culture Strategy](#), and in its [Learning and Development Strategy 2018 – 2021](#) has set out its future priorities. The supporting structures and implementation plans provide further clarity on these priorities areas and how the Trust plans to deliver on them.

The specific priorities contained within each of the above documents have been described in greater detail under Indicators 1, 4 and 7 and the Trust's approach to communicating its future direction and priorities in terms of its future ambition and the future structures and emerging service provision and service delivery models have been outlined under Indicator 1: Theme 1: 'Creating transparency and trust' and elsewhere throughout the Storyboard. The Trust has used a range of forums and methods such as CEO briefings, Leadership Conference, Training workshops, newsletters, and through the 10 social media platforms now available to the Trust including the use of Podcasts to ensure everyone in the organisation has an understanding of 'where the organisation is going'.



Improving

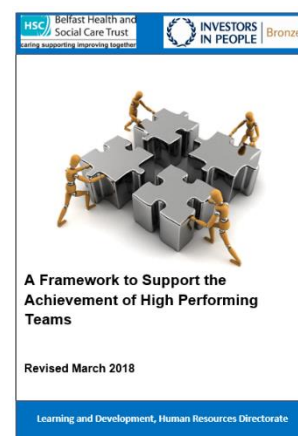
The development and communication of an exciting and stretching ambition for the Trust – ‘to be in the top 20 of HSC providers by 2020’ and the development of ‘a culture where care is delivered safely, effectively and compassionately’ for all service users and communities, provides a direction of travel around which all staff can unite and for which all staff must contribute to if both the aims and cultural aspiration are to be realised.

The Trust has worked hard with staff and other key stakeholders including patients, families and communities to ensure it gets the balance right between ‘managing the present’ while also ‘envisioning and transitioning to the future’. Patients and service users still need to be seen and supported today and tomorrow, and while excited about developments, ultimately patients experience usually is measured in ‘real time’.

The extensive work and investment the Trust has made in building both capacity and capability in such future priorities as collective leadership, delivering quality improvement and developing a culture where continuous improvement is everyone’s responsibility’ is testament to the practical steps the Trust has taken to make its vision and future priorities a stretching but deliverable ambition.

Throughout the Storyboard we have demonstrated how the Trust has actively involved key stakeholders in both short and long term planning – strategic and operational and annualised. The consultation and engagement exercises around New Directions 2 is a very positive example of where the Trust has meaningfully engaged with all relevant stakeholders and communities to shape the future direction of service provision and service delivery for all services across the Trust. Involving staff in such planning processes encourages staff to take full ownership of new directions and priorities, and the subsequent change and transition that will be required to deliver on agreed priorities.

While it is critical that leaders look up, out and forward, they need to also ensure that collectively and individually they have the capabilities to create a sense of excitement about the future while also being able to motivate people to deliver on agreed priorities. The scale and range of leadership and management development outlined under Indicator 1 and the focus on collective leadership in the ODF are just two critical building blocks in ensuring Trust leaders are agile and are change - able and change - ready. Partnering with external bodies such as the Kings Fund, IIP, etc supports the organisation and its leaders in being able to effectively respond to the challenges facing the Trust and its services.



Improving

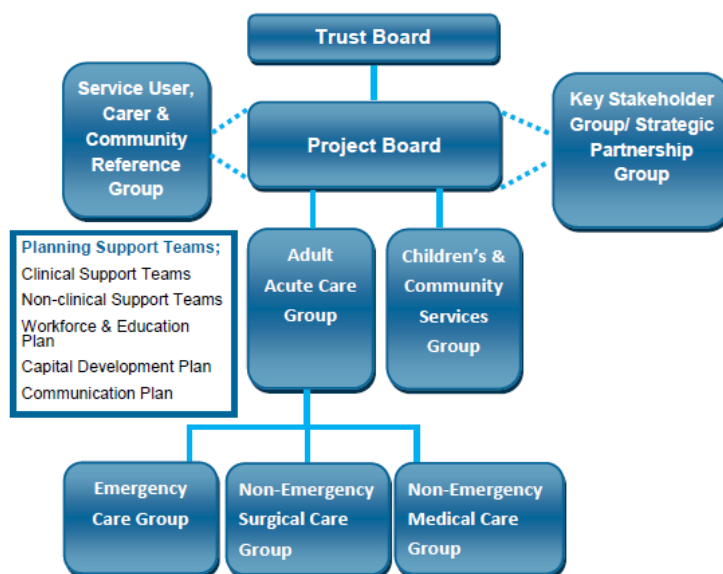
The Trust actively engages its people in both short-term and long-term planning through initiatives such as Let's Talk Vision (see Indicator 1) and Team planning workshops (see Indicator 4)

The **Industrial Relations approach** (see Indicator 3) and the also lays out how representatives are actively engaged in the planning process.

Additionally, the **Trust's 2017 Proposed Savings Plans** were heavily consulted upon. Over 1200 external key stakeholders were notified about the 6 week public consultation. During the consultation the Trust convened over 40 meetings including a series of 6 public workshops across Belfast and hosted 16 staff engagement sessions to facilitate maximum participation. These were convened across Belfast and Trust facilities at different times and locations to further maximise engagement mechanisms. Sign language interpreters were present at every meeting and a loop system was available. Everyone invited was asked to indicate if they had specific communication or access requirements in advance. A total of **12,735** written responses were received by the Trust. This included completed questionnaires, letters, two petitions, social media, SMS messages and telephone calls.

The **New Directions 2** (see Indicator 1) is now in the process of being developed and this will enable the Trust and its partners to identify and address the key strategic changes, which will be required to meet the needs of the population we serve. The Trust is keen to ensure effective and meaningful engagement of service users, carers, and voluntary and community organisations in this process. Workshops / Planning Days and Multidisciplinary meetings have been held across Directorates. Eg: A workshop was held on 6th October 2016 to facilitate engagement on a range of mental health issues. This workshop was attended by over 50 people and included representation from service users, carers and relevant community and voluntary sector organisations. The project structure has been designed to ensure engagement of people in planning.

Chart showing New Directions Project Structure



An overview is contained in the [New Directions_Newsletter](#).

Improving

Our 2019 'As Is' Position for Indicator 9 = Established

Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 26: - Embracing change	Where change happens it is communicated in a timely and transparent way across the organisation	Benefits of change are measured and captured. Successes and failures are openly communicated	People that demonstrate optimism and drive are selected to champion change and support others to understand and engage with it	Change is viewed as 'business as usual', where mistakes are accepted and valued, as an opportunity for learning and improvement

Theme 26: Criteria 1: Where change happens it is communicated in a timely and transparent way across the organisation

The Trust's Strategic Approach to Change Management

The Trust's **Management of Staff Affected by Organisational Change Framework Document** has been reviewed and updated in 2018 and as a result of engaging with our Service Managers and trade union colleagues a toolkit has also been developed to support managers leading reform and modernisation projects. The Framework ensures that staff have a voice and a channel for improvement ideas.

From 1 April to 30 September 2018, the **Modernisation and Workforce Planning Team** for example has, and continues to support modernisation and reform across the organisation in support of the Trust's strategic priorities.

In line with its value of '**displaying openness and trust**', the BHSCT has worked to be as open and honest as it can be with its staff and stakeholders about changes and proposed changes which are likely to effect the organisation and which may impact staff, patients, service users and communities. The Trust hard to ensure all change is communicated in a timely and transparent manner and use is made of a range of communication methods and approaches to make the communication as accessible as it can be.



Framework on the Management
of Staff Affected by
Organisational Change and the
Staff Redeployment Protocol



June 2017 Version



Improving

Number of Reform and Modernisation Projects

During the period April 2016 to date, the Modernisation and Workforce Planning Team have supported 114 projects, which have affected some 3,448 staff.



Completed Projects

The examples offered below are examples of changes arising from strategic reform projects completed/commenced in year and supported by the Modernisation and Workforce Planning Team. The Team from the outset has provided expert advice and guidance on the management of staff through change, communication / consultation and adherence to due process.

- **Regional Emergency Social Worker Service** – This project, which saw the transfer of the Call Handling Team from its base at Muckamore Abbey Hospital to Brae Valley Residential Home, was completed on 31 August. The project also included the restructuring of the service with the introduction of Band 3 posts to reflect the new duties to be undertaken by the staff. All Members of the existing Call Handling Team were given the opportunity to apply for the new position and several were successful. The remaining staff either have been redeployed or are in the process of being redeployed. The Modernisation & Workforce Planning Team have supported the projects leads throughout this exercise.
- **Trust Homecare Service** – Phase 2 of the Modernisation of Homecare Scheme completed in this period. There was a review of the rotas and the service delivery times which affected 500 + staff. The outcome was that new rotas were developed to better meet the needs of service users both now and in the future. This work was undertaken in conjunction with Unison and involved staff communication events, FAQ and newsletters.
- **Reconfiguration of Ward 6 North Ward** - This ward has become a Gastroenterology and Haematology ward and the management of such has transferred from the Unscheduled and Acute Care Directorate to Surgery and Specialist Services Directorate. The staff have undertaken new training to upskill in the care of haematology patients.
- **Pharmacy** – The project to relocate the Knockbracken Pharmacy dispensary and distribution services and staff to the Belfast City Hospital was successfully completed in April 2018. This relocation will enhance service delivery and reduce the impact of staff turnover on the service.
- **Physiotherapy** – The project on providing an extended and enhanced physiotherapy service on the RVH site at weekends has been successfully implemented from April 2018. Over the previous 26 months Managers worked closely with the Royal staff and TUS to refine a rostered working arrangement for the Royal site to ensure that physiotherapy delivery was responsive to the changing needs of the service.

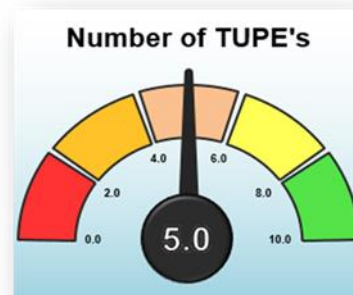


Improving

Transfer of Undertakings Protection of Employment (TUPE)

The Modernisation and Workforce Planning Team led on a number of service transfers both out of and into the Trust. During the period of the Review, the following activity took place:

- **Glenmona**– With effect from 01 July 2016, 86 staff successfully transferred from the Glenmona Resource Centre to the Belfast Trust. The Modernisation and Workforce Planning team lead on the elements pertaining to the workforce, ensuring continuous communication/ consultation took place with staff and their trade union representatives. The Senior HR Manager worked at a strategic level to oversee the transfer while the team collated the due diligence information and worked through an assessment of policies and procedures to highlight differences. Post transfer hybrid policies were negotiated where necessary for the Glenmona staff.



Post transfer, in collaboration with the various stakeholders e.g. Department, health board, government actuaries department and superannuation, led to the conclusion of the pension related queries.



A post transfer group was established, which continues to meet, to take forward elements of the TUPE exercise, including the comparison of employment policies and terms of conditions of

- **Lifeline** –Lifeline is an emergency crises service provided throughout Northern Ireland. The service has offices in two locations, Belfast and Derry. Prior to the transfer it was managed by an organisation called Contact NI, which had informed the Public Health Agency (PHA) that they would not be continuing with the provision of the service beyond 31 March 2018. The Belfast Trust was approached by the PHA, late in 2017 to enquire if it could take on the management of the service from 1 April 2018 for an initial period of 18 months. The service was transferred, into the Mental Health Services on 1st April, an exercise that was supported by the Modernisation and Workforce Planning Team. Sixty employees were TUPE'd across into the Trust. Since the date of transfer the team has worked to ensure that the transition into the Trust has been smooth and seamless with no impact on service delivery.

Improving

Theme 26: Criteria 2: Benefits of change are measured and captured. Successes and failures are openly communicated

The changing context in which the Trust operates means that change is viewed as ‘business as usual’. The Trust plans and prioritises changes and has focused particularly in the [Quality Improvement Strategy](#) on how the benefits of change are measured and in the [Management of Change Framework](#) on how change is communicated. Quality Improvement programmes, such as [Safety Quality Belfast](#), include modules to build capability in statistical analysis and data gathering techniques for improvement. The Quality Improvement approach ensures that the Trust’s failures are openly communicated too. This is further bolstered by our [Assurance sub-committee](#) structure (see Indicator 4) in which risks and mistakes are discussed and mitigation plans decided upon. Our Corporate Communications team and Chief Executive openly communicate (see Indicator 1), for example, see the foreword in the [Quality Report 2017-18](#) below about Trust failures which have led to improvement work

Our Top 3 Quality Improvement Priorities

In 2018 the Senior Leadership Group, comprised of our Directors and Divisional Management Teams, agreed three priorities for improvement that could be applied to all teams. Whilst programmes of work within the QI Plan were being tested in different parts of the Trust we set three priorities that could be applicable to all teams. We were conscious of having too many different priorities and wanted to convey a simple and clear message to staff. The three priorities are:

- (1) Right Care, Right Time, Right Place, Right Team
- (2) Real Time patient feedback
- (3) Staff engagement and empowerment (Joy in Work)



Improving

An outline of changes which have been made and the improvement results are laid out in the Trust's Annual Quality Report 2017-18.



Key Document Annual Quality Report 2017-18

This Quality Report outlines the progress we have made in improving the quality of services in the 2017/18 year. It also identifies the key areas in which we want to focus our quality improvement work over the coming year. Our aim is to be recognised as a leader in the provision of safe, effective and compassionate healthcare.

Working together, we are using measurement and increasingly real time data, to learn and improve at every level in order to achieve these objectives.

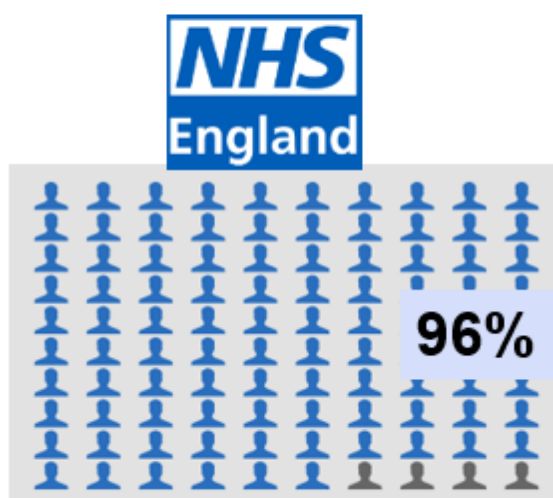


Annual Quality
Report 2017-18.pdf

Measuring Change

The Trust has increased its capacity to measure change and this is now a clear focus. For example, for the Patient Experience we will measure the % of patients who are extremely likely to recommend the Trust for the care they received to friends and family. Real time patient feedback has started in the surgical wards as a pilot and results for September 2018 are:

Friends and Family question September 2018 data. Belfast Trust v NHS England average(169 organisations)



Improving

Collecting and sharing the correct data, data that informs improvement is key to measurement and for quality improvement. This is one of the key elements of the QI Strategy. The Trust is committed to using data to inform and measure improvement and has invested additional resource into the Quality Improvement and Information Teams to support this objective. A Data Triangulation Group was established in 2016 to review data collected and shared within Belfast Trust to ensure it has purpose and benefit. A ward level core governance data set has been developed and tested and will be rolled out to all inpatient acute wards in 2019. A mental health dataset is also provided and a community report is under development. A data set at Divisional level is also being piloted in the Division of Surgery.

We also measure staff feedback on the quality of our services:

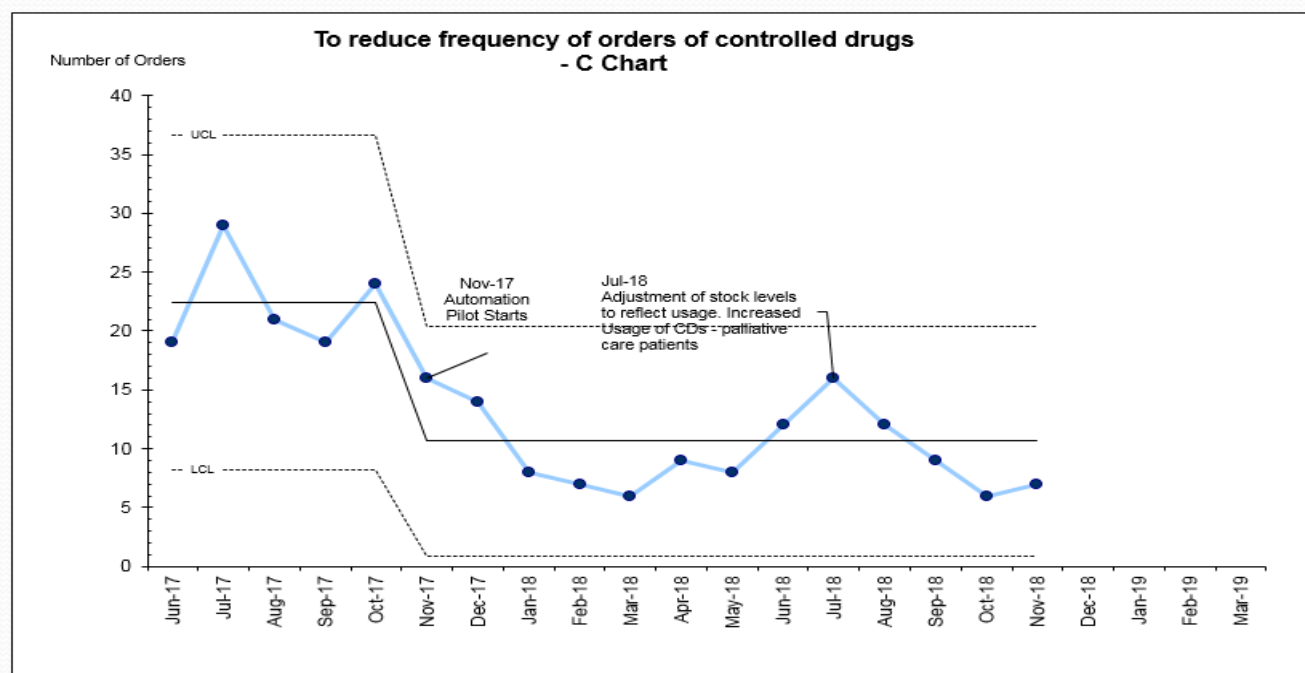
We are satisfied with the quality we provide (86%)



We feel our roles make a difference (90%)

Laid out below is further evidence of impact of this Quality Improvement work. It includes measures pertaining to controlled drug orders, patient falls in hospital, and patient identification through their Health & Care Number (HCN).

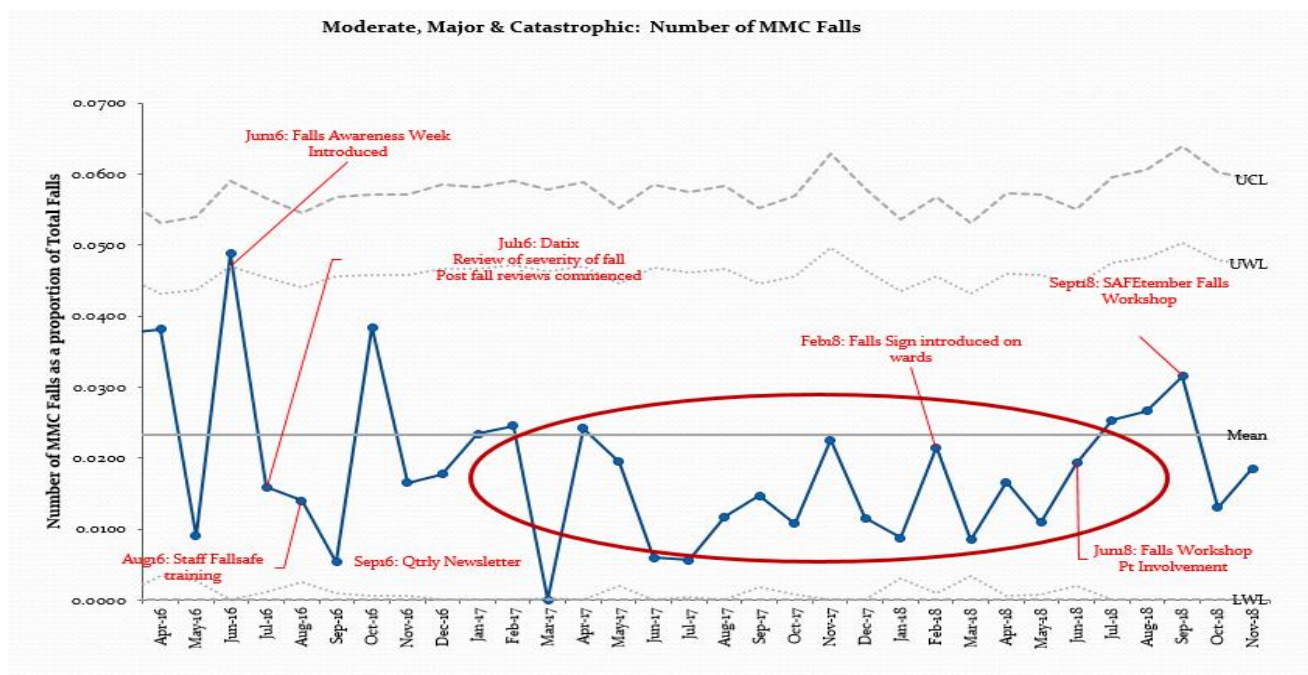
This chart shows how wards have reduced the frequency of orders of controlled drugs from June 2017 through to November 2018.



Improving

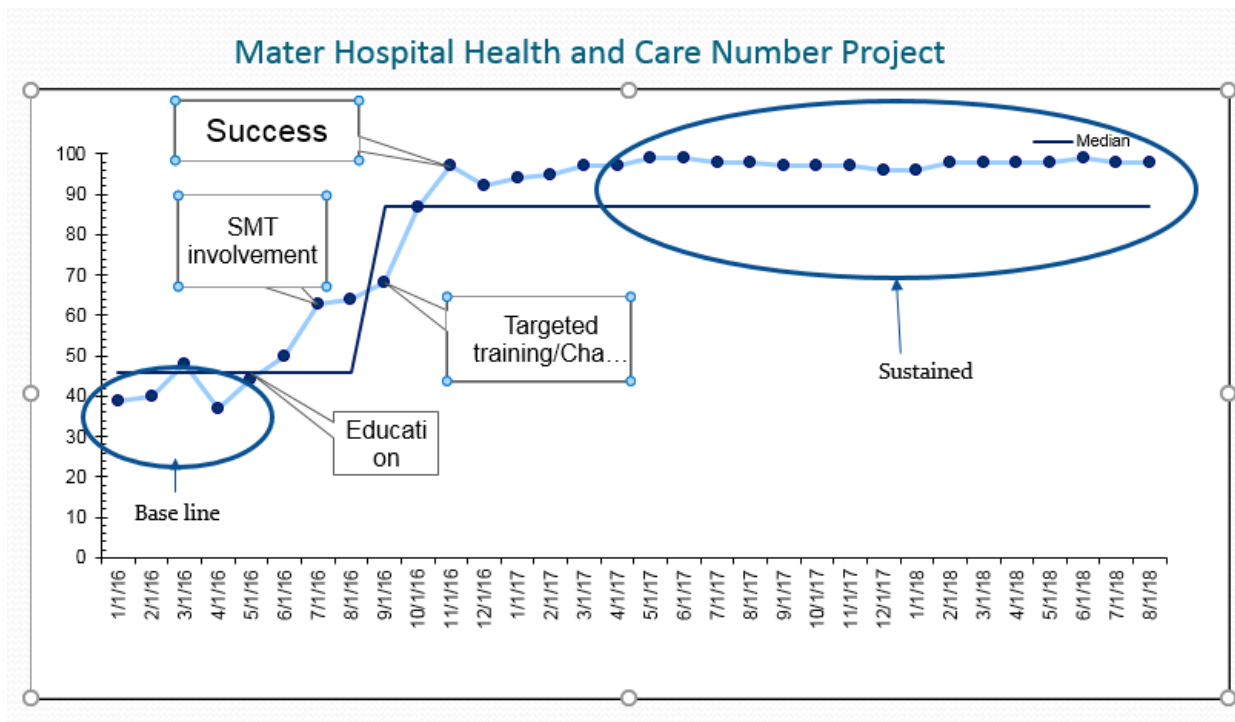
Controlled drugs are subject to special legislative controls because there is a potential for them to be abused or diverted, causing possible harm. Controlled drugs are now an essential part of modern clinical care. Strengthened controls must be implemented in a way that supports professionals and encourages good practice in the use of these important medicines when clinically required by patients.

This chart shows the reduction in patient falls that are graded as moderate, major or catastrophic, across Belfast Trust from April 2016 through to November 2018



The Trust should always use a patient's Health And Care Number to identify them. This number is unique to each patient. If we use a patient's surname, name known as, their date of birth or other ways to identify them there is a potential risk of mix up with another patient. There have been examples of incidents caused by mistaken identity. This chart shows the number of cases of patients being identified correctly using the health and care number in the Mater Hospital following a major change initiative.

Improving

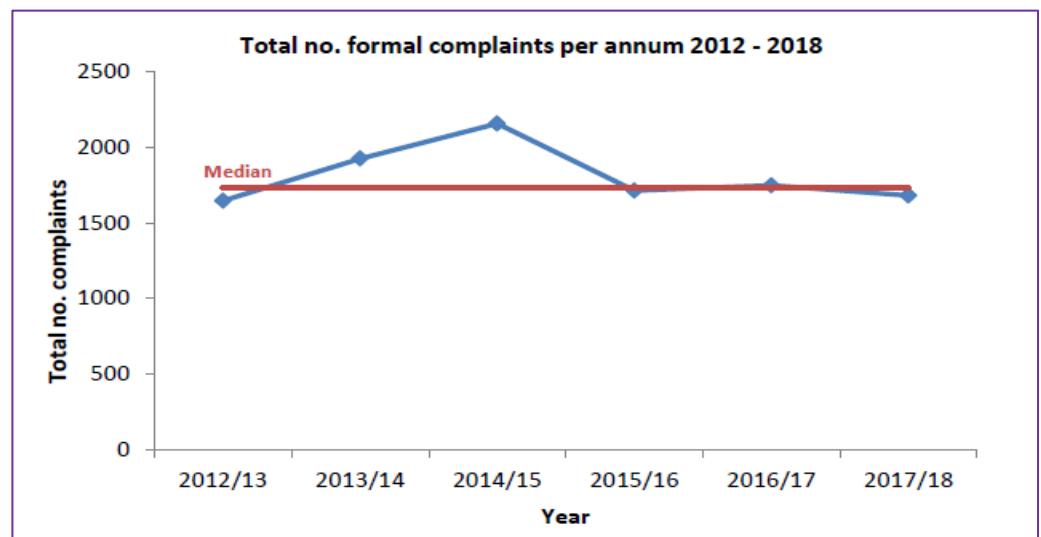


These are just three examples of how change is embraced in our organisation and how we use data to guide us

The Trust's failures are openly communicated

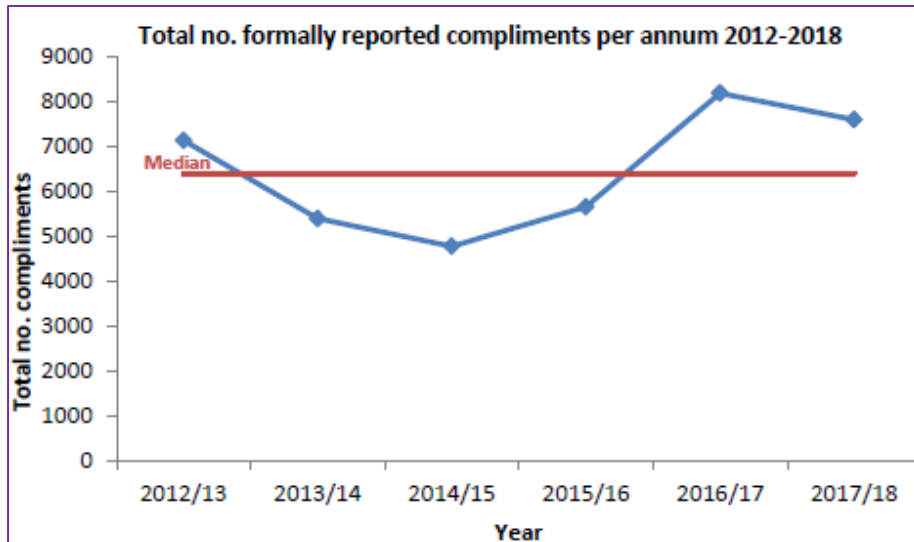
The Trust ensures that failures are openly communicated. The Chief Executive apologised for the Trust not being as open and transparent as it should have been on the back of the findings of O'Hara [Report into the Inquiry into Hyponatraemia related Deaths](#) (see Quality Report 2017-18 foreword). The Trust has more recently been open about failures which led to the [Nuerology recall](#) in which the Trust has made significant cross-organisational plans to communicate to affected patients, the public and Trust staff and to put measures in place to expedite the recall as quickly as possible. The Trust has also embarked on a major body of work in respect of failings in the Learning Disability service in [Muckamore Abbey Hospital](#), for which communication is ongoing.

The Trust is open about the number of of complaints it receives. 1,680 formal complaints were received in 2017/18 representing a 4% decrease on previous year's figure of 1,747.



Improving

The Trust has a Complaints Team and the complaints process ensures that the Trust can learn from previous failures.



There has been an increasing trend over the last three years in the number of compliments that the Trust receives.

A total of 7,602 compliments were formally recorded during 2017/18. There have been countless other informal compliments, cards and gifts to caregivers in the Trust.

The Trust commits to learning from past failures and building on successes too.

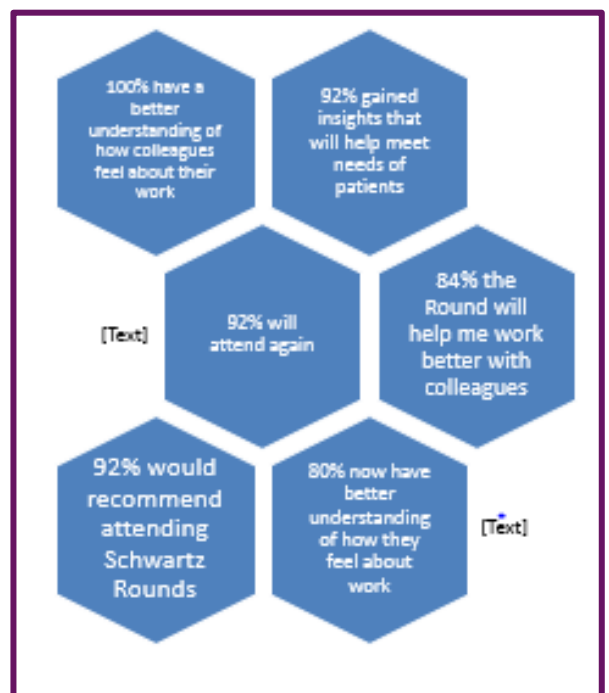


The Trust is part of a regional [Quality 2020](#) initiative to support staff when an unexpected incident has occurred. The Trust recognizes that providing health care can have a significant emotional impact on staff particularly when an unexpected incident occurs.

A model of support for staff is being designed and tested and is based on research of best practice throughout the world. The [Belfast Support team](#) (BeST) involves a trained 'buddy' being available to talk through a concern or the emotional impact of an incident. The buddy would offer support and their experience of, for example, coroner's inquests, SAls or complaints. This support network is confidential, and separate to any ongoing investigation.

The Buddy service launched in November 2018. 50 staff have volunteered to be Buddies and [Schwartz Rounds](#) commenced in 2018 in the Children's Hospital. The model was co-designed with staff and will be piloted in the Children's Hospital on the Royal Hospital site. Schwartz Rounds are facilitated discussions over lunchtime about the emotional impact that delivering care can have on our staff. The agreed model to test in Children's Hospital was to have Schwartz Rounds and a 'Buddy' service to support staff who have been impacted emotionally following an unexpected event.

The evaluation of these Schwartz Rounds can be seen alongside.



Improving

Our 2019 'As Is' Position for Indicator 9 = Established

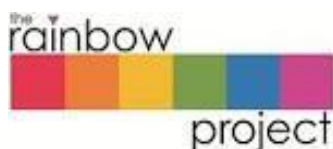
Themes	Developed In place and understood	Established Engaging and activating	Advanced Creating positive outcomes	High Performing Embedded and always improving
Theme 27: - Understanding the external context	Leaders have a clear understanding of who the stakeholders are in the communities and the markets the organisation serves	The workforce is diverse and reflects the communities and markets the organisation services	People understand the relationship between the organisation and the wider community	The organisation has a positive impact on the communities and markets it serves

Theme 27: Criteria 1: Leaders have a clear understanding of who the stakeholders are in the communities and the markets the organisation serves

Our Planning & Equality Team is responsible for managing major Trust strategic service changes & leading on compliance with Trust legal responsibilities in regard to equality, good relations human rights and disability. They have led the New Directions strategic changes within the Trust and New Directions 2 is now well developed in partnership with Belfast communities and stakeholders.

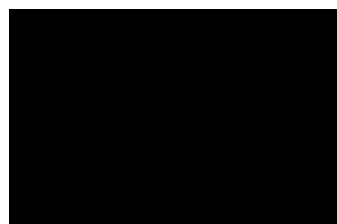


Belfast Trust's five year Equality and Disability Action Plans 2018-23 were shaped and developed with input from almost 100 key stakeholders during a pre-consultation regional 'Delivering Together' workshop at Knockbracken Hall on 19 January 2017. Participants included representatives from:

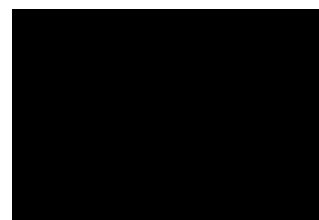


Improving

A wide range of stakeholders were invited to the event and we hosted the event with a “blank canvas” in Knockbracken Hall in order to co-design the proposed actions in partnership with a diverse range of participants. Creative ways of engaging participants were used including Café Style Conversations, a Big Brother style Diary Room, the Graffiti Wall and Postcards in Post-boxes.

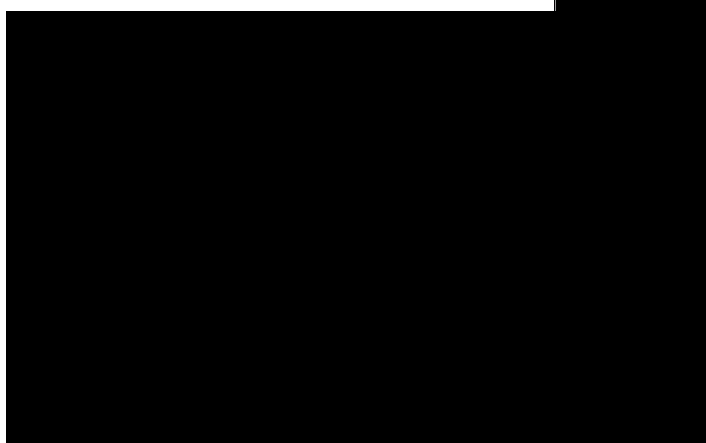


This approach was in keeping with the clear direction set out by the Health Minister’s **Health and Wellbeing: 2026 Delivering Together** strategy. The purpose of working in this way is that plans will be designed for and with people and communities rather than by organisations and services. It was important to continue the established dialogue and engagement with the local community and with those who have an interest in how we provide health and social care services. This on-going engagement and partnership working has been instrumental in the development of the Plans.



The Trust received feedback from its stakeholders:

If you want to know how shoes fit – do you ask the person who made them or the person who is wearing them?” Need to look at IMPACT of service for disabled people. Ask Service user not provider



Empowering staff is crucial. By doing this, it will have a knock on effect on involvement and equality

In addition to the workshop we formally consulted collaboratively on our five year Equality and Disability Action Plans from 7th August to 7th November 2017. Over 1500 groups, organisations and individuals were contacted by email or letter informing them of the consultation arrangements.

Improving

During the formal consultation, responses were received from the following organisations:

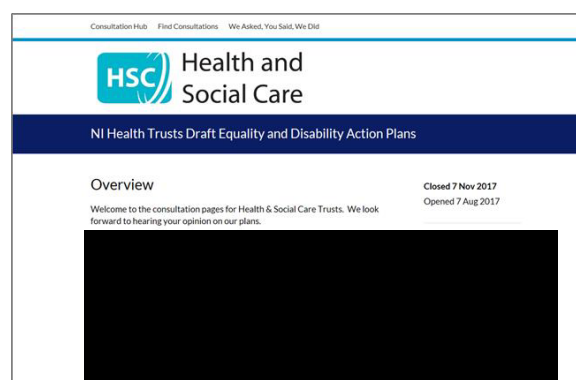
- Alzheimer's Society
- Autism NI
- Belfast Trust Carers' Reference Group
- Equality Commission Northern Ireland
- Lisburn and Castlereagh Borough Council
- Parenting NI
- Royal College of Speech and Language Therapists
- Sinn Féin
- TILLI (Tell it Like it is)
- Unison

From the Pre consultation workshop and the formal consultation the Trust robustly reviewed responses and feedback to help them identify key themes which have been reflected in the five year Equality and Disability Action Plans.

Citizenspace

Consultees were encouraged to respond using Citizen Space, an online consultation platform, to simplify the process of responding to the public consultation. This link was available and readily accessed on our websites. An overview of the plans and how to respond was also provided in British and Irish Sign Language.

Through Citizenspace the online consultation software tool Trusts received responses from 15 individuals – including staff, service users, and the community and voluntary organisations:



<https://consultations.nidirect.gov.uk/hscni-belfast-trust/equality-disability-plans/>
<https://consultations.nidirect.gov.uk/hscni-belfast-trust/good-relations-strategy/>

The contents of the 'Good Relations Strategy: Healthy Relations for a Healthy Future 2' strategy has been co designed and informed by feedback from a 12 week public consultation, an independent evaluation of the Trust's first Good Relations Strategy in 2012 – 'Healthy Relations for a Healthy Future' and a staff/service user survey to ensure it is meaningful and relevant to all stakeholders. As with our previous strategy, we were determined that Healthy Relations for a Healthy Future 2 would be meaningful and reflects the needs of both staff and service users alike, we therefore, conducted an evaluation of the previous Good Relations Strategy. The evaluation provided the opportunity for the Trust to evaluate and assess the impact of the previous strategy by asking the public and staff to tell us what worked and what did not work and what they felt should be included in the new Good Relations Strategy.

Following an extensive consultation with over 500 carers the Trust's Carers' Strategy for 2017 – 2020 "Caring Together in Belfast" was launched in March 2017. The Carers' Strategy development won third prize in the Chairman's awards ceremony. The Strategy outlined 4 priorities including:

-

The vision of this strategy will be to deliver the highest quality support, for our carers living in the Belfast area and carers of people who use our regional services, and the enhancement of the range and quality of services provided for carers.



In accordance with Section 19 and 20 of the Social Reform Act 2009 (NI) Belfast Trust actively engages with service users, carers and members of the public on the planning and delivery decisions that affect their health and social care.

However, in accordance with Standard 3 of this PPI duty (Personal and Public Involvement) to seek out clear and accessible opportunities for engagement the Trust has embraced a new method of consultation entitled “**Appreciative Inquiry**”.

Appreciative Inquiry accentuates the successes of the past and evokes images of the possible. It is a strengths based approach designed to create solutions based on conversations on the premise that people using the service are the experts. Appreciative Inquiry moves away from simply problem solving to a 4 D cycle – Discovery, Dream, Design, Destiny – where everyone is asked to appreciate the best of what is, what might be, what should be and how to move forward.



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Improving

This method of consultation involves an organisational culture change and is very much in line with the Trust's value of being leading edge and commitment to delivering safe, effective and compassionate care.

Theme 27: Criteria 2: The workforce is diverse and reflects the communities and markets the organisation services

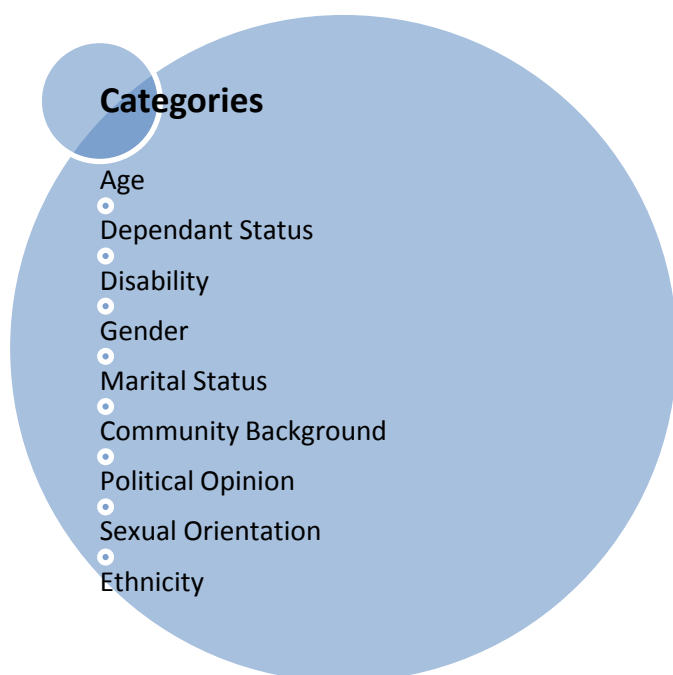
The Trust is an Equal Opportunity Employer and Equality of Opportunity is a thread that runs through all our people processes and practices. The Trust's [People & Culture Strategy](#), [Learning & Development Strategy](#), [Recruitment & Selection Framework](#), and the regional [HSC Workforce Strategy](#) all place diversity at the heart of the Trust's approach. Our continued commitment to equality of opportunities is set out in our [Employment Equality and Diversity Plan](#) which focusses on the internal needs of our people.

Our Diversity

The Trust continues to encourage staff to update their equality details on the employee self-service portal of HRPTS to increase the reliability of reporting data. Having robust, complete and current data helps the Trust to ensure its strategies, processes, procedures and practices are based on up-to date intelligence.



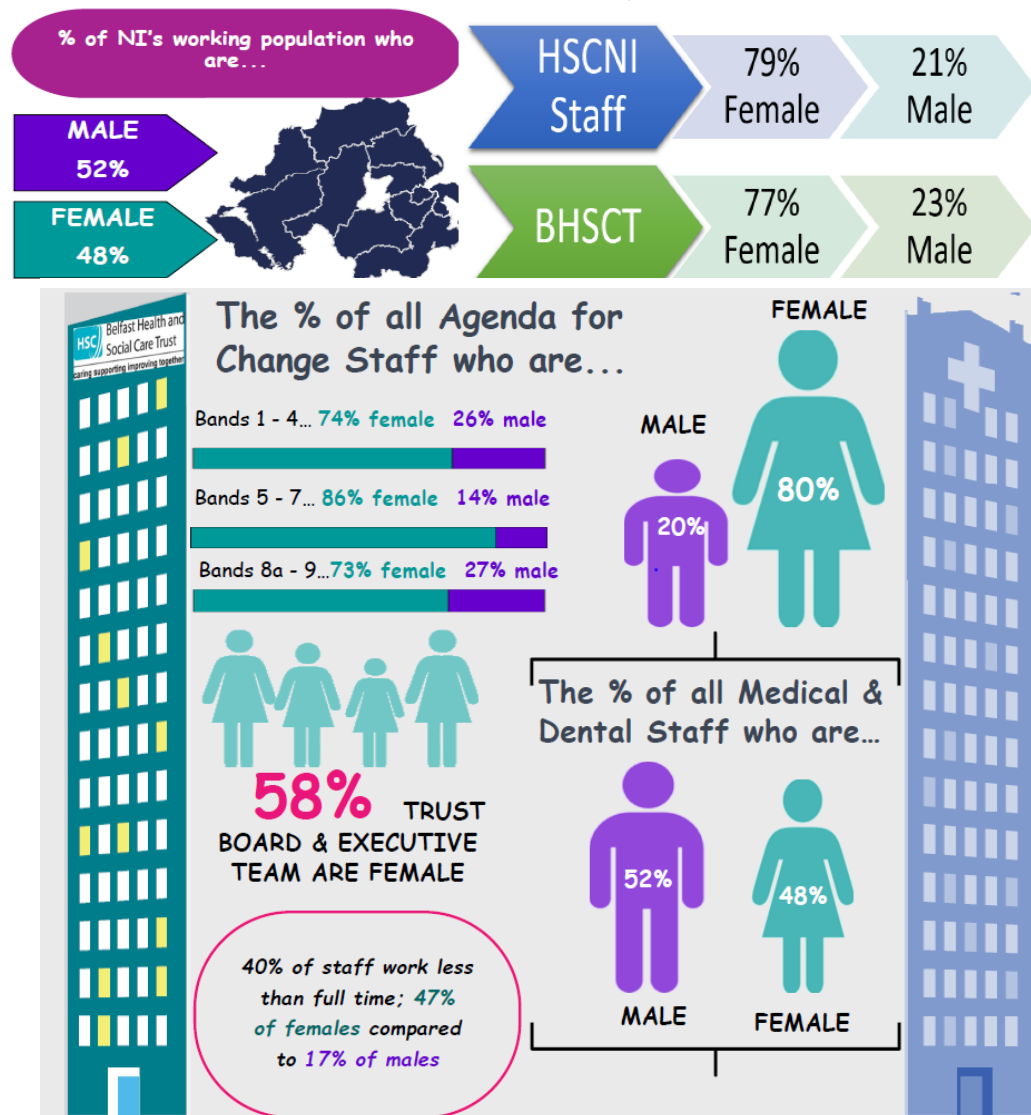
Equality data is collected across the following categories:



The Trust reports annually to the Equality Commission NI on the gender and community background workforce profile. A detailed analysis of community background data is conducted across Trust locations on a 3 yearly basis, with the findings of the report informing the Trust's Affirmative Action Programme. One area where the Trust has full levels of disclosure is gender. This allows for a more detailed analysis across Trust directorates and job bands.

Improving

The infographic provides some overarching analysis and benchmarking of gender data available to the Trust:



Equality & Diversity

The following is an overview of the strategies, approaches and actions we have taken to ensure diversity is recognised, valued and celebrated across the Trust. This section of the Storyboard sets out the additional strategies, processes and practices which demonstrate the Trust's commitment to the creation and development of a talented workforce.

The Trust has developed and is rolling out a **new Employment Equality & Diversity Plan** to developing a diverse workforce, attract high calibre employees and maximise productivity. We are committed to being an 'equal opportunities employer' who genuinely aspires to prevent unlawful discrimination and harassment and to promote a good and harmonious working environment for all.

This plan is aligned with the Trust's Business Strategies and informed by the regional HSC Equality and Disability Action Plans 2017-2022. It sets out our employment equality priorities over this 5 year period. At its core are the **Trust values** of respect and dignity, openness and transparency, being leading edge, maximising learning and development and being accountable. The Plan has been developed in accordance with the requirements of the equality and anti-discrimination legislation in Northern Ireland and with the good practice recommendations of the Equality Codes of Practice and Equality Commission NI Unified Guide.

Improving

A new regional **Equality, Good Relations and Human Rights e-learning** programme was launched in December 2017 and is now available for all staff. The training is now complemented by a training manual providing additional advice and signposting. Belfast Trust staff led on both initiatives.



Dr Evelyn Collins CBE, Chief Executive of the Equality Commission of Northern Ireland, praised the programme for being meaningful and practical while addressing equality stereotypes. Dr Collins noted that a scenario for managers around equality screening was particularly welcome.

2,686 staff completed this training during the course of the 2017 / 2018 and a further **952** in the first half of 2018/19.

Two modules were developed - one for core staff and one with additional resources for managers. The training is primarily scenario-based and tailored to the HSC setting so that it gives staff real support when delivering daily services.

The Trust is also seeking to furnish new staff with mandatory training in advance of their start date (on-boarding) so that when they begin, they will have already benefitted from the learning and to help facilitate delivery of compassionate and accessible services.

Facilitated sessions are provided for staff whose working environment does not support this type of learning and complements the Annual Programme of classroom-based training.

Supporting Staff with literacy difficulties:

Belfast Trust was delighted to announce that for a trial period of one year, it is deploying **Read&Write literacy software** to **all** staff. Such investment demonstrates the Trust's commitment to support all staff to be the best they can be, whatever their abilities or challenges, roles or responsibilities.



The Trust acknowledges that effective communication - between colleagues, service users and any stakeholder - is the lifeblood of the organisation and written communication lies at the heart of this. In addition, The Trust wants **all** staff to feel valued at work and able to do their jobs to the best of their abilities. It is estimated that **10%** of the population has dyslexia with the nursing union RCN noting recently that the prevalence amongst nursing staff is higher at 14%. In addition, **4% of Trust staff are BME** - this is likely to rise with international nursing recruitment.

Improving

Easy access for all staff across the Trust without having to disclose your difficulties or wait for an Occupational Health referral and assessment or Managerial approval and purchase. Anyone who wants the software will be able to discreetly access it. They do not need to disclose their disability to get support unless they want to.

Support for Staff at risk of Domestic Abuse

The Trust provides a dedicated in-house support service for any staff member who experiences domestic violence, offering free, confidential emotional and practical support for any member of staff who is experiencing domestic abuse.

The 10th December 2018 marked the 10th anniversary of the launch of our **domestic abuse support service** in 2008. Belfast Trust was the first HSC Trust in Northern Ireland to develop a workplace policy and support service in 2008.

Professor [REDACTED], Emeritus Professor at Ulster University, attended the anniversary celebrations and highly commended the Trust for being unique and ground breaking in developing such a policy and support service for both men and women whilst in work.

To raise awareness of the service and policy and to reduce the stigma associated with domestic and sexual abuse every year, the Trust created and distributed **15,000** calendars to staff.

Lesbian, Gay, Bisexual and Transgender

We continue to support and promote the regional **HSC LGBT Staff Forum** which is a forum for lesbian, gay, bisexual and transgender staff and students in the HSCNI and promotes inclusive workplaces.

The Trust has also implemented a **Gender Identity and Expression Employment Policy**. The Trust is committed to ensuring that transgender and non-binary people feel comfortable to express their gender identity and can fulfil their potential and fully contribute to the workplace. The policy is aimed at creating a workplace where the dignity and respect of transgender and non-binary people are protected and promoted.



Improving

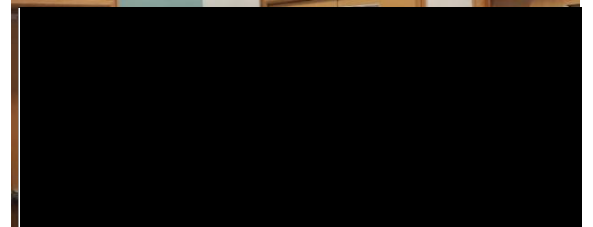
Positive Action: diversifying our workforce

The **Positive Action** programme has been a highly successful Employability Programme for new recruits with Learning Disabilities who acquired work experience, an accredited qualification and a post at the end of the training programme in our Patient & Client Support Services (PCSS) department.



This was a 12 week Employability Training Programme which has been developed using the PCSS Staff Induction. The programme was and will be delivered by Belfast Metropolitan College in partnership with PCSS staff and endorsed by the Open College Network. On successful completion of the Training Programme participants are offered employment within PCSS.

This is a very exciting time for us all at PCSS and for our partners in BHSCT Adult Learning Disability, BHSCT Human Resources, Staff Side, our Workable NI Providers such as Orchardville Society, NOW, Disability Action, Mencap, USEL and our supporting partners Belfast Metropolitan College, Open College Network and the Northern Ireland Union of Supported Employment, all of whom have committed fully to this Programme.



The Trust was reaccredited in 2015 by Employments for Disability (NI) as an **Employer of Excellence** for its work on position action for people with disabilities. The Trust will work towards re-accreditation with Employers for Disability (NI) in 2019.



