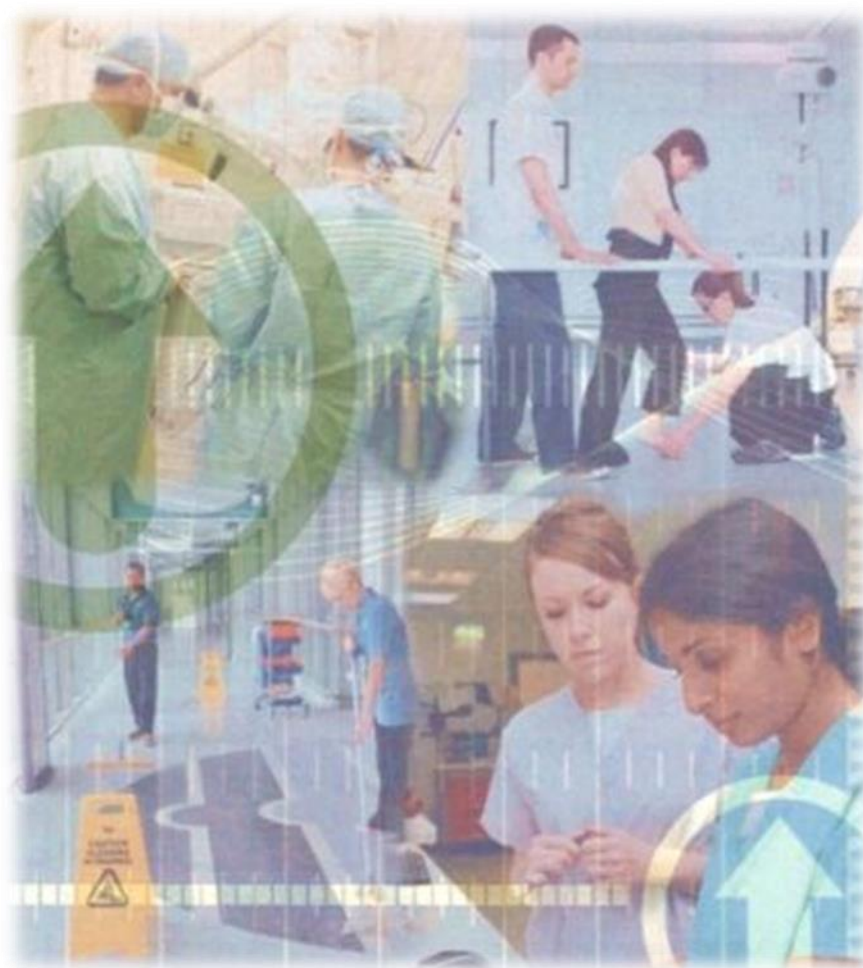


IIP Storyboard Investing in Our People:

*To Provide High Quality Patient and Client Care
and Improve Organisational Performance*



February 2016



respect & dignity



openness & trust



leading edge



learning & development



accountability



**INVESTORS
IN PEOPLE**

FOREWORD



We are delighted to share this organisational storyboard with you which we hope you will find helpful in conveying some of the key strategies and processes that we have in place in the Belfast Trust, to support our journey towards being a world class provider of health and social care. The Trust has been accredited twice against the IIP Standard, first in 2010 and then 2013, and we remain very proud of our IIP accreditation which we firmly believe has been a major contributing catalyst for our Trust's continuous performance improvement through our People.

However, as a third generation IIP Organisation, we wanted to move beyond The IIP Core Standard and seek recognition for the excellent and innovative work around a wide range of areas which all contribute to effective People Management. Therefore, this time around, our assessment will be against the Extended Framework at Bronze level.

Our overall objective is to improve the health and wellbeing of the population we serve, enhancing the experience of care provided, whilst also ensuring continuous improvement is at the heart of everything we do. Therefore, we believe the Belfast Trust has a very positive story to share; a story which sets out how we are currently meeting the IIP Extended Framework. We hope that through the assessment process, you will also experience the tremendous work undertaken by our staff that effectively demonstrates this.

Our evidence requirements have been grouped into themes which we felt would be best aligned with our service needs and thereby add most value. Those five themes are reflected in this storyboard and are:-

- 1. Effective strategic and business planning**
- 2. Developing People**
- 3. Engaging and Empowering the Workforce**
- 4. Leadership and Management Effectiveness**
- 5. Recognising and Continuously Improving Performance**

Our stretch evidence requirements within those themes are based on the following areas of work:

- **Values**
- **Key Performance Indicators**
- **Learning & Development Strategy**
- **Leadership & Management Strategy**
- **Coaching**
- **Improving Working Lives**
- **Equality and Diversity**
- **Recruitment and Selection**
- **Internal Communication**
- **Self Review**

This Storyboard does not capture or present all of our existing IIP evidence, however it illustrates what we view as good practice approaches across the five themes, including the broad developments and progress since our last assessment. We trust that the content will provide a useful and informative overview for all members of the Assessment team.

We welcome the opportunity to receive feedback through the assessment process and believe that it will support us in our continuous improvement journey.

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





Chief Executive





*Director of Human Resources &
Organisational Development*

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Introduction

Understanding Health and Social Care Structure:

Who are we? Overview of the Belfast Trust

The Belfast Trust is one of 5 Health and Social Care (HSC) Trusts which provide health and social services across Northern Ireland. The Belfast Trust delivers integrated health and social care to around 340,000 people in Belfast and Castlereagh as well as a range of specialist regional services to all citizens across Northern Ireland.

The scale and complexity of the organisation is vast, yet we have a clear job to do – ***‘to give the best possible care as a team and to provide this care with dignity and respect in a timely and safe manner’*** ■■■■■■■■■■, Chief Executive.

With an annual budget of **£1.2bn** and a workforce of **22,568** (full time and part time) we are one of the largest Trusts in the United Kingdom.

How is the Trust Structured?

The Belfast Trust provides integrated care. This means that we provide both acute services (hospital based) and community services (in people's own home or through locally based health centres and facilities) in a joined up way. In order to deliver these services in the best way the Trust has a devolved structure which has been grouped into 10 Directorates 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 Director's Group
- Nursing and User Experience
- Finance, Estates and Capital Planning
- Human Resources
- Performance, Planning and Informatics
- (Corporate Communications)

What are the Accountability/Reporting Arrangements for the Trust?

The overall structure of the Belfast Trust and how it is managed can be described as three levels namely: -

- The Trust Board of Directors and Non-Executive Directors
- The Trust's Executive Team
- [The various Directorates and their own internal structures and reporting arrangement.](#)

The Trust's Board of Directors and Non-Executive Directors

The Board of the Belfast Trust is responsible for the strategic direction and management of the Trust's activities. The Board is accountable, through the Chairman and Chief Executive to the Permanent Secretary at the Department of Health Social Services and Public Safety, and ultimately to the Minister for Health.

It is made up of a Chairman, seven Non - Executive Directors, Chief Executive, four Executive Directors and six other Directors. The Department of Health, Social Services and Public Safety appoints non-executive directors, with the approval of the Minister for Health, Social services and Public Safety.

The Trust Board meets approximately 11 times per year, at Public Board meetings and alternate Trust Board workshops.

The Board exercises strategic control over the operation of the organisation through a system of corporate governance which includes:

- A schedule of matters reserved for Board decisions
- A scheme of delegation, which delegates decision-making authority within set parameters to the Chief Executive and other officers
- Standing Orders and Standing Financial Instructions. An Audit Committee and an Assurance Committee have also been established.

The Assurance Framework (and Principal Risk Document) describes the organisational objectives, identifies potential risks to their achievement, the key controls through which these risks will be managed and the sources of assurance about the effectiveness of these controls. It outlines the sources of evidence which the Board will use to be assured of the soundness and effectiveness of the systems and processes in place to meet objectives and deliver appropriate outcomes.

This framework should provide the Board with confidence that the systems, policies, and people are operating

effectively, are subject to appropriate scrutiny and that the Board is able to demonstrate that they have been informed about key risks affecting the organisation.

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.

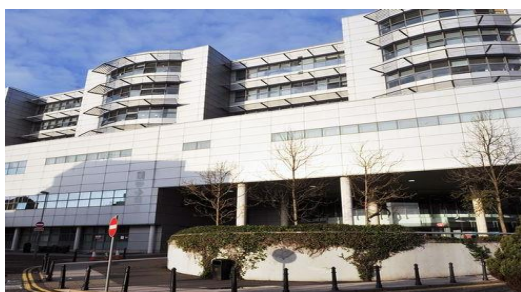
The Executive Team is led by the Chief Executive [REDACTED] and includes the Trust Directors and their respective Directorates as set out below:



The Services we provided in 2014/2015

In our Hospitals:

- We have cared for 147,320 in-patients
- We have cared for 597,773 outpatients
- We see 178,366 **new** outpatients each year in acute services specialties
- We have cared for 35,851 elective inpatients in acute services specialties, including 13,103 cardiac surgery operations
- We have cared for 62,788 non-elective inpatients in acute service specialties
- We have had 162,535 new attendances at our Adult Emergency Departments
- We operated on 62,804 patients as day cases
- We provided 14,397 critical care bed days through 58 level 3 & level 2 beds



Royal Victoria Hospital



Mater Hospital



Belfast City Hospital

In the Community and in people's own homes:

- We provide 10,000 hours of home care support per week to clients through our in-house services.
- We provide 7,355 care packages - 739 through residential care, 1,797 through nursing home care and 4,819 through domiciliary care packages to enable people to live as independent a life as is possible.
- We are corporate parents to 750 children in care, the majority in foster care
- We are responsible for 382 children on the child protection register
- We provide 33,000 district nurse visits



Knockbrea Health and Wellbeing Centre



Old See House Mental Health Facility



Grove Health and Wellbeing Centre

The Services we provided in 2014/2015

Support Services – As a Trust:

- We produce **1,700** budget reports per month to help managers manage £1.2 billion expenditure
- We perform **294,000** plain film x-rays
- We complete **130,400** specialist examinations, including MRI, CT, ultrasound and PET/CT
- We manage the Trust estate of **8 million** square feet of floor space
- We manage **350** Trust buildings
- We have **399** Volunteers in the Trust
- We serve **8,000** canteen meals a day
- We receive **1,800** daily requests for porters
- We provide **12,097** regular information reports per year
- We interpret and code clinical information for **240,000** patients per year
- We have produced **35million** Lab tests



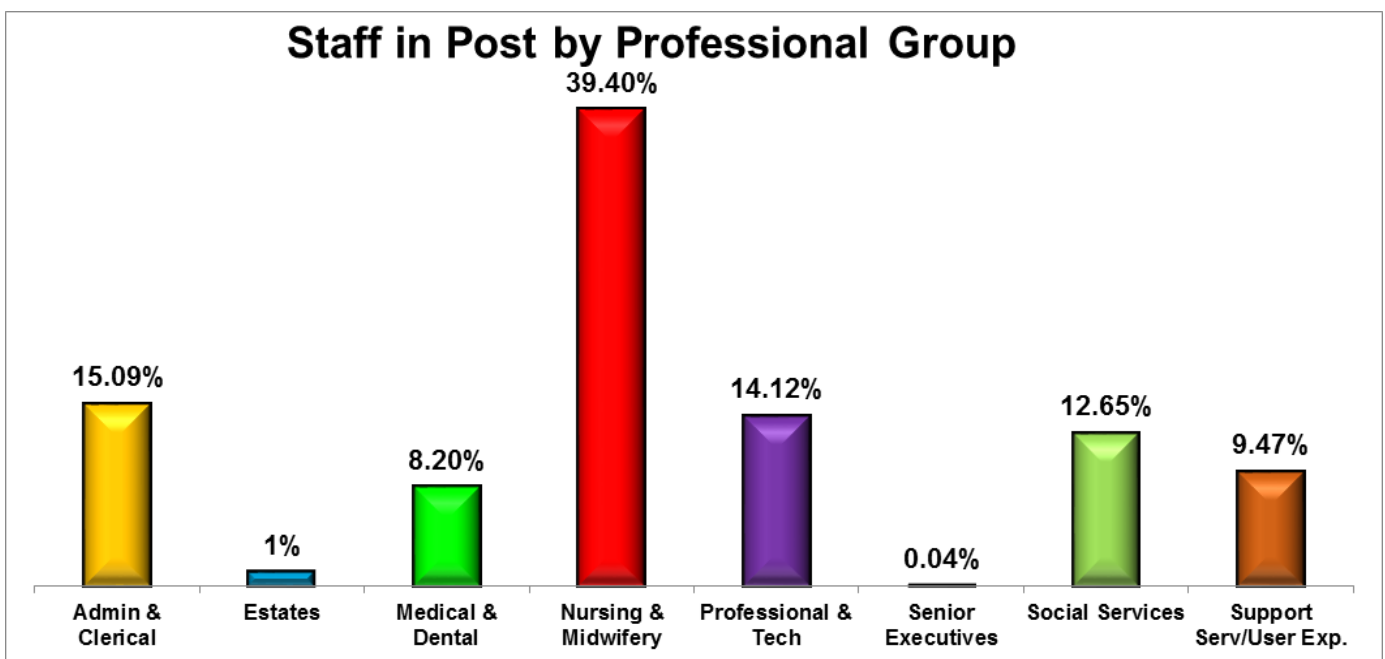
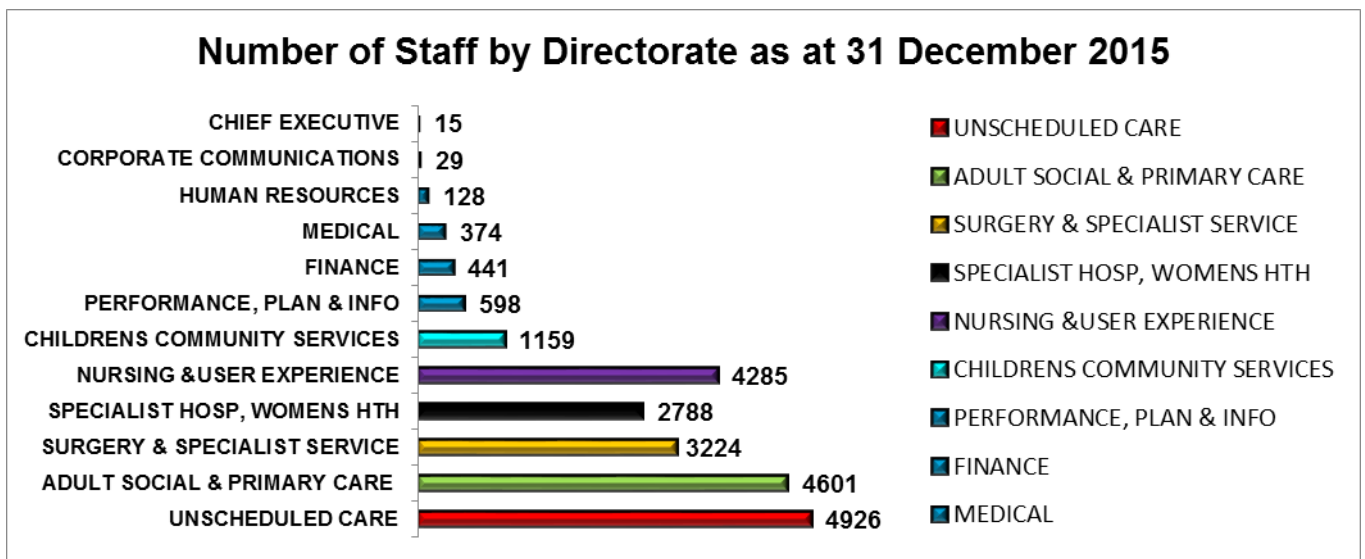
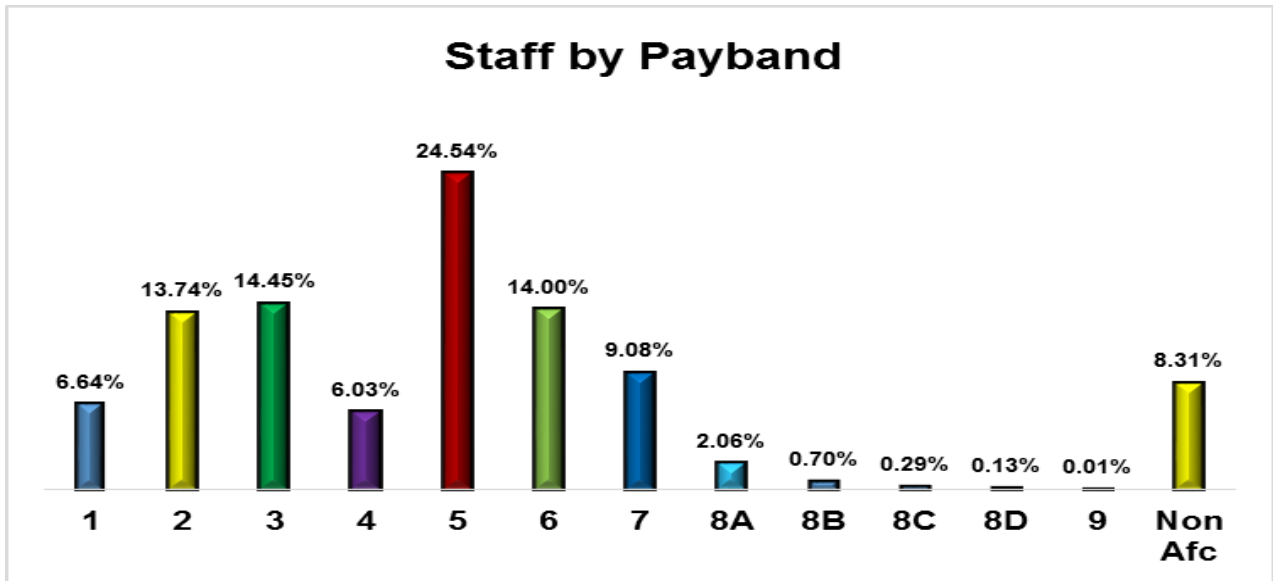
Our People - As a Trust:

- We employ **22,568** staff across **8** professional groupings
- **58%** of our staff are full time while the remaining **42%** are part time
- **78%** of our staff are female
- **65%** of our staff are employed on bands 1-5, **26%** are employed on bands 6 – 8D and **8.2%** of staff are 'Medical and Dental'.
- **40%** of our staff are in bands 1-4
- Nursing with (**39.4%**) is the largest professional grouping with staff banded as 'Senior Executives' being the smallest Professional Groups at **0.04%**.
- We recruited **2,048** people In 2014/15



Professional Groups

The charts below set out our current staffing, including breakdown per Directorate, Pay-band and Professional Group



Our Purpose at a Glance

Setting a Strategic Direction

Purpose

Improve Health and Wellbeing and Reduce Health & Social Inequalities



Vision

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



Corporate Objectives

A culture of safety and excellence

Continuous improvement

Partnerships

Our People

Resources

Provide safe, high quality effective care

Reform and renew our Health and Social Services

Improve Health and Wellbeing through partnerships with Users, Communities and Partners

Show leadership and excellence through organisation and workforce development

Make the best use of resources by improving performance and productivity

Values



respect & dignity



openness & trust



leading edge



learning & development



accountability

Key People

An Introduction to the Trust's Team of Directors

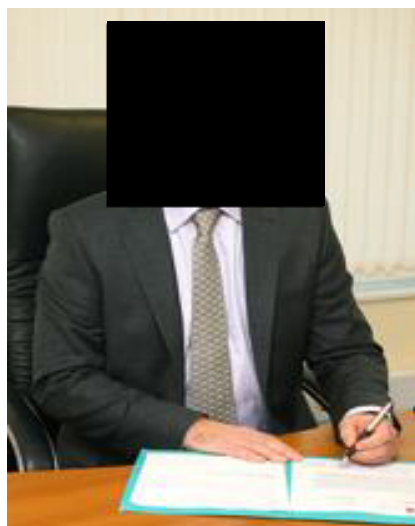


Chairman

██████████, CBE, took up his appointment from 3 March 2014 for a period of four years. ██████████ resides in Belfast. He was Chief Executive of Belfast City Council for 12 years. He has spent his 30 year career in the public sector, 18 years as a lawyer and 12 as Chief Executive.

He has served on many external boards, including the Council of the Law Society, and has chaired the governing body of Belfast Metropolitan College and a number of citywide partnerships including the Belfast Strategic Health Partnership, Belfast Resilience and the Community Safety Partnership.

██████████ was awarded a CBE in the Queen's Birthday Honours List 2013 for services to Local Government and the Community.



Chief Executive

██████████ was appointed to the post of Chief Medical Officer for Northern Ireland in September 2006. Prior to joining the Department he had been Medical Director at the Royal Group of Hospitals from August 2002. ██████████ graduated with Distinction from Queen's University Belfast in 1986 and completed his undergraduate and postgraduate training in Northern Ireland and London. In 1991 he attained a Research Fellowship at St Mary's Medical School and Imperial College London, researching novel HIV treatments.

██████████ has been a Consultant in the Health Service since 1994 when he was appointed Consultant Physician in HIV medicine at the Royal Group of Hospitals and has more than 10 years health service management experience.

He has a longstanding interest in continuing medical education and was Postgraduate Clinical Tutor in the Royal Group of Hospitals between 1996 and 2000 and Director of Education in the Royal Hospitals from 2000. As Medical Director at the Royal Hospitals, he contributed to strategic change at Trust, regional and national level.

██████████ took up the post of Chief Medical Officer during a time of significant change for Health and Social Care in Northern Ireland with responsibilities for Policy and Strategy in relation to Public Health, Quality and Safety and Research and Development. He also provides strategic advice to Ministerial and other Government departments on health related matters. He has been closely involved in the development of the new Health and Social Care structures, following the Review of Public Administration, including the establishment of the Public Health Agency.

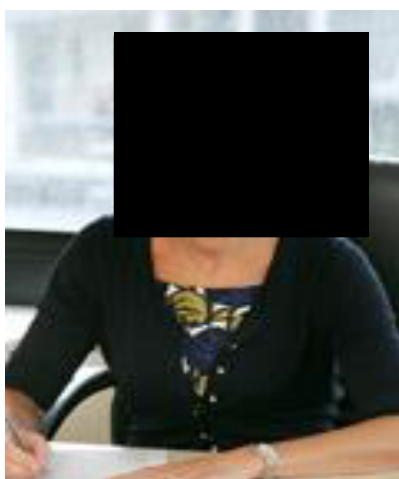
██████████ took up his post in the Belfast Trust in December 2014.



Deputy Chief Executive /
Director of Finance

██████████

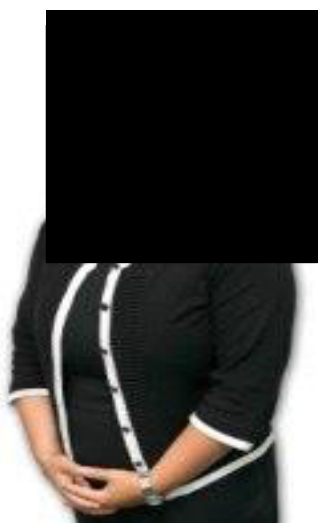
██████████ has responsibility for accounting and financial services; financial management; commissioning; estates, capital planning, capital and investment for the Trust. Martin has over 20 years financial experience in health and social care. He was interim Director of Finance in Northern Trust and, prior to this, Director of Finance at Southern Trust



Director of Medicine

██████████

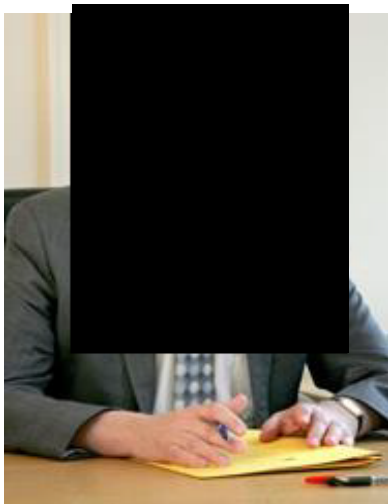
██████████ took up the post as Medical Director in August 2014 and has a background in Geriatric medicine. She studied medicine at Queens University Belfast before undertaking her early training at Belfast City Hospital. Moving to the Royal Liverpool University Hospital, Cathy was appointed as a Consultant Geriatrician in 1996 and then Clinical Sub-Dean in 2001.



Director of Nursing and
User Experience

██████████

██████████ has held the position of Director of Nursing and User Experience since January 2010. She is responsible for Nursing, Patient and Client Support Services within the Trust. Brenda is also an Executive member of the Trust Board. In 2002 ██████████ took up the position of Directorate Manager and Principal Children's Nurse in the Royal Belfast Hospital for Sick Children. From 2007 to 2009 ██████████ held the post of Co-Director, Child Health and Associate Director of Nursing in the Belfast Trust.



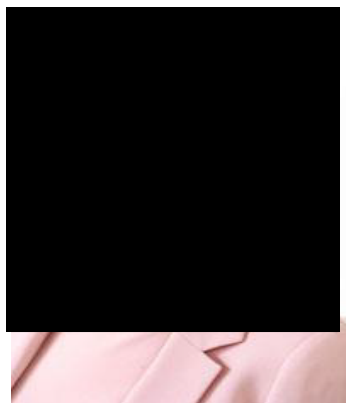
Director Children's
Community Services

[Redacted Name]

[Redacted Name] commenced work in the Belfast Trust in September 2012 as Director of Children's Community Service.

His brief includes professional lead for Family and Childcare Social Services, Community Child Health, Social Work Training, Regional Out of Hours Social Work Service for Belfast Trust and South Eastern Trust.

[Redacted Name] was formerly Director of Children's Services / Executive Director of Social Work in the Northern Health & Social Care Trust from May 2009 to August 2012.



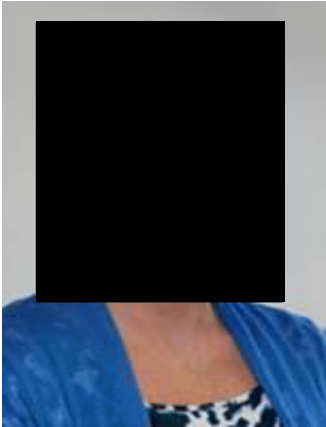
Director of Surgery and
Specialist Services

[Redacted Name]

[Redacted Name] is the Director of Surgery & Specialist Services in the Belfast Health & Social Care Trust, having joined the Trust at its inception in April 2007. She has held a number of director roles within the Trust and also has strategic and corporate responsibility as Executive Lead for Cancer Services.

Her portfolio within the Trust includes a large and diverse service group encompassing a complex range of largely acute services, which are both local and regional in nature and cross the secondary and tertiary care interfaces. The Services are organised via four large divisions; Cancer & Specialist Medicine; General Surgery, Breast & Urology Services; Specialist Surgery and Laboratories & Pharmacy.

[Redacted Name] is also the Chair of the Northern Ireland Pathology Network, a Board member of the Northern Ireland Cancer Network, and former Director of Capital Development at the Ulster Community & Hospitals Trust.

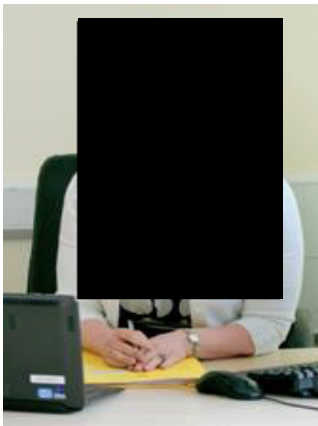


Director of Adult Social and
Primary Care Services

[Redacted Name]

[Redacted Name] was appointed as Director of Adult, Social & Primary Care Services in September 2012 and is responsible for hospital and community services for older people, mental health, learning disability, physical disability and psychological services.

[Redacted Name] is a Registered Nurse, having trained in the Royal Victoria Hospital. She joined Belfast Trust senior team in 2009 as Director of Performance, Planning and Informatics.



Director of Unscheduled
& Acute Care

[Redacted Name]

[Redacted Name] took up post in November 2013 and is responsible for Anaesthetics, Critical Care, Theatres & Sterile Services, emergency departments, medical and cardiology services, neurosciences and imaging, medical physics, allied health professionals and GP out of Hours service.

[Redacted Name] is a registered general nurse having trained in the Royal Victoria Hospital, specialising in operating department nursing.



Director of Specialist
Hospitals & Women's Health

[Redacted Name]

[Redacted Name] took up post in July 2012 and his role includes responsibility for the three sub areas of service:

- Child Health, Dental and ENT services – which include the RBHSC and the Dental Hospital
- Trauma and Orthopaedic services including orthopaedic surgery at Musgrave Park Hospital, Fracture Surgery at the Royal Victoria Hospital.
- Maternity and Women's Services including the RJMS maternity Service, Mater Hospital Maternity service, Gynaecology, Sexual and Reproductive Health Service

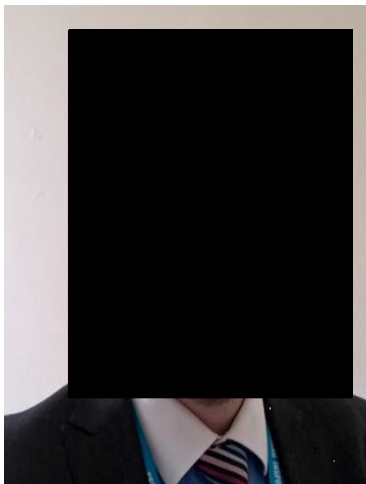


Director of Human
Recourses & Organisational
Development

██████████

██████████ took up the post of Director of Human Resources and Organisational Development in August 2014. Prior to taking up this post, Damian was Director of Human Resources in the Northern Trust.

Before this he held a number of roles in the health sector including Deputy Director of Human Resources in the Royal Group of Hospitals (2005-2007) and Co-Director for Human Resources here in the Belfast Trust (2007-2013).



Director of Planning,
Performance & Informatics

██████████

██████████ took up the post of Director in March 2013. Prior to taking up post Shane had spent the last fifteen years in a range of management posts throughout the HSC. Most recently he was the Programme Director for the Business Services Transformation Programme and before that Director of Customer Care and Performance for Business Services Organisation.

Key Organisational Documents

The Belfast Way



The Belfast Way set out **a strategic direction for Belfast Health and Social Care Trust**. The Belfast Way explains the purpose for which the Trust exists and its business. The main foundations set out within the Belfast Way remain the bedrock for the Trust - the vision and values have been reviewed and updated

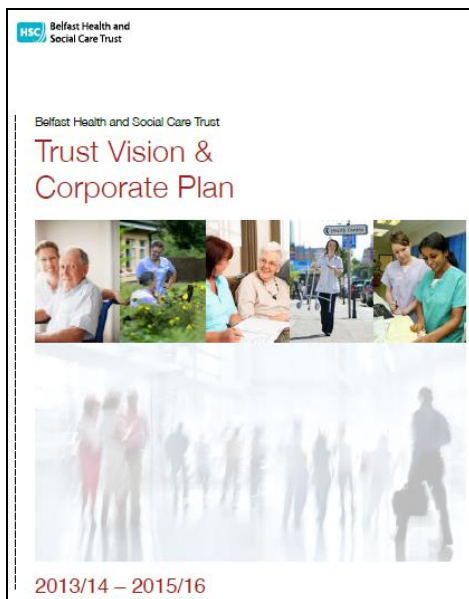
The purpose, business and five corporate pillars inform and underpins our annual plans. The Belfast Way is currently being 'refreshed', led by the Co-Director Forum.

New Directions

New Directions 1 set out the Trust's strategy for how Services were to be reorganised to ensure the Trust provided comprehensive, inclusive and personalised services for patients, clients and service users. This led to the successful implementation of major service change. A Review of New Directions Achievements 2007/08 – 2013/14 was completed in March 2014. The Trust has commenced a significant programme of work on the development of New Directions 2 'Creating our Future Health and Social Care Together 2015 – 2025'.



Trust Corporate Vision and Plan 2013/14 – 2015/16



[The Trust's Corporate Vision and Plan](#) outlines the strategic direction for Belfast Health and Social Care Trust for the period 2013/14-2015/16. It sets out how our services will change and develop to ensure they meet the health and social care needs of the population of Belfast, Castlereagh and across Northern Ireland. This Corporate Plan also outlines our Guiding Principles and our Values which underpin how we will develop services over the next three years. We describe our key service priorities and expected outcomes to be delivered over the period of the Plan, recognising the challenging financial environment for health and social care services across Northern Ireland, with significant efficiency savings to be achieved

Corporate Management Plan 2015/16

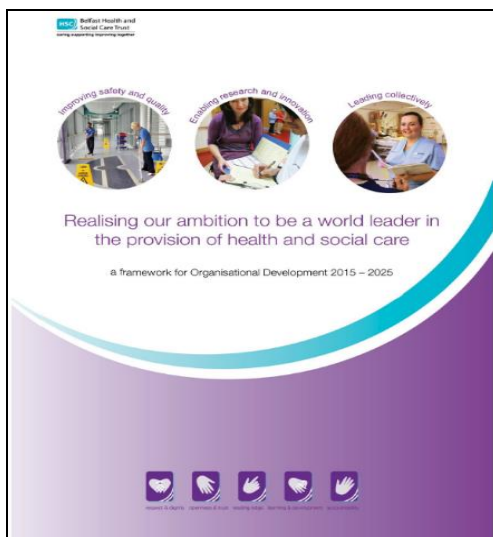
[The Trust's annual Corporate Management Plan 2015/16](#) sets out the key Trust priorities and outcomes for this period

HSC Belfast Health and Social Care Trust	
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Corporate Management Plan 2015–2016

Heart to right, open to all, learning, working & development, accountability

Organisational Development Framework 2015 - 2025



The Trust has been developing and will soon launch its Organisational Development Framework 2015-2025 'Realising our Ambition of Making Belfast Trust a World Leader in the Provision of Health and Social Care'. The Organisational Development Framework 2015 – 2025 sets out how the Trust will work towards realising the above shared ambition. It is characterised and enshrined by leading and embedding a culture of high quality health and social care and sets out how this will become a reality.

Annual Report

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. This year, our chairman [REDACTED] gave a video message to complement the contents of the annual report.



Annual Quality Report

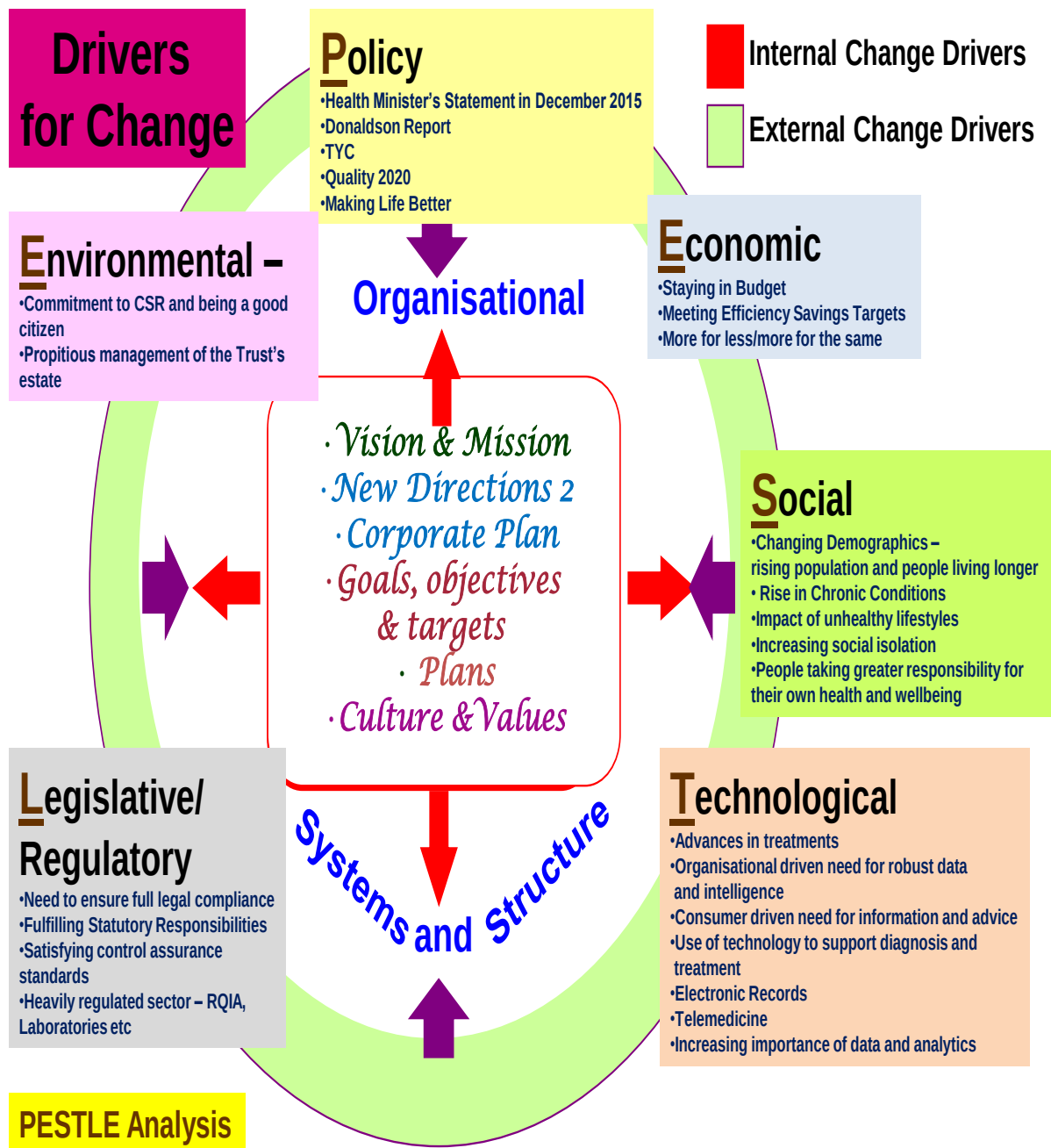
The Third [Annual Quality Report](#) reflects the achievements the Trust has made in areas of quality and safety. The Trust remains focused on modernising how our services are delivered, and recognises that delivering a high quality service is a process, and only by continuously reviewing our performance can we continue on the journey of improvement. The report gives an account of our plans and progress in quality and safety improvement in hospital, community and home settings.



This is a medically led, clinically collaborative and managerially supported programme of improvement, with specific objectives based on the principles of reducing waste, harm and variation. Under the leadership of the Medical Director, this programme has delivered innovative new ways of working, and improved outcomes for patients across a range of areas including emergency medicine, ambulatory care and fractures. There are seven clinical teams with a remit of redesigning and delivering the necessary changes across the Trust.

Context and Challenges

This Storyboard does not set out to provide a detailed narrative on the context within which the Trust currently operates. Neither does the Storyboard set out to explain in any great detail the external forces and drivers which shape the direction of travel for the Trust as well as its priorities. A detailed description of these drivers can be found in other relevant strategic policy documents – see for example the [HSC Board Commissioning Plan for 2015 – 16](#). Where relevant the Storyboard will signpost the Assessment Team to any such policy or strategy document which it feels the Assessment Team needs to be aware of. Below is a broad overview, using a PESTLE Analysis format, of some of the key drivers which continue to shape and inform the Trust's direction and priorities at strategic and organisational levels.



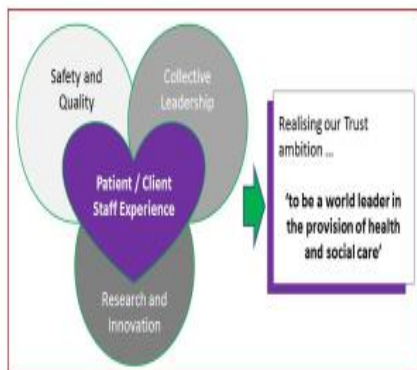
Trust Challenges 2015/16 (and beyond)

New Directions

The Trust has commenced a significant programme of work on the development of New Directions. The development of New Directions 'Creating Our Future Health and Social Care Together' 2015 – 2025 will enable the Trust and its Partners to identify and address the key strategic service changes which will be required during the period 2015 – 2025 to ensure the Trust readiness to meet the challenge



Our Vision for delivering improved experience



Safety and quality	Research and innovation	Collective leadership
– to deliver safe and high-quality care to all	– to drive continuous learning through research and innovation	– to grow a culture where everyone at every level has the capability to deliver improvements

Organisational Development

Building on our achievements to date, as set out in the 'Belfast Way' and 'New Directions' it was recognised that we must move to the next phase of our organisational development journey to be a transforming organisation. As set out within the Management Plan, in 2015/16 the Trust has been developing and will soon launch its Organisational Development Framework 2015 – 2025, 'Realising our Ambition to be a World Leader in the Provision of Health and Social Care'. The Organisational Development Framework sets out how we will work together towards realising this shared ambition. It is characterised and enshrined by leading and embedding a culture of high quality health and social care and sets out how we will make this a reality.

The OD Framework was approved by the Executive Team in December 2015 and will be presented to the Trust Board in April 2016 and launched within the Trust.

Key Delivery Priorities for 2015 /2016

The Trust's key delivery priorities for 2015/16 form part of its overall strategic plan as set out within the Trust's Corporate Vision and its annualised Corporate Plan 2015/16. The following is a summary:

Implementation of Key DHSSPS Policy Initiatives

- Quality 2020
- Making Life Better, with an increased focus on improving health and wellbeing in our population and reducing inequalities in health

Service Reform

- Unscheduled Care Improvement Charter, including Impact and early improvement gains
- Elective Improvement Charter and early outputs
- Community Improvement Charter and work on supported discharge, Reablement, BCH Direct and Acute Hospital at Home

Workforce Engagement and Development

- Organisational Development and B'Well strategies
- Collective Leadership and Employee Engagement, including enhancing Clinical Leadership and Engagement
- Quality Improvement skills and capacity building to support Impact

Transforming Your Care (TYC)

The Trust, as part of the Belfast Trust integrated core partnership, is progressing the following TYC initiatives:

- Acute Care at Home
- Chronic Obstructive Pulmonary Disease (COPD)
- Diabetes
- Stroke (Early Supported Discharge)
- Supporting Young People in their community strategy / edge of care scheme
- Self-Directed Support and Learning Disability Day Opportunities
- Resettlement
- Outpatients in the Community
- Reablement
- Supported Housing

Research and Innovation

- Continued transformation of healthcare through research, for example the management of macular degeneration, cystic fibrosis and cancer clinical trials
- Increased focus on innovation, with the establishment of the NI Genomic Centre and the recent successful UK Precision Medicine Centre for Excellence bid

Reform and Efficiency Plan and Workstreams

The Belfast Trust's Reform and Efficiency Plan for 2015/16 focuses on the achievement of savings from driving out inefficiencies within the organisation and the continuation of the ongoing reform and modernisation services, with reprovision through modern and more cost effective delivery model

A number of projects were developed to deliver the Trust's saving target and are currently being progressed under four overarching reform and modernisation workstreams

- Non-Pay Savings
- Staffing Productivity
- Acute Reform; and
- Social Care Reform

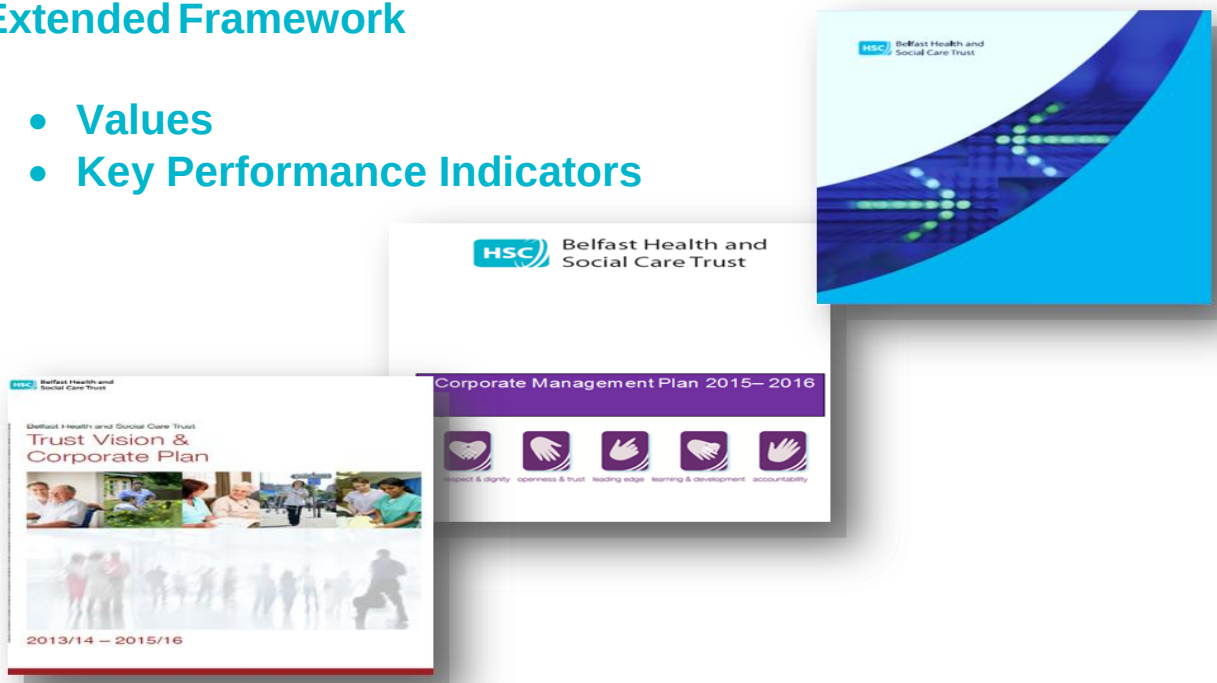
The Belfast Trust is on target to meet the majority of the service delivery priorities set out.

Theme 1

Effective Strategic Business and Contribution Planning

Extended Framework

- Values
- Key Performance Indicators



- The organisation has a vision/purpose, strategy and plan (ERs 1.1, 1.2)
- People and Stakeholders including Representative Groups (where appropriate) are involved in and consulted when developing plans/strategy (ERs 1.3, 1.4, 1.5, 1.6)
- Clear core values relate to vision and strategy (ERs 1.7, 1.11, 1.13, 1.17, 1.19, 1.23, and 1.24)
- Key performance indicators are used to improve performance (1.9, 1.15, 1.21)

Overview of planning within the HSC Sector generally and with the BHSC specifically

Planning within and across the Health and Social Care Sector operates at three distinct yet interrelated levels namely: -

- Departmental level
- Health and Social Care Board level
- Trust level

The Department of Health, Social Services and Public Safety (DHSSPS)

has three main business responsibilities:-

- **Health and Social Care (HSC)**, which includes policy and legislation for hospitals, family practitioner services and community health and personal social services
- **Public Health**, which covers policy, legislation and administrative action to promote and protect the health and well-being of the population
- **Public Safety**, which covers policy and legislation for fire and rescue services
- At Governmental NI Executive Level through the Health Minister's Office, the DHPSSS is responsible for setting the policy and strategic direction for the HSC Sector in overall cross cutting terms such as TYC and at programme level e.g. The [Maternity Strategy 2012 – 18](#) which sets out the future direction for maternity services
- The **HSC Board** is responsible for translating Governmental and Departmental Priorities and locally identified HSC based needs into commissioning intentions and plans.
- **Health and Social Care Trusts** are required to transform service provision and delivery in line with evolving strategic direction and priorities set at Departmental and Board levels, while at the same time provide high quality and safe HSC services as per agreed commissioned contracts with the HSCB.



The themes and priorities contained within the Trust's Corporate Plan and New Directions 2 are directly aligned with the HSC Boards Commissioning Priorities while being closely aligned to the Ministerial priorities and the key themes within *Transforming Your Care*.

The *transformation agenda* is therefore integrated throughout all the Trust's strategic documents at Trust and Directorate levels. In addition to outlining how the Trust intends to deliver on the transformation agenda, these documents also outline how the Trust will deliver on a range of Government and Departmental strategies, standards and initiatives including: -

- [Achievement of Ministerial standards / targets 2015/16](#)
- [Quality 2020](#)
- 10,000 Voices and Patient and Client Experience Standards
- Personal and Public Involvement
- [Public Health Strategic Framework: Making Life Better 2013-23](#)
- Delivering Care: Nurse Staffing in N Ireland
- Other Departmental guidance and guidelines such as (e.g. Service Framework documents, NICE, Maternity Strategy).
- Reablement Model/Reablement Ethos / Reablement Services
- The Donaldson Report
- Minister Hamilton's 2015 Vision for HSC

Overview of planning the BHSC Trust

Planning within the Trust operates at two levels, namely planning at a **strategic level** as set out in the Trust's 'Belfast Way', its 'Corporate Plan for 2013 – 16' and in its 'New Directions 1 & 2'.

In these strategic documents, the Trust in response to key external drivers including Departmental policies, strategies, plans and frameworks), combined with feedback from key stakeholders, sets the direction and overarching strategic priorities for the Trust over a 3 – 5 year period (as in the Trust's Corporate Plan for 2013 – 2016) and in the case of service transformation as set out in New Directions 2, which operates to a more long term horizon of 15 – 20 years.

At an **operational, annualised basis** the Trust through its Corporate Management Plan and the Trust's Delivery Plan and the Directorates' Management Plans set out the Trust's annualised and aligned priorities at Corporate and Directorate levels.

Annualised plans within the Trust operate from the 1st April until the 31st March each year, and planning is devolved to various levels across each of the Directorates through service, team and individual planning processes.

The organisation has a vision / purpose, and strategy - ER 1.1.

The Trust's '**Vision**' which is '*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*' and its '**Purpose**' which is '*to improve health and wellbeing and reduce health and social inequalities*' are set out in the ['Trust Vision & Corporate Plan 2013/14 – 2015/16'](#)

This Corporate Plan outlines the vision, purpose and strategic direction for Belfast

Health and Social Care Trust for the period **2013/14-2015/16**. It sets out how the services the Trust provides will change and develop to ensure they meet the health and social care needs of the population of Belfast, Castlereagh and across Northern Ireland.

The Corporate Plan proposes significant changes for services over the next few years and the Trust has worked to ensure that despite the very fluid and dynamic nature of Governmental Health and Social Care Policy Development, the priorities identified in its Corporate Plan and New Directions 2 are closely aligned to the strategic direction as set out by successive Ministers for Health, Social Services and Public Safety, initially in ['Transforming Your Care'](#) and more recently as set out in the ['Donaldson Report'](#) and the more recent HSC Minister [REDACTED] statement ['ambitious vision for health and social care in Northern Ireland'](#)

This Corporate Plan outlines the Trust's key strategic objectives for the period **2013/14-2015/16** across the Trust's well established five key result areas of: -

- **A culture of safety and excellence**
- **Continuous improvement.**
- **Partnerships.**
- **Our people**
- **Resources**

The Corporate Plan also sets out a related set of strategic service priorities and the expected outcomes to be delivered over the period of the Plan, which when combined with the outcomes from New Directions 2 will provide each of the Trust's 10 Directorates with their strategic priorities for up to 2025. The Corporate Plan and New Directions 2 recognise the challenging financial environment for health and social care services across Northern Ireland, with significant efficiency savings to be achieved.

The Trust is at an exciting stage of early development of its updated strategic direction document, **New Directions 2 (2015-2025) 'Creating our future Health & Care Together'**. Working in partnership

with Staff, Key Strategic Partners, Trade Unions and Users, Carers and Community Representatives, the Trust is leading an innovative, engaging process to identify how we will be delivering services by **2025**.



New Directions 2 is designed to deliver on the Strategic Services Plan for BHSCT's integrated health and social care services for the next 5-10 years (2020 – 2025). It will be underpinned by robust workforce, activity and financial models, all of which are designed to support the Trust in delivering **the right care in the right place, resulting in safe, high quality outcomes for our population**.

The organisation has a plan with measurable objectives - ER 1.2

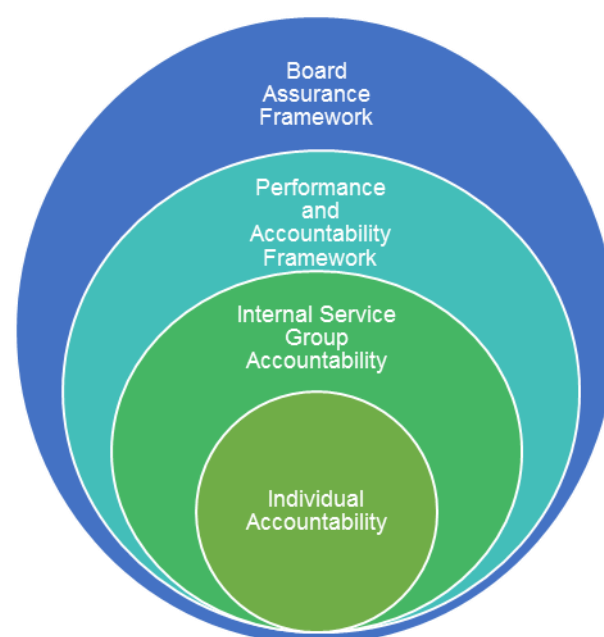
In line with the Trust's devolved organisational Directorate Structure, each Directorate has its own annualised **Directorate Plan** which sets out the Directorate's operational and annualised priorities, while some of the larger Directorates have further devolved planning down to service level, with certain distinct areas of service delivery working to their own inclusively developed and fully aligned **Service Plan**.

This has allowed the Trust to devolve responsibility for planning to the most local level, which in turn ensures higher levels of involvement, engagement and ownership of plans and priorities with the staff who are responsible for delivering services to patients, clients and service users including internal service users for support services.

This devolved process allows each Directorate to define, enable, track and report on their own Directorate priorities,

the performance against which provides an integral part of the internal Trust's accountability review process.

As part of its internal and external accountability process the Trust regularly reviews and reports on its progress against the objectives set out in the Plan to ensure it can demonstrate what has been achieved and what remains to be delivered across all key services areas - for example see the [Trust's Annual Report for 2014 – 15](#) and [the Trust's Annual Quality Report for 2014 – 15](#) -



The Staff Development Review Process is the **key process** used by the Trust to align individual contribution with team/ service/Directorate and Trust objectives while **Job Plans** are the equivalent critical process for Medical and Dental Staff.

These processes are designed to engage staff in a conversation with their line manager which is designed to align individual contribution with service and directorate priorities, objectives and targets.

Both of these processes are also used to identify and align what support staff might need in the form of capacity and capability development to ensure each member of staff is capable of delivering on their agreed and aligned performance expectations.

These individual processes are further supported in some cases by team development workshops, team meetings which once again are about aligning individual and team contribution with service and directorate priorities.

People and stakeholders including representative groups are involved in and consulted about planning and strategy development - ER's- 1.3, 1.4, 1.5, 1.6,

The Trust is proud of its track record of involving staff and key stakeholders in the development of its strategies and plans, at both strategic and operational levels. The [“Organisational Framework for the Management of Personal and Public Involvement in BHSCT”](#), first developed in 2008 and reviewed in November 2015, details the Trusts approach to involving service users, carers and the wider public. The following section provides some examples of how the Trust has worked with its staff, representative bodies and key stakeholders in the ongoing review, revision and updating of all its key plans and strategies.

The Trust is at an exciting stage of early development of its updated strategic direction document, **New Directions 2 (2015-2025) ‘Creating our future Health & Social Care Together’**. Working in partnership with Staff, Key Strategic Partners, Trade Unions and Users, Carers and Community Representatives, the Trust is leading an innovative, engaging process to identify how we will be delivering services by **2025**.

Involvement of and engagement and consultation with staff, managers, key stakeholders including service users, families community groups and

representative groups including trade unions is already well underway with our:

- Staff, via Staff Workshops & The Hub;
- Users, Carers & Community Groups
- Key Stakeholders (e.g.: Commissioners; Trades Unions; Belfast City Council; Universities, NIMDTA, NIAS etc.)

An example of some of the wider engagement on the Development of the New Directions Strategic Plan can be found in the [New Directions 2 Newsletter Issue 1](#).

New Directions 2 Newsletter Issue 1

Purpose
To develop, consult and deliver on a Strategic Services Plan for BHSCT's integrated health and social care service for the next 5-10 years, underpinned by robust workforce, activity and financial models, which will deliver the right care in the right place, resulting in safe, high quality outcomes for our population.

Draft Principles
Taking account of all feedback received from staff, service users and key stakeholders one set of Trust Principles will replace the previous Overarching & Individual Service Principles.

Draft Principles were raised at a number of Workshops & via the hub

Workshops	Dates
Trust Teams	14 th June 2015
Overarching Principles	Users & Carers Group 9 th June 2015
Maternity Services & Children's Services	Users & Carers Group 18 th August 2015
Mental Health Services	Users & Carers Group 19 th August 2015
Older People Services & Acute Services	Users & Carers Group 20 th August 2015

‘**The Belfast Way**’ which is also being currently reviewed, revisited and revised, led at Director and Co-Director levels will provide staff with an opportunity to input and shape ‘The Belfast Way’ document, the original version of which has been a key strategic document in shaping the Trust’s direction, priorities and culture since it was first published in 2008.

[The Trust Vision & Corporate Plan 2013/14 – 2015/16](#) which contains the Trust’s Vision and Guiding Principles was the outcome of a series of CEO led engagement workshops with specialty teams, Trust Stakeholders including Community, Statutory & Voluntary partners.

The Chief Executive led a series of presentations and discussion groups across the Trust, which were attended by 300+ staff from both hospital and community sites. These interactive events were used to revisit, review and revise where necessary the Trust's Vision, the Guiding Principles and Trust Values as well as its strategic priorities.

The **Trust's Corporate Management Plan** is developed through detailed local engagement across service teams and at senior level. Directorates hold workshops to develop local management plan objectives (Feb/March) and these are communicated at an annual Corporate Management Planning workshop (April). This enables cross-directorate discussion on each Directorate's proposals and identifies which objectives go forward for inclusion in the Corporate Management Plan; along with the predetermined Ministerial priorities.

Involvement of staff in the development of plans at Directorate, Service and Team levels.

In line with the Trust's devolved organisational Directorate Structure, each Directorate produces its own annualised **Directorate Plan** which sets out the Directorate priorities.

In some of the larger Directorates, planning is devolved down to service level and team levels, with certain distinct areas of service delivery working to their own inclusively developed and fully aligned **Service Plans**. This has allowed the Trust to devolve responsibility for planning to the most local level, which in turn ensures higher levels of involvement, engagement and ownership of plans and priorities with the staff who are responsible for delivering services to patients, clients and service users including internal service users for support services. This devolved process allows each Directorate to define, enable, track and report on their own Directorate priorities, the performance against which provides a key pillar of the Trust's accountability review process.

Staff at Directorate level will be able to describe in greater detail how their plans have been developed and shared at local

levels and the efforts all Directorates make to consult and involve their staff (at a level appropriate to their role) and representative bodies in the development of plans and in all aspects of service transformation and modernisation.

The **Staff Development Review Process** is the **key process** the Trust uses to align individual contribution with team/service/Directorate and Trust objectives while **Job Plans** are the equivalent critical process for Medical and Dental Staff. These processes are designed to engage staff in the conversation with their line manager to align individual contribution with team/service/ directorate and Trust objectives.

These two critical individual processes are further supported in some cases by team development workshops, team meetings which once again are about aligning individual and team contribution with service and directorate priorities and ensuring all staff are involved in planning at a level appropriate to their role.

Clear core values relate to vision and strategy. - ER's- 1.7, 1.11, 1.13, 1.17, 1.19, 1.23, 1.24.

The Trust has and works to a set of **core values** which have been revisited and revised as part of the development process for the Trust's Corporate Plan 2013 – 16 development process.

'The Belfast Trust Vision and Corporate Plan 2013 / 2016' sets out the Trust's core values and how they relate to the delivery of the Trust vision and strategy. The Executive Team sees the Trust's Values '*as the heart-beat of the Organisation, governing the way we should operate as a Trust - The Belfast Trust Values are intended to underpin everything we do, how we work with one another and deliver our service. Our Values define the overall culture of our Trust and ultimately support our commitment to provide safe, effective, compassionate and patient centred care*' (Corporate Plan).

For the BHSC Trust its **Values** define the overall culture of the Trust and ultimately support its commitment to *'provide safe, effective, compassionate and patient centred care'*.

The Trust's five core values relate to: -

- **R**espect and Dignity
- **O**penness and Trust
- **L**eading Edge
- **L**earning and Development
- **A**ccountability.



What we have done to embed the Trust's Core Values?

The Trust committed in its 2013 – 16 Corporate Plan - *'to review and embed our Trust Values focusing on living and demonstrating the values throughout the Trust and in delivering the service to our patients, clients and local community'*.

The strength of the Belfast Trust Values is that they have been informed by the staff and service users at the Trust's formation stage 2007/08 and again in 2012/13. In 2012/13 the Executive Team commissioned a review of the Trust Values in the context of informing the Trust's new 3-Year Strategic Plan and the second engagement was undertaken by the HSC Leadership Centre in conjunction with the Trust.

The Trust had communicated widely to staff that it was reviewing its Values and invited staff to participate in the review. Data was gathered from one to one meetings, focus groups and via an online and hard copy questionnaire. The following is a summary of the response rates and key findings.

Response Rates

- There were 421 responses, 327 online and 94 manual.
- 65 Responses from attendees at Corporate Welcome
- A range of one to one meetings and focus groups

Key Findings

- Staff members have a very high level of awareness of the Trust Values and that they are important to them
- Values have a positive impact on how most staff view the Trust
- Over three quarters of representatives were positive about their own behaviours, being consistent with the Value
- The lowest scores related to the alignment between individual and Trust Behaviours and the degree to which Values are embedded in the Trust culture.
- The Trust's position was clear. The Executive Team were clear as to their aspiration and commitment that the BHSC Trust would be 'a value driven organisation', where its core values would be at the heart of who they were, and how they operated. The review of the values allowed the Trust to assess and baseline where they were in relation to this aspiration at a given point in time. While there were many positives from the feedback from staff, there were obviously some areas in need of critical, consistent, and Trust wide attention.
- The Trust then developed an action plan, a series of planned and integrated actions which were designed to improve the embeddedness of the Trust core values. The following describes some of the key actions the Trust has taken and continues to deploy in its commitment to embedding its core values.



'The Journey towards Embedding Trust Values'

1. Commitment for the Executive Team - In February 2014 the Trust Executive Team approved a plan / programme of work on embedding the Trust Values, informed by the Review. Our focus has been on embedding and living the Trust Values in our behaviours and practices
2. Integrate Values into HR Processes and Practices through: -

Introduction of Value Based Recruitment

- Values based recruitment (VBR) is 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. To prepare the Trust for the full implementation of



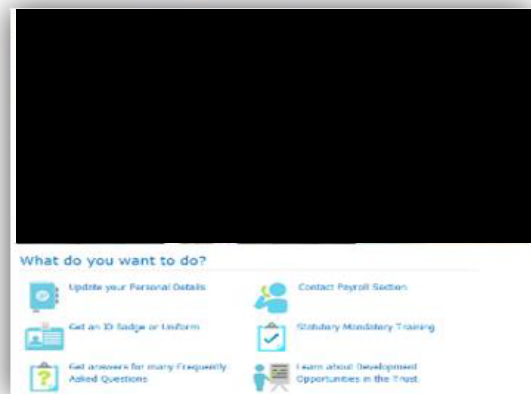
Values Based Recruitment a pilot exercise was implemented in March 2015 in two recruitment exercises, i.e., Band 2 Nursing Auxiliary and Band 5 Mental Health Nurses. The feedback received from both the candidates and interviewers highlighted that the interview process was a lot more relaxed than a competency based interview process. It was felt that the process flowed more like a conversation which encouraged interviewers to probe without hesitation and candidates to share more in depth information. The Trust is committed to the full implementation of Values Based Recruitment (VBR) for all posts from 1st April 2016.

Induction - To ensure Values are incorporated into the Induction process for new starts into the Organisation, 2 new approaches have been introduced.

Corporate Welcome: The Corporate Welcome event attended by those new to the organisation has been updated to include a section specifically covering the Trust Values and associated acceptable

behaviours. The Chief Executive presents the Values section at the event, thus ensuring the importance of these key messages are shared from a senior level.

Welcome & Information Site: The Trust has developed a new welcome and Information site. The purpose of the site 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.



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.



Development Programmes - A further strand of implementing the Trust Values into HR practices also included the integration of Values and associated behaviours into our Personal and Professional Development programmes. Where possible in-house Learning and Development programmes now cover the values and associated expected Trust Behaviours. The 'Leading with Care' programme aimed at Senior Managers/Clinicians also has the Values incorporated.



Communication / Visualisation - Based on the findings from the consultation exercise with staff, whereby they indicated the need to see a values visualisation, Corporate Communications have developed a Trust Values brand represented by hands. The use of hands in relation to health and social care is tangible and relevant. Staff have access to the use of visualisation methods and explanation as to what each hand icon represents. This information is contained on the Working Here section of the hub.

Engagement / Involvement - 'Living the Trust Values' is one of the core tenets of the Trust's Employee Engagement Framework. The Trust's Employee Engagement Framework is based on the Macleod report which incorporates 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 our Values into the Employee Engagement Framework is further evidence of supporting our staff to have a clear understanding of the Values.

Involvement - To-date over 110 Values workshop have taken place with Teams right across the Trust. The workshops are facilitated by Learning and Development staff and provide teams 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. During the 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. 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.



Leading by Example - "Our Values and behaviours clearly outline what is expected of an Employee of the Belfast Trust. These Values and Behaviours are what set us apart and make this Organisation what it is. You must demand this of yourself and others" - [REDACTED], Chief Executive, BHSC at the 2015 Leadership Conference that focused on the theme of "Putting Patients and Clients First Each Time – Every Time"

Recognition - To reinforce and recognise the value of the Values, the Trust Chairman has reinvigorated the Chairman's Awards in 2015 to recognise and reward the contribution of staff in the Trust.

Trust Values Aligned with the Five IIP Themes



respect & dignity



openness & trust



leading edge



learning & development



accountability

Key Performance Indicators are used to improve performance - ER's- 1.9, 1.15 and 1.21.

The Trust has and works to a wide range of KPIs, the majority of which are cross cutting (apply across all Directorates) and some of which are Directorate specific.

The Trust reports performance in the short to medium term through its Trust Performance Report which goes monthly to Executive Team and each Public Trust Board meeting and in more detail internally for each Directorate, both patient and Client facing and Corporate support functions in Scorecards which will also include indicators and targets specific to that part of the service. This level will identify shorter term trends, impacts on service and actions the Trust is taking to address issues.

The longer term view is set out in the Trust Annual Quality Report which extrapolates that performance over the longer term provides, comparing how the Trust has delivered to previous years and across regions a view to future direction and continual improvements in how .

The DHSSPS annually sets out its expectations in terms of its published [‘The Health and Social Care Indicators of Performance Direction \(NI\) 2015’](#) which sets out 105 KPIs against 3 key objectives namely: -

- To improve and protect population health and well – being and to reduce health inequalities – against which the DHSSPS has set **23 different KPIs**.
- To provide high quality, safe and effective care, to listen and to learn from patient and client experiences and to ensure high levels of patient satisfaction against which the DHSSPS has set **70 different KPIs**.
- To ensure that services are resilient and provide value for money in terms of the outcomes achieved and costs

incurred against which the DHSSPS has set **12 different KPIs**.

- The Trust’s performance is focused on the Targets that we are measured against. These are contained within
 - Commissioning Directions Plans
 - HSC Indicators of Performance
- The Trust in its Annual Quality Report, reports on its performance across the five key areas as set out in the Quality 2020 strategy namely: -
 - Effective health and social care (6 Macro KPIs)
 - Delivering Best Practice in Safe Settings (7 Macro KPIs)
 - Protecting People from Avoidable Harm (3 Macro KPIs)
 - Ensuring People have positive experiences (7 Macro KPIs).
 - Supporting Staff – Strengthening the Workforce (5 Macro KPIs)

The Annual Corporate Management Plan describes the annual objectives and improvements to be met in-year, taking account of internal and external priorities, targets and standards (KPIs).

Directorate Management Plans describe the objectives and related KPIs and contribution to be achieved by each Directorate. All Plans take account of the annual DHSSPS Commissioning Plan, and the Trust response as described in the annual Trust Delivery Plan.

There are a number of formal processes through which the organisation manages performance and holds people to account for effective and efficient service delivery, as measured against the Directorates Management Plans and their performance against agreed and aligned objectives and related KPIs.

While there are a wide range of macro level KPIs the Trust must deliver against,

the following will give some sense of the key macro KPIs the IIP Assessment Team will encounter during their time on site, e.g.

Financial Performance:-

- Stay in Budget
- Meet efficiency targets
- Meet relevant financial controls assurance standards
- Obtain satisfactory external financial audit annually.

Service Provision and Delivery:

- Deliver on Service Budget Agreements across each programme of care with the HSCB.
- Deliver on Ministerial Targets and Standards
- Deliver on the reform and modernisation agenda in line with relevant strategies such as TYC, Bamford, Maternity Strategy, Stroke Strategy, Quality 2020 including reablement ethos etc.

People Results:

- Meeting statutory training requirements
- Absenteeism and attendance targets
- Participation by staff in the Staff Development Review process
- Normative staffing levels in Nursing
- Staff and Medical Engagement

Resources/Infrastructure:

- Integrated Care Partnerships
- Capital Investment
- Public Involvement and Engagement
- Controls Assurance Standards

The Trust operates to Four Key Internal Accountability Processes namely: -

- The Board Assurance Framework
- The Performance and Accountability Framework

- Internal Directorate Accountability processes
- Individual Accountability.

Board Assurance Framework

The Assurance Framework (and Corporate Risk Register) provides the Trust Board with 'confidence that the Trust's systems, policies and people are operating effectively, are subject to appropriate scrutiny and that the Board is able to demonstrate that they have been informed about key risks affecting the organisation. The Assurance Framework describes the key committees which operate to provide Board level assurance. These include:

- Audit Committee (sub-committee of Board)
- Assurance Committee (sub-Committee of Board)
- Governance Steering Group
- Safety and Quality Steering Group

Each of these is further supported by groups with specific remits e.g. the Medicines Management Group, Statutory Functions Committee.

The Chief Executive and Trust Directors are publicly held to account at Bi-monthly Trust Board meetings.

The Performance and Accountability Framework

The Belfast Trust Internal Performance and Accountability Framework includes a group of processes which provide the Trust Board, Chief Executive and Executive Team with assurance that the Trust is meeting its corporate performance objectives and moving in the right strategic direction. The process provides opportunity to identify where objectives are being met, or where not being met, to identify the underpinning reasons and agree action plans to address the difference.

The framework includes three types of meetings, each with a distinct purpose. These are:

- Trust Board meeting – at which Trust Performance Scorecard is presented for review
- Chief Executive Performance and Accountability Meetings (usually 4 per year for Service Directorates and bi-annually for Corporate Directorates)
- Internal Directorate Accountability Review meetings

Trust Board Meetings

As part of the Trust Board meetings the Organisational Performance Scorecard is presented. This report provides an overview of Trust Performance against key indicators, most of which are included in the Ministers Annual Health and Social Care Commissioning Plan Direction. The Report provides assurance to the Trust Board that there is a strong focus within the organisation on the delivery of key ministerial standards and targets and provides an update on the Trust performance against these areas of service delivery.

Chief Executive Performance and Accountability Meetings with Directorates

The focus of this meeting is Directorate performance against the commitments made in the Trust Delivery Plan, and for which the Trust as a whole is held to account by the Health and Social Care Board (HSCB). Key performance areas covered include Directorate performance against Ministerial targets, Service and Budget Agreement activity, achievement against financial plans, and achievement against Modernisation and Reform plans (i.e. the financial and activity side of MORE).

Directorate Scorecards provided are designed to support the discussion at the meetings.

Two of the meetings (mid-year and an end of year Review) cover a wider agenda; that is, the meetings focus on the full

spread of objectives set out in the Directorate Management Plans, exploring achievement across all five corporate objectives in the Corporate Management Plan.

The process is led by the Chief Executive, along with the Director of Finance and the Director of Performance, Planning and Informatics. The professional executive Directors (i.e. Nursing, Social Work and Medical) attend Mid and End of Year Reviews as appropriate in the discharge of their roles. Core membership changes in a number of circumstances:

- For Corporate Groups an Operational Directorate Director may join with the core members.
- Where the Finance Directorate is the subject of accountability, the Director of Finance becomes the accounting Director along with their Directorate, and a further Operational Directorate Director joins with the Chief Executive, and Director of Performance, Planning and Informatics.
- Where the Performance, Planning and Informatics Directorate is the subject of the accountability review, the Director of Performance, Planning and Informatics becomes the accounting Director along with their Directorate, and a further Director joins with the Chief Executive, and Director of Finance.

Internal Directorate Accountability Processes

Each Director leads and oversees a process of accountability within their Directorate. The process is supported by the Directorate Planning and Performance Manager. Approaches vary across Directorates (different frequency, attendance and format). However, it is the Director's responsibility to ensure that all internal processes align with the corporate process, and enable decision makers within the Directorate to take informed decisions in a timely way.

Individual Accountability

All members of staff within the Belfast HSC Trust participate in an individual accountability process. The majority participate in Staff Development Review (SDR) process, which assists in clarifying individual roles and accountabilities and provides a mechanism by which a manager and their member of staff review performance and development needs. Some professional groups participate in parallel processes such as Appraisal for Medical Staff, and Supervision processes for Social Work staff. In addition to the organisation's own accountability processes the majority of professional staff are covered by professional codes of accountability which set out standards for individual performance.

Theme 2

Developing People

Extended Framework

- Learning and Development Strategy



- The learning and development strategy builds capability (ERs 2.5, 2.8, 2.12, 2.13, 2.14, and 2.16)
- Learning priorities, plans and activities are clear and linked to the organisation's business /corporate strategy and plans (ERs 2.1, 2.2, 2.3)
- Resources for learning and development are made available and investment in learning and development can be quantified (ERs 2.1, 2.2, 9.1)
- Equality of opportunity for development and support is ensured (ERs 3.2, 3.3, 3.4)
- People's learning needs (including those of inductees) are met (ERs 8.1, 8.2, 8.3)
- Evaluative criteria are agreed and impact can be demonstrated (ERs 2.1, 2.2, 2.4, 9.2, 9.3, 9.4, 9.5)

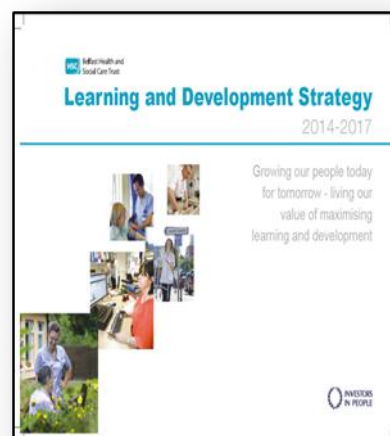
The learning and development strategy builds capability – ERs 2.5, 2.8, 2.12, 2.13, 2.14, and 2.16.

The Trust's [Learning and Development strategy 2014-2017 'Growing our People today for tomorrow living our value of maximising learning and development'](#) was launched in 2014 and is designed to ensure that all staff are supported in developing the current and future capabilities (knowledge, skills and attributes) they need to be able to effectively contribute in helping the Trust achieve its vision, aims and objectives.

At the time of its launch, [REDACTED], Director of Human Resources and Organisational Development stated "*The Strategy confirms the Trust's commitment to the development of our staff and sets out our priorities for action during the next 3 years*". (ER 2.5)

This is the second Trust Learning and Development Strategy. In 2008 the Trust launched the first 'Growing our People today for tomorrow' Learning and Development Strategy. In 2012 this Strategy was independently evaluated by the HSC Leadership Centre. The evaluation report gave '*a ringing endorsement of the Strategy, how it had been formulated and delivered and the impact it has been having across the Organisation*' (ERs 9.3 and 10.4).

"Perhaps above all, it can reasonably be argued that it has made a major contribution to the development of the culture of the Belfast Trust" ... Evaluation Report, Learning & Development Strategy, HSC Leadership Centre (ER s9.2, 9.4, 9.5)



In **P**urpose, **P**rinciple, **P**riorities and **P**rocess terms (see Table 1 below) the Learning and Development Strategy addresses the challenge as set out by the CIPD facing all organisations, namely how can investment in learning and development support organisations in '*their need to work in a resource light/challenge rich environment*'. This alongside the challenge facing '*organisations crying out for greater creativity, driven to a significant degree by the need to do more for less through modernisation, transformation and increased productivity*'.

The success of this Strategy will be dependent on its ability to reflect a model for learning and development which is applicable within a complex and ever changing environment with particular organisational and service delivery challenges and an overriding commitment to safety and excellence. As health and social care is modernising, likewise the Trust's Strategy for 'investing in our people' also requires a *transformative approach*. Being a '*future fit*' organisation is an imperative for the *sustainability* of the services the Trust provides for both those who deliver them as well as the patients and clients whom we serve. This Strategy has a major part to play in ensuring the long- term sustainability and viability of the BHSCT.

In ensuring **alignment** at a strategic level between the Trust's corporate priorities and prioritised learning and development needs, this strategy ensures valuable resources are targeted to deliver the best return on investment while at the same time creating an expectation that all staff should be clear as to why they are involved in learning and development activities. By supporting staff in managing change and transition as they work to deliver on their services' modernisation and transformation agenda, this strategy ensures investment in learning and development is relevant, appropriate and timely. Because of the focus on the development of capability at individual and team levels and succession planning this strategy ensures the focus is about '*future proofing the organisation*' to be in a position to be able to successfully meet current and future challenges. Because of the focus this strategy puts on continuing professional development and personal ownership and responsibility for learning and development, this strategy clearly communicates an

ethos and expectation of joint responsibility and mutual obligations. Because of the focus this strategy puts on team development, integrating the Trust values and collaborative working between teams, this strategy clearly communicates the Trust's commitment to building high – performing teams within and across the Trust – ERs 2.5, 2.8, 2.12, 2.13, 2.14, and 2.16).

Table 1: - Summary of the Trust's Learning and Development Strategy – ER 2.5.

Purpose	Principles	Priorities	Key Processes in its development
The Trust's Learning and Development Strategy: - Supports the Trust in delivering on its: - • Organisational aims, objectives and values in the next three years, 2014 – 2017 • Modernisation and transformation agenda • Health care quality and safety improvement plan • Commitment to develop a culture of lifelong learning and its corporate identity as a learning organisation • Ongoing development of the Trust's Leadership and Innovation Academy • Is a key contributing work stream of the Trust's Organisational Development (OD) Framework & Strategy • Engenders collaboration among Trust staff for improved service delivery through learning and development. • Equips Trust staff to deliver a modern, continually improving and patient and client focused service. • Supports the Trust in producing a long term, cohesive, and consistent approach to the delivery of learning and development opportunities for all staff and helps fulfil the Trust value of Maximising Learning and Development.	• Commitment	• Quality and Continuous Improvement	• Incorporates feedback from the independent review evaluation of the Trust's 2008 Learning and Development Strategy (HSC Leadership Centre). • Reflects stakeholder generated guiding principles (see Column 2) • Builds on the outcomes and achievements of its predecessor • Reflects the current context within which the Trust now operates • Is designed to drive forward new models of care and learning. • Includes an action plan to ensure that the hoped for benefits of the Strategy are realised and progress achieved. The action plan will be performance managed through Corporate and Service Management plans and associated accountability mechanisms. • Complements other supporting Trust Strategies e.g. the L&M Strategy. • The content has been subject to consultation and engagement with a range of key stakeholders including the Learning, Development and Education Committee, Joint Negotiating and Consultative Committee Learning and Development Sub Group, Trade Unions, Investors in People (IIP) Steering Group, Directorate IIP Team Leads, Trust Managers as well as staff focus groups. • During its lifespan it will be subject to regular review by the Learning Development and Education Committee to ensure its continued relevance. • Key objectives will be driven forward through the Trust's performance management mechanisms to ensure consistency and achievement of organisational wide development. • Draws on best practice guidance and benchmarking data. • The Trust will work in partnership with key stakeholders, trade unions and professional bodies in order to progress and achieve the implementation of this Strategy. • Evaluation will be an integral part of determining the added value such learning and development interventions provide for the Trust and as such, will be considered as a key priority of the Learning Development and Education Committee. • As part of the evaluation methodology for major programmes of work consideration will be given to achievement of Trust Key Performance Indicators • The overall impact of this Strategy will be evaluated at the end of its life-span. As part of a formal review in 2017.
	• Expertise/ Competence	• Induction	
	• Alignment with service objectives	• Personal Contribution and Development/ Appraisal	
	• Innovative and flexible approaches	• Pre and Post Registration/ Qualifying Professional Education	
	• Personal Development Plans (Personal Ownership)	• Organisational Development/ Managing Change and Service Improvement	
	• Accreditation of Learning	• Management and Leadership Development	
	• Support for Statutory/ Mandatory Training	• Succession Planning	
	• Accreditation of Prior Learning	• Engagement	
	• Individual Ownership	• Values	
	• Widening Participation	• Team Development	
	• Internal and External Providers	• Customer Care	
	• Equality of Opportunity	• Supporting Introduction of New Ways of Learning/ Learning Environment	
	• Engagement (Involvement and consultation)	• Supporting Introduction of New Systems	
	• Learning Environment	• Evaluating the impact of L&D	
	• Record Keeping	• Statutory & Mandatory Training	
	• Investment	• CSR – Supporting Employability	

Table 2: How learning and development is **planned to achieve the Trust's objectives and to improve performance (ERs 2.1, 2.2, 2.3, 2.5)**

Trust Level	Directorate / Team Level	Individual Level
Alignment at a strategic level is a critical starting place in the Trust's identification of L&D priorities. Key Drivers for prioritisation of L&D needs at organisational levels include: - Supporting the Trust in delivering on its Mission, Vision, Values and long term aims and priorities including the Trust's Modernisation and Transformation agenda. The Trust's beliefs and principles in relation to how its people are led, managed and developed e.g. engagement, equality, CSR and employability. The acquisition and continuous development of core competencies (current and future) e.g. KSF. LQF Supporting the Trust's OD Strategy and other internal strategies, policies, frameworks, processes and procedures. External factors and influences including external strategies, policies, frameworks, processes pathways and procedures. Emerging L&D needs to support the delivery of objectives arising from the Trust's annual management planning process Aggregation upwards of emerging L&D needs from Directorates L&D Plans. Annual TNAs and LNA's developed by professional groups such as Nursing, SW, AHP etc. as well as agreed commissioning priorities from Professional Groups e.g. Nursing, SW. Response to positive and negative indicators such as RQIA reports, complaints etc.	Directorates produce their own Directorate Management Plan on an annual basis, a plan which sets out the agreed and aligned priorities for a given year. From the top down, Directorates are asked to produce an aligned L&D Plan which sets out their prioritised, aligned and costed learning and development needs which support the achievement of their agreed business objectives. From the bottom up Directorates engage with their own staff (through meetings, team development events and through the staff personal development review processes) and with other teams horizontally across the organisation, to identify what they need to know (Knowledge), what they need to be able to do (Skills) and what qualities/ attributes they need to have (Attributes), in order to achieve agreed and prioritised service objectives. The PDPs which are the outputs from these discussions aggregate upwards to form the basis of Team, Service and Directorate Learning and Development Plans (which support the achievement of the Directorate's/ Services'/Teams management plans). Action Plans are then created to implement specific interventions at Directorate / Team level, and they are reviewed by the Learning, Development and Education Committee to inform agreed and prioritised organisational learning needs. In addition each Directorate accesses the prioritised L&D activities which are generated by the Professional Group based TNAs/LNA's and the professionally generated commissioning priorities.	Individual learning and development needs flow from: - • When a person is recruited there may be a gap between the competencies they currently possess and the competencies the job requires - role related training. • Attending both corporate and local induction – which allows the new start and/or new to post staff member to identify any learning needs they may have • The Staff Development Review/appraisal process is probably the single most critical process for clarifying performance expectations and identifying any learning and development needs the individual may have if they are to effectively meet the agreed performance expectations. As at October 2014 the Trust was 73% compliant with completion of personal development plans. • Other critical individual based processes for identifying, agreeing, actioning and evaluating Learning & Development needs include the Job Planning and Appraisal Process for medical and dental staff as well as such processes as supervision for professional groups including social workers and nurses. • Continuing professional development requirements allied to mandatory and statutory learning requirements are another critical source of agreed, prioritised and in some cases mandatory required Learning and Development. • Agreed individual learning and development plans are implemented/actioned through the provision of a wide range of on and off the job learning and development activities and events. • Individual involvement in learning and development is reviewed and evaluated in line with the guidelines as set out in the Trust's Evaluation Framework • The Personal Development Plan is a critical plan which details what the individual's learning needs are, how they will be supported in achieving those needs, and what the business outcomes will be (ERs 2.3 & 2.4)

Learning priorities, plans and activities are clear and linked to the organisation's business /corporate strategy and plans - ERs 2.1, 2.2, 2.3

Resources for learning and development are made available and investment in learning and development can be quantified - ERs 2.1, 2.2, 9.1.

Tables 1 and 2 (pages 37 and 38) provide an overview of the processes the Trust uses to align learning and development priorities with plans at organisational/Trust level, at Team (Directorate/Service/Team levels) and Individual levels.

The Staff Development Review/appraisal process is probably the single most critical process for clarifying performance expectations and identifying any learning and development needs the individual may have if they are to effectively meet the agreed performance expectations. An output from the SDR is the production of an agreed Personal Development Plan. This plan 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 members involvement in the agreed learning and development activities - (ERs 2.2, 2.3, 2.4).

As at October 2014 the Trust was 73% compliant with completion of personal development plans. (The monitoring timescales have since changed. The next full cycle results will be at the end of March 2016).

Other critical individual based processes for identifying, agreeing, actioning and evaluating L&D needs include the Job Planning and Appraisal Process for medical and dental staff as well as such processes as supervision for professional groups including social workers and nurses. The last fully completed cycle for medical staff showed a 95.2% completion rate against a DoH target of 95%. In excess of 95% of Consultants and Specialty Doctors have a job plan agreed.

Staff Development Review Process - integrated process

Since the last IIP assessment the Trust has reviewed its current appraisal system. A new Staff Development Review Process is currently being implemented throughout the Trust and integrates four key elements namely the KSF, Trust Values, the Personal Contribution Framework and Personal Development Plan.

An integrated approach to Staff Development Review, which brings together the Knowledge and Skills of staff with the Personal Contribution Framework for the delivery of organisational objectives alongside Trust values will ensure staff are supported to deliver safe, compassionate patient centred care.

It has been recognised in the Trust's Learning and Development Strategy the clear and inextricable link between staff development and the ability of the organisation to modernise and improve.



Resources for learning and development are made available and investment in learning and development can be quantified - ERs 2.1, 2.2, 9.1

The Trust continues to make a substantial investment in staff learning and development. The investment per head is approximately **£976** which remains consistent with the previous investment figure calculated at 2013. Our costings model has been consistent with the approach used in 2013. However, it should be noted that to compare this figure with the 2013 overall investment is difficult as there are approximately 2000 more staff employed in the Trust since this time.

This figure has been calculated using a range of internal costings such as:

- Dedicated learning budgets
- Staff salaries (with a formal learning remit)
- Associated external costs of learning and development
- Costed learning and development plans

The trend to increase the investment in Learning and Development within the Trust is contrary to other Organisations. Research by UKCES (2013) would suggest that the pattern of training spend per person trained and per employee is inversely correlated with establishment size: therefore the larger the employer the less is spent. There is further evidence by CIPD (Annual Learning and Development Survey 2015), who confirm that the public sector, is most likely to report that Learning & Development resources have decreased, i.e., at least twice as many public as private sector organisations report that budget, headcount and use of external associates have decreased over the past year.

The BHSCT also makes a substantial investment in terms of the staff who are either directly or indirectly (part time or full time) employed in supporting staff learning and development across the Trust. Another key part of the Trust's investment in staff learning and development includes the **facilities** available for staff learning and development and this includes the Hub which has been a very positive resource development for staff in terms of supporting their learning and development. In addition to internally available and accessed/utilised personnel and resources the Trust avails of support from a wide range of external providers such as the HSC Leadership Centre, the HSC Clinical Centre, local Universities and Colleges as well as staff accessing learning and development, advice, guidance through their professional bodies such as RCN, NMC, NISCC, BMA, and various Trade Union bodies.

In line with the Trust's Evaluation framework it is important that the Trust and Directorates can demonstrate the impact of their investment in learning and development and how such investment contributed to improved performance at organisational, team and individual levels.

Whilst there are potentially many different direct and indirect costs attributable to learning and development activities, it has been decided that the primary focus will be on costs which are readily identifiable and where the effort to provide a calculation is proportionate to the outcome derived. Therefore we have taken a pragmatic approach and have not sought to capture the cost of the wide range of '**on the job flexible learning**' that takes place or the commitment of the Trust to the provision of training and education to both undergraduate and postgraduate students as well as sharing learning and expertise with other colleagues from Health and Social Care organisations and beyond.

Details of our identified investments are set out in the report 'INVESTMENT IN STAFF LEARNING & DEVELOPMENT IN THE BELFAST TRUST January 2016'

Overall Investment in Learning and Development

The Trust continues to make a substantial investment in staff learning and development. The investment per head is approximately



£976

Total Salary Budget for Inhouse Trainers



£5,232,211

Total Directorate Costed Learning and Development Plans



£11,844,004

Associated External Costs, e.g. conferences, travel, subsistence



£1,187,105

Learning & Development Budgets



£3,764,440

Overall Investment In Learning and Development

= 4%

Of total salaries and Wages Budget

The infographic sets out the overall estimated investment in Learning and Development in the Belfast Trust.

The Trust continues to make a substantial investment in staff learning and development.

*The investment per head is approximately **£976** which remains consistent with the previous investment figure calculated at 2013.*

It is estimated that the overall investment in Learning and Development equates to approximately 4% of the overall Salaries and Wages Budget.

Equality of opportunity for development and support is ensured – ERs 3.2, 3.3, 3.4

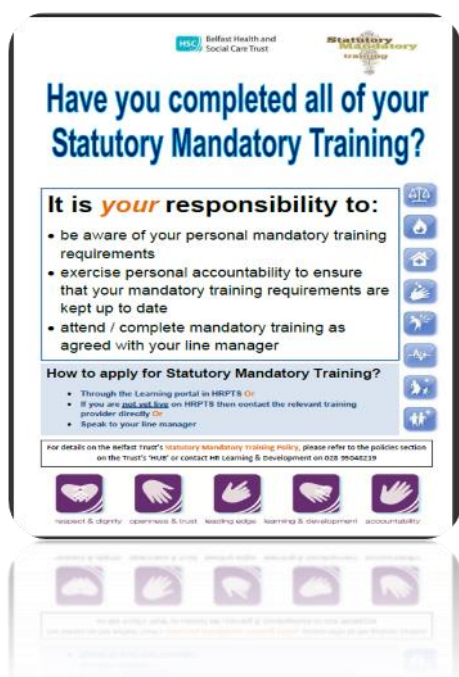
As an equal opportunities employer the Trust is committed to ensuring all staff have appropriate and fair access to the support they need and there is equality of opportunity for people to learn and develop which will improve their performance.

While the Trust has a wide range of 'strategies' in place to ensure 'equality of opportunity for all' (see evidence under Equality and Diversity later in the Storyboard), the following sets out some of the key approaches the Trust has in place so that staff have fair and equal access to the learning and development they need to be able to contribute positively to the Trust's vision and objectives.

1. The Trust in its learning and development strategy has set equality of opportunity as one of the guiding principles on which the Strategy is based.
2. The Trust sees equal opportunity for all to learning and development as both an access to opportunity and take up of available opportunities. To ensure all staff have equal access to learning and development opportunities, **all** staff participate in Staff Development Performance Reviews which for the Trust is the most critical entry access point to learning and development for staff. This ensures that all staff have a dedicated opportunity to discuss their learning and development needs with their line manager and to agree aligned and prioritised learning and development activities for the coming year in their own individualised PDP.
3. The Trust continues to work on ensuring all staff are aware of the range of learning and development activities which are available to them through the publication of the Learning and Development Portfolio, through the use of the HRPTS system and through discussion of learning and development as an item on the agenda of team meetings. In addition, in line with the guiding principle of Personal Ownership staff are encouraged and facilitated in researching and availing of appropriate learning and development opportunities.
4. Offering training on a planned, scheduled and repeating basis allows staff and managers to plan for and schedule involvement in training activities to suit service needs and personal circumstances.
5. The increasing availability of training in the workplace at times and locations which suit staff is further evidence of the approaches the Trust has developed and deployed to meet the needs of staff.
6. The increasing use of and access to '**E learning**' is another positive development which has made training and development more available to and accessible to all staff.
7. In line with the 70 – 20 – 10 Learning and Development Model (see page 46) – the Trust believes that the majority of learning takes place in and on the job and the Trust has been working with staff to ensure workplace and work based learning and development opportunities are identified and utilised to support staff development and enhanced performance. The role of Preceptors and Mentors in nursing is a very practical example of how the Trust has put in place the 'infrastructure' to optimise 'on and in – the – job' learning and development, which is an effective and appropriate approach to improving access to, availability of and take up of learning and development opportunities for all. There are similar arrangements for Junior Doctors via their Induction and specific programmes such as STEP and CLIME (see Leadership section of the Storyboard)

Fair and Appropriate access to Learning and Development

It is important that **all** staff across the Trust have appropriate and fair access to Learning and Development opportunities. To support, this, there have been a number of initiatives which will ensure all grades of staff irrespective of their profession or pay band have access to learning and development. Contextually, the updated Statutory Mandatory Training Policy has supported this, but so too has the increased availability of E Learning based training Modules programmes.



STATUTORY MANDATORY TRAINING

The updated Belfast Health and Social Care Trust (BHSCT) **Statutory Mandatory Training Policy** contains a new version of the training matrix.

The matrix identifies training programmes that **must** be completed by all staff or by broad groups of staff.

Within the past 12 months staff across the Trust have accessed approximately **12000 statutory mandatory training programmes**

Meeting Mandatory Training Requirements is a key performance indicator. Directorates monitor their own levels of Statutory Mandatory compliance and report as part of the accountability process.

ELEARNING

Over the past few years, the Trust has increased the number of eLearning programmes available for staff. The most recently launched eLearning programmes have included Fire Safety and PPI engagement training.

Staff can access these programmes from their work based computer. The eLearning site is available on the Trust hub and all staff have a “Learning Page” which outlines the specific programmes completed to-date.

In addition to the Trust’s eLearning programme, staff can also access other health and Social Care eLearning programmes via the HSC Learning Centre applications site.

For staff with limited ICT experience, there is a link to BBC Connect which will help staff find information, videos and tutorials covering the basics on using a computer. Courses are categorised so that staff readily view which are more appropriate to them, e.g., HR, Medical, Nursing, Risk & Governance, etc.

People's learning and development needs are met - ER 8.3

The range of approaches the Trust uses to meet and support identified learning and development needs can be divided into five broad categories of learning options, which are presented here for illustrative purposes and the list is neither definitive nor prescriptive.

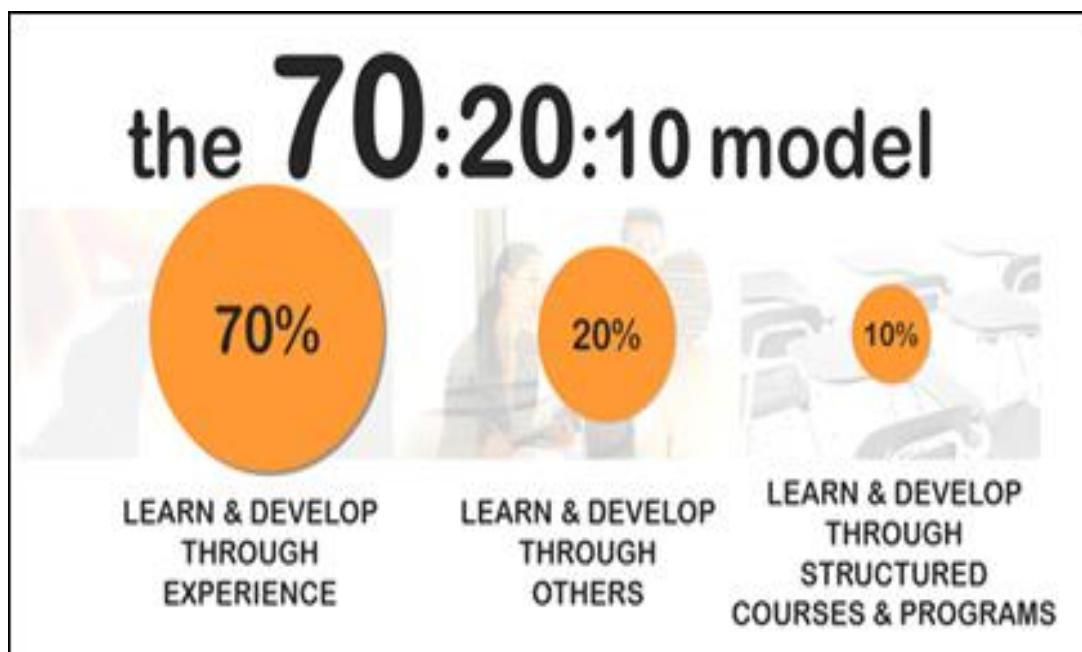
People's learning needs can be met through the following:

On and In - the - job activities  1. Coaching 2. Mentoring 3. Supervision 4. Instruction 5. Practice 6. Problem solving projects 7. Learning from Colleagues / Customers / Events / Situations 8. Discussion Groups 9. Action Learning Sets 10. Continuous improvement teams 11. Shadowing/buddying 12. Research 13. Performance Review 14. Internal Audits/Case File Reviews/Case Presentations/ Critical Incidents/Near Misses 15. End of week reviews – what went well/poorly 	Involvement with other departments/people in the organisation 1. Including going to see how another department works 2. Secondments 3. Participation in working parties/task groups 4. Action learning groups 5. Reverse Audits – People are involved in conducting audits outside their own departments  Courses inside the organisation 1. Including workshops 2. Discussions 3. Time out meetings 4. Seminars 5. Conferences 6. Share and learn sessions 
Self – Paced Learning 1. Including distance learning programmes 2. Correspondence courses 3. Computer based training 4. TV/DVD programmes 5. Reading – books/articles 6. E learning, Webinars 7. LinkedIn Groups 8. Surfing the Internet including professional bodies Webpages – Trust Hub and Professional Webpages 	External Events 1. Including conferences/ exhibitions 2. External courses including development programmes 3. Visits to other organisations 4. Educational programmes/Courses – attending Universities etc. 

This use of the range of learning options to meet and support identified learning and development needs is in line with the thinking which underpins the '70-20-10' learning model developed by Michael Lombardo and Robert Eichinger (2000). [The 70.20.10 model](#) uses a three blend approach to provide a learning and development platform for all learning and development activities.

This model suggests that about **70%** of people's learning is derived from informal and experiential learning – learning derived from in and on- the- job learning, best captured in the expression 'every day is a learning day in this job'.

Examples of such learning could come from challenging assignments and on-the-job experiences, dealing with challenging behaviour, encountering an experience you never have had to deal with before. It very much reflect Kolb's Experiential Task and Learning Cycle



About **20%** of learning is developed through relationships, networks, and feedback.

About **10%** of the learning is delivered via formal training processes.

The following few pages provides some examples of the range of training activity the Trust's own learning and development team provides on an annual and ongoing basis. It also provides some examples of some of the key learning and development initiatives/responses the Trust provides to meet agreed learning and development needs.

TRAINING ACTIVITY

The training activity for Trust staff over the past 2 years has been collated from HRPTS. All of these programmes are delivered in house, and each year there is an increase in numbers attending.



Statutory Mandatory Training

Fire Safety, Corporate Welcome



92841

Communication

Presentation Skills, Courageous Conversations, Minute taking skills, Employee Engagement Workshops



673

Quality and Service Improvement

Datix for Incidents, Customer Care, Serious Adverse Incident, Root cause analysis



2246

Personal & People

Development Coaching skills for Line Managers, Essential Skills Numeracy



5639

Health, Safety & Security

COSHH risk assessment, medical devices



1109

Equality and Diversity

Disability Awareness, Managing disability in the Workplace, Human Rights Training, Traveller Cultural Awareness Training, Migrant Awareness Training



975

Information Knowledge & Management

HRPTS Training including, Manager Self Service, Employee Self Service, Manager reporting



8841

Health Wellbeing and Social Care

Electronic Blood tracking, Safeguarding Vulnerable Adults, Safeguarding Children, Clinical Record Keeping



6373

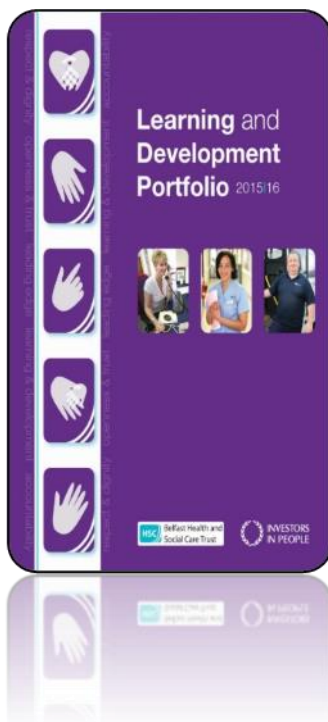
In-house Training Delivery

The range of training offered by internal trainers is significant. Each year hundreds of our staff attend learning and development programmes delivered by in-house learning and development facilitators/trainers. In-house training, learning and development solutions are a highly flexible, efficient, cost and time effective way to get the maximum return on our training and development investment. Since programmes are held within our premises there is not necessarily the same expense and loss of time associated with external training costs.

In-house training programmes are very often tailored and bespoke to support the request from the Manager. Frequently, course length, content and emphasis of existing courses and programmes can be adapted to suit the particular objectives and requirements. Specific examples of this include the facilitation of Trust Values Workshops, whereby, programmes are facilitated to support the team, e.g., after 5pm. Another recent example of this has been the **Corporate Welcome** for newly appointed Nurses whereby the programme was delivered on a Saturday.

Building Internal Capacity

Over recent years, the HR Learning and Development team has developed internal capacity to deliver a range of programmes in-house. This trend is more than just training, it is about building capacity for the Trust to think in new ways and to realise the value of the contribution made by Learning and Development



These in-house programmes that traditionally would have been commissioned from others include:

- ILM Level 5 in Leadership & Management
- Team Development
- Coaching Skills
- Courageous Conversations
- Engaging Manager
- Quality Attributes
- Service Improvement
- Thinking Differently for Different Outcomes

It is likely that over the coming years, this trend will continue and more programmes will be delivered in-house. Further examples will include middle manager programmes and also a range of accredited programmes that will be offered from April 2016.

Team Learning and Development Opportunities



The [Team Development and Effectiveness Framework](#) was revised and updated in **September 2013** to ensure key organisational priorities are reflected (ERs 9.3, 9.6, 10.4).

Over the past 3 years, approximately **150 teams** have completed a team development initiative, either facilitated by the HSC Leadership Centre or the HR Learning and Development team.

Examples of the improvements in team's performances following their involvement in the Team Development and Effectiveness Framework Workshops included:

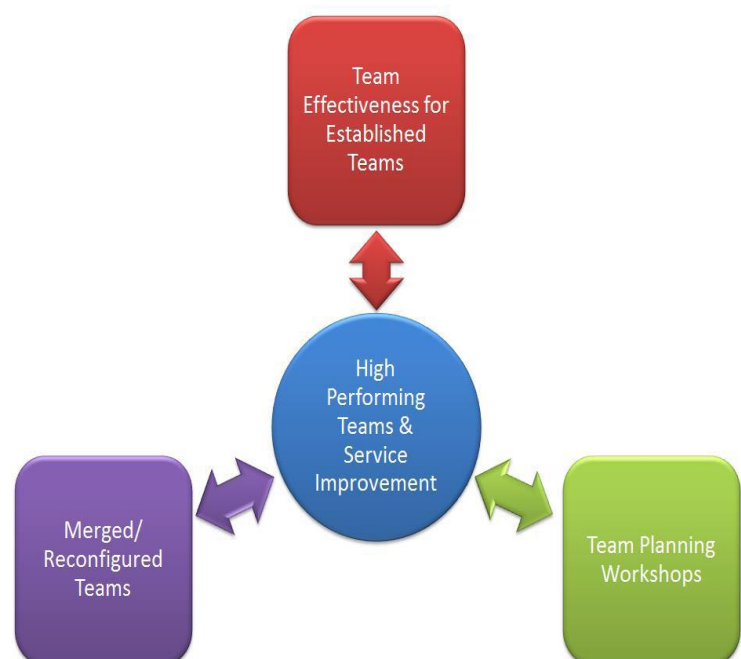
- *'Development or refinement of protocols, documentation or templates to improve efficiency and minimise unnecessary or duplicated bureaucracy'*.
- *'Improved communication methodologies within and across the team as well as with service users. In particular enhanced use of web technology and meetings'*
- *'Increased training for staff and shared learning to enhance service provision'*

(Sources: External evaluation completed by the HSC Leadership Centre)

There are a range of different types of **team effectiveness interventions** that managers can access for their team, including:

- Team Effectiveness for established teams
- Team planning workshops
- Team events for newly merged/reconfigured teams

In addition to these team interventions, approximately **160 teams** have also requested a Team Values Based Workshop whereby all team members have an opportunity to review the Trust values and also highlight behaviours that are acceptable/non acceptable within the team.



Individual Learning and Development

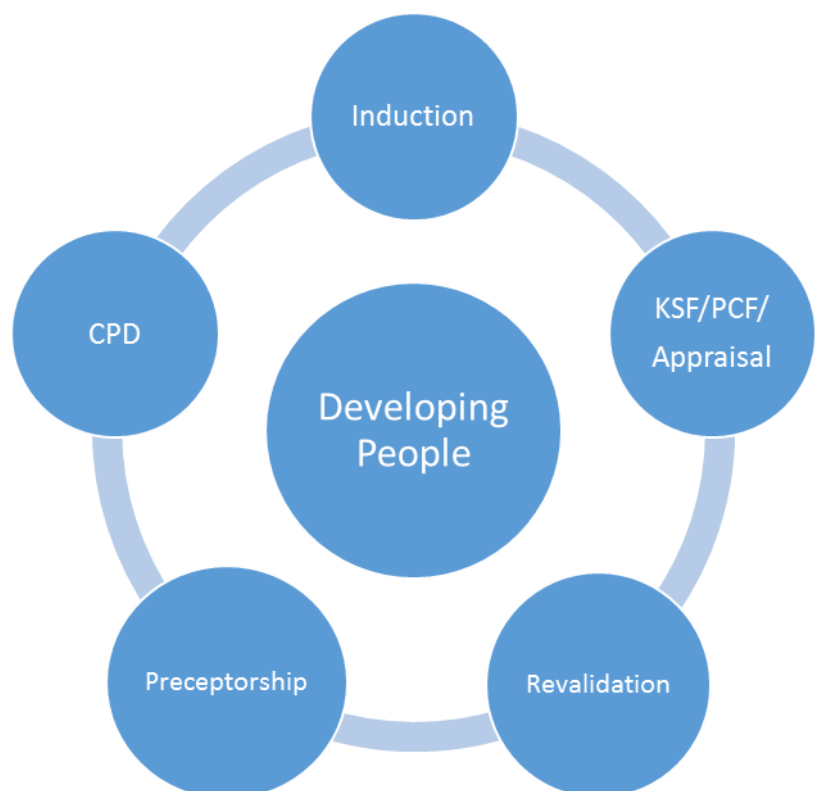
People are involved in identifying their learning and development via the formal Staff Development Review/Appraisal process. The types of informal and formal training that exist include:

On the Job	Off the Job
• Statutory mandatory training • Professional Development • Personal Development • Leadership Development • Coaching/mentoring • Secondments • Promotion opportunities • Research • E-Learning	• Conferences, workshops • Team Development • Courses

Continuous Professional Development

Continuous Professional Development remains a requirement for professionally qualified staff to maintain an updated skill set in order to remain fit to practise, 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.

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



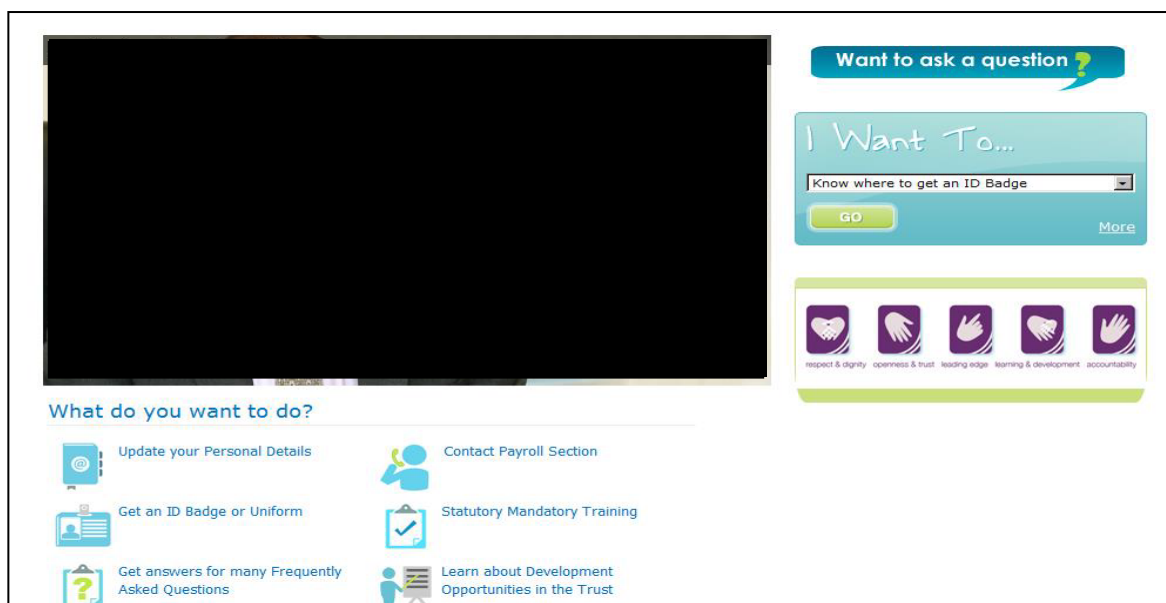
People's learning and development needs are met including those of new starts – Induction – ER 8.3.

The Trust recruits approximately **2000** staff per year. The BHSCT is committed to ensuring that 'all employees who are new to the organisation, and those new to a role, can describe how their induction has helped them to perform effectively'. Indeed, Induction is one of the Trust's 16 learning and development strategic priorities as set out in the Trust's learning and development strategy.

Charlotte Wolff, training editor at XpertHR, said that an effective induction programme can make the difference between high and low retention rates for new joiners. *"It is a unique opportunity for employers to capture the hearts and minds of their employees from the start, helping to build a productive, engaged workforce,"* she added.

In line with the guiding principles of 'innovative and flexible approaches to learning and development' and the priority of 'supporting the introduction of new ways of learning' the Trust's Learning and Development team has developed a **new online Welcome and Information site**, which was launched in September 2014. The development of the online welcome and information site enables staff to understand more about the Trust and also provides an opportunity to access key information during their early days of employment within the Trust at a time and location of their choosing.

The messages conveyed in the site are consistent across the Trust, with each new start having the opportunity to access key information within the first few days of employment. The new site speeds up the time spent finding out necessary information which staff need to know to settle into their new role. This includes acquiring uniforms, identifying and accessing mandatory training, therefore reducing delays in booking initial training required for the post holder and being correctly dressed for clinical roles.



The above is the homepage of the new site, and specific content includes:

- Welcome message from the Chief Executive
- Learning and Development Opportunities
- Directorate overview
- Logistical information on how to access name badges, payroll, trust locations and a section for frequently asked questions

Next Step

Learning and Development are working with Corporate Communications Department to migrate the contents of the welcome and information site from intranet based to internet based. This modernised approach to learning and development will enable staff to access the important Trust information prior to commencing their post.

Review and Evaluation:

Research completed by the Learning and Development team in May 2015 suggested that 83% of staff appointed from April 2014 to May 2015 confirmed they were aware of the site and almost **70% have accessed the site**. (Findings completed from online assessment).

Of the 70% that have accessed the site, almost **80% of these staff have found the content to be useful and informative**.

Since the launch it has had over 5000 hits with on average 33 people viewing this site per day.

Investment in learning can be quantified – ER 9.1

The scale of the Trust's investment of time, money and resources in learning and development has been addressed under the section on planning learning and development. While the figures describe the scale of investment at Trust/Organisational level, each Directorate will be in a position to provide you with the scale of investment their own Directorate invests in staff learning and development within their Directorate.

Impact can be demonstrated – ERs 9.2, 9.3, 9.4, 9.5
The contribution of people strategies is measured and evaluated – ER 9.6

At organisational level, the implementation and resulting benefits of the Learning and Development Strategy are monitored and progressed through the **Learning, Development and Education Committee**, which comprises a range of senior managers and trade union representatives.

Members of this Committee are accountable for leading, and co-ordinating Trust-wide efforts to establish how learning and development interventions have added value to organisational objectives.

This Committee will also identify programmes that are of high strategic importance to be formally evaluated. Some of these have been mentioned earlier, e.g. evaluation of 'Living Leadership Programmes', 'The Team Effectiveness Workshops' and reference has already been made to the detailed review and evaluation the Trust undertakes to evaluate the strategic impact of its key strategies such as its learning and development and leadership and management strategies.

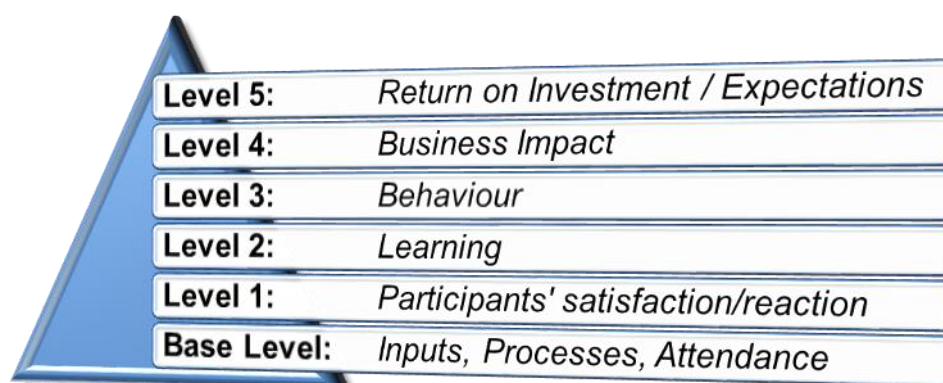
The Committee also endorsed the Trust's '[Evaluation Framework for Learning and Development: Improving Performance and Demonstrating Value](#)'. This Framework sets out the broad principles regarding evaluation and best practice guidance to ensure that the processes the Trust uses to review and evaluate 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 Framework takes into account the need for planning, action and evaluation at the levels of organisation, team and individual. It also reinforces the requirement to ensure the link between service needs and learning and development and ensuring such activity is value adding to the overall service performance.

In-house HR Learning & Development Evaluation

As stated, the Trust's approach to evaluation is set out in the Evaluation Framework. Application of the different levels is set out below (as based on Kirkpatrick Model of evaluation). All in-house Learning and Development training is evaluated at a level 1, i.e., the reaction level.





Based on level 1 evaluations for in-house HR Learning and Development programmes from April 2014 – September 2015, with over 200 programmes having been delivered the average score for all in house programmes is **5.4**, based on a scale of 1 – 6, i.e., 1 being poor and 6 being excellent.

Directorate / Team level Review and Evaluation

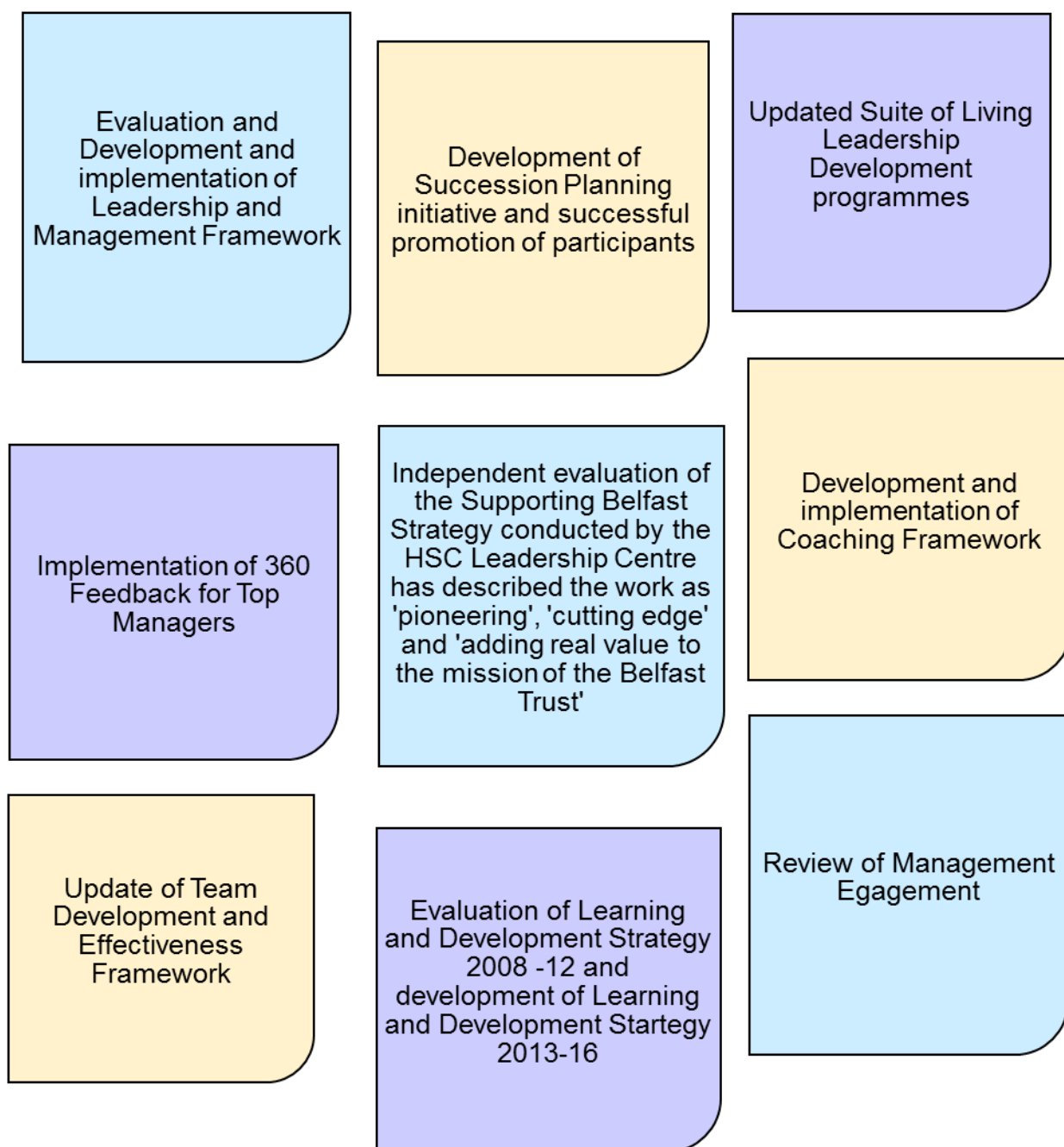
As part of Directorate learning and development plans, consideration is given as to how the benefits of learning interventions will be evaluated. This typically might be through monitoring the impact on directorate level service targets, financial savings, service improvements, and potential patient/client benefits or directorate-level people indicators such as absenteeism, recruitment and retention and staff survey results. Progress is reported and monitored as part of the Trust's 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

- The success of the Trust in progressing its modernisation and transformation programme as measured by the achievements in relation to New Directions 1.
- Staying in budget and meeting its efficiency saving targets.
- Delivering on its Service Budget Agreements with the HSCB across all programmes of care.
- Positive start in transforming services in the direction for service provision and delivery as espoused in TYC.
- Trust's performance against the objectives as set out in its Corporate Management Plan.
- Positive trend data in the staff surveys
- Positive traffic light reports from IIP LITs against the five IIP Themes.
- Positive performance against external reviews such as RQIA Inspections, Laboratory Accreditation.
- Achievements of External Recognition, Accreditation and Awards
- Ongoing development of a culture which is focused on high quality care and safety and which consistently lives its values.
- Achievements as set out in the Trust's Annual Report and the Trust's Annual Quality Report

**The contribution of people strategies is measured and evaluated – ER 9.3, 9.6
Evaluation results in improvements to people strategies and management –
ER 10.1, 10.4, 10.5**

Our strategies for improving how we develop our people are regularly reviewed and enhanced particularly as an outcome of evaluation. Several examples have previously been cited where we have invested in development and aligned it with the requirements for organisational effectiveness e.g.



In addition the Trust uses information from external reviews such as its last IIP Review to improve its strategies for managing and developing people. Immediately following the last IIP review the Trust's IIP Steering Group developed and launched a Continuous Improvement Plan. Using the well-established, embedded, committed and highly effective IIP Structure including the Directorate based IIP Leads, the Trust has invested substantially in listening, learning and improving its

practices since the Trust's last review. Each Directorate looks forward to telling their assessor about the progress and improvements they have made since their last review.

These initiatives, combined with other effective management approaches have enabled the Trust to ensure that it delivers on its targets and statutory obligations. The Trust's Annual Reports and Review of New Directions 2008 – 12 and Achievements Report provide details of a range of examples where the Trust has continued to develop and improve on service delivery for its patients and clients which are only achievable through ensuring that we have a competent and highly skilled and developed workforce:-

Some Macro Achievements include:

£8m invested in R&D, covering 219 projects, 130 staff & 15 research fellows

150-200 revenue proposals reviewed and approved each year

£23m capital expended on 200 projects each year

670 budget managers trained and supported to effectively manage £1.2bn worth of expenditure

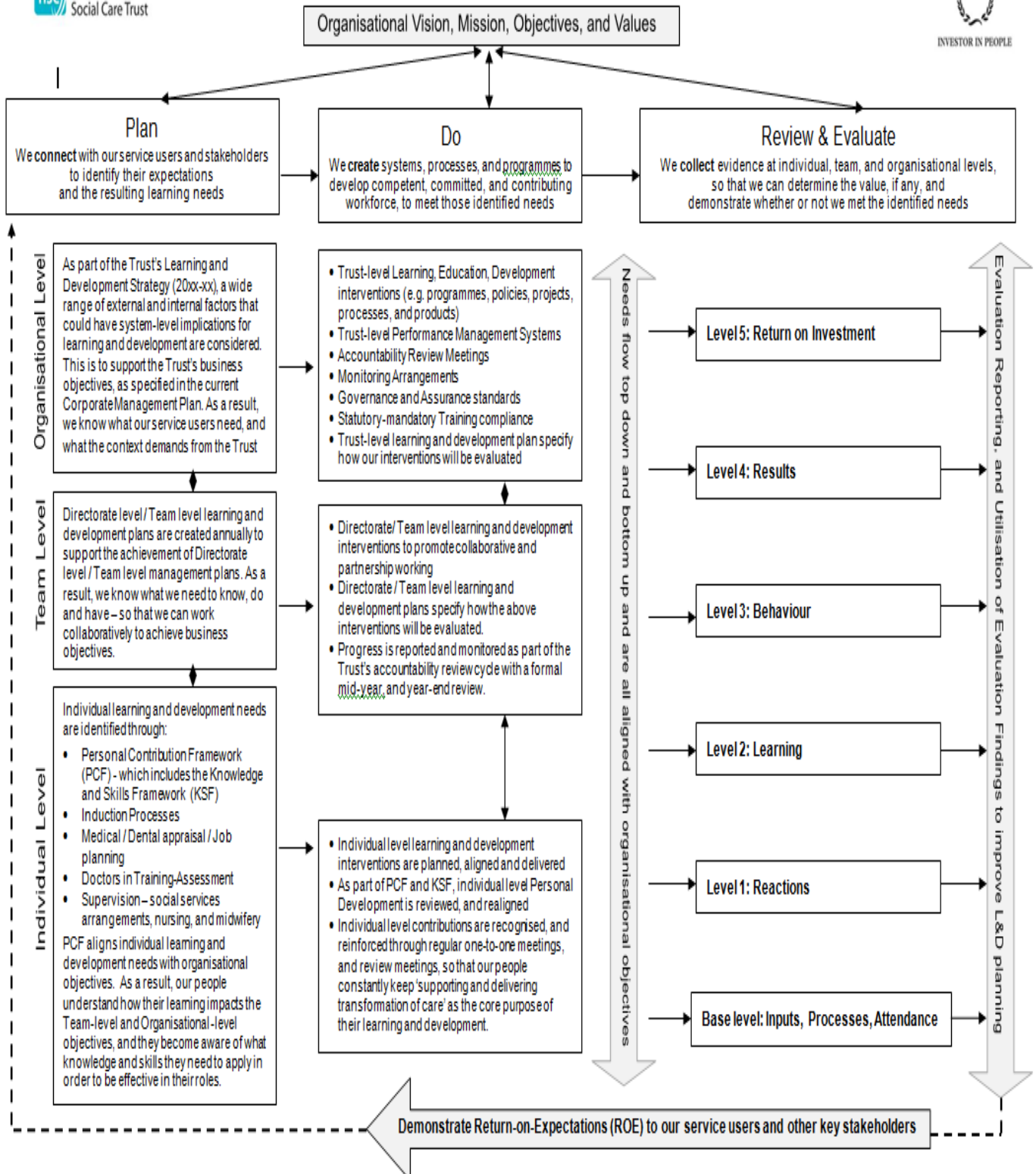
1352 school work experience placement activities

10,000 plus staff attended HR Training Events

Learning and Development Evaluation Framework



INVESTOR IN PEOPLE



Theme 3

Engaging, Involving and Empowering Employees (Culture and Communication)

Extended Framework

- Equality and Diversity
- Recruitment and Selection
- Work Life Balance
- Internal Communication



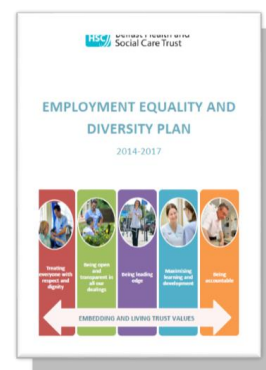
- Strategies in place to ensure everyone has appropriate access to the support they need to improve their performance' as part of the Trust's commitment to becoming the employer of choice (ERs 3.2, 3.3, 3.4)
- A diverse talent workforce is created (ERs 3.7, 3.12, 3.15, 3.20, 3.23, 3.28)
- Strategies are in place to create an environment where everyone is encouraged to contribute ideas to improve their own and other people's performance - People are encouraged to contribute ideas and improvements (ERs 3.1, 3.5)
- People are encouraged to take ownership and responsibility by being involved in decision making (ERs 7.1, 7.2, 7.3)
- The recruitment process is fair, efficient and effective (ERs 3.6, 3.11, 3.14, 3.19, 3.22)
- A work – life balance strategy meets the needs of its people (ERs 3.8, 3.13, 3.16, 3.21, 3.24, 3.29)
- Knowledge and information are shared (ERs 7.5, 7.10, 7.14)

Strategies in place to ensure everyone has appropriate access to the support they need to improve their performance' as part of the Trust's commitment to becoming the employer of choice – ERs 3.2, 3.3, 3.4

The Trust is committed to developing a culture which reflects the principles of The IIP Framework e.g. a culture where all staff have equal access to learning and development opportunities and **where diversity is recognised, welcomed and celebrated**.

1. We are an Equal Opportunity Employer and Equality of Opportunity is a thread that runs through all our people processes and practices. In relation to developing people, equality of opportunity is one of the guiding principles in the Trust's updated Learning and Development Strategy

[Employment Equality and Diversity Plan](#)



2. Providing equality of opportunity for staff who have traditionally been distanced from workplace L&D, '[Supporting Belfast: A Strategy for Inclusiveness in L&D for Support Workers](#)' (staff in bands 1 to 4) was developed to target and engage support workers in high-quality education and training. To-date over 1500 support workers have benefitted and an independent evaluation conducted by the HSC Leadership Centre has described the work as 'pioneering', 'cutting edge' and 'adding real value to the mission of Belfast Trust'.
3. We continue to work in developing an ever more detailed profile of our workforce which allows the Trust to identify and respond to the different needs of all the people in the Trust. This also helps us to ensure our strategies and processes are intelligence and data driven and based.
4. We continue to engage with staff to establish the different needs of staff, including part – time staff, all staff bands, people for whom English may not be their first language and people with disabilities. We are also proud of the work in which we continue to be involved in relation to supporting staff in the areas of literacy, numeracy and computer literacy.
5. As an **equal opportunity employer** we ensure all staff have the opportunity to participate in critical people processes such as Staff Development Review process or Appraisals for Doctors and Dentists which are a key gateway to identifying and supporting development needs.



6. We continue to promote learning and development for all grades of staff throughout the Trust using a wide variety of methods to ensure effective communication of the opportunities which exist.
7. We have worked proactively, creatively and effectively to ensure we have developed a **range of approaches** to the provision of L&D opportunities which supports the personal and familial needs of our diverse workforce and those who work on shifts e.g. increase in the use of E learning and training at night time etc. The Directorate IIP teams in their Directorate presentations will share the practical and effective approaches they have developed and used to improve access to learning and development opportunities.
8. Learning opportunities are flagged up with staff on a regular, timely and ongoing basis and key programmes are offered several times over the year. This facilitates better planning at service and familial levels. The offering of some training in the workplace reduces disruption and mitigates difficulties some staff may have in relation to transport.
9. The continuing emphasis the Trust places on 'in- the – job and on-the – job' training supports the practice across the Trust that learning is an everyday activity which in turns supports 'equality of opportunity for all.
10. The availability of and access to mentors, preceptors, coaches, supervisors also supports learning close to the workplace and ensures greater access to learning and support for all staff.
11. 11. As a member of Belfast Strategic Partnership Board, we are a key stakeholder in the development of The Belfast Learning Charter. This purpose of the Learning Charter is to ensure that all Belfast citizens have equal access to learning opportunities, creating conditions for a better quality of life for everyone in the city. As a signatory on the Learning Charter, the Trust will support the following principles:
 - Creating a learning culture for Belfast that recognizes and values all forms of learning
 - Developing an inclusive, innovative and strategic approach to Lifelong Learning through partnership working, which maximizes the reach and impact of all available resources
 - Promoting collaborative working between key stakeholders that ensures equality of access between Lifelong Learning opportunities and informs excellence in the design and development of Lifelong Learning provision
 - Realigning current and future skills with Northern Ireland's economic needs



**Making life better,
together**
Belfast Strategic Partnership

A diverse talent workforce is created (ERs 3.7, 3.12, 3.15, 3.20, 3.23, 3.28).

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. In addition to the 10 actions set out above which provide a flavour of how the Trust ensures all staff have equal and fair access to learning and development and support as needed, this section of the Storyboard, sets out those additional strategies, processes and practices which demonstrates the Trust's commitment to the creation and development of a talented workforce.

We have developed and are implementing a new Employment and Equality & Diversity Plan.

The Trust recognises that ensuring equality in employment and eliminating workplace discrimination and harassment are essential for developing a diverse workforce, attracting high calibre employees and maximising 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, aligned with the Trust's Business Strategies, sets out our employment equality priorities over the three year period 2014-2017. 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.

The four key objectives of the Employment Equality and Diversity Plan are;

- 1) To promote and champion equality, good relations and diversity within the organisation
- 2) To develop and maintain corporate policies and procedures which support and underpin equality and diversity in the workplace
- 3) To foster an accessible and inclusive working environment for all staff and continue to take steps to ensure that our workforce is representative of the community we serve
- 4) To set in place appropriate systems to evaluate and measure the success of equality policies and procedures and the Employment Equality and Diversity Plan.

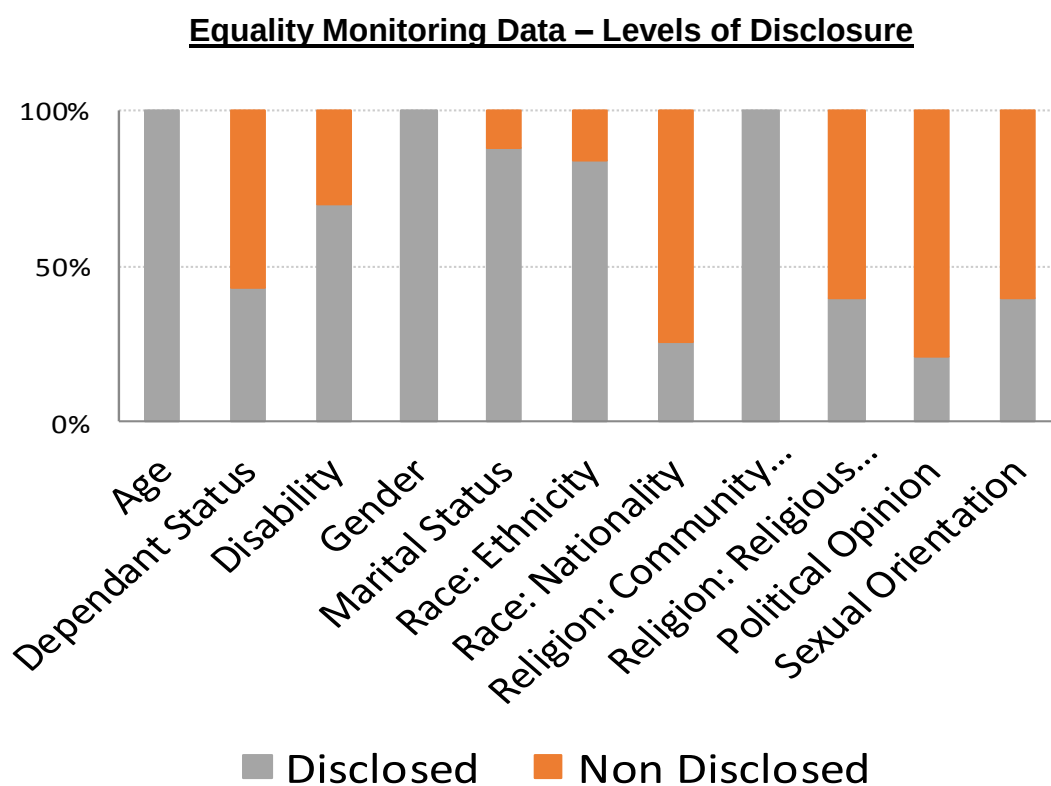
Each of the 4 objectives of the Plan have an associated Action Plan. Progress is reviewed annually by the Trust's Workforce, Governance and Policy Review Committee. The first **progress report** for the year 2014-15 was considered by the Committee in June 2015

We continue to monitor and report on Equality – Equality Monitoring: -

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. Disclosure levels **have increased** across the equality groups during the year. 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 outlined in the table below. This table provides an overview of disclosure levels across these categories



One area where the Trust has full levels of disclosure is in the **area of gender** allowing for more detailed analysis across Trust directorates and job bands. This **info-graphic** overleaf provides some overarching analysis and benchmarking of gender data available to the Trust.

The Trust reports annually to the Equality Commission on its 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.

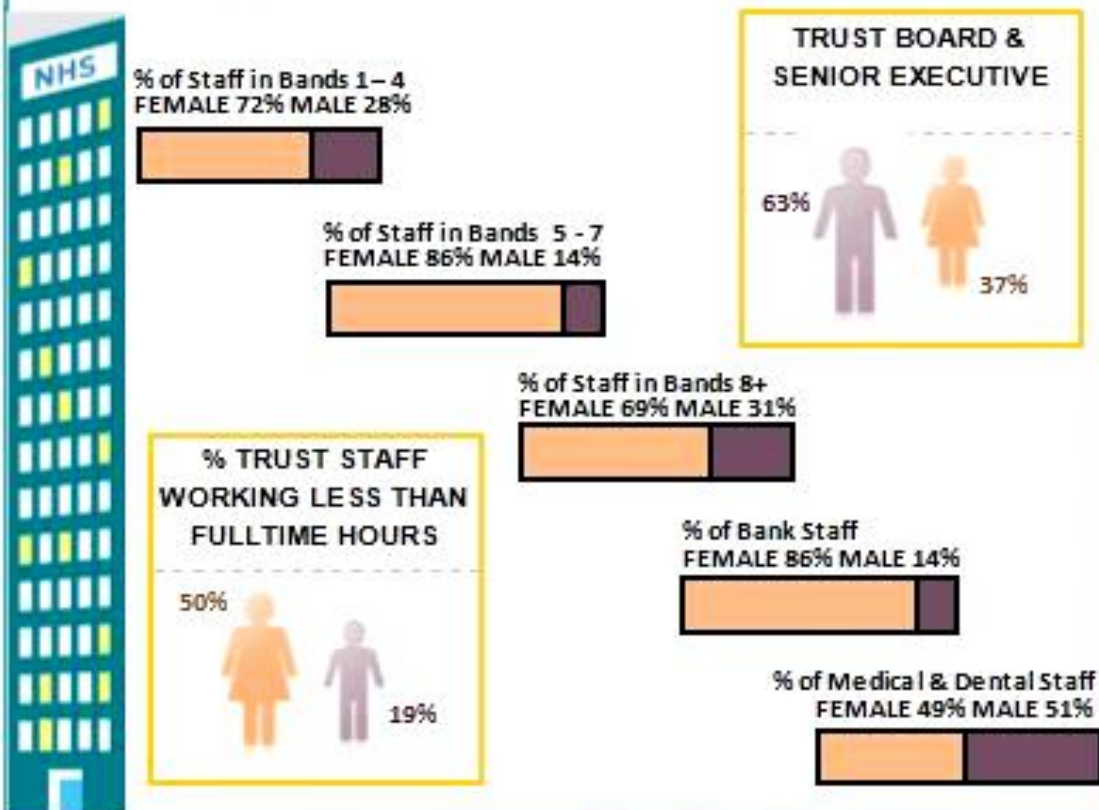
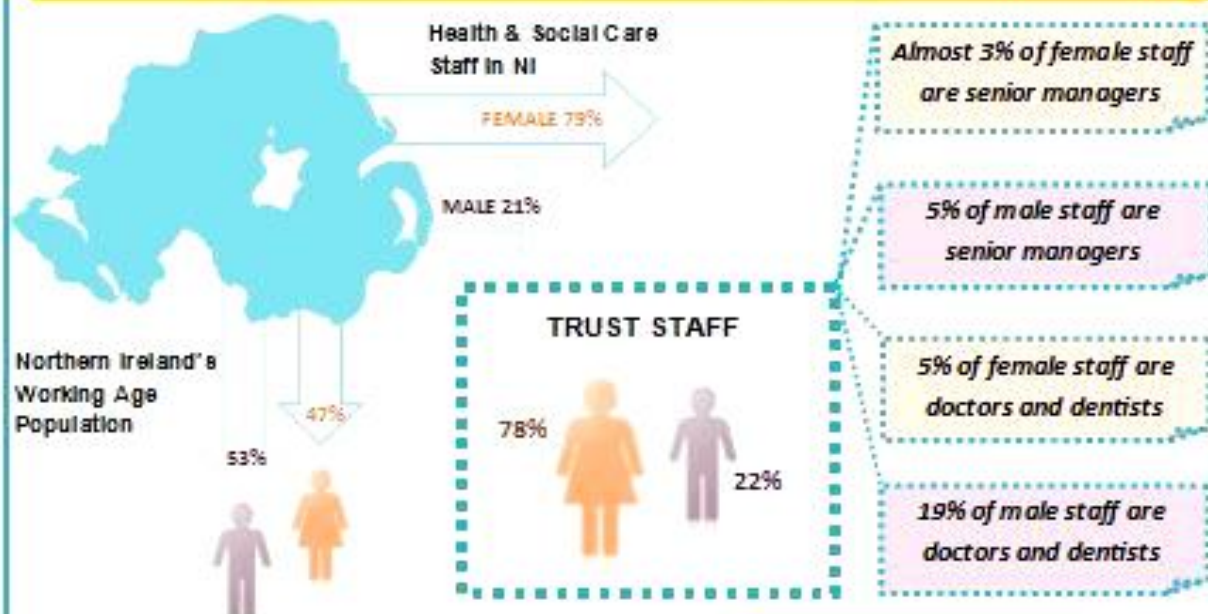


Belfast Health and
Social Care Trust

caring supporting improving together



GENDER EQUALITY



EMPLOYMENT EQUALITY TEAM, HUMAN RESOURCES DIRECTORATE

We take positive action in Employment Equality -

The **Trust's Disability Action Plan (DAP)** sets out the Trust's commitment to progressing equality of opportunity for disabled people who are applicants to the Trust, employees of the Trust and current staff who become disabled.



A Regional Framework on the Employment of People with Disabilities, Reasonable Adjustments and Disability Etiquette Guidance has been implemented.

We have established a **Disabled Employee Network (DEN)**, which is run and chaired by disabled staff. This Network provides disabled staff with an opportunity to play a full role in the Trust, promoting a positive culture and raising the profile of important disability related issues. During 2014 the Network has focused on developing **communication channels** through the Trust intranet, Yammer, Health and Wellbeing Events and promotional literature to highlight events and issues.

The Network representatives engage with and share practice with regional colleagues with a view to developing a Regional HSC Disability Steering Group to share resources and good practice across the sector (**ERs 7.5, 7.10, 7.14**).

We provide Work Placements and support Employability Initiatives for people with disabilities

The provision of work experience opportunities for people with disabilities is a key objective of the Trust's Employment Equality and Diversity Plan, Disability Action Plan and the Trust Disability Steering Group. The provision for work experience opportunities and ring-fenced posts for people with disabilities resulted in the Trust **meeting its target in 2014/15** by providing 20 placements across a range of Departments and with a number of disability organisations. The employability initiative provides participants with valuable work skills and builds confidence.

The purpose of ring fenced posts is to offer employment opportunities for people with disabilities. Ring fenced posts in the area of Mental Health have proven to be so successful that four further posts have been filled using this method of recruitment. Four Peer Support workers were recently employed within Mental Health with support through DEL's Workable Scheme. The hope is that these staff can demonstrate that their personal experiences of mental ill-health can be an attribute in the work environment

We benchmark our work against best practice and use both self – review and feedback from external bodies to review and improve our work and practices – ERs 10.4, 10.5

We were shortlisted for ‘An Employer of Excellence’ Award.



The Trust was delighted to have been shortlisted as a finalist in the Irish News Employment Awards 2013 in the Category of **Best Practice Employer for Disability**.

The Trust is delighted to have been **re-accredited** in 2015 by Employers for Disability (NI) as an **Employer of Excellence** for its work on positive action for people with disabilities exceeding **90%** compliance against the standards



‘Making Equality Work’

We have been included in the Equality Commission Guide which featured the Trust as a Good Practice Employer



We continue to look for opportunities to share, learn and continuously improve: -

For example the Trust, in conjunction with Business in the Community, has signed up to the ‘Gender Project’ – an innovative programme launched in December 2015 designed to promote agile organisations with men and women able to work in a way that encourages productivity and engagement.



During the year the Trust has worked with the NHS Employers Working Longer Group to develop a toolkit to prepare organisations for the challenges and opportunities that an ageing workforce will bring.

We invest heavily in Equality Training for all staff and are proud of the innovative and cost-effective solutions we have developed and deployed to make our training more accessible and available to all staff and to meet staff's learning and development needs - (ER 8.5)

The Trust provides a wide range of Equality and Diversity Training as set out in the Learning and Development Portfolio. This includes

- Mandatory Equality Training for Staff and Managers*
- Input into Corporate Induction Programme and Managers Induction to HR processes
- Equality input into Vocational Learning Programmes
- Managing Disability and Reasonable Adjustments in the Workplace
- Maternity Information Sessions
- Bullying and Harassment
- Disability Awareness training: Disability Awareness training
- Domestic Abuse Awareness training
- Equality & Good Relations training
- Human Rights
- Working Well With Interpreters
- Screening & Equality Impact Assessment training:
- Traveller Awareness training

***1450** staff attended mandatory equality training during 2014-15 and a further **860** in the first six months of 2015.

We have recently developed and launched a New E-Learning Equality training Resource for Staff. This resource is designed to improve access to the mandatory equality training. It can be completed all at once or in short bursts. The programme introduction is in the form of a short video led by the Director of Human Resources and Organisational Development. It also includes a Training Manual which provides supporting information and signposting.



A Good Relations Strategy

The Trust was the first Health and Social Care Trust in Northern Ireland to develop a Good Relations Strategy and action plan spanning all our functions of service provision,



employment and procurement in 2012. The Trust has proactively worked to promote good relations for our staff, our service users and amongst our stakeholders. Our engagement and interaction with our staff and service users in developing the strategy led to the production of a biannual bulletin to raise awareness of the raft of work that the Trust does to promote good relations – be it the recent appointment of Roma Lay Health workers or the employment of three Travellers to develop mutual understanding, appreciation and respect of the growing ethnic minority population that

we serve and employ in Belfast. The Trust has explicitly committed to ensuring that all our facilities offer a welcoming, accessible shared space for staff and service users alike. An Art Project was undertaken to develop art work with our communities and staff for our Well Being and Treatment Centres symbolising diversity and aimed at ensuring that everyone attending the centres irrespective of race or religion will be greeted with a warm welcome in a language or symbol that they will recognise. The launch of the artwork was attended by the entire Executive Team and Trade Unions along with Chief Commissioner of the ECNI, Chief Executive of the Public Health Agency and the Lord Mayor of Belfast. The event comprised a mela of colour, music, culture and dance and hope and optimism for the future of good



relations in Belfast. The ECNI Public Sector Equality Manager wrote to feedback *"I was lucky enough to be able to attend and really enjoyed the speeches, music, singing and dancing and of course seeing the artwork which welcomes all into Shankill Wellbeing and Treatment Centre and which I understand is replicated in many other Centre's across the Belfast Trust. It was such a positive experience; set within a real life service provision environment."*

The Trust has now featured as a good practice example for the ECNI in a podcast to all designated public authorities, as they are keen that other organisations follow the Trust lead.



Strategies are in place to create an environment where everyone is encouraged to contribute ideas to improve their own and other people's performance - People are encouraged to contribute ideas and improvements (ERs 3.1, 3.5).

People are encouraged to take ownership and responsibility by being involved in decision making - (ERs 7.1, 7.2, 7.3).

Knowledge and information are shared (ERs 7.5, 7.10, 7.14).

When employees feel connected to an organisation they invest more of themselves in it. The Trust believes that its investment in its people has paid handsomely as evidenced by the high levels of commitment and service staff give on a 24/7/365 basis.

The following is an overview of the strategies, approaches and actions we have taken to create a culture where people are encouraged, facilitated and recognised for taking ownership and responsibility by being involved in decision making at levels appropriate to their role. It also outlines the extensive work the Trust has undertaken since its last IIP review to improve internal communication, employee engagement and knowledge and information sharing.

People are encouraged to take ownership and responsibility by being involved in decision making - (ERs 7.1, 7.2, 7.3).

The strategic commitment to Continuous Improvement is now a well – established and lived part of the Trust's culture

The Trust's strategic commitment to continuous improvement is set out in its Corporate Plan for 2013 – 16 as one of its **five key strategic objectives** – namely **Continuous Improvement** where the plan states '*we will encourage and support our staff to be innovative and creative in pursuing our purpose*', '*we will create an environment where research and enquiry can flourish*' and '*we will translate research and innovative ideas into practical improvements for the people who use our services*'.

Again at Value level the Trust sets out the importance it attaches to innovation and a willingness to modernise and transform to meet changing demands and trends under its core value of '**Being Leading Edge**' – '*We will seek to be a leading edge Trust through innovation at all levels in the organisation*'.



The strategic commitment to Partnership is set out within the Corporate Plan for 2013-16 and is one the five key objectives

Good Practice Guide on Communication and Consultation

In support of the Trust's Strategic Reform and Modernisation Programme the Belfast Trust updated its Good Practice Guide on Communication and Consultation. This Guide sets out the principles of good practice and processes to ensure the Trust obligations to key stakeholders, staff, patients / clients and the public are addressed. A series of workshops have been held with Service Managers, responsible for service reform and modernisation, on the updated Guide and the evaluation. A copy of the [Guide](#) and Evaluation are available.

This guidance continues to be applied to the many reform and modernisation projects undertaken within the Trust.

Framework on the Management of Staff Affected by Organisational Change

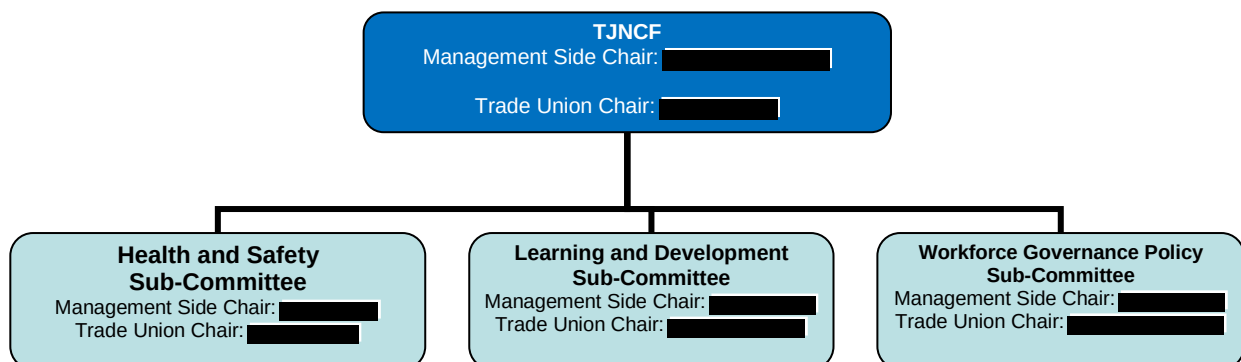
The Trust continues to apply the above Framework which sets out clearly the roles & responsibilities and process & steps to be taken in the management of staff affected by organisational change, including the avoidance of redundancy.

Over the period of the last three years, approximately 100 staff have been managed via this Framework. This is further supplemented with the access to 1:1 coaching for staff managing and coping with change.

Industrial Relations Infrastructure and Clientele

The Belfast Trust continues to have in place a well-established Industrial Relations Framework and effective partnership working with its recognised Trade Unions. The scale of the organisational change and efficiency reform agenda, all have been managed within the agreed Framework. A consultation process is formally in place with the Trade Unions, who are key in progressing and delivering the Trust business and services.

Trust Joint Negotiating and Consultative Framework



Each committee is productive in fully undertaking its functions, roles and responsibilities. Both Management and Trade Unions share responsibility for making the committees work effectively and productively. Examples of outputs and outcomes include:-

Learning and Development Committee	Workforce Governance Policy Committee
▪ Staff Development Review process ▪ Engagement Framework ▪ Embedding Trust Values ▪ IIP ▪ Learning and Development Strategy ▪ Statutory and Mandatory Training ▪ Support Workers Training	Over the past 3 years 47 Policies and Procedures have been reviewed and updated

We continue to develop and improve the mechanisms we use to involve and engage staff

We have put in place processes that encourage and facilitate employee involvement and participation in planning and service improvement initiatives, examples of which include: -

- A more inclusive business planning process
- A well – established and robust representative group structure
- Regular team meetings
- Specialist working groups on a wide range of areas
- Continuous improvement groups
- Joint consultative committees
- Focus groups
- Staff surveys
- Internal and external reviews
- Audits

For example:

We use well established service improvement **processes and team initiatives** such as **LEAN Service Improvement projects, MORE (Maximising Outcomes, Resources and Efficiencies) Projects & IIP Local Implementation Teams (LIT)** to engage staff in creating a culture which is committed to continuous improvement and we can show extensive evidence of the scale and range of investment in continuous improvement type activities.

We support managers and staff in acquiring the capabilities involved in continuous improvement and service modernisation and transformation.

Four of the sixteen strategic priorities within the Trust's current Learning and Development Strategy specifically addresses the need for capability development for staff around continuous improvement namely: -

- Quality and Continuous Improvement
- Organisational Development / Managing Change and Service Improvement



- Supporting Introduction of New Ways of Learning/
Learning Environment
- Supporting Introduction of New Systems

Our people processes such as the SDR, Coaching, Mentoring, Supervision and Team Effectiveness have at their core an ethos of learning and performance improvement.

We track, report on and celebrate improvements and achievements;

The Trust's Annual Report and the Trust's Annual Quality Report provide the Trust with opportunities to capture and present the wide range of achievements and improvements the Trust, through its staff, have made over the previous year.



The **Chairman's Awards** provide teams and services with an opportunity to showcase best practice in their service areas, the improvements their projects have generated and the benefit that has accrued to service users as a result of staff committing to get involved in decision in making and service improvement.

A key success story for the Trust since our last review has been the work we have undertaken on '**employee engagement**'. Building on the Research Work on Employee Engagement from the MacLeod and Clarke Report, the Trust engaged with staff on what 'employee engagement' meant to and for them. Staff were also asked to identify those factors which encouraged employees to become engaged, what were the barriers to staff becoming engaged and lastly staff were asked to generate some practical solutions that if delivered upon and implemented would make a positive difference in how staff felt about working for the Trust and their willingness to engage.

An outcome of this staff conference with **100 staff from Bands 1 – 7** was the development of the Trust's [Employee Engagement Framework](#).

The Trust's Employee Engagement Framework – ***Your Ideas Matter Your Voice Counts*** (EEF) was launched in **2015** at the second engagement launch. The framework was developed, following feedback and suggestions from a cross-section of our staff and recommends a range of actions that will now be progressed as we seek to enable all staff to feel more empowered and engaged, to feel listened to, encouraged to suggest ideas and to feel ownership for how our organisation performs. The Employee Engagement Framework sets the foundations of Employee Engagement with a focus on frontline staff. It is intended to provide a baseline for the Trust and Directorates to take forward.



[This Employee Engagement Framework](#) sets out how the Trust will sustain employee engagement using the nationally recognised 4 best practice categories for enabling engagement presented in the MacLeod and Clarke report:

- Setting Direction and Aligning Contribution
- Engaging Managers
- Employee Voice
- Living Our Values



The Employee Engagement Framework contains the suggestions from staff for improving engagement throughout the Trust. **In early 2016**, the Trust will have in place an Engagement Forum which will contain representatives from Front Line staff.

SETTING DIRECTION & ALIGNING CONTRIBUTION

The Trust will sustain staff engagement by



- Making strategic documents more user friendly
- Involving our staff in service planning initiative
- Updating the KSF/PCF process to simplify and include our values
- Ensuring all staff have the opportunity to attend team meetings
- Continue to address resource issues
- Continuously reviewing and improving how we communicate with staff
- Listening to staff and take forward recommendations for improving our services and use of resources
- Supporting the development of a coaching culture and engaging Line Manager approach

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.

EMPLOYEE VOICE

As an engaged member of staff I will



- Behave in a way that is consistent with the Trust Values
- Attend team meetings
- Work to my full potential using skills, knowledge and experience
- Receive ongoing feedback on my performance
- Meet with my Line Manager to discuss personal development needs
- Make suggestions for improving our service
- Speak up about concerns if standards are not being met
- Receive updates on and feedback from consultation process
- Be aware of and participate in employee engagement forums

LIVING OUR VALUES

Reflected in our day to day behaviours, bought into and lived by all staff

Values



respect & dignity



openness & trust



leading edge



learning & development



accountability

Expected behaviours

- 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
- Communicating openly and consistently
- Listening to the opinions of others and acting sensitively
- Being trustworthy and genuine
- Ensuring that appropriate information is shared honestly
- 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
- 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
- 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.

At the launch of the Employee Engagement Framework [REDACTED] **asked that all staff keep the phrase ‘Your ideas matter, your voice counts’ close at hand**

One of the four pillars within the Trust's Employee Engagement is the '**Employee Voice**' – a belief that employees should be consulted on an ongoing basis about what matters to them and they should have their ideas heard, gain feedback from senior leaders and managers so that staff feel their ideas are listened to and that their opinion counts.

Recently the Trust embarked on a '**Let's Talk Trust**' campaign. Between 10th February 2015 and 16th March 2015, we had **a conversation with staff** throughout the Trust to find out what type of organisation we want the Trust to be. The topic for conversation was

"What type of organisation we are and what type of organisation we want to be"

Several methods of collecting the data were available of this include:

- Online survey using survey monkey
- Email your response to a dedicated email account
- Talk to a member of the HR team when they visited your department

Over **2000 statements** were recorded from all Directorates and locations throughout the Trust. In deciding on a preferred strapline, the Senior Executive Team considered the words and phrases provided by staff, to assess if they

- were representative of all service users and staff
- were 'future proof'
- show the Trust moving forward with vision and ambition
- "uniqueness" to the Trust.

[The findings from the Lets Talk initiative were formally shared at the Leadership Conference in March 2015.](#)



let's talk Engagement

A new Engaging Managers Programme is now available

Over 110 Values workshops delivered.

let's talk Trust

The Trust's second Employee Engagement conference took place in **Crumlin Road Gaol on Thursday 25th June 2015**. This event was an opportunity for staff to air their views and ideas about current engagement levels in the Trust and contribute their thoughts on how this could be improved.



In summary

- We developed an Employee Engagement Framework in 2014 which highlights how the Trust will support ongoing Employee Engagement initiatives throughout the Trust.
- We have strong, well established and consistently utilised **consultation arrangements** for all major changes to engage our staff, partners and stakeholders in reviewing and developing key strategies and policies and all consultation processes provide staff with an opportunity to input into and shape key decisions in relation to service provision, service delivery, working practices and modernising and transforming services.
- We have delivered 2 **Employee Engagement** events attended by approximately 400 staff from bands 1-7 over the past few years.
- We have circulated a user friendly version of the **Employee Engagement Framework** Trust-wide.
- We are in the process of developing an **Employee Engagement Forum** to support and improve ongoing Employee Engagement in the Trust which will be comprise of bands 1-7 staff.
- We have seen positive outcomes from the work we have done **with staff on employee engagement for example, the introduction of the 'Engaging Manager' Development Programme**, and extensive work on how we can improve our performance in how we 'live the Trust's values supported by the extensive roll out of **Values Based Workshop** for teams across the Trust.
- Feedback from staff in the Let's Talk workshops has resulted in the development of the Trust's new identity – '**Caring, Supporting, Improving, Together**'.



Belfast Health and
Social Care Trust

caring supporting improving together

*The new identity has been
incorporated into Trust brand and is
included in all Trust
correspondence*

Caring was the most commonly used word from the staff submissions and focuses our attention on the fact that our core role is caring for patients, clients/staff

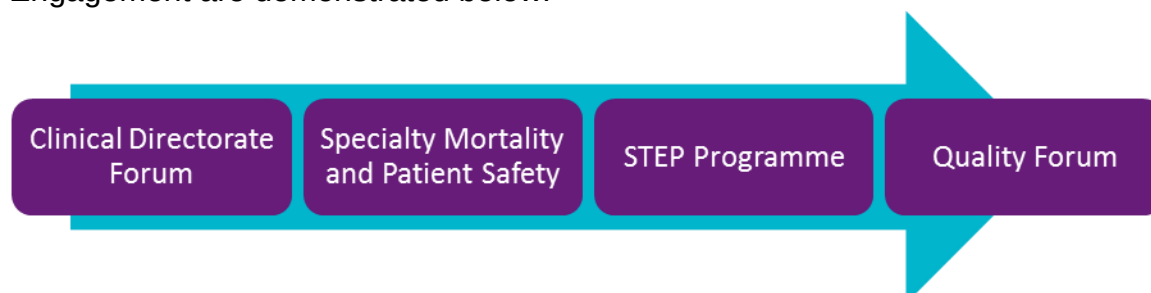
Supporting staff to provide safe, quality services, supporting our patients and clients in their recovery and at home, supporting one another to be the best we can be.

Improving means we are striving to be the best in all that we do, to be a forward-looking organisation, delivering the best care, being open and honest, progressive in our thinking, enabling and empowering our patients, clients and staff

Together demonstrates the clear and strong message from our staff - we will achieve our goals through working together and in partnership

MEDICAL ENGAGEMENT

Many research studies have confirmed the close correlation between medical engagement and clinical and organisational performance. Put simply, patient outcomes improve when Medical Engagement becomes an intrinsic part of the culture of the organisation. The Trust is fully committed to medical engagement by the Trust Board and Executive Team with alignment to the Organisational function. Examples of improving current Medical Engagement are demonstrated below:



In April 2015 the Trust commissioned [REDACTED] from the Institute of Clinical Leadership, University of Warwick Medical School to undertake a Medical Engagement exercise within the Trust. Belfast is the first Trust in Northern Ireland to complete this exercise, however, it has been completed by 23,782 NHS staff and 20+ health organisations

The Medical Leadership Quality Framework



The *Medical Leadership Quality Framework* was used to inform questions on Medical Engagement.

Findings from the Medical Engagement exercise were shared with Consultants at a workshop facilitated by [REDACTED], Medical Director and [REDACTED], Director Human Resources and Organisational Development.

- The Trust has made a **commitment to listen and act on staff feedback** in the next three months.
- It has been acknowledged that **information gained through this exercise will support the design and development of medical engagement improvements** for all levels of doctors throughout the Trust

The recruitment process is fair, efficient and effective (ERs 3.6, 3.11, 3.14, 3.19. 3.22)

‘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 BHSC has been and continues to do to get recruitment right and ensure its recruitment process is fair, efficient and effective (ERs 3.6, 3.11, 3.14, 3.19. 3.22).

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. 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.

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TITLE	RECRUITMENT and SELECTION POLICY
Summary	This policy provides guidance to all staff involved in the recruitment and selection process.
Purpose	The purpose of this policy is to ensure that the Trust recruits the highest calibre of staff and that equality of opportunity is an integral part of all recruitment practice.
Operational Date	June 2010
Review Date	June 2013
Version Number	V 6
Supersedes Previous	N/A
Director Responsible	Maria Mallon
Lead Author	Gladys McGibban
Lead Author, Position	Senior HR Manager, Recruitment & Selection
Department / Service Group	Human Resources, McKinney House, Musgrave Park Hospital Site, Stockmans Lane, Belfast.
Contact Details	Gladys.McGibban@belfasttrust.hscni.net Tel: 028 9053 6151
Reference Number	TP0427/10
Supersedes	N/A

The Trust **Recruitment and Selection Policy and Procedures** have been developed to support these principles and are designed to ensure all appointments are made in accordance with merit principle.



Recent Recruitment Campaign for Theatre Nurses

Intrinsic to the Recruitment and Selection Policy 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. In line with duties under the equality legislation (Section 75 of the Northern Ireland Act 1998), Targeting Social Need Initiative, Disability discrimination and the Human Rights Act 1998, an initial screening exercise is carried out to ascertain if the policy should be subject to a full impact assessment, and if necessary this is carried out.

Internally the Recruitment and Selection Policy is circulated widely to Trust Senior Managers and Trade Unions for comments. The policy is also approved by the Workforce Policy Sub-Committee

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. 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 a **detailed set of operating principles** which clearly define each stage of the recruitment journey outlining **key areas of responsibility, turnaround times and escalation routes**. All stages of the process are documented and are subject to ongoing review via fortnightly meetings with Head of RSSC and Head of Retained Recruitment to identify key issues and hotspots and a regional Shared Service Customer Forum.

The Trust has also agreed a set of **Key Performance Indicators** to ensure service delivery is to a high standard. All the KPIs for each stage of the process have been set out as measureable targets. E.g., Time to fill through whole process: achieved within 60-70 working days. Minimum 95% achieved within 65days. This is further broken down to its component parts and to take account of different pathways e.g. Access NI requirements. The full suite of KPIs and operating principles can be made available. As this is a relatively new arrangement with shared services, the reporting of performance is currently being tested. (ER 1.9)

The KPIs are reviewed on a regular basis and applicable updates made to reflect further transitions to Shared Services, future service stabilisation and resourcing levels impact.

3. We work to clearly defined processes

> We clearly define Roles and Responsibilities

- The expectations and responsibilities of Recruiting Managers, the retained Recruitment Service and the Regional Recruitment Shared Service Centre at each stage of the recruitment process have been clearly identified to ensure the process is fair, efficient and effective.

> We ensure managers are prepared and have the capabilities to recruit fairly, efficiently and effectively.

- Managers are expected to follow the procedures laid out in preparing for recruitment (including considering the working patterns of the role aligned to the needs of the team) and to review the job description and personal specification to attract the right person with the right skills and experience.

> We ensure all Recruitment Panels have the required Composition

- Recruitment panels should be appropriately balanced in terms of gender and community background to support the principles of fairness and equality.

> We ensure all statutory requirements are met by Equal Opportunities Monitoring

- The Trust monitors equality information to ensure all statutory requirements are met and to assess the fairness and effectiveness of recruitment and selection processes.

> We adhere to the guidelines as set out in the 'Safer Recruitment and Employment Practices and Monitoring' framework

- An over-arching **safe practice framework** has been designed and developed by Human Resources to ensure key safety checks and processes are completed, recorded and monitored. The framework sets out the associated audit and governance requirements.

Training

- Panel members complete mandatory training every 3 years
- **212 staff completed full training** in 2014/15
- **66 staff completed values based recruitment training**

Statistics

- **2198** job requisitions processed
- **899** recruitment exercises Trustwide
- **22,984** applications received

Outcome from audit against in house standards completed 2014/15

Scope of Audit	Audit Findings
Pre-Employment Checklist	94% (33 of 35 files)
Proof of Identity	94% (33 of 35 files)
Proof of Qualifications	92% (22 of 24 files)
Work Permit	100% (1 of 1 file)
Visa	100% (1 of 1 file)
SVG Checks	93% (26 of 28 files)
Professional Registration	94% (15 of 16 files)
Alert Letter	86% (30 of 35 files)
References	94% (33 of 35 files)
OH Fit Report	94% (32 of 34 files)

Overall Compliance Rate: 94%

** The findings are gathered at a point in time and any gaps are subsequently picked up and addressed*

Scope of Audit	Audit Findings
Recruitment Alert Notices received updated on Recruit and Monitor	100%
Overall Compliance Rate	100%

Complaints

The Trust receives a range of queries regarding the Recruitment process including candidates who are requesting information on why they may not have been shortlisted, clarification on delays in the process and specific queries relating to criteria etc. In the main these can be addressed effectively and efficiently by the Retained Recruitment Team and the Recruitment Shared Service Centre. However, there may be occasions where the formal complaints process is initiated and this is responded to in line with the Recruitment Policy.

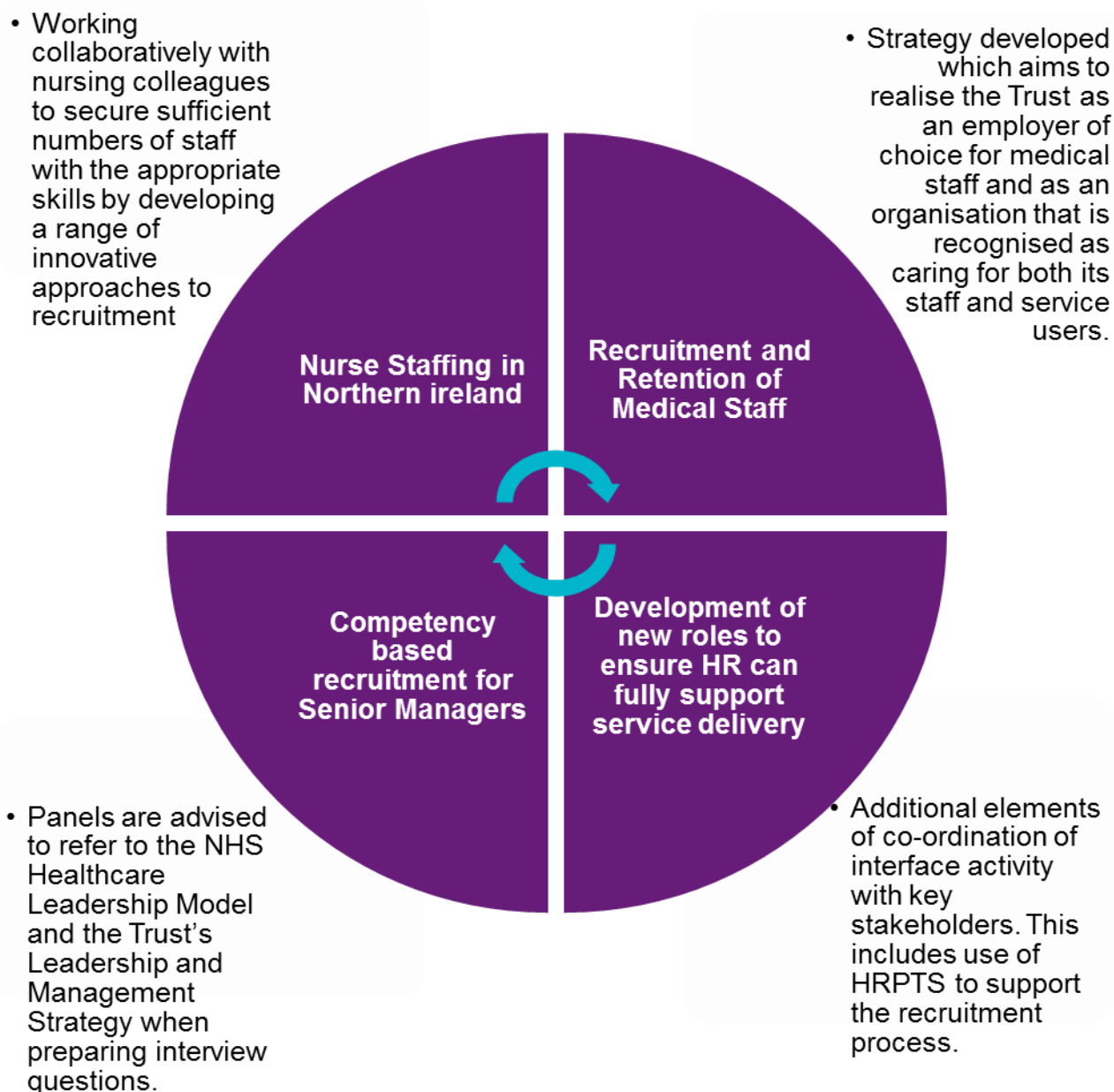
During the reference period April 2014 to December 2015;

- 21 formal complaints were investigated and responded to
- 1 Industrial Tribunal was initiated, however the complainant subsequently withdrew
- 1 Information Commissioner Complaint investigated and responded to

Agreed timescales for complaints management with RSSC:

- Oral Complaints – issue letter confirming oral response within 10 working days
- Written Complaints – full response within 20 working days.
- Acknowledgement in writing within 2 working days of date of receipt of complaint

We work with Directorates to support service delivery by implementing a strategic view to recruitment for example recruiting difficult to recruit posts such as Doctors, Nurses.



Staff Turnover Rate

Over the last 3 years the Trust turnover rate has been reducing with more and more staff, remaining in their post once recruited.

Period	Trust Turn Over Rate
1 st October 2012 to 30 th September 2013	5.48%
1 st October 2013 to 30 th September 2014	4.88%
1 st October 2014 to 30 th September 2015	4.86%

We have recently piloted Value Based Recruitment and plan to extend VBR as part of the Trust's commitment to become a value – based employer.

The VBR Policy and the associated Procedures, aim to reinforce the Trust's Vision and Values as these are the underpinning principles of our organisation. Belfast Trust Values underpin everything we do – how we work with each other and deliver our service. Our values define the overall culture of our organisation and ultimately support our commitment to provide safe, effective, and compassionate and person centered care. Belfast Trust values describe the character of our Trust and our aspirations going forward. The aim is for staff to be familiar with the values, embed these values in everything we do and be committed to “living these values”.

The Trust values are:

- Treating everyone with respect and dignity
- Displaying openness and trust
- Being leading edge
- Maximising learning and development
- Being accountable



The Trust is committed to Value Based Recruitment for all posts, to ensure we attract and select employees whose personal values and behaviours align with the values of the Trust, to support effective team working and deliver excellent patient care and experience.

Summary of Strategies, Actions and Practices:

In summary we offer the following evidence to support our belief that the recruitment processes deployed by the Trust are fair, efficient and effective.

1. Top managers can explain the strategic importance of recruitment and selection to the Trust.
2. Top management can describe the specific actions that the Trust has taken and are currently taking to support a strategic approach to recruitment and selection.
3. Top management recognises the benefits to the organisation of recruiting people with different skills, experiences and ambitions and this is reflected in their actions.
4. Top management can describe the policies and strategies the Trust has put in place to make sure that recruitment and selection is fair.

5. The Trust has clear recruitment priorities which link to its aims and objectives (e.g. normative nursing levels).
6. There are clear links between each posted offered and the aims and objectives of the Trust.
7. The organisation's approach to recruitment is consistent as a result of the consistent application of policies, processes and procedures.
8. The organisation can show that people are recruited and selected in line with the organisation's approach to recruitment and selection.
9. Feedback from candidates (successful and unsuccessful) confirms that they experience the process as being fair, efficient and effective.
10. The Trust can show that it recruits and selects people using the most cost – effective methods and sources.
11. The Trust can show that communication with candidates is timely and constructive.
12. The Trust makes sure that people with recruitment and selection responsibilities have the knowledge and skills they need to recruit people fairly, efficiently and effectively.
13. The Trust can show how its strategic approach to recruitment and selection has contributed to its performance.
14. Top management understand the overall costs and benefits of recruitment and selection and its impact on the organisation's performance.
15. Continuous improvement based on feedback, review and commitment to best practice is at the heart of the Trust's approach to recruitment and selection.

A work – life balance strategy meets the needs of its people – (ERs 3.8, 3.13, 3.16, 3.21, 3.24, and 3.29).

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 **78%** of the workforce are female and **42%** are part – time, supporting the efforts of employees to positively split and balance their time and energy between work and the other important aspects of their lives is self - evident. We have found that what we offer staff in terms of supporting work – life balance has been a major factor in staff deciding to join the Trust, and it is an equally important reason staff offer when asked as to 'why they have stayed with the Trust?' (ERs 3.8 and 3.13).

For the BHSCT work/life balance initiatives are not just nice additions to the range of benefits we offer 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 – (ERs 3.8 and 3.13).

The wide range of work life balance initiatives the Trust offers is a reflection of the diversity of the Trust's workforce while also being an acknowledgment that one-size-does not necessarily benefit either staff or the organisation. We have worked hard to customise our approach to work – life balance to reflect the performance needs of the Trust and the personal needs of our staff- (ERs 3.8 and 3.13).

The Trust does not view its work – life balance initiatives as being “soft” offerings and the Trust believes that its work/life initiatives can be analysed and evaluated and viewed as a valuable component of the total pay package it offers staff. Our 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. (ERs 3.8 and 3.13).

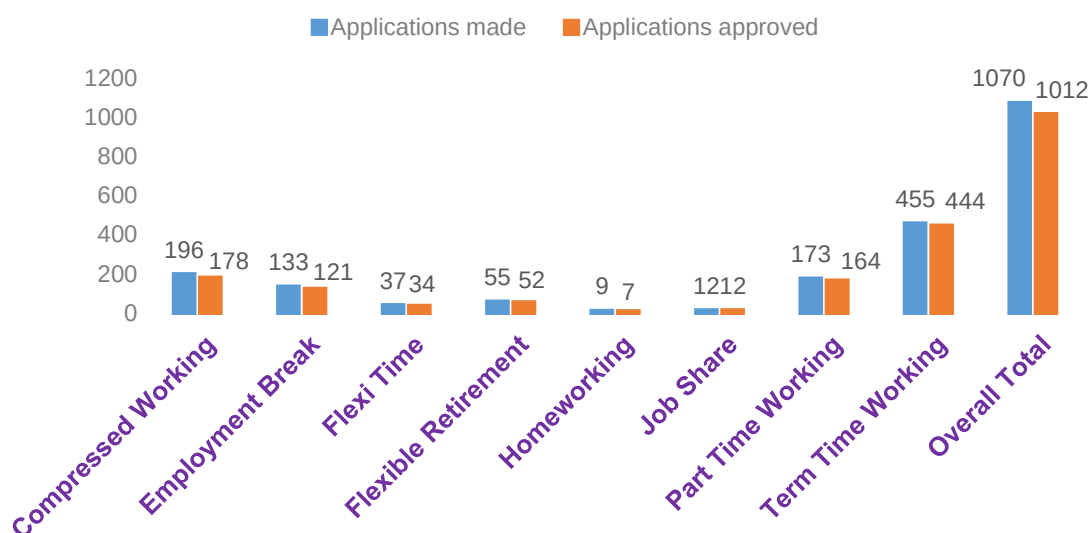
The following is an overview of the strategies, approaches we have put in place and the actions we have taken to support work – life balance which meets the needs of the organisation and its people in a way which allows the Trust to deliver on its vision, mission and priorities.

We offer a wide range of 'Flexible Working' arrangements.

The Trust's Workforce is 78% female and 42% part time and many staff have caring responsibilities. The provision of family friendly policies and other initiatives enable staff to balance both work and home commitments and improve their working lives.

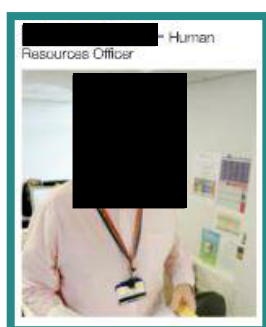
Eight work-life balance policies have been in place since 2009. A total number of **1070** work life balance applications were made from 01 April 2014 to 31 March 2015 with a **95%** approval rate.

Flexible Working Applications 2014/15

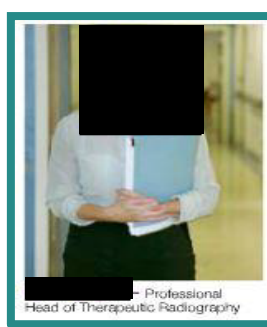


We work hard and effectively at promoting our Flexible Working and Work Life Balance Policies.

The Trust promotes its Flexible Working and Work Life Balance Policies via Corporate Welcome, the 'b well' website, the Hub, Links magazine, health fairs, the HR Drop in Clinics and at a wide range of training programmes for managers and staff.



"I really feel I have found the right balance and am in no doubt that I am more productive both in work and at home."



"There was some scepticism at first, but with buy in from all parties it can work"

We offer a Summer Scheme

The Trust Summer Scheme is an '**Improving Working Lives initiative**' to support staff with childcare needs, enabling them to better balance their home / work-life and reduce their child-minding worries over the summer months. A multi-disciplinary team lead by Human Resources and comprising Finance, Health and Safety, Social Services and Transport is in place to oversee the running of the scheme. This group meets twice per year. During the 2015 scheme we accommodated **342** children and **207** families. Due to the ongoing demand for places we will now open a 4th location for the Summer Scheme in 2016



Following an evaluation of the 2015 scheme results indicate that:-

- 93% described the Summer Scheme as flexible in supporting their child care needs
- 90% saw a benefit in their Work-Life Balance as annual leave was used for holidays instead of child care
- 93% confirmed they were able to work their usual hours during the Summer Scheme operation.

We have launched 'B Well'

As part of our **Health and Wellbeing at Work Action Plan for 2015/16**, the Trust launched "**b well**" in November 2015, a new focus on wellbeing of staff. The action plan is designed, delivered and monitored by the **b well** Steering Group and Sub Group – chaired by a Non-Executive Director and made up of representatives from Occupational Health, HR, Health and Safety, Health Improvement, Chaplaincy, TU side and Directorate leads and external representatives from the Public Health Agency and Business in the Community - (ERs 1.3, 1.5).

The 2015/16 Action Plan for the first time introduced 2 annual wellbeing themes. For 2015/16 these are Smoking Cessation and Weight Loss / Physical Activity. A range of initiatives and events have been organised to support these themes including:

- **£ for lb. weight loss challenge**
- **Take a Break pilot**
- **Sit Less Move More Campaign**
- **Smoke Free Training Pack for managers**

As part of b well, the Trust launched two new wellbeing tools for staff in November 2015:

The b well website: www.bwellbelfast.hscni.net

As many of our staff do not have access to a PC during the course of their working day, this new site allows staff to access wellbeing advice and support from their own home or their smart phone any time of day or night.



The 'b well' app:



The app contains some unique content that has been composed by a variety of Belfast Trust health professionals including Occupational Health Physiotherapists, Clinical Psychologists, Cognitive Behaviour Therapists and the Health Improvement Team. – (ERs 5.6, 5.9, 5.10, 5.17).

The content includes over 50 videos and over 90 minutes of voice recordings. The app allows busy Belfast Trust staff the opportunity to dip in and out of resources at a time that is convenient to them – (ERs 3.2, 3.3, 3.4)

The app is available to download for free on iPhones, Android and Windows devices by searching for “b well Belfast Trust” on your phone's app store.

The tools were launched to over 150 staff at an official launch event in the Grove Wellbeing centre on 4th November 2015. The event was opened by a keynote address from [REDACTED], Deputy Chief Medical Officer and staff had the opportunity to visit over 20 exhibitor stalls from both internal and external suppliers such as Slims Healthy Kitchen, Linwoods Health Foods, Belfast Bikes and Active Belfast



Feedback from the event was excellent and future health fairs will now be delivered in the same format. The **b well** team have been invited as key exhibitors to the Surgery and Specialist Services Admin and Clerical Staff Conference in January 2016 and the **Nursing and Midwifery Celebration Event in March 2016**



A health and wellbeing survey will be launched in early 2016 across the Trust to measure for the first time the wellbeing of our staff. This will be based on the Office of National Statistics Wellbeing survey and will allow us to benchmark staff wellbeing with other sectors and employers across the UK. Results will allow us to deliver bespoke wellbeing interventions within Directorates

Employers for Childcare

We also offer the Employers for Childcare Discount card and Home Approved Care.



Translink Taxsmart Scheme

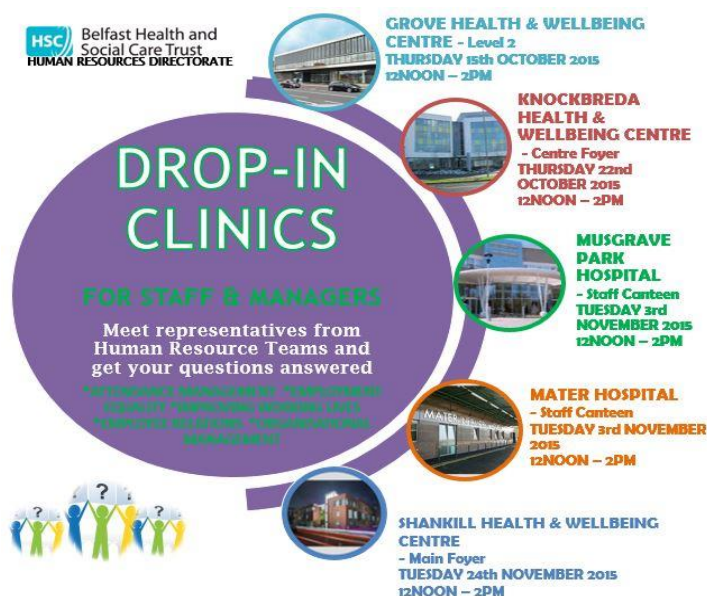


We operate a Cycle to Work Scheme

Since its inception **3000 staff** have purchased a bicycle through the cycle to work scheme



HSC Belfast Health and Social Care Trust
HUMAN RESOURCES DIRECTORATE



HR Drop In Clinics took place across a range of Trust venues throughout 2015 aimed at making HR more accessible to both staff and managers, providing information on a variety of HR policies and employment related queries. Over **200** managers and staff have attended to date



We offer 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 would be interested in finding out more information on maternity related issues and regulations. The aim of the session is to provide information to staff on Maternity Leave Entitlements, Salaries and Wages Entitlements, Work Life Balance Policies, Health at Work during pregnancy and Health Promotion for Expectant Mothers.



Since April 2014, **90** staff have attended a maternity information session.

We offer a Domestic Abuse Support Service



The 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.

The Domestic Abuse Support Service provides staff with information about the range of options available to them. It also acts as a link service in providing information and helpful contact for external organisations and agencies that have experience in the area of domestic abuse. Managers will use all Trust policies to support staff including agreeing flexible working, leave when appropriate or arranging salary advances

The countdown is on – Smoke Free in March 2016

Becoming smoke free on the 9th March, will send out the message that Belfast Trust is committed to protecting and promoting the health of our patients, staff and all who visit

Chief Executive [REDACTED] said *'Moving towards becoming smoke free sites will apply to all staff, patients and visitors and will ensure a healthier, safer and cleaner environment for all and better healthcare outcomes for our patients'*

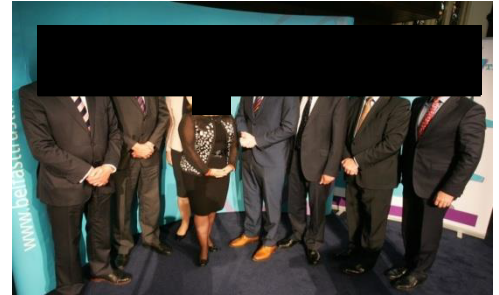


Knowledge and information are shared (ERs 7.5, 7.10, 7.14).

Improving Internal Communication and Knowledge and Information Sharing:

We continue to improve Internal Communication and how we have a dialogue with our staff and service users/public.

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 **400 '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 2013 we have designed and managed almost **250 major corporate events** including three Leadership Conferences – in collaboration with HR Directorate – and **three Chairman's Awards ceremonies**.

The **Leadership Conference** is the key event in the annual corporate calendar and the vehicle whereby the Chief Executive sets out his organisational direction to 250 of his most senior leaders – both clinical and administrative – throughout the Trust.

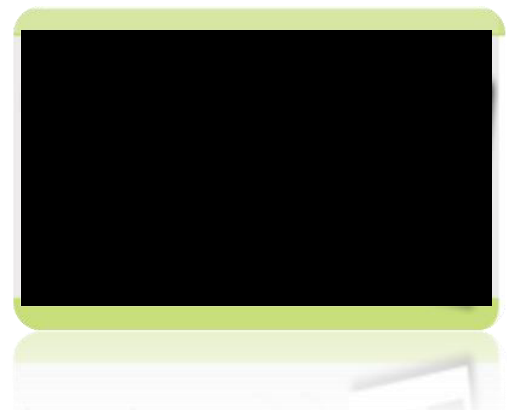
We have extended the number of on – line channels we use to communicate with staff and others.

Since Belfast Trust was last accredited, internal communication – at both a strategic (organisational) and local (directorate/service levels) has flourished.

The Trust through its Corporate Communication Team in partnership with staff across the Trust has worked to improve and modernise the Trust's approach to internal and external communication as part of the Trust's commitment to be open and inclusive.

In 2013 Belfast Trust had 5 online channels available to communicate with both staff and service users. Today it has eight and they are:

- YouTube
- Twitter
- Facebook
- Trust website
- The Hub (intranet)
- Good News for Today Blog
- Yammer (our internal social network), and
- info@.



In addition, the **Chief Executive posts a monthly personal perspective called, ‘The Way I See It’**, and an electronic recap of the monthly ‘Chief Executive’s Briefing’ is circulated to all staff via the Hub.



Belfast Health and
Social Care Trust

Team Brief



In this month's briefing:

6 October 2015

- [Chief Executive's Update](#)
- [Smoke Free Sites Update](#)

- [What's happening in your world today?](#)

The Hub has been a great success and goes from strength to strength



The Trust has invested heavily to ensure that the above online channels as corporate communication tools have a consistently a broad span and reach. For instance, in 2013 we 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 total.

Significantly, in 2016 the Hub gets **45,000 visits per day**. Clearly, the demand from staff is there and the Hub is responding to that need.

Our On – Line traffic continues to grow:

Belfast Trust's website averages **100,000** website visits each month compared with 2013 when it averaged **60,000**. This is testimony to the variety of information – both corporate and service user – which is available on the website. In addition, the site has undergone significant work to enable compliance with sensory disability guidance.

Belfast Trust's Twitter account has over **3000 followers** and today is averaging **200 new followers a month**. This is growth in the right direction.



Facebook is on a similar trajectory with over **5000 followers** – second only to Western Trust's Facebook page in terms of reach within the Health and Social Care family. 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 us 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.



YouTube is a channel that we are in the early stages of developing, but see great potential for sharing information and engaging with both service users and staff. In 2015, we removed network restrictions to enable staff to view YouTube videos across our network, and embed YouTube clips on their hub pages. We currently have 61 videos on our YouTube channel, with 33 subscribers and 18, 295 views to date.



We are increasingly using Digital Channels

Digital channels – both internal and external – are being used more and more by staff and service users as a means of feeding back to the organisation. It is now commonplace for the Trust to receive **compliments** through social media, and by contrast, careful monitoring allows the organisation to pick up and act on **criticism**.

Corporate Communication forwards all compliments or criticism 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 is accompanied by an invitation to staff to post a comment. There is 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 '**Good News for Today Blog**'

Proactive in Promoting Our Good News

Noting the absence of a notice board facility and responding to a communications gap for communicating light and interesting Trust-themes, two new channels were established in 2014 and 2015.

'**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. While still in its infancy the blog is getting traffic and 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. While it too early to evaluate, nonetheless, evidence suggests the blog is responding to a gap in our corporate communication and that is, communicating the 'softer' side of the organisation but a side which is not at all irrelevant. 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



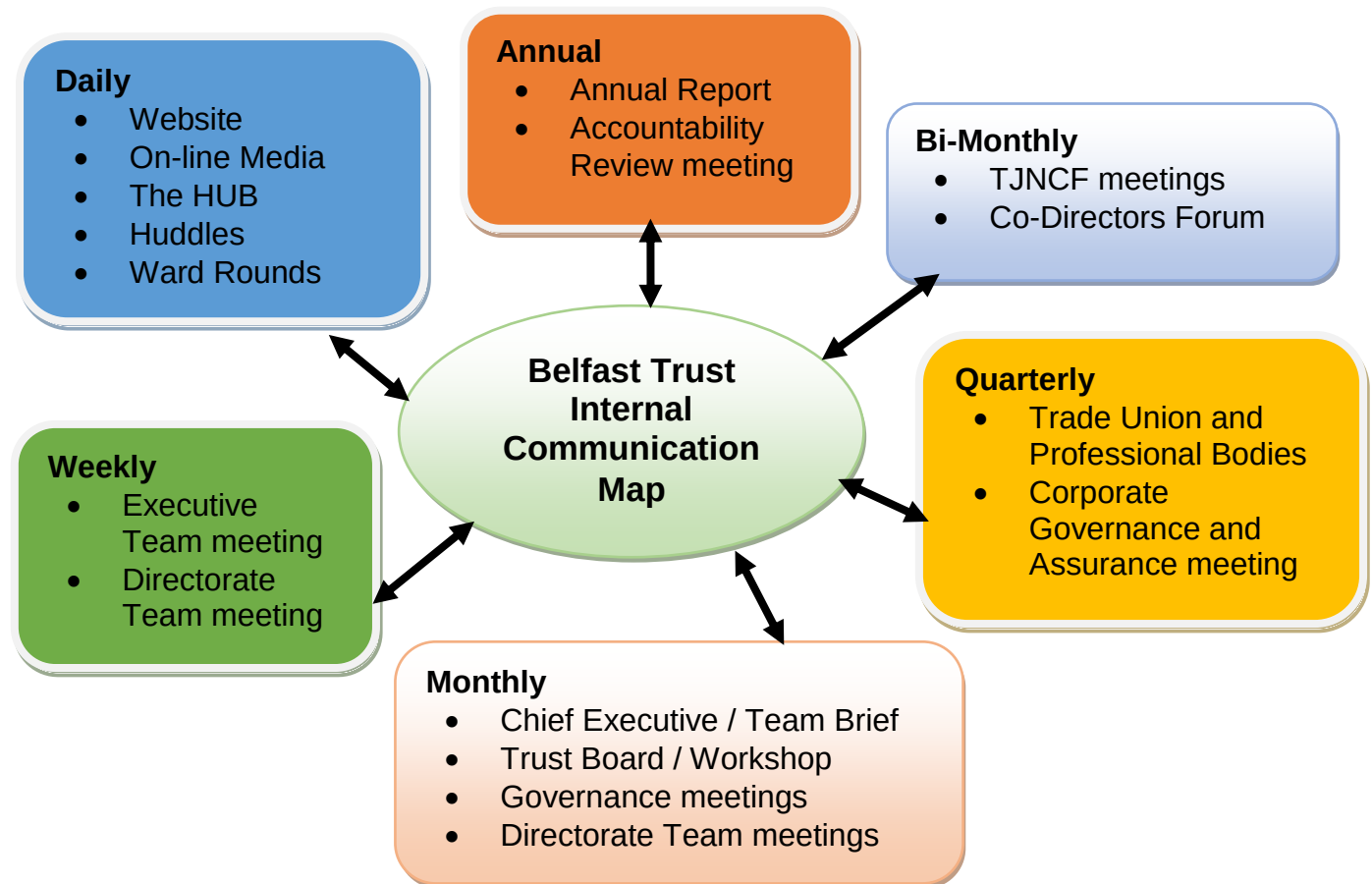
Links' is the Trust's quarterly online magazine but with a difference. It is deliberately kept light and free from policy, again responding to the softer side of life in Belfast Trust and to help embody a collegiate feel through the organisation. Each quarter it is distributed to every inbox in the Trust across all sites and in every building. It is also posted on the Hub and is distributed through the Trust's social media channels. However, in recognition of the importance of a collegiate approach and being cognisant of the challenges presented by those hard to reach groups throughout the organisation who do not work online, 3000 hardcopies are distributed to pre-determined destinations so all staff have an equal opportunity to read about what is going on in Belfast Trust. 'Links' has garnered much praise in its first year and its distribution and content is currently being evaluated in anticipation of markedly raising its hardcopy distribution.



Yammer is an internal and secure social network available to staff for work-related documents. Like Facebook, staff can establish closed groups which afford them the privacy to discuss policy in formation and in essence cut down on email traffic. Those who use it recommend it and certainly find its numerous applications useful. However, it is fair to say that Yammer has not had significant uptake and an evaluation is ongoing to determine how best to move it forward

Belfast Trust Internal Communication Map

In addition good effective communication continues to be essential to the Trust. A summary of the internal Communication Map is set out overleaf:



- **Chief Executive Briefing:** the Chief Executive monthly briefing is led by the Chief Executive, supported by Directors and is attended by Tier 4 Managers and above.

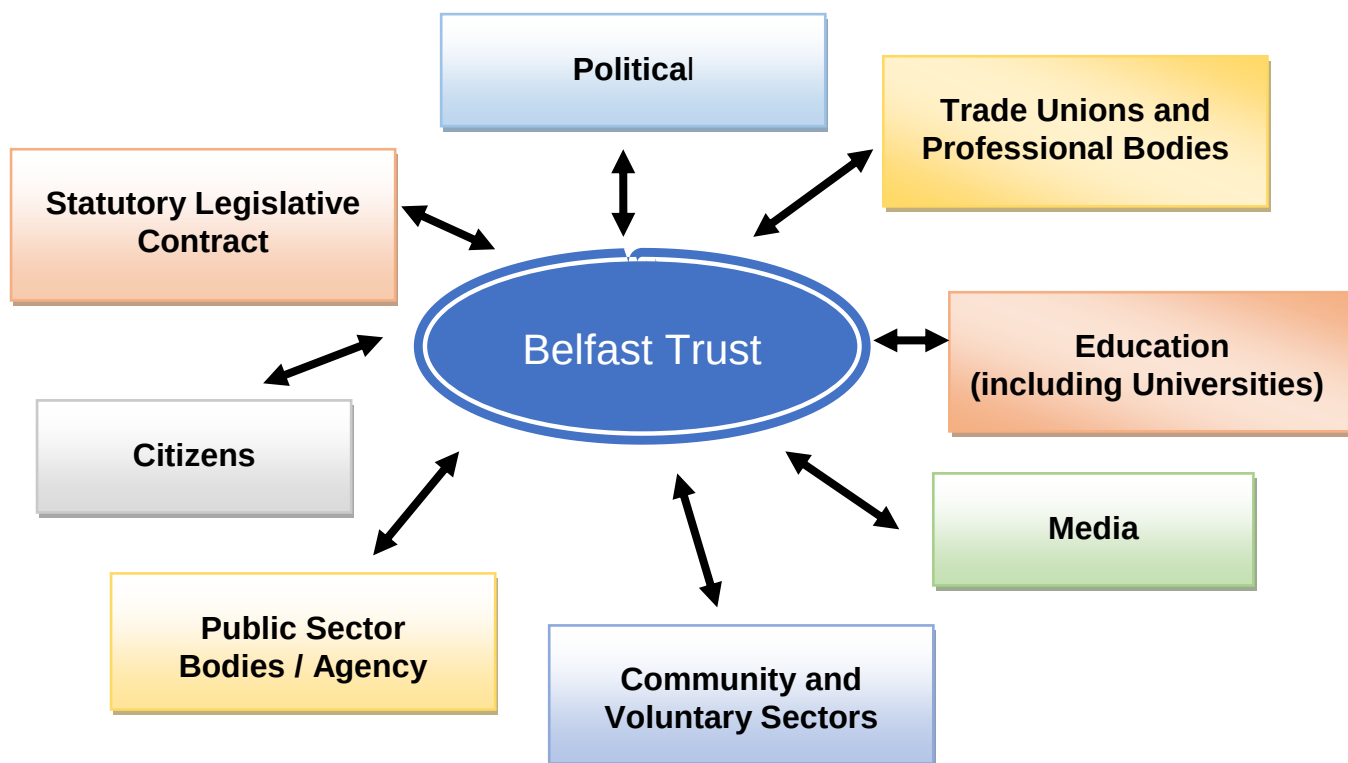
This briefing is followed by a written Chief Executive Brief within 24 hours which is distributed to Managers who are responsible to ensure this information is circulated and made available to all staff, including those who do not have access to email.

- **Executive Team Meeting:** held weekly (every Wednesday morning).
- **Directorate Meetings:** each Directorate have Senior Management meetings on either a weekly or fortnightly basis and have in place formal communication processes and arrangements within the Directorate.
- **Team Meetings** are a core component of the communication arrangements within the Trust. It is expected that Team meetings are held at regular intervals (it is recommended at least one per month).
- **One to One Meetings** are held at regular intervals (it is recommended at least once a month) within the service to middle management arrangements.

Belfast Trust External Communication Map

The external environment within which the Trust delivers health and social care is one of high scrutiny and expectation. An example of the External Communication Networks / Contacts is demonstrated below:-

Belfast Trust External Communication Map



Examples of CONTINUOUS Performance IMPROVEMENT

While on site Assessors will discover that: -

An ethos of Continuous Performance Improvement is now an integrated and embedded part of the Trust's culture

Each year the Trust sets out a range of continuous improvement projects in its

Continuous Improvement Plan. This plan provides the focus for driving further and sustained improvements in quality and safety for all the users of our services. Patient experience is included as a key element, recognising the importance of patient experience in driving change and assuring quality. The plan builds on previous and on-going work and incorporates Regional Public Health Agency targets. It is developed based on the key priorities identified during an **annual Quality Improvement Plan** workshop and is circulated in draft format to the Safety Quality Steering Group for comment and a proposed final version is submitted to Executive Team for approval.



The objectives of the Continuous Improvement plan are to reduce avoidable or unintentional harm to patients/clients, to learn from patients/clients' experience and to continually improve the healthcare we provide to patients and clients. For each primary driver **an outcome measure** has been clearly identified together with a lead director, support team and Project Lead.

We have established a range of initiatives to DELIVER CHANGE, Modernisation and Transformation.

This **Continuous Improvement Plan** recognises the key role of directorates in driving/monitoring change and the need for clinical champions at local level. **Key cross cutting groups** that already exist will support directorates in delivering this plan (ERs 5.5, 5.6, 5.9, 5.16, 5.10, 5.17, 7.5, 7.10, 7.14) These include:-

- **Safety Improvement Team (SIT)**
- **Medicines Management Group (MMG)**
- **Infection Prevention Control Team (IPCT)**
- **HCAI Improvement Team. (HCAI IT)**
- **IMPact**
- **Hyponatraemia Taskforce**
- **Peri-operative Improvement Team (POIT)**
- **Equality, Engagement and Experience Steering Group (EEEG)**
- **liP Local Implementation Teams (LIT Teams)**

We continue to innovate in line with the Trust's core value of 'being leading edge'.

safetember



The Trust held its inaugural 'Safetember' campaign in 2015, an encouragement for teams working across the Belfast Trust to have renewed focus on the safety and quality of all our services. The Trust promoted Safety and Quality Improvement through:

- Talks by Inspirational Speakers
- Patient and Staff Listening Days
- Poster Zones located across the Trust display team's improvement work

Daisy, the Safetember Mascot



We continue to succeed in translating external strategic drivers into practice through the development and deployment frameworks, processes and practices.



Quality 2020

The Trust is currently embedding the Quality 2020, Quality Attributes Framework, by developing and delivering programmes designed to meet our staff's needs. This includes an introductory awareness training programme, targeted at all staff and an accredited programme to support Change Leads and Managers in formal quality improvement projects, through the use of virtual learning opportunities, mentoring and interactive monthly workshops.

We continue to ensure accountability is an integral part of our approach to performance management and continuous performance improvement.

Internal/Trust targets or areas for improvement are monitored within the Assurance and Performance Framework by SQSG (Safety and Quality Steering Group) or the Learning from Experience Steering Group (LfESG) or the Equality, Engagement and Experience Steering Group (EEEG). The Steering Groups will report to the Assurance Group and Assurance Committee of the Trust. Progress against the plan is also reported to the Trust Board. Progress against regional targets for improvement are also reported through to the Public Health Authority.

We continue to engage with staff to identify and involve staff in taking forward improvement opportunities across the Trust.

'Let's Talk Trust' is about purposefully engaging with staff to establish what the Belfast Trust stands for; what is at our core and what sets it apart – in other words, our corporate identity. We asked staff "What type of organisation do you want Belfast Trust to be?" Overall there were approximately 1,400 questionnaires returned which amounted to 2,000 statements. The words and phrases offered by staff informed a short list of six suggested straplines put together by the Directorate Leads to the Executive Team.

The Chief Executive announced the outcome of Let's Talk Trust:

'Caring, Supporting, Improving, Together'

Caring was the most commonly used word from the staff submissions and focuses our attention on the fact that our core role is caring for patients, clients/staff

Supporting staff to provide safe, quality services, supporting our patients and clients in their recovery and at home, supporting one another to be the best we can be.

Improving means we are striving to be the best in all that we do, to be a forward-looking organisation, delivering the best care, being open and honest, progressive in our thinking, enabling and empowering our patients, clients and staff

Together demonstrates the clear and strong message from our staff - we will achieve our goals through working together and in partnership

The Chief Executive concluded with one final statement from a respondent:

“After Let’s Talk Trust we need “Let’s Act Trust.” That is the challenge”

Let’s Talk is now a useful way of engaging staff in an ongoing dialogue – see some other examples below:



We continue to involve, engage with, share with service users – their experiences and outcomes are the ultimate measure of how we are performing.

The Trust is engaged in regular activity to measure patient experience and recognises the effective involvement of patients and carers is central to the delivery of quality care and can lead to improvements in the experience of using services.

We 'look up' and 'we look out' to learn, share, benchmark and in line with one of our strategic objectives we are keen to work with our partners and stakeholders in the pursuit of the shared aim of improvement the health and wellbeing of the population we service and reduce health and social inequalities.



For example the Trust recognises the expertise and resources available from the Safety Forum and the opportunities for collaborative working with other Trusts in delivering this plan.

Driving up quality is now fully embedded into our planning, accountability and reporting processes.

In addition to the **Annual Quality Report**, Directorates met at the start of the year to identify **improvement priorities** for the coming period. These discussions take place at Senior Management Team level (and in some cases after discussion with wider teams) supported by on-going Director / Co-Director one to one meetings. For example, Adult Social & Primary Care Directorate has established a Modernisation Board (with TUS involvement) through which requests are made for project support and through which projects are monitored and reviewed.



Priority areas by Directorate and the types of support required in 2015 include:

- **Adult Social & Primary Care** – better working across mental health and learning disabilities, and closer working with HR to reduce sickness absence
- **Specialist Hospitals & Women's Health** – cross Directorate work to look at patient reform (as part of the Impact process)
- **Surgery & Specialist Services** – work with Unscheduled Care to drive productivity and efficiency in this Directorate's use of theatres

Unscheduled Care – work with Surgery & Specialist Services to deliver better drugs management in pharmacy; engagement with other Directorates to drive improvements in discharge process and planning (involving AHPS, social work and clinicians)

- **Unscheduled Care:** Support for AHP and Admin service reviews, theatre utilisation, and improvement work in Anaesthetics (agreeing rules of engagement as part of rostering implementation)

We continue to use technology to modernise and reform how we deliver services to our staff.

Examples of Service Improvement



HRPTS refers to the new on-line HR, Payroll, Travel and Subsistence ICT system which all health and social care organisations in Northern Ireland have recently moved to. This system has transformed daily transactional activities, enabling managers to work directly on the system and replacing many paper based processes within HR & Finance.

On **1 November 2013** the Trust went live with HRPTS. As a result of the commitment and leadership to HRPTS the Trust has continued to deploy the system across the organisation and currently have achieved **80% deployment** to staff across the Trust with **70+%** of those actively using the system, and over **10,000+ HRPTS** training places have been accessed by staff.

To fully support the implementation of HRPTS, a number of HR staff were **seconded** from their post into a “Functional Specialist Lead” role whereby they had responsibility for implementation in specific areas of HR, including, Recruitment, Learning and Development, There is a high level of engagement across the Trust and subsequently, we have achieved **the highest level of deployment** across the Region with numbers logging onto the system continuing to increase. In terms of **Benefits Realisation we have moved to an electronic payslip** and this has generated savings of £50 – 60k per year.

% Of Staff now using HRPTS

Directorate	Accessed HRPTS	% Accessed HRPTS
ADULT SOCIAL & PRIMARY CARE (final stages)	2712	28%
CHIEF EXECUTIVE	15	100%
CHILDRENS COMMUNITY SERVICES	1050	90%
CORPORATE COMMUNICATIONS	25	84%
FINANCE	437	96%
HUMAN RESOURCES	132	100%
MEDICAL	323	95%
NURSING & USER EXPERIENCE *including PCSS	2037	70%
PERFORMANCE, PLAN & INFO	588	98%
SPECIALIST HOSP, WOMENS HEALTH	2442	83%
SURGERY & SPECIALIST SERVICE	2721	80%
UNSCHEDULED AND ACUTE CARE	3848	70%
Grand Total in organisation	16328	70%

The table sets out the deployment of HRPTS across the Trust. As stated, almost 17,000 staff in the Trust have accessed HRPTS

The Belfast Trust continues to have the highest % roll out of HRPTS across the region, and this is why:

- ✓ 7 Functional Specialists across all HR areas appointed to work regionally on HRPTS system development
- ✓ Development of streamlined and consolidated processes to drive efficiency and support managers
- ✓ Regular engagement with HR staff through briefings, team meetings and full training roll out for all core users
- ✓ Development of Core and End User training manuals, How to Guides and step by step guides



Since the introduction of IMPACT there have been a number of improvements to the way that our services across the Trust are delivered. These are captured in the thank you message from Dr. Cathy Jack, Medical Director

Message from [REDACTED] ImPACT Chair

The winter period continues to be challenging for everyone working in healthcare. We treat 200 more patients a month. This puts additional pressure on the system and at times we have had to open theatre recovery and some day wards. Many of our staff have come in while off duty to help out and do extra shifts or doubled up on call rotas to ensure patients received a daily consultant review.

It is a privilege to work alongside and support the staff recognising that this is one of the most challenging times of the year.

It is also important to reflect on the improvements that within six months of ImPACT have already been achieved despite the additional workload:

- 1 100% of patients with a fracture of neck of femur are being treated within the NICE guidance.
- 2 Weekend discharges have increased with five of the ten large unscheduled care specialties discharging more patients at the weekend compared with only one in September 2014.
- 3 Length of stay has fallen in respiratory and general surgery reflecting changing approaches to unscheduled care.

Looking forward to spring and summer it has been recognised that work needs to start on the elective care process. More information will be provided about this in next months update!

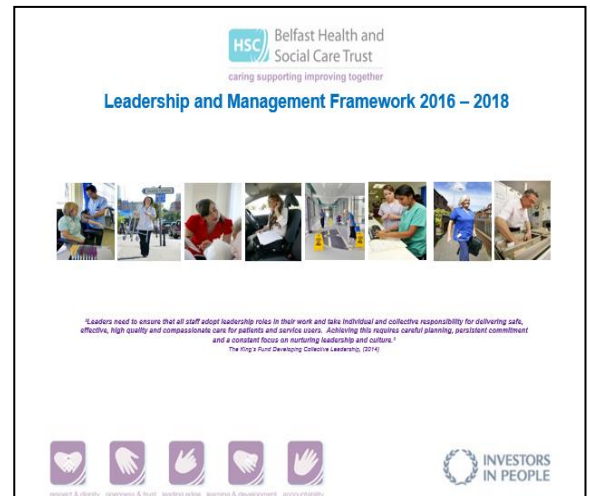
Finally I would like to pay tribute to all our fantastic staff who have worked so hard over these winter months to ensure that patients receive ongoing quality, safe and effective care.

Thanks to all of you

[REDACTED]

Theme 4

Leading and Managing People Effectively



Extended Framework

- **Leadership and Management Strategy**
- **Coaching**
- Managers are clear about the capabilities they need (now and in the future) to effectively lead manage and develop people and they believe and can describe how they are effective in these three areas **(ERs 4.1, 4.2, 5.1)**
- People know what effective managers should be doing and believe their leaders and managers are effective **(ERs 4.3. 5.3.)**
- Leadership and management strategy is linked to the business strategy, and takes account of external good practice **(ERs 4.7)**
- Managers are role models of value based leadership, teamwork and knowledge sharing **(ERs 5.5, 5.6, 5.9, 5.10, 5.16 and 5.17.)**
- Coaching is part of the culture **(ERs 5.8, 5.12, 5.19, and 5.25.)**

The Leadership and Management Strategy links to the business strategy and takes account of external good practice - ERs 4.7

Managers are clear about the capabilities they need to lead, manage and develop people and the organisation has plans in place to make sure managers have these capabilities - ERs 4.1, 4.2.

People know what effective managers should be doing - ERs 4.3

At the heart of the IIP Standard/Framework is the belief that great leadership and management are essential ingredients for high performance. At the heart of the recently launched BHSCT Organisational Development Framework 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 and aim** respectively *‘to be a world leader in the provision of health and social care’* and *‘recognised as a high performing organisation’* and *‘to be recognised internationally but especially by the people of Northern Ireland, as a leader for excellence in health and social care’*.

The Trust’s **Leadership and Management Framework (LMF) 2016 – 18**, which builds on the Trust’s Leadership and Management Strategy: -

- Clearly **defines** what Leadership and Management means to the Trust as well as clearly setting out the Trust’s commitment to developing collective leadership - **(ERs 4.1, 4.4)**.
- Sets out the **capabilities (knowledge, skills and behaviours)** managers need to lead, manage and develop people effectively in line with our Values - **(ER 4.1, 5.5, 5.6)**.
- Sets out **the plans and priorities** the Trust has in place to make sure all leaders and managers have the necessary competencies - **(ER 4.1)**.
- Is aligned with the Corporate Plan and Organisational Development Framework and takes account of external good practice - **(ER 4.7)**.
- Outlines the **broad range of** innovative, cost effective and tailored approaches the Trust will use to support leadership and management development - **(ERs 4.1)**.
- Sets **organisational priorities** for leadership/management development. **(ER 4.1)**.

The Trust clearly sets out its aim of developing a culture which is underpinned by **collective leadership as one of its strategic priority areas within** its recently launched Organisational Development Framework

*‘The three organisational development priorities have been identified through discussions with our staff, patients and clients; from the findings of Francis, Berwick, Donaldson and others, and through **leading-edge research** by The King’s Fund, Dalton, the Institute for Healthcare Improvement and West et al’ - (BHSCT OD Strategy)- **(ER 4.7)**.*

The Trust’s OD Strategy clearly sets out the Trust’s commitment *‘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’ - (BHSCT OD Strategy) - **(ER 4.7)**.*

A **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 – 2018 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. The Trust has also published and disseminated this Charter separately'*. 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 - **ERs 4.1, 4.2 and 4.3**.

In compiling this storyboard in relation to this particular theme it quickly became evident that the scale of investment the Trust makes in leadership and management development is substantial. The following section attempts to provide an overview of the scale and range of leadership and management development programmes the Trust offers to its staff, development which is designed to ensure all leaders and managers have the capabilities to be effective, which includes being a positive role model for the organisation's core values, team working and knowledge sharing. These development programmes are also designed to ensure the Trust is developing its next generation of leaders and managers as part of its succession and business continuity strategy

In-house management skills and personal effectiveness training

Range of courses such as

- Performance management
- Appraiser skills
- Managing Change
- Communication skills.

During 2014 - 15 alone the Trust's HR Team delivered **3391** hours of training to **5729** participants on leadership/ management related subject areas.

The next section provides an overview of some of the key L&M Development Programmes the Trust has invested in over the last year.

1. The **'Living Leadership – Leading with Care Programme'** for Tier 3 & 4 post holders
2. **'Developing our People today for tomorrow'** –succession planning for Tier 4 & 5 managers
3. **'Safety & Quality –Delivering Improvement'**– multi professional in house programme to bring about improvements in service
4. **'CLIME'** (Clinicians Leading Improving & Managing Effectively) Programme for New Consultants
5. **'STEP'**– developing medical leadership and quality improvement in Specialist Trainees

6. 'ILM 5 Managing for Success programme'. In house development aimed at Middle level managers
7. 'ILM Level 3 Programme'- In-house management skills and personal effectiveness training
8. 'Engaging Managers' –improving skills & behaviours for employee engagement
9. 'Management Self Service (MSS)' - skills training for HRPTS for all line managers.
10. *Developing Improvement Leaders – For Managers who are leading or hoping to lead improvements in service delivery.*
11. We had an 'Annual Leadership Conference' for Senior Managers and Clinicians.

1. 'Living Leadership - Leading with Care Programme'

For Whom:

For Tier 3 & 4 post holders i.e. Co - directors, Associate Medical Directors, Senior Managers, Clinical Directors



Programme Objectives

- To align with the Trust Leadership Strategy and deliver on organisation imperatives
- Support achievement of the primary leadership goal, that is, 'continual and never ending improvement of the well-being of patients and other service users' (Berwick, 2013)
- Develop senior leadership capacity (individually & collectively , building on the Trust's community of leaders) to adapt, & broaden leadership styles & enhance behaviours in pursuit of the above goal
- Use leading edge, innovative & proven methodologies which balance high challenge & support, increasing personal ownership & positive role modelling

Numbers Attending

136 Senior Leaders/ Managers (38 Tier 3 and 98 Tier 4) have completed or are currently participating on 'Leading with Care' a programme which focuses on **the following learning outcomes**

Hoped for Outcomes/Success Criteria:

- Enhanced personal & professional effectiveness
- Improved capacity for collective leadership
- Extended strategic understanding of HSC & greater capability to deal with complexity & deliver transformational change
- Greater service connectivity
- Improved ability to exploit the opportunities provided operationally and strategically by ICT

Good Practice Pointers

All participants who participate in the 'Leading with Care' programme undergo **360 feedback** and personal diagnostics using **Firo B**. All undergo a practical **Collective challenge** related to the programme objective.

2. 'Developing our People Today for Tomorrow...Succession Planning the Belfast Way

For Whom:

Tier 4 and 5 Managers



Programme Objectives

The main objectives of the Belfast Trust Succession Planning approach is to:

- Develop a comprehensive, sustainable, individually tailored, transparent and effective talent and management system;
- Increase the pool and potential of Managers who are ready and able to take up Tier 4 or 3 positions;
- Realise the Leadership Strategy and position of the Trust, through effective leadership, to achieve high standards of care and performance within Health and Social Care;
- Improve support and opportunities for development for Senior Leaders.

Numbers Attending

- The initiative launched in October 2012 with one **cohort of 11 aspiring Co-Directors** who completed their programme in October 2014 with attendance at a post initiative evaluation event.
- In addition we have had **two concurrent cohorts of 22 aspiring Senior Managers** who commenced in two groups during 2013 & completed March 2015.

Good Practice Pointers

Application on to the initiative required the completion of a newly designed **integrated leadership competency report, based on the NHS Leadership framework** and requiring applicants to provide evidence of leadership capability and potential, including a statement of verification and support from their line manager.

Thereafter the provision of 360 degree feedback enabled the development of a bespoke PDP whilst collectively; the diagnostic outputs were also used to inform a menu of flexible development interventions. Thus what emerged were some core learning requirements but also an individual approach to meeting specific talent development.

3. Safety & Quality – Delivering Improvement



For Whom:

Middle and senior level staff from all professions

Programme Objectives

- To align with the Trust's OD and Quality & Safety strategy and deliver on organisational imperatives
- Support achievement of the primary goal that is 'continual and never ending improvement of the well-being of patients and other service users (Berwick, 2013)
- Align with level 2 of Quality 2020 Attributes framework
- Develop in house capacity and capability individually and collectively across all Directorates to apply quality improvement science and technology to bring about measureable improvements in patient and client care.
- Develop an in house network of Quality improvement champions who will share their knowledge and expertise and proactively support other Trust colleagues in their pursuit of quality improvement

Numbers Attending

60 participants commenced the programme in December 2015 and will complete in June 2016 with the showcasing of the group's finished improvement projects

Hoped for Outcomes/Success Criteria:

- Enhanced knowledge and understanding of quality improvement science and application within health and social care
- Improved capacity for implementation of quality improvement and achievement of measureable goals within complex and challenging service environments
- Greater service connectivity internally and externally within a culture of best practice, expertise and support in the pursuit of providing the best care
- Enhanced team working and communication skills
- Enhanced understanding of human factors and their relevance to safety in health and social care

Good Practice Pointers

Designed in house by Patient Safety Leads and Human Resources, the programme consists of monthly interactive workshops, online learning through the Institute of Health Improvement Open School, and drop in clinics for mentoring support.

Participants are required to partake in an improvement project in small multi professional groups.

4. 'CLIME (Clinicians Leading Improving & Managing Effectively) Programme

For Whom:

New Medical Consultants - All new Consultants are given the opportunity to participate in the CLIME Programme to support them in their new roles and their transition from a training grade post.

Programme Objectives

- *To provide opportunities for participants to become more familiar with the Trust's strategic direction and priorities for the future;*
- *To gain insight into how the Trust functions, including its structures, funding arrangements and programmes for change and to explore the leadership role of Doctors within it;*
- *To identify the nature of the Clinical Governance agenda facing the Trust and its implications for roles, responsibilities and team working into the future;*
- *To explore ways of improving the current structures in management to enhance the organisation and delivery of services.*

Numbers Attending

Since 2014, **4** programmes have been delivered with **81** participants

Hoped for Outcomes/Success Criteria:

To increase participant awareness of the key external/internal issues facing Clinicians, their services and the organisation over the next few years. The programme will also be an opportunity to meet and learn from other newly appointed Consultant staff

Good Practice Pointers

All new Consultants are given the opportunity to participate in the CLIME to support them in their new roles and their transition from a training grade post. The programme is supported through input by the Chief Executive, Medical Director, Director of Nursing and User Experience as well as other key senior post holders in the Trust and external organisations.

5. STEP

For Whom:

Specialist Medical Trainees



Programme Objectives

The **Specialist Trainees Engaged in leadership Programme** (STEP) aims to ensure trainees in the Belfast Trust are aware of the opportunities available to develop skills in **medical leadership**.

STEP offers basic training in quality improvement with each trainee undertaking a quality improvement or patient safety initiative in their clinical areas.

Numbers Attending

Over **100** doctors have been trained in STEP across emergency, ophthalmology services, mental health, children's services, dermatology, neurosurgery, anaesthetics and laboratory services and are enthusiastic advocates for shared Quality Improvement learning.

Hoped for Outcomes/Success Criteria:

The programme aims to ensure trainees in the Belfast Trust are aware of the opportunities available to develop skills in medical leadership and career progression. It supports the personal development of doctors in their journey towards a consultant post.

Good Practice Pointers

The **STEP** project started as a Quality Improvement Programme for Specialist Medical Trainees and was established in 2013/4 by [REDACTED] and [REDACTED], initially in paediatrics but has subsequently expanded across the Trust and has now evolved into the 'STEP' programme

The voluntary programme has supported doctors to develop their **Quality Improvement and Leadership skills** whilst undertaking specific improvement projects in their services.

6. ILM Level 5 Award Managing for Success

For Whom:

Middle Managers



Programme Objectives

- To Provide middle managers with awareness around the key strategic priorities for the Trust
- To equip participants with the skills, knowledge and attributes to build personal and team resilience
- To develop problem solving and decision making techniques
- To develop a culture of innovation and creative thinking while understanding concepts of organisational change

Numbers Attending

It launched in 2014 and to date **70 managers** have undertaken the programme that is also delivered by the Learning and Development team in HR.

Hoped for Outcomes/Success Criteria:

Evaluation of this programme has suggested that the skills and knowledge developed on this programme have supported Middle Managers in their role. The programme reflects the organisational priorities and the needs identified by middle and senior managers, whilst at the same time supporting managers identify a service improvement project within their team, and ensuring they have the necessary skills to lead, motivate and inspire

Good Practice Pointers

This new programme was designed and delivered by the Learning and Development team in HR ***in response to learning needs identified by middle level managers.***



7. ILM Level 3 Award in Leadership & Management



For Whom:

Current or potential first line managers.

Programme Objectives

The **ILM Level 3 Award in Leadership & Management** aims to give practising or potential first line managers the foundation for their formal development in this role. The qualification does this by developing basic management skills and assisting participants in gaining the basic knowledge required at this level.

Numbers Attending

115 people have undertaken the programme from April 2013 – Sept 2015

Hoped for Outcomes/Success Criteria:

- Develop the core knowledge, skills and behaviours to undertake their role with increased confidence and competence
- Gain knowledge of a range of tools and techniques to aid problem solving, personal leadership and creating an environment where teams and individuals 'give of their best'
- Understand the differences they observe in people and know how to increase trust and respect across the team.
- Understand and Implement strategic thinking and translate it into operational objectives
- Understand bench marking and assess against best practice
- Lead with confidence while understanding the Trust culture and ethics
- Be confident in preparing and delivering professional presentations
- Have confidence in managing projects in the Belfast Trust

Good Practice Pointers

This accredited programme is delivered in-house through Human Resources which is further evidence of the increasing internal capacity to provide leadership and management development programmes for staff.



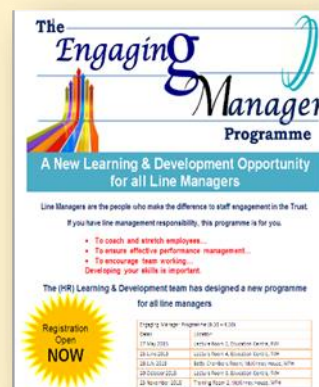
8. The Engaging Manager

For Whom:

Middle Managers

Programme Objectives

As part of our Employee Engagement Framework staff identified the characteristics of an engaging Line Manager. This programme is based on the key behaviours to support engagement, and also some of the suggestions as identified by our staff.



At the end of the course, participants will be able to:

- *Demonstrate awareness and importance of Trust Values, including explicit expectations for behaviours*
- *Understand leadership and its impact on performance and motivation*
- *Learn specific management behaviours and skills to enhance employee engagement*
- *Develop coaching skills to enhance employee engagement*
- *Identify performance management systems for ensuring accountability against behaviours.*

Numbers Attending

35 *Managers have completed the programme, launched in 2015 and the Programme continues to be promoted in support of our Employee engagement framework.*

Hoped for Outcomes/Success Criteria:

The 'Engaging Manager' programme is a new one-day programme delivered by the Learning and Development team. The programme is designed to support managers improve their skills and behaviours for enhancing employee engagement.

Good Practice Pointers

Links to the recommendations of the Mac Leod Report and the output from Employee Engagement Workshop with Trust staff Bands 1 – 7.

Is a direct response to one of the recommendations of the Employee Engagement Framework

Evidence based – research demonstrates that Line Managers are the major determinant of employee engagement, therefore, it is imperative that our Line Managers have the necessary skills and behaviours to ensure and improve engagement

9. Developing Improvement Leaders

For Whom:

This is a half day programme aimed at Managers who are leading or hoping to lead improvements in service delivery.

Programme Objectives

Equip service managers with the knowledge and skills to;

- lead service improvement projects from initial scoping through to implementation and sustainable reform
- define and agree a service improvement project using key improvement models and frameworks
- use a range of key improvement methodologies to measure and analyse service issues;
- apply a range of tools and techniques to undertake and implement a service improvement project
- integrate service improvement into their performance management arrangements to ensure sustainability and continuous improvement;
- develop good practice and innovation across the Trust
- develop a culture of improvement practice which will enable individuals to reflect on their contribution and effectiveness

Numbers Attending

103 participants have attended since April 2015.

Hoped for Outcomes/Success Criteria:

Underpinning knowledge of support service improvement

Good Practice Pointers

The aim of this programme is to build on the Trust's capacity to deliver on Continuous Improvement and therefore embed our core Trust Value of **Being Leading Edge**

Participants have been offered follow-up consultancy and support to enable and progress projects in their area

Further improvement to the programme has been undertaken this year (2015) to incorporate HSC Quality 2020, and to focus on raising staff awareness of their role in quality improvement to meet the Quality Attributes at level 1 across the Trust



10. HRPTS Manager Self Service (MSS) skills training



For Whom:

Line Managers

Programme Objectives

Equip service managers with the knowledge and skills to;

- Log in and out of the HRPTS system securely
- Check 'Personal Details' & 'Equality' information are correct in system and learn how to amend as required
- View their Organisational Management Structure to ensure the relevant staff are reporting correctly
- Set up "Substitution" for both planned and unplanned absences
- Complete the Work Schedules (Work Pattern) for the staff within their Organisation Unit
- Input data to system as required to process staff personnel & finance related requests and procedures; attendance/absence, recruitment, study, travel, expenses, etc.

Numbers Attending

A total of **3,806** managers has been trained across a range of HRPTS related Manager (MSS) access and functional use programmes;

1679 – MSS - Day one activities (684 in 13/14, 971 in 14/15, and 24 this year to date)

1637 – MSS Master classes in ER Processing, OM Awareness, Sickness Absence, Timesheets

438 – MSS Reporting (new in 2015 period only)

Hoped for Outcomes/Success Criteria:

- Compliant use of the HRPTS system across the Trust
- Benefits realisation of the HRPTS for individual members of staff, teams, services, directorates and the Trust.

Good Practice Pointers

This programme supported hands-on deployment of the HRPTS system to those Trust staff with Manager level access.

The programme enables the critical involvement of Managers to attain compliant use of the system to achieve benefits realisation of HRPTS in Trust.

The sessions were delivered in ICT suite training rooms, with participants having facilitator led and supported direct access to the system, while undertaking practical exercises in use of system for core management activity and tasks.

11.

HSC Belfast Health and Social Care Trust

2015

LEADERSHIP CONFERENCE

Spires Conference Centre, Belfast | 24 APRIL



PUTTING PATIENTS AND CLIENTS FIRST EACH TIME – EVERY TIME

The Belfast Health and Social Care Trust held the **2015 Leadership Conference** on Friday 24th April in the Spires Centre, Belfast City Centre. The theme of the Conference emphasised the importance of **PUTTING PATIENTS AND CLIENTS FIRST EACH TIME – EVERY TIME**. The Conference was officially opened by the Trust Chairman [REDACTED]. [REDACTED], Chief Executive, delivered the address and highlighted the key themes of the Conference. This speech was followed by the Minister for Health, Social Services and Public Safety, [REDACTED].



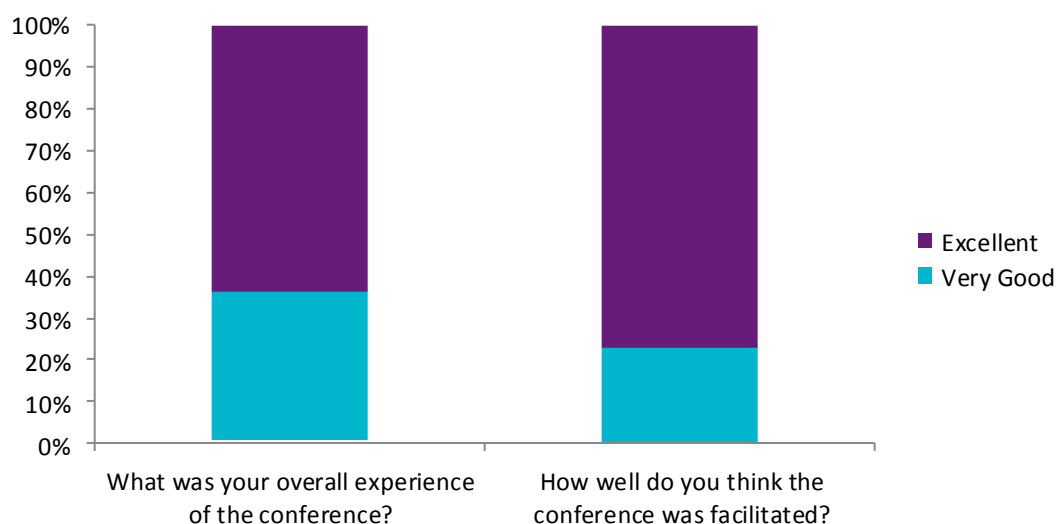
Following this introduction, which was based on the importance of **LEADING WITH CARE**, the key note address by [REDACTED] and plenary discussion emphasised the importance of the **COLLECTIVE POWER** of the staff in the Trust in providing care and services. A full day closed with an interactive session on the significance of **the POWER OF ONE** by the Conference Facilitator, [REDACTED].

Speakers and organisers of the Leadership Conference

L-R

[REDACTED], [REDACTED], [REDACTED], [REDACTED]
[REDACTED], [REDACTED], [REDACTED], [REDACTED]
and [REDACTED]

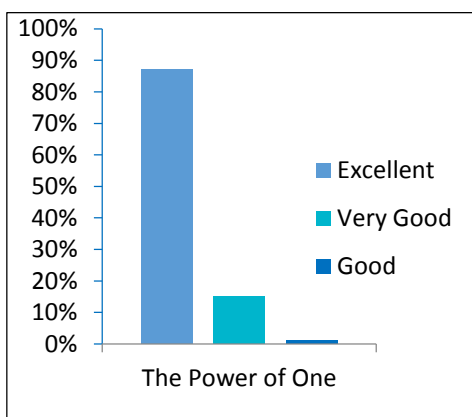
Over **200** Senior Management and Clinical staff attended this year's event.



Professor [REDACTED] presented on the **COLLECTIVE POWER** that is both inherent within the Trust and needed to support a culture which allows for on-going growth and service improvement. Professor West focused on the key elements of developing Collective Leadership for Cultural Change.



[REDACTED] presented a highly interactive session which both challenged and encouraged participants to consider the role an individual plays in the creation of a successful organisation, the **POWER OF ONE**.



Evaluation of Leadership & Management Development Programmes (ERs 9.1, 9.2, 9.3, 9.4, 9.5)

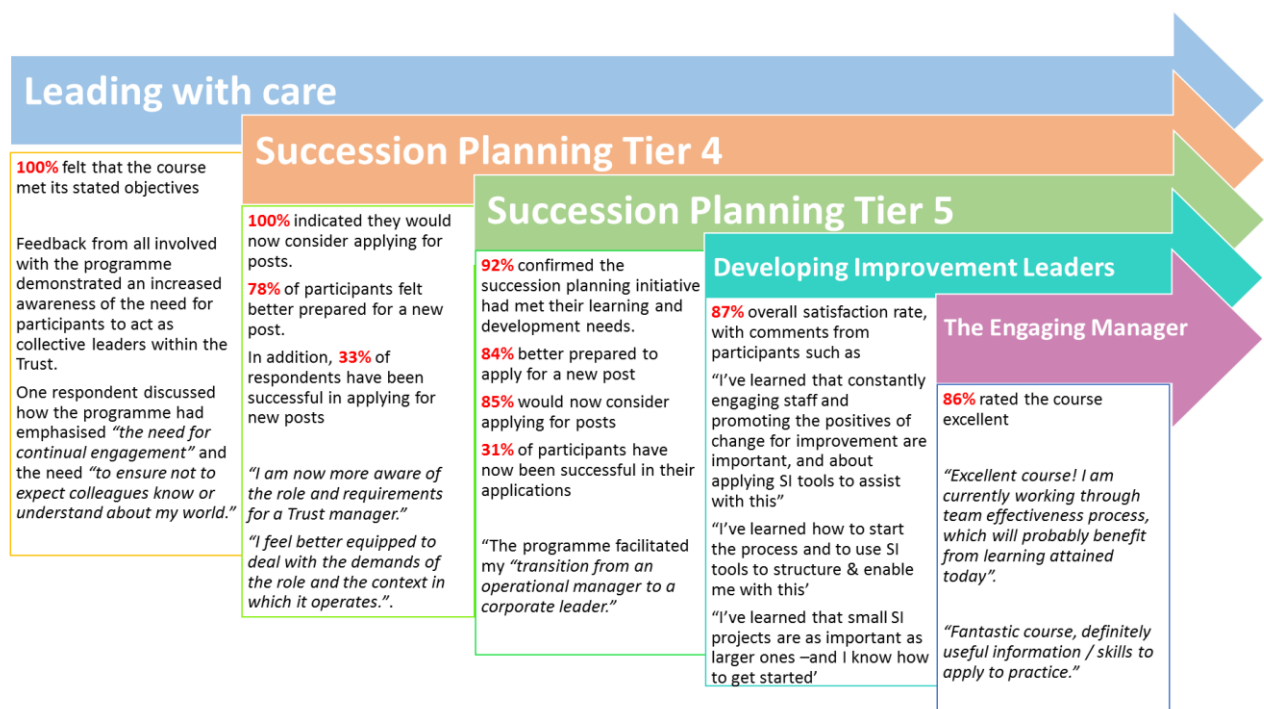
In line with the **Trust's Evaluation Framework** we have conducted reviews and evaluations of **all** L&M Development Programmes to assess the effectiveness of our actions and to identify areas for further improvement. **'Reactionnaire surveys'** are completed at the end of all programme modules to capture immediate participant responses and learning.

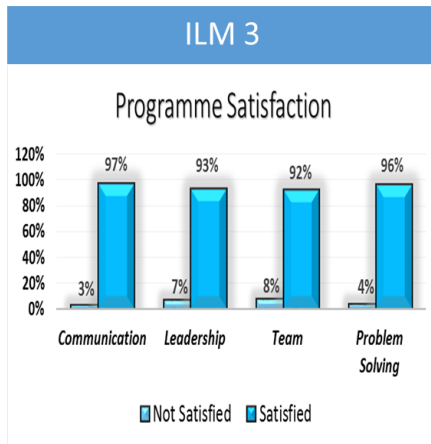
In addition follow up **evaluation surveys** targeted at **Levels 3 and 4 of Kirkpatrick's Evaluation Model** have been carried out for major Trust programmes to identify transfer of learning to the workplace and the extent to which such transfer impacts on enhanced performance at individual, team and organisational levels.

The following diagrams below provide a snapshot of some of the outcomes and evaluation reports on Leadership Development programme as listed below:

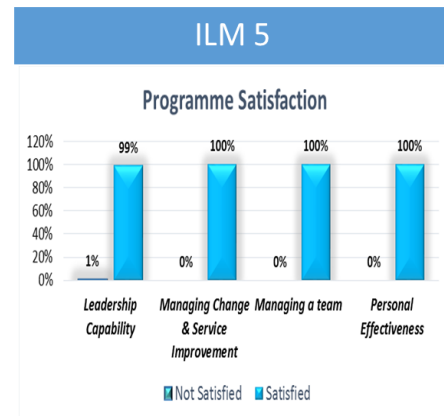
- ✓ Leading With Care Programme
- ✓ Succession Planning
- ✓ CLIME
- ✓ The Engaging Manager Programme
- ✓ STEP Programme
- ✓ ILM Level 3 Introduction to Management
- ✓ ILM Level 5 Managing for Success
- ✓ Developing Improvement Leaders
- ✓ HRPTS
- ✓ Coaching

It is through the effective development of our leaders and managers that the Trust is able to meet our statutory obligations as well as the requirements of our strategic objectives as stated through such plans as the Corporate Management Plan, New Directions and MORE (Maximising Outcomes, Resources and Efficiencies).





- 95% average programme satisfaction
“My relationship with my managers is better because I now have a better understanding of the work that goes on away from the front line staff”
- “Problem solving module completely changed control documentation and attending meetings”



- 100% average programme satisfaction for ILM Level 5
- “I have a more realistic understanding of the availability of resources” and “I am more aware of the need to plan management, importance of bringing people on side”
- “I am speaking at a national Heart Failure meeting in October, where all GPs, Heart Failure consultants and nurses have been invited. I would not have had the confidence to do this prior to my professional presentation assessment.
- “I have increased my ability to manage a successful service improvement initiative within my department”

CLIME

91% of participants felt that the programme met its stated objectives

“It has been valuable to hear the focus & drive from top down and how those of us on the floor can begin to digest this and work alongside it for the greater good”.

“This programme was helpful to connect with other new faces in the Trust across specialities.”

STEP

96% of participants felt the programme provided them with knowledge not covered elsewhere in their training

“This changed my view of the Trust management structure and gave me a very positive view for my personal role and the future of the Trust”.

“Encouraged me to mature in my clinical career - the topics covered were completely new to me, I had never given service planning, networking or effective lobbying much thought until STEP. It was useful to work through a patient

safety project under the expert guidance of the faculty”.

Coaching

85% indicated programme was useful

97% felt aims & objectives were met

91% subject covered were useful and practical and applicable

“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”

HRPTS (Manager self service skills training)

90% Satisfaction across a range of programmes

A total of 3,806 managers have been trained across a range of HRPTS related Manager (MSS) access and functional use programmes

Coaching is part of the Trust's Culture – ERs 5.8, 5.12, 5.19 and 5.25.

When the assessment team visit the Trust, they may well find that different staff and different staff groups use terms to describe similar processes, e.g. coaching, mentoring, supervising, preceptorship, staff development, performance reviews etc.

In compiling this section of the storyboard the Trust views the IIP definition of coaching and mentoring as being helpful and while the Trust has in its own Coaching Framework suggested its own definitions of coaching etc., feedback from staff has suggested that different staff groups are more familiar with terms that are more commonly used in their own professional settings and work groups

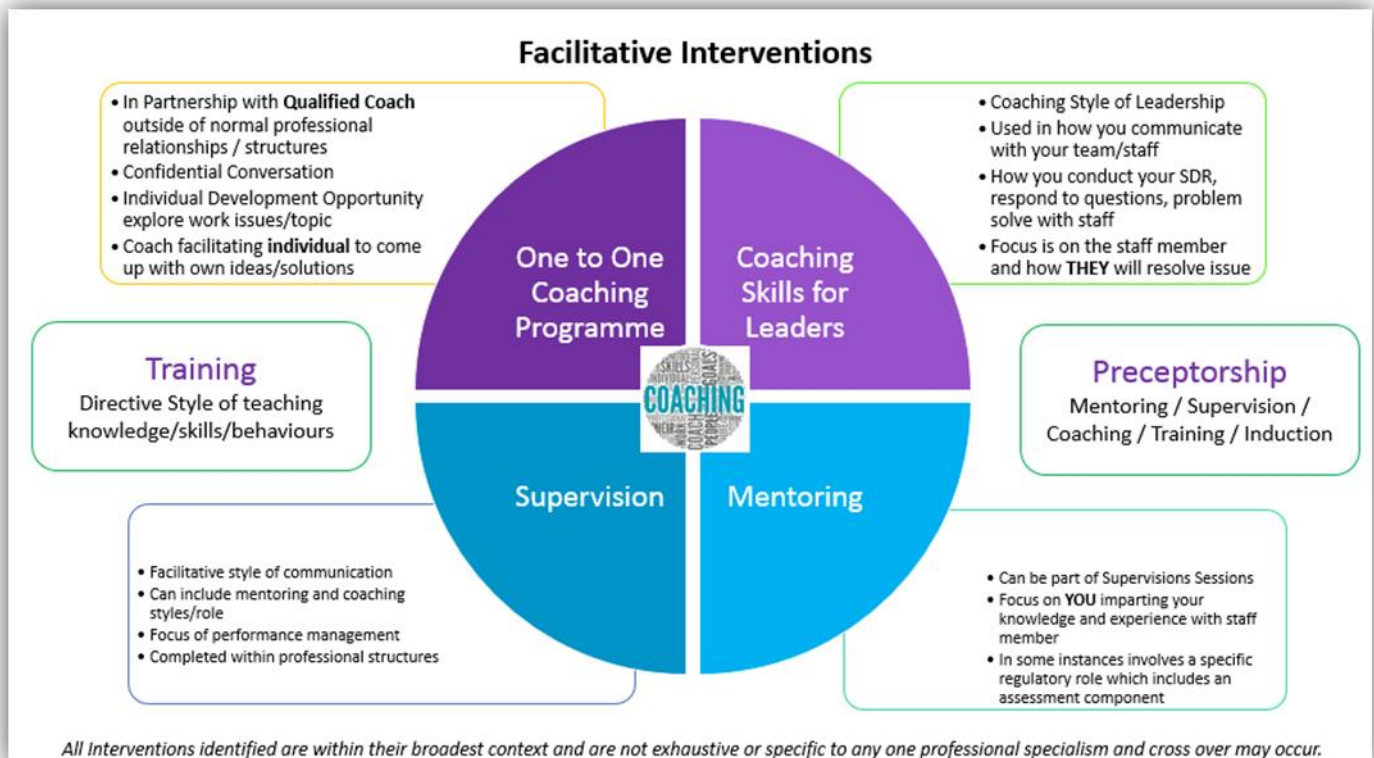
Coaching is a formal or informal process that aims to improve the performance, learning and development of an individual through effective questioning and feedback. It is about helping people to think issues through for themselves, rather than about telling or instructing someone (IIP Definition of Coaching).

Mentoring means advice and guidance offered by a more experienced person to develop an individual's potential. Mentoring tends to focus on long – term career goals rather than immediate performance issues, and may be carried out by people from within or outside of the organisation, but not usually by an individual's line manager (IIP Definition of Mentoring).

The Trust has a wide and varied **range of facilitative forms of learning interventions** and all fall within the broadest definition and characteristics of 'coaching' as stated in the Coaching Framework, which was launched in September 2012.

- It is essentially a non-directive form of development.
- It focuses on improving performance and developing individuals' skills.
- Personal issues may be discussed but the emphasis is on performance at work.
- Coaching activities have both organisational and individual goals.
- It provides people with feedback on both their strengths and their weaknesses.
- It is a skilled activity, which should be delivered by people who are trained to do so.

The diagram below identifies some of the facilitative interventions that are utilised by a variety of different health professional groupings and some cross over does occur. As this list of interventions is not an exhaustive one, the following is a demonstration of some of these interventions from specific health professional specialisms.



Mentoring / Supervision within Corporate, Nursing, Social Work and Medical specialisms

Coaching is often linked with **mentoring** and the Trust's **supporting approaches** are closely aligned with a **coaching approach** as they are primarily learning relationships, which help people to take charge of their own development and to achieve valuable results in performance improvement.

Within Corporate Learning & Development **mentoring** is offered through a number of different programmes such as 'The Intern Scheme', **54** Interns from 2014 & 2015 intake have been allocated a mentor to support them during their year's placement. Through Supporting Belfast initiative where approximately 22 members of staff were trained to ILM L3 in 'supporting learners by mentoring in the workplace' qualification.

The **Nursing Practice Education Team** within Nursing and User Experience Directorate facilitates **mentors** to ensure the highest quality student learning environment through the delivery of the **NMC Approved Mentor Preparation Programme** and ongoing annual update activities.

Figures for **Practice Education team activity** between Sept 2014 and Sept 2015

Total number of available mentor/ sign of mentors available to facilitate students	1686
Total Number of placements facilitated for Nursing and Midwifery students	2291
Mentors who have completed Nursing and Midwifery Mentor Preparation Programmes	126
Sign off mentors who completed the progression to sign off process	36
Total Number of Annual Updates delivered	1760

Within **Social Work** there are a range of initiatives linked to the **10 year social work strategy** Improving and Safeguarding Social Wellbeing 2012-22, one of which focuses on Coaching & Mentoring as this has had a positive contribution to the ongoing education of social workers.

- **The Leader as Coach Programme:** In November 2015, **10 staff** commenced the course with follow up days taking place in 2016. The course is jointly hosted by BHSC and SEHSCT thus encouraging learning across Trusts.
- **Assessed Year in Employment:** When social workers qualify they are placed on the professional register with 'conditions' for a period of one year. One of the requirements is that the newly qualified social worker will be **supervised** every 2 weeks for at least the first 6 months of their practice.
- **Practice Teachers.** The Trust provide 91 social work placements each year and we have a cohort of **35 Practice Teachers** who must complete a part time one year course at Master's Level including academic submissions, observed practice and the assessment of a student.
- **Newly appointed Team Leaders/Senior Social Workers:** These staff must complete a supervision programme. It is a requirement of the DHSSPS and NISCC. The course integrates substantial teaching on the use of coaching when **supervising** staff. These staff are then observed by a Learning and Development Consultant supervising a member of staff. They receive feedback developmental feedback
- **One to One Coaching:** This has been taken forward in the last 2 years by one member of staff who has completed Level 3. Newly appointed Team Leaders/Senior Social Workers are offered 3 sessions over a 6-9 month period to support them through this period when they have line management responsibility for the first time. This member of staff and another are now undertaking Level 5 and are working with 4 new managers.
- **Introducing new ways of working.** Over the last few years the Trust is encouraging/requiring staff to use an evidence based assessment tool called **Graded Care**. The Trust has trained lots of staff who were enthusiastic/engaged but then returned to work and did not implement the learning. An opportunity to participate in research with NSPCC created the 'drive' for staff to complete these assessments and to support staff. The research lead with the Learning and Development Team then met individually/or as small groups to **mentor** staff in the implementation of the model.

- **Therapeutic Crisis Intervention [TCI] and Restorative Practice.** These are two models of working with young people in residential care. The Trust is training staff who are working in practice, who have day to day experience and staff who are working with others who they can **coach/mentor** in the workplace. For example if there was a challenging incident that arose within the home the Trainer could assist staff to manage the situation plus/or to debrief so that the situation can be explored in order to identify learning. This is an attempt to move **learning into the workplace** to create space to gently improve culture and practice.

Within **Medical Education** in the past a mentoring programme was in place for career grade medical staff (Consultants, Associate Specialists and Specialty Doctors) approximately **22** mentors were trained, and a matching process was in place. Feedback showed around 50% uptake of the formal scheme, with those that did take up the scheme finding it beneficial. This is an area that is currently being re-energised, and will move forward as part of the review of medical induction and leadership.

Mentoring:

Levels 1 and 2 are currently offered to Medical Staff. The following stats highlight uptake:

Level 1 Mentoring 2013 – 2014 (44 attended) 2014 – 2015 (62 attended) 2015 – 2016 (31 attended)	Level 2 Mentoring 2015-2016 (23 attended)
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Referrals are received from a variety of sources (BHSCT Supervisors, Occupational Health and also via NIMDTA) and the trainees are then matched with a mentor.

Level 1 Mentoring aims to equip Senior Trainees, Specialty Doctors and Consultants with the skills to provide support to trainee doctors who require some support in a variety of areas relating to their practice as doctors. The training covers the basic principles of mentoring, communication skills and strengthening personal resilience.

Level 2 Mentoring is designed to build on the foundations of level 1 in facilitating further skills development for successful mentoring relationships. The aim is to pull resources from areas such as cognitive behavioural theories and motivational interviewing and discuss their use and application within a mentoring relationship. There is an opportunity for some practical learning via use of case studies and role play.

These are courses designed by medical staff and as yet do not have any accreditation.

Supervision

A doctor in training is assigned both a Clinical Supervisor and an Educational Supervisor.

Clinical Supervisors are medical consultants who are responsible for overseeing a specialty day to day clinical performance and providing feedback on it. They will provide supervision for the period of time the trainees spend in the specific unit in which they currently work.

Educational Supervisors are responsible for the management of an individual's training and development. They will supervise the specialty trainees for a year and will provide an overview of progress during that time. During the course of the year, trainees may move to a different unit or department but will keep the same Educational Supervisor

Preceptorship for New Nurses commencing their careers

Within the nursing specialism a formalised process of **Preceptorship** is in place to support new nursing staff (registrants) to develop confidence in their chosen field of practice, consolidating their knowledge and skills and enabling professional socialisation.

The BHSCT in partnership with the Clinical Education Centre facilitates registrants (more experienced nursing staff) to prepare for their role as a **Preceptor**. 159 Preceptors have completed this preparation between Sept 2014 and Sept 2015 building on the knowledge and skills of their mentor role.

Trust Wide Coaching Framework

Coaching is one of the tools the organisation is using to enhance work performance, promote self-directed learning and encourage the personal growth of individuals. It is targeted at those members of staff who are interested in improving their own personal performance.

The [Coaching Framework](#) was designed to support the Trust's Learning & Development Strategy, Leadership & Management Strategy, Supporting Belfast Strategy and HR Strategy. It contributes to embedding a **coaching culture** through its aims:-

- Establish a network of trained internal coaches
- Create a process to enable staff to access trained internal coaches
- Provide a coaching skills development programme for leaders
- Enable access to a network of executive coaches for senior staff
- Provide explicit governance arrangements to underpin coaching within Trust



To date the Trust has **32 coaches** qualified with **ILM Level 5 certificate in Coaching & Mentoring** and they are part of the **BHSCT Coaching Network**. The Coaching Network is a supervision network and they meet on a quarterly basis for peer supervision and CPD activity in the form of Master Classes arranged in partnership with the HSC Leadership Centre.

The **promotional activity** for the coaching interventions is ongoing using both a targeted and open approach, using a variety of networks and awareness raising initiatives. The result of this is that our numbers applying for both one to one coaching and attendance on Coaching Skills for Leaders are steadily increasing.

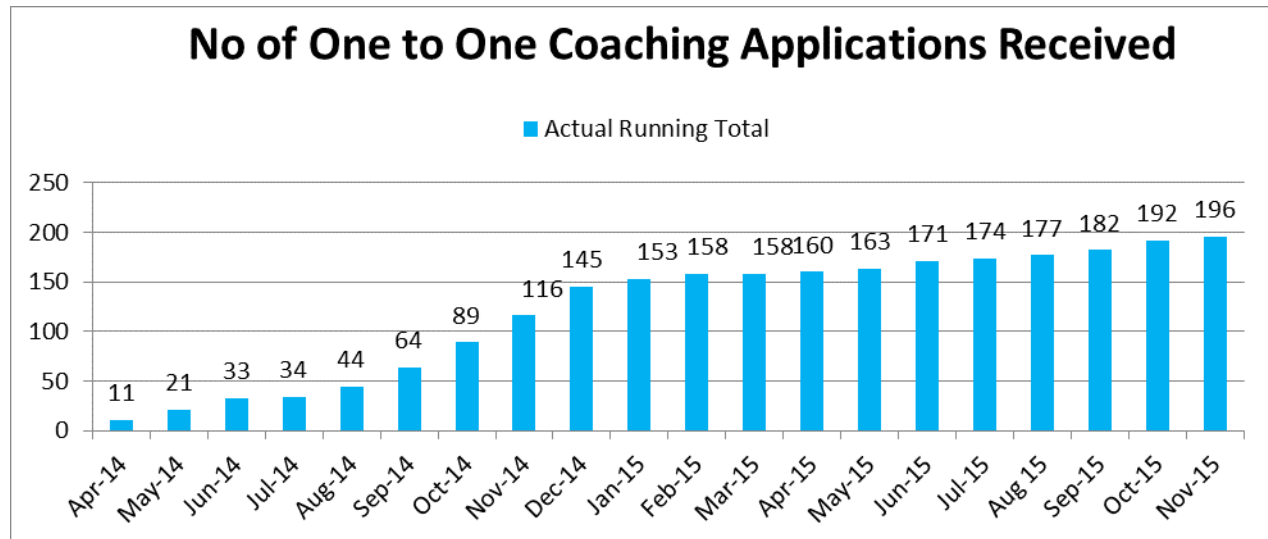


One to One coaching for Performance

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 **200** staff from Band 2 upwards have availed of individual coaching sessions. 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'. To date an additional **136** senior managers have received one to one coaching as an integral part of their leadership & management development programme



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"*

The Trust also provides a 'Coaching Skills for Managers Course' from Corporate Learning & Development Interventions

This **1 day** or 3 hour condensed development programme gives participants a solid grounding in coaching skills that they can use for performance improvement in their teams.

Over **180** managers/leaders within the organisation have attended this workshop.

What the participants have said....

- *“Really enjoyed the day out it provided me with ideas to use for my teaching sessions with mentee’s : new questions to ask”*
- *“The day was very well presented, interactive and interesting”*
- *“the most valuable piece of learning was the listening skills, how to empower others and allowing other to make their own decisions”*
- *“Will be very useful in communicating with staff who are unwilling to progress & develop”*
- *“It helped me to understand the possibilities of using coaching rather than managing to get the best out of my staff”*

Evaluation Outcomes / Feedback from Corporate Learning & Development Interventions: One to One Coaching / Coaching Skills for Managers

A level 1 evaluation analysis was carried out in 2013, one year post the launch of the Coaching Framework. The summary of the results are as follows:



▪ Coachee Level 1 Learning ○ 55% Better Performance ○ 90% Increased self-awareness ○ 65% Improved decision-making ○ 75% improved communication ○ 60% Better engagement ○ 60% Improved confidence	▪ Coaching Skills for Managers ○ 85% indicated programme was useful ○ 97% felt aims & objectives were met ○ 91% subjects covered were useful and practical and applicable
▪ ILM Level 5 Certificate in Coaching/Mentoring ○ 100% felt aims & objectives were met ○ Majority enjoyed the programme and felt that group discussions were useful and informative	

The 2nd stage of the **Evaluation strategy** for the initiative has commenced with a survey of all those that have participated either in the one to one coaching or coaching skills to gauge the benefits that they have found after their participation as well as measuring any behaviour change as a result of having been coached or using coaching skills. This is planned for December 2015 with the results and analysis being completed by January 2016.

Quality Awards achieved for Trust Wide Coaching Initiatives



2nd Place: People Category Chairman's Award 2013 Achievement: Excellence in Coaching Award 2014

To further support the promotion campaign and benchmark the work that we have commenced towards creating a 'coaching culture' we sought external assessment and endorsement by firstly applying internally for the **Belfast HSC Trust's Chairman's Award** in 2013. These quality improvement awards showcase innovative, service improvement initiatives within the Trust, and we were awarded **2nd place** in the People Category and the prize monies received were spent on promotional materials and supplies.

To gain further insight and benchmark ourselves against other Health Service Trusts and private sector organisations, we submitted an application to the **Irish Institute for Training & Development (IITD) National Training Awards: Excellence in Coaching 2014** and were awarded an '**outstanding achievement**' award by the Association of Coaching for our efforts to date.

Managers are role models of value based leadership, teamwork and knowledge sharing - – ERs 5.5, 5.6, 5.9, 5.10, 5.16 and 5.17.

Living the values and being a positive role model for the Trust's values is a thread that runs through each of the five themes the Trust is being assessed against for this review. Values are central to strategic, business and contribution planning. The Trust continues to invest heavily in supporting Values Based and Values Related Workshops as part of its extensive learning and development programme and the positive movement towards VBR and key competences provide positive evidence of the building blocks the Trust has put in place to encourage and facilitate all leaders to live the Trust's core values.

The section under the employee engagement theme on internal communication will explain the Trust's approach to information and knowledge sharing. Teamwork continues to be a top priority for the Trust in terms of service provision and delivery and as a key strategic priority area in the Trust's Learning and Development Strategy.

Theme 5

Recognising, Valuing and Continuously Improving Performance



Extended Framework

- **Self-Review**
 - Managers give and staff confirm receipt of constructive feedback (ERs 5.2 5.4)
 - People believe their contribution is valued (ERs 6.1, 6.3)
 - People believe they make a difference (ERs 6.2)
 - Evaluation results in improvements to people strategies and management (ERs 10.1, 10. 2, 10.3)
 - Self-review and information from external review are used (ERs 10.4, 10.5)

Top Managers make sure the organisation has a clear and fair recognition strategy which is used to recognise achievements and successes across the organisation at individual, team and organisational levels to improve the organisation's performance – ER 6.4

For the Trust 'Employee Recognition' is an important and effective approach to recognising staff for the work they do and the difference they make in people's lives every day. Providing feedback in a constructive and timely manner boosts the confidence and motivation of employees and is an integral part of a virtuous cycle the Trust is keen to create across its workforce. Feeling that you make a difference, and that what you do matters is a key contributor to the generation and retention of a positive spirit at individual and team level, which in turn is a key accelerator of high performance. Recognizing an employee for a job well done or just for the efforts he/she has made brings out more than just motivation, it also gives a sense of achievement to the employee, thus making him/her perform better. Employee Recognition's effect is long term and the Trust continues to listen, learn and continuously work to improve upon its policy, processes and practices. This section of the Storyboard attempts to provide a flavour of some of the actions the Trust takes to recognise and thank staff for their hard work, commitment and contribution. Each Directorate will be able to provide specific examples of staff recognition and celebration at a more local level.

The Trust's **Reward and Recognition Policy** which was introduced in 2012 sets out the Trust's commitment to rewarding and recognising staff to ensure that staff feel valued and appreciated for the work they do and the contribution they make. For the purpose of the policy recognition is divided into two categories, '**everyday immediate recognition**' and '**special recognition**'.

Every Day Recognition

Providing staff with feedback on their performance is something which takes place on an ongoing, informal manner across all staff groups. The Trust encourages everyday recognition where staff's contribution in delivering the services are acknowledged and recognised.

Across the Trust, **Team meetings** can include on the agenda achievements and commendations to staff. Compliments received from elsewhere are typically circulated to staff within teams and daily coffee/lunch breaks provide opportunity for 'informal celebrations' or recognition.

Within Directorate groups **recognition events** are encouraged for staff and teams e.g.: Surgery & Specialist Services in Oct 2015 held a celebration event for any departments to share the success of Service

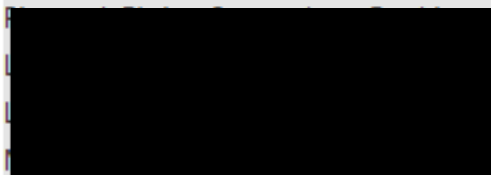
Improvement Projects implemented, or improvements in service delivery from innovative practice

Examples of Recognition:

- **TOAST Awards: 'Totally Outstanding Attitude Service and Talent' Award.** Recipients of the awards are nominated by their own Emergency Department Colleagues, who have witnessed their excellent practice in areas of patient care, communication, team working and support to patients, relatives or colleagues.

Advancing Healthcare Awards. An individual recently received 'a runners up award' at the Advancing Healthcare Awards (AHA) for their work transforming lymphoedema services in Northern Ireland offering local clinics with specialist staff with the emphasis on prevention.

There are also a range of **Individual, Regional and National Recognition Awards** that are regularly applied for and won by individuals and teams within the Trust.



All Ireland Health & Safety Awards.

Following the SAFETember focus on Safety and Quality, the Health and Safety team **won** the **Health Care Provider Award** in the NISO (National Irish Safety Organisation) /NISG (Northern Ireland Safety Group) All Ireland Occupational Health & Safety Awards



During the IIP Mock Assessment process in May 2015, the following are some comments from staff when asked how individually they are recognised and valued:

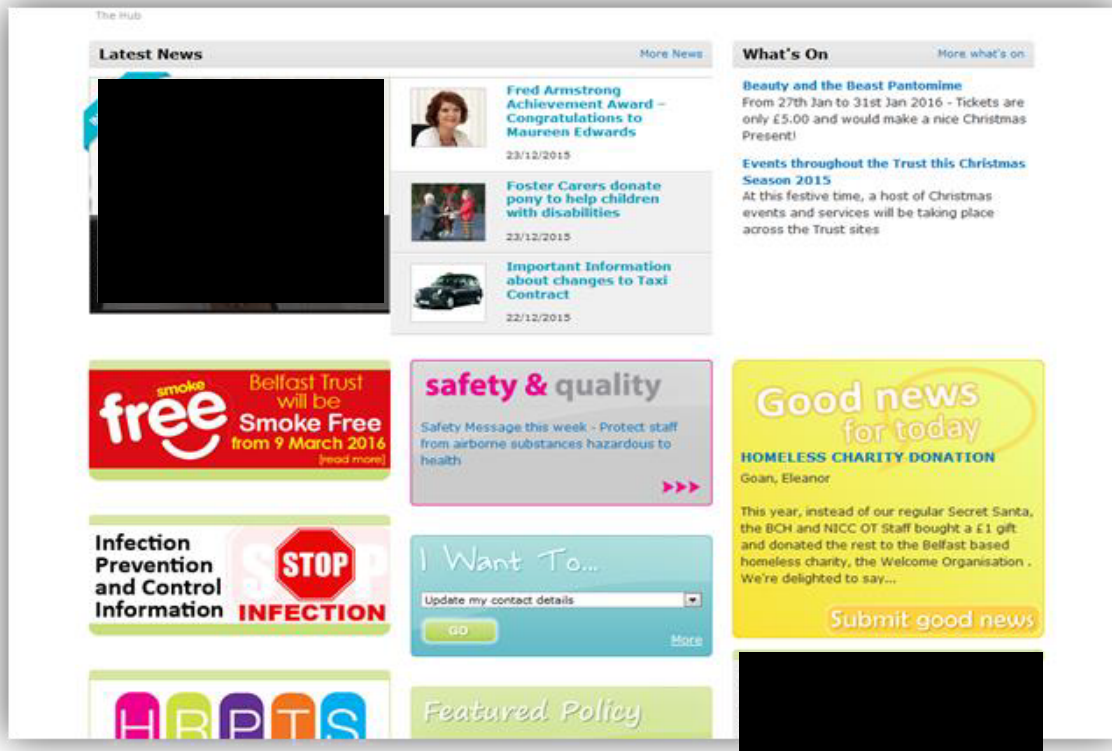
- *“I’m told that I am going a good job”*
- *“without my contribution the service wouldn’t be as effective”*
- *“definitely feel valued and recognised”*
- *“the best was an email from a member of the public, they had added a personal note to a member of staff”*

Processes such as the **Staff Development Review Process** and **Medical Appraisal, Coaching, Supervision, Mentoring, Preceptorship** provides managers/coaches/mentors with an opportunity to provide and for staff to receive constructive feedback on their performance and contribution.

Recognising and valuing individual and team contribution to the success of the service and Trust is an important way to show staff that their contribution is recognised and valued and that they do make a positive difference to the performance of the team and service.



The **intranet** is regularly used to publicise individual and team performance and has a section specifically dedicated for staff to '**share good news**' stories about individual recognition. The increasing use of Facebook, Twitter is another source of feedback from service users, feedback, which is tracked, collated and feed back to Directorates by the Corporate Communications team.



Approach to Special Recognition:

Special recognition is broken down into four categories.

- **Chairman's Awards** – an annual event recognising the achievement of health and social care teams throughout the trust
- **Retirement Awards** – after 30 years or more service staff receive a presentation gift and a certificate of loyalty signed by the Chief Executive.
- **Service Recognition Awards** – 1 week additional annual leave in the 25th Year of service.
- **Learning & Development Awards** – each year our L&D team organises and administers Learning and Development Recognition Event, to celebrate success in learning.

The Chairman's Awards are now an integral part of the Trust's calendar of events.

The Chairman's Awards are a unique event designed solely to celebrate and recognise quality improvement from within the Trust. Since the inception of the Trust, the Chairman's Awards have been based on the Trust's five key objectives.

In 2015 this was reviewed and changed 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 Trust values
- 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/clinical background.



Over the past 3 years, the Trust has received almost 300 entries for the Chairman's Awards.

The winning projects each received a silver perpetual cup, certificate and a cheque for **£10,000** to reinvest in their service.

Second and third placed projects in each category received a certificate and a cheque for **£3,000** and **£2,000** respectively, to reinvest in their service

In this following section of the Storyboard we felt it was best to let the pictures tell our story.

Chairman's Awards 2015 Winners!

98 entries were received in the five categories which reflect the Trust's five Values

Openness and Trust

1st Place Assuring Quality End of Life Care for Residents in Nursing Homes

2nd Place Safe Treatment in the RBHSC ED

3rd Place Relief of Dental Pain Clinic, Out of Hours Service



Respect and Dignity

1st Place C.L.A.R.E – a partnership approach

2nd Place Dementia with Dignity

3rd Place BCH Direct



Leading Edge

Joint 1st Place The Impact of Collaborative Working on Organ Donation within the Regional Paediatric Intensive Care Unit

Joint 1st Place NI Non-heart Beating Cadaveric Renal Transplant Programme

2nd Place Recovery begins with HOPE!

3rd Place Low Dose Rate Prostate Brachytherapy Specialist Award 'Daisy', RBHSC



Learning and Development

1st Place SimBel

2nd Place Friends of the Cancer Centre Clinical Nurse Specialist Development Programme

Joint 3rd Learning and Development for Health Records Staff Band 2

Joint 3rd Learning and Development for Social Work Staff – Safeguarding Vulnerable Adults



Accountability

1st Place Iveagh Centre – a positive support ethos and environment

2nd Place Implementation of a Structured Asthma Protocol

Joint 3rd Treatment Advice Note - good advice

Joint 3rd The Primary Joint Arthroplasty Outcomes Unit

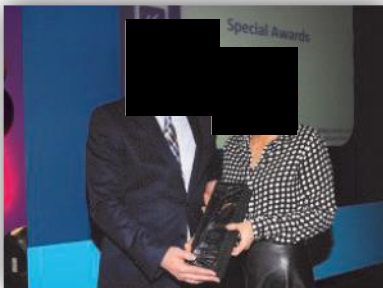




Special Awards at Recognition Ceremony

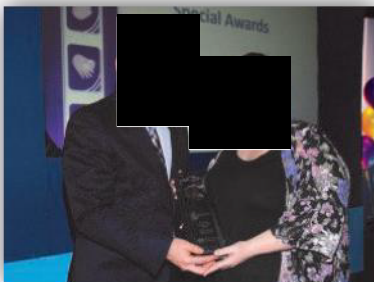
This is the first time the Trust had included Special awards in the '[Celebrating Success in Learning](#)' ceremony. The award winners were nominated by the programmes' tutors, and we had three "*Learner of the Year*" awards for specific accredited programmes and one Manager's award for Supporting Learning. A number of Special Awards presented at the event included a 'Manager's Award' and 'an Essential Skills Learner of the Year award' which was sponsored by the Trade Unions.

Below are some of the learners who were acknowledged during the event:



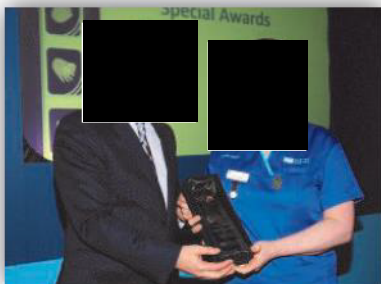
██████████ **ILM L5 received ILM Learner of the Year Award 2015** sponsored by the Institute of Leadership and Management

██████████ had a very positive influence on the other programme participants. Her Line Manager said "*as a Leader she is extremely engaging with her staff. She will not shy away from courageous conversations and is extremely supportive of her team.*"



██████████, **QCF Certificate in Healthcare Support L3 received Vocational Learner of the Year 2015** sponsored by the Belfast Trust

██████████ Vocational Assessor commented on her impressive communication skills and her ability to make patients feel safe. She went on to say "*I would be very happy for any of my relatives to be cared for by her, she is an excellent ambassador for the Trust.*"



██████████ **Sister Ward 10 North, BCH received the Manager's Award 2015** sponsored by the Belfast Trust

For her hard work and creativity in ensuring staff in her ward attended their Statutory and Mandatory Training.



██████████, Band 2 Nursing Auxiliary received the **Essential Skills Learner of the Year 2015 award** sponsored by all Trade Unions and presented by ██████████ from Unison. ██████████ tutor from the Belfast Metropolitan College commented on how positive ██████████ was throughout the programme. *“His first language is not English, which brings challenges, however, during the course of the programme his work just kept on improving week on week. This was achieved through a lot of very hard work done at home”*

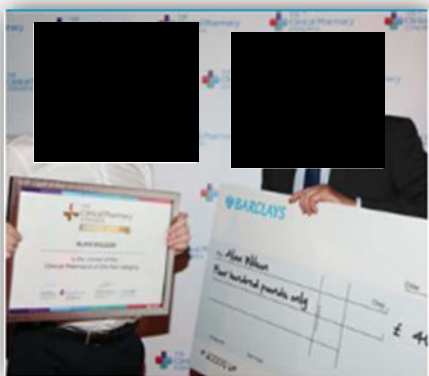
Continuous Recognition that our staff have received over the past few years



██████████, Friends of the Cancer Centre's Research and Development Radiographer was chosen as Society and College of Radiographers, **Northern Ireland Radiographer of the Year 2014**



██████████ a Paediatric Rheumatologist in Royal Belfast Hospital for Sick Children was awarded the **Woman of the Year in the Health Sector** award by College of Occupational Therapists at the 2014 **Belfast Telegraph Woman of the Year** awards



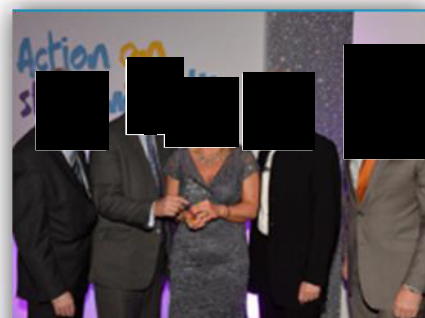
██████████, Clinical Pharmacist has been awarded the prestigious **Clinical Pharmacist of the Year Award for 2014**



The Trust's Mental Health and Learning Disability Occupational Therapy Manager, ██████████, was presented with a **Merit** by **College of Occupational Therapists**



Belfast Trust's ██████████ was named **National HPMA Deputy Director of HR** at the **HPMA Excellence Awards 2015**



██████████, Clinical Specialist Physiotherapist at the Royal Victoria Hospital, received the **Professional Excellence Award** at the **Northern Ireland Life After Stroke Awards**



Nursing and midwifery mentors who completed the **Mentor Preparation Programme and Sign-Off mentors**



Health Care Co-coordinator ██████████ received a **Bevan Prize for Health and Wellbeing**. ██████████ works with the homeless and the organisers of the awards said she had significantly improved the health of one of Northern Ireland's most deprived and hard to reach communities



Doctors at Belfast Trust's Royal Victoria Hospital **successfully implanted into a patient the first subcutaneous defibrillator** which was manufactured in Ireland.



Congratulations to Belfast Trust, winners of Information & Records Management Society Industry Award for Team of the Year Award 2014



Knockbracken Day Centre were the winners in **Best Kept Health & Social Care Awards Daycare category** for Belfast region



Belfast Trust Speech & Language Therapist [redacted] working with service user, John, and the Learning Disability Team won a National Award for their DVD under the category Preventing Avoidable Harm, by developing a DVD called 'Help stop Choking.'



Belfast Trust RCN Winners and Finalist Nursing Student Nurse Category was won by Jenny Mills, a third year Learning and Disability Student at Queen's University
This year the winner was [redacted] who works in Endoscopy, Belfast City Hospital



Trust Traveller Health Project Wins Healthy Cities Award for Health Equity

Evaluation results in improvements to people strategies and management (ERs 10.1, 10. 2, 10.3)

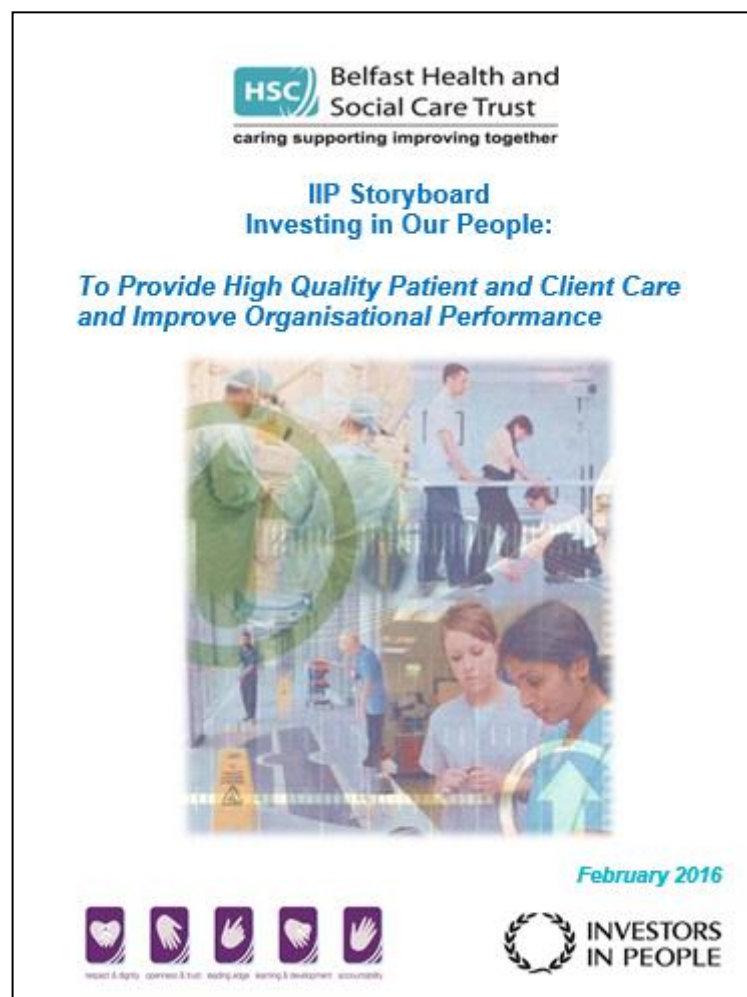
Self - review and information from external review are used (ERs 10.4, 10.5)

We hope we have shown you in this Storyboard and we believe you find further evidence of this while you are on site that continuous improvement is at the heart of the BHSCT's culture. The Trust recognises that as people make the biggest difference between success and failure, between being good and being excellent, it is critically important to continue to make improvements to the way the Trust leads, manages and develops its people.

We believe the threads of improvement are weaved through each of the previous five themes, namely,

- Strategic, Business and Contribution Planning
- Developing People.
- Engaging, Involving and Empowering People
- Leading and Managing Effectively
- Recognising and valuing contribution, improvement and achievements.

We offer the following evidence as a summary of some examples of how we continue to review, learn and continuously improve.



1. We have demonstrated the extent to which the Trust engages in review and evaluation and are therefore in a position to know what is working and what needs to change. The Storyboard has set out how the Trust recognised the need to ensure its values were more fully embedded and lived and we believe that as a result of the work the Trust has undertaken since the last review, our values are better understood and lived by staff across the Trust – **(Theme 1 - Strategic, Business and Contribution Planning)**.



2. We have reviewed the **SDR process** and have worked to incorporate the Trust's core values into this process - **(Theme 1 - Strategic, Business and Contribution Planning)**.
3. There is an improved understanding and use of KPIs across all programmes of care and across all areas of service provision - **(Theme 1 - Strategic, Business and Contribution Planning)**.
4. We have undertaken a major review and evaluation of our learning and development strategy and have reflected the learning points into our second learning and development strategy - **(Theme 2 – Developing People)**.
5. We continue to make progress through the use of E – learning options and

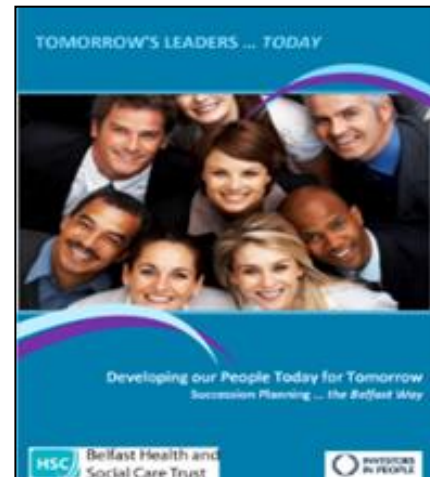
have worked hard to create a culture where learning is an everyday activity and all types of learning are valued. This belief is in line with the 70-20-10 Learning Model and is supported by the extensive investment the Trust makes in 'in – the job' and 'on – the – job' learning and development - **(Theme 2 – Developing People)**.



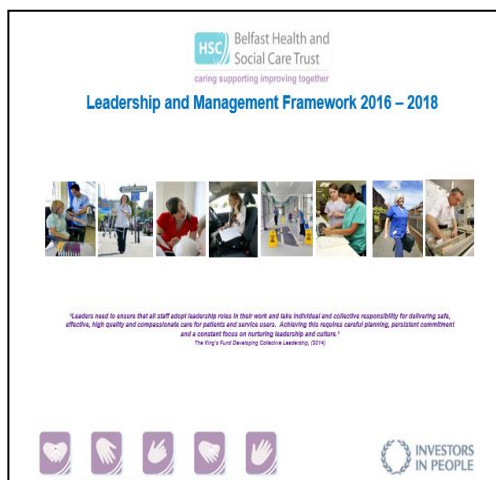
6. Along with the work we have undertaken on embedding the Trust's values has been the work the Trust has been involved with on Employee Engagement. The progress we have made from an initial workshop with 100 staff from Bands 1 – 7 to where we are now with an employee engagement framework, which sets out the strategic direction and required actions, has been a rewarding journey for all involved. The infrastructure which now exists to sustain this positive momentum is evidence of the strategic importance the Trust attaches to employee engagement and giving employees a voice - **(Theme 3 – Engaging, Involving and Empowering People)**.



7. The continuing use of and benefit derived from continuous improvement teams such as SITs, LITs, Lean Team, Impact etc. is a now well – established and a highly effective approach to encouraging and fostering team working as an effective approach to continuous improvement initiatives - **(Theme 3 – Engaging, Involving and Empowering People).**



8. The Trust has revisited and revised its **Leadership and Management Strategy** and its re -launched Leadership and Management Framework and updated L&M **Charter** sets the Trust's priorities clearly for the next three years - **(Theme 4 – Leading and Managing Effectively).**



9. The Trust's **Succession Planning Initiative** allows the Trust to take a strategic view on leadership and management planning in a way which provides a clear pathway for staff and the practical support to progress in one's career as a senior leader/manager. - **(Theme 4 – Leading and Managing Effectively).**

10. The Trust's continuing commitment to developing a coaching culture has been facilitated by the development of **a coaching framework** and the roll – out of and take up of training for interested staff. The continuing support for supervision, mentoring, Preceptorship etc. have all combined to ensure the infrastructure now exists to support the Trust in its commitment to develop a coaching culture - **(Theme 4 – Leading and Managing Effectively).**



11. The scale and range of the investment the Trust continues to make in leadership and management development is testament to the strategic importance the Trust attaches to having effective leaders and managers today while also planning to grow its next generation of leaders and managers - **(Theme 4 – Leading and Managing Effectively)**.



12. The improvements the Trust has made in the Chairman's Awards with the introduction of the five new categories which are based on the core values is evidence of how the Trust continues to effectively integrate its key priorities with its key people processes - **(Theme 5 – Recognising, Valuing and Continuously Improving Performance)**.



13. The Celebrating Learning Success Award ceremony continues to be a highly valued and appreciated event, and the introduction of new categories is evidence of the commitment of the organisers to revisit, renew and reenergise the event, ensuring its scope reflects the wonderful diversity of achievement in the area of learning

and development **(Theme 5 – Recognising, Valuing and Continuously Improving Performance)**.



14. The planned benefits from the introduction of the **HRPTS** are beginning to be realised and has already begun to make human resources, pay, travel and subsistence more accessible to all staff, while also encouraging a great sense of ownership and personal responsibility amongst staff.



15. As a trust we continuously review our services. Part of this review is facilitated by the Regulation and Quality Improvement Authority (RQIA). The RQIA is the independent body responsible for monitoring and inspecting the availability and quality of health and social care services in Northern Ireland, and encouraging improvements in the quality of those services. RQIA register and inspect a wide range of health and social care services. Their inspections are based on a new set of minimum care standards which will ensure that both the public and the service providers know what quality of services is expected. The Regulation and Quality

Improvement Authority (RQIA) have made numerous visits to the Trust in the past year and have visited all critical care units. This is a comprehensive audit that in addition to scrutinising the governance structure, also includes clinical practices, decontamination of equipment and environmental cleanliness. All the critical care units have scored very well in these independent audits. Inspections can be either announced or unannounced. Following their inspection a report is forwarded to the Trust outlining findings and recommendations.



16. We have used **self – review techniques** such as the use of the well – established and highly effective IIP Local Implementation Teams and mechanisms such as traffic light reporting, accountability reports, accountability IIP presentations and mock assessments to baseline where each of the Directorates are against the IIP standard and framework and how they plan to develop action plans to address any identified gaps.



17. We have used information and feedback from external **reviews for**

example our last IIP Assessment. The Trust developed a Continuous Improvement Plan from its last IIP Report and this CIP has provided the context and content for a lot of the work we have undertaken across the Trust on how people are led, managed and developed since the last IIP review.

18. The development and imminent launch of the **Trust's Organisational Development Framework** will provide an overarching framework for the Trust in its ambition to becoming a world class provider of health and social care.



19. The introduction of normative nursing staffing levels has also been a very positive development and the Trust is working with all its partners to ensure the Trust moves towards the recommended normative nursing levels in line with the agreed schedule.

The above list is neither definitive nor exhaustive. It builds on and draws from what has been covered in the early part of the Trust's IIP Storyboard. Each of the Directorates will be able to provide examples of the improvements they have made and introduced in their own areas when you meet with them during your on – site visit

Appendix 1 – Evidence Requirement Matrix

	Indicators										
		1	2	3	4	5	6	7	8	9	10
Evidence Requirements	1	core	core	core	core	core	core	core	core	core	core
	2	core	core	core	core	core	core	core	core	core	core
	3	core	core	core	core	core	core	core	core	core	core
	4	core	core	core	✓	core				core	✓
	5	core	✓	core		✓		✓		core	✓
	6	core		✓		✓					
	7	✓		✓							
	8		✓	✓		✓					
	9	✓				✓					
	10					✓		✓			
	11	✓		✓							
	12		✓	✓		✓					
	13	✓	✓	✓							
	14		✓	✓				✓			
	15	✓		✓							
	16		✓	✓		✓					
	17	✓				✓					
	18										
	19	✓		✓		✓					
	20			✓							
	21	✓		✓							
	22			✓							
	23	✓		✓							
	24	✓		✓							
	25					✓					
	26										
	27										
	28			✓							
	29			✓							
	Total Number of Evidence Requirements To Be Assessed:88										

Key:

CORE	The Core Investors in People Standard
✓	Your Choice from the IIP Framework
	Not part of the Investors in People Framework

Appendix 2: Reference Documents

Storyboard Links

- How the Trust is structured (Page 5)
<http://www.belfasttrust.hscni.net/about/TrustStructure.htm#Directors>
 - Trust Vision and Corporate Plan 2013/2016 (Page 17 and 24)
<http://intranet.belfasttrust.local/Corporate Documents/2013-2016 3 Year Corporate Plan and Trust Vision.pdf>
 - Corporate Management Plan 2015/2016 (Page 17)
<http://intranet.belfasttrust.local/Corporate Documents/corporate 1 Year management plan 2015 to 2016.docx>
 - Annual Report 2014/2015 (Page 18 and 25)
<http://intranet.belfasttrust.local/Pages/News/Annual-Report-2014-to-2015.aspx>
 - Quality Annual Report 2014/2015 (Page 18 and 25)
<http://intranet.belfasttrust.local/Documents/2015/November/Annual%20Quality%20Report%201415%20V8.pdf>
 - A Strategy for Maternity Care in Northern Ireland 2012 2018 (Page 23)
<https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/maternitystrategy.pdf>
 - Ministerial Standards/Targets 2015/2016 (Page 23)
https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/Commissioning%20Plan%20Direction%20-%202015-2016_0.pdf
 - Quality 2020 (Page 23)
<https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/q2020-strategy.pdf>
 - Public Health Strategic Framework: Making Life Better 2013-23 (Page 23)
<https://www.dhsspsni.gov.uk/articles/making-life-better-strategic-framework-public-health>
 - Transforming Your Care' and more recently as set out in the 'Donaldson Report' (Page 24)
<https://www.dhsspsni.gov.uk/topics/health-policy/transforming-your-care>
 - 'Ambitious vision for health and social care in Northern Ireland' (Page 24)
<http://www.northernireland.gov.uk/index/media-centre/news-departments/news-dhssps/news-dhssps-041115-hamilton-outlines-ambitious.htm>
 - Framework for Community Development and User Involvement (Page 26)
http://www.belfasttrust.hscni.net/pdf/Involving_You-a_framework_for_community_development_and_user_involvement.pdf
 - Care Indicators (Page 32)
<https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/Indicators%20of%20Performance%20Direction%20-%202015-2016.pdf>
-

- Learning and Development Strategy (Page 37)
<http://intranet.belfasttrust.local/Corporate Documents/Learning and Development Strategy Booklet 2014 to 2017.pdf>
 - 70.20.10 Model (Page 46)
<http://www.personneltoday.com/hr/702010-a-model-approach-for-learning/>
 - Learning and Development Portfolio (Page 48)
<http://intranet.belfasttrust.local/Documents/2015/April/Final%20Learner%20Engagement%20Brochure%202015-2016.pdf>
 - Team Development Effectiveness Framework (Page 49)
http://intranet.belfasttrust.local/directorates/hr/Documents/Team_Development_Effectiveness_Framework_Aug_14.docx
 - Evaluation Framework for Learning and Development (Page 53)
http://intranet.belfasttrust.local/directorates/hr/Documents/Evaluation_Framework.docx
 - Employment Equality and Diversity Plan (Page 59)
<http://intranet.belfasttrust.local/Corporate Documents/Employment Equality Diversity Plan 20142017.pdf>
 - Supporting Belfast Strategy (Page 59)
<http://intranet.belfasttrust.local/directorates/hr/Documents/Supporting Belfast Strategy.pdf>
 - eLearning (Page 66)
<http://elearning.belfasttrust.local/>
 - Training Manual (Page 66)
<http://view.pagetiger.com/EqualityTrainingManual>
 - Good Relations Strategy (Page 67)
[http://intranet.belfasttrust.local/directorates/hr/Documents/785 - good relations strategy final signed off\[1\].pdf](http://intranet.belfasttrust.local/directorates/hr/Documents/785 - good relations strategy final signed off[1].pdf)
 - Good Practice Guide on Communication and Consultation (Page 69)
http://intranet.belfasttrust.local/directorates/hr/Documents/Good_Practice_Guide.pdf
 - Employee Engagement Framework (Page 72)
http://intranet.belfasttrust.local/Learning/liP/Documents/Employee_Engagement_Framework_2014.docxf
 - Let's Talk Trust (Page 74)
<http://intranet.belfasttrust.local/Documents/2015/April/Lets%20Talk%20Trust%20Findings%20Report%20final.pdf>
 - The b well website (Page 88)
<http://www.bwellbelfast.hscni.net/>
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- Evaluation of Leadership Conference (Page 118)
[http://intranet.belfasttrust.local/Documents/2015/July/Leadership Conference 2015 Evaluation Report.pdf](http://intranet.belfasttrust.local/Documents/2015/July/Leadership%20Conference%202015%20Evaluation%20Report.pdf)
 - Coaching Framework (Page 127)
[http://intranet.belfasttrust.local/directorates/hr/Documents/BHSCT Coaching Framework Final Sept 2013.pdf](http://intranet.belfasttrust.local/directorates/hr/Documents/BHSCT%20Coaching%20Framework%20Final%20Sept%202013.pdf)
 - Recognition of Learning Ceremony Newsletter 2015 (Page 139)
[http://intranet.belfasttrust.local/directorates/hr/Documents/Recognition Newsletter 2015 - FINAL.pdf](http://intranet.belfasttrust.local/directorates/hr/Documents/Recognition%20Newsletter%202015%20-%20FINAL.pdf)
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