



<b>To:</b>	<b>Trust Board</b>		
<b>From:</b>	<b>John Adler, Chief Executive Kate Bradley, Director of Human Resources</b>		
<b>Date:</b>	<b>30 May 2013</b>		
<b>CQC regulation:</b>	<b>Regulation 23 Outcome 14: Supporting Workers</b>		
<b>Title:</b>	<b>Listening into Action (LiA) Progress Report</b>		
<b>Author/Responsible Director: John Adler Chief Executive and Michelle Cloney LiA Lead</b>			
<b>Purpose of the Report:</b> To update the Trust Board on progress in relation to adopting the Listening into Action (LiA) approach across UHL.			
<b>The Report is provided to the Board for:</b>			
Decision		<input type="checkbox"/>	
Discussion		<input checked="" type="checkbox"/>	X
Assurance		<input checked="" type="checkbox"/>	X
Endorsement		<input type="checkbox"/>	
<b>Summary / Key Points:</b>			
<p>UHL is a national pioneering organisation for adopting Listening into Action. Adopting Listening into Action requires the organisation to work through a number of key milestones, using the LiA optimal Framework, which focus on three dimensions of change:-</p> <ol style="list-style-type: none"> <li>1) quality and safety;</li> <li>2) the patient experience; and</li> <li>3) working together.</li> </ol> <p>As part of the initial stages the Trust undertook an organisation wide Pulse Check survey with headlines reported at the last Trust Board. This report provides comparative data on Pulse Check survey results from other NHS organisations who have implemented LiA and updates the progress which has been made.</p> <p>During April / May six LiA Listening Events were held, hosted by John Adler, Chief Executive. Over 500 staff attended the Listening events and the feedback was extremely positive. At these events the Chief Executive asked for volunteers to sign up to become a local adopter of LiA and over 125 teams expressed an interest in getting involved.</p> <p>Outputs from the LiA Events have been synthesised and grouped into key themes and actions have been identified: Quick Wins and Enabling Our People Schemes. Further details on the Quick Wins and Enabling Our People Schemes are included in this report. In addition 12 LiA Pioneering Teams have been selected to take LiA forward at a local level, supported by the LiA Team and sponsored by the Executive Team.</p>			
<b>Recommendations:</b>			
The Trust Board is asked to acknowledge work undertaken to date and comment on the planned actions as the Trust moves from Phase 2 of LiA 'Engaging people around what matters to you' into Phase 3 of LiA 'Mobilising and empowering clinicians and staff to drive change'.			



<b>Previously considered at another corporate UHL Committee?</b>	
<b>Strategic Risk Register:</b> Risk 3	<b>Performance KPIs year to date:</b> Baseline measures detailed within the report
<b>Resource Implications (eg Financial, HR):</b> This work is led by John Adler, Chief Executive, Director of Human Resources and the LiA Leadership Team (from 1 May 2013), working in collaboration with the UHL LiA Sponsor Group.	
<b>Assurance Implications:</b> All staff should have rewarding and worthwhile jobs, with the freedom and confidence to act in the interest of patients. To do this, they need to be trusted and actively listened to. They must be treated with respect at work, have the tools, training and support to deliver care, and opportunities to develop and progress.  UHL has committed to engage staff in decisions that affect them and the services they provide, individually, through representative organisations and through local partnership working arrangements. All staff will be empowered to put forward ways to deliver better and safer services for patients and their families.	
<b>Patient and Public Involvement (PPI) Implications:</b> Patient Advisers attended Listening events. Initial focus of LiA is around staff engagement and as the LiA journey unfolds further opportunities to involve patients / carers / patient advisers will be sought.	
<b>Stakeholder Engagement Implications:</b> The UHL LiA Sponsor Group will continue to actively engage with key internal and external stakeholders, in successfully adopting LiA across the Trust.	
<b>Equality Impact:</b> Part of the analysis examines event representation against the nine protected characteristics.	
<b>Information exempt from Disclosure:</b> No	
<b>Requirement for further review?</b> The Executive Team and UHL LiA Sponsor Group will monitor on-going progress at regular meetings. An update will be presented to the Trust Board at quarterly intervals.	



**REPORT TO:** UHL Trust Board

**REPORT FROM:** John Adler, Chief Executive  
Kate Bradley, Director of Human Resources

**DATE:** 30 May 2013

**SUBJECT:** Listening into Action Progress Report (LiA)

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## 1. Introduction

This report sets out progress in Phase 2 of the LiA Route Map associated with 'Engaging people around what matters to you' and the intended actions required to progress into Phase 3 'Mobilising and empowering clinicians and staff to drive change'. Specifically an update is provided on:

- UHL Staff Pulse Check Results – comparative data from Trusts which have already implemented LiA
- UHL LiA Listening Events
- Actions resulting from the LiA Listening Events – Quick Wins and Enabling Our People Schemes and the selection of first 12 Pioneering Teams

We are now at the beginning of Phase 3 of our LiA journey. Phase 3, involves:

- Starting the culture shift through widespread adoption of LiA at a strategic, operational and frontline level
- 'First 12 Pioneering Teams', Quick Wins and Enabling our People Schemes driving big impact, measurable, accelerated changes that matter to patients and staff
- Staff working together 'across the usual boundaries'
- Increased morale, enthusiasm, will and ownership from staff
- Managers 'unblocking the way'
- Surfacing opportunities and issues around leadership

## 2. UHL Staff Pulse Check

The report submitted to Trust Board on 25 April 2013, outlined that a 'Pulse Check' was undertaken from the 18 March to 5 April 2013. The purpose of the Pulse Check was to collect staff views about their experiences of working at the Trust 'right now'. It provided the Trust with some baseline information about the views and experiences of its staff to help improve the working lives of staff and the quality of care for patients. We will repeat the Pulse Check, at various points, and identify if we are making positive change.

Analysis of the Pulse Check results were provided at the April Trust Board and as a result, further information was requested of comparative data from Trusts which had already implemented LiA. The comparative data available relates to the National Pioneering Trusts who have implemented LiA since April 2012. The UHL results and comparative data are shown at Appendix 1

## 3. LiA Events

Six LiA Events, hosted by the Chief Executive were held during the end of April and early May:-



<b>Event 1</b>	Tuesday 30th April	85 attended
<b>Event 2</b>	Wednesday 1st May	88 attended
<b>Event 3</b>	Wednesday 1st May	85 attended
<b>Event 4</b>	Wednesday 8th May	88 attended
<b>Event 5</b>	Thursday 9th May	84 attended
<b>Event 6</b>	Thursday 9th May	81 attended
<b>Total</b>		<b>511</b>

The duration of each Listening Event was 2 hours and during this time staff were asked to consider:

- What are the main things that get in the way of you delivering the very best care for our patients and their families?
- What changes – which we have the ability to make happen between us – would have the biggest, positive impact on our patients and our staff?
- Being really specific, what practical steps should we take together to translate your Top 3 ideas into reality?

The events were positively evaluated with **93%** of staff rating the events as excellent; **84%** indicating that they felt attending the event to be a good use of their time and **96%** stated that engaging staff and giving them permission to make positive changes will help us improve care for our patients.

#### 4. Actions Resulting from LiA Listening Events

Outputs from the LiA Listening Events have been synthesised and grouped into key themes. These have been framed into a simple view of *'What Matters to Our Staff'* to inform accelerated, big impact actions.

Based on the biggest impact opportunities, the UHL LiA Sponsor Group have agreed a set of actions at three levels:

- **Quick Wins** – to build belief in the process and demonstrate that we mean business. Quick Wins are a series of high impact, visible actions which can be implemented quickly and help to get some rapid improvements and convince staff that we mean business. This month, these will include:
  1. Staff will be able to vote on the **'Top 10' eyesores** across the Trust so we can fix them.
  2. **No new external consultancy** will be employed without the approval of the Chief Executive. If it is ever necessary in future we will explain why.
  3. All of the Leadership Community will be expected to **attend the monthly Chief Executive Briefings** and cascade that information in their own, at least monthly team meetings.
- **Enabling Our People schemes** - 'enabling' changes to accelerate which will have a widespread, positive impact on lots of people and need to be done at a corporate level, including Strategic Priorities which apply to some of the biggest challenges facing the Trust.



Staff will be directly involved in these reviews all of which will report their findings by the '**Pass It On**' event scheduled for November 2013. The first 10 schemes will be:

1. We will simplify and shorten our current **recruitment process** from vacancy to start date
2. We will determine the **right staffing** for all areas and create a model that attracts the best staff into our organisation and reduces our reliance on bank, agency and locum staff
3. We will create a Trust-wide equipment library to ensure staff have access to **equipment fit for the job**
4. We will review the way we **manage our beds** to determine what we need to run a more effective and efficient service
5. We will work towards providing more seamless **care 24/7**
6. We will find better ways to **communicate** with each other and with our patients
7. We will **reduce and standardise paperwork and processes**, removing barriers, duplication and unnecessary steps so staff can spend more time with patients
8. We will improve our **car parking** systems across our sites

In addition to the above, there are two areas which came out strongly at the Listening Events but which are already being worked on as major projects. These are **IT Systems** and **Procurement**. For both of these the LiA approach will be used within the existing projects to ensure a strong voice for front line users.

- **First 12 LiA Teams** - 'First 12' teams (specialties, departments, wards, pathways) – who will 'trail blaze' adoption of LiA on the ground, engaging all the right people around specific outcomes they want and need to improve

More than 120 teams, pathways, divisions and wards expressed interest in being one of the first 12 Pioneer Teams. The LiA Sponsor Group had the difficult job of selecting who will be supported to adopt the LiA way of working first over the next few months. Teams will receive support and full backing from the Chief Executive to help them achieve amazing results through staff-led change. Before the end of the year more teams will be selected to take part.

The first 12 Pioneer Teams are listed below and others will quickly follow:

1. **Emergency Department** will focus on patient care and experience
2. **Haemodialysis Unit** want to set up a multi-functional clinical area
3. **Cardio, Renal and Respiratory CBU & Ward 32** want to improve the patient journey for elective cardiac procedures
4. **Specialist Surgery and GI Medicine/ Surgery/ Urology CBU's** will be focusing on improving staff engagement
5. **Theatres** want to use LiA to improve staff engagement, morale and communication between teams
6. **Geriatric Medicine and Orthopaedic Trauma** want to improve interdisciplinary team working and the patient journey within the hip fracture unit
7. **Obstetric haematology** want to introduce more streamlined nurse led services to improve care for patients
8. **Children's HDU, Ward 12** want to improve the space and support they provide for families of their long-term ventilation patients
9. **Pregnancy Assessment Unit** want to create a more holistic and accessible pregnancy assessment service for complicated pregnancies
10. **Children's CBU linking with Pharmacy** want to improve their discharge processes
11. **Catering Services** at the Glenfield will work with staff to support protected mealtimes
12. **Duty Managers** want to improve team morale and communication through better engagement



#### 4. Recommendations

The Trust Board is asked to acknowledge work undertaken to date and comment on plans for action during Phase 3 of Listening into Action.



**Appendix 1: UHL Listening into Action Staff Pulse Check Result (18 March – 5 April 2013) and Comparative Pulse Check data**

		Wrightington, Wigan and Leigh NHS Foundation Trust		UHL 2851 responses	
		Positive Responses June 2012	Positive Responses March 2013	Positive Responses	Room for Improvement Responses
1	I feel happy working in my work area / team / department	53.77%	75.19%	50.12%	49.88%
2	I am involved in deciding on changes introduced that affect my work area/team/department	33.06%	54.45%	28.59%	71.4%
3	Senior managers encourage staff to suggest new ideas for improving services	31.78%	63.14%	27.29%	72.71%
4	Day-to-day issues and frustrations that get in our way are quickly identified and resolved	17.35%	49.83%	12.45%	87.55%
5	This Trust communicates clearly with staff about what it is trying to achieve	31.17%	63.49%	28.44%	71.56%
6	I believe we are providing the very best services to our patients and their families	40.20%	68.68%	30.35%	69.65%
7	How satisfied are you with the extent to which the Trust values your work?	20.78%	54.10%	17.47%	82.52%
8	I am proud to work in this work area / team / department	61.03%	79.07%	57.27%	42.73%
9	I feel that I understand the connection between my role and the wider vision of the Trust	47.36%	73.22%	41.64%	58.37%
10	Communication between senior management and staff is effective	22.15%	56.07%	16.72%	83.28%

Access to comparative data for Wave 1 Trusts is limited. The example provided above relates to an 'Exceptional Performer' with marked improvements on all 10 questions. In some cases the improvement was >30%