

<b>To:</b>	<b>Trust Board</b>
<b>From:</b>	Kate Bradley, Director of Human Resources
<b>Date:</b>	31 January 2013

<b>Title:</b>	<b>Listening into Action (LiA)</b>		
<b>Author/Responsible Director:</b>	<b>John Adler, Chief Executive/Kate Bradley, Director of Human Resources</b>		
<b>Purpose of the Report:</b>	The purpose of the report is to:-		
	<ol style="list-style-type: none"> <li>1. Describe the LiA approach which is designed to improve staff engagement; one of the key objectives of the UHL Organisational Development Plan 2013-2015; and</li> <li>2. Set out a proposal to adopt the LiA approach at UHL, the associated costs and benefits of implementing this approach</li> </ol>		
<b>The Report is provided to the Board to provide:-</b>			
	Decision	√	Discussion
	Assurance		Endorsement
<b>Summary / Key Points:</b>	<p>The refreshed Organisational Development Plan 2013-2015 for UHL sets out six key themes. These are aimed at developing the capacity and capability of the organisation in order to facilitate the change and transformation which is required to deliver our strategic vision and objectives. One of the six themes within the Organisational Development Plan is to improve two-way staff engagement. A series of actions have been set out in the plan that build on existing approaches to enhance Board, Executive and Senior Leaders team engagement and involvement.</p> <p>Having reviewed successful interventions and approaches in this area, we have concluded that LiA, an outcome oriented approach to engaging the right people in achieving quality outcomes, will enhance our performance in this area. The LiA approach was introduced in the NHS approximately five years ago and has evolved over this period and received national recognition. It focusses on three key themes:-</p> <ol style="list-style-type: none"> <li>1. Quality and Safety</li> <li>2. Patient Experience</li> <li>3. Working Together</li> </ol> <p>Approximately 40 Trusts nationally have been involved in LiA and the results of the first Cohort of national pioneers have demonstrated positive improvements in staff engagement scores. A second cohort is due to commence in February/March 2013 and UHL has been offered the opportunity to join this cohort commencing in February 2013.</p>		

<b>Recommendations:</b>	
The Trust Board is asked to support the proposal to join Cohort 2 of the LiA. Subject to agreement by the Board, further communications and discussions will take place across the Trust.	
<b>Strategic Risk Register</b>	<b>Performance KPIs</b>
3	Appraisal Training Attendance Sickness Absence Turnover Rate
<b>Resource Implications (e.g. Financial, HR):</b>	
Cost of joining LiA Cohort 2 is £70K. A Programme Co-ordinator (8a/8b) and Programme Support Officer (3/4), c£85k for 12 months. Time commitment from senior leaders is also key.	
<b>Assurance Implications:</b>	
Forms part of the annual Care Quality Commission (CQC) standards monitoring process.	
<b>Patient and Public Involvement (PPI):</b>	
Results of this paper to be reviewed in conjunction with the patient survey to provide public statement of Trust performance and they will also be examined by the Patient Adviser, who is a member of the Workforce and Organisation Development Committee.	
<b>Equality Impact:</b>	
Part of the analysis examines if there are response differences between staff groups pertaining to the nine protected characteristics.	
<b>Information exempt from Disclosure:</b>	
No	
<b>Requirement for further review?</b>	
A further update paper will be provided to the Trust Board for discussion, assurance and endorsement.	

**REPORT TO:** Trust Board

**DATE:** 31 January 2013

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

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

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## 1. INTRODUCTION

- 1.1 Listening into Action was initiated by Sir David Nicolson (2008) and piloted with 12 NHS Trusts from around the country. The approach was then further developed through 40 pilot Trusts in the South West region – four years on and with intensive work with nine Acute Trusts a refined approach has emerged. Sir Bruce Keogh, NHS Medical Director has endorsed this approach nationally. Ten Trusts have commenced the LiA approach i.e. ‘national pioneers for staff engagement and empowerment’ starting in May 2012 (1<sup>st</sup> Wave), and a second wave of seven Trusts then started in September 2012.
- 1.2 A third wave is scheduled to commence in March 2013. Nine Trusts have already signed up and a place is being kept in reserve for UHL. An investment of £70,000 will be required to secure a twelve month contract with ‘Optimise Limited’, the company who have developed the approach and facilitate adoption across the NHS. The following support will be provided as part of the contract:
- Output Plan of a twelve month **intensive** programme
  - Telephone and email consultation/coaching on a day to day basis
  - Access to the web-based LiA Navigator – comprising all the tools and resources we need (refined over three years)
  - Ongoing learning from the wider network of 27 National Pioneer Trusts
  - Provision of eight Navigation Events – to support all ten Trusts (wave 2) implementing LiA on a parallel basis
- 1.3 Listening into Action forms part of a deliberate staff engagement approach and strong evidence indicates a positive shift in key areas of Staff Survey results, from embedding this approach. A powerful case study is available at:
- <http://www.listeningintoaction.co.uk/LiA-info/docs/0.0.0%20LiA%20Case%20Story.doc>
- 1.4 Engagement research suggests that no amount of inward investment, restructuring or reconfiguration can, in itself, deliver the step change in quality and safety of patient care or the associated improvement in working conditions, environment and culture that staff crave, unless we fundamentally change ‘the way we do change’.
- 1.5 The LiA Framework provides a comprehensive and joined-up way to tackle improvements in specific service areas, delivered through the direct engagement of

the people who work there. It brings together a holistic view of the most likely opportunities for improvement – based on best practice. Teams are coached through a 'journey'. It puts staff in the driving seat while also giving UHL leaders a 'methodology' for enabling change. It also leverages use of other improvement initiatives such as LEAN and the Productive Series by contextualising and sharpening the way in which they are used and applied.

- 1.6 Initial discussions have taken place with senior leaders across the Trust at the Leadership Forum, with members of the Executive Team and Staff Side colleagues, to gauge the level of support and enthusiasm for participating in LiA. All three groups expressed their commitment to LiA and had a number of relevant questions relating to the approach. These questions were primarily about implementing the LiA approach in a way that would compliment and assist in delivering the Strategic Direction (October 2012) and objectives of the Trust.
- 1.7 In successfully implementing the LiA approach a £85k budget will be required to cover pay expenditure and on-costs, with reference to dedicated staffing resource. Based on successful delivery models in place in other participating organisations, the implementation team will comprise of a Programme Co-ordinator (Band 8a/8b) and Programme Support Officer (Band 3/4). Along the journey, we will also require strong senior manager commitment and considerable input from key UHL teams including HR Learning and Organisational Development, Communication, Transformation and Patient Experience. In total a budget of £155k will need to be allocated to the implementation of this activity (including £70k LiA joining fees).

## 2. THE LiA ROUTE MAP

- 2.1 Following discussions with 1<sup>st</sup> Wave organisations (Wrightington, Wigan and Leigh Foundation Trust and Hull and East Yorkshire Hospitals Trust) they have described their initial journey as set out below:

### Phase One: *Committing to a new way of working*

- A dedicated LiA Lead (with administrative support) has been appointed. The leads operate at senior manager level and report directly to the Chief Executive.
- Set up their own LiA Sponsor Group led by the Chief Executive with representation from key clinical and operational influencers (based on influence rather than hierarchy although several members will be executive directors)

In participating organisations the Sponsor Group will meet every two weeks for the twelve month period and beyond. Members of the Sponsor Group must have unwavering commitment to make LiA their personal and collective mission. They must visibly champion the LiA approach and demonstrate through their behaviours that they are committed to it. Their role over the 12 months is to navigate the journey, make prompt decisions, 'unblock the way' and act as link sponsors to front line staff.

- **Getting leaders on board with the journey**

A Launch Conference was held and attended by senior managers and leaders to elicit support, and each sponsor took every opportunity to get buy in and shared ownership through day-to-day contact with clinical and operational leaders and influencers across the Trust.

- **Launching a ‘fundamental shift’ campaign**

Trusts have embarked on creating a ‘buzz’ around LiA through a proactive and creative communications campaign.

- **‘Pulse Checking’ staff across the Trust to see how they are feeling right now**

Adopting a similar approach to UHL local polling, using a simple 10 question survey to get a snapshot view of how engaged and how valued staff feel right now. Response levels are typically very high with more than 30,000 staff responses from the 17 National Pioneer Trusts over the past six months

- Agreeing the outcomes they want to see across the Trust based on:

<b>Outcome Measures from other National Pioneering Trusts</b>	
Patients	Patient Experience Improved
	No harm to patients
	Staff listen and respond
Staff	Able to make changes happen
	Recommend the Trust as a place to work and to receive care
	Decrease in bullying
	Change to managerial behaviours – inclusive and empowering
Organisation	Know what matters to staff
	Staff know about LiA
	Great stories from LiA and a pipeline to share these
	Cultural shift
	Leadership shift

Phase Two: ***Engaging staff around what matters***

- Preparation and hosting five high profile, Chief Executive-led LiA Staff events with attendance by a rich mix of people from across all levels and roles at each event
- Attendance by Trust Board and other key influencers has been ensured and been described as a critical success factor in demonstrating commitment and openness to listening to what staff are saying matters to them
- The purpose of the five LiA staff events is to harness ideas and quickly consolidate these into an unprecedented view of ‘what matters’ and ‘what gets in the way’

- The Sponsor group will then use this information to:
  - Agree corporate-wide quick wins and enablers in response
  - Advertise the opportunity for the 'First 10' teams / wards/ departments to pioneer adoption of LiA for themselves and prepare them ready for action

Phase Three and Four: These phases are associated with empowering staff and embedding the LiA approach in building momentum and traction across the whole organisation and include 'Pass it on' events. The focus throughout is on staff-led changes which make a real difference for patients, for the teams themselves, and for the Trust. There is extensive evidence of the impact this 'new way of working has', including positive outcomes for patients, for staff and for the Trust. Ultimately, this is a vehicle to improve organisational performance through the direct involvement of the people delivering the service or those supporting them to do so. Michael West (Lancaster Business School) describes LiA as 'a hallmarked approach to delivering the fundamental culture change we need in the NHS'.

### **3. RECOMMENDATIONS**

- 3.1 It is recommended that the Trust signs up to this approach in view of the potential benefits associated with staff engagement and empowerment, impacting positively on delivering high quality patient-centred care and services. This is a key element of the Organisational Development Plan (2013/15).
- 3.2 The LiA approach will also have as a key aim, the development of the UHL way of supporting service improvement. Staff will be placed at the centre of change, through altering the Trust's style of leadership and its approach to engaging with staff. Successful implementation will require management behaviours and skills which focus on securing the commitment of staff, engaging with them to release their creativity and enthusiasm, and supporting them to make change happen.
- 3.3 In adopting the LiA approach, the Trust Board is asked to confirm approval of the allocation of £155k budget, including LiA joining fees and pay costs in meeting staffing resource requirements.