



<b>To:</b>	Trust Board
<b>From:</b>	John Adler, Chief Executive and Kate Bradley, Director of Human Resources
<b>Date:</b>	27 March 2014
<b>CQC regulation:</b>	Regulation 23 Outcome 14: Supporting Workers

<b>Title:</b>	Listening into Action (LiA) Progress Report										
<b>Author/Responsible Director:</b>	Michelle Cloney, LiA Lead/ John Adler, Chief Executive & Kate Bradley, Director of Human Resources										
<b>Purpose of the Report:</b>	To update Trust Board on progress in relation to adopting Listening into Action (LiA) across UHL and to provide details of the plans for continued spread during 2014/2015										
<b>The Report is provided to the Executive Team for:</b>	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">Decision</td> <td style="width: 10%;"></td> <td style="width: 25%;">Discussion</td> <td style="width: 10%; text-align: center;">x</td> </tr> <tr> <td>Assurance</td> <td style="text-align: center;">x</td> <td>Endorsement</td> <td></td> </tr> </table>			Decision		Discussion	x	Assurance	x	Endorsement	
Decision		Discussion	x								
Assurance	x	Endorsement									
<b>Summary / Key Points:</b>	<p>This report sets out the progress made since adopting Listening into Action (LiA) in April 2013 and the plans for supporting continued spread of the approach during 2014/15</p> <p>An update is provided on:</p> <ul style="list-style-type: none"> <li>• Progress made by Wave 2 Pioneering teams and Enabling Our People (EoP) Schemes</li> <li>• Wave 1 EoP Schemes</li> <li>• Pulse Check Survey Results</li> <li>• Pass it On event to be held on 8 May 2014</li> <li>• Phase 5 Sustaining Spread of LiA</li> <li>• 5 work streams for 2014/15 to support the continued work to create a tipping point for change through the adoption of LiA across the Trust</li> <li>• Plans to implement the national Friends and Family Test for NHS Staff commencing in Quarter 1 (2014)</li> </ul>										
<b>Recommendations:</b>	<p>Trust Board are asked to:</p> <ul style="list-style-type: none"> <li>• Acknowledge work undertaken to date on Wave 2 Pioneering Teams and EoP Schemes and Wave 1 EoP Schemes</li> <li>• Note the significant improvements in the Pulse Check Survey Results between March 2013 and January 2014, and the comparison with other LiA organisations</li> <li>• Hold the date for the Pass It On event due to take place on 8 May 2014</li> <li>• Acknowledge the proposed plans for Year 2 LiA (Phase 5 Sustaining Spread), and the 5 work streams (Classic LiA, Thematic LiA, Management of Change LiA, Enabling LiA and Nursing into Action)</li> <li>• Acknowledge the process and timescales for surveying and reporting on the national Staff Friends and Family Test commencing in Quarter 1 (2014)</li> </ul>										

<b>Previously considered at another corporate UHL Committee?</b>	
An update was received by the Executive Team on 11 March 2014	
<b>Strategic Risk Register</b>	<b>Performance KPIs year to date</b>
Risk 3	Achieved Quarter 4 KPIs for Listening into Action Routemap implementation
<b>Resource Implications (eg Financial, HR):</b>	
This work is led by John Adler, Chief Executive; Kate Bradley, Director of Human Resources and the LiA Leadership Team (from 1 May 2013), working in collaboration with the UHL LiA Sponsor Group.	
For 2014/15, the LiA Team have access to the Navigator online tool through a 12 month licence. The online tool enables the team to administer Pulse Check surveys.	
<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>	
Links between the LiA team and the PPI team have been strengthened for Wave 2 Pioneering Teams. A named PPI lead will be allocated to each Pioneering Team in order to encourage and support Patient Listening activities within the 7 Step Approach.	
<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>Requirements for further review?</b>	
The Executive team and UHL Listening into Action (LiA) Sponsor Group will monitor 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:** 27 March 2014

**SUBJECT:** Listening into Action Progress Update (LiA) and plans for Year 2

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## **1. Introduction**

1.1 This report provides an update on progress in Phase 4 of the Listening into Action (LiA) Route Map associated with 'Embedding LiA as the way we do things at UHL'. Specifically an update is provided on:

- Progress made by Wave 2 Pioneering Teams and Enabling Our People (EoP) Scheme
- Wave 1 EoP Schemes
- Pulse Check Survey Results
- *Pass It On* Event to be held on 8 May 2014

1.2 In addition this report provides details on plans for Year 2. Specifically an update is provided on:

- Phase 5 *Sustaining spread of LiA*
- Overview of 5 work streams for 2014/15 to support the continued work to create a tipping point for change through the adoption of LiA across the Trust

1.3 Finally this report provides an overview of plans to implement the national Friends and Family Test for NHS Staff commencing in April 2014.

## **2. Wave 2 Pioneering Teams and EoP scheme**

2.1 Wave 2 commenced their LiA journey in November 2013.

2.2 Wave 2 consists of eleven Pioneering Teams and one new Enabling Our People (EoP) Scheme

2.3 Each team works through the 7 step approach to adopting LiA at a local level over approximately 20 weeks. The steps are:

Step 1: Be clear about your mission

Step 2: Set up a small Sponsor Group

Step 3: Get the right people on board

Step 4: Prepare for a Listening Event

Step 5: Host a Listening Event

Step 6: Move into action

Step 7: Celebrate successes to encourage others and keeping up momentum

2.4 Each team was allocated a Sponsor to help coach and guide the teams and to help them unblock the way should they experience any barriers to their progress.

2.5 The Wave 2 Teams include:

Team	Lead	LiA Sponsor	LiA Team
Information and Data Quality	Shirley Priestnall	Kate Shields	Sue Pavord
Occupational Therapy & Physiotherapy	Lynn Cooke, Pru Clifton & Emma Pilley	Kate Bradley	Michelle Scowen
Trust Adolescent and Young Adult Group	Helena Gleeson, Sue Mason & Karl Walker	Ian Scudamore	Linsey Milnes
Junior Doctors Administrators	Rachel Williams	Nick Moore	Linsey Milnes
Pressure Ulcer Ambition	Vicky Osborne & Anna Kendrick	Rachel Overfield	Linsey Milnes
Fertility and Assisted Conception	Neelam Potdar & Charlene Freeman	Mark Wightman	Linsey Milnes
Haematology Stroke Medicine	Jane Strong & Amit Mistri	Catherine Free	Sue Pavord
Access Trauma Orthopaedics	Stephen Williams, Nicky Lucas & Cali Reid	Richard Power	Sue Pavord
Palliative Care Team	Jane Lee, Karen Badgery & Rebecca Proctor	Carole Ribbins	Michelle Scowen
Pharmacy	Alison Brailey & Marla Martinez	Suzanne Khalid	Michelle Scowen
Quality Mark for Elder Friendly Wards	Jenny Kay	Rachel Overfield	Michelle Scowen
EoP Scheme Improving Clinical Coding	Sanjay Agrawal, John Roberts & Gaynor Reynolds	Kevin Harris	Sue Pavord

2.6 All teams have now entered Step 6 **Moving into Action** having had some very successful listening events, with fantastic and enthusiastic attendance.

2.7 Details of the Mission and Strapline for Wave 2 are set out below:

#### 2.7.1 Palliative Care

Strapline: *Compassionate care counts for all*

Mission: Aiming to provide an improved service for palliative and end of life care throughout the Trust.

### 2.7.2 **Junior Doctors Administrators**

Strapline: *Your voice, your change, your opportunity*

Mission: Creating a team that will enable the junior doctor workforce to experience effective and efficient administration enabling them to deliver high quality patient care.

### 2.7.3 **Quality Mark**

Strapline: *On your marks!*

Mission: Planning to improve access to a range of services for patients on our 8 Quality Mark wards at LRI.

### 2.7.4 **Physiotherapy /Occupational Therapy**

Strapline: *Be active with therapy*

Mission: Improving provision of service to patients on a range of wards and critical care at LGH.

### 2.7.5 **Pharmacy**

Strapline: *The right dose for you*

Mission: Enhancing their service to patients and users throughout the Trust.

### 2.7.6 **Pressure Ulcer Ambition**

Strapline: *Don't give in to pressure*

Mission: Working with staff, patients and their carers, using a zero tolerance approach, to eliminate all avoidable pressure ulcers at UHL.

### 2.7.7 **Access Trauma Orthopaedics Team**

Strapline: *Getting it Right at every Step*

Mission: The aim is to reduce waiting times and smooth the pathway for patients presenting with fractures and musculo-skeletal conditions.

### 2.7.8 **Information & Quality**

Strapline: *Letters get Together*

Mission: Reviewing and improving processes within the Trust to reduce the volume of misdirected letters returned to UHL.

### 2.7.9 **Haematology and Stroke Medicine**

Strapline: *Spot and stop clots!*

Mission: Working to improve the pathway for patients with suspected deep vein thrombosis.

### 2.7.10 **Adolescent & Young Adults Group**

Strapline: *Safe + Sound*

Mission: Focusing on young people between the ages of 11 and 25 and making our services more welcoming & appropriate for this age group.

### 2.7.11 **Fertility and Assisted Conception Unit**

Strapline: *Positive patients, positive staff, positive outcomes*

Mission: Working across boundaries to improve services, quality of care and patient experience at Leicester Fertility Centre, by engaging with patients, staff and GPs.

### 2.7.12 EoP Scheme Clinical Coding

Strapline: *Code breakers*

Mission: Working together to increase accuracy of patient records.

## 3. Continued support for Wave 1 Enabling Our People Schemes

3.1 Eight of the original ten EoP Schemes have continued on their LiA journeys working on the longer term actions identified from their specific listening events. These are:

- Recruitment
- Communications
- Reducing paperwork and processes
- Equipped to Care – Medical Equipment Libraries
- IT
- Procurement
- Right Staffing
- Car Parking and Travel

3.2 Each of the above teams has continued to be supported by a LiA Sponsor and each has been asked to attend the LiA Sponsor Group to share their progress, identify any barriers or blocks to success and also to outline if they require any specific support from the Sponsor Group members.

## 4. Pulse Check Survey

4.1 The Trust undertook a second Pulse Check survey in January 2014 following an initial Pulse Check survey in March 2013. Appendix A demonstrates that the Listening into Action (LiA) pulse check saw significant improvements.

4.2 The most significant improvements in this survey relate to improvements in the provision of high quality services, recognition of staff for the contribution that they make and clarity in relation to roles. Pulse checks will continue to operate across the Trust in order to monitor the LiA impact.

4.3 Appendix B provides an overview of the response rates to Survey One and Survey Two and compares UHL to the average score of other NHS LiA Organisations.

4.4 UHL has more positive scores in 13 of 15 questions when compared to the average scores of other NHS LiA organisations. The only question which is not scoring higher than the average scores of comparator LiA organisations is Question 1: 'I feel happy and supported working in my team/department/service' with a -0.76% less positive score at Survey Two.

4.5 Please note that Question 8 changed between surveys and has at this point only been asked in Survey Two (January 2014). UHL Question 8 has scored 46.11% with 49.8% scored by comparator NHS LiA organisations.

**5. Pass It On event ( 8 May 2014)**

- 5.1 The Pass It On event for Wave 2 Teams and Wave 1 EoP Schemes will be held on **8 May 2014** and will be an opportunity for them to share their successes and to pass the baton on to Wave 3.
- 5.2 During March / April applications to participate in Wave 3 will be collected and considered, so that the new teams will be able to attend the Pass It On event and hear what is involved.
- 5.3 Trust Board members are asked to save the date from 10:00 until 14:30. Further details of the programme will be circulated in due course.

**6. Year 2 (Phase 5) Sustaining Spread of Listening into Action**

- 6.1 Year 2 will continue to build on Phases 1-4.
- 6.2 Phase 5 will focus on activities which are aimed at sustaining the spread across the Trust and supporting corporate priorities, such as the engagement activities associated with the Elective Care Bundle. In addition, the LiA Plan is aligned to the Organisational Development (OD) Plan for 2014/15. Work stream 2 of the OD Plan states that the Trust will Improve Two Way Engagement, and the vehicle for this is Listening into Action.
- 6.3 Phase 5 will commence 1 April 2014 for 12 months
- 6.4 The diagram below provides an overview of how Phase 5 relates to the previous 4 phases.
- 6.5 The key to success within Phase 5 is to ensure that Trust Board remain committed to LiA so that staff are enabled to make changes at a local level which benefit patients and staff thereby creating a culture where LiA becomes the 'way we do things at UHL'.

Listening into Action  
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## 7. Phase 5 work streams

7.1 During 2013/14 the Trust worked to adopt Phases 1-4 of the LiA Optimal Framework. The resultant activity is typically referred to as '**Classic LiA**'.

During 2014/15 the Trust will continue to embed *Classic LiA* by:

- Supporting a further two Waves of Pioneering Teams to adopt LiA at a local level. Wave 3 will commence in May 2014 following the Pass It On event on 8 May 2014.
- Scheduling Pass It On events at the end of each Wave in order to 'pass the baton' on to the next Wave.
- Identifying Quick Wins and communicating these to staff via Chief Executive (CE) Briefings.
- Publishing the LiA *Pass It On* Newsletter quarterly to help spread the word.
- Developing the network of LiA Innovators i.e. Pioneering Team and EoP Scheme Leads who have completed Steps 1-6 will be developed so that new team leaders benefit from their expertise.

7.2 In addition to Classic LiA, a number of additional work streams evolved in 2013/14, such as Junior Doctors LiA and the Meals and Cleaning LiA. Each of these events were hosted by an Executive Director or the Chief Executive. This type of activity is typically referred to as '**Thematic LiA**'.

During 2014/15 the Trust will continue to support *Thematic LiA* by:

- Supporting senior leaders to host Thematic LiA activities. These activities will respond to emerging priorities within Executive Directors' portfolios. Each Thematic event will be hosted and led by a member of the Executive Team or delegated lead.

7.3 Following the Pass It On event in November 2013 John Adler, Chief Executive announced that all future change management initiatives would host a listening event. LiA Engagement Events are therefore now held for change projects associated with service transformation and for HR Management of Change (MoC) initiatives. This type of activity is typically referred to as '**Management of Change LiA**'.

During 2014/15 the LiA Core Team will support *Management of Change LiA* by:

- Supporting and monitoring the range of activities associated with Management of Change LiA.
- Providing 'Train the Facilitator' sessions to ensure that the principles of LiA are adopted across the Trust and that there is a *genuine* sense that staff are being listened to within each engagement event.

7.4 Building on the three types of LiA activities detailed above, the LiA Core team endorsed by the LiA Sponsor Group will also provide support to UHL strategic priorities, such as the Elective Care Bundle, where employee engagement is required. This type of activity will be referred to as '**Enabling LiA**'.



During 2014/15 the LiA Core Team will replace Enabling Our People Schemes with *Enabling LiA* activities by:

- Responding to the identified Strategic Priorities for the Trust by prioritising the engagement activities needed
- Providing 'Train the Facilitator' sessions to key personnel to ensure that each priority is appropriately equipped to host engagement events and use the 7 Steps for local adoption of LiA.

7.5 The final work stream identified was specifically requested by Rachel Overfield, Director of Nursing and the Nursing Executive Team and involves the proposal to support all nurse led Wards or Departments to host a listening event and implement any associated actions. This work stream will be referred to as '**Nursing into Action**'.

During 2014/ 15 the Nursing Executive Team supported by the LiA Core Team will roll out *Nursing into Action* by:

- Agreeing a '*Nursing into Action*' programme of activities during March / April 2014
- Confirming the roles and responsibilities for the nursing leaders within CMGs so that Ward and Department Managers are adequately supported to undertake *Nursing into Action* activities
- Confirming the reporting arrangements between Ward and Department Managers and their Matron and Head of Nursing, so that they are fully aware of the listening events being hosted in their CMGs and the associated actions and quick wins and that they are actively unblocking the way and helping teams to raise the bar
- Confirming the reporting requirements from the Heads of Nursing to the Nursing Executive Team
- Identifying the 'Mission' (Step 1) for all *Nursing into Action* activities so that Ward and Department Managers focus on key performance indicators around quality of care
- Monitoring the release of Ward or Department Managers to attend a training session so that they are be able to host a listening event, identify quick wins and local priority actions and implement these
- Confirming the responsibility for the LiA Core team to communicate the training schedule and report on uptake by Ward and Department Managers.

## **8. National Friends and family Test for NHS Staff**

8.1 The Friends and Family Test (FFT) for NHS Staff must be introduced by the Trust within Quarter 1 of 2014/15. The test is a national survey, and the results will be submitted to NHS England. Further information is still expected on how NHS England will publish the results.

8.2 The FFT for Staff is a 2014/15 CQUIN target. The target requires the organisation to have implemented the survey.

8.3 The NHS England Guidance for implementing, submitting and publishing the Friends and Family Test for NHS Staff was published on 28 February 2014 providing details on how the survey should be conducted and reported.

#### 8.4 Key points to note are as follows:

- The Trust will be collecting and reporting quarterly for Quarter(Q)1, Q2 and Q4 after the end of each quarter. For Q3, when the annual staff survey is undertaken, the Trust will not survey staff using the Staff FFT survey
- The Trust will be surveying all staff in each of the required Quarters, using electronic and hand held surveying techniques
- Staff will have the opportunity to respond to two questions with a free text comment provided after each question:
  - How likely are you to recommend this organisation to friends and family if they needed care or treatment?
  - How likely are you to recommend this organisation to friends and family as a place to work?
- The survey will be implemented providing staff with anonymity
- The Trust will be collecting equalities and diversity data, although the completion of this will be optional. This data is for local use and not reported nationally
- The Trust must submit data to NHS England in Q1, Q2 and Q4, which includes:
  - The breakdown of responses for each question.
  - The total number of responses for each collection method
- The first set of results for Staff FFT will be reported to NHS England in July 2014 and will be published by NHS England the month following submission. The Trust must publish the results locally.

### 9. Recommendation

#### 9.1 Trust Board are asked to:

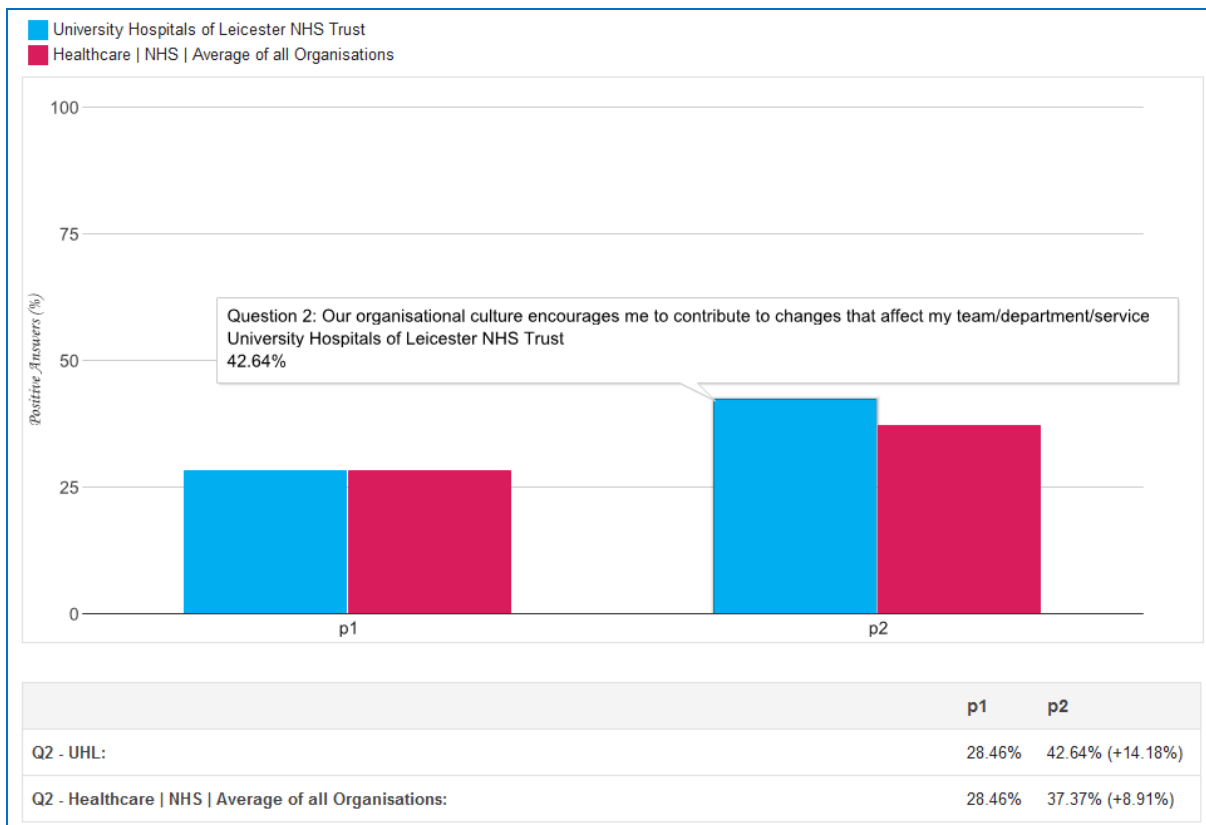
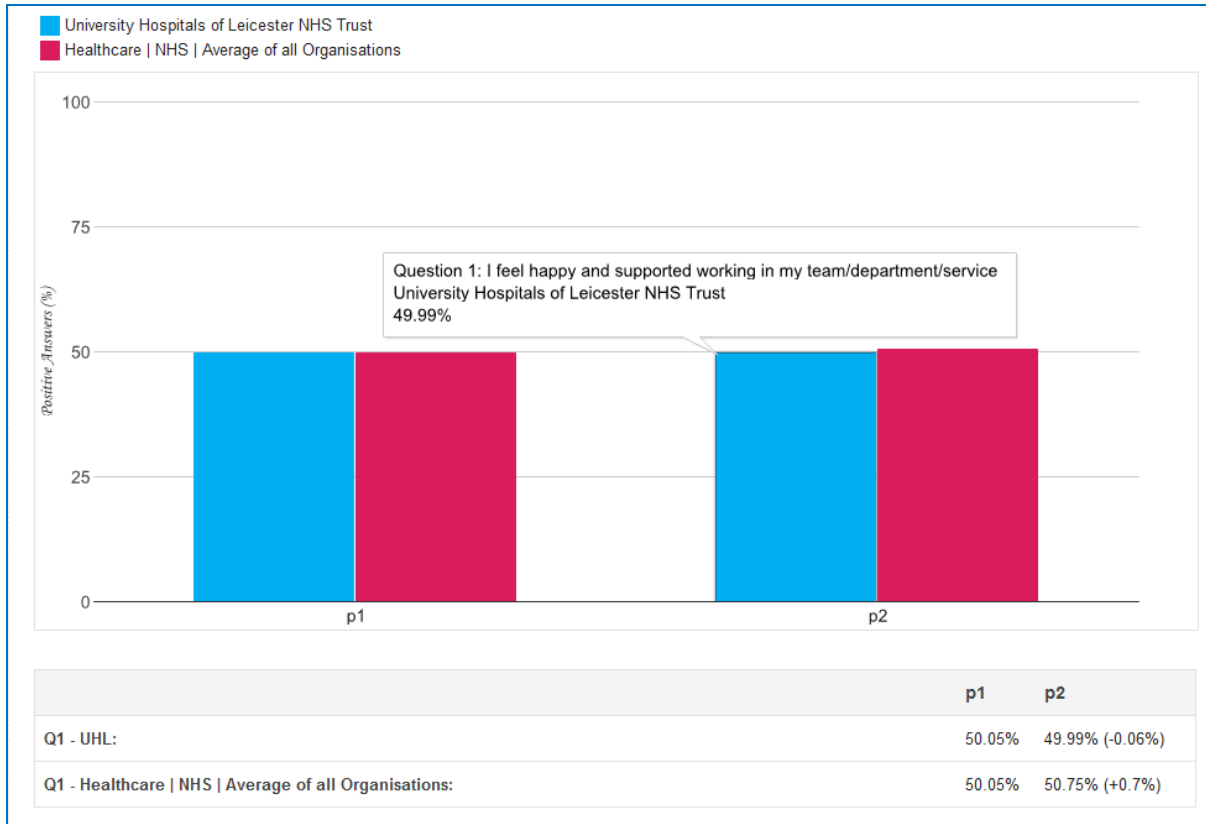
- Acknowledge work undertaken to date on Wave 2 Pioneering Teams and EoP Schemes and Wave 1 EoP Schemes
- Note the significant improvements in the Pulse Check Survey Results between March 2013 and January 2014, and the comparison with other LiA organisations
- Hold the date for the Pass It On event due to take place on 8 May 2014
- Acknowledge the proposed plans for Year 2 LiA (Phase 5 Sustaining Spread), and the 5 work streams (Classic LiA, Thematic LiA, Management of Change LiA, Enabling LiA and Nursing into Action)
- Acknowledge the process and timescales for surveying and reporting on the national Staff Friends and Family Test commencing in Quarter 1 2014

## **Appendix A: Listening into Action Pulse Check Results**

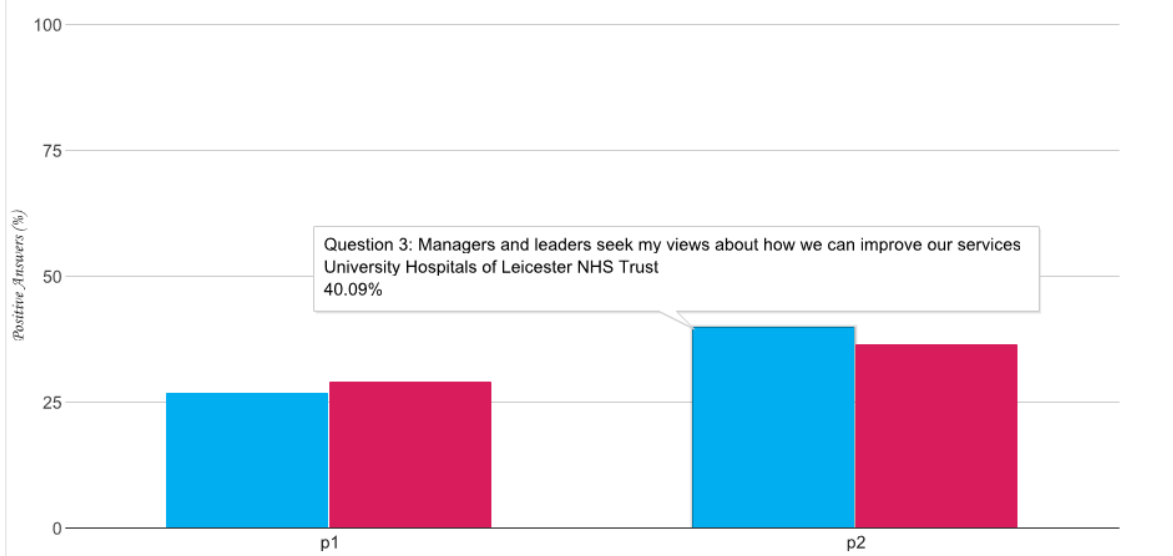
<b>Pulse Check Questions</b>	<b>1<sup>st</sup> Pulse Check</b>	<b>2<sup>nd</sup> Pulse Check</b>	<b>Variance</b>
I feel happy and supported working in my team/department/service	50.05%	49.82%	-0.23
Our organisational culture encourages me to contribute to changes that affect my team/department/service	28.46%	42.61%	+14.15
Managers and leaders seek my views about how we can improve our services	27.07%	40.08%	+13.01
Day-to-day issues and frustrations that get in our way are quickly identified and resolved	12.44%	25.59%	+13.15
I feel that our organisation communicates clearly with staff about its priorities and goals	28.25%	46.42%	+18.17
I believe we are providing high quality services to our patients/service users	30.09%	53.73%	+23.64
I feel valued for the contribution I make and the work I do	17.3%	43.1%	+25.8
I would recommend our Trust to my family and friends	-	46.19%	-
I understand how my role contributes to the wider organisational vision	41.28%	72.36%	+31.08
Communication between senior management and staff is effective	16.64%	36.24%	+19.6
I feel that the quality and safety of patient care is our organisation\'s top priority	-	52.85%	-
I feel able to prioritise patient care over other work	-	48.71%	-
Our organisational structures and processes support and enable me to do my job well	-	33.92%	-
Our work environment, facilities and systems enable me to do my job well	-	32.39%	-
This organisation supports me to develop and grow in my role	-	36.77%	-

**Appendix B:**

**UHL Pulse Check Survey – Survey One & Two  
Comparison between UHL and all LiA Organisations**

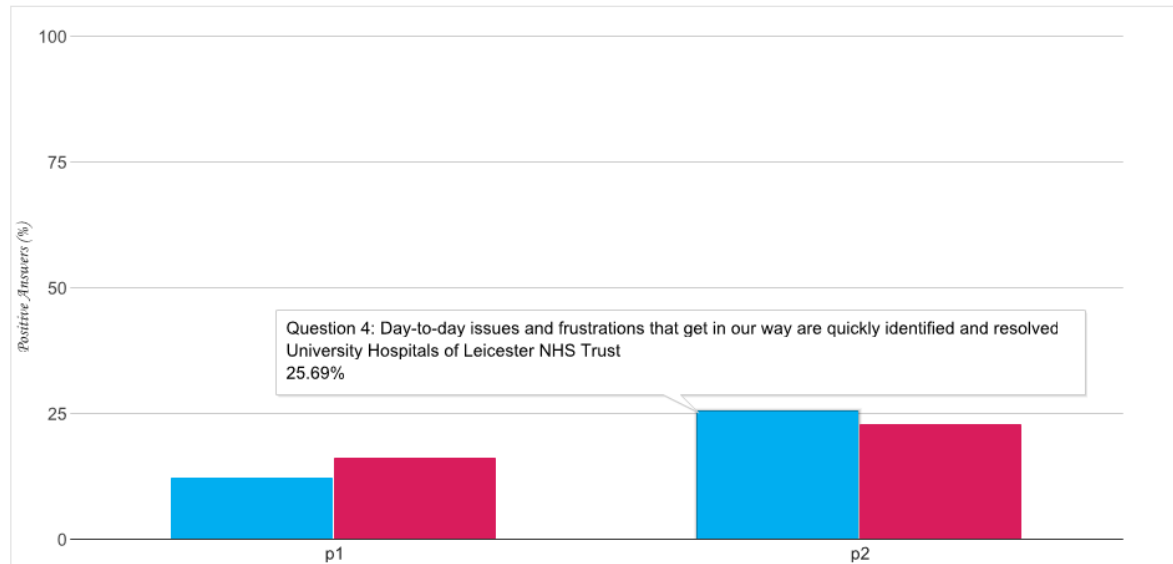


■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



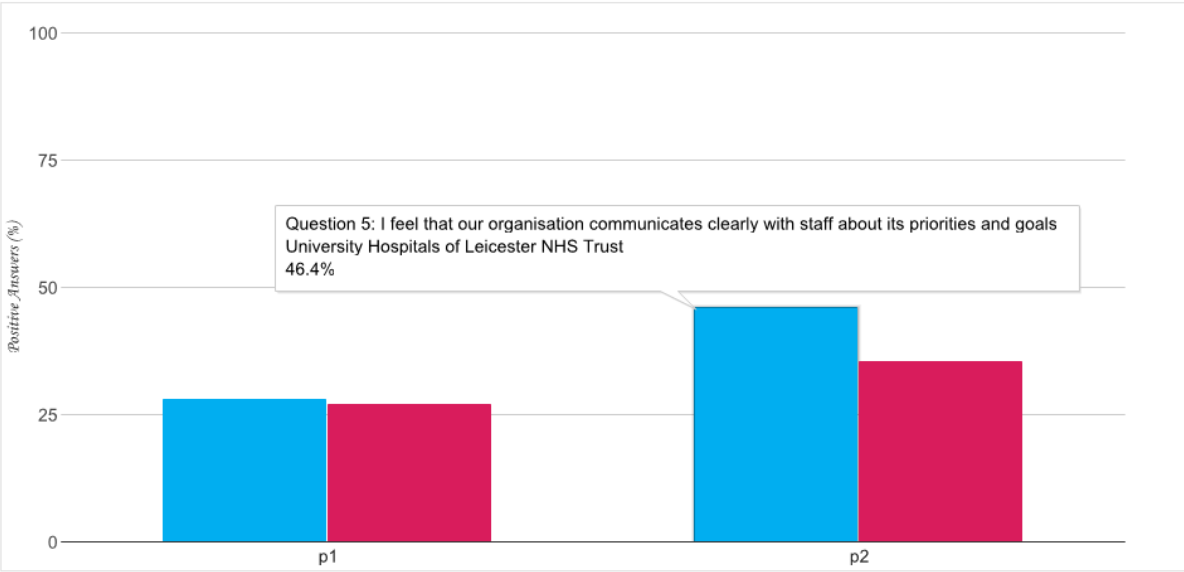
	p1	p2
Q3 - UHL:	27.07%	40.09% (+13.02%)
Q3 - Healthcare   NHS   Average of all Organisations:	29.17%	36.54% (+7.37%)

■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



	p1	p2
Q4 - UHL:	12.44%	25.69% (+13.25%)
Q4 - Healthcare   NHS   Average of all Organisations:	16.22%	22.95% (+6.73%)

■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



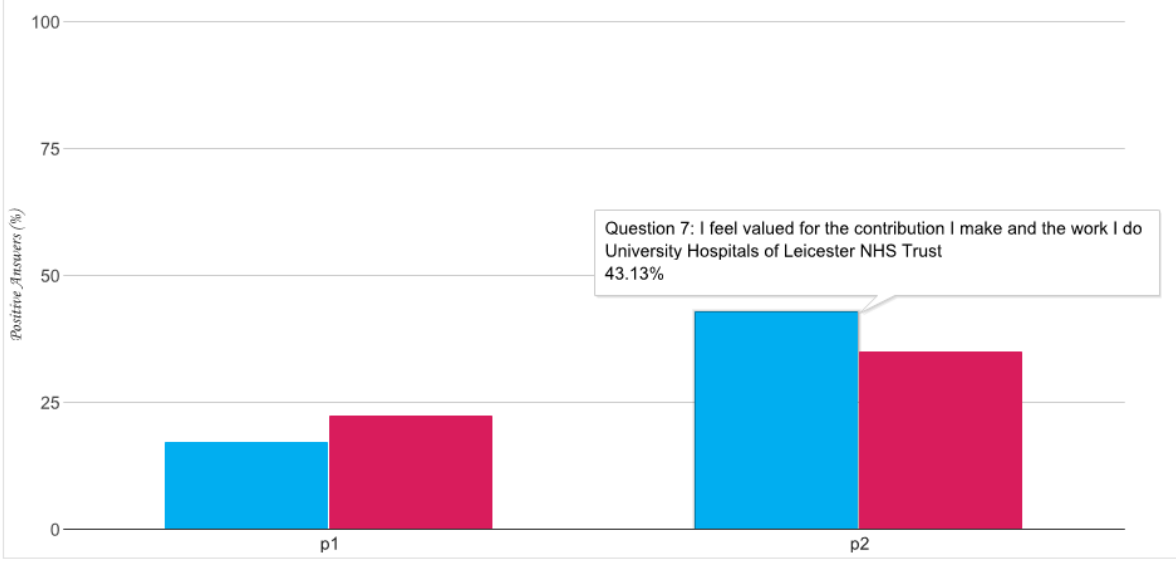
	p1	p2
Q5 - UHL:	28.25%	46.4% (+18.15%)
Q5 - Healthcare   NHS   Average of all Organisations:	27.21%	35.55% (+8.34%)

■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



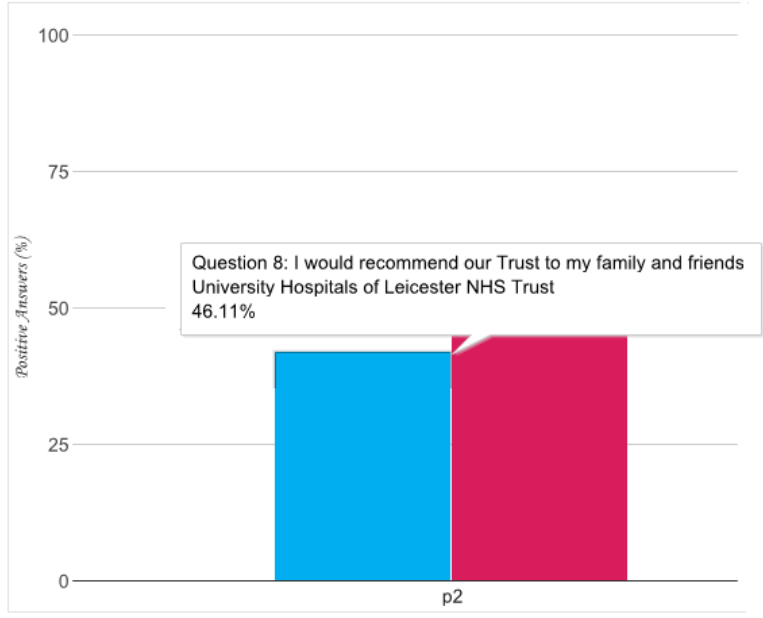
	p1	p2
Q6 - UHL:	30.09%	53.86% (+23.77%)
Q6 - Healthcare   NHS   Average of all Organisations:	40.19%	50.41% (+10.22%)

■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



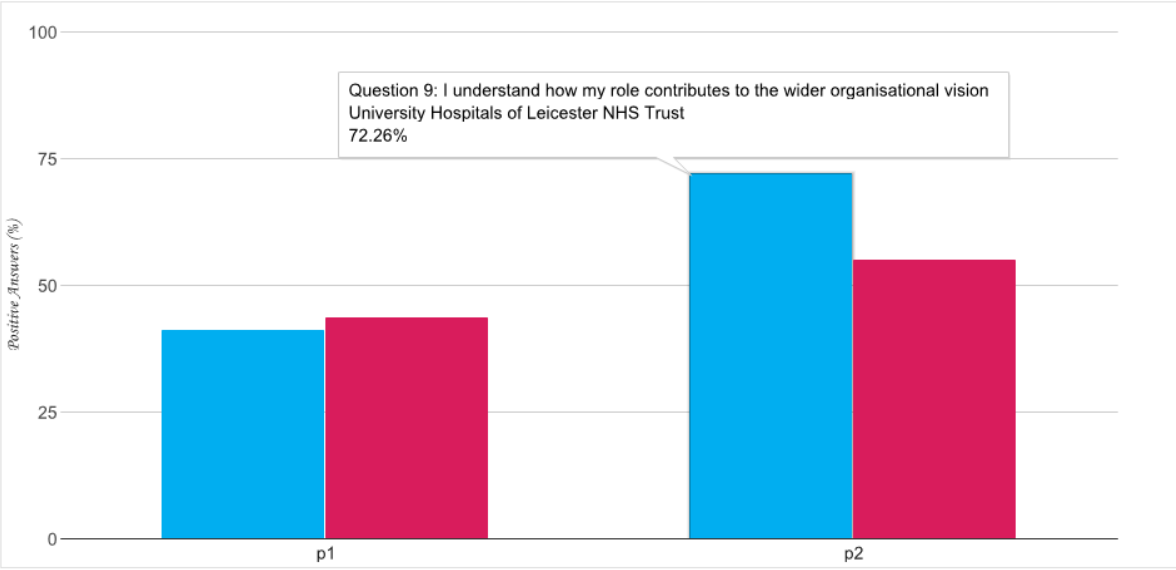
	p1	p2
Q7 - UHL:	17.3%	43.13% (+25.83%)
Q7 - Healthcare   NHS   Average of all Organisations:	22.57%	35.24% (+12.67%)

■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



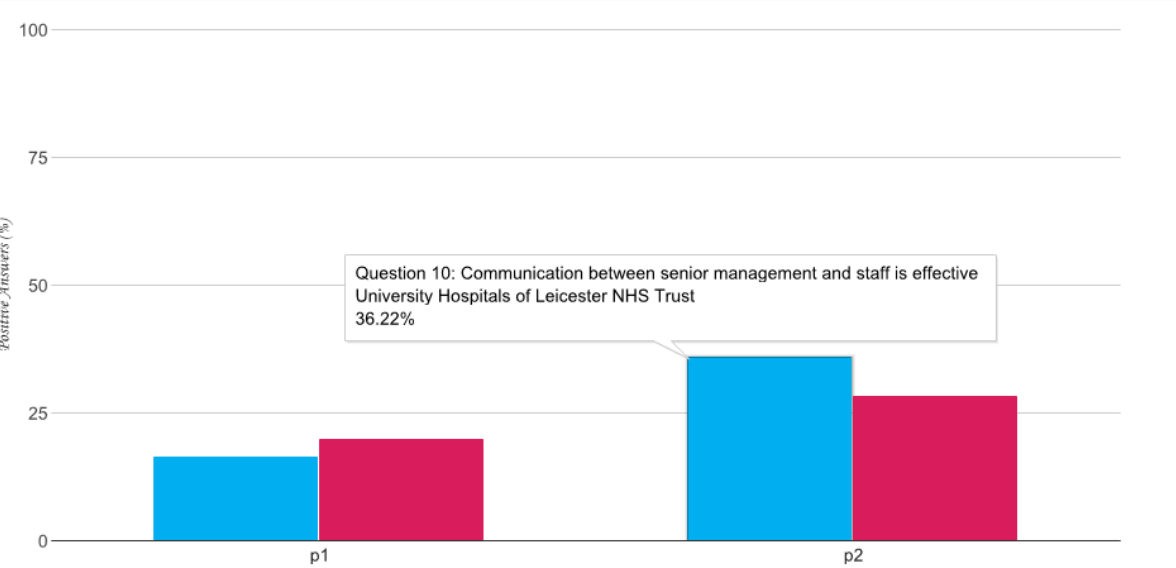
Q8 - UHL:	46.11%
Q8 - Healthcare   NHS   Average of all Organisations:	49.8%

■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



	p1	p2
Q9 - UHL:	41.28%	72.26% (+30.98%)
Q9 - Healthcare   NHS   Average of all Organisations:	43.77%	55.08% (+11.31%)

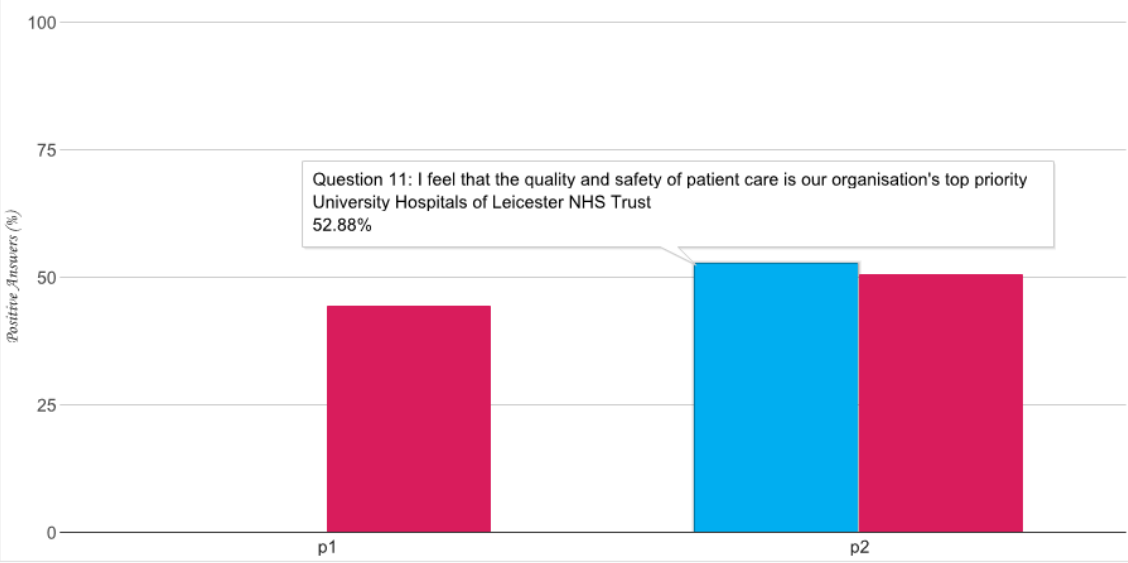
■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



	p1	p2
Q10 - UHL:	16.64%	36.22% (+19.58%)
Q10 - Healthcare   NHS   Average of all Organisations:	20.01%	28.57% (+8.56%)

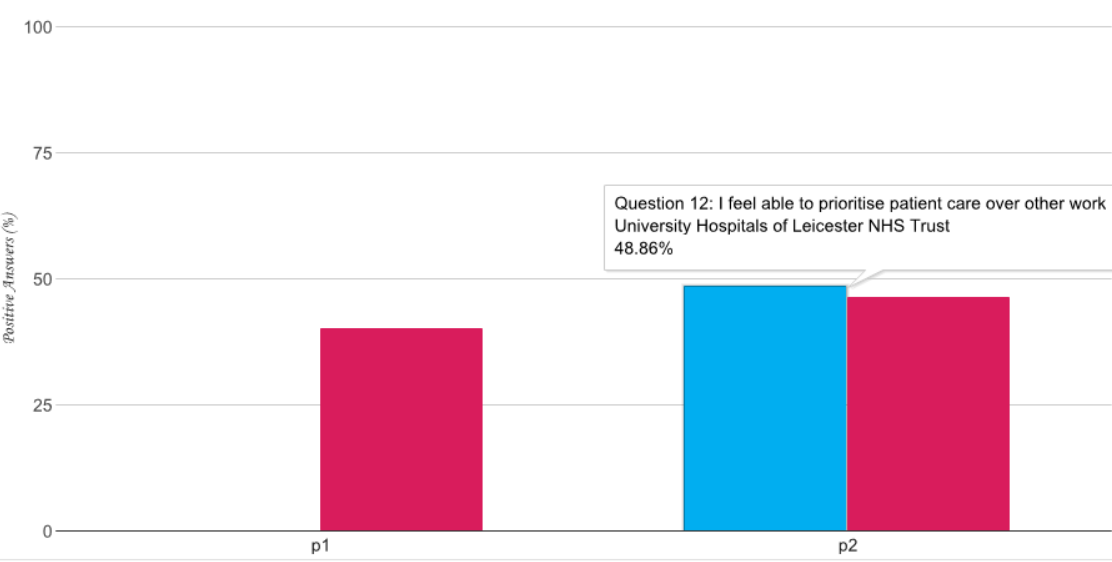


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■ Healthcare | NHS | Average of all Organisations

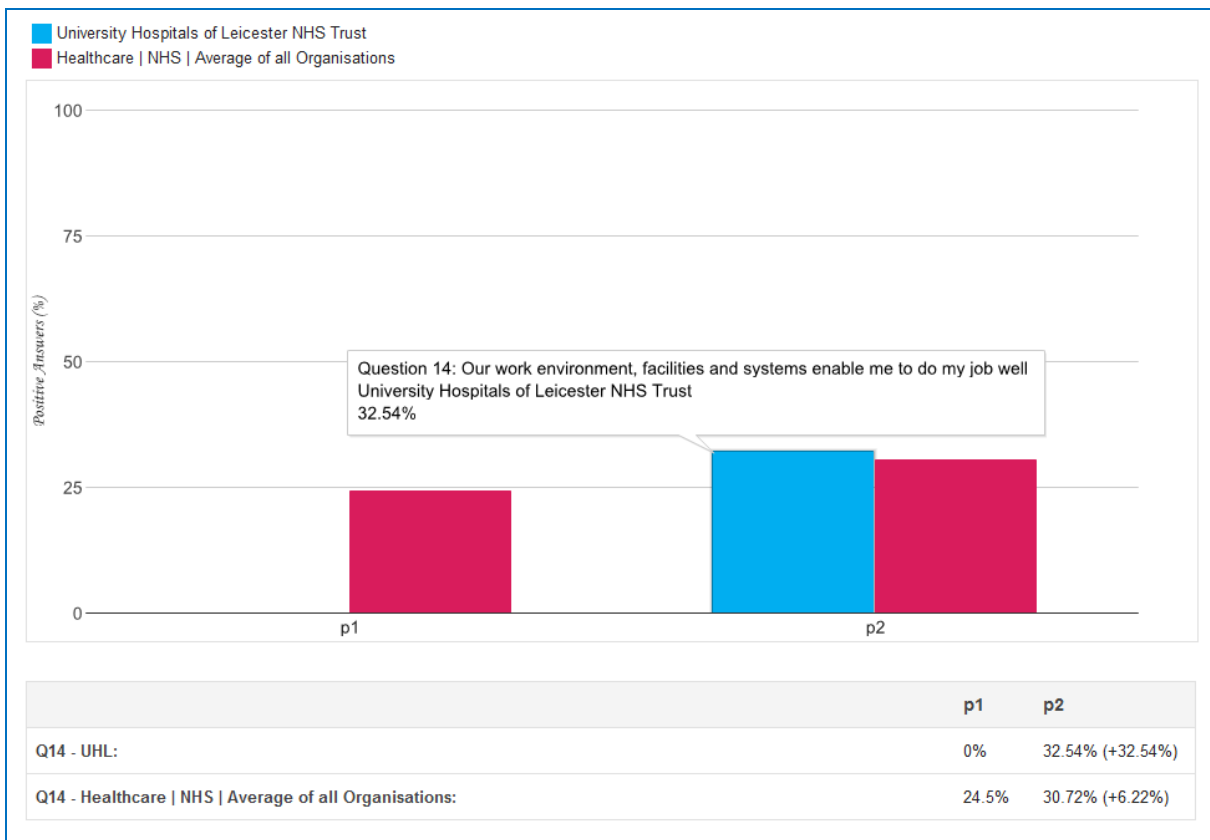
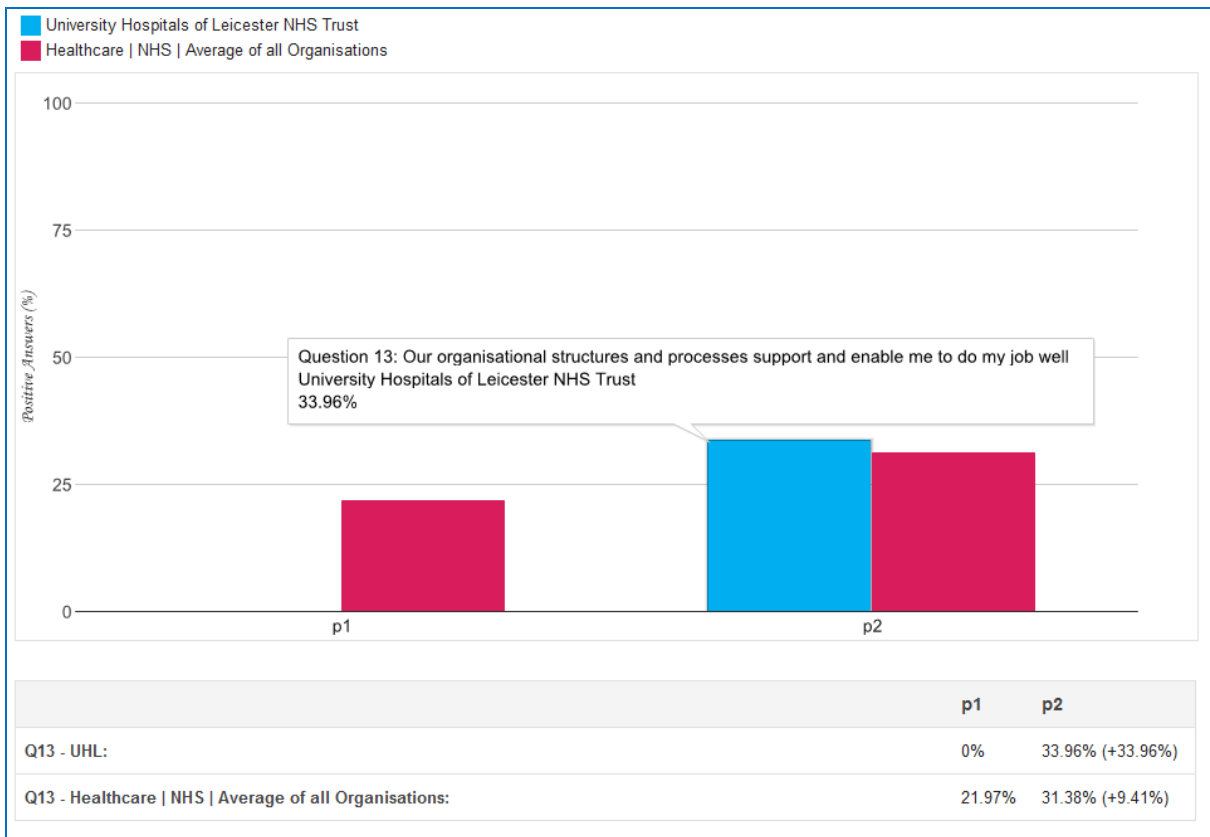


	p1	p2
Q11 - UHL:	0%	52.88% (+52.88%)
Q11 - Healthcare   NHS   Average of all Organisations:	44.48%	50.86% (+6.38%)

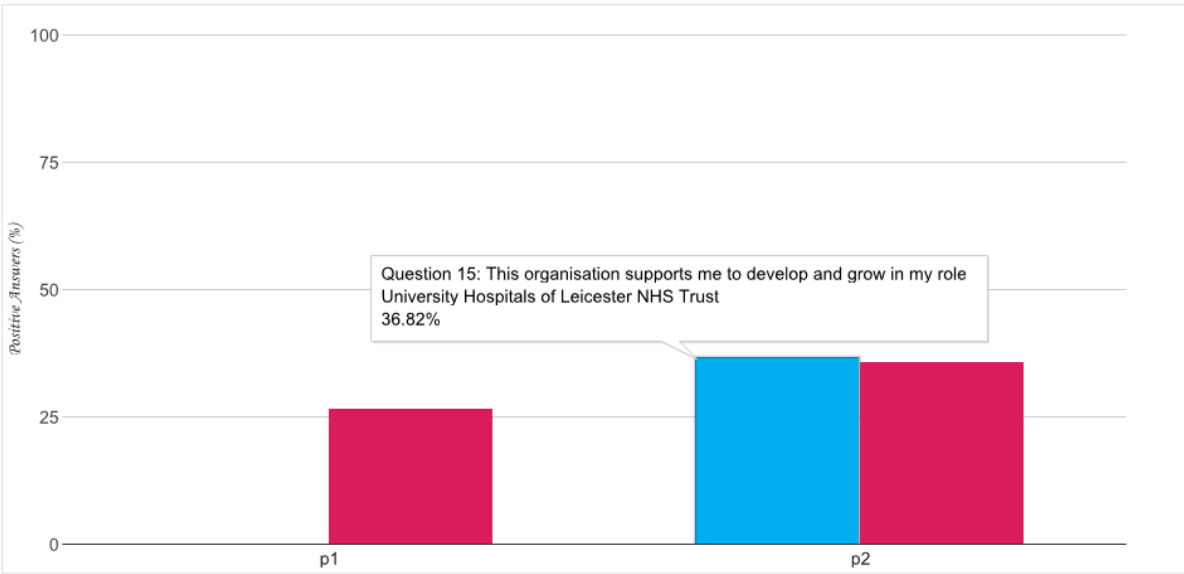
■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



	p1	p2
Q12 - UHL:	0%	48.86% (+48.86%)
Q12 - Healthcare   NHS   Average of all Organisations:	40.34%	46.58% (+6.24%)



■ University Hospitals of Leicester NHS Trust  
■ Healthcare | NHS | Average of all Organisations



	p1	p2
Q15 - UHL:	0%	36.82% (+36.82%)
Q15 - Healthcare   NHS   Average of all Organisations:	26.8%	35.83% (+9.03%)