Working Document not final submission





Theme of Survey	Action proposed	Time frame	Issues / Risks	Outcome / Measure	Lead	
Theme of our rey	7totion proposed	Time traine	issues y rusio	outcome / measure	responsible	Achieved
	Circulate & discuss MH & LD staff survey results with Union representatives, identify key themes for focus	Jan-21			SB /DR	Complete
	Circulate & discuss staff survey results with Senior team, identify key themes for focus	Dec-20			SB /DR	Complete
Overall	Circulate staff survey results to staff via divisions, to be shared with all staff through team meeting within directorates	Feb-21	Ensuring inclusion of all staff due to technical/ communication issues and engagement with staff shielding or absence from work	All staff to be able to comment and provide ideas for improvement or sharing has best practice, low response rate for staff survey	DR / Divisional Managers	Partial completed circulated to divisions to distribute
	Establish MH & LD Action Group with membership from staff representatives & Divisions + OD and HR to capture ideas / actions for responding to the survey	Feb-21	Availability of staff and union representatives to attend meetings	First meeting held February 2021 with monthly meetings established. Next meeting scheduled on 9th March 2021	SB /DR	Complete
	Each division to identify mechanism for MH & LD action plan to be implemented within each directorate and team	Mar-21			Divisional Manager & Divisional representative	Partial completed nominated representative identified from each division
Engagement 'Improvement in own area of work'	Managers to review with all staff whether there are sufficient resources, IT access etc. Have any concerns been raised on the risk register. Link with digital champions		Some staff have no access to communication tools and IT and will be hard to reach, Literacy level (reading or IT) may be low with some staff. Wifi issues		Team Managers	Partial achieved
	Improvement in own area of work to be discussed in PADR or supervision however Managers to encourage ideas for improvement to be shared as they arise either individually or in team meetings		Pressures placed on staff and the system by COVID- 19 and other associated pressures to allow staff the time and capacity to engage		Team Managers	Ongoing
	Team to undertake environmental impact audit in their own area of work to assess recycling, use of energy, alternative ways of working		Financial constraints for improvements identified	Reduce energy / travel costs if alternative method considered. Better for environment and staff	Team Managers	Partial completed

	Committee to put aside dedicated time to invite nominations from staff to present on any aspect of innovation and learning through the COVID period through mechanism of Posters, presentations	Jul-21	To ensure circulation to all staff within the group and to avoid being specific in the manner staff can present their views to assign two days of hearing individuals stories so that time release and availability issues are avoided	Afford an opportunity for individual staff or teams to share learning, reflect on experiences and link in with colleagues	Nicola Derrick	
	Each Directorate within each division to explore the method of communication staff find beneficial within the directorate, and to ask where improvements can be made in communications and whether there are specific issues with methods currently used email / teams consider use of staff bulletin / Posters. Improved use of social media group facebook page		Some staff have no access to communication tools and IT and will be hard to reach, Literacy level (reading or IT) may be low with some staff. Geographical spread of staff within the group, mixture of health / local authority and private sites	Employees are central to the solution to be involved listened to and invited to	Directorate Managers / Lead Nurses	Ongoing
	MH & LD strategy to be shared across the group.		Management structures (e.g. lack of communication about management recruitment/organisation and a lack of transparency at times) has featured commonly over the last 12 months	involved in decision making / influence	Senior Team / Divisional Managers / Head of Nursing / Psychology Leads / Clinical Directors to ensure that strategy modernisation plans are shared within their areas and staff contribution welcomed	Ongoing
	Regular meetings to be held with Union representatives to update on service change and for Union representatives to alert to staff concerns	Ongoing at least once a month	Availability of Managers and union representatives to attend meetings	Better partnership working and increased understanding and engagementso union representatives have the opportunity to share staff concerns and be involved in decision making / influence improvements to patient care or area of work for staff	Senior team / HR / Union representatives	Completed ongoing
Engagement 'Involved in discussions of change in work / department / team	Review how we engage within the unit in line with OCP when implementing chanage		Considering the current climate (Covid 19), sometimes decision making is not as collaborative / autonomous as it used to be and that managers / IPC professionals are more likely to make decisions surrounding our practice/ service.	If staff are engaged with at an early stage encourages them to come on board with the change. Employee voice is encouraged for reinforcing and challenging views. Employees are central to the solution to be involved listened to and invited to contribute their experience, expertise and ideas also underpins the work of developing a just culture and compassionate leadership	Senior Team / Divisional Team Managers	Ongoing
	Ensure all managers are provided with the guidance on managing service change and HR to target identified area with training		Non compliance with OD policy can result in disengaged staff and grievances around process	Greater knowledge of management of change and improved engagement to reduce the potential impact of change to staff and patients	Senior team / HR	Partial completed templates and overview provided to Lead Nurses, Directorate Managers and Heads of Psychology

	Raise awareness of DU Wellbeing Champions, to assist in promoting the values and behaviours of the HB and policies and services available to staff.	Availability of Wellbeing champions to attend updates and share information, consistency in areas	Access to source of information regarding Wellbeing materials	Divisional teams	Partially complete
	Meet the Senior Team Q & A sessions to be held quarterly	Some staff are not aware of changes within the group	Visible empowering compassionate leadership to communicate, create ownership, involvement and engagement, which would help the group to prioritise themes for action and improvement.	RM	Ongoing first session held in February 2021
	Circulate within the group, programme of Staff Engagement – 'Thinking Allowed' delivered by OD colleagues and encourage release	Release and capacity of staff	Remote means of staff engaging / contributing to the conversation, held to test key themes for improvement and to support Service Group action plans and deliverables	SB / Senior Managers / Team Managers	Partially completed circulated to all Heads of Service and divisons to circulate
	Meet the Divisional Team managers bi monthly Q & A sessions	Some staff are not aware of divisional / directorate changes within the group	Visible empowering compassionate leadership to communicate, create ownership, involvement and engagement, which would help the group to prioritise themes for action and improvement.	Divsional Manager	Sessions to be scheduled
	Ensure Managers have a clear understanding of engagement & the PADR process	Mechanism for ensuring all managers are included	focus on supporting our leaders, how they communicate and involve staff in decision-making.	HR / Divisional teams	Partial completed templates and overview provided to Lead Nurses, Directorate Managers and Heads of Psychology
	All staff have an annual PADR scheduled for 2021 to 2022, which is protected time with both management and professional input	Availability of Managers and staff within pressured work environments	Employees need to be involved listened to and invited to contribute their experience, expertise and ideas for working to the values and developing a just culture and compassionate leadership. They need an opportunity to raise wellbeing concerns and to discuss worklife balance to enable attendance at work to be supported	All Managers	Partial complete all areas to have clear plans for the next financial year when PADR will be held for each person
	Managers to share Wellbeing at work strategy and additional information & support available via email and team meetings	Balancing positives of home working versus changed or reduced daily engagement with others. Access to information dependent on communication method utilised	Staff are aware what support is available to access in addition to team and management support	All Managers	Partial complete documentation has been circulated by email however there needs to be a check if all staff can access material in this manner
Immediate Experience of work 'feeling of belonging' & 'Manager takes a positive interest in my wellbeing'	Managers to undertake Managing attendance at work training and / or utilise e learning package	Non attendance may lead to incorrect application of the policy and guidance	Staff with higher levels of engagement have lower levels of both absence and presenteeism – turning up for work when unwell. These staff are also less likely to suffer from work related stress and rate their own wellbeing more highly.	All Managers to link in with HR for training if in non compliance	Partially completed further MAW sessions to be offered in April / May 2021

				Directorate Managers &	
	Identify areas for Senior Managers to go and spend a day working alongside frontline staff or ask staff from all areas within the DU to submit a day in the life of, to share across the unit to encourage greater understanding of roles for both management and staff	not to place staff and patients at risk	Understanding increased of role diversity within the unit identifying areas that can share practice or be supported through service change, member of staff feels sense of belonging	Directorate Managers & Lead Nurses to encourage staff within their areas to share an account of their typical day and to identify possible areas for senior management to attend for a day on the shop floor	Partial ongoing
	Ensure staff stress levels are monitored, encourage use of stress assessment tool. Support work life balance, consider alternative ways of working	Application of the tool, support to be accessed from Wellbeing or HR if training has not been received	Work demands are met but staff remain fit and in work	All Managers	Partial completed
	Access to training opportunities and secondment opportunities to be shared across the Unit. Staff to be identified with PADR for potential future opportunities	Need to be tailored to their needs and service constraints	Motivated staff are retained, staff to be listened to coached and developed	All Managers within unit	Partial completed ongoing, overview of L& D strategy group
	Review arrangements in place to complete statutory training and identify reason for time delay if any	Availability of time and access to \ensuremath{IT}	All managers of staff to review their staff annual plans to undertake mandatory training and flag any concerns due to staffing levels or other factors for non compliance and identify blockages to access training to remove them and ensure compliance H & S	All Staff within unit and managers to oversee	Ongoing current at 85%+
	Continue to hold 'Celebration' and Learning Events across DU'	Notice is required to notify staff of engagement sessions in order that clinical rotas can be arranged	Values are reflected in behaviours	Senior team / Managers of service areas	Commenced ongoing
	Implementation of Lunchtime learning programme	Accessed via teams and where staff can be released to attend	focus on supporting our leaders, how they communicate and involve staff in decision-making.	MW	Commenced ongoing
	Learning & Development strategy group to oversee access to training	Variety of needs across staff groups and service constraints	To ensure overall strategic plan for the group and equity of opportunity reviewed	RP	Commenced ongoing
Immediate Experience of work 'team members take time to reflect and learn'	Support attendance at health board leadership events	Notice is required to notify staff in order that clinical rotas can be arranged	focus on supporting our leaders, how they communicate and involve staff in decision-making.	All Managers to ensure event details are circulated	Commenced ongoing
	Managers to be encouraged to undertake Manager pathway training, Footprints / Bridges	Notice is required to notify staff in order that clinical rotas can be arranged	focus on supporting our leaders, how they communicate and involve staff in decision-making.	Divisional Managers to audit attendance and nominate Managers who have yet to attend	Commenced ongoing
	Staff at all levels to be supported to access time for reflection such has HCSW Annual Learning event	Notice is required to notify staff in order that clinical rotas can be arranged	Staff given time to reflect and learn improves knowledge and motivation in work	All Managers to ensure event details are circulated to relevant individuals	Commenced ongoing

1	Review our training provision with	Mechanism to undertake comparative with other			
	comparative health boards to identify possible improvements	health boards and between staff groups and specialisms	To ensure that training provision supports retention of staff and delivery of service	L & D strategy group	
	To ensure that line managers are concerned for their well-being and that supervision is timely, responsive and useful / supportive.	Supervisory arrangements for disciplines are not consistent across the group, some areas are less developed / others consistently offered / mixture of flexiblity (i.e. if people wanted to change supervisor for example this is not always an option / dual roles / conflict of interest issues) challenge of different professions	Employees need to be involved listened to and invited to contribute their experience, expertise and ideas for working they need an opportunity to raise wellbeing concerns and to discuss worklife balance to enable attendance at work to be supported	All Managers	Ongoing
	Continue to hold DU Recognition Events	Nominations to be obtained from all service areas and mechanism of holding event	Engagement and recognition of staff is correlated to staff wellbeing and to organisational success	Senior Team and Divisional Team Managers	Ongoing
Immediate Experience of work 'People I work with treat me with respect'	Utilise support networks and continue to promote their membership i.e. Calon, Wellbeing Champions,BAME Network	Communication of information to be tailored to make all staff aware	Staff are aware of mechanisms they can access for support in the health board	All Managers to advise staff	Partial completed ongoing
	Managers to celebrate good practice and nominate staff and teams for health board recognition events	Ensuring all good practice is recognised	Staff to feel respected, motivated and recognised for the difference they make and good practice captured and shared	All Managers to recognise good practice and to share between directorate and division	
Immediate Experience of work 'Comfortable challenging disrespectful behaviour'	Improved understanding of nature of bullying and how staff can be address this. Avoidance of hostility, unprofessionalism / disrespect in some instances through awareness sessions and values work	Tension between professional groups staff teams can on occasion struggle to work through difficulties / difference of opinion in a safe, professional and contained way and that this is something we need to improve on. Balance of positive and negative sides of banter. Unconcious bias of staff	Ongoing work within the unit through an Equality working group to raise improved awareness of unconcious bias and staff to consider their engagement methods and appropriateness of banter in the workplace. Reinforcement of values. Staff feel comfortable to challenge behaviour which is impacting on self or others. Reduced DAW cases and Disciplinary cases associated with disrepectful behaviour	Senior team & Equality Working group	Ongoing, Equality working group set up, values work with LP, documents circulated to all staff to advise bullying is unacceptable and other documentation to raise awareness. Some Managers have accessed ACAS sessions. Lunchtime sessions prepared
	Encouraging self reflection / responsibilities under professional codes	Ensuring staff make time to reflect	Ongoing self reflection sharing stories, experience and learning, staff to inform others what they are happy to tolerate and where they need others to adjust behaviour	All Managers to encourage staff individually and in team meetings	Ongoing
Immediate Experience of work 'Manager makes it clear what is expected of	All staff to have details of how to access the Dignity at Work Process & support mechanisms such has HR Hub number, Management structure for escalation, Guardian service, Union representatives	Communication of information to be tailored to make all staff aware	Staff are aware of mechanisms and policies they can access for support in the health board	All Managers to advise staff	Ongoing
me'	Ensure all staff have an up to date job description and have clarity on responsibilities and accountabilities	No central record of who has a job description relying on Managers to review when jobs change or at annual PADR	All staff to have a clear understanding of their role and how they impact on the delivery of service within the group and health board	All Managers	Partial completed

Bullying & Harassment	Understanding and shared dialogue for engagement and change. Reinforce message that bullying will not be tolerated but in a positive way by continual promotion of the values and behaviours expected by all staff.		Tension between professional groups staff teams can on occasion struggle to work through difficulties / difference of opinion in a safe, professional and contained way and that this is something we need to improve on. Balance of positive and negative sides of banter. Unconcious bias of staff	Ongoing work within the unit through an Equality working group to raise improved awareness of unconcious bias and staff to consider their engagement methods and appropriateness of banter in the workplace. Reinforcement of values. Staff feel comfortable to challenge behaviour which is impacting on self or others. Reduced DAW cases and Disciplinary cases associated with disrepectful behaviour	Senior team & Equality Working group & All Managers responsible for staff	Ongoing, Equality working group set up, values work with LP, documents circulated to all staff to advise bullying is unacceptable and other documentation to raise awareness. Some Managers have accessed ACAS sessions. Lunchtime sessions prepared
Manager & Colleague	Equality working group to be established which reports into L & D group		Need to ensure that all projects / work are captured	Mechanism in place to allow all equality branches of work to be captured and for new avenues to be explored and embedded in the group	RP / SJ / SB	Completed
	To implement the impending Respect & Resolution Policy and a Just Culture		Priority areas to be identified due to staff numbers, specialisms and geographical spread	Reduced or no dignity at work cases instigated and no contact with Guardian service, improved stress levels and attendance at work	Senior team	Awaiting corporate launch details
	Values work with OD support to identify what works well and what needs improvement		Availability or staff to participate and group sessions face to face not being held due to covid restrictions	Themes to focus on understanding and improving to encourage healthier working relationships	DR / LP	Ongoing commenced in January 2021
Bullying & Harassment Member of public	Reinforce standards of behaviour expected to members of the public		Due to the patient group, acknowledged that staff may be subject to more harassment and difficult dynamics than other professionals in other services	Reduced negative behaviour / assaults from patients or relatives	Divisions to review reports of negative behaviour and identify cause and methods to prevent reoccurence	Ongoing
	Patient Experience team to ensure that feedback is circulated as appropriate within the group	Ongoing	Significant number of areas for the Patient Experience team to contact for feedback which from a volume point of view is limited via capacity of teams to conduct telephone conversations	Highlight areas of concern /outstanding practice, staff specifically mentioned for praise; and learning opportunities or areas of improvement identified by respondents, which have been drawn out of the overall report for this reporting period	Marie Williams	
	To review the verbal abuse section in Datix and ensure data is appropriately captured and reviewed	Jun-21	To review verbal abuse from patients to ensure we are reviewing approaches of response and consistency	Develop approaches of capturing data and how it is shared to Divisions to ensure support for staff following incidents, whilst still supporting patients appropriately identifying causal effects to reduce or eliminate further abuse	Shelley Horwood / Divisional Managers	