

Meeting:	NHS Highland Board
Meeting date:	26th January 2021
Title:	Culture Progress Update
Responsible Executive/Non-Executive:	Fiona Hogg, Director of HR & OD
Report Author:	Emma Pickard, External Culture Advisor

1 Purpose

This is presented to the Board for:

- Discussion

This report relates to a:

- Board strategy / plan

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation

Work on the Culture Programme progresses under the guidance of the Culture Oversight Group. Prior to the Christmas break, the six Culture priority leaders met to discuss the programme plan for 2021. This included any requirement for adjustments to respond to the recent increase in COVID transmission and impact on the system across NHS Highland. Progress will continue across all six priorities, but activities requiring significant front-line engagement (for example, the roll-out of the NHS Highland vision and values) may need to be adapted or amended to ensure that elements requiring broader organisational engagement are scheduled when there is capacity to do this effectively.

There is also progress being made outside the formal programme plan, including the Healing Process, Guardian Service and Employee Assistance Programme and preparation for the launch of the national Whistleblowing Standards in April 2021.

2.2 Background

The reformed Culture Oversight Group has now met three times (October, November and January) and is operating well; with good organisational representation and delivery accountability embedded across operational units. The purpose of this paper is to provide an update on the overall status of the Culture programme; each of the Culture programme priorities and the key risks related to delivery.

The paper also provides an update on progress with other Culture related activity launched in 2020, including the Healing Process and the take up of support services such as the Guardian Speak Up service and the Validium Employee Assistance Programme. Finally, it provides a brief update on progress with the implementation of the National Whistleblowing Standards.

2.3 Assessment

Culture Programme Plan

The recent Internal Audit of the Culture programme highlighted the need for robust programme planning and a more rigorous approach to risk management. Both of these have progressed since delivery of the Audit report; and a high level programme plan is included in Appendix 1. A session on Culture programme risks was held at the 18th January Culture Oversight group meeting, and all risks have been reviewed by the NHSH Risk Manager and are documented in the Datix system.

Given the fluidity of the COVID situation, the programme plan remains relatively high-level, as it is uncertain when activities requiring significant front-line engagement (primarily the Vision, Values and Behaviours) can be optimally delivered. The plan will be reviewed on a monthly basis by the Priority Leaders and the Senior Responsible Officer and Culture Programme Manager, and activities adjusted as necessary.

Organisational Capacity

The most significant risk to delivery remains the capacity of both the core teams and the wider organisation to progress the culture initiatives. Cultural transformation requires effective and organisation-wide engagement and involvement, and to date this has been challenging to progress. This is partly due to capacity, including Covid-19 response and remobilisation, but also the challenges in engaging effectively across our large and diverse workforce. Whilst there will need to be some adjustments to the plan as a result of these immediate pressures, there is a clear organisational commitment that we must continue to make progress on the plan. This means any adjustments will be looking at opportunities to do things differently rather than pausing or slowing key activity.

Our priority in the earlier part of 2020 was around creating processes and support mechanisms, which was more centrally driven. Now, our focus is on the wider organisations involvement and ensuring the initiatives are co-created and owned by colleagues and teams, which is critical to the successful transformation.

Long Term Planning

Our Chief Executive is clear that transforming our culture is both a key priority for everyone in the organisation and something that will take significant time and effort to fully address. So in addition to our immediate priorities in the plan we have created, we will work on defining a 3-5 year plan for culture transformation, that clearly sets out the path we will follow and the milestones and outcomes that we want to deliver.

Creating this 3-5 year plan will ensure that we understand how our current activity fits into our longer term goals and if we have to amend or adjust any of the current plans, approaches or timelines, due to the Covid-19 pandemic, it will be clear how this impacts the longer term plan.

Programme Status Update

The status of each of the Culture priorities is as follows:

Priority 1: Vision, Values and Behaviours

(Lead: Kate Patience-Quate, Deputy Nurse Director)

The purpose of this priority is to define and embed the new NHS Highland vision, and roll-out and embed the NHS Scotland values across the organisation. The team accountable for delivering this priority has now met twice and a terms of reference has been agreed.

The NHS Highland vision and objectives remain in draft although at a Board session in November there was further development of the work presented to Board in March 2020, recognising the significant shift in focus since that time and also the opportunity to review these with fresh eyes and in collaborative working session. It is proposed that these will be finalised and presented to the March 2021 Board meeting, in order to be launched at the start of the performance year in April.

We will be working with our new Head of Communications and Engagement to ensure that these can be understood and adopted by the organisation, in a meaningful but simple way. The objectives will form the basis for the Executive and Senior Management objectives for 2021/2 as well as for the Board to measure progress across the year.

Feedback from the core team indicated that a concerted effort to engage the organisation in an authentic debate on the new values and behaviours should be postponed until front-line staff have the capacity to properly engage, as not putting the right focus and leadership around the roll-out will hinder rather than improve ways of working. A design for the roll-out is in draft and can be piloted.

The recommendation from this priority team is create Manager 'peer-support' networks (safe spaces) to give managers the opportunity to share problems, receive support and make peer connections to help them through this challenging period. These networks, if successful, would then be in place to support discussion and roll-out of the values and behaviours, once the COVID response has stabilised. They would also further promote the vision and objectives of the Board and how the values and behaviours link to and enable these. The facilitation / support for these is under discussion but it is recommended that interest is tested across the organisation and started with those keen to engage in the short term.

Priority 2: Civility Saves Lives

(Lead: Helen Freeman, Director of Medical Education)

The purpose of this priority is to define and test an approach to rolling out the concepts of Civility Saves Lives (for example, call it out with compassion and the identification and training of second messengers) across teams in the organisation; through a train the trainer approach.

The Priority team have made good progress and have designed an approach to rolling out Civility Saves Lives across the organisation. The Civility Saves Lives and Leadership and Management Development teams are collaborating to ensure the development offer for colleagues is aligned, with all members of the Leadership and Management Development team receiving a Civility Saves Lives workshop session.

Priority 3: Leadership and Management Development

(Lead: Caroline Morrison, Head of Education, Learning and Development)

The purpose of this priority is to define and deliver a suite of learning and support for Managers across the organisation, to ensure that all Managers both understand and are fully capable of fulfilling their management responsibilities.

A team is in place for this priority, and a proposed management development framework and suggested set of modules has been created. The modules have been segmented into three categories, and the plan is to have all Manager 'Foundation Skills' modules available for May.

A range of channels will be used for learning, building upon the success of the approach to rolling out Courageous Conversations. The content for the modules is currently under development, and will build upon the recently launched Manager portal.

Priority 4: People Processes

(Lead: Fiona Broderick, Staffside Lead for Argyll & Bute)

The purpose of this priority is to work in partnership to improve the use of information and early resolution, as well as improve the record keeping, speed and effectiveness of the core people processes and deliver a person-centred approach.

A team is in place comprising Staffside, HR and managers and a plan developed to take forward delivery of the recommendations of the recent external review. The first workshop has been held and was focused on how the approach to 'Early Resolution' (which is a core tenet of the relevant Once for Scotland policies) can be better understood and supported across the organisation. A clear set of actions has been defined and will now be progressed by the team which will meet on a monthly basis to review progress.

There is also a piece of work underway to research and commission a system for case recording and management, which is a key enabler to improving insights into how the people processes are progressing and quickly identifying and resolving where delays or challenges arise. It is likely to take some time to identify, commission and implement but our aim is for this to be fully in place in early 2022.

Priority 5: Root-cause analysis / diagnostic (Organisational Learning)

(Lead: Emma Pickard, External Culture Advisor)

The purpose of this priority is to use all the organisational learning available, and validate with colleagues, in order to understand where and how things have gone wrong in the past, to ensure that our actions will effectively address the causes of the issues.

A root cause analysis across North Highland to fully understand the factors that led to the organisation requiring the Sturrock Review has been completed. The first themed report from the Independent Review Panel of the Healing Process has also been delivered, and the findings from these two reports are being integrated into a lessons learned report, which will also draw on the recent culture internal audit and insights from recent IMatter and Everyone Matters colleague experience surveys and from our Guardian Speak Up service and Employee Assistance Programme.

The next steps are to complete two similar listening events with colleagues from across Argyll and Bute in January and February. Due to the current situation, these will be facilitated using Teams, although originally the plan was to use a mixture of virtual and onsite sessions. Any additional insights, themes or findings will be built into the Lessons Learned report, together with future themed insights from the Healing Process Independent Review Panel.

Priority 6: Culture Metrics and Tools

(Lead: Gillian Davies, Consultant Nurse, Community Mental Health, Argyll & Bute)

The purpose of this priority is to define and embed an approach to measuring and tracking culture at both an organisational and local level, to ensure the desired culture and behaviours across the organisation are embedded and staff experience improves.

A core team is now in place and has met once to define the approach to delivery. The team are currently conducting a baseline assessment to understand the range of metrics that are currently either in place or could be easily accessible, to assess the gap in information needed to effectively track culture. Once this has been completed, the team will develop the vision for the 'future state', in terms of what NHS Highland should ideally track and measure and options for delivery of these metrics assessed.

Communications and Engagement

Delivery of all these priorities requires an enhanced approach to communications and engagement, so that all colleagues understand the work underway to improve culture and behaviours; and more importantly how they can get involved to help shape the future.

A range of engagement tools is needed recognising both geographical and organisational diversity, different preferences on how information is presented and accessed, as well as access limitations for some colleagues to our standard communication channels such as email and intranet. Our new Head of Communications and Engagement is now in post and is leading this activity as part of her core role and is developing our Communications and Engagement strategy and plan, which will enable this.

Healing Process

The Healing Process has been open since the end of May 2020 and remains open for applications until 28th February 2021. To date, we have had 200 applications and around 95% of these have asked to have their case considered by the Independent Review Panel, as well as being able to access Psychology Therapies and a 1:1 with a trained facilitator. To date, 55 individuals have had courses of treatment approved through this process. We will have a further promotional campaign in media and social media in the coming weeks, to ensure everyone is aware of the closing date and of the scheme itself. Information also continues to be updated on the www.healing-process.co.uk website.

Whilst the applications will close at the end of February, the Independent Review Panels are scheduled into late summer 2021, to allow for everyone's case to be heard. To date, 69 cases have come to the Remuneration Committee, and all have been approved in line with the recommendation of the panel. The first few sets of recommendations took slightly longer to process both by the panel and the committee, as everyone involved wanted to ensure they understood the process, had the opportunity to benchmark their recommendations and clarified any questions that arose. However, we are now into a good rhythm and cases are being progressed in the timescales set out.

We are currently awaiting the outcome of a review of the scheme by HMRC, to understand whether any dispensations to treat financial payments as non-taxable in part or full can be obtained. The position at present is that payments are made via payroll, to both current and former colleagues, with tax and national insurance deducted. The process does not fit with any of the existing dispensations or exemptions that are available, due to the unique nature of the Healing Process.

It is acknowledged that the co-production process did not explicitly discuss or explore this element, which would have more quickly highlighted the different assumptions around this and allowed them to be addressed before payments began to be made. We are working with the co-production group on this matter and as soon as a response is received from HMRC, we will reconvene with them to discuss the outcome and agree how best to implement and communicate.

In the interim, those who have already received payments have been assured that in the event a different treatment is agreed, they will be able to recover any overpaid tax and national insurance. Those who are awaiting payment have been given the option to await the outcome or to proceed with payment.

Whilst a small number of individuals have been unhappy with the outcome of their process, overall feedback from many different sources including the co-production group, the Whistleblowers and from individual participants has suggested that the majority of people have found this process helpful and supportive to their healing, which is what we set up the process to achieve.

Guardian Service

The Guardian Service has now been in place as our 24/7 independent external speak up service since 1 August 2020. We receive monthly reports on the utilisation of the service and the issues and themes arising. The service has been well used and well promoted and we have had considerable benefit from both the formal escalation of concerns but also the ability for colleagues to discuss concerns and to resolve them without further action or intervention needed.

In the 5 months to 31 December 2020, there were **205 calls and 172 emails, and 78 cases were raised**, of which **54 are already closed**. Those contacts who didn't raise cases were resolved at the first call or contact or were just seeking information. Key themes for cases were Management Issues (24%) Systems and Processes (24%) Bullying & Harassment (29%) Behaviour and Relationships (13%), with a small number of Patient Safety and Quality Issues (5%). The remainder were not within any of these categories.

In January 2021, Argyll & Bute Council agreed to extend the service to cover their members of staff working in the HSCP, with the support of NHS Highland to use their existing Guardians, which has been much appreciated and well received.

The Guardian Service will be a core part of NHS Highland's implementation of the Whistleblowing standards and our Guardians are part of the oversight group.

Through the Guardian Service we are also participating in a national research study "*Understanding the Process and Monetary Cost of Formal Workplace Grievances within The National Health Service in The United Kingdom*" which we hope will further help our insights and understanding of how to resolve concerns early and effectively.

Employee Assistance Programme

The Employee Assistance Programme, delivered by Validium, has now been in place since 1 May 2020. We have reports quarterly on utilisation and so have data for the first 6 months of activity from May to October.

Over that period, they received **82 calls** of which 47 were accessing counselling or other support and **100 counselling sessions** were delivered. **375 online accounts** were created, and **1299 documents** opened and viewed.

We continue to promote the service to colleagues through a range of channels and in our weekly **Wellbeing Wednesday** emails, where we also share the monthly newsletters and other resources that Validium provide us with.

Whistleblowing Standards

The National Whistleblowing Standards are due to be implemented on 1 April 2021, having been delayed due to the impact of the Covid-19 pandemic. NHS Highland is working closely with the Independent National Whistleblowing Officer and their team, who are producing a national policy and training resources to support the implementation process.

NHS Highland have set up an oversight group to plan and monitor the activities required to launch the standards and it met for the first time on Tuesday 12th January. Our non-executive Whistleblowing Champion Bert Donald is closely involved in this work, and we are working collaboratively with NHS Grampian in sharing information and resources.

The key challenges we will face in implementing the standards are around the processes and awareness necessary to comply with the inclusion of external and independent contractors that we work with, not just our own colleagues, and also with establishing the required level of data recording and reporting.

We also need to help colleagues understand the specific scope of whistleblowing, which is “raising a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong doing.” This is very different to a grievance and so we will have to work hard on explaining and understanding this.

We had planned face to face visits to Argyll & Bute in January and February by Bert, to promote awareness of his Whistleblowing Champion role and of Whistleblowing, to understand what it is and it isn't, to understand the challenges and experiences faced. Whilst these have been delayed by the latest Covid-19 lockdowns, he is working on a virtual programme of engagement with the Argyll & Bute HSCP.

2.3.1 Quality/ Patient Care

Successful delivery of the Culture Programme is critical to effective patient care.

2.3.2 Workforce

The Culture Programme will ensure colleagues are engaged, motivated, clear on their roles and priorities and working to our values.

2.3.3 Financial

Additional funding has been secured to deliver our Culture Programme. Improving our culture will realise reductions in sickness absence and staff turnover, and reduce time and effort spent on disciplinary and grievance processes.

2.3.4 Risk Assessment/Management

No additional risks have been identified.

2.3.5 Equality and Diversity, including health inequalities

Fairness, along with dignity and respect are core principles of our Culture Programme where our values will be embedded in all we do as an organisation

2.3.6 Other impacts

None.

2.3.7 Communication, involvement, engagement and consultation

To deliver the revised programme structure and governance arrangements, greater colleague involvement and engagement is planned. A suite of communication approaches will be required to foster this involvement and a plan is under development.

2.3.8 Route to the Meeting

The content of the paper has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Executive Directors Group, 18th January 2021
- Culture Oversight Group: 18th January 2021

Confirmation received from EDG on 18 th January, 2021
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2.4 Recommendation

- **Discussion** – Examine and consider the implications of a matter.

Appendix 1 – 2021 Culture Programme roadmap

