

## Board of Directors (in Public)

### Item 5.1

**Subject:** NHS Constitution: Annual Report on Compliance  
**Date of Meeting:** 30<sup>th</sup> April 2019  
**Prepared by:** Sue Pemberton, Director of Nursing & Operations  
 Joanne Twist, Director of Workforce Development  
**Presented by:** Sue Pemberton, Director of Nursing & Operations  
 Joanne Twist, Director of Workforce Development  
**Purpose of Report:** For Note

BAF Ref	Impact on BAF
All	No Impact

### 1.0 Executive Summary

The Board of Directors is required to ensure that the Trust is compliant with the legal requirement to “take account of the NHS Constitution in provision of health care services for the purpose of the NHS”. All NHS organisations are legally required to take account of the NHS Constitution in performing their NHS functions. This is also a legal requirement of our Provider Licence under Condition G6 Systems for Compliance with Licence Conditions and Related Obligations Section 1 (c) ‘requirement to have regard to the NHS Constitution in providing health care services for the purpose of the NHS’. The NHS Constitution establishes the principles and values of the NHS in England. It sets out the rights that patients, public and staff are entitled to and the pledges which the NHS is committed to achieve together with responsibilities that the public patients and staff owe to one another to ensure that the NHS operates fairly and effectively.

Compliance with the patient and staff pledges of the NHS Constitution has been assessed for LHCH for the year 2018/19. This paper outlines the rights, pledges, legal duties and expectations that the NHS is committed to achieve for patients and staff and gives evidence of compliance with meeting these and the actions to ensure all areas achieve full compliance. (Appendix 1)

### 2.0 Findings

Overall the Trust has assessed itself as compliant with the rights and pledges of the NHS Constitution; however there is scope for further improvement in the area highlighted in red within the staff constitution in relation to violence against staff. There was an improvement in this score from 2017, but still remains an area for further improvement. Overall the 2018 Staff Survey Results were extremely positive across all themes.

### **3.0 Recommendation**

The Board of Directors is asked to receive assurance of the full compliance with the NHS Constitution in relation to patients and to note the area relating to staff highlighted in red, where there are active plans in place, to address this gap further, to be completed during 2019/20.

## Appendix 1

### Patients' Rights

<b>1. Access to Health Services</b>			
<b>Pledges:</b> <ul style="list-style-type: none"> <li>To provide convenient, easy access to services within the waiting times set out in the Handbook to the NHS Constitution;</li> <li>To make decisions in a clear and transparent way, so that patients and the public can understand how services are planned and delivered</li> <li>To make the transition as smooth as possible when you are referred between Services, and to put you, your family and carers at the centre of decisions that Affect you or them.</li> </ul>			
<b>Rights</b>	<b>Evidence</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
You have the right to receive NHS services free of charge, apart from certain limited exceptions sanctioned by Parliament.	<ul style="list-style-type: none"> <li>CCG and specialised commissioned services are provided free of charge.</li> </ul>		Compliant
You have the right to access NHS services. You will not be refused access on unreasonable grounds.	<ul style="list-style-type: none"> <li>Access to services is available using a range of options including Choose &amp; Book and the PPCI service.</li> <li>There is a 24 hour open access policy for patients who have cystic fibrosis and a 24 hour advice line.</li> </ul>		Compliant
You have the right to receive care and treatment that is appropriate to you, meets your needs and reflects your preferences.	<ul style="list-style-type: none"> <li>EPR Flow sheets for specific care needs. Opportunity to record when a patient has enhanced needs and to specify the care that is required.</li> <li>We offer all our patients the opportunity to have a care partner whilst an inpatient in the hospital.</li> <li>We have a clinical lead for dementia.</li> </ul>		Compliant
You have the right to expect your NHS to assess the health requirements of your community and to commission and put in place the services to meet those needs as considered	<ul style="list-style-type: none"> <li>Commissioning plans in place to commission services.</li> <li>LHCH Specialised commissioning contract meetings in place.</li> <li>Waiting targets performance reported to Trust Board.</li> </ul>		Compliant

necessary and in the case of public health services commissioned by local authorities, to take steps to improve the health of the local community	<ul style="list-style-type: none"> <li>• Council of Governors engaged in service planning.</li> </ul>		
You have the right, in certain circumstances, to go to other European Economic Area countries or Switzerland for treatment which would be available to you through your NHS commissioner.	<ul style="list-style-type: none"> <li>• Commissioner responsibility</li> </ul>		Compliant
You have the right not to be unlawfully discriminated against in the provision of NHS services including on grounds of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.	<ul style="list-style-type: none"> <li>• LHCH Single Equality Scheme in place</li> <li>• Equality &amp; Inclusion Steering Group in place to monitor Trust's performance</li> <li>• Equality impact assessment on policies/plans on-going</li> <li>• Interpreter service is available at all times for patients and families.</li> </ul>		Compliant
You have the right to access certain services commissioned by NHS Bodies within maximum waiting times or for the NHS to take all reasonable steps to offer you a range of alternative suitable providers if this is not possible.	<ul style="list-style-type: none"> <li>• Waiting times are met and monitored and targets met. Where required alternative dates are offered.</li> <li>• As a tertiary centre we have a number of late referrals and complex patients to manage who cannot be treated within these defined targets. We also carry out a number of procedures which other local units could not perform. We treat patients in order of clinical need and any patients who express any concerns with their waiting times who be reviewed by the clinical team and if appropriate discussions held with patient regarding options and choices.</li> </ul>		Compliant
<b>2. Quality of Care and Environment</b>			

<b>Pledges:</b> <ul style="list-style-type: none"> <li>To identify and share best practice in quality of care and treatments</li> </ul>			
<b>Rights</b>	<b>Evidence</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
You have the right to be treated with a professional standard of care, by appropriately qualified and experienced staff in a properly approved or registered organisation that meets required levels of safety and quality.	<ul style="list-style-type: none"> <li>CQC registration maintained without conditions</li> <li>NHSI quarterly reporting in accordance with Licensing</li> <li>NPSA alerts regarding patient safety issues.</li> <li>Adherence to NICE guidance</li> <li>Quality Strategy</li> <li>Trust Safety Huddle</li> <li>Monthly review of nurse staffing – reported to Board of Directors</li> </ul>		
You have the right to be cared for in a clean, safe, secure and suitable environment. You have the right to receive suitable and nutritious food and hydration to sustain good health and wellbeing.	<ul style="list-style-type: none"> <li>Place Results good</li> <li>EECS award status all wards are assessed for Excellent safe and Compassionate care</li> <li>Catering audit surveys</li> <li>Meal observations</li> <li>Place results for food</li> </ul>		
You have the right to expect NHS organisations to monitor and make efforts to improve continuously, the quality of healthcare they commission or provide. This includes improvements to the safety, effectiveness and experience of services.	<ul style="list-style-type: none"> <li>Quality Accounts</li> <li>Internal clinical and non-clinical audits are undertaken against standards</li> <li>PLACE audits demonstrate clean and safe environments</li> <li>Patient and family feedback</li> <li>National Survey Programme</li> <li>Quality Strategy</li> <li>Family Experience and monthly and annual patient and family shadowing programme across the Trust – patient and family centred care approach</li> <li>Patient and family listening events four times per year</li> <li>Performance dashboards used</li> </ul>		
<b>3. Nationally approved treatments, drugs and programmes</b>			

<b>Pledges:</b> The NHS commits to provide screening programmes as recommended by the UK National Screening Committee			
<b>Rights</b>	<b>Evidence</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
You have the right to drugs and treatment that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you	<ul style="list-style-type: none"> <li>• Medicines Policy</li> <li>• NICE guidance adherence monitored via formulary audit</li> <li>• Area Prescribing Committee recommendations included in local formulary and audited</li> <li>• Antibiotic prescribing policy</li> <li>• Drug and Therapeutics Committee monitors annual audit plan</li> <li>• Medication Safe Practice Committee Annual report and monitoring by exception at patient and family experience committee</li> <li>• Anticoagulation policy – monitored and audited at Drug and Therapeutics committee (includes NICE recommendations re NOACS)</li> </ul>		Compliant
You have the right to expect local decisions on funding of other drugs and treatments to be made rationally following a proper consideration of the evidence. If the local NHS decides not to fund a drug or treatment you and your doctor feel would be right for you, they will explain that decision to you.	<ul style="list-style-type: none"> <li>• Medicines Policy</li> <li>• Senior pharmacists attend Area Prescribing Committee to discuss local decisions and attend New Medicines sub-committee</li> <li>• Antibiotic prescribing policy</li> <li>• Medicines Safety Committee</li> <li>• NICE guidance adherence monitored and influence by senior pharmacy attendance at the area prescribing committee</li> <li>• Drugs and therapeutic committee</li> </ul>		Complaint
You have the right to receive the vaccinations that the Joint Committee on Vaccination and Immunisation	<ul style="list-style-type: none"> <li>• N/A National Programme</li> </ul>		Compliant

recommends that you should receive under an NHS provided immunisation programme			
<b>4. Respect, Consent and Confidentiality</b>			
<b>Pledges:</b> <ul style="list-style-type: none"> <li>To ensure those involved in your care and treatment have access to your health information so they can care for you safely and effectively</li> <li>If you are admitted to hospital you will not have to share sleeping accommodation with patients of the opposite sex except where appropriate in line with details set out in the handbook to the NHS Constitution</li> <li>To anonymise the information collected during the course of your treatment and use it to support research and improve care for others</li> <li>Where identifiable information has to be used, to give you the chance to object wherever possible</li> <li>To inform you of research studies in which you may be eligible to participate</li> <li>To share with you any correspondence sent between clinicians about your care</li> </ul>			
You have the right to be treated with dignity and respect, in accordance with your human rights.	<ul style="list-style-type: none"> <li>Dignity and Respect Policy in place</li> <li>Clinical care policies, procedures and guidance are in place. These are subject to impact assessments.</li> <li>Compliance with mixed sex accommodation – monthly returns completed</li> <li>Chaperone Policy</li> <li>Patient Experience Survey</li> <li>Learning from complaints monitoring</li> <li>Family experience survey</li> </ul>		Compliant
You have the right to be protected from abuse and neglect and care and treatment that is degrading	<ul style="list-style-type: none"> <li>Safeguarding ambassadors trained to level 3</li> <li>Safeguarding policies and procedures in place for both Adults and Children.</li> <li>Mental capacity act policy.</li> <li>Domestic violence policy</li> <li>Privacy and dignity policy</li> <li>Deprivation of liberty policy</li> </ul>		Compliant
You have the right to accept or refuse treatment that is offered to you, and not to be given any physical examination or treatment unless you have given valid consent. If you do not have the	<ul style="list-style-type: none"> <li>A range of clinical care policies, procedures and guidance are in place - these are subject to impact assessments.</li> <li>Chaperone Policy adhered to.</li> <li>Treatments are explained to</li> </ul>		Compliant

<p>capacity to do so, consent must be obtained from a person legally able to act on your behalf, or the treatment must in your best interests</p>	<p>patients as far as possible and repeated if necessary.</p> <ul style="list-style-type: none"> <li>• Consent policy and consent audits undertaken</li> <li>• Learning from complaints monitoring</li> <li>• Vulnerable children/adults safeguarding policies in place</li> <li>• Learning disability hospital passports in place</li> <li>• MCA/DoLs policies are in place</li> <li>• LD training now in place for all staff</li> <li>• LD ambassadors across the trust</li> </ul>		
<p>You have the right to privacy and confidentiality and to expect the NHS to keep your confidential information safe and secure.</p>	<ul style="list-style-type: none"> <li>• Data Security and Protection Toolkit compliance</li> <li>• 8 years significant assurance audit opinion on IG Toolkit submissions</li> <li>• Information Governance Framework including Caldicott guardian, SIRO, IG Team, Data Protection Officer <ul style="list-style-type: none"> <li>○ Information Governance Policies</li> <li>○ Information Governance Policy</li> <li>○ Data Protection Policy</li> <li>○ Code of Conduct for Handling Personal Data</li> <li>○ Information Security Management System and Standards</li> <li>○ Information Risk Policy</li> </ul> </li> <li>• Mandatory induction and annual training and awareness for Trust staff</li> <li>• Individual outpatient consulting rooms</li> <li>• GDPR implementation and action plan 2018/19</li> </ul>		<p>Compliant</p>



	<p>ensuring legal basis for data processing documented</p> <ul style="list-style-type: none"> <li>• Nil reportable data security breaches within last 5 years</li> <li>• Organisational culture for learning and sharing, learning from complaints</li> <li>• Contractual and data sharing agreements with NHS organisations</li> <li>• Data Protection Impact Assessment processes for new technology or changes in data processing activities</li> <li>• EECS assessments at ward and department level</li> <li>• Detailed and informative guidance and information available for patients via the Trust website:</li> <li>• <a href="http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/">http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/</a></li> <li>• LHCH patient experience surveys</li> <li>• Information / Data Security external audit and assurance</li> </ul>		
You have the right to be informed about how your information is used.	<ul style="list-style-type: none"> <li>• GDPR Privacy Notice (legal requirement):</li> <li>• <a href="http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/privacy-notice/">http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/privacy-notice/</a></li> <li>• Consent processes for audit and research i.e. non direct care uses of data</li> <li>• Patient awareness materials – ‘In Confidence’ patient leaflet and various other patient information leaflets:</li> <li>• <a href="http://www.lhch.nhs.uk/our-patients/patient-information-leaflets/">http://www.lhch.nhs.uk/our-patients/patient-information-leaflets/</a></li> <li>• Mandatory induction and annual training and</li> </ul>		Complaint

	<p>awareness for Trust staff regarding obligations to inform patients</p> <ul style="list-style-type: none"> <li>• LHCH patient experience surveys</li> </ul>		
<p>You have the right to request that your confidential information is not used beyond your own care and treatment and to have your objections considered and where your wishes cannot be followed, to be told the reasons including the legal basis.</p>	<ul style="list-style-type: none"> <li>• GDPR Privacy Notice (legal requirement):</li> <li>• <a href="http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/privacy-notice/">http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/privacy-notice/</a></li> <li>• Data Processing Request Process including objections, opt outs, restriction of data processing etc:</li> <li>• <a href="http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/data-processing-requests/">http://www.lhch.nhs.uk/about-lhch/information-governance/data-protection-and-confidentiality/data-processing-requests/</a></li> <li>• Consenting for Research Policy</li> <li>• Data Protection Policy</li> <li>• LHCH patient experience surveys</li> <li>• Patient and Family Support Team</li> <li>• Being Open Policy</li> </ul>		Compliant
<b>5. Informed Choice</b>			
<b>Pledges :</b> <ul style="list-style-type: none"> <li>• To inform you of healthcare services available to you, locally and nationally</li> <li>• To offer you easily accessible, reliable and relevant information in a form that you can understand, and support to use it. This will enable you to participate fully in your own healthcare decisions and to support you in making choices. This will include information on the quality of clinical services where there is robust and accurate information available</li> </ul>			
<p>You have the right to choose your GP practice, and to be accepted by that practice unless there are reasonable grounds to refuse, in which case you will be informed of those reasons</p>	<ul style="list-style-type: none"> <li>• N/A Primary Care</li> </ul>		
<p>You have the right to express a preference for using a particular doctor</p>	<ul style="list-style-type: none"> <li>• N/A Primary Care</li> </ul>		

within your GP practice and for the practice to try to comply.			
You have the right to transparent, accessible and comparable data on the quality of local health care providers and on outcomes as compared to others nationally	<ul style="list-style-type: none"> <li>• Safety thermometer</li> <li>• FFT national data set</li> <li>• PROMS data</li> <li>• Patient opinion website</li> </ul>		Compliant
You have the right to make choices about the services commissioned by NHS bodies and to information to support these choices. The options available to you will develop over time and depend on your individual needs. Details are set out in the Handbook to the NHS Constitution	<ul style="list-style-type: none"> <li>• Patient Information</li> <li>• Leaflets</li> <li>• Leaflets are also available in alternative formats such as large print Braille alternative languages and audio.</li> <li>• Leaflets are available for download on the internet/intranet</li> <li>• Information on National ratings on NHS Choices Website</li> <li>• CQC ratings</li> <li>• Consultant Profiles on internet</li> <li>• Friends and Family test</li> <li>• CQC websites</li> </ul>		Compliant

## 6. Involvement in your healthcare and in the NHS

### Pledges:

- To provide you with the information and support you need to influence and scrutinise the planning and delivery of NHS services
- To work in partnership with you, your family, carers and representatives.
- To involve you in discussions about planning your care and to offer you a written record of what is agreed if you want one
- To encourage and welcome feedback on your health and care experiences and use this to improve services

<b>Rights</b>	<b>Evidence</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
You have the right to be involved in planning and making decisions about your health and care, with your care provider or providers including your end of life care and to be given information and support to enable you to do this. Where appropriate	<ul style="list-style-type: none"> <li>• Decision in clinical care monitored by national survey programme</li> <li>• Information on how to become involved in the design and delivery of services is distributed via the comms team via members matters and corporate communications</li> </ul>		Compliant

<p>this right includes your family and carers. This includes being given the chance to manager your own care and treatment if appropriate</p>	<ul style="list-style-type: none"> <li>• Patients and Volunteers are used to comment on patient information</li> <li>• Monitoring through national and internal surveys</li> <li>• Friends and Family test</li> <li>• Bereavement Service</li> <li>• Specialist Nursing services</li> <li>• NHS Choices website</li> <li>• Patient Letters assessment in national survey</li> <li>• Patient reps on the safety committee</li> <li>• Open visiting in place</li> <li>• Families/carers encouraged to be involved in ward rounds</li> <li>• Care partner programme</li> <li>• Advance care planning</li> </ul>		
<p>You have the right to an open and transparent relationship with the organisation providing your care. You must be told about any safety incident relating to your care which, in the opinion of a healthcare professional has caused, or could still cause, significant harm or death, You must be given the facts, an apology, and any reasonable support you need.</p>	<ul style="list-style-type: none"> <li>• HALT for patients and families</li> <li>• Speak out safely campaign</li> <li>• Duty of Candour</li> </ul>		Compliant
<p>You have the right to be involved, directly or through representatives, in the planning of healthcare services commissioned by NHS bodies, the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services.</p>	<ul style="list-style-type: none"> <li>• Members are also invited directly from the trust to become involved in setting the Trust quality priorities</li> <li>• Governors are supported in their roles to enable them to represent members effectively. For example, through implementation of the strategy including facilitation of members events in the community.</li> <li>• The Council of Governors represent members of the public and partner</li> </ul>		Compliant

	<p>organisations and are actively engaged in the Trusts strategic planning.</p> <ul style="list-style-type: none"> <li>• Patient and family feedback forms</li> <li>• FFT</li> <li>• Patient and family listening events</li> <li>• Experience Based</li> <li>• Design approach used to engage patients in service re-design</li> <li>• Engagement with Health watch</li> <li>• Governor and patients involved in service redesign</li> <li>• COG involvement in service planning</li> <li>• Membership events in the Community.</li> </ul>		
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## 7. Complaint and redress

### Pledges:

- To ensure you are treated with courtesy and you receive appropriate support throughout the handling of a complaint; and the fact that you have complained will not adversely affect your future treatment
- Ensure that when mistakes happen or if you are harmed when receiving health care you receive an appropriate explanation and apology, delivered with a sensitivity and recognition of the trauma you have experienced and know that lessons will be learned to help avoid a similar incident occurring again.
- To ensure that the organisation learns lessons from complaints and claims and uses these to improve NHS services

Rights	Evidence	RAG	Compliant/Non-Compliant
You have the right to have any complaint you make about NHS services acknowledged within three working days and to have it properly investigated	<ul style="list-style-type: none"> <li>• Patient and family support team complaints monitoring reported at Trust Board</li> <li>• Complaints reported within the Annual Report</li> <li>• Internal target for response to complaints set</li> <li>• Update on complaints handling received at Quality and PFEC Committee/Quality committee</li> <li>• Divisional governance committees receive monthly updates on concerns and complaints within their</li> </ul>		Compliant

	<p>respective areas</p> <ul style="list-style-type: none"> <li>• Complaints Annual Report presented at Trust Board</li> <li>• All complaints acknowledged within three working days in writing and if they are available discussions take place with complainants regarding expectations</li> </ul>		
You have the right to discuss the manner in which the complaint is to be handled and to know the time period within which the investigation is likely to be completed and the response sent	<ul style="list-style-type: none"> <li>• Complaints Policy</li> <li>• Patient and family support team reports to the Quality committee and Board of Directors</li> </ul>		Compliant
You have the right to be kept informed of progress and to know the outcome of any investigation into your complaint, including an explanation of the conclusions and confirmation that any action needed in consequence of the complaint has been taken or is proposed to be taken.	<ul style="list-style-type: none"> <li>• All complaints are reviewed by and signed off by the CEO</li> <li>• Meetings facilitated by Patient and family support team to discuss individual complaints</li> <li>• Survey of complaint satisfaction</li> <li>• Non-Executive complaints review panel in place</li> <li>• Complainants are asked how they would like to receive their responses in writing/meeting</li> <li>• Learning from complaints shared with divisions</li> <li>• Governance meetings</li> </ul>		Compliant
You have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman or Local Government Ombudsman, if you are not satisfied with the way your complaint has been dealt with by the NHS	<ul style="list-style-type: none"> <li>• Complaints policy in place in accordance with legislation requirements</li> <li>• Reporting of PHSO complaints in annual report</li> <li>• Patients are invited to contact the trust in the first instance following their response if they require further clarity then they are provided with the details of the PHSO if they remain dissatisfied</li> </ul>		Compliant

You have the right to make a claim for judicial review if you think you have been directly affected by an unlawful act or decision of an NHS body or local authority	<ul style="list-style-type: none"> <li>Complaints policy in place in accordance with legislation requirements</li> <li>Claims policy in place</li> </ul>		Compliant
You have the right to compensation where you have been harmed by negligent treatment.	<ul style="list-style-type: none"> <li>Legal Services Department in place for compensation claims</li> <li>IICC report received by the Board includes claims</li> </ul>		Complaint

## **Staff Rights**

### **2018 Staff Survey Results**

	<b>Change since 2017 survey</b>	<b>Ranking compared with all acute specialist Trusts in 2017</b>
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### **STAFF PLEDGE 1 : To provide all staff with clear roles, responsibilities and rewarding jobs**

KF1 staff recommendation of the organisation as a place to work or receive treatment	Change not significant	<i>Better than average</i>
KF2 staff satisfaction with the quality of work and patient care they are able to deliver	Change not significant	<i>Better than average</i>
KF3 % agreeing their role makes a difference to patients/service users	Change not significant	<i>Better than average</i>
KF4. staff motivation at work	Change not significant	<i>Better than average</i>
KF5 recognition and value of staff by managers and the organisation	Significant Increase	<i>Better than average</i>
KF8 staff satisfaction with level of responsibility and involvement	Significant Increase	<i>Better than average</i>
KF9 effective team working	Due to change in question from 2017 can report	
KF14 staff satisfaction with resourcing and support	Change not significant	<i>Better than average</i>

**STAFF PLEDGE 2: To provide all staff with personal development, access to appropriate education and training for their jobs, and line management support to enable them to fulfill their potential**

KF10 support from immediate managers	Due to change in question from 2017 can not report this year	
KF11 % appraised in last 12 months	decrease	<i>Better than average</i>
KF12 quality of appraisals	Change not significant	<i>Better than average</i>
KF 13 quality of non-mandatory training, learning or development	Due to change in question from 2017 can not report this year	

**STAFF PLEDGE 3 : To provide support and opportunities for staff to maintain their health, well-being and safety**

KF15 % of staff satisfied with the opportunities for flexible working patterns	Significant increase	<i>Better than average</i>
KF16 % working extra hours	Change not significant	<i>Better than average</i>
KF17 % feeling unwell due to work related stress in last 12 months	Change not significant	<i>Better than average</i>
KF18 % attending work in the last 3 months despite feeling unwell because they felt pressure	Change not significant	<i>Better than average</i>
KF19 organisation and management interest in and action on health/wellbeing	Change not significant	<i>Better than average</i>
KF22 % experiencing physical violence from patients, relatives or the public in the last 12 months	Change not significant	<i>Worse than average</i>
KF23 experiencing physical violence from staff in the last 12 months	Change not significant	<i>Better than average</i>
KF 24 % reporting most recent experience of violence	Change not significant	<i>Better than average</i>
KF25 % experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	Change not significant	<i>Better than average</i>
KF26 % experiencing harassment, bullying or abuse from staff in last 12 months	Change not significant	<i>Better than average</i>
KF27 % reporting most recent experience of harassment, bullying or abuse	Change not significant	<i>Better than average</i>



**STAFF PLEDGE 4 : To engage staff in decisions that affect them, the services they provide and empower them to put forward ways to deliver better and safer services**

KF6 % reporting good communication between senior management and staff	Significant increase	<i>Better than average</i>
KF7 % able to contribute towards improvements at work	Change not significant	<i>Better than average</i>

**ADDITIONAL THEME: Equality and diversity**

KF20 % experiencing discrimination at work in last 12 months	Change not significant	<i>Better than average</i>
KF21 % believing the organisation provides equal opportunities for career progression/promotion	Change not significant	<i>Better than average</i>

**ADDITIONAL THEME: Errors and incidents**

KF28 % witnessing potentially harmful errors, near misses or incidents last month	Change not significant	<i>Better than average</i>
KF29 % reporting errors, near misses or incident witnessed in the last month	Change not significant	<i>Average</i>
KF30 fairness and effectiveness of procedures for reporting errors, near misses and incidents	Change not significant	<i>Better than average</i>
KF31 staff confidence and security in reporting unsafe clinical practice	Change not significant	<i>Better than average</i>

**ADDITIONAL THEME: Patient experience measures**

KF32 effective use of patient/service user feedback	Change not significant	<i>Better than average</i>
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**Staff Rights**

**Number one: Have a good working environment with flexible working opportunities, consistent with the needs of patients and with the way that people live their lives**

<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
To fair treatment regarding	Equality and Inclusion Strategy		Y

leave, rights and flexible working and other statutory leave requests relating to work and family, including caring for adults that you live with.	Special Leave and Toolkit Flexible Working Bullying and Harassment Policy Health and Wellbeing Group Flexible Retirement Policy Buying of Annual Leave		
To request “other” reasonable time off for emergencies (paid and unpaid) and other statutory leave subject to expectations.	Special Leave Policy Flexible Working Policy		Y
To expect reasonable steps are taken by the employer to ensure protection from less favourable treatment by fellow employees, patients and others (e.g. bullying and harassment).	Equality and Inclusion Policy Equality and Inclusion Strategy Listening into Action Staff Survey Results and Action Plans Bullying and Harassment Policy Health and Safety Group Report Leadership Training Safety Seven Whistleblowing/Freedom to Speak Up/Speak Out Safely.		Y
<b>Number two: Have a fair pay and contract framework</b>			
<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
To pay: consistent with the national minimum wage or alternative contractual agreement.	Agenda for Change Pay Scale Consultant Contract Job Evaluation Process Band 1 – 4 Development Programme		Y
To fair treatment regarding pay.	Apprenticeships Disciplinary Policy		Y
To be accompanied by either a trade union official or a work colleague at disciplinary or grievance hearings in line with legislation, your employer’s policies or your contractual rights.	Maintaining High Professional Standards (MHPS) Grievance Policy Bullying and Harassment Policy Annual Audit to People Committee on Employment Relations Work Organisational Change Policy		Y
To consultation and representation either through the trade union or other staff representatives (e.g. where there is no trade union in place) in line with legislation and any collective agreements that may be in force.	Human Resources policies as above Partnership Forum Local Negotiating Committee Staff Governors Workforce Development Group Staff “Big Conversations” BAME Listening Groups Junior Doctors’ Forum		Y

	Guardian of Safe Working Access to regional staff equality networks.		
<b>Number three: Have healthy and safe working conditions and an environment free from harassment, bullying or violence</b>			
<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
To work within a healthy and safe workplace and an environment in which the employer has taken all practical steps to ensure the workplace is free from verbal or physical violence from patients, the public or staff, to work your contractual hours, take annual leave and to take regular breaks from work.	Bullying and Harassment Policy Disciplinary Policy Grievance Policy PACT – Values and Behaviours Framework 2016 Staff Survey Action Plan Managing Violent and Anti-Social Behaviour Freedom to Speak Up Policy Speak Out Safely and Guardian Role Junior Doctors' Safe Working Report Supporting staff following a traumatic or stressful incident policy		Y
<b>Number four: Be treated fairly, equally and free from discrimination</b>			
<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
To a working environment (including practices on recruitment and promotion) free from unlawful discrimination on the basis of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.	Equality and Inclusion Strategy and KPIs monitored through People Committee Equality Delivery Scheme (EDS2) Equality Impact Assessments (EIAA) PACT – Values and Behaviours Framework Annual Report to People Committee on Employee Relations Recruitment Policy and Procedures and Training Bullying and Harassment Policy Equality and Inclusion Training Raising Concerns Policy VBR Training		Y
<b>Number five: Can in certain circumstances take a complaint about their employer to an employment tribunal</b>			
<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
To appeal against wrongful dismissal. If internal processes fail to overturn a dismissal you have the right to pursue a	Policies with clear processes within them Disciplinary Grievance Capability		Y

claim in the employment tribunal if you meet required criteria.	Sickness Absence MHPS		
<b>Number six: Can raise any concern with their employer, whether it is about safety, malpractice or other risk, in the public interest</b>			
<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
To protection from detriment in employment and the right not to be unfairly dismissed for whistleblowing or reporting wrong doing in the workplace.	Speak Out Safety Campaign Freedom to Speak Up Policy Lessons Learnt approach to sharing Daily Executive Safety Huddle Safety Seven		Y
<b>Number seven: Have employment protection (NHS employees only)</b>			
<b>Rights</b>	<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
You have a right to employment protection in terms of continuity of service for redundancy purposes if moving between NHS employers.	Contract of Employment National NHS Pension Scheme		Y

### Staff Pledges

<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
Staff engagement and wellbeing <ul style="list-style-type: none"> <li>• Big Conversations/Team Brief</li> <li>• SPF/LNC/BAME and Junior Doctors</li> <li>• Health and Wellbeing Group</li> </ul>		Y
Regular appraisal and training opportunities <ul style="list-style-type: none"> <li>• Mandatory Training Programme (E-Learning)</li> <li>• Appraisal Process</li> <li>• PACT – Values and Behaviours Framework</li> <li>• Personal Development Plans (PDPs)</li> <li>• Leadership and Management Development Programme</li> </ul>		Y
<b>Pledge two: The NHS commits to provide all staff with clear roles and responsibilities</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
Role design and responsibilities to enable high quality care <ul style="list-style-type: none"> <li>• Agenda for Change Handbook</li> <li>• Job Evaluation Process</li> </ul>		Y

<ul style="list-style-type: none"> <li>• Job Description Template</li> <li>• Standard Contract of Employment</li> </ul>		
<p>Contract of employment for staff supports this pledge</p> <ul style="list-style-type: none"> <li>• Paragraph included in Contract of Employment and reference to constitution</li> </ul>		Y
<p>Regular appraisals and training opportunities</p> <ul style="list-style-type: none"> <li>• New Appraisal Process and E-Learning System</li> <li>• PDP - &gt; 90% target</li> <li>• Mandatory and Essential Training &gt; 95% target</li> </ul>		Y
<b>Pledge three: The NHS commits to provide all staff with personal development, access to appropriate education and training for their jobs and line management support to enable them to fulfil their potential</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<p>Utilisation of the knowledge and skills framework</p> <ul style="list-style-type: none"> <li>• NHS knowledge and skills not used in full but job specific competencies in place: Education Group BSc in Cardiothoracic</li> </ul>		Y
<p>Spotting and developing confident leaders</p> <ul style="list-style-type: none"> <li>• Talent management process in development</li> <li>• Leadership Development Programme</li> <li>• PACT – Values and Behaviours Framework</li> </ul>		Y
<b>Pledge four: The NHS commits to provide support and opportunities for staff to maintain their health, wellbeing and safety</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<p>Trusts are required to prevent violence against staff whenever possible and to take all appropriate action, including prosecutions of offenders, when violence occurs</p> <ul style="list-style-type: none"> <li>• Disciplinary Policy</li> <li>• Bullying and Harassment Policy</li> <li>• Unreasonable Behaviour Policy</li> </ul>		Y
<p>Staff, patients and others are protected against the risks of acquiring a healthcare associated infection</p> <ul style="list-style-type: none"> <li>• Induction</li> <li>• Mandatory Training</li> <li>• Occupational Health Self-Referral</li> <li>• Health and Wellbeing Group</li> <li>• Infection prevention policies in place</li> <li>• Infection prevention reports received by the Board</li> </ul>		Y

<ul style="list-style-type: none"> <li>• Infection prevention training mandatory</li> <li>• Training Programme</li> </ul>		
<p>Staff are supported in their health and wellbeing</p> <ul style="list-style-type: none"> <li>• Health and Wellbeing Group and events programme</li> <li>• Occupational health available for self-referrals</li> <li>• Employee assistance programme in place</li> <li>• Flu Campaign 75% uptake</li> </ul>		Y
<b>Pledge five: The NHS commits 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>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<p>Social partnership forum</p> <ul style="list-style-type: none"> <li>• Staff Partnership Forum</li> <li>• Equality and Inclusion Group</li> <li>• Staff Governors' Role</li> <li>• LNC</li> </ul>		Y
<p>Staff, patients and others are protected against the risks of acquiring a healthcare associated infection</p> <ul style="list-style-type: none"> <li>• Training in Infection Prevention Control (as above)</li> </ul>		Y
Staff are supported in their health and wellbeing (as above)		Y
<b>Pledge six: The NHS commits to have a process for staff to raise an internal grievance</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<p>Grievance procedure</p> <p>Annual Report to People Committee on Employee Relations activity (as above)</p>		Y
<b>Pledge seven: The NHS commits to encourage and support all staff in raising concerns at the earliest opportunity about safety, malpractice or wrongdoing at work, responding to and, where necessary, investigating the concerns raised and acting consistently with the public interest Disclosure Act 1998</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<p>Raising concerns</p> <ul style="list-style-type: none"> <li>• Freedom to Speak Up Policy/Safety Seven</li> <li>• Guardian Role</li> <li>• Executive daily safety huddle</li> <li>• Speak Out Safely Campaign</li> </ul>		Y

### **Staff Legal Duties**

<b>Duty one: To accept professional accountability and maintain the standards of</b>
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<b>professional practice as set by the appropriate regulatory body applicable to your professional role</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>• Annual PDR</li> <li>• Appraisal and Mandatory Training Programme</li> <li>• Training and Development as appropriate</li> <li>• CPD opportunities</li> <li>• Professional Membership – PINs</li> <li>• Revalidation Policies</li> </ul>		Y
<b>Duty two: To take reasonable care of health and safety at work for you, your team and others and to co-operate with employers to ensure compliance with health and safety requirements</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>• Occupational Health Process</li> <li>• Managers' Development Process</li> <li>• Leadership Development Programme</li> <li>• PACT – Values and Behaviours Framework</li> <li>• Health and Safety Group/Risk Committee</li> </ul>		Y
<b>Duty three: To act in accordance with the express and implied terms of your contract of employment</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>• PACT – Values and Behaviours</li> <li>• Clear Job Descriptions</li> <li>• Job Evaluation Scheme</li> <li>• Employment Policies</li> </ul>		Y
<b>Duty four: Not to discriminate against patients or staff and to adhere to equal opportunities and Equality and Human Rights legislation</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
As above: <ul style="list-style-type: none"> <li>• Equality Delivery Scheme 2 in place</li> <li>• Equality and Inclusion Policy in place with plan and Equality Action Plan</li> <li>• Staff Survey Results/WRES data</li> </ul>		Y
<b>Duty five: To protect the confidentiality of personal information that you hold</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>• Data Protection Act</li> <li>• Information Governance Process</li> <li>• Contract of Employment</li> <li>• Trust Policies</li> <li>• GDPR</li> <li>•</li> </ul>		Y
<b>Duty six: To be honest and truthful in applying for a job and in carrying out that job</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>

<ul style="list-style-type: none"> <li>Recruitment and selection procedures</li> <li>ESR NHS Jobs</li> <li>Recruitment checks</li> <li>Fit and proper person processes</li> </ul>		Y
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### **Expectations for Staff**

<b>Expectation one: You should aim to maintain the highest standards of care and service, treating every individual with compassion, dignity and respect, taking responsibility not only for the care you personally provide but also for your wider contribution to the aims of your team and the NHS as a whole</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>LHCH Values and Behaviours refreshed</li> <li>Attitude and Behaviours as part of appraisal system</li> <li>Induction Mandatory Training</li> <li>Full Preceptorship</li> </ul>		Y
<b>Expectation two: You should take up training and development opportunities provided over and above those legally required of your post</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Mandatory and Essential Training Programme</li> <li>Full range of CPD opportunities managed by electronic application</li> <li>Management and Leadership Programme/Clinical Leadership Programme/Leadership Strategy</li> <li>LHCH Cardiothoracic Degree Programme</li> <li>In-house job description training available including clinical skills development</li> </ul>		Y
<b>Expectation three: You should aim to play your part in sustainably improving services by working in partnership with patients, the public and communities framework</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Patient and family engagement events</li> <li>Shadowing Programme</li> </ul>		Y
<b>Expectation four: You should aim to raise any genuine concern you have about a risk, malpractice or wrongdoing at work (such as a risk to patient safety, fraud or breaches of confidentiality) which may affect patients, the public, other staff or the organisation at the earliest possible opportunity</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Freedom to Speak Up Policy</li> <li>Guardian Role</li> <li>Speak Out Safety Campaign/Safety Seven</li> <li>Executive led Safety Huddle</li> </ul>		Y
<b>Expectation five: You should aim to involve patients, their families, carers or representatives fully in decisions about prevention, diagnosis and their individual care and treatment</b>		



<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Care partner programme</li> <li>Patient and Family Experience vision</li> <li>Open visiting</li> </ul>		Y
<b>Expectation six: You should aim to be open with patients, their families, carers or representatives including if anything goes wrong, welcoming and listening to feedback and addressing concerns promptly and in a spirit of co-operation</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Being Open Policy</li> <li>Duty of Candour</li> <li>Staff Training</li> </ul>		Y
<b>Expectation seven: You should aim to contribute to a climate where the truth can be heard, the reporting of and learning from errors is encouraged, and colleagues are supported where errors are made</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Freedom to Speak Up Policy</li> <li>Sharing/Learning</li> <li>Speak Out Safely Campaign</li> <li>Executive led Safety Huddle</li> <li>Incident Reporting Process</li> </ul>		Y
<b>Expectation eight: You should aim to view the services you provide from the standpoint of a patient and involve patients, their families and carers in the service you provide, working with them, their communities and other organisations, making it clear who is responsible for their care</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Shadowing</li> <li>Patient and family listening events</li> <li>Patient and family stories</li> <li>Named boards above all inpatient beds</li> </ul>		Y
<b>Expectation nine: You should aim to take every opportunity to encourage and support patients and colleagues to improve their health and wellbeing</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Health and wellbeing group and events</li> <li>Cardiac rehab programme</li> </ul>		Y
<b>Expectation ten: You should aim to contribute towards providing fair and equitable services for all and play your part, wherever possible, in helping to reduce inequalities in experience, access or outcomes between differing groups or sections of society requiring healthcare</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>Equality and Diversity Training</li> <li>Equality Delivery Scheme 2 and Action Plan</li> </ul>		Y

<b>Expectation eleven: You should aim to inform patients about the use of their confidential information and record their objections, consent or dissent</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>• Data Protection Procedures/GDPR</li> <li>• Information Governance Policy</li> <li>• Induction Process</li> <li>• Mandatory Training</li> </ul>		Y
<b>Expectation twelve: You should aim to provide access to patient information to other relevant professionals, always doing so securely, and only where there is a legal and appropriate basis to do so</b>		
<b>Update</b>	<b>RAG</b>	<b>Compliant/Non-Compliant</b>
<ul style="list-style-type: none"> <li>• Data Protection Procedures/GDPR</li> <li>• Information Governance Policy</li> <li>• Induction Process</li> <li>• Mandatory Training</li> </ul>		Y