

Board of Directors (in Public)

Item 6.3

Subject: NHS Constitution: Annual Report on Compliance
Date of meeting: 30th May 2016
Prepared by: Joanne Twist – Director of HR
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Presented by: Sue Pemberton – Director of Nursing & Quality

BAF Ref	Impact on BAF
1,2,7 4	None

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 2016/17. 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 improvement in the areas highlighted amber.

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 areas relating to staff highlighted in amber, where there are active plans in place, to address these gaps, to be completed during 2017/18.

Appendix 1

Patients' Rights

1. Access to health services			
Pledges: <ul style="list-style-type: none"> to provide convenient, easy access to services within the waiting times set out in the Handbook to the NHS Constitution; to make decisions in a clear and transparent way, so that patients and the public can understand how services are planned and delivered 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 effect you or them. 			
Rights	Evidence	RAG	Compliant/Non-Compliant
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"> CCG and specialised commissioned services are provided free of charge. 		Compliant
You have the right to access NHS services. You will not be refused access on unreasonable grounds.	<ul style="list-style-type: none"> Access to services is available using a range of options including Choose & Book and the PPCI service. There is a 24 hour open access policy for patients who have cystic fibrosis and a 24 hour advice line 		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"> EPR Flow sheets for specific care needs. Opportunity to record when a patient has enhanced needs and to specify the care that is required. As part of the LIA work we are producing a care pathway for patients with dementia and will then centime to develop pathways for other specific enhanced care needs. We offer all our patients the opportunity to have 		Compliant

	<p>a care partner whilst an inpatient in the hospital.</p> <ul style="list-style-type: none"> • We have a clinical lead for dementia. 		
<p>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 necessary and in the case of public health services commissioned by local authorities, to take steps to improve the health of the local community</p>	<ul style="list-style-type: none"> • Commissioning plans in place to commission services • LHCH Specialised commissioning contract meetings in place • Waiting targets performance reported to Trust Board • Council of Governors engaged in service planning • NHSI 2 year plan publically available 		Compliant
<p>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.</p>	<ul style="list-style-type: none"> • Commissioner responsibility 		Compliant
<p>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.</p>	<ul style="list-style-type: none"> • LHCH Single Equality Scheme in place. • Equality & Diversity Steering Group in place to monitor Trust's performance • Equality impact assessment on policies/plans on-going • Equality Act report in place Interpreter service is available at all times for patients and families 		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"> Waiting times are monitored and targets met. Where required alternative dates are offered. 		Compliant
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2. Quality of Care and Environment

Pledges:

- To identify and share best practice in quality of care and treatments**

Rights	Evidence	RAG	Compliant/Non-Compliant
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"> CQC registration maintained without conditions NHSLA standard level 3 achieved Monitor quarterly reporting in accordance with Licensing NPSA alerts regarding patient safety issues. Adherence to NICE guidance AQUA programme AQ Programme Quality Strategy Trust safety huddle 		Compliant
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"> Place Results scored ECS award status all wards are assessed for Excellent safe and Compassionate care Catering audit surveys Meal observations Place results for food Development of new catering contract to meet the changing needs of our patient groups. 		

<p>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.</p>	<ul style="list-style-type: none"> • Quality Accounts • Internal clinical and non-clinical audits are undertaken against standards • PLACE audits demonstrate clean and safe environments. • Patient and family feedback • National Survey Programme • Quality Strategy Family Experience survey monthly and annual Patient and family shadowing programme across the trust patient and family centered care approach. • Patient and family listening events four times per year • Performance dashboards used throughout the organisation 		
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3. Nationally approved treatments, drugs and programmes

Pledges:

The NHS commits to provide screening programmes as recommended by the UK National Screening Committee

Rights	Evidence	RAG	Compliant/Non-Compliant
<p>You have the right to drugs and treatments that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you</p>	<ul style="list-style-type: none"> • Medicines Policy • NICE guidance adherence monitored via formulary audit • Antibiotic prescribing policy • Medicine Safety Annual report and monitoring by exception at patient and family experience committee • Anticoagulation policy 		Compliant
<p>You have the right to expect local decisions on funding</p>	<ul style="list-style-type: none"> • Medicines Policy • Antibiotic prescribing policy 		Compliant

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"> • Medicines Safety Committee • NICE guidance adherence monitored and influence by senior pharmacy attendance at the area prescribing committee • Drugs and therapeutic committee 		
You have the right to receive the vaccinations that the Joint Committee on Vaccination and Immunisation recommends that you should receive under an NHS-provided national immunisation programme	<ul style="list-style-type: none"> • N/A National Programme 		Compliant

4. Respect, Consent and Confidentiality

Pledges:

To ensure those involved in your care and treatment have access to your health information so they can care for you safely and effectively

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

To anonymise the information collected during the course of your treatment and use it to support research and improve care for others

Where identifiable information has to be used, to give you the chance to object wherever possible

To inform you of research studies in which you may be eligible to participate

To share with you any correspondence sent between clinicians about your care

Right	Evidence	RAG	Compliant/No-Compliant
You have the right to be treated with dignity and respect, in accordance with your human rights.	<ul style="list-style-type: none"> • Dignity and Respect Policy in place • Clinical care policies, procedures and guidance are in place. These are subject to impact assessments. • Compliance with mixed sex accommodation – 		Compliant

	<p>monthly returns completed</p> <ul style="list-style-type: none"> • Chaperone Policy • Patient Experience Survey • Learning from complaints Monitoring • Family experience survey <p>Cond of Conduct Handling Personal Identifiable Information FFT results checked and acted upon</p>		
You have the right to be protected from abuse and neglect and care and treatment that is degrading	<ul style="list-style-type: none"> • 98 new safeguarding ambassadors trained to level 3. • Staff safeguarding ambassador trained in HR • Safeguarding policies and procedures in place for both Adults and Children. • Mental capacity act policy. • Domestic violence policy • Privacy and dignity policy • Deprivation of liberty policy 		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 capacity to do so, consent must be obtained from a person legally able to act on your behalf, or the treatment must be in your best interests	<ul style="list-style-type: none"> • A range of clinical care policies, procedures and guidance are in place. These are subject to impact assessments. • Chaperone Policy adhered to. • Treatments will be explained to patients as far as possible and repeated if necessary. • Consent policy and consent audits undertaken • Learning from complaints monitoring • Vulnerable children/adults safeguarding policies in place 		Compliant

	<ul style="list-style-type: none"> • Learning disability hospital passports in place • MCA/DoLs policies are in place LD training now in place for all staff • LD ambassadors across the trust 		
You have the right to be given Information about the test and treatment options available to you, what they involve and their risks and benefits	<ul style="list-style-type: none"> • Information Leaflets • NHSLA Level 3 compliant • Pre Op assessment • Specialist Nurse support • Learning from compliant monitoring • Feedback from Patients Surveys • Consent forms 		Compliant
You have the right to privacy and confidentiality and to expect the NHS to keep your confidential information safe and secure.	<ul style="list-style-type: none"> • Information Governance Toolkit • SIRO position held on Trust Board • IM&T Programme Board • Caldicott Guardian in place • IG Toolkit compliance monitoring • Learning from complaints monitoring • Availability of individual consulting rooms 		Compliant
You have the right to be informed about how your information is used.	<ul style="list-style-type: none"> • Information Governance Toolkit • SIRO position held on Trust Board • Caldicott Guardian in the Trust • Information Governance monitoring in use of systems • Information contained within patient identification sheet explaining uses • In Confidence Patient Leaflet 		Compliant
You have the right to request that your confidential	<ul style="list-style-type: none"> • Access to Health records information 		

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.	<ul style="list-style-type: none"> • Patient and Family support team • Interpreter service available • Patients can apply under the data protection act to access their health records • Information Governance Toolkit • Being Open policy • Opportunity to opt out recorded on patient identification sheet • Information Disclosure Policy Caldicott adherence 		
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5. Informed Choice

Pledges:

To inform you of healthcare services available to you, locally and nationally
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

Rights	Evidence	RAG	Compliant/Non-Compliant
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	N/A Primary Care		
You have the right to express a preference for using a particular doctor within your GP practice and for the practice to try to comply.	N/A Primary Care		
You have the right to transparent, accessible and	<ul style="list-style-type: none"> • Safety thermometer • Patient opinion • FFT national data set 		Compliant

comparable data on the quality of local health care providers and on outcomes as compared to others nationally	<ul style="list-style-type: none"> • PROMS data • Patient opinion website 		
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"> • Patient Information Leaflets • NHSLA Level 3 compliance achieved • Leaflets are also available in alternative formats such as large print Braille alternative languages and audio. • Leaflets are available for download on the internet/intranet • Information on National ratings on NHS Choices Website • CQC ratings • Consultant Profiles on internet • Friends and Family test • Information on NHS Choices • CQC websites 		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

Rights	Evidence	RAG	Compliant/Non-Compliant
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	<ul style="list-style-type: none"> • Decision in clinical care monitored by national survey programme • Information on how to become involved in the design and delivery of services is distributed via the comms team via members matters and 		Compliant

information and support to enable you to do this. Where appropriate this right includes your family and carers. . This includes being given the chance to manager your own care and treatment if appropriate	<p>corporate communications</p> <ul style="list-style-type: none"> • Patients and Volunteers are used to comment on patient information • Monitoring through national and internal surveys • Friends and Family test • Bereavement Service • Specialist Nursing services • NHS Choices website • Patient Letters assessment in national survey • Patient reps on the safety committee • Open visiting in place • Families/carers encouraged to be involved in ward rounds • Care partner programme • Advance care planning 		
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.	<ul style="list-style-type: none"> • Duty of Candour • Speak out safely campaign • RET system 		Compliant
You have the right to be involved, directly or through representatives, in	<ul style="list-style-type: none"> • Membership events in the Community. • COG involvement in service planning 		Compliant

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.	<ul style="list-style-type: none"> • Governor and patient involved in service redesign • Engagement with Health watch • Experience Based Design approach used to engage patients in service re-design • Patient and family engagement events • FFT • Patient and family feedback forms • The Council of Governors represent member, members of the public and partner organisations and are actively engaged in the Trusts strategic planning. • 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. • Members are also invited directly from the trust to become involved in setting the Trust quality 		
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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	<ul style="list-style-type: none"> • Patient and family 		Compliant

<p>have any complaint you make about NHS services acknowledged within three working days and to have it properly investigated</p>	<p>support team Complaints monitoring reported at Trust Board</p> <ul style="list-style-type: none"> • Complaints reported within the Annual Report • Internal target for response to complaints set • Update on complaints handling received at Quality and PFEC Committee/Quality committee • Divisional governance committees receive monthly updates on concerns and complaint with their respective areas • Complaints Annual Report presented at Trust Board • All complaints acknowledged within three working days in writing and if they are available discussions take place with complainants regarding expectations 		
<p>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</p>	<ul style="list-style-type: none"> • Complaints Policy • Patient and family support team reports to the Quality committee and Board of Directors 		Compliant
<p>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</p>	<ul style="list-style-type: none"> • All complaints are reviewed by and signed off by the CEO • Meetings facilitated by Patient and family support team to discuss individual complaints • Survey of complaint 		Compliant

confirmation that any action needed in consequence of the complaint has been taken or is proposed to be taken.	<p>satisfaction</p> <ul style="list-style-type: none"> • Non-Executive complaints review panel in place • Complainants are asked how they would like to receive their responses in writing/meeting • Learning from complaints shared with directorate • Governance meetings 		
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"> • Complaints policy in place in accordance with legislation requirements • Reporting of PHSO complaints in annual report • Patients are invited to contact the trust in the first instance following their response if they require further clarity then they are proved with the details of the PSHO if they remain dissatisfied 		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"> • Complaints policy in place in accordance with legislation requirements • Claims policy in place 		Compliant
You have the right to compensation where you have been harmed by negligent treatment.	<ul style="list-style-type: none"> • Legal Services Department in place for compensation claims • IICC report received by the Board includes claims 		Compliant

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			
Rights	Update	RAG	Compliant/Non-Compliant
To fair treatment regarding leave, rights and flexible working and other statutory leave requests relating to work and family, including caring for adults that you live with	Single Equality Scheme Special Leave Flexible Working Dignity at Work Health & Wellbeing Group Flexible Retirement Policy		Y
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 (eg bullying and harassment)	Equality and Inclusion Policy Listening into Action Programme (LiA) Staff survey Results and Action Plans Dignity at Work Policy Health & Safety Group Report		Y
Number two: Have a fair pay and contract framework			
Rights	Update	RAG	Compliant/Non-Compliant
To pay: consistent with the national minimum wage or alternative contractual agreement To fair treatment regarding pay	Agenda for Change Pay Scale Consultant Contract Job Evaluation Process Band 1 – 4 Development Programme Apprenticeships		Y
To be accompanied by	Disciplinary Policy Maintaining High Professional		Y

with a trade union official or a work colleague at disciplinary or grievance hearings in line with legislation, your employers policies or your contractual rights	Standards (MHPS) Grievance Policy Dignity at Work Policy Annual Audit to People Committee on Employment Relations work		
To consultation and representation either through the trade union or other staff representatives (for example where there is no trade union in place) in line with legislation and any collective agreements that may be in force	HR Policies as above Partnership forum Staff Listening into Action Programme Local Negotiating Committee Staff Governors		Y
Number Three: Have healthy and safe working conditions and an environment free from harassment bullying or violence			
Rights	Update	RAG	Compliant/Non-Compliant
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	Dignity at Work Policy Disciplinary Policy Grievance Policy PACT - Values and Behaviours Framework 2015 Staff Survey Action Plan Unreasonable Behaviour Policy Zero Tolerance Policy Measured through People Committee and Health & Safety Group Listening into Action Programme Raising Concerns Policy Speak out Safely and Guardian Role		Y

Number four: Be treated fairly, equally and free from discrimination			
Rights	Update	RAG	Compliant/Non-Compliant
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 Equality Impact Assessments PACT - Values and Behaviours Framework Annual Report to People Committee on Employee Relations Recruitment Policy and Procedures Dignity at Work Policy		Yes
Number five: Can in certain circumstances take a complaint about their employer to an employment tribunal			
Rights	Update	RAG	Compliant/Non-Compliant
To appeal against wrongful dismissal if internal processes fail to overturn a dismissal you have the right to pursue a claim in the employment tribunal if you meet required criteria	Polices with clear processes within them Disciplinary Grievance Capability Sickness Absence MHPS		Y
Number six: Can raise any concern with their employer whether it is about safety, malpractice or other risk, in the public interest			
Rights	Update	RAG	Compliant/Non-Compliant
To protection from detriment in employment and the right not to be unfairly dismissed for whistleblowing or reporting wrong	Speak out Safely Campaign Raising Concerns Policy Lessons Learnt approach to sharing Executive Safety Huddle daily		Y

doing in the workplace			
Number seven: Have employment protection (NHS employees only)			
Rights	Update	RAG	Compliant/Non-Compliant
You have a right to employment protection in terms of continuity of service for redundancy purposes if moving between NHS employers	Policies Agenda for Change provisions Organisational Change Policy		Y
Number eight: Can join the NHS pension scheme (NHS employees and some other groups e.g. GPs)			
Rights	Update	RAG	Compliant/Non-Compliant
You have rights relating to the ability to join the NHS pension scheme	Contract of Employment National NHS Pension Scheme		Y

Staff Pledges

Pledge one: The NHS commits to provide a positive working environment for staff and promote supportive open cultures that help staff to do their job to the next of their ability			
Update	RAG	Compliant/Non-Compliant	
Staff engagement and well-being <ul style="list-style-type: none"> • LiA • SPF • Health and Wellbeing Group 		Y	
Regular appraisal and training opportunities <ul style="list-style-type: none"> • Mandatory Training Programme (E Learning) • New Appraisal Process • PACT - Values and Behaviours Framework • Personal Development Plans (PDP) 		Y	

<ul style="list-style-type: none"> Leadership and Management Development Programme 		
Pledge Two: The NHS commits to provide all staff with clear roles and responsibilities		
Update	RAG	Complaint/Non-Compliant
Role design and responsibilities to enable high quality care <ul style="list-style-type: none"> Agenda for Change Handbook Job Evaluation Process Job Description Template Standard Contract of Employment 		Y
Contract of employment for staff supports this pledge <ul style="list-style-type: none"> Paragraph included in Contract of Employment and reference to constitution 		Y
Regular appraisals and training opportunities <ul style="list-style-type: none"> New Appraisal Process and E-Learning System PDP – >85% target Mandatory and Essential Training >95% target 		Y – work in progress

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		
Update	RAG	Compliant/Non-Compliant
Utilisation of the knowledge and skills framework <ul style="list-style-type: none"> NHS knowledge and skills not used in full but job specific competencies in place – 		Y
Educational Governance and investment in continuous personal development (CPD) <ul style="list-style-type: none"> Divisional Education Groups in place Scoping out as part of People and OD Strategy Succession planning own Cardiothoracic 		Divisional Education Groups Work in Progress

Pathway		Electronic CPD appointment system
Spotting and developing confident leaders <ul style="list-style-type: none"> Talent management process in development Leadership Development Programme PACT - Values & Behaviours Framework 		Work in progress on Talent Management
Pledge Four: The NHS commits to provide support and opportunities for staff to maintain their health, well-being and safety		
Update	RAG	Compliant/ Non-Compliant
Trusts are required to prevent violence against staff whenever possible and to take all appropriate action, including prosecutions of offenders, when violence occurs <ul style="list-style-type: none"> Disciplinary Policy Dignity at Work Unreasonable Behaviour Policy 		Y
Staff, patients and others are protected against the risks of acquiring a healthcare associated infection <ul style="list-style-type: none"> Induction Mandatory Training Occupational Health Self-Referral Health and Well Being Group Infection prevention policies in place Infection prevention reports received by the board Infection prevention training mandatory Training Programme 		Y
Staff are supported in their health and well-being <ul style="list-style-type: none"> Health & Well Being Group and events programme Occupational health available for self-referrals Employee assistance programme in place Flu Campaign 70% uptake 		Y
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.		

Update	RAG	Compliant/ Non-Compliant
Social partnership forum <ul style="list-style-type: none"> • Staff Partnership Forum • LiA • Staff Governors role • LNC 		Y
Staff, patients and others are protected against the risks of acquiring a healthcare associated infection <ul style="list-style-type: none"> • Training in Infection Prevention Control (as above) 		Y
Staff are supported in their health and well being (as above)		Y
Pledge six: The NHS commits to have a process for staff to raise an internal grievance		
Update -	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Grievance procedure • Annual Report to People Committee on Employee Relations activity (as above)		Y
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.		
Update	RAG	Compliant/Non-Compliant
Raising concerns <ul style="list-style-type: none"> • Raising concerns policy • Guardian Role • Executive daily safety huddle • Speak out Safely Campaign 		Y

Staff Legal Duties

Duty One: To accept professional accountability and maintain the standards of professional practice as set by the appropriate regulatory body applicable to your professional role		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Annual PDR • Appraisal and Mandatory Training Programme • Training and Development as appropriate • CPD opportunities • Professional Membership - PINs 		Y
Duty Two: To take reasonable care of health and safety at work for you, your team and others and to cooperate with employers to ensure compliance with health and safety requirements.		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Occupational Health Process • Managers Development Process • Leadership Development Programme • PACT - Values and Behaviours Framework • Health and Safety Group 		Y
Duty Three: To act in accordance with the express and implied terms of your contract of employment		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • PACT - Values and Behaviours • Clear Job Descriptions • Job Evaluation Scheme • Employment Policies 		Y
Duty four: Not to discriminate against patients or staff and to adhere to equal opportunities and Equality and human rights legislation		
Update	RAG	Compliant/Non-Compliant
As above <ul style="list-style-type: none"> • Equality Delivery Scheme 2 in place • New Equality and Inclusion Policy in place with Plan 		In progress

Duty Five: To protect the confidentiality of personal information that you hold		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Data Protection Act • Information Governance Process • Contract of Employment • Trust Policies 		Y
Duty Six: To be honest and truthful in applying for a job and in carrying out that job.		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Recruitment & Selection Procedures • ESR NHS Jobs • Recruitment checks • Fit and proper person processes 		Y

Expectations for staff

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		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • LHCH Values and behaviours refreshed. • Attitude and behaviours to be included as part of new appraisal system • Induction Mandatory Training • Full Preceptorship 		In progress

Expectation Two: You should take up training and development opportunities provided over and above those legally required of your post		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Mandatory and Essential Training Programme • Full range of CPD opportunities managed by electronic application • New Leadership Programme in development • New Talent Management programme being developed • LHCH Cardiothoracic degree programme • In-house job specific training available including clinical skills development 		In progress
Expectation three: You should aim to play your part in sustainably improving services by working in partnership with patients, the public and communities framework		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Patient & Family Engagement Events • Shadowing Programme 		Compliant
Expectation four: You should aim to raise any genuine concern you have about a risk, malpractice or wrong-doing 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 reasonable opportunity		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Raising Concerns Policy • Guardian Role • Speak Out Safely Campaign • Executive led Safety Huddle 		Compliant
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		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Care partner programme • Patient and Family Experience vision • Open visiting 		Compliant

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		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Being open policy • Duty of candour • Training plan being rolled out 		Compliant
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		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Raising Concerns Policy • Lessons Learned Approach • Speak Out Safely Campaign • Executive led Safety Huddle • Incident Reporting Process 		Compliant
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		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Shadowing • Patient and family listening events • Patient and family stories • Named boards above all inpatient beds 		Compliant
Expectation Nine: you should aim to take every opportunity to encourage and support patients and colleagues to improve their health and well-being		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Health and wellbeing group and events • Cardiac rehab programme 		Compliant
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 health care		
Update	RAG	Compliant/Non-Compliant
<ul style="list-style-type: none"> • Equality & Diversity Training being updated • Equality Delivery Scheme 2 in progress 		In progress

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