



Compliance with patient and public rights within the NHS Constitution

Quarter 1 2017-18

Executive Summary

All NHS organisations are required to take account of the NHS Constitution in performing their NHS functions. This is a requirement of our provider licence under Condition G6.

The NHS Constitution contains a number of rights and pledges. **Rights** are entitlements protected by law. **Pledges** are matters which the NHS is committed to achieve, supported by management and regulatory systems. The pledges are not legally binding and cannot be guaranteed for everyone all of the time, because they express an ambition to improve, going above and beyond legal rights.

Compliance with the NHS constitution has been assessed for the period April to June 2017. This assessment has been carried out by the subject expert leads for each area, to ensure that changes during the quarter have been fully reflected in the overall update and assessment of ongoing compliance.

The Board will note that compliance across all applicable areas has been declared.

Recommendation





The Board is recommended to note the content of this report.



PAUL HOWARD
Trust Board Secretary

ACCESS TO HEALTH SERVICES

Pledges

- 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 include you in relevant discussions.



ACCESS TO HEALTH SERVICES		
You have the right to...	Commentary	Assessment
Receive NHS services free of charge, apart from certain limited exceptions sanctioned by Parliament.	CCG commissioned services are provided free at the point of delivery, except for those sanctioned by Parliament. In addition, some services now require prior approval via commissioners.	 COMPLIANT
Access NHS services, and not to be refused access on unreasonable grounds.	Access to services is available using a range of options including Choose and Book, Direct Access Clinics, Accident and Emergency and the Walk-in Centre.	 COMPLIANT
Expect the 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.	<ul style="list-style-type: none"> ▪ Commissioning plans are in place to commission services from WWL. ▪ Quality, Innovation, Productivity and Prevention (QIPP) Board established to forward plan future of locally provided services. ▪ 18-week RTT performance reported to Board ▪ 5-year plan published on NHSI website ▪ Engagement of members in service redesign ▪ Ongoing evidence-based design surveys ▪ Engagement with Wigan Pride and Wellfest ▪ Membership of Wigan Leaders' Engagement Committee 	 COMPLIANT
In certain circumstances, go to other European Economic Area countries or Switzerland for treatment which would be available to you through your NHS commissioner.	Not applicable to WWL – commissioner responsibility	 NOT APPLICABLE

ACCESS TO HEALTH SERVICES		
You have the right to...	Commentary	Assessment
<p>Not be unlawfully discriminated against in the provision of NHS services, including on the 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"> ▪ WWL Inclusion and Diversity Strategy 2016-20 covers all protected characteristics. ▪ 4 equality objectives implemented for 2016-20 in line with Public Sector Equality Duty requirements. ▪ DoH Equality Delivery System EDS2 embedded and annual assessment undertaken. ▪ We undertake equality impact assessments on all policies and practices to ensure that any new or existing policies do not disadvantage any group or individual. ▪ Engagement Plan in place. ▪ Access to interpreter and translation services for BSL and foreign languages ▪ Annual Inclusion and Diversity monitoring report. ▪ 35 Inclusion and Diversity champions in place within WWL 	 COMPLIANT
<p>Access services within maximum waiting times, or for the NHS to take all reasonable steps to offer you a range of alternative providers if this is not possible.</p>	<ul style="list-style-type: none"> ▪ Monitoring of all access/waiting targets as outlined in the NHS Operating Framework and NHS Improvement Risk Assessment Framework reported in the monthly performance report. 	 COMPLIANT

QUALITY OF CARE AND ENVIRONMENT

Pledges




- To ensure that services are provided in a clean and safe environment that is fit-for-purpose, based on national best practice
- To identify and share best practice in quality of care and treatments
- That 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

QUALITY OF CARE AND ENVIRONMENT		
You have the right to...	Commentary	Assessment
<p>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</p>	<ul style="list-style-type: none"> ▪ CQC registration maintained without compliance conditions ▪ Response to patient safety alerts ▪ Adherence to NICE guidance ▪ AQUA programme ▪ Advancing Quality Programme ▪ Work of Quality Champions ▪ Fit and Proper persons test ▪ Compliance with mandatory training monitoring 	 COMPLIANT
<p>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"> ▪ Regular reviews of leadership and governance using NHSI's well-led framework ▪ Three year Quality Strategy priorities ▪ Quality Champion Projects ▪ Annual Quality Account priorities ▪ Sign Up to Safety Improvement Plan ▪ National Survey Programme ▪ Real Time Patient Surveys ▪ Experience Based Design Projects ▪ Internal Audit and Clinical Audit Programmes ▪ PLACE Assessments ▪ Safety Thermometer ▪ Friends and Family Test ▪ Always Events/Goodnight Always Events ▪ Internal 'Mock' CQC Inspections ▪ Leadership Walk rounds ▪ Review of incidents and complaints ▪ Safe Effective Caring (SEC) and Trust Board Performance Reports ▪ Organisational Committee Structure ▪ Delivering Same Sex Accommodation (DSSA) Policy, experience survey and information leaflet 	 COMPLIANT

NATIONALLY-APPROVED TREATMENTS, DRUGS AND PROGRAMMES

Pledges



- To provide screening programmes as recommended by the UK National Screening Committee.





NATIONALLY-APPROVED TREATMENTS, DRUGS AND PROGRAMMES		
You have the right to...	Commentary	Assessment
Drugs and treatments 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"> ▪ Medicines Management Policy and associated SOPs ▪ NICE Guidance Policy and Procedure ▪ Medicine Management Audits and Dashboards ▪ Medicine Management Strategy Board and Medicines Safety Committee ▪ GMMMG medicines management formulary is followed and requests for non GMMMG items are regularly rejected 	 COMPLIANT
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"> ▪ Medicines Management Policy and associated SOPs; ▪ NICE Guidance Policy and Procedure; ▪ Medicine Management Audits and Dashboards; ▪ Medicine Management Strategy Board and Medicines Safety Committee; ▪ GMMMG medicines management formulary is followed and requests for non GMMMG items are regularly rejected. ▪ Cancer Drugs Fund - regional approval process for cancer drugs not funded by NHSE ▪ Individual Funding Requests are approved or rejected by the CSU on behalf of CCG 	 COMPLIANT
Receive the vaccinations that the Joint Committee on Vaccination and Immunisation recommends that you should receive under an NHS-provided national immunisation programme	Not applicable to WWL	 NOT APPLICABLE

RESPECT, CONSENT AND CONFIDENTIALITY

Pledges

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




RESPECT, CONSENT AND CONFIDENTIALITY		
You have the right to...	Commentary	Assessment
<p>Be treated with dignity and respect, in accordance with your human rights.</p>	<ul style="list-style-type: none"> ▪ Code of Confidentiality, Dignity and Respect Policies in place and adhered to. ▪ Clinical care policies, procedures and guidance are in place. These are subject to impact assessments. ▪ Compliance with mixed sex accommodation. ▪ Delivering same-sex accommodation (DSSA) audits undertaken ▪ DSSA Occurrence Policy ▪ Chaperone Policy ▪ Patient Experience Survey ▪ Internal Mock CQC Inspections ▪ Always Events Audits including Goodnight Always Events 	 COMPLIANT
<p>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.</p>	<ul style="list-style-type: none"> ▪ A range of clinical care policies, procedures and guidance are in place. These are subject to impact assessments. ▪ Compliant with mixed sex accommodation. ▪ Chaperone Policy adhered to. ▪ Treatments will be explained to patients as far as possible and repeated if necessary. ▪ Consent audits undertaken ▪ Learning from complaints and incidents monitoring ▪ Vulnerable child/adults/safeguarding policies in place ▪ Learning Disability Hospital visit programme includes A&E and Outpatients ▪ Internal Mock CQC Inspections 	 COMPLIANT

RESPECT, CONSENT AND CONFIDENTIALITY		
You have the right to...	Commentary	Assessment
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 to CQC Fundamental Standards compliant ▪ Pre Op assessment ▪ Specialist Nurse support ▪ Learning from complaints monitoring ▪ Shared decision making projects ▪ Two Cohorts of Staff Trained in Shared Decision Making (SDM) ▪ Feedback from Patient Surveys 	 COMPLIANT
Privacy and confidentiality and to expect the NHS to keep your confidential information safe and secure.	<ul style="list-style-type: none"> ▪ Protecting your data information ▪ Information Governance (IG) Toolkit monitoring via Audit Committee ▪ SIRO position held on Trust Board ▪ Caldicott Guardian on Trust Board ▪ Information Governance Committee monitoring role ▪ Achievement of all Information Governance Level 2 standards for V13 of the Toolkit ▪ IG Toolkit compliance monitoring ▪ Code of confidentiality in situ 	 COMPLIANT
Be informed about how your information is used.	<ul style="list-style-type: none"> ▪ Information Governance Toolkit monitoring via Audit Committee ▪ Senior Information Risk Owner (SIRO) position held on Trust Board ▪ Caldicott Guardian on Trust Board ▪ Caldicott Committee monitoring role ▪ Achievement of all Information Governance Level 2 standards for V13 of the toolkit ▪ Patient information leaflet available 	 COMPLIANT
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.	<ul style="list-style-type: none"> ▪ Access to Health Records information ▪ Patient Relations and PALS service support ▪ Copying Letters to patients Policy ▪ Interpreter service available. ▪ Patients can apply under the data protection to access their health records. ▪ Patients can apply under the data protection to access their health records. ▪ Information Governance Toolkit – compliance monitored via Audit Committee ▪ Confidentiality Code of Conduct in place ▪ Being Open policy and Duty of Candour Policy 	 COMPLIANT

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.


INFORMED CHOICE		
You have the right to...	Commentary	Assessment
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	Not relevant to WWL – primary care responsibility	 NOT APPLICABLE
Express a preference for using a particular doctor within your GP practice and for the practice to try to comply.	Not relevant to WWL – primary care responsibility	 NOT APPLICABLE
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 ▪ Leaflets are also available in alternative formats such as large print Braille alternative languages and audio. ▪ Easy Read A&E, Inpatients, Outpatients and PALS Leaflet ▪ Leaflets are available for download on the internet/intranet ▪ Ongoing implementation of the Accessible Information Standard ▪ Information on National ratings Choices Website ▪ CQC ratings ▪ Monitor Risk Assessment Framework ▪ Consultant Profiles on WWL internet ▪ Patient Opinion Project ▪ Dr Foster Publications ▪ Patient Reported Outcome Measures (PROMS) and Patient Reported Experience Measures (PREMS) information ▪ Friends and Family test information ▪ NHS Choices, CQC websites 	 COMPLIANT


INVOLVEMENT IN YOUR HEALTHCARE AND IN THE NHS

Pledges

- To provide you with the information 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

INVOLVEMENT IN YOUR HEALTHCARE AND IN THE NHS


You have the right to...	Commentary	Assessment
<p>Be involved in discussions and decisions about your health and care, including your end of life care and to be given information to enable you to do this. Where appropriate this right includes your family and carers. (includes CCG duty to promote involvement of patients / carers)</p>	<ul style="list-style-type: none"> ▪ Decisions in clinical care monitored by national survey programme ▪ Involvement in decision monitored in Real Time Patient Experience (RTPE) survey ▪ Information on how to become involved in the design and delivery of services is distributed via the Membership and Engagement Department. ▪ Membership panels used to comment on patient information and WWL's plans ▪ Workshops using Evidence Based Design ▪ Hourly Rounding ▪ Friends and family test ▪ Specialist Nursing services ▪ Two Cohorts of Staff Trained in shared decision making ▪ Always Events and Goodnight Always Events ▪ Consent policy ▪ White Board initiative ▪ Ongoing audit of always events including Expected date of discharge awareness discussion ▪ Enhance end of life care pathway involving multi agency working ▪ Dedicated Bereavement Nurse Specialist ▪ Member of the bereavement alliance alongside Salford and Bolton ▪ Bereavement survey undertaken ▪ Discharge Policy ▪ Self-Discharge Policy ▪ 7 Day No Delay Project ▪ Patient Discharge Checklist ▪ Patient Discharge Flow Chart and wallet ▪ Integrated Discharge Team ▪ Discharge to Assess 	 COMPLIANT





INVOLVEMENT IN YOUR HEALTHCARE AND IN THE NHS		
You have the right to...	Commentary	Assessment
<p>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 (includes CCG duty to consult on service changes)</p>	<ul style="list-style-type: none"> ▪ Membership events in the community. ▪ Membership Engagement Strategy ▪ PPI Strategy ▪ Council of Governors involvement in service planning ▪ Membership panels used to provide service planning feedback ▪ Close liaison with Overview and Scrutiny Committee in service change ▪ Engagement with GP Commissioners in service change ▪ Governor and patient involvement in service redesign teams ▪ Consultation policy ▪ Engagement with Healthwatch ▪ Experience Based Design approach used to engage patients in service re-design ▪ Patient and Public Involvement integrated into Business plans regarding implementation of new services and service changes. 	<p style="text-align: center;">  COMPLIANT </p>

COMPLAINTS 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
- When mistakes happen, to acknowledge them, apologise, explain what went wrong and put things right quickly and effectively
- To ensure that the organisation learns lessons from complaints and claims and uses these to improve NHS services

COMPLAINTS AND REDRESS		
You have the right to...	Commentary	Assessment
<p>Have any complaint you make about NHS services acknowledged within three working days and to have it properly investigated</p>	<ul style="list-style-type: none"> ▪ Patient Relations Team support complaints ▪ Working in concert with the CQC Fundamental Standards Regulation 16 ▪ The Complaints Policy and Procedure TW10-021 and TW10-021 SOP 1 ▪ Complaints policy revised to embed system at Divisional level ▪ Complaints monitoring reported at Trust Board ▪ Complaints reported within the Trust's Annual Report ▪ Complaints reported in Corporate Safe Effective Caring (SEC) Report presented at Quality and Safety Committee and to Commissioners ▪ Internal target for response to complaints set ▪ Medical Director and Deputy Director of Nursing see all High/Serious rated complaints ▪ Complaints response devolved to Divisions ▪ Patient opinion maintained and postings responded to ▪ Complaints Annual Report presented to Quality and Safety Committee and Trust Board October 2016 ▪ Complainant satisfaction Survey undertaken 	 COMPLIANT

COMPLAINTS AND REDRESS		
You have the right to...	Commentary	Assessment
Be kept informed of progress and to know the outcome of any investigation into your complaint.	<ul style="list-style-type: none"> ▪ Complaints letter signed off by the CEO. In the absence of the CEO they are signed off by a Trust Board Executive. ▪ Meetings facilitated by Patient Relations Team to discuss individual complaints ▪ Serious or more complex complaints reviewed by Medical Director and Director of Nursing ▪ All complaints are shared at the Executive Scrutiny Meetings at weekly meeting to discuss complaints, serious incidents, claims and inquests with supplementary Executive scrutiny of high/serious 'red rated' complaints ▪ Complainant satisfaction survey undertaken 	 COMPLIANT
Take your complaint to the independent Parliamentary and Health Service Ombudsman (PHSO) 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 	 COMPLIANT
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 	 COMPLIANT
Compensation where you have been harmed by negligent treatment.	<ul style="list-style-type: none"> ▪ Legal Services Department in place for compensation claims ▪ Legal Services annual report received by Audit Committee and Trust Board ▪ Review of compensation claims conducted by Division ▪ Executive scrutiny of clinical negligent claims at weekly meeting to discuss complaints, serious incidents, claims and inquests. 	 COMPLIANT



**Compliance with staff rights, duties, pledges
and expectations within the NHS Constitution**

Quarter 1 2017-18

NHS Constitution – Update on Staff Rights, Pledges, Duties & Expectations

Staff Rights

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.	A range of policies are in place to support this right: <ul style="list-style-type: none"> • Flexible working policy & toolkit • Special Leave Policy 		Compliant
To request other 'reasonable' time off for emergencies (paid and unpaid) and other statutory leave (subject to exceptions).	A range of policies are in place to support this right: <ul style="list-style-type: none"> • Flexible working policy & toolkit • Special Leave Policy 		Compliant
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)	A range of policies are in place to support this right: <ul style="list-style-type: none"> • Grievance Policy linked to Raising Concerns Policy • Divisional Equality Champions and quarterly I&D Steering Group • I&D Operational Group Development and publication of Equality Objectives • Quarterly pulse check to obtain staff views and opinions • Listening Events. 		Compliant

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.	<ul style="list-style-type: none"> • The Trust adheres to National Policy on minimum wage and other national frameworks through the application of national terms and conditions of employment • All non-medical posts independently banded in accordance with the Agenda for Change Job Evaluation Handbook and national profiles • Local negotiating committees in place where local policy and practice is agreed with staff side 		Compliant

Be involved and represented in the workplace			
Rights	Update	RAG	Compliant / Non-compliant
To be accompanied by either a Trade Union official or a work colleagues at disciplinary or grievance hearings in line with legislation, your employer's policies or your contractual rights.	<p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> Partnership Working Policy including reference to the NHS Constitution and staff pledges. Grievance and Disciplinary Policies and Maintaining High Professional Standards all incorporate the right to representation 		Compliant
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.	<p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> Partnership Working Policy Disciplinary, Grievance, Capability and Organisational Change policies include the right to representation by a trade union or to be accompanied by a work colleague Staff engagement programmes, including listening and action events, quarterly pulse check, annual staff survey and leadership values questionnaires Patient Experience Network (PEN) National Award for Staff Engagement 2015 Shortlisted for a CIPD Award 2016 for Best Employee Engagement Initiative Shortlisted for an HSJ Award 2016 for Staff Engagement 		Compliant

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.	<p>Partnership working:</p> <ul style="list-style-type: none"> Local Police Focus Groups for staff with protected characteristics e.g. BME <p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> Annual Leave Policy Behaviour and Attitudes at Work Leaflet Code of Conduct Policy Disciplinary Policy Flexible Working Policy & Toolkit Time Owing Policy Raising Concerns Policy for Handling Staff Concerns The Trust adheres to National Policy on employees entitlements under working time directives. 		Compliant

	<p>In addition the Trust provides training to underpin these rights:</p> <ul style="list-style-type: none"> • Conflict resolution eMandatory • Conflict resolution training – high risk areas • Caring for our Customers Training • CMI accredited Leadership and Management Programmes • Specific Training to Security Staff • Incident Reporting Training (Datix) • Steps 4 Wellness Programme, including Resilience Training for staff. 		
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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.	<p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> • Behaviour and Attitudes at Work Leaflet • Grievance Policy • Recruitment and Selection Policy <p>In addition the Trust has consulted and ratified the following scheme and training to underpin these rights:</p> <ul style="list-style-type: none"> • Equality Impact Assessment • Inclusion and Diversity Champions • Equality Delivery System and Action Plan • Embedding I&D into leadership programmes • Mandatory Inclusion and Diversity e-learning programme for all staff • Workforce Race Equality Standard (WRES) 		Compliant

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	<p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> • Grievance Policy • Maintaining High Professional Standards • Disciplinary Policy & Procedures 		Compliant

	<ul style="list-style-type: none"> • Management of Sickness Absence Policy • Performance Management Policy • Job Security and Organisational Change Policy <p>Policies have clear appeal processes contained within them</p>		
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	<p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> • Grievance Policy • Disciplinary Policy & Procedures • Management of sickness absence Policy • Performance Management Policy • Job Security and Organisational Change Policy • Maintaining High Professional Standards 		Compliant
Can raise any concern with their employer whether it is about safety, malpractice or other risk, in the public interest			
To protection from detriment in employment and the right not to be unfairly dismissed for 'whistleblowing' or reporting wrongdoing in the workplace.	<p>A range of policies are in place to support this right:</p> <ul style="list-style-type: none"> • Raising Concerns Policy • Code of Conduct Policy • Grievance Policy • Management of Sickness Absence Policy <p>The Trust works with NW Anti-Fraud who independently investigate any complaints via this route. The Raising Concerns Policy is consistent with the Anti-Fraud legal framework and NHS National Whistle Blowing Policy and is regularly updated. The Trust also has a Freedom to Speak Up Guardian to provide an independent route for complainants.</p>		Compliant

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.	<p>A range of policies / contractual obligations are in place to support this right:</p> <ul style="list-style-type: none"> • Job Security and Organisational Change Policy • Terms & Conditions of employment (e.g. NHS Agenda for Change & Medical Staff T&C's) 		Compliant

	In addition the Trust has agreed to work with local Trusts in the area to facilitate redeployment where there is opportunity to do so.		
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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	<p>All new eligible employees are automatically registered with the NHS Pensions Scheme Auto-enrolment from April 2013 also gives the option of a non NHS scheme (NEST) for those not eligible to join the NHS scheme.</p> <p>The Trust complies with Auto Enrolment Legislation for new starters although full implementation of Auto Enrolment has been deferred until 2017.</p>		Compliant

Staff Pledges

Pledge One: The NHS commits to provide a positive working environment for staff and to promote supportive, open cultures that help staff do their job to the best of their ability.			
Update		RAG	Compliant / Non-compliant
<p>Staff Engagement and Wellbeing</p> <ul style="list-style-type: none"> • The Trust participates in the annual NHS staff survey • Staff engagement programmes including walkabouts, listening / action events and quarterly pulse checks. • The Trust provides a Staff Engagement Pioneer Teams Programme designed to equip and enable teams to improve their staff engagement at a local level. • The Trust provides a Staff Health & Well-Being Programme called “Steps 4 Wellness” which includes a range of services associated with physical health, mental health, keeping social and healthy choices. • A Mindfulness Practitioner running 6 week mindfulness programmes and stress management sessions. • A programme of Health and Wellbeing Programmes including, Mental Health and Resilience. • The Trust has a Raising Concerns Policy • A programme of cultural awareness and inclusiveness is managed through the Equality Delivery System Action Plan • The Trust complies with the Workforce Race Equality Standard • Always events launched January 2014, including challenging those who do not do the right thing 			Compliant

<ul style="list-style-type: none"> • Patient Experience Network (PEN) National Award for Staff Engagement 2015 • Finalist in the CIPD Award 2016 for Best Employee Engagement Initiative • Runner up in the HSJ Award 2016 for Staff Engagement • Mediation services • Critical Incident Stress Management (CISM) Service • Mental Health Awareness and resilience training courses • Going the Extra Mile Recognition Scheme • Recognising Excellence annual staff recognition event 		
<p>Regular Appraisals and Training opportunities:</p> <ul style="list-style-type: none"> • All staff are required to have an annual PDR; for some staff this will take the form of a job chat form to ensure the PDR process is relevant to all staff PDR compliance rates by division reported to Trust Board each month • Training opportunities promoted via Trust News, e-mail and Focus on a regular basis as well as through the new Route Planner • Comprehensive eMandatory Training available to all employees to ensure that they are safe and updated in line with risk management requirements. • Incremental pay progression linked to performance criteria, including mandatory training • Internal and external training can be accessed relevant to role and development needs • A WWL Route Planner bringing together the learning and development activities from mandatory training and Personal Development reviews (which are now called My Route Plan), to career pathways which support personal and professional development into new roles. This is aligned to our WWL People Promise 		Compliant

<p>Pledge Two: The NHS commits to provide all staff with clear roles and responsibilities and rewarding jobs for teams and individuals that make a difference to patients, their families and carers and communities.</p>		
Update	RAG	Compliant / Non-compliant
<p>Role Design and responsibilities to enable high quality care:</p> <ul style="list-style-type: none"> • Design of roles in line with service requirements, Agenda for Change Job matching, Evaluation and Consistency Checking processes in place. • Job Security and Change Policy to provide a framework for organisation and service reviews. • IMPACT course includes Patient Experience references • Ongoing Patient Experience Survey and reporting to Trust Board and cascaded through Team Brief. 		Compliant
Contract of Employment for most staff supports this pledge:		Compliant

<ul style="list-style-type: none"> • Agenda for Change Terms & Conditions available for majority of staff • Consultant Contract and other nationally agreed Medical staff contracts adhered to by the organisation • All staff receive contract of employment & Job Descriptions along with annual objectives consistent with the Trust's overarching objectives and strategy. • All Consultants and SAS Doctors undertake annual Job Planning reviews 		
<p>Regular Appraisals and Training opportunities:</p> <ul style="list-style-type: none"> • PDR compliance rates by division reported to Trust Board each month • PDR system aligned to our People Promise • Incremental pay progression linked to local performance criteria including mandatory training • Training opportunities promoted via Trust News, e-mail and Focus on a regular basis and the Route Planner • Comprehensive eMandatory Training available to all employees to ensure that they are safe and updated in line with risk management requirements. 		Compliant

<p>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.</p>		
Update	RAG	Compliant / Non-compliant
<p>Utilisation of the Knowledge and Skills Framework:</p> <ul style="list-style-type: none"> • PDR system mapped against our values which link to the KSF core dimensions. • PDR compliance rates by division reported to Trust Board each month • Leadership 360 degree feedback tool (Leadership Values Questionnaire) • Accredited Leadership development programmes 		Compliant
<p>Educational Governance and Investment in Continuous Personal Development (CPD):</p> <ul style="list-style-type: none"> • The Trust has signed the Skill's Pledge and provides a range of Apprenticeship programmes for internal staff in bands 1-4 with further scope to offer apprenticeship programmes for post-qualified staff with the introduction of the Apprenticeship Levy in May 2017. • Protected Time to Study is available for Medical and non-medical staff. • Allocation of finance for time off for study and training included in a Learning Policy available for all non-medical staff. • All staff are entitled to an additional days study provided they are compliant with mandatory training as detailed in the Learning Policy • Investment in personnel to support medical staff revalidation and appraisal process. • Educational Governance Committee developed in order to ensure the effective strategies are in place to ensure the existence and provision of professional and management development for the full workforce, by overseeing educational governance procedures, processes and structures aligned to organisational and workforce priorities. • An annual Strategic Learning Needs Analysis takes place in order to identify and prioritise learning needs for the financial year 		Compliant

<ul style="list-style-type: none"> • Accredited internal leadership programmes at Levels 3, 5 & 7 • Accredited Coaching programme Level 5 and 7 • Access to regional and national leadership programmes through Leadership Academies 		
<p>Spotting and Developing confident leaders:</p> <ul style="list-style-type: none"> • Development potential discussed as part PDR process where aspirations are explored through the My Route Plan conversation • External accessible Leadership Programmes available for Executives and Managers • Accredited internal leadership programmes at Levels 3, 5 & 7 • Coaching programme for new managers to access coaching and also to develop skills in coaching • In-house Leadership Values Questionnaire 360 feedback tool • A new Be Wigan Collaborative Leadership Programme in pilot phase for leaders across all NHS and Social Care organisations in Wigan Borough with a bespoke leadership behaviour framework designed to reflect each organisation's key leadership values and behaviours with the emphasis on leading from place. 		Compliant

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
<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"> • The Trust has a lead manager and executive for implementation of guidance and training from the NHS Security Management Services. • The Trust has an eMandatory Training module – Conflict resolution and bespoke training for high risk areas. • Conflict resolution is covered on the Trust Induction Programme • Higher level conflict training included in the Learning Needs Analysis • Close working relationships with the local police 		Compliant
<p>Staff, patients and others are protected against the risks of acquiring a healthcare associated infection:</p> <ul style="list-style-type: none"> • The Trust has an eMandatory Training module for all staff on Infection control • HACI are reported to Trust Board monthly and are communicated via Team Brief. • Quality and Safety Matrons have been appointed to each division in the Trust. 		Compliant
<p>Staff are supported in their health and well being:</p> <ul style="list-style-type: none"> • Occupational Health services available to staff including self referral for counselling services. • H&WB incorporated into social responsibilities and staff engagement group • Listening events • Staff engagement calendar of events • Mindfulness programme 		Compliant

<ul style="list-style-type: none"> • Resilience training • Mental health awareness training • Critical Incident Stress Management (CISM) Service • Steps for Wellness Programme promoting healthy lifestyles, mental and physical health and social support 		
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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
Involvement in Social Partnership Forum: <ul style="list-style-type: none"> • The Trust works in partnership with staff side, consulting on organisational change • Staff engagement programme • WWL Way • The Trust holds regular listening / action events and completes a quarterly pulse check. • Dragons Den approach implemented to innovation funding 		Compliant
Staff, patients and others are protected against the risks of acquiring a healthcare associated infection: <ul style="list-style-type: none"> • The Trust has an eMandatory Training module for all staff on Infection control • HACI are reported to Trust Board monthly and are communicated via Team Brief. • Quality and Safety Matrons have been appointed to each division in the Trust. 		Compliant
Staff are supported in their health and well being: <ul style="list-style-type: none"> • Occupational Health services available to staff including self referral for counselling services. • H&WB agenda/programme (WWL Steps 4 Wellness) aligned to staff engagement activities 		Compliant

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 • Staff conversations • Staff engagement listening events • Raising Concerns Policy 		Compliant

Pledge Seven: The NHS commits to encourage and support all staff in raising concerns at the earliest reasonable 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

<ul style="list-style-type: none"> • Raising Concerns Policy • Freedom to Speak Up Guardian • Local Anti-Fraud Specialist • Always events (encourages staff to challenge) • Staff Conversations • Partnership walkabouts 		Compliant
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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 (My Route Plan) • Disciplinary Policy requiring adherence to applicable codes of practice • Performance Management (Capability) Policy • Clinical Staff Registration Policy • Standard item within job descriptions 		Compliant

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 & safety requirements		
Update	RAG	Compliant / Non-compliant
<ul style="list-style-type: none"> • Health & Safety training • Datix risk management system • Health & Safety Policies and protocols • Staff Health & Well-Being Service • H&S reps (for trade union member and non-members) 		Compliant

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"> • Contracts of employment issued to all staff • Job Descriptions reviewed annually at PDR • Annual performance review • Disciplinary Policy 		Compliant

<ul style="list-style-type: none"> Code of Conduct Policy 		
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Duty Four: Not to discriminate against patients or staff and to adhere to equal opportunities and Equality & Human Rights legislation		
Update	RAG	Compliant / Non-compliant
<ul style="list-style-type: none"> Grievance Policy Inclusion & Diversity training I&D Steering and Operational Groups EDS action plan Code of Conduct Policy Always Events Workforce Race Equality Standard (WRES) Recruitment and Selection Policy 		Compliant

Duty Five: To protect the confidentiality of personal information that you hold		
Update	RAG	Compliant / Non-compliant
<ul style="list-style-type: none"> IT security Policies Information Governance training Information Governance Steering Group Information Governance toolkit Information Governance Policies Disciplinary Policy Code of Conduct Policy 		Compliant

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"> Compliance with NHS pre-employment check standards Recruitment & Selection Policy Recruitment & Selection training for managers Code of Conduct Policy Disciplinary Policy Local Anti-Fraud Specialist access Fit and Proper Person Requirement (Directors Only) 		Compliant

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	
Framework	RAG
<ul style="list-style-type: none"> • Objectives cascaded from Trust objectives • Job Descriptions • Annual performance review • Team ethos • Staff engagement programme - including participation in listening events • Always Events • Pioneer team programme • WWL values • Dignity in Care Policy 	

Expectation Two: You should take up training and development opportunities provided over and above those legally required of your post	
Framework	RAG
<ul style="list-style-type: none"> • E-Mandatory training • CPD • Protected time for study 	

Expectation Three: You should aim to play your part in sustainably improving services by working in partnership with patients, the public and communities	
Framework	RAG
<ul style="list-style-type: none"> • Staff engagement programmes • Governor representation and involvement • Patient feedback forum 	

Expectation Four: You should aim to raise any genuine concern you may have about a risk, malpractice or wrongdoing at work (such as a risk to patient safety, fraud or breaches of patient confidentiality), which may affect patients, the public, other staff or the organisation itself at the earliest reasonable opportunity	
Framework	RAG
<ul style="list-style-type: none"> • Raising Concerns Policy • Information Governance training • Fraud awareness 	

<ul style="list-style-type: none"> Local Anti-Fraud Specialist services Always Events (encourages challenge) 	
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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
<ul style="list-style-type: none"> Job Descriptions Annual performance review Always Events Dignity in Care Policy 	

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
<ul style="list-style-type: none"> Duty of candour Datix risk management system Always Events Culture of learning 	

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
<ul style="list-style-type: none"> Always Events Datix risk management system Raising Concerns Policy Annual performance review Staff engagement programme participation (listening events, pulse checks etc.) Leadership Values Questionnaire 	

Expectation Nine: You should aim to view the services you provide from the standpoint of a patient, and involve patients, their families and carers in the services you provide, working with them, their communities and other organisations, making it clear who is responsible for their care

Update	RAG
<ul style="list-style-type: none"> Communication Cells Response to patient feedback Always events Annual performance review 	

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Expectation Eight: You should take up training and development opportunities provided over and above those legally required of your post	
Update	RAG
<ul style="list-style-type: none"> E-Mandatory training CPD Protected time for study 	

Expectation Nine: You should aim to take every appropriate opportunity to encourage and support patients and colleagues to improve their health & well-being	
Update	RAG
<ul style="list-style-type: none"> Personal care plans Health & Well-Being trainers Staff Health & Well-Being service 	

Expectation Ten: You should 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
<ul style="list-style-type: none"> Staff engagement programmes Objectives cascaded from Trust objectives Communication Cells Service transformation projects I&D training EDS action plans – focus groups 	

Expectation Eleven You should aim to inform patients about the use of their confidential information and record their objections, consent or dissent	
Update	RAG
<ul style="list-style-type: none"> Always Events Information Governance training Information Governance Policies Record Keeping Policies 	

Expectation Twelve: You should aim to provide access to patients information to other relevant professionals, always doing so securely, and only there is a	
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legal and appropriate basis to do so	
Update	RAG
<ul style="list-style-type: none">• Clinical information systems• Record Keeping Policies• Information Governance Policies• Multi-Disciplinary Team working	

Alison Balson
Director of Workforce