FRAMEWORK FOR PERSONAL RESPONSIBILITY
&
GUIDELINES FOR MANAGERS

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LEEDS MENTAL HEALTH TEACHING NHS TRUST

A FRAMEWORK FOR PERSONAL RESPONSIBILITY

1. INTRODUCTION

The success of Leeds Mental Health Teaching NHS Trust relies on everyone taking individual responsibility in order to improve the quality of service and personal experience of care for all service users.

Each member of staff has a valuable role to play and a unique contribution to make that will ensure the highest possible standards of care are delivered and sustained.

The Framework for Personal Responsibility has been developed to encourage each person to become involved in creating an open culture with a focus on improvement throughout the Trust.

Personal Responsibility is a philosophy or way of thinking that seeks to improve both the experience of those coming into contact with our services and the experience of the workforce in providing care. It is a commitment to doing our best in providing safe, effective care for service users and to continuously improve standards.

Personal Responsibility relies on:

- Each person realising they have an effect on situations they encounter and are able to contribute to improvements or changes at individual, team or an organisational level
- Each person being committed to personal and organisational improvement

2. AIMS & OBJECTIVES

The objective of the organisation is to achieve a supportive, development centred culture that provides a constructive and stimulating environment for staff whilst delivering high quality services to service users and carers.

Within the Trust we value:

- Openness
- Equality
- Diversity
- Experience
- Innovation
- Learning
These values define the approach of the organisation to providing services to the people of Leeds and the way in which staff are managed. In order to create a culture that strives to deliver high quality services, continuously improve and provide a rewarding work environment, we need to involve staff and key stakeholders in contributing to these objectives.

The Personal Responsibility Framework aims to:

- Create a way in which people can be positively involved in contributing to quality and service improvement
- Support the development and processes associated with Clinical Governance, Patient Safety, Reporting Untoward Incidents, Quality, Service Improvement, Patient and Public Involvement and Risk Management
- Provide a supportive approach to improving and changing behaviour and practice within the Trust

Personal Responsibility aims to develop a more proactive response to acting on improvements either at a personal or an organisational level in order to learn from experience and prevent or reduce mistakes.

The personal responsibility framework is not designed to remove the disciplinary procedure but is intended to allow an alternative approach to achieving improved behaviour. The disciplinary procedure should be used in exceptional situations where it is clearly appropriate, for example:

- Harm to, neglect or abuse of service users
- Theft
- Fraud

3. DEFINING PERSONAL RESPONSIBILITY

Personal responsibility means accepting at least 50% of the responsibility for a situation yourself and, on the basis of this, acting to change or improve the issue. The organisation shares responsibility for the remaining 50%. In line with this principle, you should also get 50% recognition or credit for achieving a change or improvement.

Not standing by and expecting somebody else to act demonstrates personal responsibility. It is accepting that you have a role to play in improving the practice, environment or culture of the organisation and ultimately the service to users.

For example, personal responsibility might be as simple as noticing a spillage on a corridor and, rather than ignore it, taking steps to ensure that it is dealt with promptly. Whilst the problem may not be one that you
created, by taking responsibility and action, you are ensuring that nobody subsequently slips as a result of a problem being overlooked or ignored.

Personal responsibility could be demonstrated through noticing how a process could be improved or a system of work made safer. Where you see the need for a change and potentially a solution, the issue can be raised and directed appropriately for action – before an incident or problem occurs.

In a large organisation where specific procedures/protocols and routines are important, it is often easy for us to expect solutions to problems or even benefits such as training to be determined by somebody else – managers, senior colleagues or other clinicians. It is easy to overlook our personal responsibility for the way that we conduct ourselves and, the subsequent impact of our acts or omissions on service users or colleagues.

Personal responsibility might be defined in the types of behaviours you can choose to display:

- Enabling service users to be involved in their own care and in improving services
- Being an ambassador for the Trust and seeking to enhance the organisation’s reputation through conduct and practice
- Sharing responsibility for improving services or particular situations
- Sharing credit with colleagues when things go well
- Actively learning from mistakes or poorly managed situations to ensure the same error won’t be repeated by improving or changing the way things are done
- Seeking self improvement in interactions with others and in job performance
- Treating others with respect

Personal responsibility may also be used more widely in the Trust to support the aims of effective Clinical Governance, Risk Management/Enhanced Safety for service users, Reporting Untoward Incidents and Service Improvement.

These frameworks in the Trust seek to continuously improve the quality of service and to safeguard high standards of care. They aim to achieve this by creating an environment in which clinical care will flourish and improvements are effected – a significant element of this is influenced by the culture of the organisation and the extent to which this encourages learning and improvement.
You may use the Personal Responsibility Framework to bring forward concerns or issues in confidence that they will be dealt with appropriately and without over-reaction. These might include:

- An incident or practice you have committed which you feel unhappy about
- Acting in accordance with instructions you feel were inappropriate and detrimental to the care of service users
- Failure to follow Trust protocols or procedures even where outcomes have not been disastrous (to date)
- Practice or delivery of care where an individual is aware this falls short of that expected.
- Acting in accordance with Professional Codes of Conduct or standards to highlight behaviours or practices that require action or improvement

4. WHAT IS A CULTURE OF PERSONAL RESPONSIBILITY?

The philosophy of personal responsibility can benefit both staff and service users.

A culture of personal responsibility is one of:

- Effective Clinical Governance
- Pro-active people dealing with issues before they become either problems or complaints
- Commitment
- Thinking regularly about how you can do things better either individually or as a team
- Involvement of staff, service users and carers
- Support and remedial action without blame

Developing personal responsibility as an approach or way of thinking will depend on people seeking to achieve open relationships where issues can be discussed and ideas shared. It is about being transparent in the way we do things, acknowledging mistakes when they happen and seeking to learn from these experiences.

A culture develops slowly but as behaviours and responses change, the differences in the way ideas are implemented or problem issues are tackled become more apparent.

Learning to be proactive and seek constructive changes either in relation to organisational practice or personal performance takes confidence. It relies on you seeing opportunities and possibilities for improved services, safety, working relationships or innovation and taking personal responsibility to act.
5. WHAT ARE THE BENEFITS OF PERSONAL RESPONSIBILITY?

<table>
<thead>
<tr>
<th>Service users</th>
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<tbody>
<tr>
<td>• Improved service user involvement in quality and safety of care and service delivery</td>
<td>• A constructive route to achieve change which may reduce complaints</td>
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<td>• Positively motivated staff who act responsibly to maintain high standards or improve skills in delivering care</td>
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<th>Organisation</th>
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<td>• Developing a proactive approach to improvement and service user safety/satisfaction</td>
<td>• Direct involvement of staff, service users, carers and staff side in achieving continuous improvement and the reduction of risk</td>
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<tr>
<td>• Building an open, constructive and supportive culture</td>
<td>• An organisation that learns from the past to improve the future</td>
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<th>Staff Side</th>
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<td>• Framework to work in partnership for the benefit of staff and service users</td>
<td>• Open approach to improve performance and understanding</td>
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<th>Staff Members</th>
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<td>• Opportunity to contribute to improving care, organisational and personal performance</td>
<td>• Empowerment to take responsibility and change a situation</td>
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<td>• Supportive and developmental working environment</td>
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6. HOW DO WE ACT TO TAKE PERSONAL RESPONSIBILITY?

Personal responsibility will be encouraged as a way to change and shape the culture of the organisation.

Where you see an improvement or change that may benefit either service users/carers, members of staff or the wider organisation, this can be raised through your manager or via an appropriate existing framework:

- Clinical Governance lead (Should this be a capital L?)
- Service Improvement Board
- Patient Advice and Liaison Service (PALS)
- Public Involvement Department
- Risk Management
- Quality

Where you wish to take personal responsibility for an issue relating to yourself or practice you are linked with, these should be brought forward to your manager as soon as possible after the event or you becoming aware of an issue.

Issues raised promptly will be viewed more favourably and appropriate supportive action will be advocated wherever possible. Advice should be sought from a staff side representative to discuss the issue if possible.

Issues brought forward will be dealt with in the following way:
- Speak to your line manager about the issue or concern
- If the issue involves your line manager, or you are not confident to speak to your line manager/supervisor, you should speak to either the next level of manager or a Human Resource Manager
- An informal discussion of the incident/issue or concern will take place – if there is no dispute about the facts, no further investigation will be necessary
- The range of options available to address the issue will be discussed and possible actions to remedy the situation will be reviewed.

Further guidance on the approach advocated and the possible remedial support available are detailed in the Personal Responsibility Guidance for Managers.

**PERSONAL RESPONSIBILITY – KEY ELEMENTS AND LINKS**

- Risk Management
- Reporting incidents
- And near misses
- Advocacy for service users
- Being proactive
- Reflective learning
- Sharing credit
- Being open minded (generating and receiving new thinking)
- Sharing ideas and observations
- Personal Attitudes & Conduct
- Involvement
- Service Improvement/Innovation
- Trust Values
- Experience
- Learning
- Diversity
- Equality
- Openness
- Innovation
- Personal Responsibility “I will act”
- Ambassadors for the Trust
- Treating others with respect
- Clinical Governance/Quality
LEEDS MENTAL HEALTH TEACHING NHS TRUST

FRAMEWORK FOR PERSONAL RESPONSIBILITY
MANAGEMENT GUIDANCE

1.0 INTRODUCTION

The framework for personal responsibility is aimed at supporting the culture change process within the Trust.

This framework seeks to:

- Involve staff in contributing to improving practice, enhancing service user experience or safety, and creating an environment in which high standards of clinical care will be achieved and sustained
- Provide a route for moving away from a blame centred culture and to establish a supportive approach for changing behaviour and practice.

Improvements and change in the organisation will not take place unless you recognise the importance of your role and grasp that achieving a better care and work environment is directly influenced by your actions.

The objective of the framework is that:

- Each member of staff understands personal responsibility
- Each person recognises they have a valuable role and contribution in securing the best standard of care for each service user
- Each member of staff is committed to constructively reviewing and improving their individual and team performance
- Personal responsibility is linked to organisational frameworks for clinical governance, quality, service improvement, service user and carer involvement, and risk management (These had capitals earlier)

2.0 OPERATING THE FRAMEWORK

The initial framework was introduced to provide a constructive route for addressing shortfalls that had previously been tackled through the Disciplinary Procedure. The Personal Responsibility Framework has been successful in achieving a more supportive approach and reducing inappropriate reliance on a disciplinary route for resolving issues.

The philosophy has developed and extended to encourage a positive, proactive involvement in further improving the standards and experience of care for service users. Encouraging personal responsibility can further support culture change and improved service delivery through linking mechanisms for improved service user
experience and safety with the organisations existing frameworks - Clinical Governance, Reporting untoward incidents, Service Improvement, Patient and Public Involvement, Risk Management and Quality.

Building an ethos of personal responsibility is a long term objective but one that requires consistent application of the principles in order to effect cultural change in the organisation.

2.1 Climate of the Organisation

The climate of an organisation will to a large extent influence the actions and responses of people during the course of their work. A great deal of the work undertaken in the Trust is governed by specific protocols or procedures and routine plays a significant role in the pattern of working life.

For some staff, this engenders an outlook whereby they come to expect somebody else to set standards, monitor performance and initiate remedial action where required. It becomes easy to “go with the flow” and in some cases this might result in practice that is less than satisfactory for the users of the service.

Historically, many NHS providers have addressed problems or deficits in practice through the Disciplinary Procedure. The outcome of this approach has been organisations that reflect a blame culture and which conversely discourage people from coming forward because they become afraid of the consequences. As a result, the natural tendency for individuals and teams is to hide poor practice, mistakes and issues. This loss of transparency ultimately affects the quality of service the organisation is able to provide to service users. People lose confidence in being able to make a difference, ceasing to exercise control over their own job performance and behaviour.

2.2 Changing the Organisational Culture

Organisational cultures develop and evolve over time. They are defined and influenced by a multiplicity of variables, for example, the espoused values of senior management, the actual behaviour and values of managers, policies, procedures, physical environment, the visibility of line managers, the turnover of staff and movement within the workforce.

Changing an organisational culture is therefore a complex, time consuming process.

As a manager, you are in a position to significantly influence the speed and direction of change through the contact you have with your team and the standards you create and uphold in the work environment.
Creating a culture of openness with a positive emphasis on improvement is contingent on establishing trust between yourself as a manager and your staff team. Additionally, individual staff will need to feel confidence in the organisation, be able to see their involvement/contribution recognised and making a difference in the service to users.

As a manager you can foster trust and confidence in many ways, including:

- Frequently being visible in service areas and getting to know individual members of your team
- Having interaction and exchange of ideas between teams and departments
- Maintaining accessibility for members of staff and allowing time for discussion
- Holding regular team meetings to discuss service issues, and encouraging two way communication
- Encouraging staff to participate in problem solving or suggestions for improvement and testing/implementing those ideas that are feasible
- Reviewing the performance of members of staff regularly and discussing with each individual their particular development needs with action plans to address them
- Encouraging individual members of staff to participate in identifying their own learning needs and seeking appropriate means of addressing these
- Acknowledging and publicising achievements of teams or individuals

You can engage your team in taking personal responsibility by:

- Talking about the principles of the approach during team or individual discussions
- Challenging people to start to think differently and take 50% responsibility for issues
- Publicise and encourage personal responsibility
- Seek to demonstrate a proactive and constructive approach in resolving potential problems
- Link personal responsibility to the frameworks of Clinical Governance, Service Improvement and Involvement so that your team can clearly see where they can contribute directly to quality of care

**2.3 Applying the Framework in Individual Situations**

In addition to encouraging wider improvement or changes in practice, there will be circumstances where an individual comes forward for assistance. These may include:
• An incident or practice they have committed and feel unhappy about
• Failure to follow Trust protocols and procedures even where outcomes have not been disastrous (to date), e.g. a domestic may have received training about control of infection and colour coding practice but not have been following the correct protocols.
• A worry about their performance or practice that may lead to a problem if not addressed, e.g. not understanding a particular procedure or possibly feeling unable to manage challenging behaviour from a service user.
• Acting in accordance with instructions they feel were inappropriate and detrimental to the care of service users
• Practice or delivery of care where an individual is aware this falls short of that expected.
• Practice, delivery of care or behaviour that is not acceptable in terms of Professional Codes of Conduct.

There will be some exceptional situations where the disciplinary procedure will clearly be appropriate; however, this framework seeks in all other circumstances to provide an alternative and supportive means of achieving improvement.

Where personal responsibility is implicit in adhering to a Professional Code of Conduct, the framework is intended to complement codes of conduct rather than provide an alternative.

2.4 How will it work?

Individuals will be encouraged to come and speak to their line manager about any personal responsibility issues or concerns they have.

You should arrange an opportunity for an informal discussion of the incident/concern. The meeting should cover:

• Details of the issue from the individual’s perspective
• Discussion of the issue from an organisational perspective – it may be that the concern is more a personal than organisational issue
• Exploring the knock-on effects (where applicable) of the incident/issue/practice
• Identifying the causes of the act or omission, e.g. Lack of knowledge, training deficit or established local practice
• Discuss what actions or behaviours are more appropriate in the circumstances
• Explore the range of remedial action available to assist the individual
• Write to confirm the range of options discussed for remedying the issue – it is up to the individual to exercise personal responsibility in selecting their preferred route to achieve improvement and to take action.
• Where the options available include access to Staff Support services, the manager may not know whether or not the individual takes up this assistance. Whichever route the member of staff selects, the manager will be anticipating a significant change in behaviour or practice.

• The letter should specify the agreed review period and define the changes required along with any criteria by which improvement will be judged.

Where there is a lack of agreement or clarity relating to an issue brought forward, some investigation may be required. Any investigation should be discreet with the aim of exploring the issues sensitively. The way forward may be discussed with a Human Resource manager. This should be explained to the individual at the initial informal meeting and the person should be reassured of the process and order of events. Their perspective on the issue/incident should be noted and outstanding queries followed up.

A further meeting with the individual to discuss the way forward should follow the additional enquiries/investigations.

2.5 Remedial Actions

There is a range of options available to assist individuals in achieving the required improvement in performance or attitude.

These may include:

• A period of specific training
• A period of supervised practice
• Access to assistance through Staff Support services
• A mentoring arrangement
• A specific piece of research
• Rotation to a different part of the service
• Coaching in a particular area
• Undertaking a review of a particular protocol
• Reviewing the organisational policy or approach to a particular issue
• Other locally agreed solutions

You, as a manager, will need to consider how best the appropriate support and improvement may be achieved. It might be that more than one remedial action is offered to the individual.

The success of the framework will depend on you extending latitude to members of staff where that is appropriate. Additionally, you should be willing to assist another manager across the service to accommodate specific training needs or to provide mentoring services for particular members of staff.
Implementing and supporting the personal responsibility framework will require considerable commitment from you in your role as a manager, however; the outcome will be improved care for service users underpinned by a positive attitude. The implementation of the framework will be supported with specific training. As the framework is used, advice and guidance will be available from Human Resource managers as required.

Where a person fails to demonstrate an improvement, despite support and remedial action, recourse to the disciplinary or loss of competence procedures may be necessary.

3.0 Evaluation and Outcomes of Personal Responsibility

The aim of the framework is to support a culture of change in the Trust and to extend the involvement of all staff in improving service user care and experience.

Through raising awareness of personal responsibility and building links with processes for Clinical Governance etc, it is anticipated that:

- A reduction in complaints from service users/carers may be achieved
- There would be greater involvement of service users and other stakeholders in contributing to improved care
- A reduction in the number of issues handled under the Disciplinary Procedure would be evident
- There may be increased reporting of incidents or near misses through the Risk Management procedure as a precursor to remedial action
- An increase in contributions to the Service Improvement Board may be evidenced
- The Staff Attitude Survey would demonstrate greater satisfaction with the culture and level of involvement individuals have in the organisation

References:

- Learning from Bristol: the report of the public inquiry into children’s heart surgery at the Bristol Royal Infirmary 1984 – 1995 Ian Kennedy
- Kennedy Report
- Creating the virtuous circle: patient safety, accountability and an open and fair culture. The NHS Confederation
- Even steps to patient safety NHS National Patient Safety Agency