



Values in Action

Our People, Our Culture

June 2021

Values in Action National Team
Capability & Culture
National HR Division



This document sets out how a refreshed model of Values in Action aims to build a culture in our Health Service that creates a more positive environment for our staff and improved experiences for our patients and service users.



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Executive Summary

1

Review

Provide an overview of the consultation process, encompassing the experience and learning of key stakeholders, project team members and the National Team.

2

Refresh and Renew

Propose a refreshed strategic model to drive the pace, scope and scale of Values in Action. A commitment to increase local ownership and collaboration in the development, planning and delivery of Values in Action.

3

Recovery 2021 and Beyond

Building a culture that enables a positive work environment is a continuous process. As we journey towards recovery from COVID-19, it is imperative that we provide a space for staff to share their individual and collective experiences and stories. Values in Action can offer a platform for this healing process and enable collective action in order to hold onto all the things that worked well during the pandemic.

4

Alignment and Organisational Strategy

Guidance and consultation on a strategic and operational model for culture improvement that aligns with the future direction and priorities of our healthcare system, including the Corporate Plan, People Strategy Action Plan and Sláintecare Implementation Strategy and Action Plan.

5

Reaffirm

Endorsement of Values in Action by the Board, Executive Management Team and Senior Leaders of the HSE.



Background and Context

Values in Action is a behaviour based Social Movement that was developed in our health service in order to improve the culture and to make it a better place to be for staff, patients and service users. This Social Movement approach means that the behaviours are encouraged through grassroots networks using peer to peer influence.

A pilot project was commenced in 2016 in Mid-West Community Healthcare and University of Limerick Hospital Group. In 2017, the National Team was established to roll Values in Action out across the organisation.

Since this time, there have been incremental additions of new areas, including the Corporate Centre, Dublin North City and County, Community Healthcare East and most recently Tallaght University Hospital. This has added strength and momentum to the movement.

Values in Action was under the leadership of the CEO's office and is now under the leadership of the National Director of HR. In early 2020, Values in Action was paused in the context of the COVID-19 pandemic.

The National Director of HR has commissioned the National Team to review and refresh Values in Action for 2021 and beyond. This review is timely as Values in Action has been established for over five years. The pandemic has put our staff and services under enormous strain. Staff have rapidly adapted with new and innovative ways of working. Their valued contribution, commitment, and the stories of their compassionate care has created a shift in the public perception of our health service. It is now an opportune time to listen to staff and learn from their experiences. This will aid recovery and build a culture in our health service that has the trust and confidence of its staff and the people we care for.

Translating our Values into Behaviours

A behaviour based approach is key to creating a sustainable culture that delivers our values in practice every day. In 2016, nine behaviours were identified by the Mid West, Values in Action Project Team, that brought the values of **Care**, **Compassion**, **Trust** and **Learning** to life. These behaviours were informed by a comprehensive review of feedback from staff, patients and service users, surveys, strategies, policies, and direct engagements.

The behaviours are visible units of action that can be universally understood and adopted by everyone. In addition, the behaviours being lived at scale can enable and accelerate culture and service improvement across our health service.

The behaviours utilised to date are focused on three aspects:

1. Personal - this reflects on us as individuals and encourages awareness and self-reflection.
2. With Colleagues – that guides how we interact with our colleagues.
3. With Patients/Service Users – that demonstrates how we engage with patients and service users to deliver positive experiences of care.



Aims of the Review Process

The overall aim of this process was to review Values in Action, in collaboration with key stakeholders from across the organisation, with a view to developing a refreshed model. The aims were to:

Consult with a wide range of stakeholders



This comprised a broad representation from a diverse mix of staff across various divisions in the organisation, which included consultation with staff holding a brief for employee and patient experience.

Critically review all aspects of the Values in Action model

A wide range of insights were sought through open discourse in order to understand what aspects of the model supported change in their service area and what aspects could be improved.



Carry out an in depth analysis of Values in Action programme learning



The national team reviewed the strategic and operational model based on experience and programme learning to date. In order to deliver an agile and adaptive programme for the future, areas for improvement on current practices were identified.

Analyse the findings to inform a new and refreshed model

Analysis of findings was carried out to identify key themes of learning from the review process. Learning was integrated to inform a new and refreshed model for behaviour based culture improvement.



Methodology of Review Process

1

Identification of Participants

Leaders of various levels, divisional reporting and programme backgrounds were identified. Ensured representation across clinical/non-clinical and senior leadership. Inclusion of stakeholders with and without prior experience/engagement with Values in Action.

2

Methods of Engagement

In excess of twenty five, one to one video call interviews with stakeholders and four separate focus groups with existing Values in Action project teams from around the country were undertaken.

3

Scope of Questioning

Semi structured interview questions were framed to elicit critical review of all components of the Values in Action model. Questions were tailored to meet participants prior level of engagement with, and experience of, Values in Action.

4

Analysis of Findings

Thematic analysis of all transcripts was carried out. The key themes are illustrated in the following pages.

Themes from Review Process

Consultation with Stakeholders and Project Teams

Our Behaviours in Action

- High visibility of Values in Action behaviours being lived throughout the crisis (peer to peer and staff with patients and service users).
- It is important that all staff do their utmost to live and promote our organisational values and behaviours.

Local Ownership and Co-Design

- Increase local ownership through a model co-designed to meet the needs of people and services locally.
- Where possible explore potential for Hospital Groups and Community Healthcare Organisations to work together, in keeping with the Sláintecare integrated care model.
- Listen to staff experience of COVID-19 and ask them what would improve culture in 2021 and beyond.

Collaboration

- Increase purposeful collaboration with other change and innovation programmes.
- Utilise established networks to enable the promotion of Values in Action (e.g. staff fora).
- Incorporate Values in Action into other processes and programmes e.g. Induction, National Healthcare Communication Programme etc.

Leadership

- Seek endorsement of Values in Action from the HSE Board, Executive Management Team and local Senior Leadership.
- Visibly living our values at all levels of leadership is important for sustainable culture improvement.

Themes from Review Process

Consultation with Stakeholders and Project Teams (continued)

Finding Influence -Values in Action for All

- Increase opportunity for anybody who is interested in the Values in Action movement, to be involved.
- Use team structures to encourage, communicate and promote the behaviours.
- Enhance the current network analysis process to ensure proportional representation across all staff groups.

Ignition and Momentum

- Increase the pace of new areas joining Values in Action.
- Encourage areas to come on board concurrently to speed up the roll out across the organisation.
- An ignition event is important as it brings people together for a shared purpose and collective action.
- Use digital platforms to enable upskilling of new members and sustain connectivity over time.

Listening and Storytelling

- Provide an opportunity for staff listening sessions, by sharing their COVID-19 story and ensuring staff feel heard.
- Explore further opportunities for the organisation to acknowledge the work of staff.
- Hold sessions to share and reflect on how the nine behaviours were illuminated during COVID-19.

Measurement

- Opportunity to utilise existing organisational data around staff engagement and patient experience.
- Measurement is key to governance. Explore opportunities to link culture improvement to service delivery.
- Seek new methods for data collection.



Key Features of the Refreshed Values in Action Model





Local Ownership and Co-Design

There are many cultures in our health service and separate micro-organisational identities. Fostering local ownership and engaging in co-design of a behaviour based culture improvement plan, will be important to ensure that the actions taken are meaningful to local service areas and the staff who work in them. A central feature of the refreshed model is that local service areas will have greater autonomy and ownership of the development process and work in partnership with the national team on all aspects of programme design. The established nine behaviours will act as a starting point and each service area will have the opportunity to refine and modify them according their local needs and context.

- Culture is always locally forged. The challenge for the national team is to share its skills while embracing the autonomy and strengths of local areas. This can be enabled by adopting an agile approach to support delivery and rollout. Fostering a relationship that empowers local areas to lead their culture improvement efforts, enables success
- The relationship between the service areas and the national functions of our health service may change as part of Sláintecare. This new relationship may enable strong local accountability for culture. This could include for example, linking the behaviours to local service planning and delivery so that they become embedded in the 'business as usual' of service areas.
- Facilitate the adoption and incorporation of the behaviours into local service area processes such as induction, training, recruitment, communications, quality improvement, patient advocacy and staff experience.

Collaborative Approach

Utilising the expertise of other parts of the organisation to extend the reach of Values in Action and add pace to the rollout of culture improvement across our health service.

- Harness national expertise that enables a local model. There is opportunity for further, purposeful collaboration with programmes of change and innovation that are clear enablers for culture improvement.
- Seek to align Values in Action with complementary national change and improvement platforms. Aim to form structures at local level that facilitates a joined up approach to culture improvement across the organisation at scale.
- Strategic team membership is key to the successful implementation of Values in Action at local level. A collaborative approach ensures collective responsibility for culture improvement.
- Key synergies with other parts of the organisation will use existing experience and expertise to expedite the delivery of key parts of the model; e.g. local Communications Leads support the promotion of the behaviours by utilising their existing channels for storytelling.

Leadership

Endorsement of Values in Action by the Board, the Executive Management Team and Senior Leaders across the organisation, nationally and locally.

- At national level: The HSE Corporate Plan 2021-2024, commits to building a positive culture where there is a common sense of purpose and pride and that all people are treated with dignity and respect. Renewed endorsement of Values in Action is key to progressing culture improvement and will contribute to the delivery of this part of the Corporate Plan.
- At local management level: Critical to culture improvement is visible endorsement and commitment by local senior leaders. Leaders are seen to truly live the behaviours in their daily work.
- At service delivery level: Identify leaders across various levels of staff networks, empowered by knowledge and driven by a shared purpose to lead culture improvement in their area.

Network of Peer Leaders

Culture is formed, shaped, maintained and improved through networks of people. The identification of formal and informal networks is integral to the delivery of behaviour based culture improvement, at scale.

- Continue to identify the highly connected and influential staff across the formal and informal networks of the organisation and ask for their help in improving the culture by living the chosen behaviours in the day to day work.
- Enable the local services to conduct an organisational analysis to identify these highly connected and influential people.
- Include a focus on teams as a network which provides another way to foster greater involvement.
- Use a refreshed narrative to ensure that Values in Action is inclusive to all. This will avoid any perceived differentiation between peers who were involved at an early stage and those that join the Values in Action movement later.
- Explore collaborative ways in which identified staff can potentially support other complementary processes, if the opportunity arises.



Develop Culture Improvement at Scale

Work with key local stakeholders in an area and co-design how scale will work best for them. Explore opportunities to share common project work across areas to enable increased efficiency.

- Plan concurrent roll outs with local areas.
- Ask for pace and scale but encourage local area to direct both. Key stakeholders in an area together with early project team members can design how scale will potentially work best for them.
- Embed drivers for culture improvement in existing and emerging processes . Explore opportunities to share common project work across areas to enable increased efficiency.
- Realise the benefits of streamlining the operational model of Values in Action. Allowing for increased autonomy at local area level will encourage greater pace and scale in roll out.

Behaviour Based Approach

With a renewed sense of ownership and empowerment associated with a collaborative, locally designed approach, each service area will validate and articulate the behaviours in light of local context so that they can :

- Link our behaviours to service delivery.
- Be accountable for our behaviours.
- Prioritise our behaviours.
- Own our behaviours.
- The national team will work with local areas to develop a behaviour based culture improvement plan and provide appropriate tools and supports.

Listening and Storytelling

If you want to learn about a culture, listen to the stories. If you want to change a culture, change the stories (Michael Margolis, 2013)

- Storytelling connects hearts and minds, allowing us to experience information, in a way that factual information cannot. Storytelling in our health service empowers staff to understand and embody our organisational values and culture. Staff can connect and inspire each other, whilst affording leaders an opportunity to listen to the experience of staff and vice versa.
- Our colleagues have detailed the enormous resilience of our organisation throughout the ongoing, unprecedented challenges for our health service. They described our values, in action. As services continue under significant pressure, and we continue towards a recovery phase, storytelling framed around our values and behaviours can give voice to the collective experience and help the organisation reset and recover. This will further enable and hasten culture improvement, ultimately delivering better outcomes for our patients and service users.
- Beyond the pandemic, there is opportunity through developing local storytelling systems, to foster staff pride, thereby building organisational trust and confidence.

Monitoring Progress and Measuring Success

On-going research is essential in order to ensure accountability is a driver for continued investment and ownership of culture improvement throughout our health service.

- It is important that we explore the utilisation of measurement to encourage ownership, accountability and motivation in culture improvement as part of the framework.
- Data and insights can be harnessed to create a local narrative around the requirement for improvement, which can assist in driving action.
- Explore opportunities to triangulate new sources of data with existing sources, for example patient care, and staff experience data.
- In addition, we may seek opportunities, if appropriate, to engage with external service providers and third level academic institutions regarding research into culture improvement, behaviour change and storytelling.

The Role of the National Team

Key to enabling our refreshed model is a National Team that supports and encourages local areas to lead and take ownership of culture improvement, in order to meet the needs of their staff, patients and service users. This approach allows innovative and fresh thinking to emerge, building trust and confidence in the process.

The key areas the National Team focus on are:

<p>Programme Management</p> <p>Responsibility for key aspects of the programme roll out, particularly during the ignition phase, as local capacity builds and empowerment grows.</p>	<p>Change Communications</p> <p>Supporting, crafting and planning change communications. Local areas require support and consultation to achieve effective change communications.</p>	<p>Digital Activism Development</p> <p>What staff say on digital platforms can influence culture. Provide training to build capacity for digital activism. Social media platforms can support the spread of culture improvement through peer to peer influence.</p>	<p>Local Team Capacity</p> <p>Consult with local areas on developing their team capacity for culture improvement.</p>
<p>Storytelling</p> <p>Provide a framework for local storytelling that accelerates culture improvement at scale. Support the development, crafting and dissemination of these stories through informal networks.</p>	<p>Integrity of the Change Method</p> <p>In collaboration with our health service colleagues, we will continue to explore the most effective methodologies for organisational wide culture improvement.</p>	<p>Policy and Procedure Alignment</p> <p>Increase alignment of culture improvement across policies and procedures in order to strategically reflect the organisational values.</p>	<p>Business Operations</p> <p>Responsibility for the business processes that support the continued roll out of Values in Action.</p> <p>Maintain presence and content across social media platforms and HSE.ie.</p>
<p>Measurement and Insights</p> <p>The National Team provides a framework for the gathering, monitoring, analysing and interpreting of data pertaining to Values in Action.</p>	<p>External Visibility</p> <p>The health service's culture improvement efforts are of considerable interest, domestically and internationally. Presenting evidence on the theory and progress of the movement is essential to building trust, confidence and organisational reputation.</p>	<p>Senior Leadership</p> <p>Values in Action recognises the importance of the endorsement, sponsorship and active participation of Senior Leadership. Provide advice to Senior Leaders on the ways they can support culture improvement at scale.</p>	<p>Planning and Horizon Scanning</p> <p>Culture is impacted by organisational, political and social events. Staying connected with changes and advancements that affect the delivery of healthcare is critical to maintain relevance and build trust and confidence.</p>

Next Steps

The refreshed model for Values in Action outlined in this document describes a number of key features, central to which is continuing to develop local ownership of Values in Action, designed to meet local service needs. The adoption of the changes and improvements identified in this review will strengthen the impact of Values in Action.

The HSE Corporate Plan (2020-2024) sets out a clear commitment to “supporting our people and becoming a high performing organisation”. In line with the HSE Corporate Plan, Values in Action sets out a clear path for connecting our organisational values and behaviours, improving employee experience and delivering better outcomes for all.

The National Team will lead the implementation and enable the roll out of the refreshed Values in Action model. The next steps toward implementation are to:

1 Develop a communications plan to introduce the refreshed model, and generate interest from new sites.

2 Develop a detailed implementation plan to

- a) engage and support existing project sites
- b) initiate the process with areas that have expressed interest.

3 Review and revise tools and supporting materials.

4 Review the metrics and insights framework for Values in Action to

- a) encompass staff and patient survey data
- b) ensure the evaluation process is robust and capable of delivering the desired service outcomes.

5 Develop short overview sessions about Values in Action for incorporation into learning and development programmes which can also be accessed through HSeLanD.



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