

### GOVERNING BODY MEETING

<b>Date of meeting</b>	Tuesday 19 September 2017	<b>Agenda item number</b>	17
<b>Title of report</b>	Organisation Development Plan – update		
<b>Paper Presented by:</b>	Kate Hurry, Head of Communications, Engagement and Development		
<b>Paper prepared by:</b>	Amanda Bate, Community Engagement Manager		

<b>CCG strategic objective supported by this paper: (please tick ✓ )</b>	Develop and maintain an effective organisation	✓
	Commission high quality, safe and cost effective services which reduce health inequalities and improve access to healthcare	✓
	Effectively engage patients and the public in decision making	✓
	Develop excellent partnerships which lead to improved health outcomes	✓
	Make the best use of resources	✓

<b>Purpose of report</b>
This is the first update of the 2017 refreshed organisation development plan to be received by the Governing Body.
<b>Recommendation</b>
The Governing Body is asked to: <ol style="list-style-type: none"> <li>1) Note the updated action plan</li> <li>2) Make any recommendations about how any of the actions can be further developed or embedded</li> </ol>

<b>Please indicate which Group this has been discussed with (please tick ✓)</b>			
Executive Management Team		Quality Improvement and Governance Cttee	
Clinical Commissioning Committee		Finance and Performance Committee	
Audit Committee		Remuneration Committee	
Council of Members		Primary Care Commissioning Committee	
Other – OD Forum	✓		
<b>Patient and Public Engagement:</b>	Engagement with patients and the public has informed the plan		
<b>Equality Impact Assessment:</b>	An assessment was undertaken as part of the development of the plan		
<b>Resource Implication(s):</b>	N/A		
<b>Are there any associated risks? If so, are the risks on the risk register? If yes, please include risk descriptor and current risk score</b>	There are no OD risks currently on the risk register		
<b>For further information please contact:</b>	Kate Hurry, Head of Communications, Engagement and Development		

## GOVERNING BODY – TUESDAY 19 SEPTEMBER 2017

### ORGANISATION DEVELOPMENT PLAN – UPDATE

This paper aims to update the Governing Body about the Clinical Commissioning Group's (CCG) organisation development plan.

The plan was refreshed and approved by the Governing Body in January 2017. Appendix 1 shows in detail how we are working towards delivery of the plan. Many of the actions outlined are for future delivery. The rating of actions has been refined to show actions which are complete (green) or outstanding (red), those being undertaken in the current quarter (amber), and those ongoing (yellow).

The process for ongoing monitoring and implementation of the organisational development plan has also been refined. The monthly OD Forum, which is chaired by the CCG's chief nurse and has representation from each service area, proactively manages the plan, identifies areas for staff development, and supports the organisation's need for workforce development and resilience.

Of the work ongoing to deliver our organisation development ambitions, highlights include:

- Continued national and international recognition as a system leader in the development of new models of care, vanguard status and an early developer of an accountable care system.
- Feedback from patients, the public and other stakeholders to inform key performance measures of the developing multispecialty community provider.
- Feedback from NHS England that the CCG is well run, with an overall assurance rating of 'good'.
- Good clinical engagement through a range of activities, from the Council of Members to very well attended quarterly neighbourhood meetings.
- Significant IT achievements with a notably higher comparative uptake of the number of patients registered for online primary care services.
- Encouraging results through the NHS Staff Survey, which indicate high levels of staff engagement.

Work is currently underway through the OD Forum to analyse the outputs from recent staff appraisals. Any actions not already captured in the OD Plan action plan will be added. The NHS Staff Survey highlighted the appraisal system as potentially requiring updating, and a review of the process is also underway.

### Recommendation

The Governing Body is asked to:

- note the updated action plan (attached); and
- make any recommendations about how any of the actions can be further developed or embedded.

**Kate Hurry, Head of Communications, Engagement and Development, and Amanda Bate,  
Community Engagement Manager**

**7 September 2017**

1. Action plan

completed actions	Colour coding
Q4 (16/17)	Red – overdue
Q1 (17/18)	Amber – current quarter
Q2 (17/18)	Yellow – ongoing
Q3 (17/18)	Green – complete
Q4 (17/18)	No colour (ie white) – not yet due
Ongoing	

1.1 OD Priority 1: To deliver our 2030 Vision (i.e. establish and sustain our new models of care and new ways of working)

Aim	Action	Lead	Date	Status/Narrative
Develop CCG staff for evolving roles (i.e. 'commissioners as system integrators')	• Develop roles/list of skills staff will need for the future	Execs	Q1 (17/18)	Timescales need to fit with the developing ACS development plan which will include succession planning. A revised deadline is requested to align the work.
	• Source training needs analysis tool	P.Bowling	Q4 (16/17)	
	• Undertake gap analysis of skills	Heads of service	Q2 (17/18)	To form part of heads of service session, date TBC.
	• Ensure staff can access relevant development opportunities	Heads of service	Q2 (17/18)	COMPLETE - development opportunities regularly discussed at team meetings. Process for applying for training reviewed in June 2017 and communicated to staff. Log of training and development opportunities established.
Develop CCG clinical leaders for evolving roles - ensure continuity of confident, capable and visionary leaders	• Develop roles/list of skills CCG clinical leaders will need for the future	Execs	Q4 (16/17)	COMPLETE - Clinical lead roles redefined.
	• Undertake gap analysis of skills • Ensure clinicians can access relevant development opportunities	Execs Execs	Q1 (17/18) Q1 (17/18)	Part of the appraisal process.
	• Ensure educational support for GP Quality Contract	T.Riddick	Q4 (17/18)	
Develop neighbourhood clinical leads for evolving roles	• Ensure neighbourhood clinical leads have job descriptions	T.Riddick/ B.McKeowen	Q4 (16/17)	COMPLETE - Review of clinical lead roles undertaken and revised roles implemented in May 2017.
	• Undertake gap analysis of skills • Ensure clinical leads have the right guidance and information to support the delivery of the 2030 Vision, e.g. by attending appropriate internal meetings		Q1 (17/18)	
Undertake an assessment of the cost-effective OD / training opportunities available which support the CCG's strategy	• Assess what training opportunities are available, guided by the gap analysis	P.Bowling	Q2 (17/18)	A training prioritisation session will be held by the OD Forum in September 2017.
	• Assess opportunities to deliver training/OD interventions collaboratively across the Fylde coast	K.Hurry	Ongoing	Ongoing as part of the LDP workstream.
	• Make sure staff are aware of opportunities available	Heads of service		Opportunities are shared at team meetings.
Establish the multi-speciality provider (MCP) in shadow form	• Continue programme of coproduction with stakeholders, including neighbourhoods	P.Tinson	Q4 (16/17)	COMPLETE - workshops were held with partners from Dec 2016 - March 2017
	• Engage with the public around performance outcomes, and use the outputs to shape the MCP development	K.Hurry	Q4 (16/17)	COMPLETE - workshops were held with stakeholders, staff and the public in February 2017 to define performance outcomes.
	• Define the expected leadership behaviours of those who will be in leadership roles	Execs	Q1 (17/18)	COMPLETE - outlined in job descriptions
	• Key staff to attend Barrett's Cultural Assessment Tool training sessions to ensure the MCP develops as a values-orientated organisation	MCP leads	Q4 (16/17)	COMPLETE
Nurture effective relationships with key stakeholders, patients and public to improve integration of health and care services, ensuring understanding and engagement in the CCG's plans (e.g. new models and MCP)	• Continue to develop and implement comms and engagement plan for strategic change across all internal and external stakeholders	K.Hurry	Ongoing	Ongoing as part of the comms, engagement and development strategy (approved by the Governing Body in July 2017).
	• Update 2030 Vision		Q4 (16/17)	Delay due to other organisational priorities; work to update the narrative is nearing completion.
	• Update posters in the corridor with 'the story'		Q4 (16/17)	Awaiting the 2030 vision update
Develop HR systems and processes to ensure an agile workforce	• Work with HR to ensure our policies, procedures and job descriptions allow sufficient flexibility for job roles to evolve	P.Bowling	Q4 (16/17)	Ongoing
Optimise opportunities available to make use of technology and innovation to deliver our vision	• Develop an integrated IT system (links to documents and strategies already submitted to F&P)	P.Kelly	Q4 (17/18)	COMPLETED
	• Continue to roll out the Test Bed programme • Continue to support practice and patient groups to use the internet and social media to deliver key messages and promote self-care messages	M. Simpson K.Hurry	Ongoing Ongoing	Ongoing Ongoing as part of the comms, engagement and development strategy (approved by the Governing Body in July 2017).
Ensure OD plans align across the Fylde coast and STP area	• Share OD plans with the relevant leads, meeting as required	K.Hurry	Q4 (16/17)	The OD plan is shared at the OD Forum whose membership consists of nominated leads from each service within the CCG. The OD Forum has been shared via the CCG's governance process at appropriate committees and the Governing Body. It is aligned with the Fylde coast OD plan at the LDP OD workstream.
Ensure staff have opportunities to work across organisational boundaries to further develop collaborative ways of working	• Facilitated events for leadership/clinical groups	Execs	Ongoing	Ongoing
	• Development opportunities for all staff levels, linked to appraisals	Heads of service	Ongoing	Ongoing
	• Work collaboratively as appropriate across the Fylde coast, as appropriate	Heads of service		Ongoing
Further develop the GP Quality Contract to support the NHS Assurance Framework and delivery of new models / MCP	• Update the GP Quality Contract for 2017/18 to ensure delivery of the CCG's priorities	P.Tinson	Q4 (16/17)	COMPLETE - GP Quality contract 2017/18 approved by PCCC on 21/3/17
	• Contract and KPIs updated around payments	J.Williams	Q4 (16/17)	COMPLETE - revised payment structure in place with effect from 1/4/17.
	• Evidence through the Primary Care quality improvement (PQUIP process in place) – year on year improvement	T.Riddick	Q4 (17/18)	



## 1.2 OD Priority 2: To ensure effective engagement, which makes a difference and meets our legal obligations

Aim	Action	Lead	Date	Status
Strengthen the way the CCG engages with its partners and communities	<ul style="list-style-type: none"> <li>Update the CCG's communications and engagement strategy</li> <li>Strengthen the CCG's 'You said, we did' programme</li> </ul>	K.Hurry/ A.Bate	Q1 (17/18)	COMPLETE - Communications and Engagement Strategy updated and approved by Governing Body on 18/7/17. The comms and engagement team have revised the way in which they provide feedback on data and intelligence gathered. The patient experience report is now shared at commissioning team meetings and a you said we did will be published periodically on our website.
			Q4 (16/17)	
	<ul style="list-style-type: none"> <li>Continue to implement communications and engagement plans to ensure internal and external stakeholders understand the CCG's vision, plans and achievements</li> <li>Develop an asset-based community development (ABCD – sustainable community-driven development such as Healthier Fleetwood) strategy in partnership with neighbourhoods which supports the delivery of self-care and episodic care models</li> <li>Work in partnership with statutory and third sector partners to maximise ABCD as part of the Episodic workstream</li> </ul>		Q4 (17/18)	
				Q3 (17/18)
Continue to develop the Episodic model, with a particular emphasis on self-care	<ul style="list-style-type: none"> <li>Monitor the implementation of the Fylde coast self-care strategy in Fylde and Wyre</li> </ul>	A.Bate	Q3 (17/18)	
	<ul style="list-style-type: none"> <li>Work in collaboration with Lancaster University's partnerships officer to identify good practice</li> </ul>	A.Bate	Q3 (17/18)	
Create opportunities for staff across the CCG and practices to hear and see the patient/carer voice	<ul style="list-style-type: none"> <li>Capture a series of patient experience videos and stories that will contribute to staff development and service improvement</li> <li>Develop the Insight/Datix system to capture themes and trends in patient experience</li> <li>Continue to develop listening opportunities and online survey options for patient feedback</li> <li>Continuously monitor 4C's data for themes and trends including complaints lessons learned to support staff development</li> </ul>	K.Hurry/ A.Bate	Ongoing	Ongoing
Provide regular opportunities for the Fylde coast clinical community (primary and secondary care) to meet formally and informally to discuss priorities	<ul style="list-style-type: none"> <li>Set up a clinical senate for the Fylde coast</li> </ul>	A.Januja	Q2 (17/18)	Development of clinical senate is underway.
	<ul style="list-style-type: none"> <li>Continue programme of teaching events for young doctors</li> <li>Continue to develop the neighbourhood meetings, as outlined in the Quality Contract</li> </ul>	P.Tinson	Ongoing Q4 (16/17)	Ongoing Take place quarterly - ongoing
Increase networking opportunities with key stakeholders	<ul style="list-style-type: none"> <li>Develop the 'buddy list' for key stakeholders linking to Execs</li> </ul>	K.Hurry/ A.Bate	Q2 (17/18)	On hold due to ACS work
	<ul style="list-style-type: none"> <li>Continue to support patient and public networking and involvement forums</li> <li>Further develop a programme of community engagement events which will deliver key strategic messages</li> <li>Further develop opportunities for third sector networking in collaboration with statutory sector stakeholders</li> </ul>			Ongoing as part of the communications, engagement and development strategy
Use patient feedback to support service improvements and service redesign	<ul style="list-style-type: none"> <li>Further develop a structured approach to ensure patient feedback to integral to commissioning decisions</li> </ul>	K.Hurry/ P.Hulme	Q1 (17/18)	A gateway process has been developed. NHSE issued new guidance which has been shared with the commissioning team. The CCG website is being updated to include a suite of information for assurance and a toolkit has been shared with commissioners to support effective engagement. Comms and engagement direct link to named commissioners has been revised.
	<ul style="list-style-type: none"> <li>Develop and support patient groups to advise on the development and improvement of services</li> </ul>	A. Bate	Ongoing	Ongoing
	<ul style="list-style-type: none"> <li>Use data from protected characteristic groups to ensure that services continuously improve</li> </ul>	A.Bate	Ongoing	Ongoing
Continue the CCG's programme of quality assurance reviews to ensure high quality services	<ul style="list-style-type: none"> <li>Prioritise quality assurance visits for 17/18</li> </ul>	J.Aldridge	Q4 (16/17)	COMPLETE No pre-planned quality assurance visits in 17/18 - only visiting those services that cause concern. End of year will report those carried out. All visits are reported via QIGEC.
	<ul style="list-style-type: none"> <li>Undertake agreed quality assurance reviews</li> </ul>		Q4 (17/18)	

# ITEM 17

## 1.3 OD Priority 3: To ensure effective governance and collective system leadership

Aim	Action	Lead	Date	Status
Ensure leaders have the skills and competencies to fulfil their leadership role	<ul style="list-style-type: none"> <li>Use existing networks to develop leadership capacity and capability</li> </ul>	Execs	Ongoing	Ongoing
Ensure opportunities for the Governing Body to develop both collectively and as individuals	<ul style="list-style-type: none"> <li>Develop a Governing Body annual development plan</li> <li>Develop an objective appraisal process for Governing Body members to complement the 1-1 appraisal process</li> <li>Make sure Governing Body development is carried out with the relevant CCG subject matter lead officer</li> </ul>	M.Dowling/ P.Bowling/	Q4 (16/17)	COMPLETE for 2016/17. Discussions taking place between chair and chief nursing officer regarding objective appraisal process for 2017/18.
Undertake an annual assessment of the effectiveness of the Governing Body and its committees	<ul style="list-style-type: none"> <li>Annual assessment of the effectiveness of the Governing Body and its committees</li> </ul>	M.Dowling/ P.Bowling	Q4 (17/18)	Effectiveness reviews to be undertaken every two years, as agreed at the July 2017 Governing Body meeting.
Ensure staff are familiar with and contribute to the risk assessment and Governing Body assurance process	<ul style="list-style-type: none"> <li>Risk assessment training for CCG staff</li> </ul>	J.Aldridge	Q2 (17/18)	
	<ul style="list-style-type: none"> <li><i>Emergency preparedness</i> and response training for on-call managers</li> <li>Annual development session for Governing Body and risk owners</li> </ul>	P.Bowling	Q4 (17/18)	

## 1.4 OD Priority 4: To support and develop individuals and teams to grasp the opportunities available to them and resiliently meet the challenges ahead

Aim	Action	Lead	Date	Status
Review and update the CCG's appraisal system to make sure it is effective	<ul style="list-style-type: none"> <li>Undertake sample audit across all grades of staff to check effectiveness of appraisal system and if appraisals are linked to the CCG's strategy.</li> <li>Update appraisal system as required.</li> </ul>	K.Hurry	Q1 (17/18) Q3 (17/18)	Survey ongoing and nearly complete.
Ensure all staff understand the CCG's strategic direction and how their personal objectives support this	<ul style="list-style-type: none"> <li>To be included in above sample audit</li> <li>NHS Staff Survey</li> <li>Team briefings demonstrate and support the aim</li> </ul>	K.Hurry/A Bate	Q1 (17/18)	Action complete re 360 appraisal audit. Team Briefings monthly and will continue. NHS Staff survey complete. A.Bate is meeting with teams re red/amber areas of staff survey.
Ensure the CCG remains a values-orientated organisation	<ul style="list-style-type: none"> <li>Key staff to attend Barrett's Cultural Assessment Tool training sessions which supports the development of values-orientated organisations</li> <li>Determine whether to undertake a diagnostic within the CCG, completing any actions as required</li> </ul>	MCP leads	Q4 (16/17) Q4 (17/18)	COMPLETED
Update the CCG's training and development policy, aligning it with the current financial challenges	<ul style="list-style-type: none"> <li>Review and update the CCG's policy based on best practice, and within the current financial constraints, co-ordinating the CSU HR team as appropriate</li> <li>Heads of service to adhere to the policy, and reinforce this at staff appraisals</li> <li>Develop an inventory of opportunities and associated costs to access available training (e.g. Leadership Academy, secondments, mentoring, etc)</li> </ul>	P.Bowling Heads of service J.Pennington	Q4 (16/17) Q1 (17/18) Q2 (17/18)	Accessible process for training requests. Policy reviewed by CSU and OD Forum. Agreed policy will be shared across the organisation when approved by Governing Body in September 2017
Ensure all staff are up to date with mandatory training	<ul style="list-style-type: none"> <li>Arrange bi-annual mandatory training sessions to be delivered on site in face to face sessions</li> <li>Strengthen the process around monitoring compliance by setting up a bi-monthly report to go to the OD Forum</li> <li>Heads of service to identify any staff who are obligated to maintain competency/validation and confirm that the appraisal will support this</li> </ul>	J.Pennington J.Pennington Heads of service	Q3 (17/18) Q1 (17/18) Q4 (16/17)	COMPLETE - Note the only training available as face to face is IG as there is no on-line version. All other mandatory training is done on-line. Therefore recommend action is amended to 'arrange annual information governance refresher training to be delivered on site in face to face sessions'. This has now been scheduled with the CSU. Complete. In addition compliance reports to be received at monthly heads of service meeting. COMPLETE. C Lewis and M Marquis-Carr confirmed this done via appraisals process. In Finance Team CPD obligations are being met via workload and course attendance.
Recognise and reward staff	<ul style="list-style-type: none"> <li>Within their team meetings, heads of service to have agenda item on how their staff would like to be recognised and rewarded.</li> <li>In 17/18 heads of service will endeavor to ensure that staff are recognised and rewarded in the staff members' preferred manner.</li> <li>Scoping to identify current position re staff already nominated for awards, and what awards are available.</li> </ul>	Heads of service K.Hurry	Q4 (16/17) Q1 (17/18)	COMPLETE - no appetite for reward but managers should thank staff for work done well via team meetings. Also managers should recognise individuals if they have managed a difficult circumstance (eg death of close relative) or been caring towards fellow employees in similar circumstances. Ongoing Ongoing
Ensure all staff receive regular 1-1s with their line manager (at least monthly)	<ul style="list-style-type: none"> <li>Heads of service to ensure that 1-1s are booked in calendar for full financial year</li> <li>Evaluate whether 1-1s are meaningful in the annual staff survey</li> </ul>	Heads of service K.Hurry	Q4 (16/17) Q4 (17/18)	Ongoing Detailed information is collected via three NHS staff survey and communicated to all staff and line managers via team meetings. The NHS Staff survey shows the CCG has performed well in its appraisal process with 31% saying appraisals definitely helped them to do their job better and 53% saying so to some extent.
Promote the health and wellbeing of staff	<ul style="list-style-type: none"> <li>Evaluate feedback from the CCG walking club, and continue to promote if it evaluates well</li> <li>Execs to be supportive of individuals' needs to have an effective work-life balance</li> <li>Scoping exercise to determine any staff benefit/ discount schemes available</li> <li>Better understand the CCG's responsibility as an employer for staff who are also carers</li> <li>Scoping exercise to assess best practice within other organisations in relation to staff wellbeing</li> </ul>	M.Britton Execs J Williams A Bate A.Bate	Q4 (16/17) Ongoing Q4 (16/17) Q4 (16/17) Q2 (17/18)	Walking club suspended awaiting confirmation of requirements in terms of public liability insurance (M Britton). Action - suggest signposting staff to other walking groups. ABate to also find out what other organisations are doing. Staff benefits that the organisation can support from an HMRC perspective are: childcare vouchers, lease cars, bicycles and potentially annual leave. This is being reviewed as an ongoing process via the Head of Finance through the OD Forum. The Community Engagement Manager attends Lancashire Carers' Group on a quarterly basis to support the CCG's external and internal paporoach to supporting carers. The PPE Group also focused on Carers' experiences during carers' week in 2017 running an online survey.
Share team priorities and good practice across the CCG	<ul style="list-style-type: none"> <li>Members of each CCG function to attend other team meetings to share priorities</li> <li>Standing item on the heads of service meeting agenda</li> <li>Heads of service to ensure that team meeting agendas revisit the team's priorities on a regular basis</li> </ul>	Heads of service	Ongoing	Ongoing

## 1.5. OD Priority 5: To identify, nurture and develop our talent and have appropriate succession planning in place

Aim	Action	Lead	Date	Status
Ensure we have the right policies and processes in place to recruit and retain the best staff	<ul style="list-style-type: none"> <li>HR audit to review and feedback to the chief nurse</li> </ul>	P.Bowling	Q4 (16/17)	OD Forum agreed that this should be removed from the action plan.
Improve our induction process, for staff, Governing Body members and the Council of Members	<ul style="list-style-type: none"> <li>Heads of service to review the induction process at their meeting</li> <li>Induction pack approval at assurance group</li> <li>Update the induction pack/process accordingly</li> </ul>	Heads of service P.Bowling P.Bowling	Q1 (17/18) Q2 (17/18) Q2 (17/18)	COMPLETE - HoS reviewed induction pack on 20 June 17 and amended/updated accordingly.
Understand which roles in the CCG are business critical	<ul style="list-style-type: none"> <li>Exec team to undertake an assessment of business critical roles, and how that role might be filled in the future, as part of the MCP development</li> </ul>	Execs	Q4 (16/17)	Ongoing. Execs are working with the workforce to ensure they are in the best placed position to meet needs going forward.
Provide opportunities for CCG staff to develop so they are able to easily take on new roles	<ul style="list-style-type: none"> <li>Provide development opportunities to staff through the appraisal process and utilising the information gained from OD actions above</li> <li>Create development plans for key individuals to improve their readiness for consideration for future business critical roles</li> <li>Advertise job/secondment opportunities to staff internally before open recruitment</li> </ul>	Heads of service Execs/ line managers P.Bowling via HR	Ongoing Q2 (17/18) Ongoing	Ongoing. Part of appraisal process
Provide opportunities for clinicians to take on CCG leadership roles	<ul style="list-style-type: none"> <li>Provide opportunities for clinical staff, e.g. GPs, pharmacists and nurses, to take on CCG leadership roles</li> </ul>	T.Naughton/ T.Riddick/ J.Lonsdale	Ongoing	
Provide leadership training to new clinical Governing Body members	<ul style="list-style-type: none"> <li>New Governing Body members to be encouraged to take part in an appropriate leadership development programme</li> </ul>	T.Naughton	Ongoing	
GP succession planning	<ul style="list-style-type: none"> <li>Recruitment campaign to attract newly qualified doctors to the area</li> <li>Offer GP trainees shadowing opportunities at the CCG</li> <li>Retain retired GPs within CCG leadership roles to coach younger doctors</li> <li>Mentor GP registrars who are interested in commissioning</li> </ul>	T.Riddick/ S.Ellwood/ T.Johnson/ T.Naughton	Ongoing	
Nurse succession planning	<ul style="list-style-type: none"> <li>Continue to expand the local provision of student nurse training in primary care</li> <li>CPD events to train nursing staff</li> </ul>	T.Riddick	Ongoing	



1.6 OD Priority 6: To ensure business continuity during transformational change

Aim	Action	Lead	Time	Status
Develop a programme team-based development	<ul style="list-style-type: none"> <li>Team-based development days</li> <li>Teams to feedback to the rest of the CCG after their developments days through Your Week</li> </ul>	Heads of service	Ongoing	
Improve systems and processes to enhance effectiveness in order to release capacity	<ul style="list-style-type: none"> <li>Heads of service to ensure that regular discussions take place with individual staff focussing on working in the most efficient way</li> </ul>	Heads of service	Ongoing	
Organise some training for relevant staff to become mentors, and ensure opportunities for staff to have mentoring as appropriate	<ul style="list-style-type: none"> <li>Through team meetings and 1-1s, identify staff who feel they would benefit from a mentoring process</li> <li>Identify those staff who would like to be a mentor</li> <li>Organise training for mentors</li> </ul>	Heads of service	Q3 (17/18)	
		Heads of service P.Bowling	Q3 (17/18) Q2 (17/18)	
Strengthen the resilience of the system	<ul style="list-style-type: none"> <li>Provide information on the intranet which raises staff awareness of skills for resilience</li> </ul>	K.Hurry	Q3 (17/18)	