



NHS CONSTITUTION (MARCH 2013) RIGHTS AND PLEDGES TO PATIENTS AND THE PUBLIC

Access to Health Services	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Receive NHS services free of charge, apart from certain limited exceptions sanctioned by Parliament. o Access NHS services. You will not be refused access on unreasonable grounds. o Expect your NHS to assess the health requirements of the local community and to commission and put in place the services to meet those needs as considered necessary. o In certain circumstances, to go to other European Economic Area countries for treatment which would be available to you through your NHS commissioner. 	<ul style="list-style-type: none"> o NHS Constitution adopted by the Trust Board (2009, 2014). o YAS' Mission, Vision, Strategy, Culture and Values. o YAS' services are free at point of access for all patients. o PTS eligibility criterion identified/commissioned. o Everyone Counts: Planning for Patients 2014/15-2017/18. o YAS Integrated Business Plan: 2014/15 to 2018/19. o Commissioned services: A&E, NHS 111, Patient Transport Services, other e.g. Private & Events. o Public Health engagement. o Quality Accounts. o The services offered by the Trust are comprehensive and therefore the requirement to travel abroad would be limited.

<ul style="list-style-type: none"> o Not to be unlawfully discriminated against in the provision of NHS services including on grounds of gender, race, disability, religion or belief, gender, reassignment, pregnancy and maternity or marital or civil partnership status. o Access services within maximum waiting times, or for the NHS to take all reasonable steps to offer you a range of suitable alternative providers if this is not possible. The waiting times are described in the Handbook to the NHS Constitution. PLEDGES: The Trust (NHS) also commits: o To provide convenient, easy access to services within the waiting times set out in the Handbook to the NHS Constitution. o To make decisions in a clear and transparent way, so that patients and the public can understand how services are planned and delivered. 	<ul style="list-style-type: none"> o YAS has published information demonstrating compliance with The Equality Act (Specific Duties) Regulation together with its Single Equality Scheme. o YAS adopted the NHS Equality Delivery System monitored through patient surveys, Patient Story (each Trust Board meeting in Public); o Consent Policy. o Maternity; Paternity; Adoption Leave; Carers' policies. o YAS Expert Patient member of the Deaf Professionals Group and Quality Committee. o Communication and Engagement on the Quality Accounts. o NHS Constitution adopted by the Trust Board (2009, 2014). o YAS Annual Report(s) and Quality Accounts. o Board Memorandum on Quality Governance. o Clinical Quality Strategy: Delivering Excellent Services 2012/15 o NHS Constitution adopted by the Trust Board (2009, 2014). o National performance standards: A&E. o Other: commissioned contracts with key performance criterion. o Quality Accounts. o YAS Integrated Business Plan: 2014/15 to 2018/19. o Trust Board meetings held in Public bi-monthly where the public have an opportunity to ask questions of Board members; Q&As recorded in Board Minutes of meeting. o Publication of Agenda and Public Board papers on Trust
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	<p>website.</p> <ul style="list-style-type: none"> ○ Integrated Performance Report (IPR) monthly, comprehensive suite of metrics for A&E, 111 and PTS service lines including Quality and Risk profiles; monitored by Board Committees. ○ Board & Committee Structure including independent Audit Committee. ○ Board Assurance Framework & Corporate Risk Register (reported to Trust Board 3 x per annum). ○ Significant Incidents & Lessons Learned Report (reported to Trust Board 2 x per annum). ○ Quality Accounts. ○ Quality Governance Action Plan (incorporating CARE QUALITY COMMISSION report / action plan from July 2013 inspection). ○ Infection Prevention & Control audits (IPR and mid-year report to Quality Committee). ○ Stakeholder Engagement & Communications Policy. ○ YAS Forum. ○ Membership Strategy. ○ Duty of Candour/Being Open Policy. ○ Policy on Managing the '4Cs'. ○ The Trust uses many different mediums to inform its patients, public and staff on how services are planned and delivered e.g. Summary IBP, Annual Report, Quality Accounts, Board Memorandum on Quality Governance, Annual General Meeting, Trust Website; YAS Membership newsletter; information leaflets, information guides. ○ The FT Constitution sets out how YAS will involve elected Governors in reviewing the performance of the
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<ul style="list-style-type: none"> o To make the transition as smooth as possible when you are referred between services, and to put you, your family and carers at the centre of decisions that affect you or them. 	<p>Trust and strategic decision-making.</p> <ul style="list-style-type: none"> o The Trust works in close partnership with services and colleagues from other services, for example nursing/residential homes, acute, mental health, community providers, social services, other emergency services etc. o Improving patient care project includes a number of Transformation Programme improvements that will support service delivery including quality. o Healthwatch event (June 2013) enabled sharing and learning from experience. o E-stakeholder news. o Expert patient; member of Quality Committee. <ul style="list-style-type: none"> o Quality Accounts. o Emergency Department's Handover Times published weekly. o Contractual Key Performance Indicators for Inter-Hospital transfers. o Contractual Key Performance Indicators for PTS journeys.
<p>Quality of Care and Environment</p>	<p>Sources of Assurance</p>
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Treated with a professional standard of care, by appropriately qualified and experienced staff, in a properly approved or registered organisation that meets required levels of safety and quality. 	<ul style="list-style-type: none"> o YAS' Mission, Vision, Strategy, Culture and Values. o Care Quality Commission Registered. o Quality Accounts. o Values Based Recruitment. o Recruitment processes ensure staff are employed with current professional registration, e.g. General Medical Council, Nursing & Midwifery Council, Health Care Professions Council, and systems in place to ensure maintained.

<ul style="list-style-type: none"> o 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, clinical effectiveness and experiences of services. <p>PLEDGES: The Trust (NHS) also commits:</p> <ul style="list-style-type: none"> o To ensure that services are provided in a clean and safe environment that is fit for purpose, based on national best practice. 	<ul style="list-style-type: none"> o Clinical Case Review process o Incident Review Group o Quality Accounts. o Board Memorandum on Quality Governance. o Service Transformation Programme work streams. o Clinical Development Programme. o YAS Expert Patient member of Safety Thermometer Steering Group, Clinical Governance Group and Quality Committee. o YAS Expert Patient member of specific risk review task groups, for example Moving & Handling; Bariatric Patients. o Board & Committee Structure including independent Audit Committee and the Quality Committee. o Board Assurance Framework & CRR (reported to Trust Board 3 x per annum). o Significant Incidents & Lessons Learned Report (reported to Trust Board 2 x per annum). o Care Quality Commission Registered. o Integrated Business Plan: 2014/15 to 2018/19.. o Annual Report(s) and Quality Accounts. o Board Memorandum on Quality Governance. o Clinical Quality Strategy: Delivering Excellent Services 2012-2015 o Trust Board & Committee Structure including independent Audit Committee and the Quality Committee. o Board Assurance Framework & CRR (Board 3 x per annum) o Significant Incidents & Lessons Learned Report (Board 2 x
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	<p>per annum).</p> <ul style="list-style-type: none"> o YAS Expert Patient member of Quality Committee. o Quality Governance Action Plan (incorporating Care Quality Commission report / action plan from July 2013 inspection). o The Trust receives and actions safety alerts from the NHS Central Alerting System (CAS) re: patient safety issues. o Internal clinical & non clinical audits against standards / compliance. o YAS Expert Patient Member of Safety Thermometer Steering Group, Medicines Management Group, Clinical Governance Group and Quality Committee. o The Trust implemented the national Safety Thermometer in 2012. o The Trust maintains its clinical environment (vehicles) in line with National Specifications for Cleanliness in the NHS 2007. o Regular infection Prevention & Control audits are undertaken to assess cleaning standards and the results are presented to each meeting of the Trust's Clinical Governance Group. o YAS Expert Patient Member of Clinical Governance Group and Quality Committee. o Integrated Inspection process and schedules: incorporates all aspects of the Care Quality Commission standards. All stations and standby points are scheduled for yearly inspections with dates agreed with the Locality Managers who accompany the Standards & Compliance Directorate managers on the inspections. Inspections led by band 6 and 7 members of the risk and safety team. o YAS Expert Patient Member of Safety Thermometer Steering Group and Quality Committee.
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<ul style="list-style-type: none"> o To identify and share best practice in quality of care and treatments; and o 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 in the Handbook of the NHS Constitution. 	<ul style="list-style-type: none"> o Stakeholder Engagement & Communications Strategy. o Clinical Directorate managers are members of Strategic Clinical Networks. o Executive/Associate lead is a member of each Urgent Care Board. o YAS Expert Patient Member of Clinical Governance Group and Quality Committee. o Head of Stakeholder Engagement appointed 2013. o Local engagement with Healthwatch. o Medical Director is a member of the National Ambulance Services Medical Directors Group (NASMeD). o Not applicable.
<p>Nationally Approved Treatments, Drugs & Programmes</p>	<p>Sources of Assurance</p>
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Drugs and treatments that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you. o 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 	<ul style="list-style-type: none"> o YAS has a clinically led Medicines Management Group which reviews all NICE guidance applicable to medicines. o YAS' Policy is to fund NICE approved medicines according to the clinical needs of patients o YAS Expert Patient member of Medicines Management Group and Quality Committee. o The Clinical Governance Group oversees all aspects of Medicines Management in YAS, reporting to the Quality Committee. o JRCALC clinical practice guidance is implemented in

<p>you.</p> <ul style="list-style-type: none"> o Receive the vaccinations that the NHS recommends that you should receive under an NHS-provided national immunisation programme. <p>PLEDGES: The Trust (NHS) also commits to: Provide screening programmes as recommended by the UK National Screening Committee.</p>	<p>YAS.</p> <ul style="list-style-type: none"> o Clinical Quality Strategy: Delivering Excellent Services 2012-2015. o The Trust employs a Pharmacist who chairs the Medicines Management Group. o YAS Expert Patient member of Medicines Management Group, Clinical Governance Group and Quality Committee. o The Trust employs the services of an Occupational Health Provider which provides relevant screening and immunisation services to staff o Quality Accounts. o The Trust works with other healthcare partners to promote screening programmes where appropriate, for example arrhythmia awareness, as part of the Public Health strategy.
<p>Respect, Consent and Confidentiality</p>	<p>Sources of Assurance</p>
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Be treated with dignity and respect, in accordance with your human rights. o Accept or refuse treatment that is offered to you, and not to be given any physical examination or treatment 	<ul style="list-style-type: none"> o YAS' Mission, Vision and Values. o NHS Constitution adopted by the Trust Board (2009, 2014). o Single Equality Scheme. o YAS adopted the NHS Equality Delivery System monitored through patient surveys, Patient Story (each Trust Board meeting in Public). o Dignity and respect is integrated into other policies and guidance such as Standard Operating Procedures (SOP).

<p>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"> o Given information about the test and treatment options available to you, what they involve and their risks and benefits. o For privacy and confidentiality and to expect the NHS to keep your confidential information safe and secure. o Access to your own health records. These will always be used to manage your treatment in your best interest. o To be informed how your information is used. o To request that your confidential information is not used beyond your own care and treatment and to have your 	<ul style="list-style-type: none"> o Treating patients/carers with respect and dignity is included in the Corporate Induction programme. o Safeguarding Vulnerable Adults (SVA) policy. o Safeguarding Children and Young People Policy (SCP). o Training on Mental Capacity Act (MCA) SVA, SCP. o Consent Policy. o Information Governance Group ensures that patients are given relevant information about their treatment, risks and alternatives. o Interpreting services available. o Compliance with NHS Information Governance toolkit – Level 2 and above attained for all Confidentiality and Data Protection Assurance requirements. o Access to Medical Records Policy. o Caldicott Guardian in post. o Information Governance Group ensures that patients are given relevant information about their treatment, risks and alternatives. o Data Protection and IG training provided to staff. o Information Governance Group ensures that patients are given relevant information about their treatment, risks and alternatives. o Adherence to the principles of Caldicott 2. o Patient experience of dignity and respect is included in all local patient surveys
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objections considered, and where your wishes cannot be followed, to be told the reasons including the legal basis.

PLEDGES: The Trust (NHS) also commits to:

- o **To ensure those involved in your care and treatment have access to your health information so they can care for you.**
- o To anonymise the information collected during the course of your treatment and use it to support research and improve care for others.
- o **Where identifiable information has to be used, to give you the chance to object wherever possible.**
- o To inform you of research studies in which you may be eligible to participate.
- o **To share with you any correspondence sent between clinicians about your care.**

- o Raising awareness about the needs of patients with dementia.
- o The Trust has responded to a ministerial call to action and signed up with the National Dementia Alliance to become 'dementia friendly'.
- o Confidential records storage.
- o Expert patient; member of Quality Committee.
- o **Caldicott Guardian in post.**
- o **Access to Medical Records Policy.**
- o **Electronic patient record form (E-PRF) roll out.**
- o Research Governance Policy.
- o YAS Expert Patient's feedback sought on YAS Research & Development proposals, developments etc.
- o **Access to Medical Records Policy.**
- o **Caldicott Guardian in post.**
- o **Data Protection Act access by patients to their notes.**
- o Caldicott Guardian in post.
- o Research Governance Policy.
- o **Access to Medical Records Policy.**

Informed Choice	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o 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. o Express a preference for using a particular doctor within your GP practice and for the practice to try to comply. o Make choices about the services commissioned by NHS bodies to information to support these choices. The options available to you will develop over time and depend on your individual needs. <p>PLEDGES: The Trust (NHS) also commits to:</p> <ul style="list-style-type: none"> o Inform you about the healthcare services available to you, locally and nationally. o 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. 	<ul style="list-style-type: none"> o Patients are informed and provided with relevant information about their care throughout their contact and treatment with the Trust. o Trust service and treatment information leaflets are available (NHS 111 and PTS) and continue to be developed. o Not applicable. o Trust internet is user friendly and is currently being reviewed looking at accessibility; clear, concise and up to date information and easy navigation. o Trust Information on national ratings and surveys regarding Trust services are available on Care Quality Commission Websites. o Publication of Board papers on Trust website. o Quality Accounts published on Trust Internet pages. o FT Membership newsletter. o Operational Update. o E-stakeholder news. o Expert patient; member of Quality Committee. o Patient Services provide information about YAS services and support patients' access.

Involvement in your healthcare and in the NHS	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Be involved in discussions and decisions about your healthcare, 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. o 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. <p>PLEDGES: The Trust (NHS) also commits to:</p> <ul style="list-style-type: none"> o Provide you with the information and support that you need to influence and scrutinise the planning and delivery of NHS services. o Work in partnership with you, your family, carers and representatives. 	<ul style="list-style-type: none"> o YAS' Mission, Vision and Values. o Quality Accounts. o Clinical Quality Strategy: Delivering Excellent Services 2012-2015. o YAS Expert Patient Member of Clinical Governance Group and Quality Committee. o Lead Nurse Urgent Care appointed 2013. o Where indicated and appropriate End of Life discussions regarding preferred place of care are advocated. o Core services are commissioned by the Trust's Commissioners. The Trust works closely with Commissioners to ensure that the services provided are appropriate to the needs of the local community. o CQUINS. o YAS Forum. o Membership Strategy. o Integrated Business Plan: 2012/13 – 2017/18. o Quality Accounts. o Trust Board & Committee Structure including Quality Committee. o Stakeholder Engagement and Communication Strategy, 2012. o YAS Forum. o Membership Strategy. o The Trust works with local Healthwatch to undertake

<ul style="list-style-type: none"> o To involve you in discussions about planning your care and to offer you a written record of what is agreed if you want one. o To encourage and welcome feedback on your health and care experiences and use this to improve services. 	<p>engagement and gain assurance that the Trust is addressing the needs of the local community.</p> <ul style="list-style-type: none"> o Healthwatch Stakeholder Event (June 2013). o Consent Policy in place. o Access to Medical Records Policy in place. o Patients are informed and provided with relevant information about their care throughout their contact and treatment with the Trust. o Where indicated and appropriate End of Life discussions regarding preferred place of care are advocated o Trust service and treatment information leaflets are available (NHS 111 and PTS) and continue to be developed. o Quality Accounts. o Clinical Quality Forum. o YAS Expert Patient Member of Clinical Governance Group and Quality Committee. o Significant Incidents & Lessons Learned Report (reported to Trust Board 2 x per annum). o Trust Board meetings held in Public bi-monthly where the public have an opportunity to ask questions of Board members; Q&As recorded in Board Minutes of meeting. o YAS Forum. o Membership Strategy. o Expert patient; member of Quality Committee. o Patient experience feedback is gathered from a variety of sources including the Trust patient survey programme, complaints and PALS concerns, focus groups and engagement activities and used to help focus improvement work.
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Complaints and redress	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Have any complaint that you make about NHS services acknowledged within three working days and to have it properly investigated. o Discuss the manner in which the complaint is handled and to know the period within which the investigation is likely to be completed and the response sent. o Be kept informed of progress and to know the outcome of any investigation into your complaint, including an explanation of any conclusions and confirmation that any action needed in consequence of the complaint has been taken or is proposed to be taken. o Take your complaint to the Independent Parliamentary and Health Service Ombudsman, if you are not satisfied 	<ul style="list-style-type: none"> o Policy on Managing the '4Cs'. o Procedures in place and compliant with April 2009 statutory regulations. o Quality Committee monitors performance of complaints/concerns. o The Trust aims to provide an improved service with greater opportunity for local resolution. o The Trust ensures that patients and their carers receive appropriate support throughout the handling of a complaint and that it will not adversely affect their future treatment, in accordance with our local Trust policy. o Complainants are given details of local advocacy and support services. Complainants are given a full response answering their concerns, including actions taken to prevent recurrence. o Policy on Managing the '4Cs'. o Procedures in place and compliant with April 2009 statutory regulations. o Quality Committee monitors performance of complaints/concerns. o All complainants are made aware of what to do if they are not satisfied with the outcome of their complaints and the process for contacting the Ombudsman. o Being Open Policy. o All complainants are made aware of what to do if they are not satisfied with the outcome of their complaints

<p>with the way your complaint has been dealt with by the NHS.</p> <ul style="list-style-type: none"> o 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. o Compensation where you have been harmed by negligent treatment. <p>PLEDGES: The Trust (NHS) also commits to:</p> <ul style="list-style-type: none"> o Ensure that you are treated with courtesy and you receive appropriate support throughout the handling of a complaint; and that the fact that you have complained will not adversely affect your future treatment. o Ensure that when mistakes happen or if you are harmed while receiving health care, you receive an appropriate explanation and apology, delivered with sensitivity and recognition of the trauma you have experienced, and know that lessons will be learnt to help avoid a similar incident occurring again. o Ensure that the organisation learns lessons from complaints and claims and uses these to improve NHS services. 	<p>and the process for contacting the Ombudsman.</p> <ul style="list-style-type: none"> o Process for judicial review and the right to compensation are discussed with complainants as and when appropriate. o Trust Policy contains requirement that patients, relatives or carers are not adversely affected by having made a complaint. o The Trust ensures that patients and their carers receive appropriate support throughout the handling of a complaint and that it will not adversely affect their future treatment, in accordance with our local Trust policy. o Complaints leaflets and posters available. o Patient Services department. o The Trust response to complaints is to acknowledge where things went wrong, to explain what should have happened, and to give assurance that action will be taken to prevent recurrence. o Where appropriate complaints give rise to action plans to prevent occurrence. o Being Open policy o Improved opportunities for learning from complaints and other sources of experience fed back through the Quality Committee. o Implementation of action plans is monitored through the Quality Committee.
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NHS CONSTITUTION (MARCH 2013) RIGHTS AND PLEDGES TO STAFF

To have a good working environment with flexible working opportunities consistent with the needs of patients and the way that people live their lives	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Fair treatment regarding leave, rights and flexible working and other statutory leave requests relating to work and family, including caring for adults with whom you live. o Request 'reasonable' time off for emergencies (paid and unpaid) and other statutory leave (subject to exceptions). 	<ul style="list-style-type: none"> o NHS Terms & Conditions of Service. o YAS' Mission, Vision and Values. o YAS People - Workforce Strategy, 2012-17. o Joint Steering Group (YAS management & Trades Union). o Flexible Retirement Policy. o Maternity Leave Policy. o Safe Employment: Pre and Post Employment Checks Policy. o Staff Handbook updated January 2013 o Guidance available on the intranet relating to Staff Retirement. o Guidance available on the intranet relating to Annual Leave. o Employee Wellbeing and Support at Work Policy.

<ul style="list-style-type: none"> o Expect reasonable steps are taken by the employer to ensure protection from less favourable treatment by fellow employees, patients & others (e.g. bullying or harassment). 	<ul style="list-style-type: none"> o Flexible Working Policy in place (includes Employment Break Scheme and Job Share Policy). o Special Leave Policy. o Code of Conduct. o Equality & Diversity Policy. o YAS adopted the NHS Equality Delivery System monitored through patient surveys, Patient Story (each Trust Board meeting in Public); o Dignity at Work Code. o Anti-Bullying and Harassment Policy. o Raising Concerns at Work (Whistleblowing) Policy. o
<p>o have a fair pay and contract framework</p>	<p>Sources of Assurance</p>
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Pay; consistent with the National Minimum Wage or alternative contractual agreement. o Fair treatment regarding pay. 	<ul style="list-style-type: none"> o Most staff are employed under AFC Terms & Conditions. o Doctors and Executive Directors are employed under separate terms & conditions. o Joint Steering Group (YAS management & Trades Union). o Recruitment and Selection Policy. o Business Conduct for Staff – Interests, Gifts, Hospitality & Sponsorship Policy. o All staff are engaged under contracts of employment.
<p>To be involved and represented in the workplace</p>	<p>Sources of Assurance</p>
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Be accompanied by either a Trade Union official or a work colleague at disciplinary or grievance hearings in line with legislation, your employer’s policies or your contractual 	<ul style="list-style-type: none"> o Most staff are employed under AFC Terms & Conditions. o All staff are engaged under contracts of employment.

<p>rights.</p> <ul style="list-style-type: none"> ○ 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. 	<ul style="list-style-type: none"> ○ Employee Wellbeing and Support at Work Policy. ○ Disciplinary Policy. ○ Grievance Policy. ○ Raising Concerns at Work (Whistleblowing) Policy. ○ Annual Leave Policy. ○ Dignity at Work Code. ○ Business Conduct for Staff – Interests, Gifts, Hospitality & Sponsorship Policy. ○ Agreement on Partnership Working with Trade Unions. ○ Joint Steering Group (YAS management & Trades Union).
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To have healthy and safe working conditions and an environment free from harassment, bullying and violence	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Work within a healthy & 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. 	<ul style="list-style-type: none"> o YAS' Mission, Vision and Values. o Risk Management and Assurance Strategy. o Health and Safety Policy. o Safety & Security Policy. o Code of Conduct. o Dignity at Work Code. o Equality & Diversity Policy. o YAS adopted the NHS Equality Delivery System monitored through patient surveys, Patient Story (each Trust Board meeting in Public); o Recruitment and Selection Policy. o Employee Wellbeing and Support at Work Policy. o Flexible Working Policy in place (includes Employment Break Scheme and Job Share Policy). o Special Leave Policy. o Flexible Retirement Policy. o Maternity Leave Policy. o Anti-Bullying and Harassment Policy. o Raising Concerns at Work (Whistleblowing) Policy. o Safe Employment: Pre and Post Employment Checks Policy. o Staff Handbook updated January 2013 o Guidance available on the intranet relating to Annual Leave. o Joint Steering Group (YAS management & Trades Union).

To take a complaint to a Tribunal (in certain circumstances)	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Appeal against wrongful dismissal. o Pursue a claim in the employment tribunal, if you meet required criteria, if internal processes fail to overturn a dismissal. 	<ul style="list-style-type: none"> o Disciplinary Policy. o Joint Steering Group (YAS management & Trades Union). o Appeals process is contained within Disciplinary policy. o Template letters following to be sent following disciplinary hearings contain information about right to appeal.
Can raise any concern with their employer whether it is about safety, malpractice or other risk, in the public interest	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Protection from detriment in employment and the right not to be unfairly dismissed for 'whistleblowing' or reporting wrongdoing in the workplace. 	<ul style="list-style-type: none"> o Raising Concerns at Work (Whistleblowing) Policy. o Appeals process is contained within Disciplinary policy. o Joint Steering Group (YAS management & Trades Union).
To have employment protection (NHS employees only)	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Employment protection in terms of continuity of service for redundancy purposes if moving between NHS Employers. 	<ul style="list-style-type: none"> o Most staff are employed under AFC Terms & Conditions: Section 12, Contractual conditions of service. o Joint Steering Group (YAS management & Trades Union). o
To join the NHS pension scheme (NHS employees and some GPs)	Sources of Assurance
<p>RIGHTS: The right to:</p> <ul style="list-style-type: none"> o Your ability to join the NHS Pension Scheme. 	<ul style="list-style-type: none"> o All staff are engaged under contracts of employment which sets out eligibility for joining the NHS Pension Scheme. o Joint Steering Group (YAS management & Trades Union).

PLEDGES	Sources of Assurance
<p>The Trust (NHS) commits to :</p> <ul style="list-style-type: none"> o 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. o 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. o 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. o Provide support and opportunities for staff to maintain their health, well-being and safety. 	<ul style="list-style-type: none"> o YAS' Mission, Vision and Values. o Raising Your Concerns (Whistleblowing) Policy. o WE CARE Awards. o Long Service Awards. o Single Equality Scheme. o Bright Ideas scheme, "You said, we did". o Joint Steering Group (YAS management & Trades Union). o Roles and responsibilities set out in Trust Job Descriptions. o Annual Personal Development Review (PDR) process in place for all staff and links with the relevant departmental or directorate business plan and the IBP. o Guidance available on the intranet relating to PDRs. o Leadership and Management Training in place including Managing Performance and Capability. o Trust has a number of Learning and Development policies in place including Statutory & Mandatory Training; E-learning; Learning & Development Portal. o Health & Safety Policy. o Risk Management and Assurance Strategy. o Occupational Health services including access to a range of support services for staff; healthy living initiatives and events/promotions provided. o Employee Assistance Programme (EAP).

<ul style="list-style-type: none"> o 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. o To have a process in place to raise an internal grievance. o 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. 	<ul style="list-style-type: none"> o YAS Forum. o Membership Strategy. o Stakeholder Engagement and Communication Policy. o Bright Ideas scheme, “You said, we did”. o Integrated Inspection process and schedules: incorporates all aspects of the CARE QUALITY COMMISSION standards. All stations and standby points are scheduled for yearly inspections with dates agreed with the Locality Managers who accompany the Standards & Compliance Directorate managers on the inspections. Inspections led by band 6 and 7 members of the risk and safety team. o Organisational change consultation meetings (as appropriate). o Annual NHS Staff Survey. o Staff have an opportunity to put forward ideas via Listening Watch, Bright Ideas scheme, “You said, we did”. o , staff surveys (National/NHS; local). o Joint Steering Group (YAS management & Trades Union). o Grievance Policy. o Raising Your Concerns (Whistleblowing) Policy.
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