Value Based Interviewing (VBI)
Oxford University Hospitals NHS Trust

“Changing the way we do things around here”

Sue Donaldson, Director of Workforce
Jo Durkin, VBI Project Manager
Overview

• Delivering Compassionate Excellence (DCE)
• What DCE means to our patients and us
• Our Values
• VBI in Context
• Training for our managers
• Common features of a negative culture Francis 2013 v OUH 2012
• The VBI Model and how we would assess Compassion
• Where we are now and how we are delivering VBI
• How are we evaluating?
• What do our managers think
• Initial impact evaluation – qualitative data
• Learning so far
• What will Oxford Share in 2014
• Questions
Delivering Compassionate Excellence
What DCE means to our patients

‘To be comfortable in mind as well as body. This is possible only if I am made to feel that there is an interested in me as a person rather than just being a ‘body’ requiring treatment.’

‘Build up a relationship with me. Ask about my family. Make me feel that I am important to you as a patient, but you are taking an interest in me as a person, not just a patient.’

‘Use a little bedside manner now and then. Pump up my pillow once in a while. Put a hand on my arm and tell me not to worry. When you pass my bed, smile and ask if I am ok, even though you can see that I am. Make me that that even though you have 20 other Patient in your care, you still have me in mind.’
What DCE means to us

Leadership within the OUH means ..?

• Having a vision of where we need to go and being able to bring people on board to work towards a common goal.
• Being a role model.
• Visible and approachable. Leading at every level.
• Caring about the patients and staff above financial constraints and helping staff to become the best.

I would like to work in a team where?

• All staff are valued as individuals and recognised as a team
• We take time to do things right the first time.
• Where there is a spirit of support, respect and teamwork
• Where people receive praise for doing things well
• Where people take pride in the quality of care they deliver
What DCE means to us

What are the things you really care about in your job?
• Good patient care. Giving the best quality care to patients.
• Delivering what patients want, supporting staff and working in a team.
• Trying to do things the right way with a strong quality and service focus, good governance and minimum risk.

The compliment I would most like to hear from a patient is ...?
• Thank you
• Thank you for helping me
• I feel well looked after by you. You have helped me through a difficult time.
• I was looked after like I was a member of the family with care and compassion and dignity.
Delivering Compassionate Excellence

Our Values

"We aim to provide excellent care with compassion and respect."

We will do this by:
- taking pride in the quality of care we provide
- putting patients at the heart of what we do and recognising different needs
- encouraging a spirit of support, respect and teamwork
- ensuring that we act with integrity
- going the extra mile and following through on our commitments
- establishing systems and processes that are sustainable

"We aim to deliver, learn and continuously improve."

We will do this by:
- delivering high standards of healthcare based on national and international comparisons
- delivering the best clinical teaching and research
- adopting the best clinical research in patient care
- striving to improve on what we do through change and innovation;
- monitoring and assessing our performance
- learning from successes and setbacks
- working in partnership across the Health and Social Care Community
Delivering Compassionate Excellence through Staff Engagement

Values into Action
Value based behaviours
- Recruitment, Induction, Appraisal, Performance, Training, Communications, Reward and Recognition

Staff Survey
Local Action Planning
- Appraisal, Training, Communications and link with local feedback from Patient Survey, complaints, compliments

Listening into Action
Increase leadership capability
- Structured & sustainable - ‘working in new way’ to impact patient care
- Visible senior leadership & input

Patient Experience
Focus on patient experience as component in quality measurement

Engagement Strategy
- Staff Engagement
- Delivering Compassionate Excellence
- Patient Perceptions
VBI in Partnership

• In 2012 The Oxford University Hospitals (OUH) was selected as one of nine healthcare organisations to receive funding from the Health Foundation's new Shared Purpose programme.
• The Trust has received funding to work with NSPCC to develop and test its ideas which will build an evidence base that can benefit the NHS as a whole.
• NSPCC had 10 years experience in Value Based Interviewing. Evaluation and Validation (2008) and successful implementation and embedding in external organisations.
Background


• NSPCC VBI project - Evaluation and Validation (2008) - 0.46 Predictive Validity

• NSPCC External trials and organisations embedding VBI
  • Connexions Staffordshire and Leeds Early Years Service, NSPCC, ChildLine, Kings College London, CRI (youth justice), Carnival Cruises, Richard House Hospice, Private sector school

• OUH Organisational Context; turnover, sickness, staff survey
VBI in context

• Improve the quality of patients’ experience and safety by recruiting frontline clinical staff who are recruited against a values base.

• Provide a focus whereby staff inspire and advocate compassionate excellence for our patients, families and carers.

• A programme to change attitudes and behaviours of staff through engagement and continuous improvement of healthcare to people who use our services.

• We expect to see improvements in patients’ safety, care and experience. Demonstrated by kindness, empathy, respecting patient views with an associated reduction in complaints, safeguarding alerts and improved patient experience and staff satisfaction.
<table>
<thead>
<tr>
<th>Common Features of a Negative Culture; FRANCIS 2013</th>
<th>OUH Non-Aligned Behavioural Indicators OUH 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Lack of openness to criticism; defensiveness</strong></td>
<td>Is afraid of being challenged, takes no action; blames others without seeking to understand their perspective</td>
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<tr>
<td><strong>Lack of consideration for patients</strong></td>
<td>Is prepared to stand up for certain people but not others, is comfortable leaving people in difficult situations</td>
</tr>
<tr>
<td><strong>Looking inwards not outwards</strong></td>
<td>Works in a silo, does not effectively engage with others in other departments or areas</td>
</tr>
<tr>
<td><strong>Secrecy</strong></td>
<td>Keeps confidential issues which should be shared, does not make effective use of organisational processes</td>
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<tr>
<td><strong>Misplaced assumptions about the judgements &amp; actions of others</strong></td>
<td>Makes assumptions about others, does not seek to understand their needs and perspective</td>
</tr>
<tr>
<td><strong>Acceptance of poor standards</strong></td>
<td>Ignores issues, leaves situation for others to deal with</td>
</tr>
<tr>
<td><strong>Failure to put the patient first in everything that is done</strong></td>
<td>Treats everyone the same, does not consider them as an individual with specific experience, views and needs</td>
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VBI Training for Managers

• Intensive two day training course co-delivered by NSPCC
• Learn the VBI Technique on day one and day two have a practice session.
• Leave with their VBI ‘L’ Plates.

“This was a very interesting and productive 2 day session. I felt very valued and appreciated by the team as well as lecturers. The content of the information was valuable. I will return to my clinical area and practice frequently with other colleagues”

“Excellent programme, very worthwhile investment in the Trust, excellent trainers, well-pitched, secure environment. Good group size, plenty of group work exercises”.

“I found the course interesting and enjoyable and very useful. One of the best training sessions I have ever been on”
Assessing Compassion

QUESTION:

Tell us about a time when you supported someone through a difficult situation.

How would you assess a response to this question fairly and consistently?

What criteria would you use?
Assessing Compassion

Tell us about a time when you supported someone through a difficult situation

<table>
<thead>
<tr>
<th>Aligned Indicators</th>
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<tbody>
<tr>
<td>Can provide an example of offering support to someone in a difficult situation</td>
</tr>
<tr>
<td>Puts the person and their needs first; cares about them and their situation</td>
</tr>
<tr>
<td>Listens and seeks to understand things from their perspective</td>
</tr>
<tr>
<td>Acknowledges the difficulty in their experiences and is non-judgemental</td>
</tr>
<tr>
<td>Offers support and is prepared to go the extra mile for them</td>
</tr>
<tr>
<td>Reflects on the impact of their actions and decisions on themselves and the person</td>
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<table>
<thead>
<tr>
<th>Non-Aligned Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cannot provide a relevant example</td>
</tr>
<tr>
<td>Is focussed on themselves; does not show empathy or care about the person’s situation</td>
</tr>
<tr>
<td>Makes assumptions about the person and their situation, does not listen to them.</td>
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<tr>
<td>Ignores the person’s feelings and experiences; does not treat them with dignity or respect</td>
</tr>
<tr>
<td>Focusses on difficulties and limitations in providing support from their perspective; fails to support or provide care for the person</td>
</tr>
<tr>
<td>Lacks self-awareness and awareness of their impact on others</td>
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Where we are now:

- **Childrens Services, Traditional Model**
  - One hour of interviewing plus separate VBI
- **Care of the Elderly, Part-Model/Combined VBI**
  - 45 minutes – one hour interviewing on Values and Technical competence
- **Clinical Support Worker Academy**
  - Open Day attendance, learning about values, 30 minute values interview and written assessment prior to ward placement.

- **Approximately 130 Value Based Interviews Completed**

- Finding a model fit for purpose…. 
## VBI Delivery Model

<table>
<thead>
<tr>
<th>VBI Delivery Model</th>
<th>Description</th>
<th>Suggested uses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Traditional Model</strong></td>
<td>• One hour of interviewing&lt;br&gt;• Four values tested&lt;br&gt;• Separate technical interview</td>
<td>✓ Management posts&lt;br&gt;✓ Senior nursing roles&lt;br&gt;✓ Consultant recruitment&lt;br&gt;✓ Internal appointments</td>
</tr>
<tr>
<td><strong>Part-model</strong></td>
<td>• 45 minutes of interviewing&lt;br&gt;• Three Values tested&lt;br&gt;• Combined with technical interview</td>
<td>✓ Band 5 nursing roles&lt;br&gt;✓ Administration posts&lt;br&gt;✓ Lower grade (Band 4 and below)</td>
</tr>
<tr>
<td><strong>Whole Values Model</strong></td>
<td>• Values are the focus of the recruitment.&lt;br&gt;• Open Day to learn about Values and job role&lt;br&gt;• If application form does not reflect/consider the values - not short listed&lt;br&gt;• Three values tested at interview&lt;br&gt;• If VBI results satisfactory, invite to technical interview</td>
<td>✓ Clinical Support Worker Academy&lt;br&gt;✓ Band 2 and below posts&lt;br&gt;✓ Large recruitment campaigns or student intakes (e.g. nursing students).</td>
</tr>
</tbody>
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VBI Community of Practice

- Training everyone versus training specialists
- Monthly learning sets
- On-going development of VB Interviewers
- Building VBI Champions and developing the community of practice
- Encouraging Values Conversations
Evaluation

- Welcome Questionnaires our new employees
- Control Groups/VBI Groups
- 6 month manager assessment questionnaire
- 12 month employee and manager questionnaire
- HR Metrics including Performance, Conduct, Absence, Turnover, etc.
- Predicted Validity

- Professor Ian Kessler, Kings College London
- NSPCC Consultancy
- Helen Baron, Associate Fellow of the British Psychological Society
- Picker Europe
What do the managers think?

“It really does bring out a lot about candidates. It definitely helps with our selection process. At our recent interviews the candidates were equal technically but the **VBI was clear that one candidate was inappropriate on values**” (Admin Manager)

“The VBI really showed how staff acted in certain situations, they gave **truthful answers**”

“The internal candidates were interviewed and the managers knew that there were non-aligned behaviours in practice **but without VBI their behaviours would not have been evident at interview**” (VBI Interviewer)

“I Love it. I have actually started to think that the bulk of our interviews should be based on values. The outcome and impact of the values interview had greater credence and makes me feel more assured of an appointment than anything technical we interview on”. (Matron, Safeguarding Children)
What do the managers think?

“Before I went on the training I was really apprehensive but once I completed it I could see what a difference it would make and what you can get out of people. You don’t understand until you do the training just how amazing VBI is”. (Ward Manager, Childrens)

“I am conscious of the extra time that it takes to appoint people and in my day job we are under a lot of pressure to appoint people quickly and I am still not clear that those two elements fit together” (Recruiting manager and VB Interviewer)

“We shouldn’t be allowed to recruit any other way.” (Ward Manager)
What do the managers think?

“You sent me feedback about a candidate and you said there was an absence of reflection. I had interviewed her before and I didn’t pick that up the first time. I was seduced by her skills but when I interviewed her again I had a heightened awareness and I realised in the second interview you were absolutely right and there was an absence of reflection. We wouldn’t have notice this if we didn’t have VBI” (Matron, Childrens Services)

“I have two staff members at the moment that I am managing and one was interviewed on values and one wasn’t. There is a definite gulf between them........The attitude of those with the values is totally different, they have more compassion. They understand why they are doing things; why we feed the patient, why we toilet the patient” (Ward manager)
## Initial Impact Evaluation

### Question: Does the job meet your expectations?

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>To a limited extent</th>
<th>To some extent</th>
<th>To a large extent</th>
<th>Completely</th>
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<tbody>
<tr>
<td>VBI</td>
<td>0</td>
<td>0</td>
<td>11%</td>
<td>48%</td>
<td>39%</td>
</tr>
<tr>
<td>Not VBI</td>
<td>2%</td>
<td>6%</td>
<td>16%</td>
<td>51%</td>
<td>24%</td>
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### Question: I understand what my role within the department is

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
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<tbody>
<tr>
<td>VBI</td>
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<td>0</td>
<td>2%</td>
<td>46%</td>
<td>52%</td>
</tr>
<tr>
<td>Not VBI</td>
<td>0</td>
<td>1%</td>
<td>6%</td>
<td>56%</td>
<td>34%</td>
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</table>

### Question: I understand how my role contributes to DCE

<table>
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<tbody>
<tr>
<td>VBI</td>
<td>0</td>
<td>0</td>
<td>2%</td>
<td>43%</td>
<td>54%</td>
</tr>
<tr>
<td>Not VBI</td>
<td>1%</td>
<td>1%</td>
<td>16%</td>
<td>52%</td>
<td>28%</td>
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</table>
# Initial impact Evaluation

**Question:** I would recommend OUH as a good place to work

<table>
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<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>VBI</strong></td>
<td>0</td>
<td>0</td>
<td>7%</td>
<td>33%</td>
<td>61%</td>
</tr>
<tr>
<td><strong>Not VBI</strong></td>
<td>0</td>
<td>0</td>
<td>18%</td>
<td>57%</td>
<td>24%</td>
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</table>

**Question:** I would recommend OUH to my family and friends as a safe place to receive treatment

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<tr>
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<th>Agree</th>
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<tbody>
<tr>
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<td>0</td>
<td>0</td>
<td>7%</td>
<td>33%</td>
<td>61%</td>
</tr>
<tr>
<td><strong>Not VBI</strong></td>
<td>0</td>
<td>0</td>
<td>18%</td>
<td>57%</td>
<td>24%</td>
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</tbody>
</table>
**Initial impact Evaluation**

<table>
<thead>
<tr>
<th>Question: How long do you think you will stay at OUH?</th>
<th>Less than a year</th>
<th>1-2 years</th>
<th>2-3 years</th>
<th>3-4 years</th>
<th>4-10 years</th>
<th>More than 10 years</th>
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</thead>
<tbody>
<tr>
<td>VBI</td>
<td>2%</td>
<td>24%</td>
<td>11%</td>
<td>11%</td>
<td>15%</td>
<td>33%</td>
</tr>
<tr>
<td>Not VBI</td>
<td>13%</td>
<td>21%</td>
<td>17%</td>
<td>11%</td>
<td>28%</td>
<td>10%</td>
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Learning so far

- Understanding our Values wasn’t just a good idea before implementing VBI…this project would not have worked without it.

- It’s not quick or easy; changing a good idea into ‘the way we do things’ is part of a wider culture change. Values Appraisals, Values Performance Management, Induction, Listening into Action, Reward and Recognition.

- It is so different from current practices; it’s not just an enhancement on current selection.

- Safeguarding concerns; we didn’t anticipate so many, so soon.

- You cannot anticipate a response in a VBI.
What will Oxford Share

• In April 2014, we will be publishing our Delivery Report to the Health Foundation which will include our evaluation.

• We intend to road show the results in 2014 and intend to share our learning from the project.

• We will share information about the issues and barriers we faced around the practical implications of adding an additional selection method into an already complex process and how we overcame these barriers.
Finally… in summary

• Understanding our values and the behaviours was the first critical step in a long journey.

• It’s not quick or easy. It is part of a wider cultural change.

• We believe this we are going in the right direction and the time and investment in Value Based Interviewing is worthwhile.
Any Questions?
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