

Muckamore Abbey Hospital Inquiry

Module 7 – MAH Operational Management

WITNESS STATEMENT OF DAMIAN MCALISTER

I, Damian McAlister, former Director of Human Resources and Organisational Development within the Belfast Health and Social Care Trust (the Belfast Trust), make the following statement for the purposes of the Muckamore Abbey Hospital Inquiry (the MAH Inquiry):

1. This statement is made on my own behalf in response to a request for evidence from the MAH Inquiry Panel dated 7 March 2024. The statement addresses a series of questions addressed to me concerning my former role in Human Resources and Organisational Development within the Belfast Trust.
2. This is my first statement to the MAH Inquiry Panel.
3. The documents that I refer to in this statement can be found in the exhibit bundle attached to this statement marked “DMcA1”. The 7 March 2024 MAH Inquiry request for evidence can be found at Tab 1 in the exhibit bundle.

Qualifications and Positions

4. I was Director of Human Resources and Organisational Development (Director of HR) within the Belfast Trust between 1 July 2014 and 16 February 2018, when I ceased my employment with the Belfast Trust to pursue a career outside of health and social care. Prior to becoming Belfast Trust Director of HR, I worked in the following roles within health and social care in Northern Ireland:

- a. Director of Human Resources in the Northern Trust from July 2013 to June 2014;
 - b. Co-Director for Human Resources in the Belfast Trust from April 2007 to June 2013; and
 - c. Deputy Director of Human Resources in the Royal Group of Hospitals Trust from March 2005 to April 2007.
5. Prior to my employment in health and social care, I was employed in the Northern Ireland Civil Service from September 1987 to March 2005. I served in several different positions across various Government departments including the then Department of Health, Social Services and Public Safety between 2002 and 2005.

Questions

Question 1

Please explain your role and the responsibilities you held in respect of MAH (including details of when you held such role/responsibilities).

6. In my role as Director of HR I was responsible for Strategic Human Resource Management, including lead responsibility for terms and conditions of employment and the development and implementation of workforce policies, processes, and procedures across the Belfast Trust. It was not a direct role relating to Muckamore Abbey Hospital, but the HR processes applied across the Belfast Trust and therefore to Muckamore Abbey Hospital (MAH).
7. As Director of HR I was a member of the Belfast Trust's Executive Team and attended Belfast Trust Board meetings. My senior leadership responsibility was shared with other Directors, and, for instance, I worked particularly closely with the likes of the Director of Nursing, the Director of Social Work, and the Medical Director, who each had professional responsibility for different groups of staff.

8. HR is a corporate support function in the Belfast Trust. The HR Directorate is not itself providing services for patients and service users. It is supporting the staff in other service Directorates who do.
9. In practical terms, and as indicated in the likes of my Job Description and the Assurance Framework, my role meant that I held senior leadership responsibility (amongst other things) for:
 - a. Employee Relations.
 - b. Recruitment and Selection.
 - c. Workforce Planning.
 - d. Modernisation.
 - e. Job Evaluation.
 - f. Pay and Terms & Conditions.
 - g. Attendance Management.
 - h. Occupational Health Services.
 - i. Learning and Development and
 - j. Organisational Development.
10. Towards the end of my time as Director of HR, my responsibilities came to include leading the management reorganisation that introduced the collective leadership model of care delivery in the Belfast Trust.

Question 2

What training was provided for new line managers at MAH on staff management processes?

11. As Director of HR, I was not directly involved in the provision of training to line managers in MAH, so I can only speak generally as to the processes that would normally apply when someone takes on a line management position.

12. When a person joined any new post, the Induction Policy and Management Guidelines applied to them. This was to ensure that, regardless of grade or profession, they undertook a structured and comprehensive induction. This policy applied both to those in a line management role, as to those who were not in management. The ethos of the policy was that the induction each staff member, new to post, was to receive, and the training identified as part of that induction was personalised to the individual.
13. There were two elements to an induction: a corporate induction and a local induction. At the point of entry to a new post, it was the line manager's role to identify the statutory and mandatory training requirements for the new line manager, with reference to the Statutory Mandatory Training Policy and subsequently agree timescales for attendance/completion of training.
14. This was reflected in the Induction Policy during my time in post, which (using the September 2017 version as an example) stated:

“New to Management: Newly appointed/promoted managers will have specific induction needs depending on their previous experience. As part of the induction process, due care should be taken by the person facilitating the induction, to identify the learning & development needs of new managers and put in place a specific training programme to ensure that they can perform effectively as managers.

As part of this induction, new managers must be provided with a copy of the Trust's Leadership & Management Framework and Employee Engagement Framework. These set out the knowledge, actions and behaviours expected of leaders and managers in the Belfast Trust and will help to identify learning needs. All new managers must ensure they fully understand the key policies and procedures relating to their managerial role.”

15. A list of recommended people management training courses was appended to the policy as Appendix 1, which set out training which should be completed by

managers who have responsibility for managing staff. The recommended training was broken down into 5 sections:

- a. Leadership & Management Framework and Charter;
- b. Continuing Professional Development;
- c. Effective Communication;
- d. Employee Involvement and Engagement;
- e. Team Effectiveness.

16. These sections are developed further in the Local Induction Checklist Template. The Continuing Professional Development section also identified a number of learning and development programmes to support the manager in their role. These included:

- a. The Engaging Manager;
- b. Quality Level 1 Attributes Framework;
- c. Making the Transition into management;
- d. Managing Attendance;
- e. Recruitment & Selection;
- f. Staff Development Review;
- g. New Managers Toolkit on HR Processes;
- h. Mandatory Equality Training for Managers;
- i. Managing People's Performance;
- j. Communication Skills;
- k. Managing and Leading Change;
- l. Disciplinary/Grievance/Capability Procedure.

17. As indicated above, performance management procedures were part of the training which a new line manager would undertake upon induction.

18. In addition, there were a range of development courses available to all staff in the Belfast Trust that were relevant to managerial positions. These included:
- a. Introduction to Emotional Intelligence;
 - b. Developing Resilience;
 - c. Customer Care;
 - d. Having Important Conversations;
 - e. ILM Leadership and Management Level 3 & 5; and
 - f. Coaching Skills for Leaders.
19. In a similar vein, the Capability Procedure, Disciplinary Procedure, Induction Policy and Management Guidelines, Management of staff affected by Change were among the identified policies recommended to a new line manager upon induction.
20. There was a Trust-wide approach to Learning and Development, driven by identification of training needs within all Departments and led primarily by the Human Resources Directorate through its Learning and Development team. Each year the Learning and Development team published a portfolio of learning and development opportunities for all staff in the Belfast Trust, including staff in Muckamore Abbey Hospital.
21. The training opportunities were predominantly focused on general skills and did not provide for any clinical related skills. Within this context there was a suite of line management training opportunities however there was no one single training programme for new line managers within the Belfast Trust. The line management training offered on a range of topics including performance appraisals, recruitment and selection, managing sickness absence and general communications.

Question 3

Please explain the performance management arrangements for all staff, including managers, at MAH.

22. There were performance management arrangements operated at an organisational and individual level in the Belfast Trust. At an organisational level, the Directorates participated in bi-annual Accountability Review meetings held with the Chief Executive and two other Trust Directors to review each Directorate's performance. During these meetings, each of the Directors, together with members of the Directorate senior management team, had to report progress against their annual management plans, providing both quantitative and qualitative information relating to the services they delivered. These Accountability Review meetings were a way for a genuine two-way conversation on performance and any issues or areas of concern.
23. At an individual level, the Belfast Trust had a well-developed annual performance appraisal process which applied to all staff except for Medical and Dental staff (who were subject to separate appraisal and revalidation processes). The appraisal process was intended to allow line managers to review the performance objectives of each staff member, provide feedback on performance and agree development plans for the incoming year.
24. When issues of individual underperformance were identified, either associated with capability and conduct, the Belfast Trust had Disciplinary and Capability policies. Line Managers were primarily responsible for the identification of issues in regard to performance, and could, if required, seek the advice from the Human Resources Directorate.

Question 4

Were line managers required to seek HR advice and/or inform HR if they undertook performance management meetings?

25. The level of engagement that a line manager would have with the Human Resources Directorate regarding performance management issues was determined by the stage of the process. At an informal stage the line manager would be expected to deal with the matter themselves, unless they wanted to seek advice or assistance (which they could seek from the person in HR

assigned to help the Directorate with HR issues). However, if that was unsuccessful and the issue progressed to a formal stage, then the Capability procedure set out an expectation that the line manager would engage the Human Resource Directorate for advice on how to progress.

Question 5

What processes were in place to provide career development opportunities to staff at MAH, to ensure that staff had the required specialist skills to deliver care in a learning disability facility?

26. The Belfast Trust developed the Staff Development Review (“SDR”), which is a structured discussion between a Reviewee (individual staff member) and reviewer (usually their line manager) which culminates in the development of a comprehensive Personal Development Plan. The SDR supported staff in understanding how they could develop themselves within their own role and for future career progression.
27. The SDR process applied to all staff, including Bank and Temporary Staff, with the exception of Medical and Dental staff, who had separate appraisal arrangements.
28. The SDR was completed by way of an annual review, which was intended to be a meaningful discussion which allowed the staff member to receive feedback, have their contributions recognised, review and set personal objectives and to identify and agree development activities. While SDR was an annual review, staff who were new to the Belfast Trust should have their first SDR meeting within the first 6 months of taking up post and staff who moved to a new post within the Belfast Trust, should have an SDR meeting within the first 3 months after taking up their new post.
29. An SDR process took place at a review meeting between the reviewee and the reviewer. There were four key elements to the meeting:

- a. Review of the past year.
- b. Knowledge and Skills Framework ("KSF") Development Review - a discussion about the knowledge and skills required for the post, as set out in the KSF post outline.
- c. Individual Objectives and Contributions - a joint discussion and agreement on individual contributions to Team and Directorate Plans within the Belfast Trust.
- d. Personal Development Plan - a discussion and agreement of a PDP.

30. From this SDR process, staff in MAH were able to avail of general career development opportunities in the same way as any other staff groups. It was the responsibility of the line manager implementing the SDR to identify the career development needs and opportunities of each staff member.

31. Each of the Executive Directors had dedicated staffing resources within their areas to ensure adequate profession specific training was provided to staff. In turn it was the responsibility of the Operational Service Director and the relevant Professional Executive Directors (e.g. Director of Nursing or Director of Social Work) to ensure that staff had the required specialist skills to deliver care in a learning disability facility lay.

Question 6

Please describe the role of Human Resources in workforce monitoring, planning and implementation to ensure the appropriate staffing levels and skill mix (and thereby to ensure safe care) at MAH? Please also explain how any concerns about such matters were escalated.

The role of Human Resources in monitoring, planning and implanting appropriate staffing levels and skill mix

32. Workforce planning, being the process of ensuring that the right people with the right skills and competences are in the right place at the right time, was owned by the service area with support and facilitation from HR. The role of Human Resources was supportive in nature, through provision of workforce information statistics, provision of workforce planning skills development training, support to produce associated workforce plans and responding to identified staffing needs through profession and / or speciality specific recruitment campaigns etc.
33. Therefore, primary responsibility for specialty specific nurse staffing ratios and skills mix lay with the Service Directors and the professional specific Executive Directors.
34. The Department of Health had developed a 6 step framework to workforce planning during my time in post. The six steps were:
- e. Defining the Plan;
 - f. Mapping the Service;
 - g. Workforce Demand;
 - h. Workforce Supply;
 - i. Developing the Plan;
 - j. Implement, Review and Refresh.
35. The manner in which HR supported the service area in the monitoring, planning and implementation of staffing levels and skill mix varied. Often, assistance was received from the HR Business partner in the service area.
36. In ASPC, the HR Business Partner was also a Co-Director of HR, Joan Peden. Ms Peden supported the ASPC Directorate by Chairing a Steering Group on the Development of an Integrated Workforce Plan. This Group was created to review and create a Directorate Workforce Plan, including the services needs in relation to whole time equivalents, skill mix and grade mix. The interaction between HR and the service area is described in the 2015 ASPC Workforce Plan. It explains at paragraph 1.4.4:

“The Workforce Planning Steering Group, Chaired by the HR Co-Director was established to develop this Integrated Workforce Plan for the Directorate’s Modernisation Board. This workforce plan is owned by the Directorate and will be continually reviewed, updated and evaluated to maintain its relevance and to reflect the ever changing health and social care environment today and in the future.

Workforce data has been obtained from our Human Resources, Payroll, Travel and Subsistence (HRPTS) System for the years ending 31st May 2014 and 2015 respectively and trend analysis identified using workforce data from our previous Human Resource Management System (HMRS).”

Escalation of concerns regarding staffing levels or skill mix

37. Any concerns regarding either staffing levels or skill mix were raised via a variety of means.
38. Issues could be raised at workforce meetings and steering groups at each level of the Directorate structure. If the issue related to a matter which HR had responsibility for or input into, then it could be raised with representatives of HR in attendance at those meetings.
39. In addition, advice could be sought from HR at any time, including advice on matters of concerns about staffing levels or skill mix.
40. If the concerns required escalation to Directorate Level, this could be achieved at several forums, including Accountability Review Meetings, Workforce Forums or Trust Executive Team meetings.
41. Professional Executive Directors could also raise matters of concern with their counterparts within the Department of Health who had responsibility for workforce planning, training and commissioning of services.

Question 7

Do you wish to draw to the attention of the Panel any other matters not covered by the above questions that may assist in the Panel's consideration of the Terms of Reference?

42. The structure and size of the Belfast Trust was such that primary responsibility for all staffing matters rested with Line Managers in the first instance. The Human Resource Directorate was configured to provide strategic HR direction to the organisation and support responses, through various specialist interventions, to assist service areas to address workforce issues such as recruitment and selection, sickness absence management etc.

Declaration of Truth

43. The contents of this witness statement are true to the best of my knowledge and I believe are necessary to address the matters on which the MAH Inquiry Panel has requested me to give evidence.

Signature: 

Dated: 17th June 2024

Damian McAlister Organisational Module 7 Exhibit Bundle "DMcA1"		
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MAHI Muckamore Abbey Hospital Inquiry

MAHI Team
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Belfast
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07 March 2024

By Email Only

Mr Damian McAlister

Dear Mr McAlister

Re MAHI Organisational Modules 2024: Request for Witness Statement

The Inquiry is currently preparing for the final phase of evidence. Please see enclosed a document summarising the ten organisational modules to be heard in this phase: [Organisational Modules 2024.pdf \(mahinquiry.org.uk\)](https://mahinquiry.org.uk/Organisational%20Modules%202024.pdf).

It is anticipated that the Inquiry will hear evidence in respect of these modules in September and October 2024.

The purpose of this correspondence is to issue a request, in the first instance, for a statement from you that will assist the Inquiry in this phase of evidence. It should be regarded as a request by the Inquiry Panel for the purposes of Rule 9 of the Inquiry Rules 2006.

The Inquiry understands that you were a Human Resources Director with responsibility for Muckamore Abbey Hospital (MAH) from 2014 - 2018.

You are asked to make a statement for the following module:

M7: MAH Operational Management

I have also enclosed for your attention a copy of the Inquiry's [Terms of Reference](#). You will note that the module in respect of which you are asked to make a statement, spans across the Terms of Reference.

Please find enclosed a set of questions that the Panel wish to be addressed in your statement ("Questions for witnesses working in a senior HR position at MAH"). It would be helpful if you could address those questions in sequence in your statement. If you do not feel that you are in a position to assist with a particular question, you should indicate accordingly and explain why that is so.

Please note that, while the Inquiry has received and heard a considerable body of evidence about the relevant systems and processes that were in place during the timeframe of the Terms of Reference, the Inquiry will now be focusing primarily on the *adequacy and effectiveness* of those systems and processes.

Please see enclosed a Statement Format Guide that will assist with the presentation of your statement. It is important that statements made for Inquiry purposes should be consistent in format. It is appreciated that the number of required sections will depend on the range and breadth of issues to be covered and that some flexibility will be needed to ensure the most effective presentation, but you are asked to adhere to the Guide to the extent that is possible.

You are requested to furnish the Inquiry with your completed statement by 27 April 2024. Your statement should be uploaded to the Inquiry's document management platform BOX via the following link:

<https://mahinquiry.box.com/s/gayw24v95lpsot3shnrt549zc00ouquo>

Should you have any issues accessing BOX please email info@mahinquiry.org.uk and a member of the team will assist you.

Statements made for the purpose of the organisational modules will be published on the Inquiry's website.

As noted above, it is anticipated that evidence in these modules will be heard by the Inquiry in September and October 2024. If there are any dates in those months on which you will be unavailable to attend the Inquiry to give evidence, please inform the Inquiry as soon as possible by emailing the Inquiry Secretary jaclyn.richardson@mahinquiry.org.uk.

If you have any queries about this correspondence, please do not hesitate to contact me.

Yours faithfully,



Lorraine Keown
Solicitor to the Inquiry

Encs:

1. Outline of Organisational Modules April – June 2024. [Organisational Modules 2024.pdf \(mahinquiry.org.uk\)](#)
2. [MAHI Terms of Reference](#).
3. OM2024 Statement Format Guide.
4. Questions for witnesses working in a senior HR position at MAH.



**Module 7: MAH Operational Management
Questions to be Addressed in Witness Statement**

Questions for witnesses working in a senior HR position at MAH

1. Please explain your role and the responsibilities which you held in respect of MAH (including details of when you held such role/ responsibilities).
2. What training was provided for new line managers at MAH on staff management processes?
3. Please explain the performance management arrangements for all staff, including managers, at MAH.
4. Were line managers required to seek HR advice and/or inform HR if they undertook performance management meetings?
5. What processes were in place to provide career development opportunities to staff at MAH, to ensure that staff had the required specialist skills to deliver care in a learning disability facility?
6. Please describe the role of Human Resources in workforce monitoring, planning and implementation to ensure the appropriate staffing levels and skill mix (and thereby to ensure safe care) at MAH? Please also explain how any concerns about such matters were escalated.
7. Do you wish to draw to the attention of the Panel any other matters not covered by the above questions that may assist in the Panel's consideration of the Terms of Reference?