



## Trust Board Meeting 04 May 2017

<b>Title of the paper:</b>	<b>National staff survey results 2016 and next steps</b>	
<b>Agenda item:</b>	13/48	
<b>Lead Executive:</b>	<b>Paul da Gama, Director of Workforce &amp; Organisational Development</b>	
<b>Author:</b>	<b>Susan Whiterod, Associate Director, Organisational Development, Engagement &amp; Equality</b>	
<b>Trust aims :</b>	Double click on the box to mark as appropriate:  <input checked="" type="checkbox"/> To deliver the best quality care for our patients  <input checked="" type="checkbox"/> To be a great place to work and learn	
<b>Purpose:</b>	To present the key results of the 2016 National Staff Survey, analysis and actions, for information and assurance.	
<b>Link to Board Assurance Framework (BAF)</b>	PR1 Failure to provide safe, effective, high quality care (insufficiently robust and embedded quality governance and risk management)  PR2 Failure to recruit to full establishments, retain and engage workforce	
<b>Previously discussed:</b>		
<b>Group</b>	<b>Date</b>	
Joint Consultative Committee	March 2017	
TEC	March & April 2017	
Team Brief cascade	March & April 2017	
Patient and Staff Experience Committee	April 2017	
<b>Benefits to patients and patient safety implications</b>		
An engaged workforce means positive culture; fundamental to delivering the Trust vision to provide the very best care for every patient, every day. Acting upon staff feedback, addressing concerns, sharing good practice and learning is mission critical to success.		
The Board is are asked to:  1.1 Receive the results of the 2016 national staff survey for information.  1.2 For assurance, note the approach being taken and progress made to communicate, engage and act upon the survey outcomes.  1.3 For assurance, to note that further reports will be provided on progress against implementation of corporate and divisional staff survey action plans.		





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**Trust Board meeting – 04 May 2016**

**National Staff Survey 2016: Results and Next Steps**

**Presented by: Paul da Gama, Director of Workforce & Organisational Development**

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**1. Purpose**

- 1.1 The key results of the 2016 National Staff Survey, analysis and next step actions are presented for information and assurance.
- 1.2 Appendices 1 and 2 present detailed data extracted from Quality Health (national) and Meridian (local) survey administrators' management reports.

**2. Background**

- 2.1 As in 2015, WHHT offered the 2016 national staff survey to all staff; 1777/ 43% of staff responded. This rate is in line with response rates for other acute Trusts in England and a significant improvement on the 33% response rate in 2015. The survey was administered October/November 2016 and formal results published 7 March 2017.
- 2.2 In 2016, actions to address staff survey results formed part of our CQC improvement plan. It is pleasing that many scores have improved, either slightly or significantly and are now in line with, or higher than the acute sector average.
- 2.3 In 2015, the Trust scored the lowest ranking in 8 scores; in 2016 this position improved to lowest ranking in 3 scores. The Trust has increased the number to highest ranking scores from 2 in 2015 to 6 in 2016. There remain hot-spots where targeted improvements are required.
- 2.4 WHHT included optional additional survey questions on health and wellbeing to inform our CQUIN activities. We remain top quartile for '*organisation and management interest and action on HWB*'. However some results are concerning, e.g. work related stress is higher than sector average. 34% of staff says they do not take the breaks they are entitled to. The main reason given is workload.
- 2.5 Overall, the 2016 survey results are moving in the right direction. It is fair to say it is still a stretch goal to achieve top quartile scores for engagement (and high scores overall).
- 2.6 Our staff survey results have informed updating of our workforce and development strategy 2016-2019. Work is in progress to agree a structured and deliverable programme of work that will address staff survey actions at corporate and divisional levels.

### 3. Staff Survey Results

#### 3.1 Key Findings – Staff Engagement Score

Overall, the Trust is ranked 32 out of 97 Acute Trusts, an improvement of 11 places from 2015.

The key indicator is overall staff engagement score; derived from combined scores of 5 questions, as shown in Figure 1 below. Our overall engagement score is 3.78, below sector average but improving. The 2014 score was 3.68 and in 2015, 3.74. (Scores range from 1 to 5; 1 indicates staff are poorly engaged (with their work, their team and their trust) and 5 indicates staff are highly engaged).

The breakdown of results shows positives; mirroring our improved CQC ratings, 78% of staff says patient/service user care is the Trust's top priority, an improvement on last year and higher than the sector score of 76%. Other results are close to sector average.

Of concern are scores for the two NHS Staff 'Friends and Family' (F&F) test questions (place to work and to receive care). Whilst improved from 2015, both scores still fall significantly below the sector; 55% of staff say they would recommend the Trust as a place to work, up 6% since last year, but below the sector score of 62%. Only 57% of staff would be happy with the standard of care if a friend or relative were treated at the Trust (compared to 54% last year) but the sector score is 70% so a big variance. Results are shown below.

		Your Trust in 2016	Average (median) for acute trusts	Your Trust in 2015
Q21a	"Care of patients / service users is my organisation's top priority"	78%	76%	74%
Q21b	"My organisation acts on concerns raised by patients / service users"	75%	74%	70%
Q21c	"I would recommend my organisation as a place to work"	55%	62%	49%
Q21d	"If a friend or relative needed treatment, I would be happy with the standard of care provided by this organisation"	57%	70%	54%
KF1.	Staff recommendation of the organisation as a place to work or receive treatment (Q21a, 21c-d)	3.66	3.77	3.56

#### 3.2.1. Top Ranking Scores

Table 1 below shows the five results where WHHT compares most favourably with other acutes.

Survey Result – highest ranking scores:	Trust Score 2016 Top 20% ✓	National average for acute sector
Percentage of staff reporting good communications between senior managers and staff	40% ✓	33%
Support from immediate managers	3.83	3.73
Organisation and management interest and action on health and wellbeing	3.71	3.61

Survey Result – highest ranking scores:	Trust Score 2016 Top 20% ✓	National average for acute sector
Percentage of staff/colleagues reporting most recent experience of harassment, bullying or abuse	49% ✓	45%
Effective team working	3.81	3.75

### 3.2.2. Lowest Ranking Scores

Table 2 below shows the five results where WHHT scored least favourably with other acutes

Survey Result – lowest ranking scores:	Trust Score 2016 Bottom 20% !	National average for acute sector
Percentage of staff experiencing physical violence from staff in last 12 months	4% !	2%
Percentage of staff experiencing discrimination	14% !	11%
Percentage of staff experiencing physical violence from patients, relatives or the public in the last 12 months	17% !	15%
Percentage of staff who believes the organisation provides equal opportunities for career progression or promotion	83%	87%
Staff recommendation of the organisation as a place to work or receive treatment	3.66	3.76

### 3.2.3. Key improvements from 2015 Survey

Table 3 below highlights the five results where staff experience has improved since the 2015 survey.

Survey Result where staff experience has improved	Trust Score 2016 Top 20% ✓	Trust score 2015
Percentage of staff appraised in the last 12 months	87%	75%
Fairness and effectiveness of procedures for reporting errors, near misses and incidents	3.73 ✓	3.58
Effective team working	3.81	3.71
Quality of appraisals	3.22	3.0

Survey Result where staff experience has improved	Trust Score 2016 Top 20% ✓	Trust score 2015
Support from immediate managers	3.83	3.72

Appendix 1 provides a more detailed breakdown of national staff survey scores.

## 4. Analysis

### 4.1. High level summary of themes

Figure 2 below summarises strengths and weaknesses in our results.

Where we did well	Where we did not do so well
Team members meet often to discuss team's effectiveness	Satisfaction with support from work colleagues
Able to deliver the patient care they aspire to	Experienced physical violence from managers in the last year
Immediate manager gives clear feedback on work	Satisfied with level of pay
Immediate manager asks for their opinions before making decisions that affect their work	Feeling unwell due to work related stress
Communication between senior management and staff is effective	Witnessing incidents that could have hurt staff
Senior managers try to involve staff in important decisions	Experienced physical violence from other colleagues in last year / physical violence experienced at work
Senior managers act on staff feedback	Would recommend the organisation as a place to work
Organisation treats staff involved in incidents fairly	Organisation fair with regards to career progression/promotion
Appraisal discussed organisational values	Experienced discrimination from the public / colleagues in the last year
Patient feedback used to make informed decisions	Would be happy with standard of care for relative/friend

### 4.2 Improved scores

There have been some significant improvements on some scores e.g.:

- Staff satisfied with the extent to which the organisation values their work is 47%, up from 39% in 2015
- Staff saying immediate managers give clear feedback has increased to 65% from 59% in 2015
- Senior manager communications has improved and is higher than the sector. 47% of staff say communication between senior management and staff is effective. Only 40% say that senior managers involve them in important decisions. And only 39% say that senior managers act on their feedback.
- 91% of staff say the Trust takes positive action on health and well-being, a 1% improvement from 2015
- The percentage of staff saying that they have received training in the last 12 months has significantly improved and is now just slightly below the sector score. The numbers of staff

agreeing that the training they received helped them do their job more effectively is 84%, which is 1% higher than the sector.

- Coverage of appraisals is 86%, same as the score for the sector, and a significant improvement on 2015 (74%). 74% of staff said that their appraisal helped them do their job more effectively which is also a significant improvement from last year, up from 69%
- 61% of staff says managers demonstrate the values at work, compared to the sector score of 58%
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#### **4.3. Indicators of concern**

In addition to factors cited in Table 2 above, it is pertinent to look at health and wellbeing as a key 'cultural anchor'. While we have scored well on HWB overall, there are causes for concern. Here we find:

- Staff saying they have felt unwell due to work related stress has decreased slightly from 38% last year, to 37% this year. However this is still higher than the sector score of 35%
- 34% of staff don't take the breaks they are entitled to and the main reason for this is workload
- 17% of staff experienced a traumatic incident at work which remained difficult to cope with afterwards and 40% of this group felt unable to access the appropriate support
- Staff who say they experienced harassment, bullying and abuse (HBA) from the public is static at 27%. Staff experiencing HBA from managers has decreased but is still 13% compared to 16% in 2015.

#### **4.4. Free-Text Comments**

The free-text comments provide important insights. Past experience suggests that colleagues with lower levels of engagement have greater propensity to provide additional verbatim comments and therefore it's not surprising that the majority of verbatim comments are negative. This said the number of critical comments in this year's survey are fewer and less intense than in previous years. A full evaluation is underway to inform staff survey action plans, engagement and communications.

The most common negative free-text comments include:

- Senior management, in particular are not listening or being out of touch
- Poor management particularly in relation to managing absence and poor performance
- Perceptions of bullying and harassment
- Too much work/insufficient staff
- Concerns around unfairness (+links with our low scores on equality and diversity factors)
- Perceived lack of career development (+)
- Frustration with lack of pay increases
- Frustrations regarding poor IT systems & condition of estate
- Generally negative comments regarding agency use, interims and the private sector within the NHS
- A lack of belief that comments or feedback from our staff survey are listened to or acted upon

The positives include a general feeling that after a difficult CQC process the hospital is starting to make some genuine improvements. People also commented on the positive impact of our new CEO and the friendliness of the trust

## **5. A fresh approach going forward**

### **4.1. 'Pulse checking'**

In February 2017, a refreshed local F&F survey was introduced, with a new survey provider Meridian. An extended survey with 11 'engagement question' was designed. This wider whole-organisation 'pulse-check' will help provide an on-going sense of the 'mood' of the organisation and how our staff are feeling. Our first extended survey achieved a response rate of 20%. A rolling cycle of extended local surveys will build a culture of asking for and acting upon timely feedback.

Scores show staff are proud to work for the Trust and their local place of work, but feel less informed about what is going on in the wider Trust. Staff would recommend the Trust as a place for treatment more strongly than a place to work. Some scores vary from the national staff survey e.g. 20% of respondents to the local survey say they have experienced bullying and harassment from managers or colleagues in the last 12 months. This is an area where targeted action is clearly required.

The key result is that for this quarter, our overall engagement score is 3.62. The intention is not to measure this score against the overall engagement score from the staff survey, as the two surveys are different in structure and not directly comparable, rather to compare this score to on-going pulse check scores. It should be noted that local data can be broken down by division in order to allow for comparison and measurement of progress. This is shown in Appendix 2.

### **4.2. Communications and action planning**

To build and sustain belief and confidence in the staff survey process, proactive and high impact responses are required. The 2015 national staff survey action plans formed part of our CQC improvement plan. We are building upon this work, with far reaching communications and engagement that commenced as soon as the embargo on the 2016 survey results was lifted on 7 March 2017. Measures undertaken and in progress include:

- CEO shared the results on all sites as part of the new Team Brief approach, supported by executives
- HR Business Partners have completed an extensive analysis of results for their divisions/departments; data and findings have been cut' to create 35 bespoke ward/departmental presentations
- Presentation of results locally within division/departments/wards as part of widespread engagement
- Each division forming small 'task' groups of colleagues, to communicate and cascade the results and generate an active process of local action planning
- Staff survey action plans presented and scrutinised at Divisional Performance Meetings
- Local leaders identified to take ownership for results and driving actions
- Focus is upon what has been achieved, what needs to improve and ensuring ongoing communications
- Presentation at JCC, TEC and though other governance groups
- Workforce and Development strategy updated, informed by staff survey results; work in progress to agree a structured, deliverable programme of work that will deliver multifaceted improvements



## **6. Risks**

- 6.1 Acting upon staff feedback is fundamental to positive culture and delivering on the commitments and goals in our workforce and development strategy. An effective approach requires far-reaching engagement and effective leadership at the very time services and staffing are very stretched.
- 6.2 There is a continued risk that operational and financial pressures will trump the time and investments required to comprehensively address staff feedback and ensure sustainability of improvements as BAU.

## **7. Recommendations**

The Board is asked to:

- 7.1 Receive the results of the 2016 national staff survey for information.
- 7.2 For assurance, note the approach being taken and progress made to communicate, engage and act upon the survey outcomes.
- 7.3 For assurance, to note that further reports will be provided on progress against implementation of corporate and divisional staff survey action plans.

**Paul da Gama**

Director of Workforce and Organisational Development  
12 April, 2017

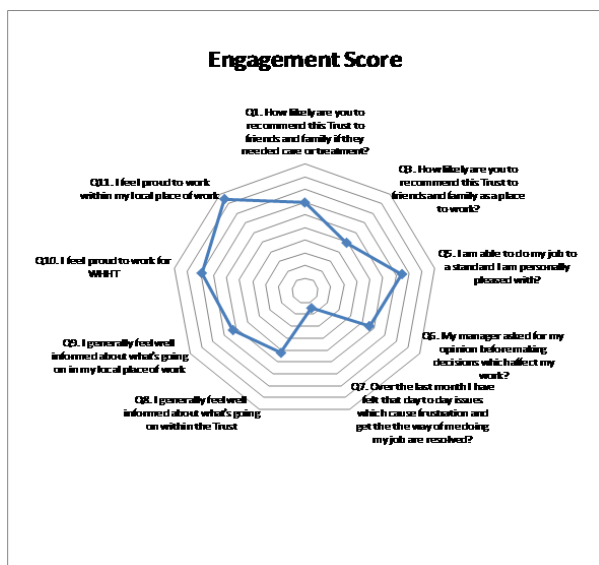
**Appendix 1: Summary of all key findings for WHHT National Staff Survey 2016  
(Source Quality Health, February 2017).**

	Change since 2015 survey	Ranking, compared with all acute trusts in 2016
<b>Appraisals &amp; support for development</b>		
KF11. % appraised in last 12 mths	✓ Increase (better than 15)	• Average
KF12. Quality of appraisals	✓ Increase (better than 15)	✓ Above (better than) average
KF13. Quality of non-mandatory training, learning or development	• No change	✓ Above (better than) average
<b>Equality &amp; diversity</b>		
* KF20. % experiencing discrimination at work in last 12 mths	• No change	! Highest (worst) 20%
KF21. % believing the organisation provides equal opportunities for career progression / promotion	• No change	! Below (worse than) average
<b>Errors &amp; incidents</b>		
* KF28. % witnessing potentially harmful errors, near misses or incidents in last mth	• No change	! Above (worse than) average
KF29. % reporting errors, near misses or incidents witnessed in last mth	• No change	✓ Highest (best) 20%
KF30. Fairness and effectiveness of procedures for reporting errors, near misses and incidents	✓ Increase (better than 15)	✓ Above (better than) average
KF31. Staff confidence and security in reporting unsafe clinical practice	✓ Increase (better than 15)	! Below (worse than) average
<b>Health and wellbeing</b>		
* KF17. % feeling unwell due to work related stress in last 12 mths	• No change	! Above (worse than) average
* KF18. % attending work in last 3 mths despite feeling unwell because they felt pressure	• No change	! Above (worse than) average
KF19. Org and mgmt interest in and action on health and wellbeing	✓ Increase (better than 15)	✓ Highest (best) 20%
<b>Working patterns</b>		
KF15. % satisfied with the opportunities for flexible working patterns	✓ Increase (better than 15)	• Average
* KF16. % working extra hours	• No change	• Average

Continued overleaf.

	Change since 2015 survey	Ranking, compared with all acute trusts in 2016
<b>Job satisfaction</b>		
KF1. Staff recommendation of the organisation as a place to work or receive treatment	✓ Increase (better than 15)	! Below (worse than) average
KF4. Staff motivation at work	• No change	• Average
KF7. % able to contribute towards improvements at work	• No change	✓ Above (better than) average
KF8. Staff satisfaction with level of responsibility and involvement	• No change	• Average
KF9. Effective team working	✓ Increase (better than 15)	✓ Highest (best) 20%
KF14. Staff satisfaction with resourcing and support	✓ Increase (better than 15)	✓ Above (better than) average
<b>Managers</b>		
KF5. Recognition and value of staff by managers and the organisation	✓ Increase (better than 15)	✓ Above (better than) average
KF6. % reporting good communication between senior management and staff	✓ Increase (better than 15)	✓ Highest (best) 20%
KF10. Support from immediate managers	✓ Increase (better than 15)	✓ Highest (best) 20%
<b>Patient care &amp; experience</b>		
KF2. Staff satisfaction with the quality of work and care they are able to deliver	• No change	✓ Above (better than) average
KF3. % agreeing that their role makes a difference to patients / service users	• No change	• Average
KF32. Effective use of patient / service user feedback	• No change	✓ Above (better than) average
<b>Violence, harassment &amp; bullying</b>		
* KF22. % experiencing physical violence from patients, relatives or the public in last 12 mths	• No change	! Highest (worst) 20%
* KF23. % experiencing physical violence from staff in last 12 mths	• No change	! Highest (worst) 20%
KF24. % reporting most recent experience of violence	• No change	• Average
* KF25. % experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 mths	• No change	• Average
* KF26. % experiencing harassment, bullying or abuse from staff in last 12 mths	✓ Decrease (better than 15)	• Average
KF27. % reporting most recent experience of harassment, bullying or abuse	• No change	✓ Highest (best) 20%

**Appendix 2: Summary of engagement scores for local extended F&F staff survey  
Feb/March 2017  
(Source Meridian, March 2017).**



FFT March 2017 - Engagement Scores								
Question	Trust Engagement Score	Clinical Support	Corporate	Environment	Medicine	Surgery	Unscheduled Care	WACS
Q1. How likely are you to recommend this Trust to friends and family if they needed care or treatment?	3.70	3.54	3.56	3.51	3.73	3.76	3.74	3.86
Q3. How likely are you to recommend this Trust to friends and family as a place to work?	3.49	3.44	3.29	3.53	3.61	3.31	3.67	3.67
Q5. I am able to do my job to a standard I am personally pleased with?	3.75	3.74	3.75	3.63	3.80	3.81	3.63	3.78
Q6. My manager asked for my opinion before making decisions which affect my work?	3.56	3.53	3.86	3.60	3.65	3.50	3.72	3.29
Q7. Over the last month I have felt that day to day issues which cause frustration and get the way of me doing my job are resolved?	3.15	3.02	3.15	3.29	3.20	3.10	3.08	3.23
Q8. I generally feel well informed about what's going on within the Trust	3.52	3.44	3.78	3.48	3.52	3.49	3.41	3.46
Q9. I generally feel well informed about what's going on in my local place of work	3.63	3.51	3.85	3.49	3.65	3.52	3.57	3.63
Q10. I feel proud to work for WHHT	3.79	3.70	3.71	3.94	3.87	3.69	3.81	3.89
Q11. I feel proud to work within my local place of work	3.94	3.80	3.85	3.92	3.92	3.92	3.97	4.11
<b>Total Engagement Score</b>	<b>3.62</b>	<b>3.52</b>	<b>3.65</b>	<b>3.60</b>	<b>3.66</b>	<b>3.57</b>	<b>3.62</b>	<b>3.66</b>
Scores derived from FFT questionnaire March 2017								
Total responses 730 (20%)								