

Northumberland, Tyne and Wear NHS Foundation Trust

Board of Directors Meeting

Meeting Date: 22nd March 2017

Title and Author of Paper: Staff Survey 2016

Executive Lead: Lisa Crichton-Jones Executive Director Workforce Organisational Development

Paper for Debate, Decision or Information: Information

Key Points to Note:

- Staff survey results for 2016 are now fully received from Quality Health.
- Overall our results broadly show that we perform at, or just above the average, for our sector comparisons. This is pleasing in light of the current contexts and climates within which our staff are working.
- This report comprises two parts; the summary power point slides which were prepared for CDT earlier in the month, followed by the more detailed written report.
- We have seen improvements across important areas relating to the provision of care, the FFT results, staff engagement scores, health and well being and understanding as to how to report concerns.
- This reports reflects on some of the work following our 2015 results (harassment and bullying, violence against staff and appraisals) whilst also starting to scope some of the areas we may wish to further explore as a result of the 2016 results (for example presenteeism, opportunities for career development, communication from senior managers and involvement in decisions which affect local areas.)
- In addition, we want to give particular focus to the breakdown of results for each of the protected characteristic groups and work with staff networks to determine key actions.
- The staff survey results relate to many areas of staff experience and we need to give further consideration to areas to take forward, typically through Speak Easy conversations in the first instance. Our recommendation is to be clear on priority areas for further focus as opposed to attempts to develop corporate actions on every single area. In addition Groups will consider their local results and develop local actions in response to any hot spot areas.
- To assist with these considerations, Quality Health will attend the CDT meeting in April to present our results and engage in conversation with CDT members.

Risks Highlighted to Board :

Workforce Race Equality Standard metrics will need thorough exploration with BAME staff and the development of an action plan

Does this affect any Board Assurance Framework/Corporate Risks?
Please state No
If Yes please outline

Equal Opportunities, Legal and Other Implications: See WRES results

Outcome Required: Board members are asked to note the report and the further considerations and actions to be implemented.

Link to Policies and Strategies:
Trust strategy and strategic ambition 6 – ‘a great place to work’
Workforce and OD Strategies

NTW Staff Survey 2016

- Surveyed all staff - 45% response rate
- Best / worst scores
- Update on 2015 actions
- Your organisation
- Patient experience
- Staff engagement scores
- Your job / Your managers
- Your HWB & safety at work
- Your personal development / leadership & career development
- WRES – demographics
- Results elsewhere
- Recommendations and next steps



Best / worst scores

- Physical violence from managers in last 12 months – 1%
- Staff receiving mandatory training – 99%
- Know how to report concerns about unsafe clinical practice – 98%
- Staff feeling pressure from self to come to work when unwell – 91%
- Enough staff to meet patient need – 37%
- Senior managers act on staff feedback - 38%



2015 themes /actions (Section 2)

- Harassment and bullying
Static results but reporting has increased significantly
- Levels of violence
Remained static – Positive and Safe work
- Quality of appraisals
Slight improvements but small fall in TNA



Your organisation

All results are better than QH average

- Most are - higher than the sector national scores
- FFT scores significantly improved (2015 v Q1 Q2)
- 82% - patient / service user care is the Trust's top priority (from 76% and sector of 76%)
- 64% recommend for work (from 58%)
- 71% recommend for treatment (from 65%)



Patient experience

Most scores same as the sector

- 88% - say patients involved in decisions about their care / treatment
- 93% - say patients are treated with respect and dignity
- 37% - say there are enough staff available to meet patient needs

Staff engagement

2016 – 3.86

2015 – 3.80

2014 – 3.75

Slightly higher than the sector 2016 score – 3.80

Your Job

Scores mainly just above national average, few which are significantly better than the sector.

- 53% - say able to meet conflicting demands (from 49%, sector 33%)
- 53% - say work valued (sector 46%)
- 20% - disagree involved in change
- 35% - disagree enough staff
- 30% - not happy with levels of pay



Your managers

Scores all just above national average; small positive movements

- 80% - say managers encourage team work (from 77% last year)
- 69% - say managers give clear feedback (from 67% last year)
- 87% - say know who senior managers are
- 47% - say communication between senior managers and staff is effective
- 40% - say senior managers involve in important decisions
- 38% - say senior managers act on feedback



Your HWB and safety at work

Compared to national results; 2 significant improvement, 1 decline.

- 94% - say positive action on HWB (sector 91%)
- 70% - say reporting H+B (from 60%, sector 65%)
- 63% - say given feedback from errors / incidents (from 57%, sector 61%)
- 34% - unwell Work Related Stress (sector 38%)

- 91% - say put themselves under pressure to come to work when not well (85% last year)



Your personal development

Most scores are around or just above the national average. Small improvements since last year.

- 78% - say received training (sector 77%)
- 84% - helped to do job (78% last year)
- 92% - had appraisals. (sector 91%)
- 77% - say helped to do job (75% last year)
- 69% - TNA / development identified (72%)



Leadership & career development.

Most scores higher than the sector but....

- 59% - say opportunities to develop their career within NTW
- 46% - say L+D activities create opportunities for personal growth
- 67% - say trust has clear vision for the future
- 48% - say they feel part of that vision

68 / 120 75%

2.3: Workforce Race Equality Standards

Derived from unweighted data, based on the respondent's selected ethnicity.

| | Year Organisation 2016 (NWH) | Year Organisation 2016 (MWH) |
|--|------------------------------|------------------------------|
| KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months (-) | 31% | 51% |
| KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months (-) | 17% | 24% |
| KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion (+) | 85% | 85% |
| 17b. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager or c) other colleagues (-) | 5% | 12% |

Results elsewhere....

National results

Early days but themes;

- Harassment and Bullying
- WRES

Northern MH trusts



Recommendations and next steps

- Quality Health presentation?
- Communications – The Bulletin
- Continue with three themes
 - Harassment & Bullying
 - Violence
 - Appraisals



Recommendations and next steps

- New themes?
- Speak Easy style events to determine?
 - E+D work
 - Group and Corporate Department work

 - 2017 Launch and response rate.....

Trust Board Meeting

22nd March 2017

Staff Survey 2016

1. Purpose

To outline the Trust's results from the NHS Staff Survey 2016. The paper makes reference to the CDT paper that was received in January 2017, this was based on the Trust's results compared to similar organisations that use the same survey provider. The comparisons in this paper are based on the average of all similar Trusts across the Country.

2. Update on 2015 Actions

At Trust Board in March 2016 the following Trust-wide actions were determined.

- Coordinated campaign of action, relaunching a number of initiatives under one banner. Work around induction, training and the importance of communications. Review of Policy
- Targeted work on training needs identification and analysis
- Implementation of work from Positive and Safe Group. Local review

Work during the year has led to the following results in the 2016 Staff Survey. Staff who said they experienced harassment, bullying and abuse (HBA) from the public has slightly increased (32% this year, compared to 30% last year). The scores for staff experiencing HBA from managers or other colleagues are both static; from managers 8% and from other colleagues 13%. However staff reporting incidents of HBA has increased significantly (perhaps an indicator of the success of the campaign) and is also significantly higher than the sector (70%, compared to 65%).

To this end we will identify the location of spikes in HBA from public, by drilling down into our data where possible. Ensure action is targeted where appropriate in an effort to reduce incidents. We will continue to improve awareness of the need to report incidents of harassment, bullying and abuse and ensure that staff are aware of the process around this.

Experience of physical violence scores has remained static between 2015 and 2016, this is reflected in the continued emphasis on the work of Positive and Safe and going forward in the Operational restructure.

The coverage of appraisals is 92%, this is just above average for the sector, and has improved slightly since last year, when it was 91%. 77% of staff said that their appraisal helped them do their job more effectively which is a slight improvement from last year, up from 75%. However staff saying their appraisal identified training, learning or development needs has fallen slightly since last year. We will as a result maintain the coverage of appraisals. Identify whether there are particular hotspots

(departments, teams or groups of staff) where appraisals aren't being conducted and continue our work on improving the quality of our appraisals to include an assessment of the way in which appraisals and reviews are conducted in order to increase their usefulness in identifying training, learning and development needs.

3. Response Rate

The official sample size for The Trust in the National Survey 5,913. 2,671 completed questionnaires were returned from this sample. 26 members of staff returned their questionnaires without filling them in. 40 staff were excluded from the official sample as ineligible. The response rate to the National Staff Survey was therefore 45% (2,671 usable responses from a final sample of 5,873). Similar organisations surveyed by Quality Health had a mean overall response rate of 49%. For the 2015 survey we had a response rate of 47.3% and in 2014 55.7%. In the January CDT paper the importance of improving the response rate was discussed. How we can improve this formed part of the discussion at February's Organisational Development meeting and actions will be developed to ensure a better campaign launch for the 2017 Survey.

4. Survey Results

4.1 Your Job

In the January CDT paper it was suggested that the following areas might be explored.

- 20% of respondents disagree that they are involved in deciding on changes introduced that affect their work area / team / department.
- 22% of respondents disagree that they are able to meet all the conflicting demands on their time at work.
- 35% of respondents disagree that there are enough staff at this organisation for them to do their job properly
- 30% of respondents are not happy with their level of pay.

The National Survey finds that the Trust's scores are mainly just above average in this section, and there are a few scores that are significantly better than the sector. There have been mostly small positive movements since last year.

- Staff saying they are able to meet all the conflicting demands on their time at work has seen a 4% improvement (53%, up from 49% last year) and is significantly better than the sector score of 33%.
- Staff saying they are satisfied with the extent to which the organisation values their work has seen a significant improvement and is also significantly higher than the sector score (52%, compared to 46%).

Quality Health suggests that we celebrate the improvements and successes, whilst looking at what actions can be taken to maintain and build on these scores.

4.2 Your Managers

In January we reported as 2015 and 2014 there are no scores that are below average in this section. However there are areas whilst showing year on year improvement, still require consideration. The following areas are suggested for exploration

- 21% of respondents disagree that communication between senior management and staff is effective
- 22% of respondents disagree that senior managers try to involve staff in important decisions
- 22% of respondents disagree that managers act on staff feedback

For the National Survey the Trust scores are all just above average in this section and have shown small movements since last year, all of which have been positive. For example,

- On the questions about immediate managers, there has been a slight improvement in immediate managers encouraging staff to work as a team (80% of staff say this, compared to 77% last year), and
- Immediate managers give clear feedback has increased slightly (69% of staff say this, an increase from 67% last year). 87% of staff say that they know who senior managers are. But –
- Like the rest of the sector - scores around senior manager communication are low. Only 47% of staff say that communication between senior management and staff is effective.
- Only 40% say that senior managers involve them in important decisions.
- Only 38% say that senior managers act on their feedback. However these are all slightly higher than the sector scores.

It is recommended that we explore the following areas.

- How to ensure that managerial and supervisory roles include the duty to give feedback to staff including both positive and negative comments as appropriate
- Review effectiveness of how senior managers involve staff in important decision making processes.
- Publicise methods and ensure that staff are aware that the organisation seeks feedback from staff on a regular and ongoing basis; and that action is taken as a result of this. This could be in a 'you said, we did' model. Ensure that all staff know how to give feedback, and publicise the results.

4.3 Your Health, Wellbeing and Safety at Work

From the January CDT paper the following areas are suggested for exploration

- 34% of respondents stated that during the last 12 months they have felt unwell as a result of work related stress.
- Is there an issue of presenteeism?
 - 53% of respondents in the last three months have come to work despite not feeling well enough to perform their duties
 - 91% have put pressure on themselves to come to work
- 32% of respondents have experienced harassment, bullying or abuse from patients/service users, their relatives or other members of the public
- Whilst there has been an increase in reporting of such incidents in the last year still 29% of respondents are not reporting harassment, bullying or abuse.

The National Survey finds that overall most scores are similar to last year, there are two significant improvements and one significant decline. The decline relates to staff feeling pressure from themselves to come to work when feeling unwell. When compared to the sector there are a small number of questions where the Trust is significantly higher than the sector scores but overall scores are average or just above average. For example,

- 94% of staff say that the Trust takes positive action on health and well-being - which is just above the sector score of 91%.
- The percentage of staff saying that they have felt unwell due to work related stress is static at 34% but better than the sector score of 38%

With regard to harassment bullying and abuse

- Staff who said they experienced harassment, bullying and abuse (HBA) from the public has slightly increased (32% this year, compared to 30% last year).
- The scores for staff experiencing HBA from managers or other colleagues are both static; from managers 8% and from other colleagues 13%.
- Staff reporting incidents of HBA has increased significantly and is also significantly higher than the sector (70%, compared to 65%).

It is recommended that

- We identify the location of the spikes in HBA from public by drilling down into our data. This work has commenced using SOLAR the online reporting tool to establish where it is occurring and if there are issues within protected characteristic groupings of staff. These issues will be pursued and actioned upon within Groups with assurance provided through the Organisational Development and Equality and Diversity committees, with appropriate input from the Staff Network Groups.
- We should continue to improve awareness of the need to report incidents of harassment, bullying and abuse and ensure that staff are aware of the process around this.

4.4 Your Personal Development

In the January CDT paper it was identified that key issues remain as 2015 around the quality of appraisal

- 23% of respondents found their appraisal did not help improve how they do their job
- 22% of respondents left their appraisal feeling that their work was not valued by the organisation.

The National Survey finds that compared to the rest of the sector, most scores are around or just above average, and have shown mainly small movements since last year.

- The percentage of staff saying that they have received training in the last 12 months is 78%, which is slightly higher than the sector score of 77%.
- The number of staff agreeing that the training they received helped them do their job more effectively has significantly improved by 6% (84%, up from 78%).
- The coverage of appraisals is 92%, this is just above average for the sector, and has improved slightly since last year, when it was 91%.
- 77% of staff said that their appraisal helped them do their job more effectively which is a slight improvement from last year, up from 75%.
- Staff saying their appraisal identified training, learning or development needs has fallen slightly since last year.

It is recommended that we maintain the coverage of appraisals and assess the way in which appraisals and reviews are conducted in order to increase their usefulness in identifying training, learning and development needs.

4.5 Your Organisation

January CDT paper found that all results are better than the Quality Health Average.

The National Survey found that all scores have improved since last year and most are higher than the sector scores. 82% of staff say that patient/service user care is the Trust's top priority, a significant improvement on last year (76%) and significantly higher than the sector score (76%).

- Trust scores on the two NHS Staff Friends and Family Test questions have both significantly improved and are significantly higher than the sector score. 64% of staff say that they would recommend the Trust as a place to work (compared to 58% last year); and 71% of staff would be happy with the standard of care if a friend or relative were treated at the Trust (compared to 65% last year).

It is recommended that we ensure that patient experience data is regularly shared with staff to highlight areas which are positive (and should be celebrated) as well as areas for improvement. Ensure that staff at all levels are involved in improvement

work where appropriate and have responsibility for maintaining the momentum of positive change. Share positive results. Look at what actions can be taken to maintain and build on these scores.

4.6 Values

Specifically reported in the National Survey, 95% of staff say they are aware of the organisation's values, this is slightly higher than the sector score of 93%. 73% of staff say managers demonstrate the values at work, which is significantly higher than the sector score of 66%; and 76% say that colleagues demonstrate the values at work, compared to the sector score of 72%

4.7 Occupational Health

The Trust was the only organisation in the sector that asked these questions and there are no comparisons available to last year.

- Only 66% of staff say they have a comfortable workspace, although 82% say their workspace is clean.
- 78% of staff say they feel safe and secure in the working environment, however just 51% say they have a place to go for rest and recreation away from work.

It is recommended that we:

- Look at the reasons for some staff being dissatisfied with their work space and if this can be alleviated, particularly in light of the numbers of staff saying that they found their work space uncomfortable.
- Explore why some staff do not feel safe in their working environment and drill down to look for specific areas/sites, where this is the case. Ensure that staff are aware of existing security arrangements and, where necessary/possible, introduce further measures to increase the safety and security of staff in their places of work.
- Look into providing separate areas for staff to take a break from their work space where these are not available.

4.8 Health and Safety

The Trust was the only organisation in the sector that asked these questions and there are no comparisons available to last year.

- 81% say that senior managers promote a culture of patient/service user safety
- 85% say that staff uphold good safety standards within the Trust.
- 89% of staff say that there are clear and effective systems of reporting health and safety concerns.
- Just 66% of staff say that patient/service user safety is never sacrificed to get more work done.
- Only 66% say that patient/service user feedback is taken into consideration when evaluating ways to improve safety.

It is recommended that we investigate why some staff feel that patient safety is being sacrificed to get more work done.

- Use breakdowns of the staff survey results by different parts of the Trust to identify if this feeling is more prevalent in some areas - look at how this relates to the record of safety incidents, current staffing levels, clinical governance and leadership within that area.
- Ensure that feedback from patients is consistently used for identifying ways to improve patient/service user safety and make the organisation's patient safety focus clear to all staff.
- Publicise findings from national and local surveys to raise awareness and encourage staff to act on findings.

4.9 Leadership and Career Development

Most scores are slightly higher than the sector in this section, however some still remain low. There are no comparisons available to last year.

- Only 59% feel there are opportunities to develop their career within the Trust,
- 58% say the person they report to creates opportunities for their professional growth.
- Just 46% feel that learning or development activities completed in the last 12 months have helped to improve their chances of career progression.
- 67% of staff feel that the Trust has a clear vision for the future
- Only 48% feel like they are part of that vision.

It is recommended that we

- Ensure that the pathways to jobs with greater responsibility are clear to all staff and that the training and support mechanisms to support job and personal development are signposted plainly to all staff.
- Investigate why some staff do not feel that the organisation has a clear future vision and why a majority of staff do not feel part of this vision for the future of the organisation.

4.10 Patient Experience

Most scores are the same as the sector in this section, there are no comparisons available to last year.

- 88% of staff say that patients/service users are involved in decisions about their care and treatment.
- 93% say that patients/service users are treated with respect and dignity.
- Just 37% say that there are enough staff available to meet patient/service user needs.

It is recommended that we

- Triangulate the Trust's staff survey data with that from other surveys including CQC patient surveys and the Friends and Family test as they can be used to give a clearer picture of staff concerns. Where data is less positive, investigate further using opportunities to talk to staff and patients where possible, in order to understand fully the underlying reasons.

4.11 Staff Engagement

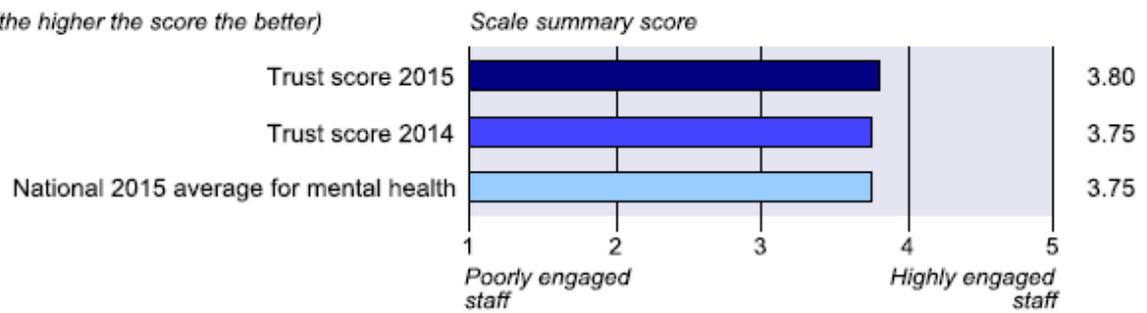
Again a picture for 2016 that is slightly higher than the sector

| Staff Engagement | You 2016 | Sector 2016 |
|---|-------------|-------------|
| OVERALL STAFF ENGAGEMENT (+) (KF1, KF4, KF7) | 3.86 | 3.80 |
| Base Size (Respondents) | 2,757 | |
| Recommend - KF1: Staff recommendation of the organization as a place to work or receive treatment (+) (Q21a, 21c, 21d) | 3.86 | 3.70 |
| Engage - KF4: Staff motivation at work (+) (Q2a, 2b, 2c) | 3.91 | 3.90 |
| Improve - KF7: able to contribute towards improvements at work (+) (Q4a, 4b, 4d) | 3.81 | 3.78 |

Compared to 2015

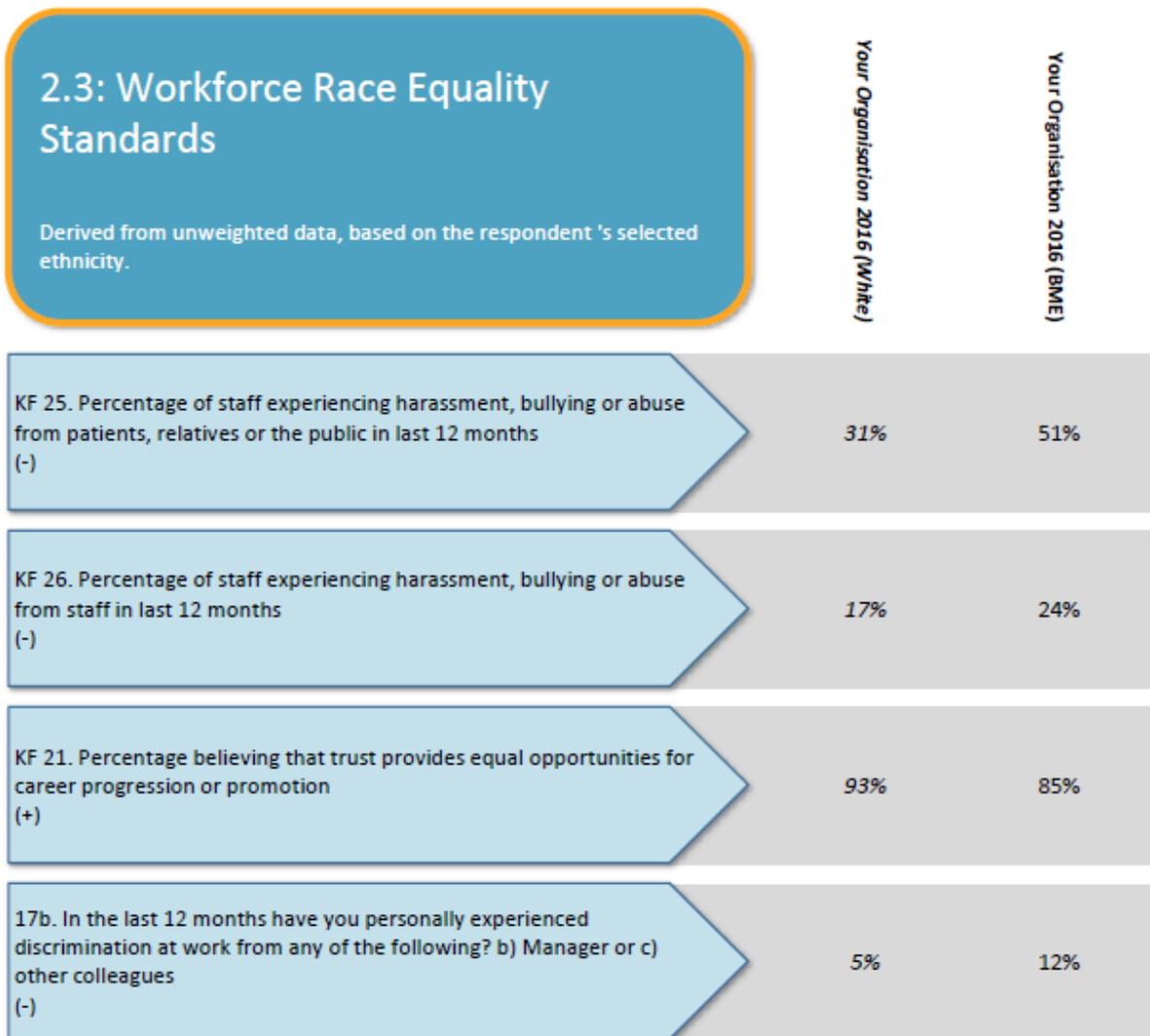
OVERALL STAFF ENGAGEMENT

(the higher the score the better)



A picture of incremental improvement.

4.12 Workforce Race Equality Standards



All of these results have got worse during a year when the BAME Staff Network was set up. This group has struggled with membership and it will be essential that it is revitalised with support from Staff-Side to ensure that work is done to understand the context behind these results and to establish if there are 'hot spots in their occurrence and actions to address these issues.

It is recommended

- As a matter of urgency the Equality and Diversity Lead drill down these results to determine the pattern of occurrence across the Trust
- A meeting takes place with Staff Side, the Equality and Diversity Lead, Group and Corporate HR representatives and representatives from the BAME Staff Network, to
 - examine all of the survey results for BAME Staff, to determine actions to address any issues that show a significantly worse score compared to Trust average
 - actions to be overseen by the BAME Staff Network reporting in on progress bimonthly to the Equality and Diversity Committee.

The above metrics should also be examined for all protected characteristic groups and if necessary the same recommended actions as above should apply.

5. Recommendations & Next Steps

Work identified around the findings of the Workforce Race Equality Standard are essential. From the January CDT paper the following areas for consideration were determined

- Presenteeism
- Work-related stress
- Communication between Senior Managers and Staff
- Continuation of work on addressing bullying and harassment, physical violence and quality of appraisals

The National Survey findings suggest the following recommendations

| |
|---|
| Publicise successful findings |
| How to ensure that managerial and supervisory roles include the duty to give feedback to staff including both positive and negative comments as appropriate |
| Review effectiveness of how senior managers involve staff in important decision making processes. |
| Publicise methods and ensure that staff are aware that the organisation seeks feedback from staff on a regular and ongoing basis; and that action is taken as a result of this. This could be in a 'you said, we did' model. Ensure that all staff know how to give feedback, and publicise the results. |
| We identify the location of the spikes in HBA from public by drilling down into our data. |
| We should continue to improve awareness of the need to report incidents of harassment, bullying and abuse and ensure that staff are aware of the process around this |
| It is recommended that we maintain the coverage of appraisals and assess the way in which appraisals and reviews are conducted in order to increase their usefulness in identifying training, learning and development needs. |
| We ensure that patient experience data is regularly shared with staff to highlight areas which are positive (and should be celebrated) as well as areas for improvement. Ensure that staff at all levels are involved in improvement work where appropriate and have responsibility for maintaining the momentum of positive change. Share positive results. Look at what actions can be taken to maintain and build on these scores. |
| Look at the reasons for some staff being dissatisfied with their work space and if this can be alleviated, particularly in light of the numbers of staff saying that they found their work space uncomfortable. |
| Explore why some staff do not feel safe in their working environment and drill down to look for specific areas/sites, where this is the case. Ensure that staff are aware of existing security arrangements and, where |

| |
|---|
| necessary/possible, introduce further measures to increase the safety and security of staff in their places of work. |
| Look into providing separate areas for staff to take a break from their work space where these are not available |
| We investigate why some staff feel that patient safety is being sacrificed to get more work done. |
| Ensure that the pathways to jobs with greater responsibility are clear to all staff and that the training and support mechanisms to support job and personal development are signposted plainly to all staff. |
| Investigate why some staff do not feel that the organisation has a clear future vision and why a majority of staff do not feel part of this vision for the future of the organisation |
| Triangulate the Trust's staff survey data with that from other surveys including CQC patient surveys and the Friends and Family test as they can be used to give a clearer picture of staff concerns. Where data is less positive, investigate further using opportunities to talk to staff and patients where possible, in order to understand fully the underlying reasons. |

Next steps:

- communicate results and engage for actions with a Speak Easy style event
- agree final areas of proposed work,
- operational groups to agree areas of work
- Quality Health to present the findings to April CDT or a bespoke session.

Christopher Rowlands
Equality and Diversity Lead
March 2017