

**NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST**

**BOARD OF DIRECTORS MEETING**

**Meeting Date:** 25 February 2015

**Title and Author of Paper:** Staff Survey 2014 Christopher Rowlands

**Paper for Debate, Decision or Information:** Information

**Key Points to Note:**

From an initial mailing of 5668 questionnaires, 2993 were completed giving us a response rate of 55.7% - this compares favourably with the average of all 'Picker' Mental Health Trusts of 50.6%.

Compared to 2013 the Trust is significantly better on 9 questions and worse on 3 questions. The scores show no significant difference on 74 questions. In comparison with other Trusts, we are significantly better than average on 40 questions, significantly worse than average on 4 questions, with average scores on 48 questions.

**Budget implications:**

**Equal Opportunities, Legal and Other Implications:**

**Action Proposed and Person Responsible for Action:** There is a need to listen more and gain a feel for the actions that are required and a wide ownership and responsibility for seeing those actions through. It is suggested that we don't simply focus on the areas where we have performed below average. The ranking of the problem scores suggests that we have long term issues that are not going away and in many cases appear 'stuck' at a given level. Finding ways for us all to address those will have the biggest impact and will go a long way to eradicating the view that the Staff Survey never achieves anything. Information from the Staff Survey should help to inform the wider work on engagement. Executive Director Workforce and Organisational Development

**Outcome required:** Note/Decision

## BOARD OF DIRECTORS' MEETING

25 February 2015

Staff Survey 2014

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### 1. Purpose

To present an overview of the results from the Staff Survey 2014, carried out by Picker Institute Europe on behalf of Northumberland Tyne and Wear NHS Foundation Trust. This survey is an annual study, first run in 2003, and is required by NHS England for all NHS trusts in England. The Picker Institute was commissioned by 14 mental health trusts and the report will present this Trust's results in comparison to the average for these mental health trusts. The data in this report was generated from survey responses from all staff who responded rather than that from the 'basic' 850 sample. The paper will highlight areas that are/continue to be key concerns and will suggest a way that the Trust might begin to address these concerns, whilst engaging as many people as possible, so that actions may be owned by all employees, rather than generated by managers. The results of the Staff Survey, should be the start of a dialogue and a means to an end – which should be a workforce that feels supported by the Trust to enable them to provide the best services possible.

### 2 Background

The staff survey has questions structured around the following issues

- Your Personal Development
- Your Job
- Your Managers
- Your Organisation
- Your Health, Well-Being and Safety at Work
- Background Information

### 3. Response Rate

From an initial mailing of 5668 questionnaires, 2993 were completed giving us a response rate of 55.7% - this compares favourably with the average of all 'Picker' Mental Health Trusts of 50.6%.

### 4. Survey Results

The Picker Institute use the concept of 'problem scores' as a summary measure. The problem score shows the percentage of staff who gave a negative response to applicable questions. Problem scores are calculated by

showing where staff are not satisfied – for certain questions that has meant that response categories have been combined. As the name suggests problem scores indicate where there may be a problem within the Trust. Lower scores for these questions reflect better performance.

#### **4.1 Your Personal Development**

Of the 16 measures in this section the Trust has scores significantly better than average (for all 'Picker' mental health trusts) in 6 areas

- No Health and Safety Training
- No Equality and Diversity Training
- No training in how to handle confidential information
- No training in how to deliver a good patient/service user experience
- No other job-relevant training, learning or development
- No appraisal/KSF review in last twelve months

Whilst these scores are significantly better than average, we should not be complacent in these areas. 18 percent of staff said that they had not received training in how to deliver a good service user experience. 42% of respondents said that their appraisal was not helpful in improving how to do their job. 39% said that their appraisal left them feeling work not valued.

#### **4.2 Your Job**

Of the 28 measures, there are 12 where the Trust has scores significantly better than average

- Team members do not have a set of shared objectives
- Not able to do my job to a standard am pleased with
- Cannot meet conflicting demands on my time
- Do not have adequate materials to do job
- Not enough staff to do the job properly
- Dissatisfied with support from manager
- Dissatisfied with support from colleagues
- Dissatisfied with the amount of responsibility given
- Dissatisfied with opportunities to use skills
- Dissatisfied with extent organisation values my work
- Dissatisfied with quality of care I give
- Unable to provide the care I aspire to

Again whilst these are above average good responses – they still indicate areas for improvement – 42% of respondents said there was not enough staff to do the job properly, 41% say that they cannot meet their conflicting demands at work.

The Trust scores significantly worse than average on one measure in this section – never/rarely does time pass quickly when I am working.

### 4.3 Your Managers

Of the 10 measures in this section, 5 were significantly better than average

- Immediate manager does not encourage team working
- Immediate manager cannot be counted upon to help with tasks
- Immediate manager does not ask for my opinion
- Immediate manager not supportive in personal crisis
- Communication between senior management and staff is not effective

Whilst there are no scores below average, the results do point to the need for better engagement

- 19% state that immediate manager does not ask for my opinion
- 28% state that communication between senior management and staff is not effective
- 34% state that senior managers do not try to involve staff in important decisions
- 30% state that senior managers do not act on staff feedback

### 4.4 Your Organisation

Of the 7 measures, 2 were significantly better than average

- Organisation does not act on concerns raised by patients/service users
- If friend/relative needed treatment would not be happy with standard of care provided by organisation

Again there are pointers to the need for better engagement

- 19% state they would not recommend the organisation as a place to work
- 22% do not receive regular updates on patient/service user feedback in directorate/department
- 12% state that feedback from service users is not used to make informed decisions within their directorate

### 4.5 Your Health, Wellbeing and Safety at Work

Of the 30 measures – 15 of them are significantly better than average and 3 significantly worse than the average Picker responses for Mental Health Trusts.

The three that are significantly worse are –

- Organisation does not treat fairly staff involved in errors
- Organisation blames /punishes people involved in errors/near misses or incidents

- Physical violence from patients/service users, their relatives or other members of the public.

The first two of these findings point to the possibility that there may be a blame culture within the Trust.

Whilst other measures may be significantly better or average when compared to the other Mental Health Trusts in Picker's remit, some of the results are, despite this, of cause for concern.

- 91% of staff have put pressure on themselves to come to work despite not feeling well enough to do so
- 39% have felt unwell due to work related stress in the past year
- 64% have come to work in the three months prior to the survey, despite not feeling well enough
- 5% of respondents state they have experienced physical violence from their manager/team leader or other colleagues.
- 29% of respondents have experienced harassment, bullying or abuse from patients/service users , their relatives or members of the public

And importantly, despite being better than the Picker average of 40%

- 32% stated that their last experience of harassment/bullying/abuse was not reported.

#### 4.6 Background Information

Most of this section contains demographic information and is therefore problem scoring does not apply. However of note was that the Trust scored 13% where the Picker average was 15 for

- Disability: organisation not made adequate adjustment(s) to enable employee to carry out work

### 5. Ranked Problem Scores

It is tempting to simply focus on the areas where we have performed better or worse when compared to the Picker average, however looking at a Ranking of Problem Scores, shows where most respondents report room for improvement. This might be something that we wish to consider for maximising impact from any actions that develop from the survey.

#### 5.1 Top Eleven Problem Scores, ranked highest to lowest

1. Put myself under pressure to come to work despite not feeling well enough 91%
2. In the last 3 months have come to work despite not feeling well enough to perform 64%
3. Appraisal not helpful in improving how I do my job 42%
4. Not enough staff in the Trust to do my job properly 42%

- 5. Cannot meet conflicting demands on my time at work 41%
- 6. Dissatisfied with my level of pay 40%
- 7. Felt unwell do to work related stress in the last 12 months 39%
- 8. Appraisal review, left feeling work not valued 39%
- 9. Senior managers do not try to involve staff in important decisions 34%
- 10. Last experience of harassment/bullying/abuse not reported 32%
- 11. Senior managers do not act on staff feedback 30%

Points in green are where the Trust has performed significantly better than average.

The following table shows the scores where the Trust has performed significantly below the Picker average

Issue	Trust	Average
Physical violence from patients/service users, their relatives or other members of the public	25%	19%
Organisation blames/punishes people involved in errors/near misses or incidents	18%	16%
Organisation does not treat fairly staff involved in errors	12%	11%
Never/rarely does time pass quickly when I am working	7%	5%

## 6 Historical Comparisons

The Staff Survey is conducted on an annual basis, by looking at changes in results over time it is possible to focus on those areas where performance might be improving or slipping. Below (Source: Picker) shows the significant improvements between this year's and last year's surveys.

The Trust has improved significantly on the following questions:

Lower scores are better 

	2013	2014
1d No infection control training	3 %	2 %
1f No training in how to deliver a good patient / service user experience	23 %	18 %
8b Dissatisfied with support from immediate manager	12 %	10 %
8c Dissatisfied with freedom to choose own work method	12 %	10 %
8f Dissatisfied with opportunities to use skills	13 %	11 %
10a Immediate manager does not encourage team working	10 %	8 %
15a In last 3 months, have come to work despite not feeling well enough to perform duties	67 %	64 %
18b Organisation does not encourage reporting of errors	3 %	2 %
21b Harassment, bullying or abuse from manager/team leader or other colleagues	20 %	16 %

The Trust has worsened significantly on the following questions:

Lower scores are better 

	2013	2014
3e Appraisal/performance review: training, learning or development needs not identified	20 %	23 %
8h Dissatisfied with my level of pay	34 %	40 %
9b Do not feel my role makes a difference to patients/service users	2 %	3 %

Taking the Top 11 Problem Scores from the previous section shows the following trends.

<b>Issue</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>
Put myself under pressure to come to work despite not feeling well enough	87%	83%	90%	91%	90%	91%
In the last three months have come to work despite not feeling well enough to perform duties	61%	62%	52%	67%	67%	64%
Appraisal not helpful	34%	34%	40%	43%	42%	42%
Not enough staff at the organisation to do my job properly	41%	41%	43%	43%	42%	42%
Cannot meet conflicting demands on my time at work	39%	35%	40%	43%	43%	41%
Dissatisfied with my level of pay	32%	30%	31%	34%	34%	40%
Felt unwell due to work related stress in the last 12 months	30%	30%	31%	40%	40%	39%
Appraisal – left feeling work not valued	41%	38%	44%	44%	41%	39%
Senior managers do not try to involve staff in important decisions	45%	40%	43%	38%	35%	34%
Last experience of harassment/bullying/abuse not reported	-	-	-	29%	30%	29%
Senior managers do not act on staff feedback	29%	22%	25%	33%	30%	30%

Overall a fairly consistent picture of the highest ranking problem scores over the past six years, albeit some movement in their relative importance during that time – notably pay and work-related stress.

For this year's below average results, the historical trend is as follows:

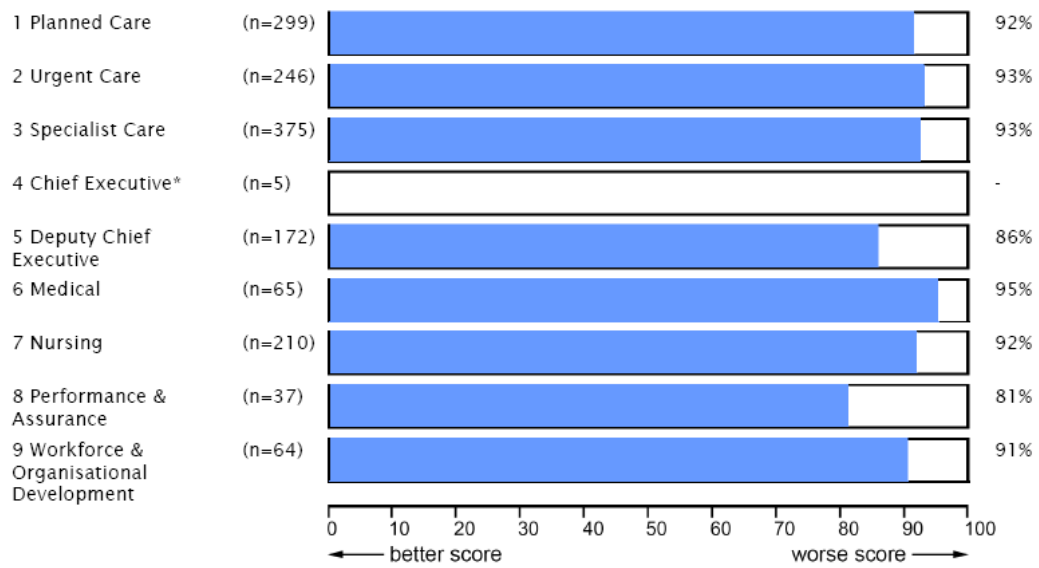
<b>Issue</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>
Physical violence from patients/service users, their relatives or other members of the public	-	-	-	25%	25%	25%
Organisation blames/punishes people involved in errors/near misses or incidents	14%	13%	14%	18%	19%	18%
Organisation does not treat fairly staff involved in errors	10%	6%	9%	11%	12%	12%
Never/rarely does time pass quickly when I am working	6%	6%	6%	7%	7%	7%

Inertia – particularly when looking at the results of the past three surveys characterises the performance on each of these areas.

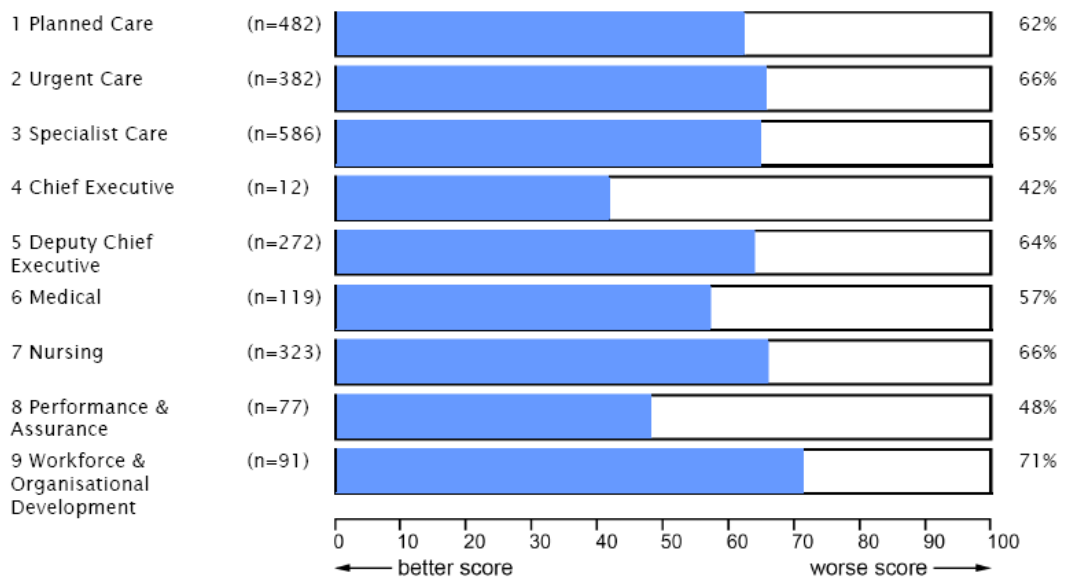
## **7 Internal Comparisons**

The following bar charts look at the top eleven problem scores across Trust staff groups. The charts are sourced from Picker – in all cases the shorter the bar – the better the performance is.

**15d - Put myself under pressure to come to work despite not feeling well enough**

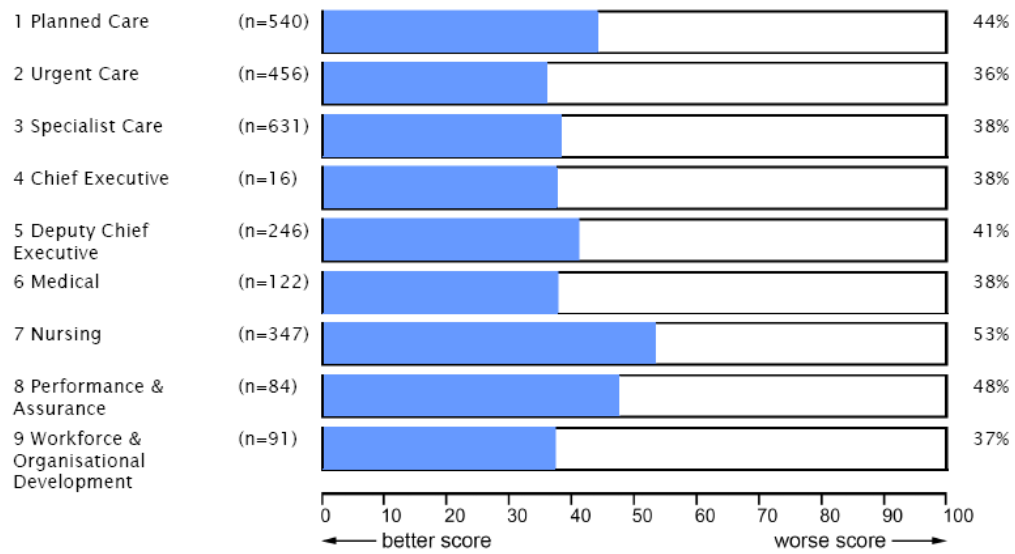


**15a - In last 3 months, have come to work despite not feeling well enough to perform duties**

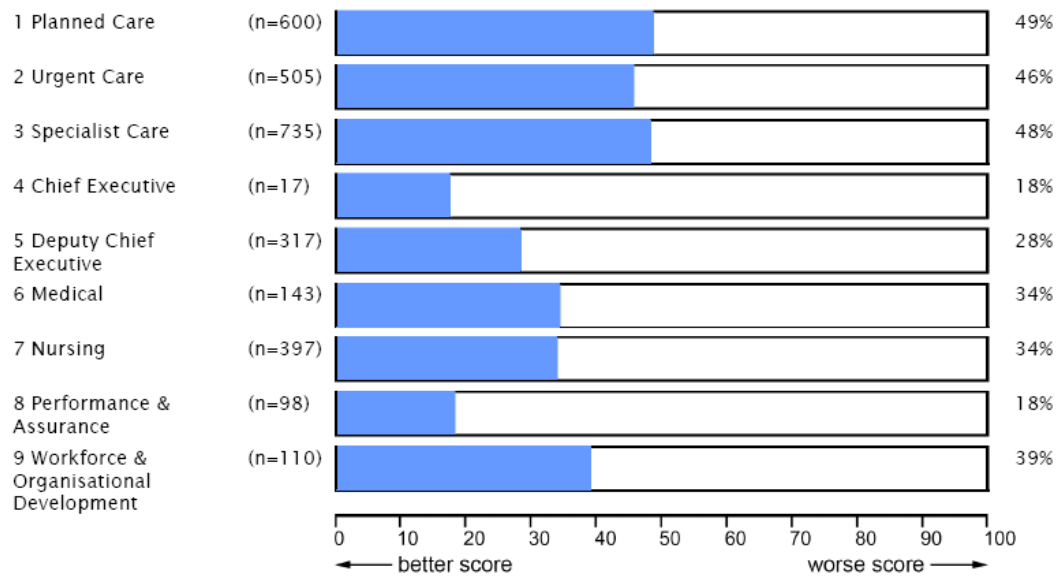




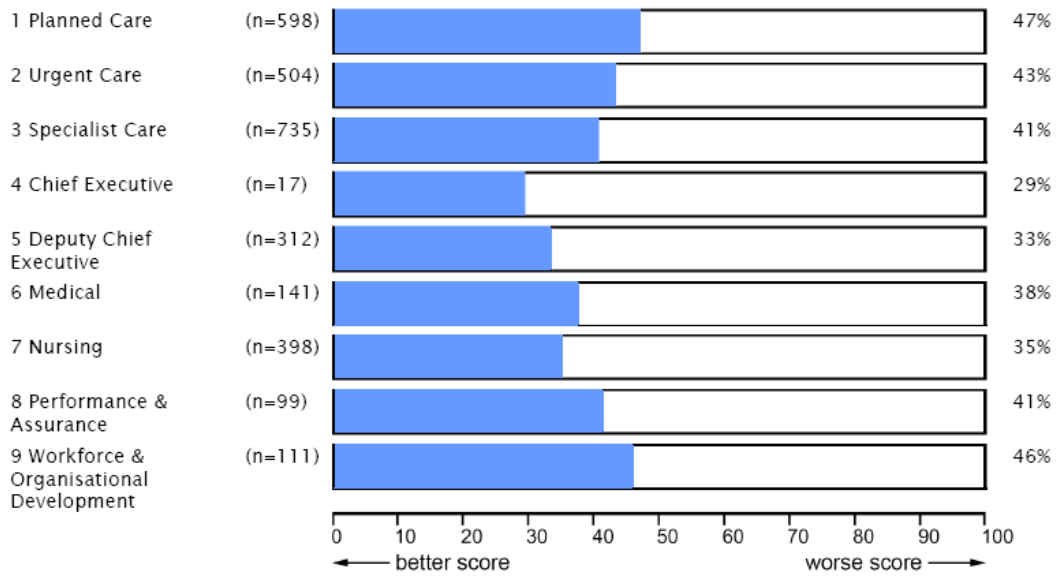
**3b - Appraisal/review not helpful in improving how do job**



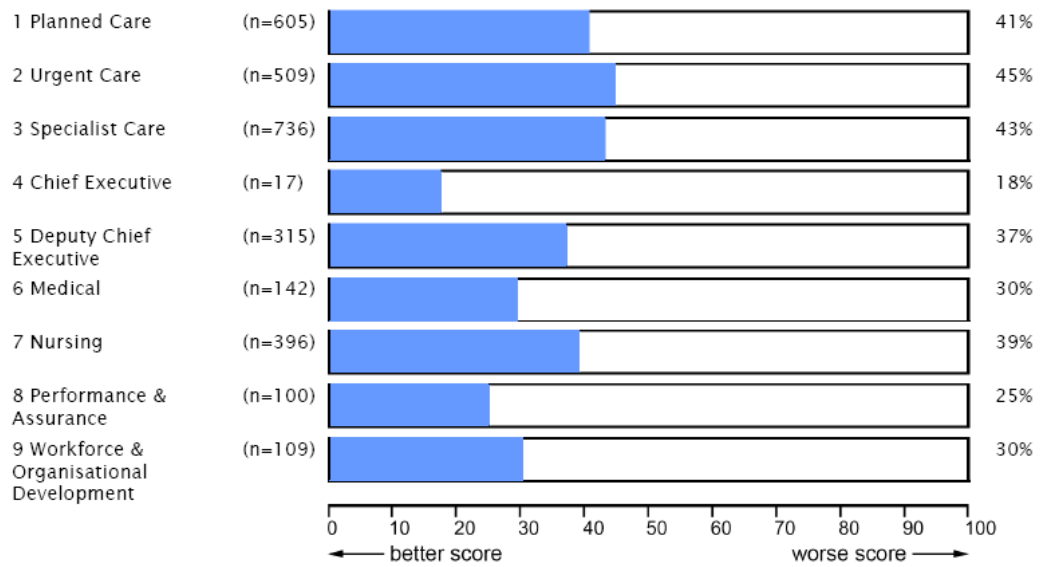
**7g - Not enough staff at organisation to do my job properly**



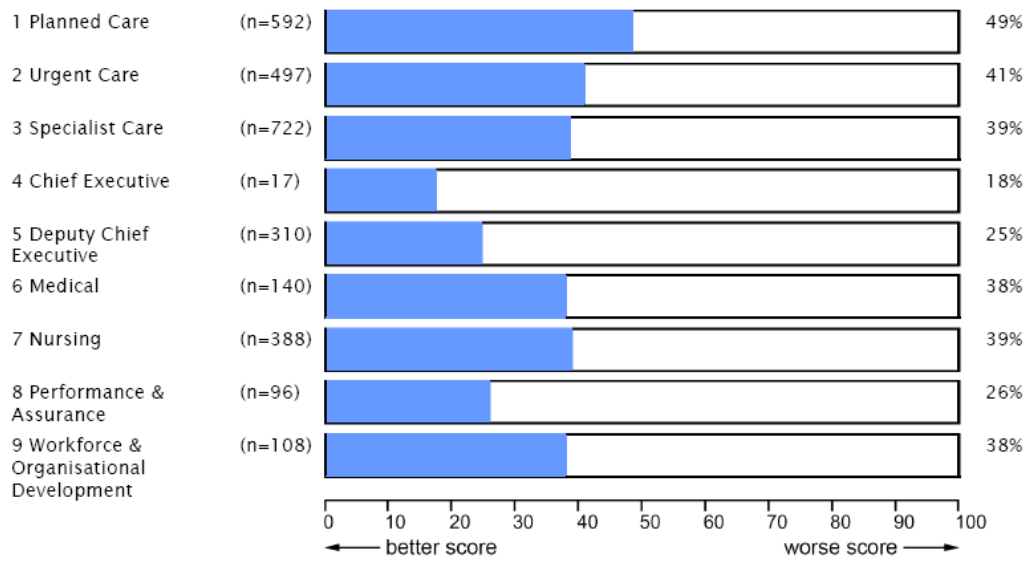
**7e - Cannot meet conflicting demands on my time at work**



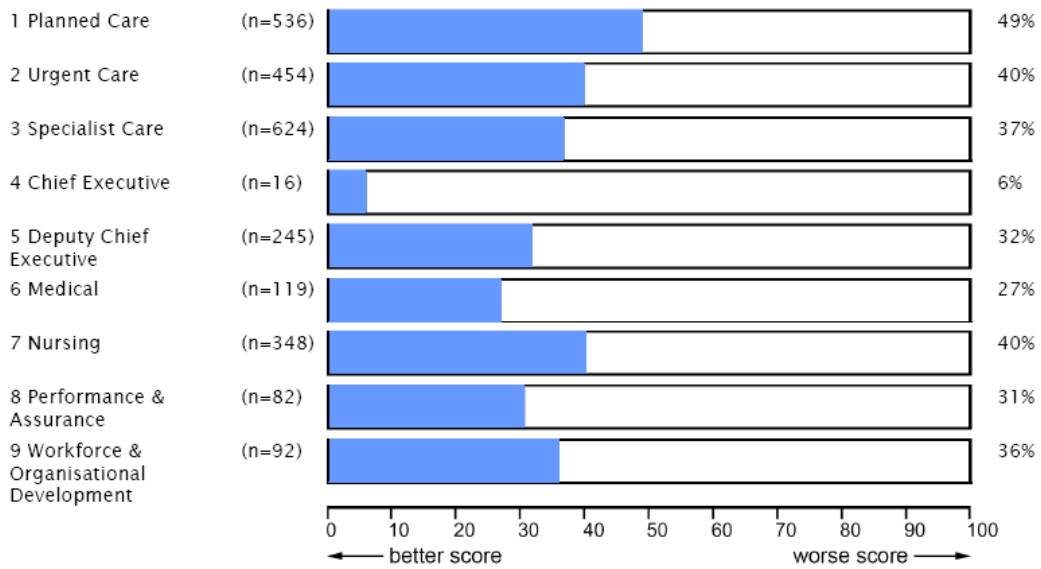
**8h - Dissatisfied with my level of pay**



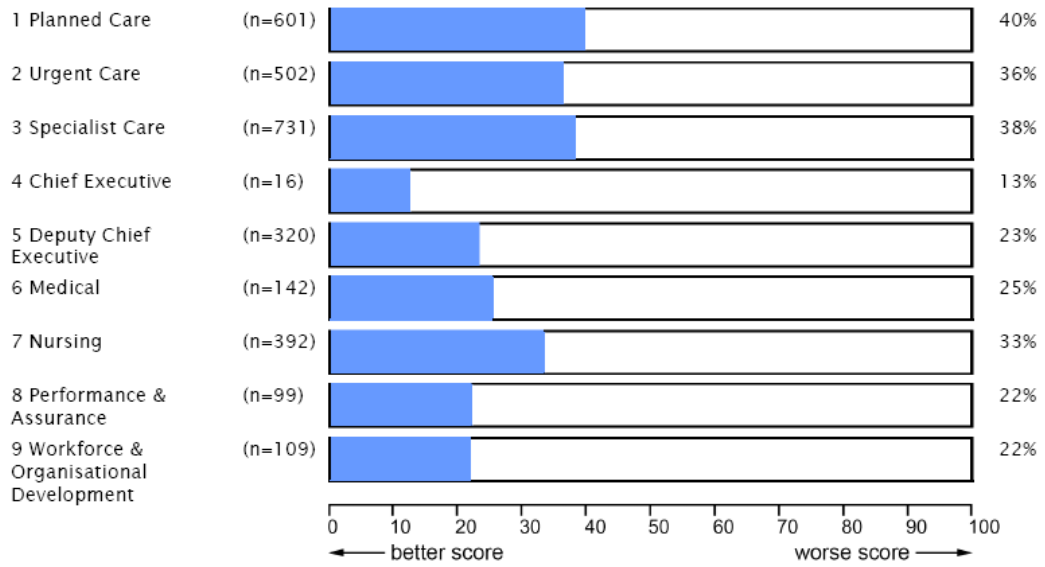
**16 - Felt unwell due to work related stress in last 12 months**



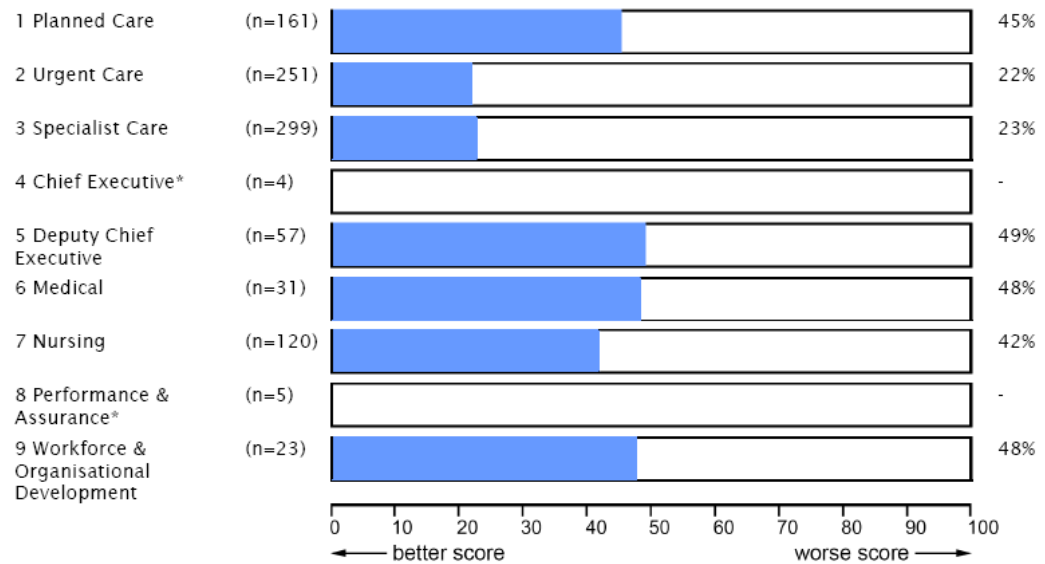
**3d - Appraisal/performance review: left feeling work not valued**



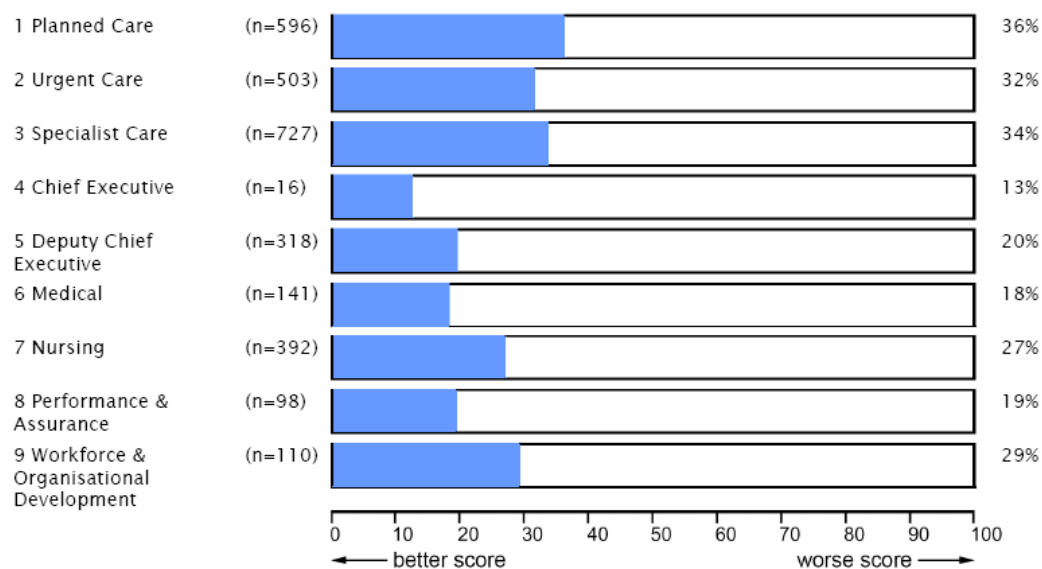
**11c - Senior managers do not try to involve staff in important decisions**



**21c+ - Last experience of harassment/bullying/abuse not reported**



### 11d - Senior managers do not act on staff feedback

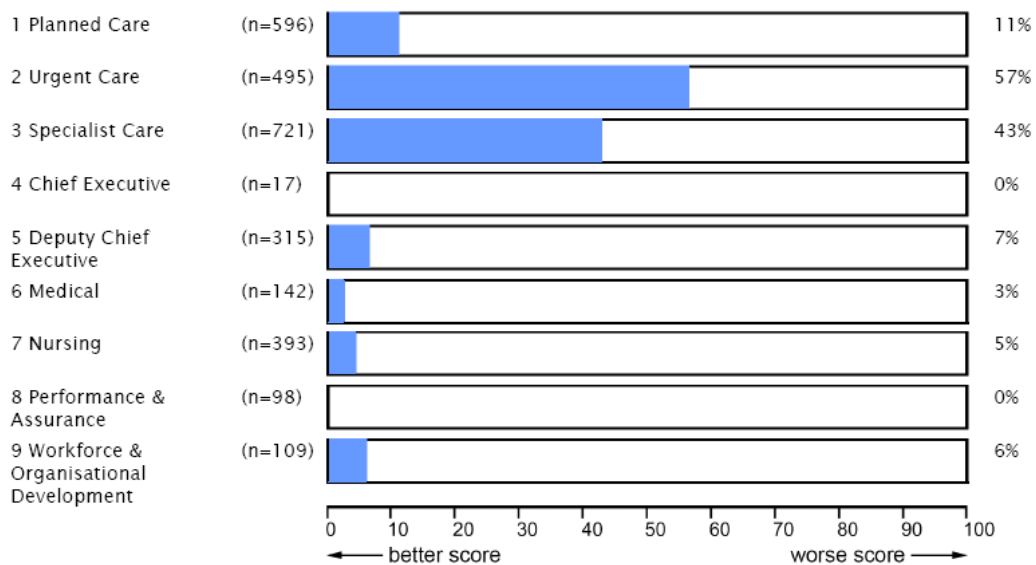


### Key issues

- We all put ourselves under pressure to come to work
- Presenteeism may be as much a problem as absenteeism
- New appraisal should hopefully bring improvements Trust-wide
- Staffing levels perceived as more of an issue for Operational Directorates
- Planned Care staff feel least able to meet conflicting demands
- Dissatisfaction with pay levels is mostly an issue for staff in Operational Directorates
- Work-related stress most prevalent in Planned Care (a Transformation issue?)
- Planned Care staff feel work least valued
- Lack of involvement in decisions perceived most within Corporate Services
- The ability to speak out safely is an issue felt Trust-wide

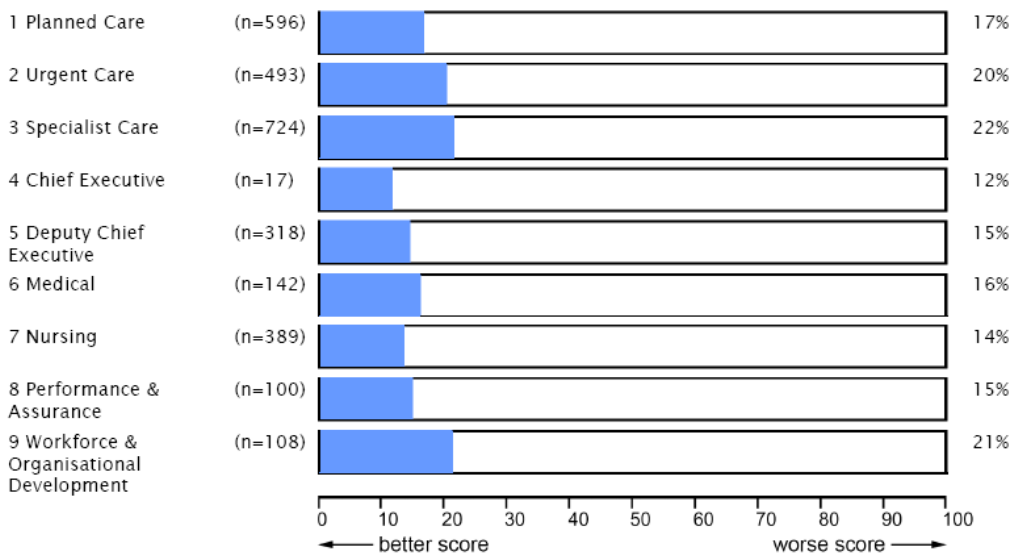
For issues where the Trust is seen to be significantly below the Picker average

**20a - Physical violence from patients/service users, their relatives or other members of the public**



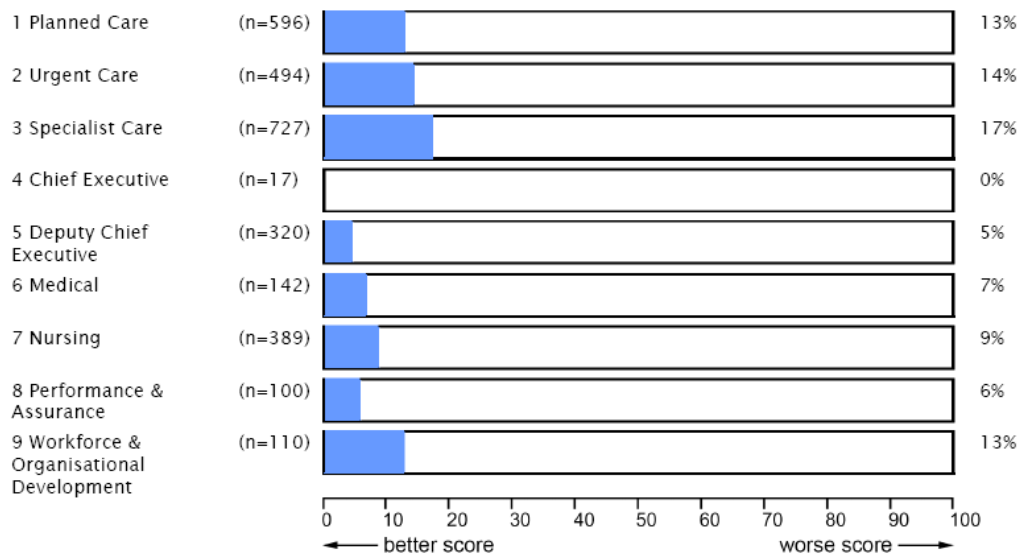
Physical violence is predictably highest in operational directorates, but prevalent in most others too at low levels. It would be useful for us to explore this further.

**18d - Organisation blames/punishes people involved in errors/near misses or incidents**



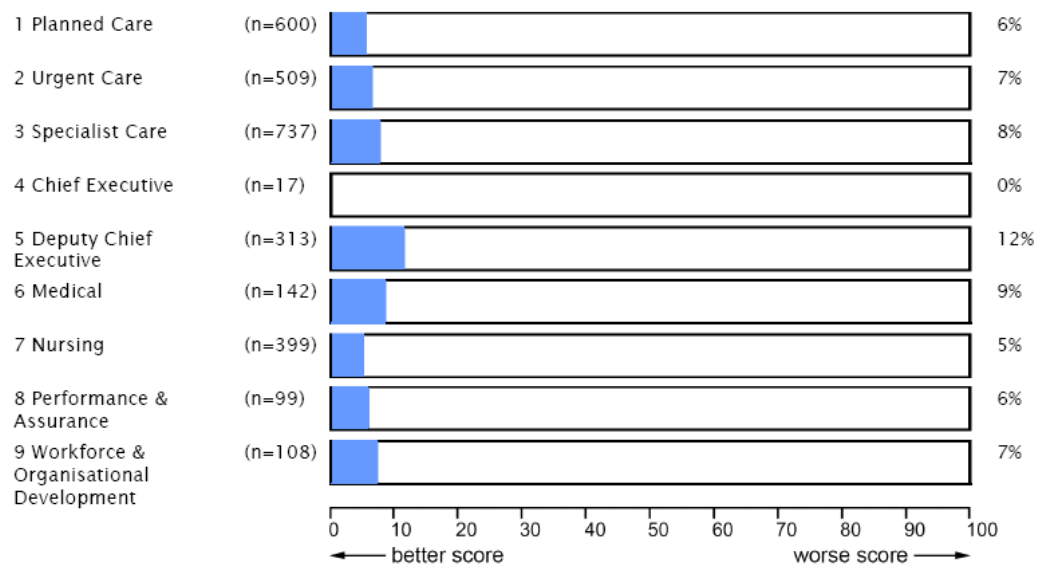
A Blame Culture, whilst not felt by the majority of staff, prevails for a significant minority of people across all staff groups.

**18a - Organisation does not treat fairly staff involved in errors**



Treatment of errors might again be predicted as an issue of concern in operational directorates. The same level of concern within Workforce and Organisational Development is worthy of further exploration.

**5c - Never/rarely does time pass quickly when I am working**



The outlier of 12% is worthy of further exploration.

**8. Recommendations**

That the results be disseminated widely. This is broadly speaking a good set of results. Compared to 2013 the Trust is significantly better on 9 questions and worse on 3 questions. The scores show no significant difference on 74 questions. In comparison with other Trusts, we are significantly better than average on 40 questions, significantly worse than average on 4 questions, with average scores on 48 questions.

Regarding actions, it would be wise not to jump to conclusions about what needs to be fixed and how to do it with 'quick wins'. We have listened more during the first 'Speak Easy' we need to assimilate the information we gained from those events, with that from the staff survey to gain a feel for the actions that are required and a wide ownership and responsibility for seeing those actions through. It is suggested that we don't simply focus on the areas where we have performed below average. The ranking of the problem scores suggests that we have long term issues that are not going away and in many cases appear 'stuck' at a given level. Finding ways for us all to address those will have the biggest impact and will go a long way to eradicating the view that the Staff Survey never achieves anything.

**Christopher Rowlands**  
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**February 2015**