Northumberland, Tyne and Wear NHS Foundation Trust

Board of Directors

Meeting Date: 26 July 2017

Title and Author of Paper: Staff Friends and Family Test Update Quarter One 2017/18 - Lisa Quinn, Executive Director of Commissioning & Quality Assurance

Executive Lead:
Lisa Crichton-Jones Executive Director of Workforce & OD
Lisa Quinn Executive Director of Commissioning and Quality Assurance

Paper for Debate, Decision or Information: Information

Key Points to Note:

- This paper includes the results of the Quarter One Staff Friends and Family Test Survey administered to all staff accessing the Trust network.
- There was a significant increase in response rates this quarter compared with the previous quarter (from 40% to 49%).
- Our staff are more likely to recommend the Trust to family and friends for care and treatment than as a place to work.
- There was a 5% increase in positive responses (or recommend score) to the question “How likely are you to recommend the organisation to friends and family as a place to work?” from 64% to 69% compared to quarter 4 2016/17.
- There was a 3% increase in positive responses (or recommend score) to the second question, “How likely are you to recommend our services to friends and family if they needed care or treatment?” from 74% to 77% compared to quarter 4 2016/17.
- An analysis of responses by staff group has been included for the first time.
- There appears to be no seasonal pattern to results.
- The Trust results from Quarter 4 (2016/17) has been benchmarked against the national results – at that time NTW was equivalent to the national average for the percentage of staff who would recommend the Trust as a place to work and below the national average for those who would recommend for care and treatment.
- Comments received from staff in Quarter 1 have been themed, the top 5 most prevalent themes for each Clinical Group is reported on page 8 and 9 and full list are shown in Appendix 4 & 5. For this analysis, ‘more staff’ emerged as the most prevalent improvement theme for each group, for both questions.

- The actions undertaken by the Groups to address themes which emerged from Quarter 4 16/17 are reported in Appendix 6.
- Trend analysis has been included in Appendices 1-3.

Risks Highlighted: n/a

Does this affect any Board Assurance Framework/Corporate Risks: No

Equal Opportunities, Legal and Other Implications: n/a

Outcome Required / Recommendations: for information and action

Link to Policies and Strategies: Workforce & OD Strategy

Staff Friends and Family Test (FFT) Update 17/18 Quarter One

1. Introduction

All Trusts are required to ask staff their responses to the two Staff Friends and Family Test (FFT) questions, which are also included with the national staff survey conducted in quarter three of each year. The two Staff FFT questions are as below, with answer options ranging from 'extremely likely' to 'extremely unlikely' (6-point Likert scale, including 'don't know' option):

1. **How likely are you to recommend the organisation to friends and family as a place to work? ('work' question)**
2. **How likely are you to recommend our services to friends and family if they needed care and treatment? ('care' question)**

NTW provides staff with the opportunity to feedback their views on the organisation throughout the year via a range of mechanisms, such as the annual staff survey, the Staff FFT (which is administered quarterly except Q3), speakeasy events and the chatterbox facility. Since 2016/17, all staff have been asked their views in every quarter, therefore significantly increasing the volume of responses in the year.

The Staff FFT responses are published nationally, allowing for national benchmarking to take place. Internally, anonymised responses to the staff FFT are made available to managers via the Trust dashboard.

2. Results for Quarter One 2017/18

2.1 Response rates

Appendix 1 shows the response rates by group/directorate over time. In quarter 1 2017/18 the Trust response rate was 49%, receiving a total of 3445 responses. The Trust's response rate increased from 40% in Q4 (688 more respondents).

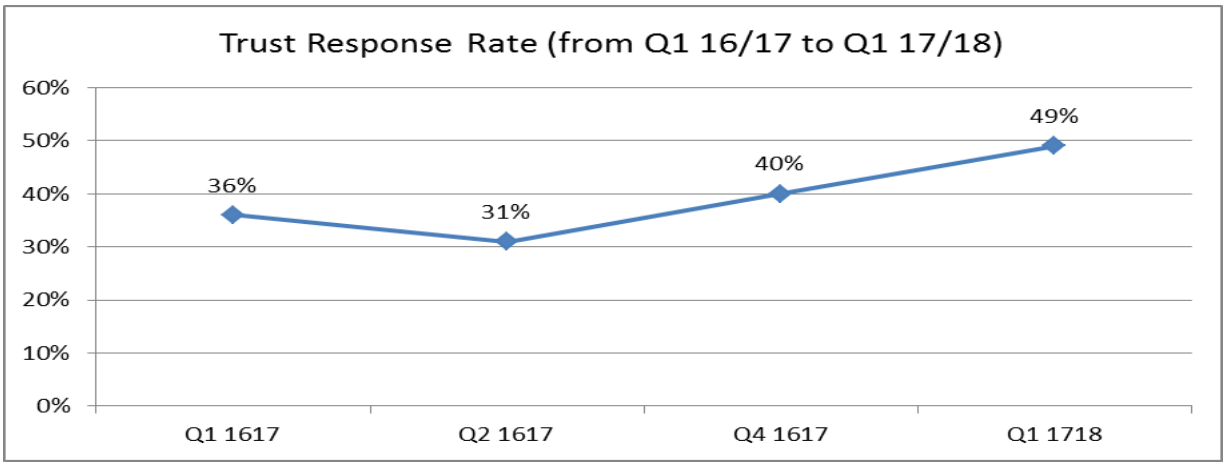
The lowest response rate of those staff asked via the Trust network was from the Corporate Medical Directorate (44%) and the highest response rate was from the Commissioning & Quality Assurance Directorate at 66%. NTW Solutions have been reported for the first time in Q1 2017/18.

Table 1 – Response rates by group/directorate

Response rate – proportion of responses of those offered the Staff FFT through their NTW login	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**
Trust	36%	31%	40%	49%
Specialist Care Group	35%	30%	45%	52%
Community Care Group	42%	36%	48%	55%
In-Patient Care Group	34%	30%	43%	52%
Deputy Chief Executive	43%	36%	35%	33%
Corporate Nursing Directorate	57%	39%	56%	57%
Corporate Medical Directorate	40%	33%	40%	44%
Commissioning and Quality Assurance	60%	61%	64%	66%
Workforce Directorate	63%	57%	59%	56%
CEO Office	47%	53%	63%	57%
NTW Solutions	-	-	-	47%

Table 2 – Breakdown by staff group of those who responded in Quarter 1

Breakdown by staff group	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**
Add Prof Scientific and Technical	7%	7%	7%	6%
Additional Clinical Services	20%	20%	26%	26%
Administrative and Clerical	22%	24%	23%	20%
Allied Health Professionals	5%	5%	6%	5%
Estates and Ancillary	3%	2%	2%	2%
Medical and Dental	5%	5%	4%	4%
Nursing and Midwifery	27%	27%	31%	29%



2.2 Responses by answer options and recommend score

Question 1 (Work Question)

Displayed in Table 3 are the findings from question 1 ('work' question) by answer options. NB: positive responses refer to 'extremely likely' and 'likely' responses, this is also known as the 'recommend score'.

Table 3 – Results table: responses by answer option as a percentage for question 1.

Question 1 - How likely are you to recommend the organisation to friends and family as a place to work?	Quarter 1 2016/17 %	Quarter 2 2016/17 %	Quarter 4 2016/17 %	Quarter 1 2017/18 %	While comparing the Q1 percentages with the same period last year, there has been an overall reduction in positive responses (or recommend score) for this question (from 71% to 70%). However compared to the previous quarter (Q4 16/17) the recommend score has increase by 6%. There has been a small decrease in negative responses compared to both the same period last year and compared to the previous quarter.
Extremely Likely	28	33	21	25	
Likely	43	42	43	45	
Total Recommend	*71*	*75*	*64*	*70*	
Neither	15	13	19	18	
Unlikely	7	6	8	7	
Extremely Unlikely	5	5	6	4	
Don't Know	1	1	3	2	

Displayed in Table 4 is a comparison of the percentage of staff who would 'recommend' the Trust as a place to work by group/directorate.

Table 4: Results table: recommend score for question 1 by group/directorate

Question 1 - Recommend as place of work?	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**	Overall there has been a small reduction in the recommend score (positive responses) when comparing Q1 16/17 to Q1 17/18, this has resulted from decreases across 3 of the 9 areas. However, when comparing Q1 17/18 against the previous quarter (Q4 16/17) there has been an increase the recommend score for nearly all directorates excluding Workforce and CEO office.
Trust	71%	75%	64%	70%	
Specialist Care Group	69%	74%	64%	68%	
Community Care Group	71%	75%	61%	67%	
In-Patient Care Group	75%	74%	64%	69%	
Deputy Chief Executive	78%	73%	63%	72%	
Corporate Nursing Directorate	71%	80%	69%	76%	
Corporate Medical Directorate	69%	75%	66%	70%	
Commissioning and Quality Assurance	78%	85%	75%	84%	
Workforce Directorate	53%	67%	71%	65%	
CEO Office	63%	63%	92%	77%	
NTW Solutions	-	-	-	68%	

Displayed in Table 5 is a comparison of the percentage of staff who would 'recommend' the Trust as a place to work by staff group.

Table 5: Results table: recommend score for question 1 by staff group

Question 1 - Recommend as place of work?	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**	Comparing the recommend scores in Q1 2017/18 with Q1 2016/17 there have been significant changes in 3 of the 8 staff groups, with reductions in recommend score for Estates and Ancillary and Null and increases in Nursing and Midwifery. When comparing Q1 17/18 against the previous quarter (Q4 16/17) there has been an increase the recommend score for all staff groups.
Trust	71%	75%	64%	70%	
Add Prof Scientific and Technical	69%	77%	58%	69%	
Additional Clinical Services	68%	68%	66%	68%	
Administrative and Clerical	74%	78%	69%	73%	
Allied Health Professionals	74%	79%	70%	74%	
Estates and Ancillary	77%	67%	49%	61%	
Medical and Dental	68%	72%	60%	63%	
Nursing and Midwifery	67%	71%	61%	80%	

Appendix 2 illustrates the percentage of staff who would recommend, not recommend (rating extremely unlikely or unlikely) and those who are unsure (rating either neither or don't know) to question 1 by group/directorate over time (Q1 2016/17 to Q1 2017/18).

Question 2 (Care Question)

Displayed in Table 6 are the findings from question 2 ('care' question) by answer options.

Table 6 – Results table: responses by answer option as a percentage for question 2.

Question 2 - How likely are you to recommend our services to friends and family if they needed care or treatment?	Quarter 1 2016/17 %	Quarter 2 2016/17 %	Quarter 4 2016/17 %	Quarter 1 2017/18 %	While comparing the Q1 percentages with last year (Q1 16/17), there has been an overall reduction in the recommend score (positive responses) for this question (from 81% to 77%). However compared to the previous quarter (Q4) the recommend score has increased by 3%. There has been a small decrease in negative responses compared to both the same period last year and compared to the previous quarter.
Extremely Likely	32	39	25	29	
Likely	49	45	49	48	
Total Recommend	*81*	*84*	*74*	*77*	
Neither	12	10	15	14	
Unlikely	4	2	4	3	
Extremely Unlikely	2	2	3	2	
Don't Know	2	2	4	4	

Displayed in Table 7 is a comparison of the percentage of staff who would 'recommend' the Trust for care or treatment by group/directorate.

Table 7: Results table: recommend score for question 2 by group/directorate

Question 2 - Recommend for care?	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**	Overall there has been a small reduction in the recommend score (positive responses) when comparing Q1 16/17 to Q1 17/18, this has resulted from decreases across 6 of the 9 areas. However, when comparing Q1 17/18 against the previous quarter (Q4 16/17) there has been an increase the recommend score for nearly all directorates excluding Workforce and CEO office.
Trust	81%	84%	74%	77%	
Specialist Care Group	80%	84%	73%	75%	
Community Care Group	82%	86%	74%	78%	
In-Patient Care Group	83%	82%	73%	75%	
Deputy Chief Executive	85%	87%	72%	72%	
Corporate Nursing Directorate	73%	83%	82%	84%	
Corporate Medical Directorate	70%	78%	65%	75%	
Commissioning and Quality Assurance	86%	87%	78%	84%	
Workforce Directorate	83%	86%	79%	74%	
CEO Office	75%	75%	83%	77%	
NTW Solutions	-	-	-	77%	

Displayed in Table 8 is a comparison of the percentage of staff who would 'recommend' the Trust for care or treatment by staff group.

Table 8: Results table: recommend score for question 2 by staff group

Question 2 - Recommend for care?	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**	Comparing the recommend scores in Q1 2017/18 with Q1 2016/17 there have been decreases in 6 out of the 8 staff groups, most notably in the Nursing and Midwifery group (from 81% to 69%). When comparing Q1 17/18 against the previous quarter (Q4 16/17) there has been an increase the recommend score for nearly all staff groups excluding Medical and Dental.
Trust	81%	84%	74%	77%	
Add Prof Scientific and Technical	83%	86%	72%	79%	
Additional Clinical Services	77%	76%	74%	75%	
Administrative and Clerical	84%	87%	79%	81%	
Allied Health Professionals	79%	90%	70%	80%	
Estates and Ancillary	80%	91%	74%	75%	
Medical and Dental	81%	80%	73%	69%	
Nursing and Midwifery	79%	81%	72%	82%	

Appendix 3 illustrates the percentage of staff who would recommend, not recommend and those who are unsure to question 2 by group/directorate over time (Q1 2016/17 to Q1 2017/18).

2.3 Results by thematic analysis

Staff additionally have the opportunity to provide comments into free text boxes designed to elicit improvement suggestions for each of the mandatory questions. Staff are asked:

1. **Please suggest any improvements to make NTW a better place to work.**
2. **Please suggest any changes NTW can make to improve the care or treatment offered.**

The number of free text comments made is displayed in Table 9.

Table 9 – number of free text comments and response rate.

Quarter	Question 1 – 'work' question		Question 2 – 'care' question	
	No of free text comments	Percentage of respondents	No of free text comments	Percentage of respondents
Q1	682	19.8%	553	16.1%

Approximately 20% of the staff who responded also made further suggestions as how NTW can make improvements.

In terms of the comments provided by staff regarding improvements, a full spectrum of feedback was received across a selection of themes. Several repeating themes emerged during quarter 1 and this thematic analysis is shown in Tables 10 ('work' question) and 11 ('care' question) by directorate/ group.

Table 10 – Top 5 themes for Question 1 (find full list in Appendix 4) per group/directorate

Theme/ category	Total	% of responses	Response to Staff FFT question 1 – Work Question		
			Recommend	Not recommend	Unsure
Inpatient Care – 87 people responded to this question. A total of 98 comments were themed.					
More Staff	25	26%	52%	28%	20%
Better Pay and Conditions	10	10%	60%	30%	10%
Unable to suggest any improvement (i.e. 'can't think of any' 'no improvements needed')	8	8%	75%	0%	25%
Changes in Shift Patterns	5	5%	80%	20%	0%
More Praise / Recognition	4	4%	25%	0%	75%

Community Care – 212 people responded to this question. A total of 247 comments were themed.					
More Staff	38	15%	39%	29%	32%
More Management Support / Supervision	16	6%	38%	31%	31%
Improvements to Environment / Facilities	14	6%	93%	0%	7%
More Training and Development	13	5%	38%	38%	23%
Better Pay and Conditions	11	4%	45%	18%	36%
Specialist Care – 253 people responded to this question. A total of 285 comments were themed.					
More Staff	48	17%	60%	19%	21%
Unable to suggest any improvement (i.e. 'can't think of any' 'no improvements needed')	21	7%	76%	5%	19%
Better Pay and Conditions	17	6%	35%	41%	24%
Improvements to Environment / Facilities	14	5%	43%	29%	29%
Better Communication (Staff)	14	5%	57%	29%	14%

Table 11 – Top 5 themes for Question 2 (find full list in Appendix 5) per group/directorate

Theme/ category	Total	% of responses	Response to Staff FFT question 2 – Care Question		
			Recommend	Not recommend	Unsure
Inpatient Care – 74 people responded to this question. A total of 81 comments were themed.					
More Staff	22	27%	45%	14%	41%
Improvements to Environment / Facilities	5	6%	80%	20%	0%
Reduce Documentation	4	5%	100%	0%	0%
Unable to suggest any improvement (i.e. 'can't think of any' 'no improvements needed')	4	5%	25%	25%	50%
Reduce use of Temp. Staff	4	5%	75%	0%	25%
Community Care – 197 people responded to this question. A total of 230 comments were themed.					
More Staff	59	26%	53%	12%	36%
Reduce Waiting Times	33	14%	73%	9%	18%
More Investment / Resources	12	5%	42%	25%	33%

Require Localised Services	8	3%	50%	0%	50%
More Training and Development	8	3%	75%	0%	25%
Specialist Care – 184 people responded to this question. A total of 209 comments were themed.					
More Staff	60	29%	73%	8%	18%
Reduce Waiting Times	16	8%	75%	19%	6%
Unable to suggest any improvement (i.e. 'can't think of any' 'no improvements needed')	10	5%	90%	0%	10%
Better Use of Time	7	3%	71%	14%	14%
Ensure Consistency	7	3%	43%	29%	29%

From this thematic analysis, it is evident that 'more staff' is the most prevalent improvement theme for each group, for both questions (table 6 & 7). In relation to question 1, 'better pay and conditions' emerged as a repeating theme for each Clinical Group. For both Inpatient Care and Specialist Care, out of the top 5 prevalent themes, 'pay and conditions' had the highest proportion of 'not recommend' answers. For Community Care the lack of training and developed caused more people to answer would not recommend (out of the top 5 prevalent themes).

In relation to question 2, except for 'more staff', there were no common themes in the top 5 which spanned across all three Clinical groups. Although these themes highlight areas for improvement, some themes did not make respondents less likely to recommend the service to family or friends for treatment i.e., for Inpatient Care while 'reduce documentation' emerged as a negative theme, 100% of those respondents would still recommend the Trust to as a place for treatment.

The FFT results are available anonymously via the dashboards. Clinical Groups and operational departments are again asked to consider their results, not only for the quarter but over the time the FFT has been running to determine themes and local issues and consider actions to address these.

The Clinical Groups have considered the results which emerged from **Quarter 4 2016/17** and are undertaking actions to ensure improvement. Some of the key actions taken to address the themes by groups/directorates are listed at Appendix 6.

Included below are examples of improvements comments received by staff in quarter 1 (who identified they were happy for their comments to be published):

Improvements to make NTW a better place to work:

"Recruit more staff to help with workload."

"Reduce waiting time for appointments."

"Less time on computers, more time with patient."

Changes NTW can make to improve the care or treatment offered:

"Better opportunities to progress and develop."

"Communication from senior management within a directorate down to staff still poses a problem and there is often a breakdown in the communication feed to staff."

"Get rid of the current sickness policy. People are either coming to work ill or returning to work before recovery due to fear of disciplinary."

3. National Benchmarking Data - Update Q4 2016/17

The table below shows the responses to the staff FFT questions from Northumberland, Tyne and Wear NHS Foundation Trust in comparison to the National and Local Area responses.

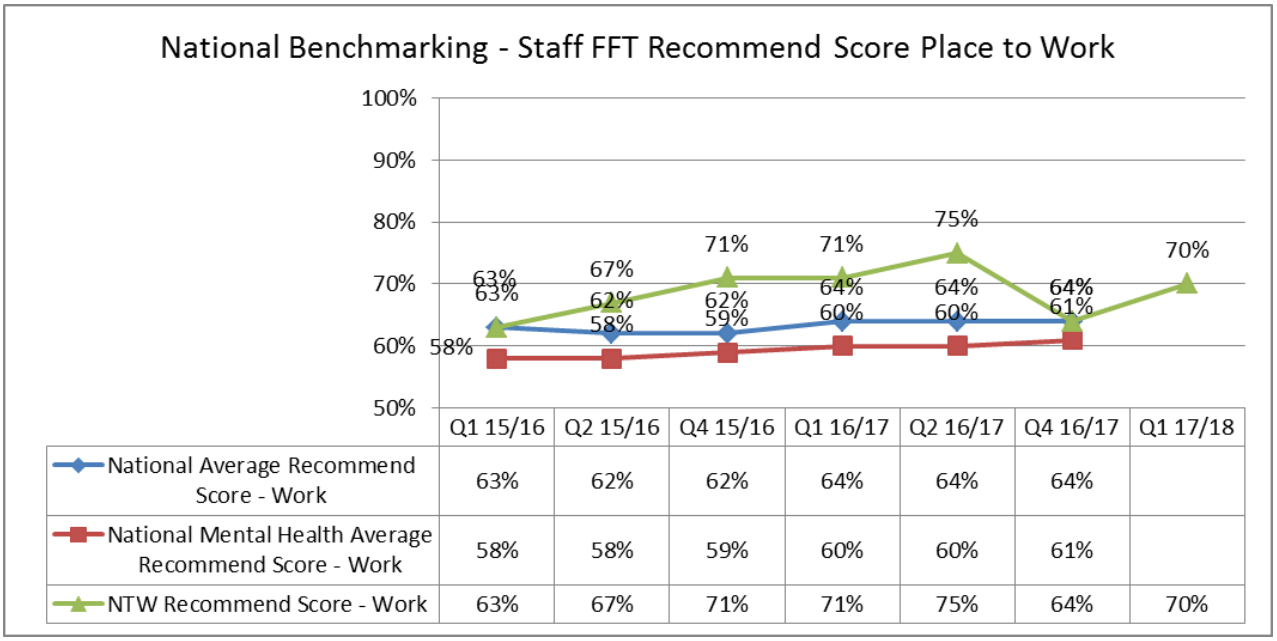
The data below is the most recently published: Q4 2016/17. (Q1 2017/18 data is due to be published 24 August 2017).

	Total Response	**HSCIC Workforce Headcount**	**Work**		**Care**	
			% Recommend	**% Not Recommend**	**% Recommend**	**% Not Recommend**
National	**138,608**	**1,148,744**	**64%**	**18%**	**79%**	**7%**
NHS England Cumbria & North East	9,222	85,444	68%	14%	80%	6%
Northumberland, Tyne and Wear NHS Foundation Trust	2,757	6,283	64%	14%	74%	7%
Tees, Esk and Wear Valleys NHS Foundation Trust	2,914	6,433	72%	12%	82%	5%

It can be seen that in quarter 4 the Trust was equivalent to the national average for the percentage of staff who would recommend the Trust as a place to work and below the national average for those who would recommend for care and treatment. The data also shows that in quarter 4 Trust scores were below both Trusts within the local area for staff who would recommend as a place to work and as a place for care and treatment.

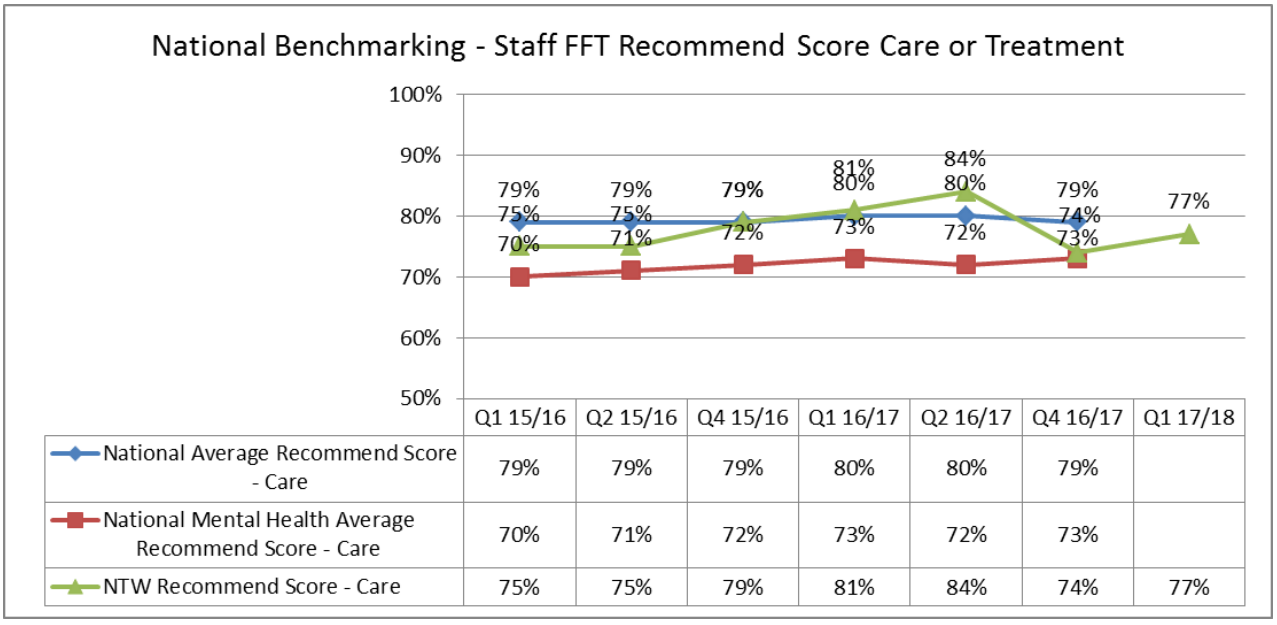
If the national position remains unchanged from quarter 4 2016-17 to quarter 1 2017-18, at 64% the most recent (Q1 2017/18) NTW results would be above the national average

for recommending the Trust as a place to work, and at 77% be below the national average of 79% for recommending the organisation's care and treatment.



	Q1 15/16	Q2 15/16	Q4 15/16	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18
National Average Recommend Score - Work	63%	62%	62%	64%	64%	64%	
National Mental Health Average Recommend Score - Work	58%	58%	59%	60%	60%	61%	
NTW Recommend Score - Work	63%	67%	71%	71%	75%	64%	70%

The above graph illustrates that the Trust has been above or equal to the national average, and above the sector average since Q1 2015/16 for the percentage of staff who would recommend the Trust as a place to work.



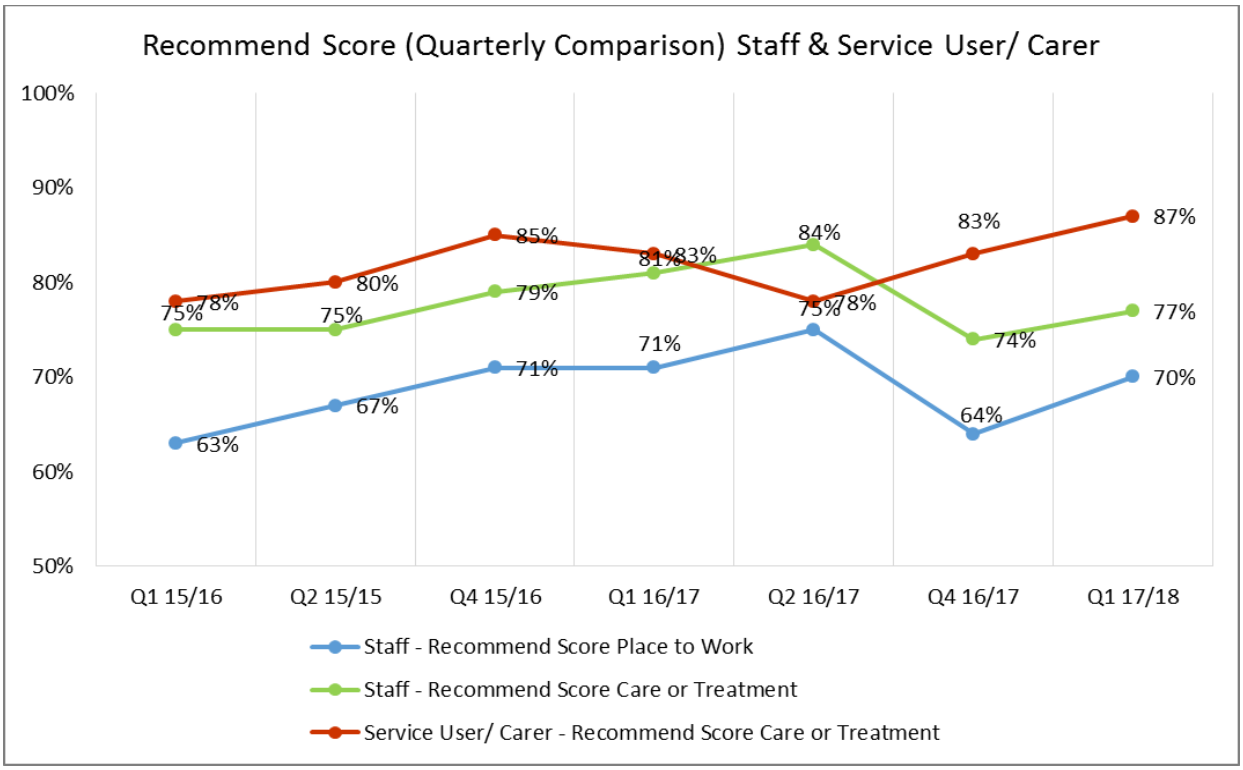
	Q1 15/16	Q2 15/16	Q4 15/16	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18
National Average Recommend Score - Care	79%	79%	79%	80%	80%	79%	
National Mental Health Average Recommend Score - Care	70%	71%	72%	73%	72%	73%	
NTW Recommend Score - Care	75%	75%	79%	81%	84%	74%	77%

As illustrated above the Trust has been above the sector average since Q1 2015/16 for the percentage of staff who would recommend the Trust as a place for care and

treatment. During Q4 2016/17 the Trust recommend score was marginally above the section average by 1%.

4. Staff vs Service User/ Carer Friends and Family Test Comparison

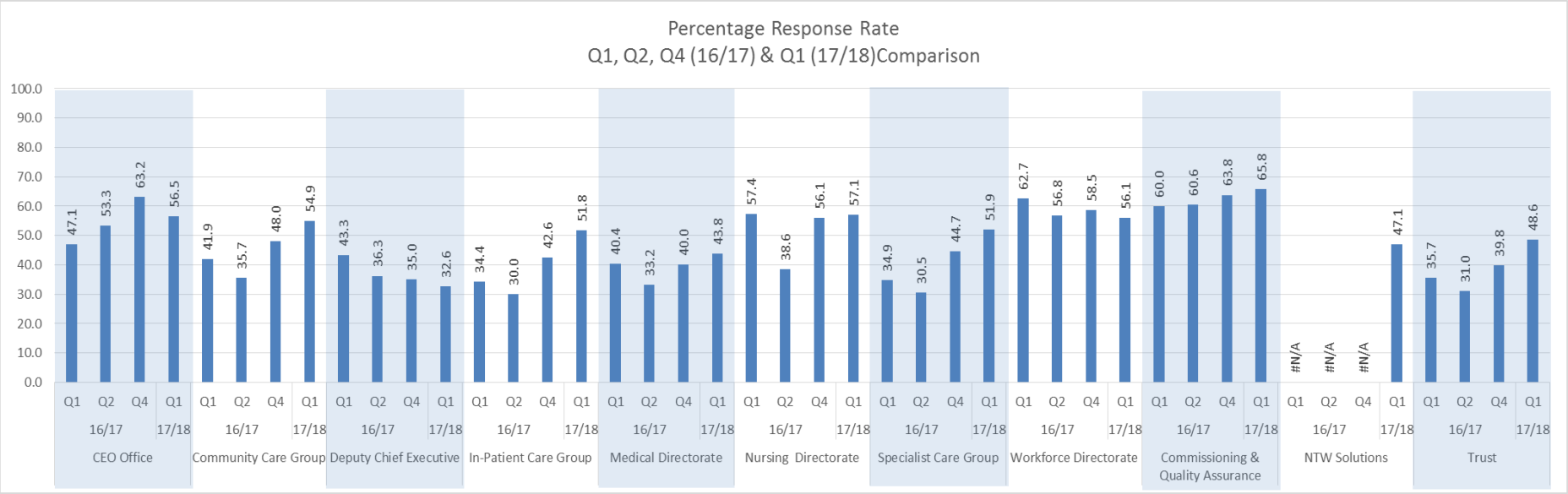
The graph below shows the recommend score from both the staff and service users/ carers FFT over a quarterly time period:



All departments are asked to consider appropriate actions in response to recent staff responses to the two Friends and Family Test questions.

Lisa Quinn, Executive Director of Commissioning and Quality Assurance
July 2017

Response Rates



Response rate	**Q1 1617**	**Q2 1617**	**Q4 1617**	**Q1 1718**	**Q1 1718** number of responses
Trust	36%	31%	40%	49%	3445
Specialist Care Group	35%	30%	45%	52%	1061
Community Care Group	42%	36%	48%	55%	982
In-Patient Care Group	34%	30%	43%	52%	536
Deputy Chief Executive	43%	36%	35%	33%	29
Nursing Directorate	57%	39%	56%	57%	124
Medical Directorate	40%	33%	40%	44%	105
Commissioning and Quality Assurance	60%	61%	64%	66%	75
Workforce Directorate	63%	57%	59%	56%	23
CEO Office	47%	53%	63%	57%	13
NTW Solutions	-	-	-	47%	130

~ In Q1 response rates have increased overall to 49% from 40% in Q4 (688 more respondents).

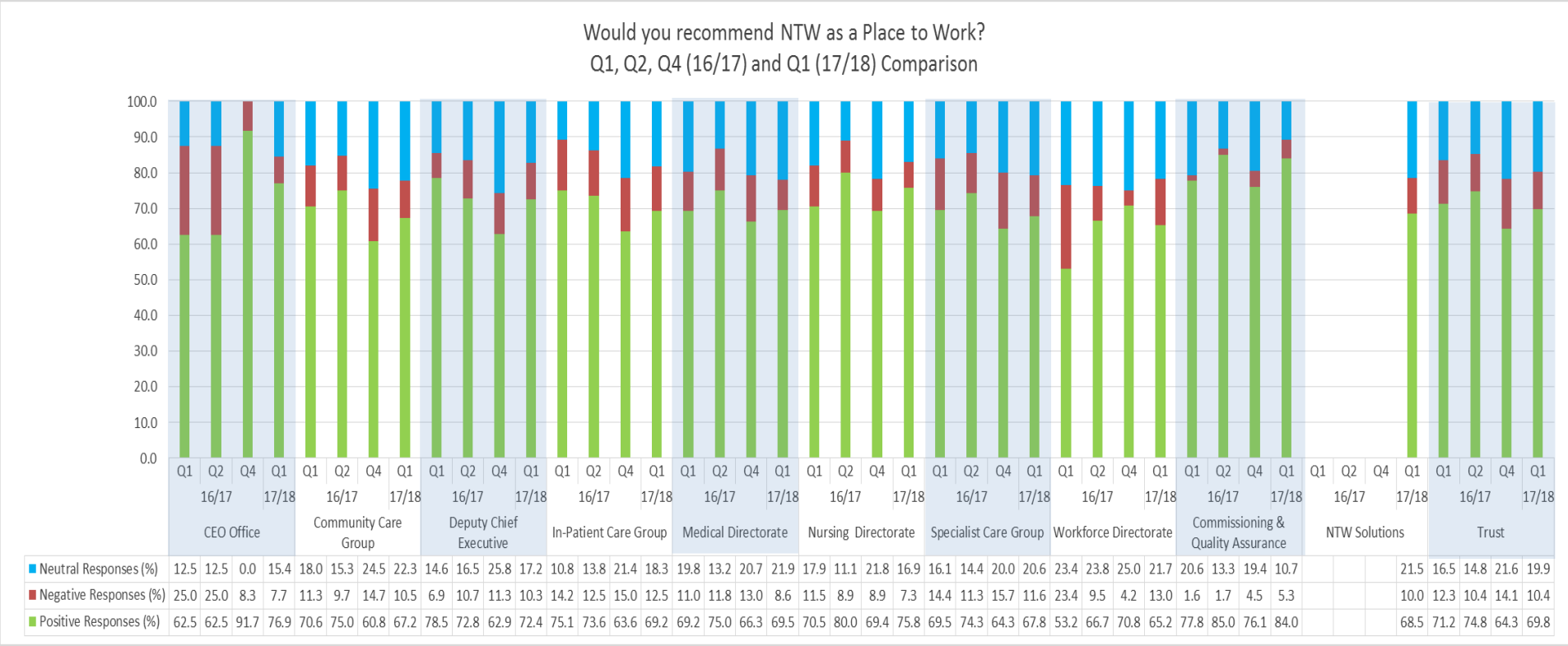
~ 6 out of 9 directorates have seen an increase in response rates, the most significant increase in response rate was seen from the In-Patient Care Group (from 43% to 52%).

~ 3 directorates have seen a decrease in response rates.

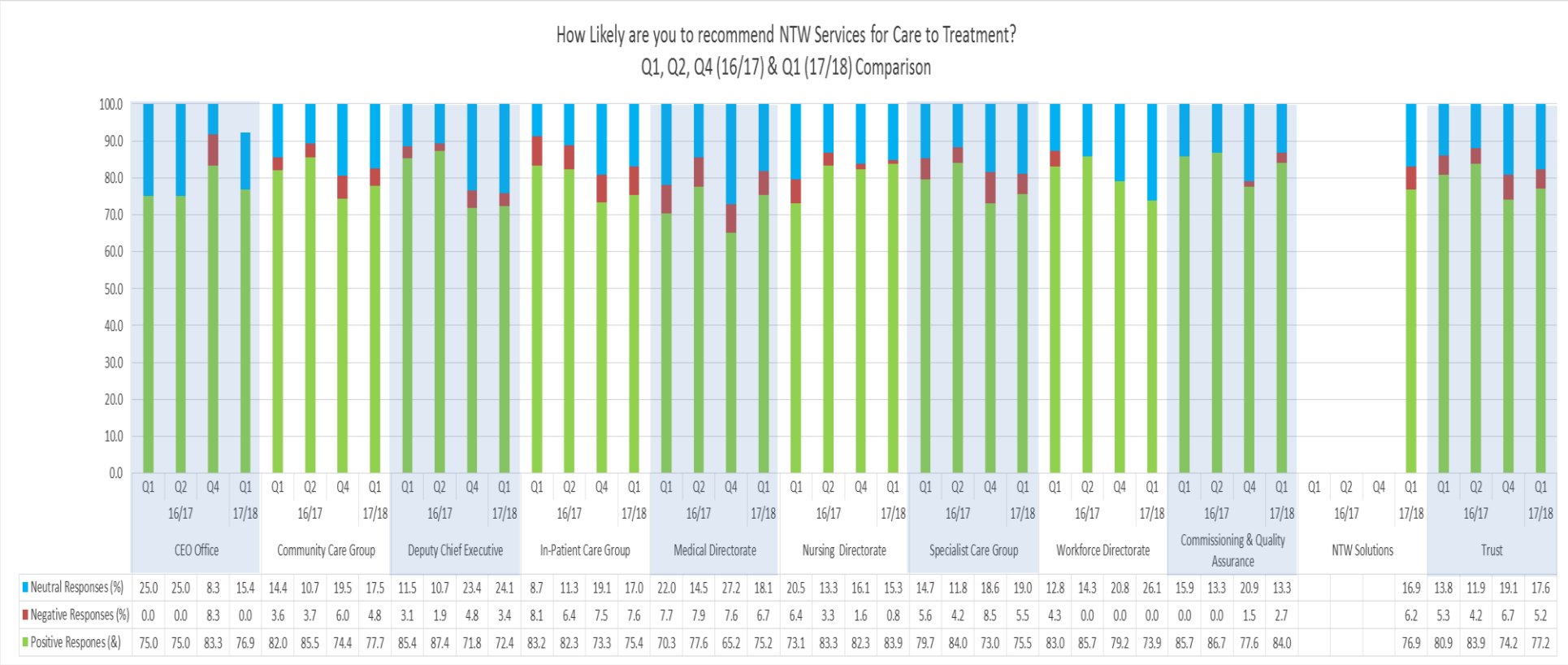
~ NTW Solutions have been added for Q1 2017/18.

NB the staff FFT question was not asked in 2016/17 Q3 due to the staff survey being undertaken.

Appendix 2



	CEO Office				Community Care Group				Deputy Chief Executive				In-Patient Care Group				Medical Directorate				Nursing Directorate				Specialist Care Group				Workforce Directorate				Commissioning & Quality Assurance				NTW Solutions				Trust			
	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18
Neutral Responses (%)	12.5	12.5	0.0	15.4	18.0	15.3	24.5	22.3	14.6	16.5	25.8	17.2	10.8	13.8	21.4	18.3	19.8	13.2	20.7	21.9	17.9	11.1	21.8	16.9	16.1	14.4	20.0	20.6	23.4	23.8	25.0	21.7	20.6	13.3	19.4	10.7				21.5	16.5	14.8	21.6	19.9
Negative Responses (%)	25.0	25.0	8.3	7.7	11.3	9.7	14.7	10.5	6.9	10.7	11.3	10.3	14.2	12.5	15.0	12.5	11.0	11.8	13.0	8.6	11.5	8.9	8.9	7.3	14.4	11.3	15.7	11.6	23.4	9.5	4.2	13.0	1.6	1.7	4.5	5.3				10.0	12.3	10.4	14.1	10.4
Positive Responses (%)	62.5	62.5	91.7	76.9	70.6	75.0	60.8	67.2	78.5	72.8	62.9	72.4	75.1	73.6	63.6	69.2	69.2	75.0	66.3	69.5	70.5	80.0	69.4	75.8	69.5	74.3	64.3	67.8	53.2	66.7	70.8	65.2	77.8	85.0	76.1	84.0				68.5	71.2	74.8	64.3	69.8



	CEO Office				Community Care Group				Deputy Chief Executive				In-Patient Care Group				Medical Directorate				Nursing Directorate				Specialist Care Group				Workforce Directorate				Commissioning & Quality Assurance				NTW Solutions				Trust			
	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18	Q1 16/17	Q2 16/17	Q4 16/17	Q1 17/18
Neutral Responses (%)	25.0	25.0	8.3	15.4	14.4	10.7	19.5	17.5	11.5	10.7	23.4	24.1	8.7	11.3	19.1	17.0	22.0	14.5	27.2	18.1	20.5	13.3	16.1	15.3	14.7	11.8	18.6	19.0	12.8	14.3	20.8	26.1	15.9	13.3	20.9	13.3				16.9	13.8	11.9	19.1	17.6
Negative Responses (%)	0.0	0.0	8.3	0.0	3.6	3.7	6.0	4.8	3.1	1.9	4.8	3.4	8.1	6.4	7.5	7.6	7.7	7.9	7.6	6.7	6.4	3.3	1.6	0.8	5.6	4.2	8.5	5.5	4.3	0.0	0.0	0.0	0.0	0.0	1.5	2.7				6.2	5.3	4.2	6.7	5.2
Positive Responses (&)	75.0	75.0	83.3	76.9	82.0	85.5	74.4	77.7	85.4	87.4	71.8	72.4	83.2	82.3	73.3	75.4	70.3	77.6	65.2	75.2	73.1	83.3	82.3	83.9	79.7	84.0	73.0	75.5	83.0	85.7	79.2	73.9	85.7	86.7	77.6	84.0				76.9	80.9	83.9	74.2	77.2

Appendix 4

Inpatient Care Group - Work Question					
			Response to Staff FFT Question 1		
Theme	Total	% of Responsnes	Recommend	Not Recommend	Unsure
More Staff	25	26%	52%	28%	20%
Pay and Conditions	10	10%	60%	30%	10%
No Improvement Suggestions	8	8%	75%	0%	25%
Shift Patterns	5	5%	80%	20%	0%
More Praise / Recognition	4	4%	25%	0%	75%
Showing Respect / Vaules	4	4%	25%	25%	50%
Better Communication (Staff)	3	3%	33%	33%	33%
Sickness Policy	3	3%	0%	67%	33%
Not Themable	3	3%	33%	0%	67%
Improvements to Environment / Facilities	2	2%	50%	50%	0%
Reduce use of Temp Staff	2	2%	100%	0%	0%
More Management Support / Supervison	2	2%	0%	50%	50%
More listening to Staff	2	2%	50%	0%	50%
Working Conditions	2	2%	100%	0%	0%
Low Staff Morale	2	2%	100%	0%	0%
Recruitment & Induction	2	2%	50%	0%	50%
Better Use of Time	2	2%	100%	0%	0%
Improve Information Techonology	2	2%	50%	50%	0%
Continue Good Work	2	2%	50%	50%	0%
Better Involvement & collaboration (Carer / Families)	1	1%	100%	0%	0%
Better Access to Services	1	1%	100%	0%	0%
Stress at Work	1	1%	100%	0%	0%
Reduce Documentation	1	1%	100%	0%	0%
Improve Access to / Visability of Management	1	1%	100%	0%	0%
Better Career Progression	1	1%	0%	100%	0%
More Investment / Resources	1	1%	0%	100%	0%
Culture / Leadership of Management	1	1%	0%	100%	0%
Transparency	1	1%	100%	0%	0%
Feel able to Raise Concerns	1	1%	0%	0%	100%
Too Much Organisational Change	1	1%	0%	100%	0%
N/A	1	1%	0%	100%	0%
Smoking Ban	1	1%	0%	0%	100%

Community Care Group - Work Question					
			Response to Staff FFT Question 1		
Theme	Total	% of Responses	Recomme	Not Recor	Unsure
More Staff	38	15%	39%	29%	32%
More Management Support / Su	16	6%	38%	31%	31%
Improvements to Environment / F	14	6%	93%	0%	7%
More Training and Development	13	5%	38%	38%	23%
Pay and Conditions	11	4%	45%	18%	36%
Not Themable	11	4%	64%	0%	36%
More Parking / Transport	10	4%	70%	20%	10%
Too Much Organisational Change	8	3%	38%	25%	38%
Look After Staff Wellbeing	7	3%	29%	43%	29%
More listening to Staff	7	3%	43%	29%	29%
More Praise / Recognition	7	3%	14%	29%	57%
More Investment / Resources	7	3%	29%	57%	14%
Reduce Case Loads	7	3%	43%	43%	14%
Continue Good Work	7	3%	100%	0%	0%
Recruitment and Induction	6	2%	83%	17%	0%
Ensure Consistency	6	2%	50%	17%	33%
No Improvement Suggestions	6	2%	67%	0%	33%
Stress at Work	5	2%	20%	0%	80%
Better Career Progression	5	2%	60%	20%	20%
N/A	5	2%	20%	60%	20%
Better Communication (Staff)	4	2%	50%	25%	25%
Culture / Leadership of Managem	4	2%	0%	75%	25%
More Engagement with Staff	3	1%	67%	0%	33%
Low Staff Morale	3	1%	33%	33%	33%
Better Use of Time	3	1%	67%	33%	0%
To much Bureaucracy	3	1%	33%	0%	67%
Feel able to Raise Concerns	3	1%	67%	0%	33%
Better Communication (Service U	2	1%	100%	0%	0%
Reduce use of Temp Staff	2	1%	50%	0%	50%
Improve Patient Care	2	1%	50%	0%	50%
Working Conditions	2	1%	0%	50%	50%
Reduce Documentation	2	1%	50%	0%	50%
Sickness Policy	2	1%	100%	0%	0%
Transparency	2	1%	50%	0%	50%
Reduce Waiting Times	1	0%	0%	100%	0%
More Beds	1	0%	100%	0%	0%
Service Gaps	1	0%	100%	0%	0%
Bullying and Harrassement	1	0%	100%	0%	0%
Showing Respect / Vaules	1	0%	0%	100%	0%
Job Security	1	0%	100%	0%	0%
Manager's Knowledge	1	0%	0%	100%	0%
Senior Management Structure	1	0%	100%	0%	0%
Improve Access to / Visability of	1	0%	100%	0%	0%
Staff Retention	1	0%	100%	0%	0%
Shift Patterns	1	0%	0%	100%	0%
Improve Information Techonology	1	0%	0%	100%	0%
Equality	1	0%	100%	0%	0%
Weekly Question	1	0%	100%	0%	0%

Specialist Care Group - Work Question					
Theme	Total	% of Responses	Response to Staff FFT Question 1		
			Recomme	Not Recor	Unsure
More Staff	48	17%	60%	19%	21%
No Improvement Suggesti	21	7%	76%	5%	19%
Pay and Conditions	17	6%	35%	41%	24%
Improvements to Environn	14	5%	43%	29%	29%
Better Communication (S	14	5%	57%	29%	14%
More Management Suppo	12	4%	33%	42%	25%
More Praise / Recognitior	12	4%	17%	42%	42%
N/A	11	4%	55%	9%	36%
More Parking / Transport	8	3%	63%	13%	25%
More listening to Staff	8	3%	13%	38%	50%
More Training and Develo	8	3%	75%	25%	0%
Too Much Organisational	8	3%	50%	13%	38%
Not Themable	7	2%	29%	14%	57%
Continue Good Work	7	2%	86%	0%	14%
More Engagement with S	6	2%	33%	17%	383%
Working Conditions	5	2%	0%	40%	60%
Better Use of Time	5	2%	80%	0%	20%
Shift Patterns	5	2%	40%	20%	40%
Culture / Leadership of Ma	5	2%	60%	20%	20%
Look After Staff Wellbeing	4	1%	25%	75%	0%
Showing Respect / Vaule	4	1%	0%	75%	25%
Low Staff Morale	4	1%	25%	50%	25%
Sickness Policy	4	1%	50%	50%	0%
Recruitment and Inductior	4	1%	100%	0%	0%
Better Career Progressior	4	1%	50%	25%	25%
Reduce use of Temp Staf	3	1%	33%	33%	33%
Stress at Work	3	1%	0%	67%	33%
Reduce Documentation	3	1%	67%	33%	0%
Reduce Case Loads	3	1%	0%	33%	67%
Ensure Consistency	3	1%	0%	33%	67%
Equallity	3	1%	100%	0%	0%
Bullying and harrassemer	2	1%	0%	50%	50%
Job Security	2	1%	50%	50%	0%
More Investment / Resour	2	1%	50%	50%	0%
Feel able to Raise Conce	2	1%	100%	0%	0%
Service Gaps	1	0%	100%	0%	0%
Improve Treatments / Pat	1	0%	0%	0%	100%
Update Equipment	1	0%	100%	0%	0%
Manager's Knowledge	1	0%	100%	0%	0%
Senior Management Struc	1	0%	0%	0%	100%
Staff Retention	1	0%	0%	100%	0%
To much Bureaucracy	1	0%	100%	0%	0%
Transparency	1	0%	0%	0%	100%
Improve Information Techc	1	0%	100%	0%	0%
More Team Building Activ	1	0%	100%	0%	0%
Introduce Childcare Facili	1	0%	100%	0%	0%
Staff Benefits	1	0%	100%	0%	0%
Unattainable Targets	1	0%	0%	0%	100%
Better Communication (S	1	0%	100%	0%	0%

Appendix 5

Inpatient Care Group - Treatment Question					
			Response to Staff FFT Question 2		
Theme	Total	% of responses	Recommend	Not Recommend	Unsure
More Staff	22	27%	45%	14%	41%
Improvements to Environment / Facilities	5	6%	80%	20%	0%
Reduce Documentation	4	5%	100%	0%	0%
No Improvement Suggestions	4	5%	25%	25%	50%
Reduce use of Temp Staff	4	5%	75%	0%	25%
Reduce Waiting Times	3	4%	67%	33%	0%
Smoking Ban	3	4%	67%	0%	33%
Better Communication (Staff)	3	4%	100%	0%	0%
More Investment / Resources	3	4%	67%	33%	0%
More Activities (including Social, Recreational and Life Skills)	3	4%	67%	0%	33%
Better Communication (Service Users / Carers / Families)	2	2%	100%	0%	0%
Poor Staff Attitude	2	2%	50%	50%	0%
Improve Treatments / Pathways	2	2%	50%	50%	0%
Better Use of Time	2	2%	50%	0%	50%
N/A	2	2%	100%	0%	0%
Not Themable	2	2%	100%	0%	0%
Senior Management Structure	2	2%	50%	0%	50%
More Beds	1	1%	0%	100%	0%
Look After Staff Wellbeing	1	1%	100%	0%	0%
Improve Patient Care	1	1%	0%	100%	0%
Service Gaps	1	1%	0%	0%	100%
Require Localised Services	1	1%	100%	0%	0%
More Management Support / Supervison	1	1%	100%	0%	0%
Issue with Sickness Policy	1	1%	100%	0%	0%
More Training and Development	1	1%	100%	0%	0%
Ensure Consistency	1	1%	0%	0%	100%
More Service Collaberation (Within Trust)	1	1%	100%	0%	0%
Too Much Organisational Change	1	1%	100%	0%	0%
More Service Collaberation (Outside Trust)	1	1%	100%	0%	0%
Continue Excellent Work	1	1%	100%	0%	0%

Community Care Group - Treatment Question					
			Response to Staff FFT Question 2		
Theme	Total	% of responses	Recommend	Not Recommend	Unsure
More Staff	59	26%	53%	12%	36%
Reduce Waiting Times	33	14%	73%	9%	18%
More Investment / Resources	12	5%	42%	25%	33%
Require Localised Services	8	3%	50%	0%	50%
More Training and Development	8	3%	75%	0%	25%
Improve Patient Care	7	3%	57%	14%	29%
Reduce Documentation	7	3%	57%	14%	29%
Reduce Case Loads	6	3%	67%	33%	0%
Better Use of Time	6	3%	83%	17%	0%
More Parking / Transport	5	2%	80%	0%	20%
No Improvement Suggestions	5	2%	60%	20%	20%
Better Communication (Service Users / Carers / Families)	4	2%	75%	25%	0%
Better Access to Services	4	2%	75%	0%	25%
Improve Treatments / Pathways	4	2%	100%	0%	0%
Ensure Consistency	4	2%	100%	0%	0%
N/A	4	2%	75%	25%	0%
Reduce use of Temp Staff	3	1%	67%	0%	33%
Service Gaps	3	1%	67%	0%	33%
More listening to Staff	3	1%	100%	0%	0%
Too Much Organisational Change	3	1%	67%	0%	33%
Not Themable	3	1%	33%	33%	33%
Facilities	2	1%	50%	0%	50%
(Carer / Families)	2	1%	100%	0%	0%
More Beds	2	1%	50%	0%	50%
Showing Respect / Vaules	2	1%	50%	0%	50%
Supervison	2	1%	100%	0%	0%
More Engagement with Staff	2	1%	100%	0%	0%
More Praise / Recognition	2	1%	50%	50%	0%
Low Staff Morale	2	1%	0%	50%	50%
Better Communication (Staff)	3	1%	67%	0%	33%
Pay and Conditions	2	1%	50%	50%	0%
Improve Information Techonology	2	1%	50%	0%	50%
More Service Collaberation (Within Trust)	2	1%	50%	50%	0%
Appointments	1	0%	100%	0%	0%
Record Keeping	1	0%	100%	0%	0%
Look After Staff Wellbeing	1	0%	0%	0%	100%
Job Secruity	1	0%	0%	0%	100%
Staff Retention	1	0%	100%	0%	0%
Recruitement & Induction	1	0%	0%	0%	100%
Culture / Leadership of Management	1	0%	100%	0%	0%
To much Bureaucracy	1	0%	100%	0%	0%
Too much Training	1	0%	100%	0%	0%
More Consistency for Service Users	1	0%	100%	0%	0%
More Service Collaberation (Outside Trust)	1	0%	100%	0%	0%
Equallity	1	0%	100%	0%	0%
Extend Appointment Hours	1	0%	100%	0%	0%
Continue Good Work	1	0%	100%	0%	0%

Specialist Care Group - Treatment Question					
			Response to Staff FFT Question 2		
Theme	Total	% of Responses	Recommend	Not Recommend	Unsure
More Staff	60	29%	73%	8%	18%
Reduce Waiting Times	16	8%	75%	19%	6%
No Improvement Suggestions	10	5%	90%	0%	10%
Better Use of Time	7	3%	71%	14%	14%
Ensure Consistency	7	3%	43%	29%	29%
Not Themable	6	3%	50%	0%	50%
Better Communication (Service Users / Carers / Families)	5	2%	40%	0%	60%
Improve Patient Care	5	2%	40%	40%	20%
Service Gaps	5	2%	40%	20%	40%
Better Access to Services	5	2%	80%	0%	20%
Improve Treatments / Pathways	5	2%	60%	20%	20%
More Training and Development	5	2%	40%	40%	20%
N/A	5	2%	60%	0%	40%
Improvements to Environment / Facilities	4	2%	75%	0%	25%
More Parking / Transport	4	2%	75%	0%	25%
Reduce Documentation	4	2%	75%	25%	0%
Too Much Organisational Change	4	2%	25%	50%	25%
Reduce use of Temp Staff	3	1%	33%	33%	33%
Better Communication (Staff)	3	1%	67%	33%	0%
Staff Retention	3	1%	67%	33%	0%
More Investment / Resources	3	1%	100%	0%	0%
Reduce Case Loads	3	1%	0%	33%	67%
Improve Information Techonology	3	1%	67%	33%	0%
Continue Good Work	3	1%	100%	0%	0%
Better Involvement & collaboration (Service Users)	2	1%	50%	0%	50%
Better Involvement & collaboration (Carer / Families)	2	1%	50%	50%	0%
Appointments	2	1%	50%	0%	50%
More Activities (including Social, Recreational and Life Skills)	2	1%	100%	0%	0%
Look After Staff Wellbeing	2	1%	100%	0%	0%
More Management Support / Supervison	2	1%	50%	0%	50%
More listening to Staff	2	1%	50%	0%	50%
More Praise / Recognition	2	1%	0%	50%	50%
Pay and Conditions	2	1%	50%	0%	50%
Better Career Progression	2	1%	100%	0%	0%
Food	1	0%	100%	0%	0%
Require Localised Services	1	0%	0%	0%	100%
Showing Respect / Vaules	1	0%	100%	0%	0%
More Engagement with Staff	1	0%	100%	0%	0%
Stress at Work	1	0%	100%	0%	0%
Senior Management Structure	1	0%	0%	0%	100%
To much Bureaucracy	1	0%	100%	0%	0%
Feel able to Raise Concerns	1	0%	0%	100%	0%
More Service Collaberation (Within Trust)	1	0%	0%	0%	100%
More Service Collaberation (Outside Trust)	1	0%	100%	0%	0%
Equallity	1	0%	100%	0%	0%

Appendix 6

Actions being taken by groups/directorates in response to improvement suggestions raised in Q4 16/17

Specialist Care:

Staffing levels
Ongoing issue particular in Autism and Neuro services. This is well known at Group level and features on risk registered. Recruitment and retention remains an ongoing priority at Group and Directorate level. Services are in close contact with other services going through consultative changes to offer alternative employment options whilst remaining committed to central recruitment process as well as bespoke processes aligned to the latter.

Sickness Absence
Sickness absence management will remain a priority for the Directorate. We are accepting of the fact that not all staff agree with the use of the sickness absence policy. Service Managers remain engaged with Workforce in managing sickness absence through direct engagement and sickness clinics. Sickness levels in the Directorate are the lowest they have been for some time.

Management Restructure
Have started to organise staff engagement events to discuss elements of organisational change e.g. Forensic Services. Further events are planned e.g. Addictions.

Management Criticisms
As above.

Community Care:

Increase staff levels
The group continue to monitor staffing levels across the services, and use short term agency to support areas where there is difficulty to recruit, whilst looking at longer term solutions to address workforce gaps in line with developing workforce plans. The group have also developed bespoke recruitment campaigns to address vacancy issues specifically in Northumberland.
We have also recruited a number of agency staff to substantive posts to help stability within services. However, there remains concern around recruitment shortages into medical posts where agency locums are still being utilised.

Too much organisational change
The group continues to embed devolution through the Collective Leadership model and Group Directors continue to engage with staff regarding the new Collective Leadership Model including meetings with those who are indirectly impacted by the upcoming changes. As a Group, we continue to value a continuous improvement approach to developing and improving our services, and continue to involve staff at all levels in relation to this change.

More value placed on staff
The Group have undertaken an exercise to engage with and recruit agency staff into full time employment within the Trust, and recognition at a local level from line managers plays a key part in recognising the value of staff. A number of staff engagement events have taken place which have been heavily attended by staff across community services. The purpose of these events was to engage staff in the strategic planning for future services and to inform staff of work being undertaken across the service.

Reduce waiting times
Various initiatives are ongoing within the Group to help reduce the waiting times for service users including the use of agency staff where required, but also addressing the long term enablers and reviewing pathways. We continue to review skill mix and vacancies on a regular basis in all of the teams. We are currently scoping the use of caseload weighting tools to support the delivery of some services.

Inpatient Care:

The results of the staff FFT are viewed in conjunction with the staff survey information. The themes emerging from both form the basis of the staff health and wellbeing workshop. The first of these workshops are planned for 30th July where discussion will take place on; staffing levels, carer progression and development and the current financial position. An update from this will be provided in the next report.