

TRUST BOARD PUBLIC – MARCH 2015

Agenda Item Number: 56/15  
Enclosure Number: (6)

<b>Subject:</b>	2014 National Staff Survey Results
<b>Prepared by:</b>	Lucy Rutter, Head of Organisational Development
<b>Sponsored by:</b>	Tim Powell, Director of Workforce & OD
<b>Presented by:</b>	Tim Powell, Director of Workforce & OD
<b>Purpose of paper</b>	For Information and discussion
<b>Key points for Trust Board members</b>  <i>Briefly summarise in bullet point format the main points and key issues that the Trust Board members should focus on including conclusions and proposals</i>	<ul style="list-style-type: none"> <li>• Full census undertaken with 3728 responses (54%) in top 20% of acute trusts nationally</li> <li>• Very positive shift</li> <li>• Top 20% in 10 key findings when compared to all acute trusts nationally</li> <li>• Priority areas identified for action</li> <li>• CQUIN target has been met</li> </ul>
<b>Options and decisions required</b>  <i>Clearly identify options that are to be considered and any decisions required</i>	Request for Trust Board to endorse proposals for priority areas of focus for 2015
<b>Next steps / future actions:</b>  <i>Clearly identify what will follow the Trust Board's discussion</i>	Full cascade to organisation via Clinical Service Centre Management Teams and Corporate Function Heads of Service
<b>Consideration of legal issues (including Equality Impact Assessment)?</b>	N/A
<b>Consideration of Public and Patient Involvement and Communications Implications?</b>	N/A

**Links to Portsmouth Hospitals NHS Trust Board Strategic Aims, Assurance Framework/Corporate Risk Register**

<b>Strategic Aim</b>	<b>STRATEGIC AIM 4: STAFF WOULD RECOMMEND THE TRUST AS A PLACE TO WORK AND A PLACE TO RECEIVE TREATMENT</b>
<b>BAF/Corporate Risk Register Reference (if applicable)</b>	15-1415

<b>Risk Description</b>	Insufficient engagement of workforce, implications: <ul style="list-style-type: none"> <li>• Lack of understanding/buy in, and therefore delivery of strategic priorities</li> <li>• Suboptimal delivery of patient care</li> <li>• Poor staff survey results</li> </ul>
<b>CQC Reference</b>	Well-led domain

<b>Committees/Meetings at which paper has been approved:</b>	<b>Date</b>
None	

## Staff Engagement – National NHS Staff Survey 2014

### 1.0 Purpose

The purpose of this brief is to present the Results of the 2014 National NHS Staff Survey conducted in Portsmouth Hospitals NHS Trust between September and December 2014.

### 2.0 Background

This summary is based upon the survey results provided by the Trust's contractor, Quality Health. These results have been forwarded to the Care Quality Commission, who will use them to make judgments, in respect to our declaration under the Care Quality Commission Health check. The NHS Staff Survey is recognised as an important way of ensuring that the views of staff working in the NHS inform local improvements and input in to local and national assessments of quality, safety, and delivery of the NHS Constitution.

### 3.0 2014 Action plan

The 2014 action plan identified from the 2013 staff survey concentrated on seven priority Key Findings (KFs):

- KF4 Effective team working
- KF8 Well structured appraisals
- KF19 Harassment and bullying
- KF22 Ability to contribute to improvements at work
- KF23 Staff feeling valued
- KF24 Recommendation as a place to work and receive treatment
- KF25 Motivation at work

As well as trust wide work streams which developed from the initial Listening into Action 'Big Conversations', Clinical Service Centres identified their own actions that addressed each of the seven priority areas.

The table below outlines each priority KF with key actions, along with the survey results and movement since 2012.

2014 Priority Actions Aligned to Strategic Aim 4 :								
Key Finding	Questions	Description	2013	2012	Movement	Priority Action	2014	Movement from 2013
KF 22	7a-b&d	Ability to contribute to improvements at work	60%	65%	↓	Embed the LiA methodology by putting staff at the centre of change: - involve staff in all service transformation - empower staff to take action - actively encourage innovation - share success stories	67%	↑ 7%
KF 24	12a & c-d	Recommend as a place to work or receive treatment	3.54	3.41	↑	Focus on enhancing communications: - clear structure for cascading key messages - monitor effectiveness - always making patient care the priority	3.71	↑ 0.17
KF 25	5a-c	Motivation at work	3.78	3.76	↑	Understand what motivates the workforce: - understand the people you manage - ask, support and enable	3.87	↑ 0.09
Other Key Areas:								
Key Finding	Questions	Description	2013	2012	Movement	Priority Action		
KF 4	4a-d	Effective Team Working	3.70	3.72	↓	Ensure there are clear team objectives: - aligned to organisational and specialty/dept priorities - effective and regular meetings to review them - use the WT4P toolkit	3.81	↑ 0.11
KF 19 (part of)	21b	Harassment and Bullying	25%	26%	↑	Zero tolerance to harassment and bullying: - ensure procedures are clear - access to reporting and support evident	23%	↓ 2%
KF 8	3a-d	Well Structured Appraisals	36%	34%	↑	Embed new appraisal policy incorporating values: - set clear objectives - meet to discuss them and provide clear feedback - provide support and personal development - audit effectiveness	43%	↑ 7%
KF 23 (part of)	8g	Staff Feeling Valued	38%	36%	↑	Show genuine interest in the team you work with: - ask what is important to them - take the time to listen - support each other	46%	↑ 8%

#### 4.0 2014 Survey results

Portsmouth Hospitals NHS Trust chose to survey all staff in 2014 as in 2013 instead of a sample size only used in previous years. A total of 3728 staff took the opportunity to complete and return a survey, representing a 54% response rate which is in the highest 20% for acute trusts in England and compares with a response rate of 57% in the 2013 survey.

The survey report has been structured around the four pledges and three additional themes in the NHS Constitution. The detailed content of the report has been presented in the form of Key Findings and contains 29 key findings (KFs) compared to 28 in 2013. There is one new KF29 which measures patient experience and one KF(15) has changed and therefore cannot be compared to 2013.

There are two types of Key Finding:

- **Percentage scores** i.e. the percentage of staff giving a particular response to a question or series of questions.
- **Scale summary scores**, calculated by converting staff responses to particular questions into scores. For each of these scale summary scores the minimum score is always 1 and the maximum score is 5.

The overall staff engagement rating increased from the worst 20% in 2013 to average in 2014 when compared with all acute trusts. Each of the KFs that together make up the overall staff engagement measure have improved as outlined in the table below:

	2013 Ranking compared with all acute trusts	2014 Ranking compared to all acute trusts
<b>Overall staff engagement</b>	Lowest (worst) 20%	Average
<b>KF22.</b> Staff ability to contribute towards improvements at work	Lowest (worst) 20%	Average
<b>KF24*</b> . Staff recommendation of the trust as a place to work or receive treatment	Below (worse than) average	Average
<b>KF25.</b> Staff motivation at work	Lowest (worst) 20%	Average

\*KF24 in the above table relates to a CQUIN payment for acute trusts participating in the survey. The overall staff engagement score for 2014 has increased from 3.54 to 3.71 which is above the national average. This is calculated on a scale summary score.

#### **4.1 Summation of 27 KFs compared to 2013 results**

- **15** show improvement
- **12** have remained unchanged
- **0** have deteriorated

#### **4.2 Summation of all 29 KFs compared with all acute trusts nationally**

There are 138 acute trusts participating in the staff survey in England, trusts were placed in order from 1 (the top ranking score) to 138 (the bottom ranking score). Of PHT's key findings;

- **10 KFs are in the best 20%** of all acute trusts
- 7 are above average
- 9 are average
- 3 are below average
- None were found to be in the worst 20%

Comparatively the 2013 staff survey identified Portsmouth Hospitals having only 2 KFs in the top 20% and 7 KFs in the bottom 20%.

### 4.3 Specific questions most improved and declined

Within each KF are a number of questions. When the specific questions are considered, the greatest improved and declined scores have been made as follows:

Top 5 Scores									
Improved				Declined					
	2013	2014	+ ↑		2013	2014	- ↓		
1	Agreed that patient / service user care is the organisation's top priority	62%	72%	10%	1	Staff saying that in an average week they have not worked additional PAID hours over and above the hours for which they are contracted	77%	75%	-2%
2	Agreed that communication between senior management and staff is effective	35%	45%	10%	2	Received health and safety training in the last 12 months	85%	84%	-1%
3	Agreed that senior managers try to involve staff in important decisions	29%	37%	9%	3	Staff saying that in an average week they have not worked additional UNPAID hours over and above the hours for which they are contracted	46%	45%	0%
4	Satisfied with the extent to which the organisation values their work	38%	46%	8%	No further negative movements identified				
5	Agreed that staff are able to make improvements happen in their area of work	47%	55%	8%	No further negative movements identified				

This significant change is extremely positive and reflects the importance placed on our staff engagement agenda, and in particular through the adoption of our Listening into Action programme and supporting work streams. The 2014 survey results indicate a cultural shift supporting strategic aim 4; staff would recommend the trust as a place to work and to receive treatment.

### 5.0 Detailed findings

The table below outlines a summary of all key findings and ranking compared to all acute trust for both 2013 and 2014

Summary of all key findings	Score 2013	Ranking compared to all acute 2013	Score 2014	Ranking compared to all acute 2014
<b>STAFF PLEDGE 1: To provide all staff with clear role, responsibilities and rewarding jobs</b>				
KF1. % of staff feeling satisfied with the quality of work and patient safety they are able to deliver	73	Lowest (worst) 20%	77	Average
KF2. % agreeing that their role makes a difference to patients	89	Lowest (worst) 20%	89	Below (worse than) average
*KF3. Work pressure felt by staff	3.16	Highest (worst) 20%	3.03	Below (better than) average
KF4. Effective team working	3.70	Below (worse than) average	3.81	Highest (best) 20%
*KF5. % working extra hours	62	Lowest (best) 20%	64	Lowest (best) 20%

<b>STAFF PLEDGE 2: To provide all staff with personal development, access to appropriate education and training for their jobs, and line management support to enable them to fulfil their potential</b>				
KF6. % receiving job-relevant training, learning or development in the last 12 months	79	Lowest (worst) 20%	81	Average
KF7. % appraised in last 12 months	85	Average	87	Above (better than) average
KF8. % having well-structured appraisals in last 12 months	36	Below (worse than) average	43	Highest (best) 20%
KF9. Support from immediate managers	3.60	Below (worse than) average	3.75	Highest (best) 20%
<b>STAFF PLEDGE 3: To provide support and opportunities for staff to maintain their health, well-being and safety</b>				
<b>Occupational health and safety</b>				
KF10. % receiving health and safety training in last 12 months	84	Highest (best) 20%	83	Highest (best) 20%
*KF11. % suffering work-related stress in last 12 months	37	Average	33	Lowest (best) 20%
<b>Errors and incidents</b>				
*KF12. % witnessing potentially harmful errors, near misses or incidents in last month	35	Average	34	Average
KF13. % reporting errors, near misses or incidents witnessed in the last month	91	Above (better than) average	90	Below (worse than) average
KF14. Fairness and effectiveness of incident reporting procedures	3.57	Above (better than) average	3.64	Highest (best) 20%
KF15. % agreeing that they would feel secure raising concerns about unsafe clinical practice	–	–	71	Above (better than) average
<b>Violence and harassment</b>				
*KF16. % experiencing physical violence from patients relatives or the public in last 12 months	15	Average	14	Average
*KF17. % experiencing physical violence from staff in the last 12 months	2	Below (better than) average	2	Below (better than) average
*KF18. % experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	30	Average	29	Average
*KF19. % experiencing harassment, bullying or abuse from staff in last 12 months	25	Above (worse than) average	23	Average
<b>Health and well-being</b>				
*KF20. % feeling pressure in last 3 months to attend work when feeling unwell	33	Highest (worst) 20%	27	Above (worse than) average
<b>STAFF PLEDGE 4: To engage staff in decisions that effect them, the services they provide and empower them to put forward ways to deliver better and safer services</b>				
KF21. % reporting good communication between senior management and staff	29	Average	38	Highest (best) 20%
KF22. % able to contribute towards improvements at work	60	Lowest (worst) 20%	67	Average
<b>ADDITIONAL THEME: Staff satisfaction</b>				
KF23. Staff job satisfaction	3.54	Below (worse than) average	3.68	Highest (best) 20%
KF24. Staff recommendation of the trust as a place to work or receive treatment	3.54	Below (worse than) average	3.71	Average
KF25. Staff motivation at work	3.78	Lowest (worst)	3.87	Average

		20%		
<b>ADDITIONAL THEME: Equality and diversity</b>				
KF26. % having equality and diversity training in last 12 months	68	Above (better than) average	70	Above (better than) average
KF27. % believing the trust provides equal opportunities for career progression or promotion	89	Average	89	Above (better than) average
<i>*KF28. % experiencing discrimination at work in last 12 months</i>	11	Above (worse than) average	10	Below (better than) average
<b>ADDITIONAL THEME: Patient experience measures</b>				
<b>Patient/service user experience feedback</b>				
KF29. % agreeing feedback from patients/service users is used to make informed decisions in their directorate/department	–	–	61	Highest (best) 20%

*\*Those KFs in italics are where the lower the score the better*

## 6.0 2015 priority areas for action (in response to our 2014 survey results)

The focus given to our staff engagement agenda has resulted in our workforce feeling more valued, more able to contribute to changes that affect them and a higher number recommending it as a place to work and receive treatment. This positive climate for change will be built upon during 2015 to ensure that we not only maintain our 10 KFs being in the best 20% of all acute trusts but to continue to make further improvements in all areas where we fall below the national average.

It is pleasing to see the overall staff engagement level increase during the last 12 months which provides the opportunity for us to continue to foster a culture of openness and transparency to promote staff led change and provide a first class service for our patients.

However, it is crucial that to maintain this upward direction of travel, we continue to build on our successes and pay much attention to those areas that are still in need of improvement.

Over the coming 12 months we plan to take action to improve in areas such as:

- KF 2 staff agreeing their role makes a difference to patients,
- KF 13 staff reporting errors, near misses and incidents,
- KF 18&19 harassment, bullying and abuse from patients/public and from staff,
- KF 20 pressure to attend work when unwell

And to continue the work on:

- KF 7&8 percentage of staff appraised and having well-structured appraisals
- KF 21 good communication between management and staff
- KF 22 staff contributing to improvements at work
- KF 24 staff recommendation of the trust as a place to work or receive treatment