

**BOARD MEETING**

**29 March 2018**

Paper Title:	Staff Survey 2018
Lead Director:	Sandra Knight
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Agenda Item:	<b>10</b>
Presented For:	Discussion
Paper Category:	Quality

**Executive Summary:**

The purpose of this paper is to:

- Inform the Board of the results of the 2017 staff survey, highlighting key issues and trends.
- Identify and propose areas for corporate improvement actions.
- Outline the approach to communicating the results to staff and agreeing the areas for priority action locally.
- Set out key responsibilities and the mechanism for monitoring and reporting progress.

Particular focus is given to the performance of the Trust in the thirty two key findings which provide a comparison against other similar Trusts nationally.

The Board is asked to consider the report and to support the recommendations.

**Recommendations:**

That the Board:

- receives and comments on the results of the 2017 Staff Survey,
- agrees and supports the areas for focus and action, and
- notes the process for communicating the results and reviewing progress

**Governance/Audit Trail:**

<b>Meetings where this item has previously been discussed</b> <i>(please mark with an X):</i>					
<b>Audit Committee</b>		<b>Quality &amp; Safety Committee</b>		<b>Remuneration Committee</b>	<b>Finance, Business &amp; Investment Committee</b>
<b>Executive Management Team</b>	X	<b>Directors</b>		<b>Chair of Committee Meetings</b>	<b>Mental Health Legislation Committee</b>
<b>Council of Governors</b>					

<b>This report supports the achievement of the following strategic aims of the Trust:</b> <i>(please mark those that apply with an X):</i>	
<b>Quality and Workforce:</b> to provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce	X
<b>Integration and Partnerships:</b> to be influential in the development and delivery of new models of care locally and more widely across West Yorkshire and Harrogate STP	
<b>Sustainability and Growth:</b> to maintain our financial viability whilst actively seeking appropriate new business opportunities	

<b>This report supports the achievement of the following Regulatory Requirements:</b> <i>(please mark those that apply with an X):</i>	
<b>Safe:</b> People who use our services are protected from abuse and avoidable harm	
<b>Caring:</b> Staff involve people who use our services and treat them with compassion, kindness, dignity and respect	
<b>Responsive:</b> Services are organised to meet the needs of people who use our services	
<b>Effective:</b> Care, treatment and support achieves good outcomes, helps to maintain quality of life people who use our services and is based on the best available evidence.	
<b>Well Led:</b> The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture.	X
<b>NHSI Single Oversight Framework</b>	

## 2017 Staff Survey Results

### 1. Background and Context

Staff satisfaction and engagement are key to delivering high quality, values-based care and are directly associated with patient experience and outcomes. Staff are our key resource, the engagement, satisfaction and health and well-being of the workforce are critical to optimal performance and enabling achievement of our vision and strategic objectives. The staff survey is an important means of providing workforce assurance and highlighting areas for improvement actions.

The annual staff survey, conducted every year between September and November, is an important way of measuring staff satisfaction and is a requirement of all NHS organisations.

Research studies have demonstrated a direct correlation between staff satisfaction and patient experience and outcomes. The staff engagement score (made up of 3 out of the 32 Key Findings from the survey forms a key element of the CQC's measures linked to registration and provides a source of workforce assurance. The Trust has scored as below for the three key findings:

- Staff recommendation of the Trust as a place to work or receive treatment (KF1) – (average)
- Staff motivation at work (KF4) – (below/worse than average) and
- Percentage able to contribute towards improvements at work (KF7) – (below/worse than average)

Trusts cannot be considered for an outstanding CQC assessment if they score below average for KF1.

For 2017 there has been an updated data cleansing process and response rate calculation. This means that results published this year are not directly comparable to results published in previous years. Data from previous years that has been published as part of the 2017 survey has been re-calculated where necessary to enable fair historical comparisons.

Picker administers the survey for the Trust to ensure governance and anonymity of responses.

Reports have been received which look at:

- **Key Findings Report**  
Key Findings are based on the composite results of a number of questions, set nationally, which when combined give a result for a topic area e.g. motivation, satisfaction. The Key Findings are used to benchmark similar organisations nationally by the CQC. Results are expressed in one of two ways- either as a percentage score or on a scale of 1 to 5.
- **Staff Engagement Report**  
This report details the ten questions which make up the overall staff engagement score and compares localities, departments and directorates to the Trust average.

- **Locality Reports**

Sixty nine locality reports have been produced which provide a detailed report of the staff survey results at department / team level.

For performance benchmarking purposes the Trust has been placed nationally within the combined Mental Health/Learning Disabilities/Community sector.

## **2. Results**

This year there are 32 Key Findings structured under nine themes set out in **Appendix 2**. Benchmark comparisons are expressed, as Better than Average, Average or Worse than Average.

The Trust is:

- Better than average on 6 Key Findings
- Average on 11 Key Findings
- Worse than average on 15 Key Findings

These results are based on a 54.4% response rate. This is above average for Mental Health/Learning Disabilities/Community Trusts in England (which was 45%) and an increase in our response rate for 2016 which was 50%. For 2017 a census was used rather than a sample so all staff employed by the Trust had the opportunity to complete the questionnaire of which 1,582 staff did so. Most staff were able to complete the survey online which significantly reduced the cost of administering the survey. Some services such as Hotel services and Estates were given paper based questionnaires. A census was also used in 2016.

Please refer to **Appendix 1** (attached) for further information around the key findings and how the Trust has performed against other similar Trusts (categorised as combined Mental Health/Learning Disabilities/Community sector).

### **2.1 Areas where we compare most favourably**

The combined mental health/learning disability and community trusts in England (of which there are 29) were placed in order from 1 (the top ranking score) to 29 (the bottom ranking score), for each of the 32 key findings, Bradford District Care NHS Foundation Trust's five highest ranking scores are as follows:

- KF15 Percentage of staff satisfied with the opportunities for flexible working (Working patterns), 63% an increase from 57% in 2016, against an average of 58% - the higher the score the better,
- KF19 Organisation and management interest in and action on health and wellbeing (Appraisals & support for development), 3.82 an increase from 3.79 in 2016, against an average of 3.7, the higher the score the better,
- KF30 Fairness and effectiveness of procedures for reporting errors, near misses and incidents (Errors & incidents), 3.85 an increase from 3.83 in 2016, against an average of 2.76 – the higher the score the better,
- KF6 Percentage of staff reporting good communication between senior management and staff (Managers), 40% an increase from 36% in 2016, against an average of 34% - the higher the score the better,

- KF11 Percentage of staff appraised in last 12 months (Appraisals & support for development), 94% remains the same as 2016, against an average of 92% - the higher the score the better.

In relation to staff engagement the overall score has reduced (3.73 compared to 3.75 in 2016), National Average is 3.79 (the higher the score the better) which makes us below average. The three key findings that make up the engagement score (KF1, 4 & 7) show that the Trust is average for one of them: staff recommendation of the organisation as a place to work or receive treatment, and worse than average on the other two key findings, staff motivation at work and staff ability to contribute towards improvements at work.

## **2.2 Areas where we compare least favourably**

- KF18 Percentage of staff attending work in the last 3 months despite feeling unwell because they felt pressure from their manager, colleagues or themselves (Health & Wellbeing), 58% an increase from 57% in 2016, against an average of 53% - the lower the score the better,
- KF17 Percentage of staff feeling unwell due to work related stress in the last 12 months (Health & Wellbeing), 46% an increase from 44% in 2016, against an average of 40% - the lower the score the better,
- KF10 Support from immediate managers (Managers), 3.83 an increase from 3.8, against an average of 3.89 – the higher the score the better,
- KF7 Percentage of staff able to contribute towards improvements at work (Job satisfaction) 69% an increase from 68% in 2016, against an average of 73% - the higher the score the better,
- KF20 Percentage of staff experiencing discrimination at work in the last 12 months (Equality & Diversity), 14% remains the same as 2016, against an average of 11% - the lower the score the better.

## **2.3 Largest local changes since the 2016 Survey**

### **2.3.1 Where staff experience has improved**

- KF15 Percentage of staff satisfied with the opportunities for flexible working patterns (Working Patterns) 63% an increase from 57%, against an average of 58% - the higher the score the better,
- KF 6 Percentage of staff reporting good communication between senior management and staff (Managers) 40%, an increase from 36%, against an average of 34% - the higher score the better.

### **2.3.2 Where staff experience has deteriorated**

- KF14 Staff satisfaction with resourcing and support (Job Satisfaction), 3.27 a decrease from 3.33, against an average of 3.33 – the higher the score the better.

## **3. Update on 2017 actions**

In 2017 the main focus corporately was predominantly focused on increasing visible leadership and ensuring presence of leaders alongside staff, listening, communicating and appreciating staff's contribution, seeking and responding to feedback and encouraging their ideas and solutions. Effort was also focused on increasing access to the staff bank and offering more flexibility including improved provisions and rates of bank pay. The

actions taken and improvements in the staff survey scores this year linked to these areas are as follows:

### 3.1 Managers

- Increased leadership visibility relating directly to KF6 Percentage reporting good communication between senior management and staff (Managers) 40% from 36%, against an average of 34%. Actions taken included:
  - Board walkabouts
  - Board on the road
  - Refocusing the Board Quality and Safety visits on staff experiences of working at the Trust.
  - Chat2Nicola email/blog
  - Director of nursing focus groups for new nursing recruits to improve staff experience, retention and motivation
  - Improving support and presence of managers in the ward environment. Improving visibility of ward managers, Clinical managers and Service Managers within In-patients
  - Open door sessions planned by managers to hear what staff have to say , which are well utilised
  - Whole service days in adult physical health to engage with service changes, allow discussion and staff feedback

### 3.2 Increased flexible working patterns

Following feedback sessions undertaken by members of the Executive team with staff bank workers the following improvements were made to staff bank:

- permanent staff will be paid their substantive pay rate when they work a staff bank shift on the same band, within community, inpatient clinical and clinical support services,
- 'bank only workers' - those workers who do not work substantively for the Trust – will receive an annual increment on the anniversary of their start date, when they complete 488 working hours on staff bank each year, from their start date,
- staff are able to undertake staff bank shifts when they are on annual leave on the basis that they take their statutory minimum holiday entitlement during each annual leave year.

### 3.3 Job Satisfaction

- Able to contribute towards improvements at work relating to KF7 Percentage of staff able to contribute towards improvements at work – 69% from 68% in 2016, against an average of 73%. Actions included:
    - *i*Care which became operational on 1 April 2017. The programme was designed to harness staff skills and ideas and to inspire a spirit of enterprise across BDCFT; giving staff an opportunity to share passion and energy for new ideas and offering guidance and support to make these ideas a reality.
- i*Care offers individuals a flexible framework of support with corporate commitment to explore the potential for creativity and innovation to generate income, improve patient experience or improve the quality of care we provide. From the outset the aim was to make *i*Care as inclusive and friendly as possible and for operational staff and service users/carers to play a key role in the programme.

With this in mind the iCare network was set up as the main body to assess ideas in an informal way, and decide the support needed to take them forward. Alongside the network the iCare team attend operational and corporate team meetings to raise awareness of iCare and give one to one support to ideas assessment and development. iCare works closely with the Business Support and Improvement Team and also facilitates access to external specialist advice to help staff develop their ideas.

During the period April 2017 to February 2018 iCare received 35 ideas, this is a very positive start. The iCare brand is becoming well known and we have had regular contact from a cross section of staff and managers across most Directorates and Business Units in the Trust. It is clear that the initiative has enthused staff and highlights how keen staff are to make a difference and to change things for the better often working on their idea alongside their 'day job'.

A review of iCare will be presented to FBIC in March 2018.

- De-briefs following incidents to provide support to staff, ensure incidents are reported and improvements made and captured.

### **3.4 Health and wellbeing**

Increased focus on health and wellbeing relating to KF15 Organisation and management interest in and action on health and wellbeing 71% from 69% in 2016, against an average of 71%. Actions included:-

- A number of roadshows held at various sites to promote the range of health and wellbeing initiatives and support available,
- 100 day pedometer challenge, which took place from April to June 2017,
- Promotion and availability of healthy eating options.
- Introduction of Sleepio app – a CBT programme to support staff with chronic sleep problems as well as access to a website promoting good sleep practices available to all staff,
- Sourcing of a wide range of discounts for staff in a number of areas e.g. health, exercise, cinema etc.,
- Pre-retirement and financial planning workshops held every quarter which have proved very popular,
- Launch of an extensive health and wellbeing toolkit aimed at both staff and managers encompassing a wide range of information and signposting to further support and information,
- Weight loss challenge,
- Evaluation of health and wellbeing activities which had a high response rate from staff and elicited very positive feedback.

### **4. Proposed areas for action in 2018**

The above improvements demonstrate that focusing in depth on a small number of important areas achieves more than trying to address too many areas at once.

## 4.1 Corporate actions

The approach for 2018 will be the same as 2017 i.e. to focus on three key actions. In light of the feedback from staff it is proposed to focus on the following three areas.

- **Leadership (KF 10)** – ensuring that senior managers from Executive, Deputy Directors, Heads of Service and Service managers are engaged with team leaders
  - to support them in their role, appreciate and listen to the pressures and challenges they face, seeking their ideas for improvement and acting on them wherever possible
  - to review hotspots where staff engagement scores are low and focus support and development in these areas this will include coaching, mentoring, buddying, training and other improvement actions
  - Sharing examples and case studies reflecting great practice including leading in an agile work environment
- **Bullying and harassment/discrimination (KF20)** Taking focused actions in this area including
  - With the Staff Networks, communicating widely the Trust's strong stance on bullying, harassment and discrimination, relaunching the Zero Tolerance policy and policy on the Management of Racial and Other Types of Discrimination and Harassment of Staff by Service Users, Carers and Relatives so that staff and managers are aware of the support available and their responsibilities in this area
  - Contacting high performing Trusts in order to learn from them and adopt best practice and working with other agencies e.g. police to address bullying and harassment
  - Developing training for managers and staff in dealing with bullying behaviours, harassment and discrimination
  - Extending the range of bullying and harassment contact officers to include clinical staff and ensuring clinical supervision supports staff facing difficult behaviours
- **Staff engagement and involvement (KF7)** to include:
  - Involving and training staff in service improvement methodology, enabling staff to have a voice and put their ideas forward so that everyone has the opportunity to influence positive changes. Using Crowdsourcing to reach out in real time to staff across the Trust, on their ideas and thoughts regarding improvements and key issues and linking this to i-Care and the further development of this scheme, identifying iCare champions across the Trust

These areas of particular focus are also aimed at supporting discussions and actions to improve staff health and well-being and addressing concerns identified through the survey around levels of resourcing and support – the area of most significant deterioration in the Trust from the 2016 results.

## 4.2 Business Units

Each Business Unit received their results direct to Deputy Directors week commencing 5th March 2018 with the following expectations:

- Deputy Directors to ensure all team leaders are aware of the availability and location of their reports;
- Each team leader to access their team report where they have one and meet with their respective teams to share, discuss and agree 2 or 3 key actions in line with the timescale detailed in section 5.

## 5. Communication plan

	<b>Date</b>	<b>Action</b>
EMT	w/c 5/3/18	Discussion paper on key area of corporate focus/action
Business Units	w/c 5/3/18	Results sent to Deputy Directors for dissemination and discussion
Connect	6 <sup>th</sup> March 2018	Results shared through Connect
Governors	27 March	Discussion of the staff survey results and follow up actions and areas of corporate focus
Board	w/c 29/3/18	Staff Survey Public Board paper for discussion and agreement of actions and next steps
Staff Partnership Forum	Thursday 5 <sup>th</sup> April 2018	Discussion of Trust-wide results, action plan and the role of the Staff Partnership Forum in supporting actions and communications
Staff Networks	April/May 2018 onwards	Results by protected characteristics shared with staff networks( wherever there is sufficient response/data) for discussion and review against the key corporate actions and action plan linked to the Equality, Diversity and Inclusion Strategy and Action Plan including the role of the networks in supporting communications and actions implementation
Business Unit Monthly Performance meetings (BUPMs)	May 2018	Update on progress in communicating and responding to the local staff survey results -Core part of the Workforce Section of the BUPMs

## Appendix 2: Nine Themes

Key findings were previously structured around staff pledges, now structured under the following 9 themes:

- Appraisals and support for development
- Equality and diversity
- Errors and incidents
- Health and wellbeing
- Working patterns
- Job satisfaction
- Managers
- Patient care & experience
- Violence, harassment & bullying

Theme	Key Factor	Descriptor
Appraisals and support for development	11	Percentage of staff appraised in last 12 months
	12	Quality of appraisals
	13	Quality of non-mandatory training, learning or development
Equality and diversity	20	Percentage of staff experiencing discrimination at work in the last 12 months
	21	Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion
Errors and incidents	28	Percentage of staff witnessing potentially harmful errors, near misses or incidents in last month
	29	Percentage of staff reporting potentially harmful errors, near misses or incidents in last month
	30	Fairness and effectiveness of procedures for reporting errors, near misses and incidents
	31	Staff confidence and security in reporting unsafe clinical practice
Health and wellbeing	17	Percentage of staff feeling unwell due to work related stress in last 12 months
	18	Percentage of staff attending work in the last 3 months despite feeling unwell because they felt pressure from their manager, colleagues or themselves
	19	Organisation and management interest in and action on health and wellbeing
Working patterns	15	Percentage of staff satisfied with the opportunities for flexible working patterns
	16	Percentage of staff working extra hours
Job satisfaction	1	Staff recommendation of the organisation as a place to work or receive treatment
	4	Staff motivation at work

<b>Theme</b>	<b>Key Factor</b>	<b>Descriptor</b>
	7	Percentage of staff able to contribute towards improvements at work
	8	Staff satisfaction with level of responsibility and involvement
	9	Effective team working
	14	Staff satisfaction with resourcing and support
Managers	5	Recognition and value of staff by managers and the organisation
	6	Percentage of staff reporting good communication between senior management and staff
	10	Support from immediate managers
Patient care & experience	2	Staff satisfaction with the quality of work and care they are able to deliver
	3	Percentage of staff agreeing that their role makes a difference to patients/service users
	32	Effective use of patient/service user feedback
Violence, harassment & bullying	22	Percentage of staff experiencing physical violence from patients, relatives or the public in last 12 months
	23	Percentage of staff experiencing physical violence from staff in last 12 months
	24	Percentage of staff/colleagues reporting most recent experience of violence
	25	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months
	26	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months
	27	Percentage of staff/colleagues reporting most recent experience of harassment, bullying or abuse