

**Agenda item 4iii**

<b>Report to:</b>	<b>Trust Board</b>	<b>Date: 7 March 2019</b>
<b>Report from:</b>	<b>Director of Workforce and OD</b>	
<b>Principal Objective/ Strategy and Title</b>	<b>WORKFORCE: National Staff Survey Results 2018</b>	
<b>Board Assurance Framework Entries</b>	<b>Workforce</b>	
<b>Regulatory Requirement</b>	<b>Well Led</b>	
<b>Equality Considerations</b>	<b>None believed to apply</b>	
<b>Key Risks</b>	<ul style="list-style-type: none"> <li>• <b>Impact on recruitment and retention of staff</b></li> <li>• <b>Impact on staff engagement</b></li> <li>• <b>Impact on patient safety</b></li> </ul>	
<b>For:</b>	<b>Note</b>	

**1. INTRODUCTION**

- 1.1 The National NHS Staff Survey for 2018 was undertaken throughout the NHS in October – December 2018. The process was administered on behalf of the Trust by Pickers. We undertook a full survey of all staff and for the first time used an electronic questionnaire.
- 1.2 The response rate from the Trust staff was 54%, 985 responses, which was slightly above the average response rate of 53% for our peer group and an improvement on last year's response rate of 46%.
- 1.3 The survey results were published on Tuesday 26 February. We have been provided with a report that details our results benchmarked against our peer group of 16 acute specialist Trusts and the trend in our results over the last five years. This paper is based on this report and is an initial view of the results. A full analysis of the results will be undertaken during March 2019.
- 1.4 How the staff survey results are reported nationally has changed. Previously the results were organised into 32 Key Findings grouped into 9 themes. This year the questions have been categorised into 10 themes:
- Equality, diversity and inclusivity
  - Health and welfare
  - Morale
  - Quality of appraisals
  - Quality of care
  - Safety culture
  - Staff engagement
  - Immediate manager
  - Safe environment: bullying and harassment
  - Safe environment: violence

- 1.5 For each theme the report identifies:
- Our response and the trend in our responses and our benchmark group over the last 5 years.
  - For each theme and also each individual question the best, worst and average response.
- 1.6 Attached as Appendix 1 and 2 are copies of the Acute Specialist Trust Benchmark Report and a Directorate Report.

## 2. Trust results

- 2.1 The comparison of our results with our peer benchmark group is as follows:

Our scores were average in the following 3 themes:

- Immediate manager
- Safe environment: bullying and harassment
- Safe environment: violence

We are below average in 7 themes:

- Equality, diversity and inclusivity
- Health and welfare
- Morale
- Quality of appraisals
- Quality of care
- Safety culture
- Staff engagement

- 2.2 Compared to the national results our scores are above the average in all the themes with the exception of Quality of Care where our score is the same as the national average and the following where we are below the average:
- Morale
  - Quality of appraisals

- 2.3 The comparison of our results with our results last year is as follows:

There was a statistically significant reduction in our scores from last year in 2 themes:

- Equality, diversity and inclusivity
- Health and well-being

There were 2 themes with no reduction in scores from last year:

- Quality of care
- Safe environment: violence

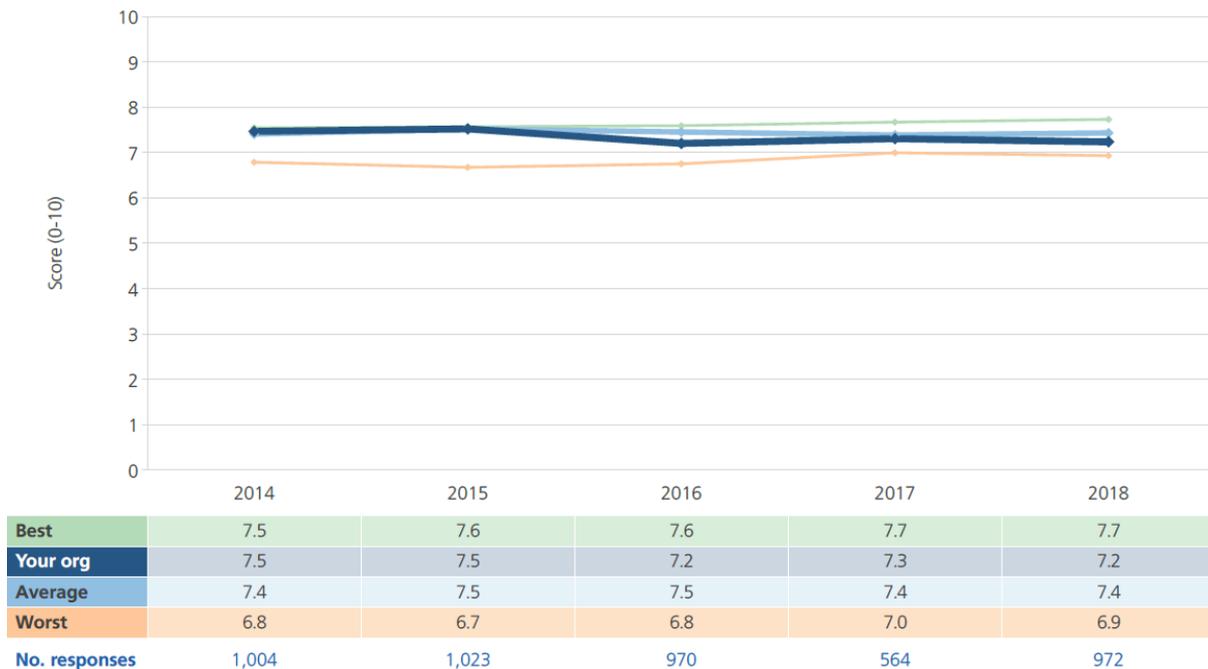
In 6 themes our score reduced from last year but it was not a statistically significant change.

- Immediate manager
- Safe environment: bullying and harassment
- Morale
- Quality of appraisals
- Safety culture
- Staff engagement

- 2.4 There was a slight reduction in our overall engagement score (see table below) and we are below the national average for our benchmark group, which remained static

from last year. The deterioration was as a result of a decrease in the score for the question on time passing quickly when at work. There was an improving trend in the score on staff reporting that they look forward to going to work and on staff reporting feeling enthusiastic about their job.

We remain about the national average score of 7.0.



2.5 The table below compares our results for the recommender questions with our peer average and the national average:

	Place to be Treated	Place to Work
Royal Papworth	88.6%	63.2%
Peer Group Average	89.7%	72.1%
National Average	70.9%	61.5%

2.6 The key areas of concern are the statistically significant reduction in our scores in the themes of Equality, Diversity and Inclusivity and Health and Well-being.

In relation to Equality, Diversity and Inclusivity the initial review of results shows that:

- The trend in our benchmark group was static
- We had been on the average for our benchmark group until 2018 when we moved below the average
- Our deterioration was driven by a reduction in all 3 areas of questioning:
  - Career progression (90.5%>85.7%)
  - Discrimination from patients/ service users (4.2%>5%)
  - Discrimination by manager/ team leave (7.1%>9%)
- The increase in discrimination was primarily related to an increase in discrimination on the grounds of race and also an increase on the grounds of disability.

In relation to Health and Well-being:

- The trend in our benchmark group was static
- We had been on the national average until 2018 when we moved below the average
- Our deterioration was driven by reduction in all 3 areas of questioning:
  - Opportunities for flexible working (55.9%>53.4%)
  - Positive action on health and well-being (deteriorating trend on this over last 4 years) (34.6%>26.3%)
  - Staff experiencing msk problems (22.9%>26.5%)

2.7 The Directorate Report, Appendix 2, provides an analysis of the results for each Directorate compared to the Trust average score. The areas with scores notably above the average are:

- Thoracic Wards
- PSS
- Day Wards

The areas with scores notably below the average in a number of themes are:

- Critical Care
- Clinical Administration
- Cardiac/Echo Physiology

### **3 NEXT STEPS**

3.1 Analysis of the results to identify key trends and interactions and review the results broken down by staff group and Directorate will be undertaken. In particular we will be analysing the themes of Equality, Diversity and Inclusivity and Health and Wellbeing to understand the drivers for the reduction in our results.

3.2 Providing feedback to managers and staff on the outcome of the survey and the actions taken by the Trust in response is very important. They will be presented at the Our Move briefing on Monday 4<sup>th</sup> March and cascaded to managers following this. Directorate leaders will cascade and discuss the results with their teams. We will also review and discuss the results with key groups such as the Joint Staff Council, Staff Engagement Representatives, the BAME Network, the Equality, Diversity and Inclusivity Steering Group and Staff Governors.

3.3 These results are an important part of the information available to the Trust on staff engagement levels and areas where staff experience of working for the Trust is not satisfactory. We have a range of workplans in operation or development linked to retention and the move. We will review these plans in light of these results, in collaboration with the groups identified in 3.2 above, and in particular the WRES action plan. The results will be an important part of the diagnostic phase of the Culture and Leadership Programme that is in development.

#### **Recommendation:**

**The Trust Board is requested to note the staff survey results for 2018, and the proposed steps to be taken to analyse and communicate the results.**