

Agenda item 4.i

Report to:	Board of Directors	Date: 7 April 2021
Report from:	Director of Workforce and Organisational Development	
Principal Objective/Strategy:	The purpose of this paper is provide the Board with an overview of the 2021 Staff Survey Results and the National 2021 WRES Report.	
Title:	Report of the Director of Workforce and Organisational Development	
Board Assurance Framework Entries:	Recruitment Retention Staff Engagement	
Regulatory Requirement:	Well-Led	
Equality Considerations:	Public Sector Equality Duty Workforce Race Equality Scheme	
Key Risks:	<ul style="list-style-type: none"> • Turnover increases as a result of poor staff engagement • We are unable to recruitment sufficient staff to meet safe staffing levels • Staff engagement is negatively impacted by poor people practices 	
For:	Information	

2021 Staff Survey

1. Introduction

1.1 The 2021 Staff Survey was undertaken October – December 2021. It was an electronic survey open to all staff. 1460 staff completed the survey which represents 70% of our workforce. This is an improvement on last year’s response rate of 65%. The national average response rate for our peer group was 54% and the NHS average was 48%. This high response rates means we can be confident that the results provide good insight into staffs experience and views on working at Royal Papworth

1.2 Our results are benchmarked against a peer group of 12 other acute specialist organisations and are presented in the context of the best, average and worst results. Data are weighted to allow for fair comparisons between organisations. Given the very different impact of COVID-19 on the specialist hospitals, as a consequence of the services they provide, this makes comparison with our peer groups less helpful than in previous years. As an example, more than 58% of our staff reported having worked on a Covid-19 ward compared to just over a 30% average for our specialist trust peer group. Similarly, 34% of our staff said they had been redeployed at some point during the pandemic, and the same was true for just 16.6% of other specialist trust staff. It is helpful therefore to also look at the overall national scores and trends.

1.3 This year the way the questions are themed has changed to align them to the People Promise which is made up of seven elements:

- We are compassionate and inclusive
- We are recognised and rewarded
- We each a voice that counts
- We are safe and healthy
- We are always learning
- We work flexibly
- We are a team

There are two further themes which have been reported in previous years:

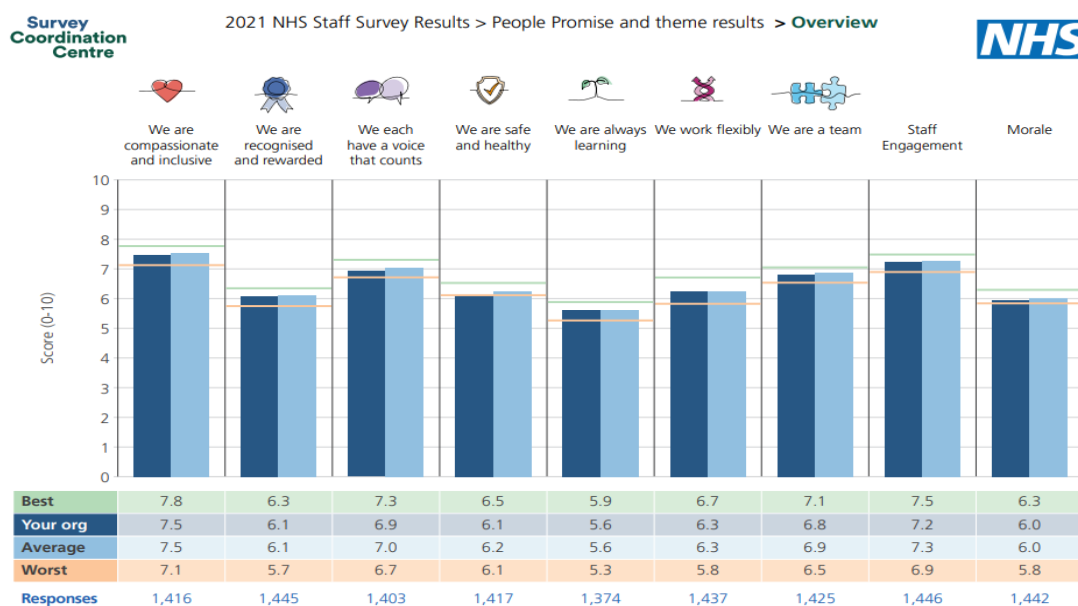
- Staff Engagement
- Morale

All themes are scored on a scale that ranges from 0 (worst) to 10 (best).

1.4 The national staff survey results are indicative of the pressure that staff have experienced over the last year and the impact this has had on their working experience and health and wellbeing. There was significant deterioration in all the areas that the survey covers, for example the staff recommender score as a place to work reduced by 7%, the staff recommender score as a place to be treated reduced by 6.4% and the percentage of staff saying that their organisation had sufficient staff reduced by 11.2%. The proportion of staff who felt unwell as a result of work-related stress in the last 12 months rose to 46.8% This was an increase of 2.8% from the 2020 figure (44.0%) and continued a trend: the figure has risen each year since 2017, when 38.4% of staff reported work-related stress. Almost one-in-three (31.1%) say they “often think about leaving” their organisation – an increase of 4.6% points vs the 26.5% recorded in 2020. And one-in-six (16.6%) say they will leave their organisation “as soon as I can find another job” – a 2.7% point increase from 2020.

2. Our Survey Results

2.1 The high level summary of our 2021 results by theme is detailed in the chart below:



2.2 The table below presents the results of significance testing conducted on the theme scores calculated in both 2020 and 2021*. The restructuring of the themes against the People Promise elements means that it is not possible to identify whether there has been

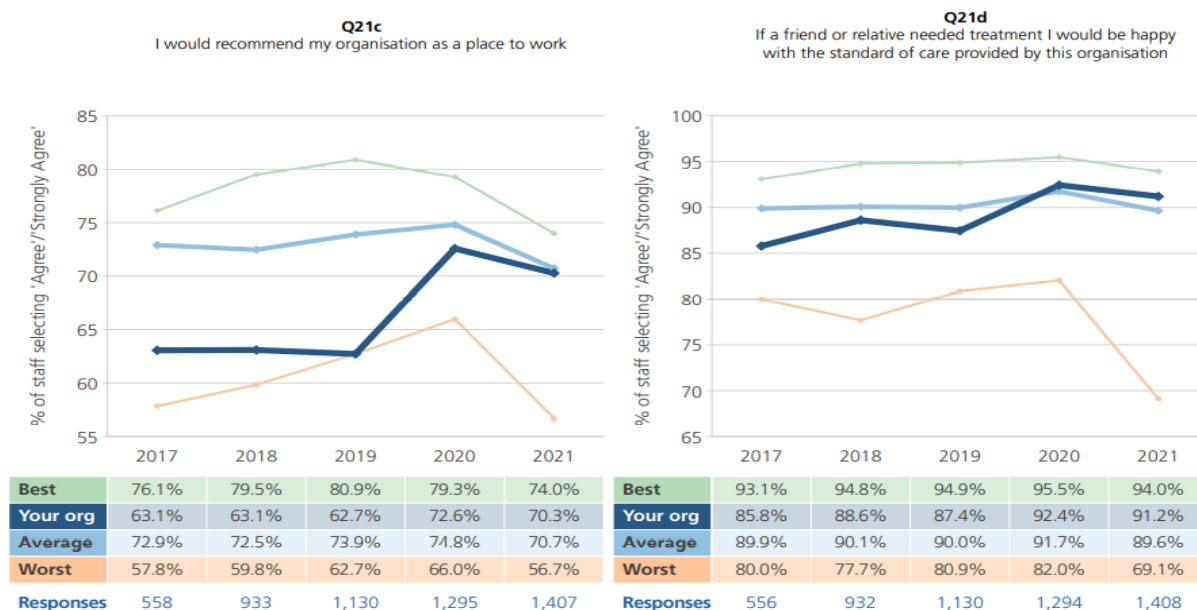
statistically significant changes in those themes. The table details the organisation's theme scores for both years for the two elements that are not linked to the People Promise.

Themes	2020 score	2020 respondents	2021 score	2021 respondents	Statistically significant change?
Staff Engagement	7.3	1319	7.2	1446	Not significant
Morale	6.1	1311	6.0	1442	↓

* Statistical significance is tested using a two-tailed t-test with a 95% level of confidence

2.3 Of the nine survey themes our scores, compared to our peer group, were average in five themes and below average in four themes (for these themes are results are only 0.1 below average). This is an improvement from 2020 when we were below average in nine of the ten themes and above average in one theme. We saw improvements in a number of areas and where our results have deteriorated this deterioration has generally been less than that seen by our peer group. However the impact of the last year is evident in many areas of the survey.

2.4 The Trust's recommender score as a place to work has reduced from 72.6% to 70.3%. This is less of a reduction than the trends in our peer group. It remains above the national average of 59.4% which saw a 7% decline from 2020. Our recommender score as a place to be treated also reduced from 92.4% to 91.2% but remains above the average for our peer group (89.6%) and significantly above the national average (67.8%).



2.5 Examples of areas where our results showed improvement from last year and/or we compare well against peer/national comparison are:

- **We are compassionate and inclusive:** We scored above our peer average and the national average for having a compassionate culture.
- **Morale:** The percentage of staff who feel that their manager encourages them at work improved by 3.6% and is now above our peer average
- **We are safe and healthy.** 68.5% of staff either agreed or strongly agreed that the trust takes positive action on health and wellbeing. This was the highest score in our peer group and compares well against the national average of 57%.
- **We are always learning:** We scored well for appraisals helping staff to do their job, having clear objectives for work, and people feeling their work is valued.
- **We work flexibly:** Our score for staff feeling that they have the opportunity for flexible working patterns is above our peer and the national average.

- **We are a team:** We scored above average for the support line managers give, and got our highest scores ever around encouragement and clear feedback.
- **We each have a voice that counts:** We continued for the fourth year in a row to see an improvement in the number of staff feeling safe to raise concerns about unsafe clinical practice.

2.6 There are two areas of the results that are of particular concern; burnout and workforce race equality. The 2021 Survey includes, for the first time, a set of questions based on the Copenhagen Burnout Inventory. As this is a new measure in the survey there is no comparative data with last year. Our results clearly illustrate that our staff are tired. We scored worst within our specialist trust peers group, though were in line with the national average, for burnout and exhaustion. Staff are also working a high number of additional paid hours. These results further strengthen our resolve to ensure that staff are encouraged to take regular breaks from work, are supported to have good mental health, and that we focus on working smarter not harder in meeting the needs of our patients.

2.7 The results of the Workforce Race Equality Standard (WRES) are both equally disappointing and concerning. Although we have seen some improvements in the four key questions, our scores remain significantly below our peers and the national scores and have seen a further deterioration in some indicators:

- **Bullying and harassment from the public:** there was a significant increase in the percentage of staff from a BAME background reporting experiencing discrimination from the public. We scored 3.7%% higher than the peer average albeit lower than the national average. This deterioration is in line with the feedback we have had over the last year with staff reporting greater disrespect from patients and their relatives but it is particularly upsetting to see that our staff from a BAME background have borne the brunt of this.
- **Discrimination from colleagues and managers:** we saw an increase in the percentage of staff from a BAME background reporting discrimination, and we remain 8% worse than the specialist peer group average, and 7.7% worse than the national average.
- **Equality of opportunities in career progression and development:** we saw an improvement in the reported experience of staff from a BAME background, however our BAME staff experience remains 4.2% worse than the specialist peer group average, 4.1% than the national average, and significantly worse than staff who are white.
- **Harassment and bullying from colleagues:** we saw an improvement in the reported experience of staff from a BAME background, however our BAME staff experience remains 3.5% worse than the specialist peer group average, and significantly worse than staff who are white.

2.8 The results reinforce the importance of initiatives such as our Reciprocal Mentoring Programme, Cultural Ambassadors, the Compassionate and Collective Line Managers Programme and the Values and Behaviour Workshops. These are all in the early stages of implementation and we must re-double our efforts to support their success. We are extremely grateful to our staff Networks - who we will continue to work with to improve the working experience of staff. The Compassionate and Collective Leadership Programme will be the main vehicle for addressing the areas for improvement highlighted in the results. There is a high degree of overlap between the priority areas identified in Phase 1 of the Programme and the themes in the survey responses.

2.9 There are wide variation between the results in different Divisions/Directorates with Critical Care and Clinical Administration having significantly below average scores in a number of the themes. The Nursing Clinical Team, Thoracic and Ambulatory Care and R&D were above average across all the themes. The results are being shared with staff

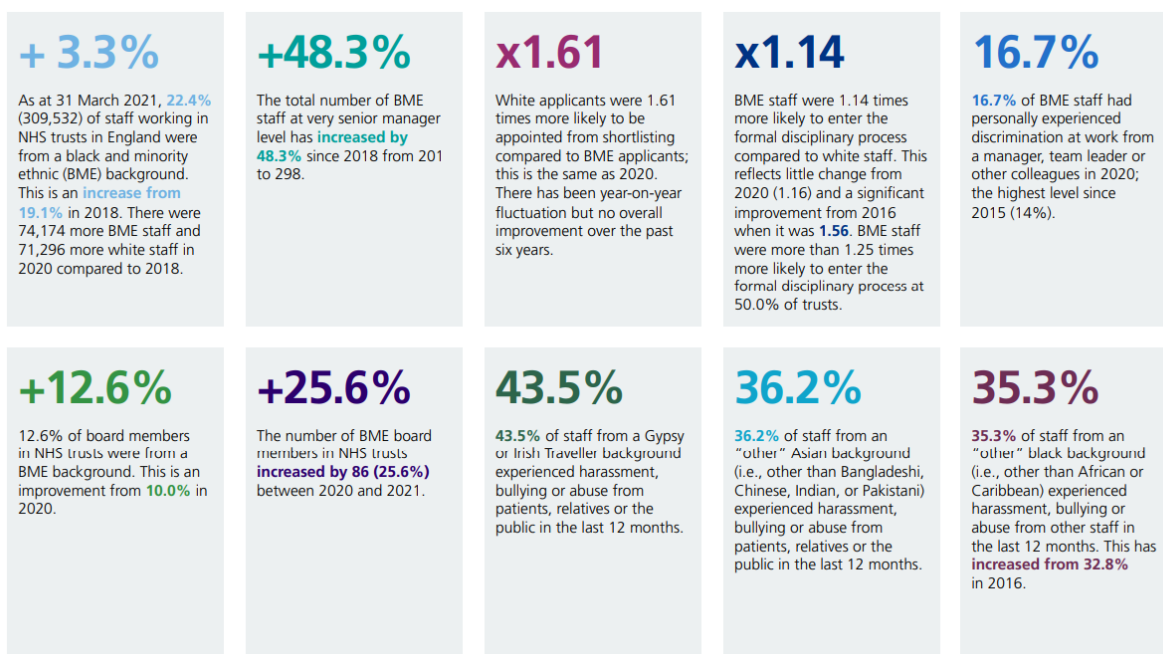
and leadership teams to discuss and consider how it informs their practices and approaches to staff engagement and wellbeing.

3. Workforce Race Equality Standard 2020 Data Analysis Report for NHS Trusts

3.1 The Workforce Race Equality Standard programme was established in 2015. It requires NHS organisations to report against nine indicators of race equality; and supports continuous improvement through robust action planning to tackle the root causes of discrimination. Since its introduction in 2015, the WRES programme has been providing direction and tailored support to the NHS, intended to enable organisations to continuously improve performance in this area.

3.2 The 2020 WRES report is based on workforce data as at March 2021 and the 2020 Staff Survey results so is in effect a look back at the position 12 months ago. There have been a number of improvements in the report including the data being split by gender and stratified by workforce type and by ethnicity. This data report presents the overall national picture. We will be provided with an individual report based on our data which will inform our action plan for the year ahead. This report will also include time trend data and will illustrate the disparity ratio, a metric that helps organisations assess how their staff are represented in progression through the seniority ranks. This provides a numerical indicator which can be used to identify the success of actions taken with regard to inclusive recruitment practices in pursuit of the Model Employer goals. We have been invited by the national WRES team to be an 'Exemplar by Intent' organisation who they will work with to undertake project-type bespoke actions. This is a great opportunity for the Trust and we are looking forward to seeing how this can support us to drive real sustained improvement. We do not have a confirmed date yet of when this individual report will be provided.

3.3 The full report is in the reference pack. The national headlines are:



3.4 In last year's report Royal Papworth Hospital was in the least well performing category for Indicators 7 & 8 i.e. staff believing that the organisation provides equality of opportunity in career progression and promotion and staff personally experiencing discrimination from a line manager or colleague. In 2021 we do not fall into the least well performing category for any of the standards.

3.5 Working with the BAME Network, we will review and update our WRES action plan in light of the recently published 2021 staff survey results.

Recommendation:

The Board of Directors is requested:

- **To note and discuss the content of this report**