

Reporting to:	Trust Board, 25 June 2015
Title	Our Commitments: Responding to the Staff Survey 2014
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Previously considered by	
Executive Summary	<p>The 2014 Staff Survey results do not represent the employment experience that the organisation aspires to. Whilst year on year improvements can be seen across a number of areas they are not significant enough for the Board to have confidence that the experience of our employees is what it should be.</p> <p>In previous years the Board has reviewed the results and asked that three – four areas are considered by Care Groups. This has usually been accompanied by an action plan. On reviewing this approach it has not delivered the improvements we want or need to see in employment experience. Therefore a fresh view has been taken and the development of Our Commitments has happened.</p> <p>This paper provides an overview of what has happened since April and proposes three commitments for the organisation to focus upon.</p> <p>The Workforce Committee will focus on Our Commitments including a deep dive with one Care Group to provide assurance.</p>
Strategic Priorities <input type="checkbox"/> Quality and Safety <input type="checkbox"/> Healthcare Standards <input checked="" type="checkbox"/> People and Innovation <input type="checkbox"/> Community and Partnership <input type="checkbox"/> Financial Strength	Operational Objectives
Board Assurance Framework (BAF) Risks	<input type="checkbox"/> If we do not deliver safe care then patients may suffer avoidable harm and poor clinical outcomes and experience <input type="checkbox"/> If we do not implement our falls prevention strategy then patients may suffer serious injury <input type="checkbox"/> Risk to sustainability of clinical services due to potential shortages of key clinical staff <input type="checkbox"/> If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards <input type="checkbox"/> If we do not have a clear clinical service vision then we may not deliver the best services to patients <input checked="" type="checkbox"/> If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve <input type="checkbox"/> If we are unable to resolve our (historic) shortfall in liquidity and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing

	estate and equipment
Care Quality Commission (CQC) Domains	<input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Effective <input type="checkbox"/> Caring <input type="checkbox"/> Responsive <input type="checkbox"/> Well led
<input type="checkbox"/> Receive <input type="checkbox"/> Review <input checked="" type="checkbox"/> Note <input type="checkbox"/> Approve	Recommendation To NOTE and APPROVE the approach of Our Commitments

YOUR SAY

Our Commitments

Background

The 2014 Staff Survey results do not represent the employment experience that the organisation aspires to. Whilst year on year improvements can be seen across a number of areas they are not significant enough for the Board to have confidence that the experience of our employees is what it should be.

In previous years the Board has reviewed the results and asked that three – four areas are considered by Care Groups. This has usually been accompanied by an action plan. On reviewing this approach it has not delivered the improvements we want or need to see in employment experience. Therefore a fresh view has been taken and the development of Our Commitments has happened.

The Approach

Our Commitments has been designed to engage staff if what they believe will make a difference to their employment experience. The focus has moved from specifics of the staff survey such as Health and Safety training to asking staff what would make you feel better about work.

Each Care Group has shaped their approach to suit their individual teams but also the type of service they provide. Therefore some teams have held conversations, others have held focused team meetings, and some facilitated sessions. The consistency has been the outcomes, as an organisation there is rich feedback about making a difference for staff. The feedback is diverse and represents a variety of longer term actions and some shorter actions that will deliver a responsive response from the organisation.

Our Commitments

Our commitments have supported the response to this year's survey to be informed by our staff. Each team in the Trust have committed to the actions they will take to improve their employment experience. The flow of feedback following the staff survey has been reversed as illustrated below.

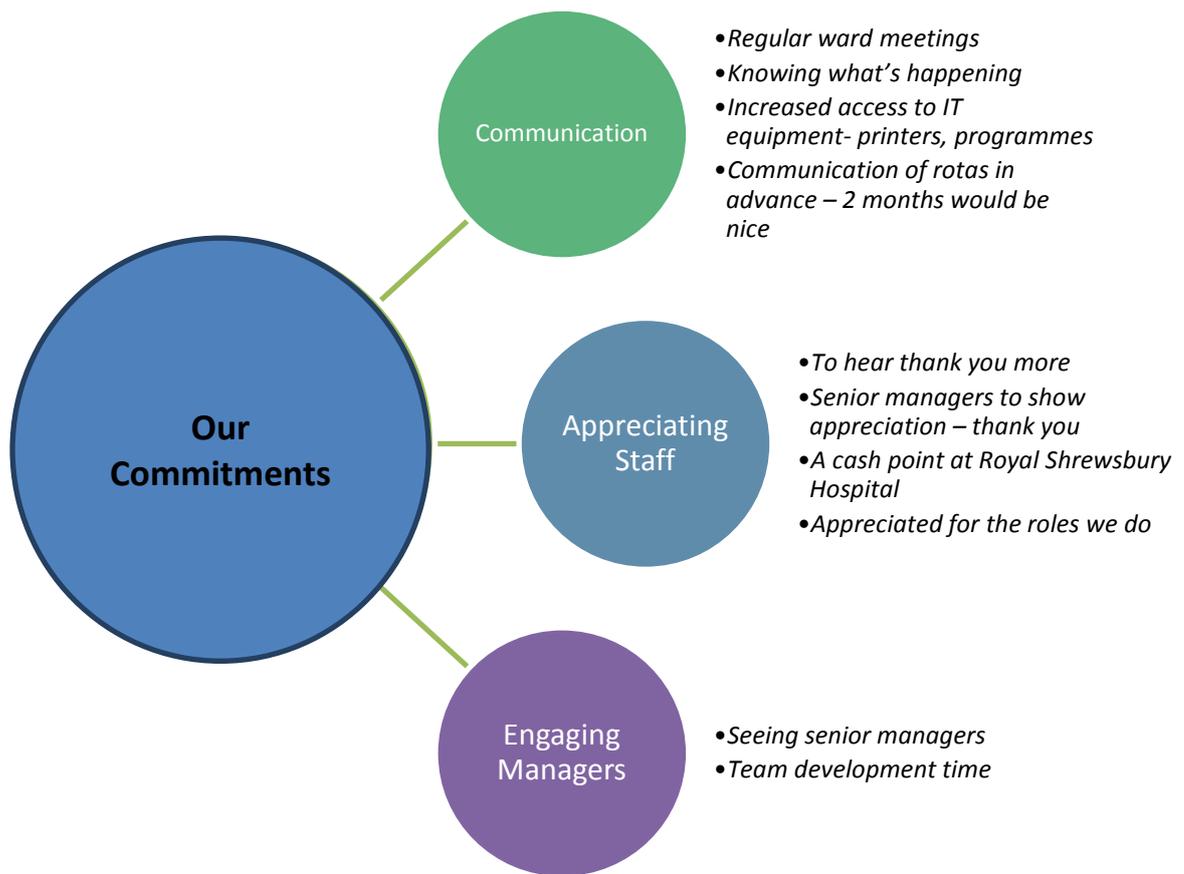
Figure 1. Flow of feedback to inform Our Commitments



The Feedback has been considered from Care Groups and Corporate teams, which has informed the three commitments for the Trust as a whole are:

1. Communication
2. Appreciating Staff
3. Engaging Managers

It is important that the above are not seen as statements; within each one an in-depth understanding has been developed to ensure that meaningful improvements can be achieved in each area.



Against the three areas the organisation commits to

1. Develop Effective communication that ensures everyone is informed about the organisation.
2. To make 'Thank you' an everyday occurrence in our Trust
3. Senior managers will further develop staff engagement
(Appendix 1 illustrates the feedback by Care Group/Directorate)

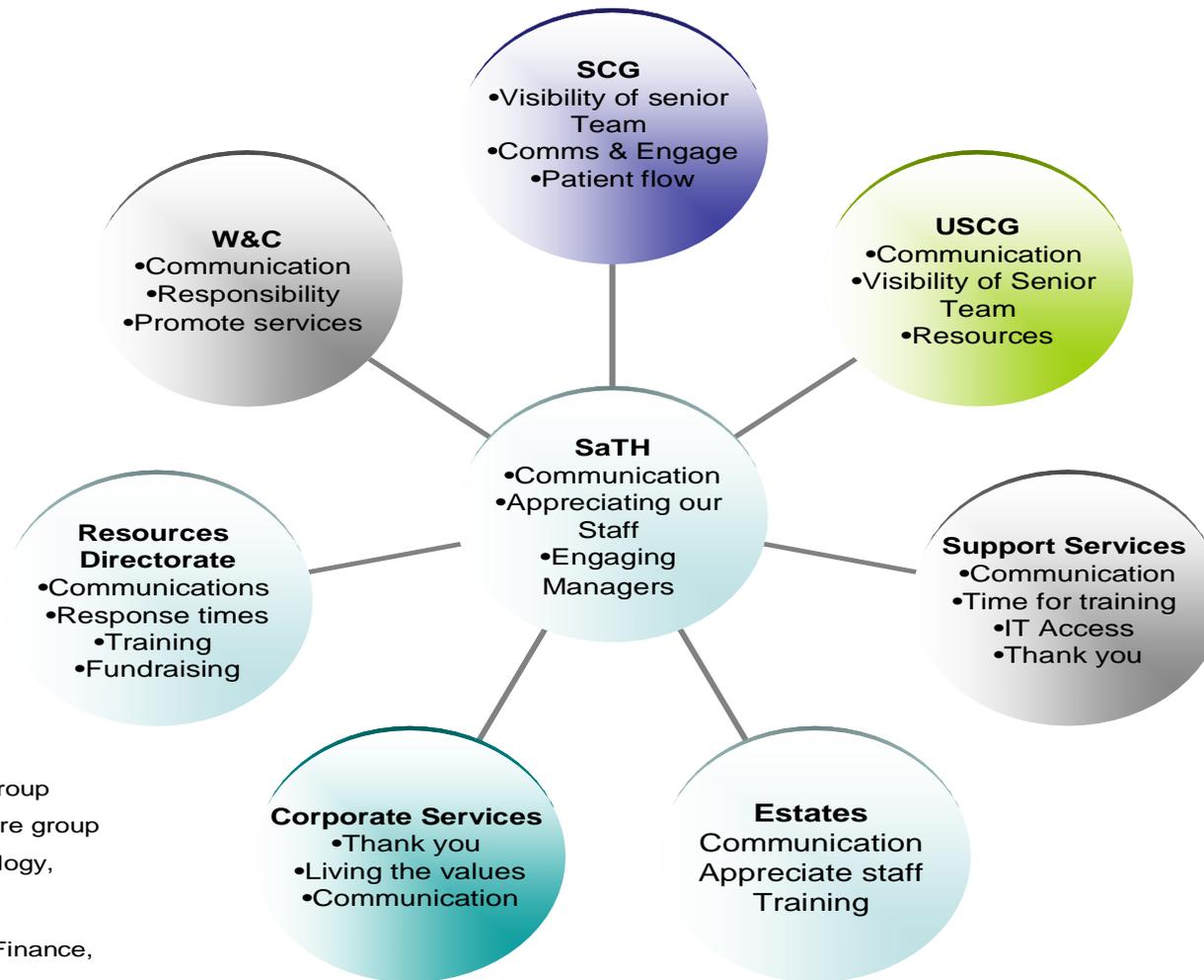
Next Steps

Our commitments place responsibility with teams and their managers to take forward the identified actions. It is imperative that staff see and participate in change following feedback; this will ensure confidence that the organisation and its leaders are listening and acting.

Care Groups have already identified their approaches to ensuring change happens, this will be monitored through monthly confirm and challenge meetings.

In addition the three commitments for the organisation will be further developed by the Workforce Director who will provide monthly updates to Workforce Committee, including a deep dive with one Care Group.

The 2015 Staff Survey will provide a useful assessment of this process.



Key

SCG – Scheduled Care group

USCG – Unscheduled Care group

Support Services – Radiology, Therapies, Pathology and Pharmacy

Resources Directorate – Finance, Information, IT Medical Engineering and Facilities.

Corporate Services – Governance, Strategy, Communications and Workforce.

