THE SHREWSBURY AND TELFORD HOSPITAL NHS TRUST
TRUST BOARD – June 2011
NHS STAFF SURVEY ACTION PLAN 2011/12

SPONSOR	Julia Clarke Director of Compliance & Risk Management
STRATEGIC DOMAIN	D: Learning and Growth
ORGANISATIONAL OBJECTIVE	D6: Adopt behaviours that match our core values
EXECUTIVE SUMMARY	The NHS National Staff Survey is conducted each year by the Care Quality Commission (CQC) between September and January by appointing an independent contractor to carry out a survey of 850 randomly selected staff in all NHS organisations. The results are sent back anonymously to the contractor who analyses the data, which the CQC publish in March. The full survey is available from www.cqc.org.uk/_db/_documents/NHS_staff_survey_2010_RXW_full_201103164221.pdf For the third year, the survey report has been structured around the four pledges to staff in the NHS Constitution which was published in January 2009. The Staff Survey is a key piece of evidence used by the CQC in the Quality & Risk Profiles (QRPs) which they publish monthly for all NHS organisations, and are used as an assurance source by the CQC, SHA and other regulators. Currently SaTH is poorly performing in Outcome 14 – Suitability of Staffing with a status of Amber, which reflects deterioration from the April position following the publication of the Staff Survey results. This is currently SaTH's poorest performing area in the QRP. In 2010 SaTH had 23 areas in which there were no statistically significant changes in scores since the 2009 survey. Four areas had improved significantly since 2009 and four areas had significantly deteriorated. The Trust was in the top performing 20% of Trusts in two areas and bottom performing Trusts in 18 areas. 7 new questions were asked. **It should be noted that differences in Trust performance year on year are statistically significant, however the results do not identify whether the national top and bottom 20% scores are statistically different from the average performance.** The overall Trust survey results and results by Centre have been issued to Centre Chiefs, Heads of Corporate Departments and their HR leads. The Trust's Strategic Plan for 2011/12, includes a number of corporate initiatives, which are designed to improve staff engagement, empowerment and organisational development. This report summarises the survey results and maps them to the key organisational initiatives to create an overarching core document, which can replicated in local action plans in the Centres and corporate departments. The attached action plan plots some of the transactional steps towards transformational change. The key focus will be through adopting Listening into Action LiA as a way of doing things differently to move to a mindset where we all take responsibility and share ownership. LiA provides a toolkit and route map to deliver this and has been adopted in 70 NHS Trusts to date.

KEY FACTS	**This year the Trust's top four ranking scores were**: • KF21 - % of staff reporting errors, near misses or incidents witnessed in the last month (the Trust's score was in the best 20% of acute Trusts) • KF19 - % of staff saying hand washing materials are always available (the Trust's score was in the best 20% of acute Trusts) • KF12 - % of staff appraised in past 12 months (the Trust's score was above average) ▪ KF38 - % of staff experiencing discrimination at work in the last 12 months (the Trust's score was below (better) than average). **This year the Trust's bottom four ranking scores were:** ▪ KF 17 - % of staff suffering work-related injury in last 12 months (the Trust's score was in the worst 20% of acute Trusts) ▪ KF20 - % of staff witnessing potentially harmful errors, near misses or incidents in the last month (the Trust's score was in the worst 20% of acute Trusts) ▪ KF30 - % of staff reporting good communication between senior management and staff (the Trust's score was in the worst 20% of acute Trusts) ▪ KF2 – % of staff agreeing that their role makes a difference to patients (the Trust's score was in the worst 20% of acute Trusts).
RECOMMENDATION(S)	The Trust Board is asked to: 1. **NOTE** the contents of this paper and 2. **AGREE** the corporate action plan and monitor performance through Hospital Executive Committee (HEC) using an assurance framework.

Contribution to Inspection, Registration, Performance and Delivery

Risks and Assurance	The key risk arising from this survey, which compares poorly to other acute trusts, is the potential impact of this in terms of workforce recruitment, morale and retention and the impact this has on patient services. There is a clear link between workforce morale and patient outcomes (Borrill and West (2002)) and poor staff survey results have been linked to poor performing NHS Trusts (e.g. Mid Staffs) Regulators also use this survey as a source of assurance, which for SaTH would provide negative or limited assurance and trigger a 'flag' for possible further review.
Contribution to Key Performance Indicators	A motivated workforce contributes to the achievement of clinical and workforce performance indicators.
Compliance with Clinical and other Governance Requirements	The Trust is required to conduct an annual Staff Opinion Survey in accordance with national standards.

Impact Assessment

Quality	The principal aim of the survey is to gather information that will help the Trust to improve the working lives of their staff and so help to provide better care for patients.
Financial	Not applicable
Workforce	The principal aim of the survey is to gather information that will help the Trust to improve the working lives of their staff and so help to provide better care for patients.
Legislation and Policy	Not applicable
Equality and Diversity	The survey is impact assessed nationally.
Communication and Marketing	A communication plan was implemented over the survey period (see below).

Engagement and Decision-Making Process

A communication plan was implemented over the survey period, which included the displaying of posters in key staff areas, global e-mails to all Trust staff, Staff Newsletter articles and Team Brief.   Response rates were regularly checked on-line from October 2010 enabling areas reflecting poor response rates to be targeted.

Each of the planned programmes will develop engagement and communication plans

1.   Background and Introduction

1.1   The NHS National Staff Survey is conducted each year between September and January. An independent contractor was appointed by the Care Quality Commission (CQC) to survey a random sample of 850 staff across the Trust. The results were returned anonymously and analysed, with results issued by the CQC in March. These results are used to inform the CQC's Quality & Risk Profile (QRP) for the Trust which is updated monthly, and can be used by regulators as a source of assurance, positive or negative.

Research conducted in the UK and US during the 1990s showed positive support for the links between how people are managed and performance of the organisations where they work. The results from the research show a strong association between the sophistication and extensiveness of staff management practices in NHS hospitals and lower patient mortality.[1]

For the third year, the survey report has been structured around the four pledges to staff in the NHS Constitution which was published in January 2009. A summary of the Trust results is attached at Appendix 1.

The NHS staff survey is key in supporting NHS organisations to assess how they are delivering the staff elements of the NHS Constitution as well as providing staff with the opportunity to provide their views on working in the NHS and the areas they would like to see improved. It is divided into 6 key areas, namely:

• **Staff Pledge 1**: To provide all staff with clear roles and responsibilities and rewarding jobs for teams and individuals that make a difference to patients, their families and carers and communities.

• **Staff Pledge 2**: To provide all staff with personal development, access to appropriate training for their jobs and line management support to succeed.

• **Staff Pledge 3**: To provide support and opportunities for staff to maintain their health, well-being and safety.

• **Staff Pledge 4**: To engage staff in decisions that affect them and the services they provide, individually, through representative organisations and through local partnership working arrangements. All staff will be empowered to put forward ways to deliver better and safer services for patients and their families.
• **Additional theme**: Staff satisfaction
• **Additional theme**: Equality and diversity

The proposed organisational Staff Survey action plan template is structured to take account of these 6 key areas and is focused around key trust initiatives to ensure consistency of message.

The Trust Strategy for 2011/12 is balanced between four strategic domains, namely to:

1. Focus on what it will take to create financial strength to enable us to **invest in the quality of our service**.
2. Focus on what we have to do to **meet the needs of our patients and GPs**.
3. Focus on what internal processes that we must excel at if we are to improve the **quality and safety** of our care.
4. Focus on the **learning and growth** that will prepare us for the future through developing our staff, the technology we use and the innovation we create.

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[1] Borrill C and West M Effective HRM and lower patient mortality 2002 Aston Business School
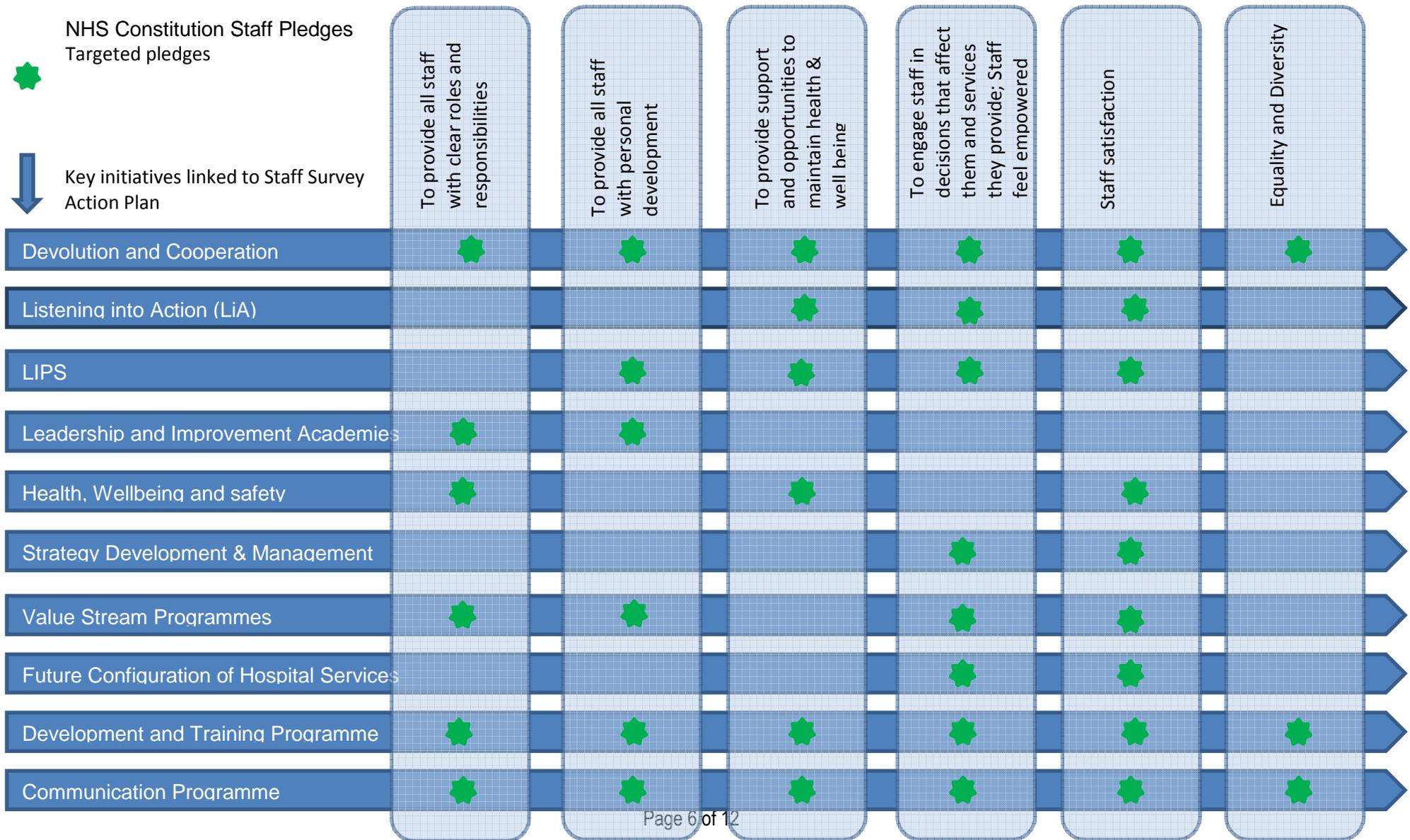
2. Results

A summary of the Trust's results is attached at Appendix 1.   They key findings are summarised below.

| | STAFF SURVEY REPORT 2010 (issued March 2011) | STAFF PLEDGES | | | | Themes | |
| | | 1 | 2 | 3 | 4 | | |
		Clear roles & responsibilities;	Personal development,	health and wellbeing	Engaged & empowered	Staff satisfaction	Equality diversity
	Best scores						
KF21	% of staff reporting errors, near misses or incidents witnessed in the last month (in best 20% of Trusts)			green			
KF19	% of staff saying hand washing materials are always available (in best 20% of Trusts)			green			
KF12	% of staff appraised in past 12 months (above national average)		green				
KF38	% of staff experiencing discrimination at work in the last 12 months (better than national average)						green
	Worst scores						
KF17	% of staff suffering work-related injury in the last 12 months (in worst 20% of Trusts)			red			
KF20	% of staff witnessing potentially harmful error, near misses or incidents in the last 12 months (in worst 20%)			red			
KF30	% of staff reporting good communication between senior management and staff (in worst 20% of Trusts)				red		
KF2	% of staff agreeing that their role makes a difference to patients (in worst 20% of Trusts)	red					
	Statistically significant changes to results since 2009 survey						
KF5	Work pressure felt by staff	red				red	
KF7	Trust commitment to worklife balance	green					
KF15	Support from immediate managers		green				
KF28	Impact of health & wellbeing on ability to perform work or daily activities			red			
KF33	Staff intention to leave jobs					red	
KF34	Staff recommendation of the trust as a place to work or receive treatment					green	
KF35	Staff motivation at work					red	
KF36	% of staff having equality & diversity training in last 12 months					green	

3. Our Approach

The Trust's approach to build on our current performance across these 6 areas (as measured by the staff survey) is embraced by the Trust Strategy, described in our **'Plan on a Page'** and the **'Pyramid'**. Delivery of core components of the Trust's strategy alongside effective human resource management and communications will, together, deliver improved performance against these Pledges as illustrated in the graphic below:

NHS Constitution Staff Pledges
✹ Targeted pledges

⬇ Key initiatives linked to Staff Survey Action Plan

Initiative	To provide all staff with clear roles and responsibilities	To provide all staff with personal development	To provide support and opportunities to maintain health & well being	To engage staff in decisions that affect them and services they provide; Staff feel empowered	Staff satisfaction	Equality and Diversity
Devolution and Cooperation	✹	✹	✹	✹	✹	✹
Listening into Action (LiA)			✹	✹	✹	
LIPS		✹	✹	✹	✹	
Leadership and Improvement Academies	✹	✹				
Health, Wellbeing and safety	✹		✹		✹	
Strategy Development & Management				✹	✹	
Value Stream Programmes	✹	✹		✹	✹	
Future Configuration of Hospital Services				✹	✹	
Development and Training Programme	✹	✹	✹	✹	✹	✹
Communication Programme	✹	✹	✹	✹	✹	✹

4. Action Plan
The Trust's **Transformation Programme** and associated Programme Management approach, currently being developed with PriceWaterhouseCoopers, will encompass our action planned response to the Staff Survey. This approach will provide the necessary governance for delivery and performance management across a number of specific work streams which will directly contribute to our improved performance against the Staff Pledges.

4.1 Corporate Action Plan
Our Trust wide Staff Survey action plan is summarised below. This will form the framework within which Centres and Trust wide Support Departments will be invited to determine their own specific action plans. These actions will then form part of the Trust's overall Transformation Programme. (Any actions not yet due have been left blank). This was presented to the Hospital Executive Committee in June along with a template for local action plans to be developed. The key focus will be through adopting Listening into Action LiA as a way of doing things differently to move to a mindset where we all take responsibility and share ownership. Doing things differently as doing the same old things will get the same old results.   LiA provides a toolkit and route map to deliver this and has been adopted in 70 NHS Trusts to date.

	Actions Linked to Broader Initiatives	Lead	Timescale / Progress	RAG
1	**Devolution and Cooperation**			
1.1	Appoint Centre Chiefs and Value Stream Leads in to new posts	A Cairns	Complete	🟩
1.2	1:1 coaching for CC and VSL for support and behavioural alignment	AS Hopper	Ongoing	🟩
1.3	Recruitment process to establish Centre sub structures	T Cookson	End August	
1.4	Commence managers' meetings chaired by COO	T Cookson	End Sept	
1.5	Deliver Centre Team coaching to support in the formative stages of their development	AS Hopper	Aug - Dec	
2	**Listening in to Action (LiA)**			
	Engaging and empowering frontline staff at all levels to work differently through top level commitment to fundamental and sustainable change (rather than 'another initiative'). Changes the way we do change with focus on outcomes, based on pull not push and focuses on high-energy teamwork with unwavering focus. Delivered through four main phases			
2.1	Phase 1 – COMMITTING: CEO and senior team agreeing outcomes, identify Sponsor group and core team, launching fundamental shift campaign, LiA lead and support, schedule of events, baseline position, communication of key messages	A Cairns	July -Sept	
2.2	Phase 2 – ENGAGING: Setting up LiA environment, Staff conversations led by CEO with 400/500 staff to identify key issues and what really matters to staff through 5/6 conversation sessions to prioritise actions and communicate actions	A Cairns	September - December	
2.3	Phase 3 – MOBILISING & EMPOWERING: First 10 and enabling projects to get people on board to drive change through teams with senior leadership to move into action the top issues prioritised through engagement exercise	A Cairns	Jan 2012 – May 2012	
2.4	Phase 4 – EMBEDDING: LiA becomes the 'way we do things around here'. Get to grips with the organisational implications. Engage new LiA teams to adopt and spread LiA as sustainable way of continuously improving services for benefit of patients, staff and Trust. Look at working with LHE to improve processes and create groundswell of adoption	A Cairns	June 2012	

3	**Leading Improvement in Patient Safety (LIPS)**			
3.1	Launch event	N Tufft	Complete	🟩
3.2	LIPS - week: Train circa 100 staff in LIPS techniques and identify 9 -10 projects	N Tufft	June	🟩
3.3	LIPS schemes initiation, implementation and monitoring	Scheme PM	Ongoing	
4	**Learning and Teaching Organisation: Leadership Academy**			
4.1	Develop and consult on Leadership Academy Strategy	M Beales	End June	🟩
4.2	Tendering process to appoint preferred partner	M Beales	End Sept	
4.3	Programmes developed and approved	M Beales	End Sept	
4.4	Centre Chiefs and VSL Leadership Training	M Beales	End October	
4.5	Coaching and mentoring development programme started (wave 1)	M Beales	End October	
5	**Learning and Teaching Organisation: Improvement Academy**			
5.1	Develop programmes for 3 target levels: • Improvement awareness • Business Improvement techniques • Leading Improvement	P Gordon	September	
6	**Health, Wellbeing and Safety Programme**			
6.1	Trust Awards Ceremony	A Osborne	September	
6.2	Occupational Health Wellbeing events eg roadshows	J Clarke	September	
6.3	Review security provision	J Clarke	October	
6.4	Improve access to staff counselling service (Boorman report)	J Clarke	Complete	🟩
6.5	Implement Trust-wide staff stress risk assessment	J Clarke	Jan-March 2012	
7	**Strategy Development and Management**			
7.1	Development and publication of the Trust Strategy: Plan on a Page	D Vogler	Complete	🟩
7.2	Development and publication of the Trust Business Plan	D Vogler	Complete	🟩
7.3	Facilitate Centre specific clinical strategy / business plan development sessions for 2011-12	D Vogler	Complete	🟩
7.4	Facilitate Centre specific clinical strategy / business plan development sessions for 2012-13	D Vogler	October	
7.5	Organise strategic event twice yearly for Board and Centre Chiefs/VSL	J Clarke	Sept/March	
8	**Value Streams**			
8.1	Centre Chief engagement: Publish work plans and present to TLT	VSL	Complete	🟩
8.2	Staff engagement events and projects such as: ▪ TPoT (Productive Operating Theatre) workshop and ongoing programme	Value Stream Leads	Ongoing	🟧

	• Tele-health Care Supplier options • Specific ward based projects			
8.3	Value Stream newsletters published for staff engagement, information sharing and action initiation	VSL	Ongoing	
9	**Communication Programme**			
9.1	Review Trust internal engagement and communications programme to address key priorities from LiA and staff survey and support delivery of Trust programme outlined in s3. Key features to include;			
9.2	Programme of staff engagement and empowerment linked to LIPs and LiA initiatives	A Osborne	Ongoing	
9.3	Fortnightly CEO briefings for clinical and operational managers	A Cairns	Ongoing	
9.4	Monthly open staff briefing sessions for clinical and operational managers	A Osborne	Ongoing	
9.5	Engagement and communication plans developed for each project within the Trust's transformation project	A Osborne with Project leads	September 2011	
9.6	Structured programme of staff events and conferences encompassing LiA, LIPS, Quality priorities and other programme priorities	A Osborne	March 2012	
9.7	Every Director/Centre Chief/VSL/Senior manager to be allocated ward(s) for daily contact	T Cookson	August 2011	
10	**Future Configuration of Hospital Services Programme**			
10.1	Staff engagement in planning work for OBC	D Vogler	Ongoing	
10.2	Staff engagement in planning work for FBC	D Vogler	September	
10.3	Lead change management to optimise reconfiguration as a lever for transformation	D Vogler	Ongoing	
11	**Development and Training Programme**			
11.1	Review and reshape corporate training portfolio to reflect Centre training needs analyses	M Beales	March 2012	

5. **Recommendations**

The Trust Board is asked to:

1. **NOTE** the contents of this paper and
2. **AGREE** the corporate action plan and monitor performance through HEC using an assurance framework.

TRUST RESULTS

The following table shows changes in the 38 key findings ("KFs") for the Trust since the 2009/10 survey.   For most of the scores, the higher the score the better the performance. However, there are some scores for which a high score would represent a negative finding. For these scores, which are asterisked* and in *italics*, the lower the score the better. The final column shows the average performance for other acute Trusts; with scores where the Trust was in the top or bottom 20% shaded green or red respectively**. It should be noted that the differences in performance between the average Trust and the top or bottom 20% are not necessarily significant.**

The findings are arranged under six headings – the four staff pledges from the NHS Constitution, and the two additional themes of staff satisfaction and equality and diversity. It is likely that we would see some small change simply due to sample differences between the years and therefore areas which reflect a statistically significant change from previous years have been highlighted (red indicates negative impact, green indicates improvement).

	2010 Score	2009 Score	2008 Score	National Average for Acute Trusts
STAFF PLEDGE 1: To provide all staff with clear roles and responsibilities and rewarding jobs for teams.				
KF1. % feeling satisfied with the quality of work and patient care they are able to deliver	71%	67%	55%	74%
KF2. % agreeing that their role makes a difference to patients	86%	89%	89%	90%
KF3. % feeling valued by their work colleagues	74%	76%	86%	76%
KF4. Quality of job design	3.31	3.33	3.34	3.41
KF5. Work pressure felt by staff	3.26	3.21	3.23	3.11
KF6. Effective team working	3.70	-	-	3.69
KF7. Trust commitment to work-life balance	3.31	3.25	3.38	3.38
KF8. % working extra hours	67%	69%	69%	66%
KF9. % using flexible working options	56%	-	-	63%
STAFF PLEDGE 2: To provide all staff with personal development, access to appropriate training for their jobs and line management support to succeed.				
KF10. % feeling there are good opportunities to develop their potential at work	33%	37%	35%	41%
KF11. % receiving job-relevant training, learning or development in last 12 months	75%	79%	77%	78%
KF12. % appraised in last 12 months	82%	83%	76%	78%
KF13. % having well structured appraisals in last 12 months	28%	29%	25%	33%
KF14. % appraised with personal development plans in last 12 months	68%	70%	64%	66%
KF15. Support from immediate managers	3.52	3.44	3.51	3.61
STAFF PLEDGE 3: To provide support and opportunities for staff to maintain their health, well-being and safety.				
Occupational Health and safety				
KF16. % receiving health and safety training in last 12 months	79%	76%	74%	80%

KF17. % suffering work-related injury in last 12 months	23%	20%	18%	16%
KF18. % suffering work-related stress in last 12 months	31%	31%	29%	28%

Infection Control and Hygiene				
KF19. Saying hand washing materials are always available	75%	72%	77%	67%
Errors and incidents				
KF20. % witnessing potentially harmful errors, near misses or incidents in last month	43%	40%	38%	37%
KF21. % reporting errors, near misses or incidents witnessed in the last month	99%	96%	96%	95%
KF22. Fairness and effectiveness of incident reporting procedures	3.37	3.38	3.38	3.45
Violence and harassment				
KF23. % experiencing physical violence from patients / relatives/ public in last 12 months	10%	-	-	8%
KF24. % experiencing physical violence from staff in last 12 months	2%	-	-	1%
• KF25. % experiencing harassment, bullying or abuse from • patients / relatives / public in last 12 months	17%	-	-	15%
KF26. % experiencing harassment, bullying or abuse from staff in last 12 months	17%	-	-	15%
KF27. Perceptions of effective action from employer towards violence and harassment	3.55	3.53	3.57	3.56
Health and Wellbeing				
KF28. Impact of health and well-being on ability to perform work or daily activities	1.64	1.53	-	1.57
KF29. % feeling pressure in the last 3 mths to attend work when feeling unwell	26%	30%	-	26%
STAFF PLEDGE 4: To engage staff in decisions that affect them, the services they provide and empower them to put forward ways to deliver better and safer services.				
KF30. % reporting good communication between senior management and staff	17%	17%	20%	26%
KF31. % able to contribute towards improvements at work	56%	59%	61%	62%
ADDITIONAL THEME: Staff satisfaction				
KF32. Staff job satisfaction	3.39	3.42	3.41	3.48
KF33. Staff intention to leave jobs	2.64	2.57	2.66	2.53
KF34. Staff recommendation of the Trust as a place to work or receive treatment	3.36	3.30	-	3.52
KF35. Staff motivation at work	3.80	3.85	-	3.83
ADDITIONAL THEME: Equality and diversity				
KF36. % having equality and diversity training in last 12 months	33%	26%	15%	41%
KF37. % believing the Trust provides equal opportunities for career progression or promotion	91%	93%	90%	90%
KF38. % experiencing discrimination at work in the last 12 mths	11%	-	-	13%