

Cover page	
Meeting	<i>Trust Board</i>
Paper Title	Staff Survey response/ 6 month OD plan update
Date of meeting	3 October 2019
Date paper was written	September 2019
Responsible Director	Rhia Boyode Acting Workforce Director
Author	Rhia Boyode Acting Workforce Director
Executive Summary	
<p>As evidence suggests, there are many reasons to ensure our staff have a positive experience of working in our organisation, not least as there has been a direct correlation that demonstrates that patient outcomes are better in organisations with higher staff engagement scores between staff member, colleague and organisation.</p> <p>The majority of actions remain on track or completed to the timescales set. The supplementary Pulse survey report was shared at September workforce committee and shows a higher response rate and more positive responses.</p> <p>The Trusts overall results in 2018 were lower than our comparator group, highlighting that we have to continuously improve. It is also acknowledged that the Trust will need to continue its efforts in creating a positive working environment where our staff feel nurtured and respected to deliver the best patient care to our patients.</p> <p>Our soon to be launched New People Strategy, will provide a spotlight for our values and behaviours framework, this is intended to build an inclusive and compassionate culture on a sustainable basis for all our staff to flourish.</p> <p>Staff survey 2019 - Paper copies have arrived and will start to be disseminated Monday 30th September Online survey will hit inboxes Monday 30th September Campaign closes 29th November</p>	

The Board is asked to:			
<input type="checkbox"/> Approve	<input type="checkbox"/> Receive	<input checked="" type="checkbox"/> Note	<input type="checkbox"/> Take Assurance
To formally receive and discuss a report and approve its recommendations or a particular course of action	To discuss, in depth, noting the implications for the Board or Trust without formally approving it	For the intelligence of the Board without in-depth discussion required	To assure the Board that effective systems of control are in place

Link to CQC domain:				
<input type="checkbox"/> Safe	<input type="checkbox"/> Effective	<input checked="" type="checkbox"/> Caring	<input type="checkbox"/> Responsive	<input checked="" type="checkbox"/> Well-led

Link to strategic objective(s)	<i>Select the strategic objective which this paper supports</i>
	<input checked="" type="checkbox"/> PATIENT AND FAMILY Listening to and working with our patients and families to improve healthcare <input checked="" type="checkbox"/> SAFEST AND KINDEST Our patients and staff will tell us they feel safe and received kind care

	<input type="checkbox"/> HEALTHIEST HALF MILLION Working with our partners to promote 'Healthy Choices' for all our communities <input type="checkbox"/> LEADERSHIP Innovative and Inspiration Leadership to deliver our ambitions <input checked="" type="checkbox"/> OUR PEOPLE Creating a great place to work
Link to Board Assurance Framework risk(s)	<i>Are any Board Assurance Framework risks relevant to the paper?(see list at end of paper)</i>

Equality Impact Assessment	<input checked="" type="radio"/> Stage 1 only (no negative impact identified) <input type="radio"/> Stage 2 recommended (negative impact identified and equality impact assessment attached for Board approval)
Freedom of Information Act (2000) status	<input checked="" type="radio"/> This document is for full publication <input type="radio"/> This document includes FOIA exempt information <input type="radio"/> This whole document is exempt under the FOIA
Financial assessment	<i>Is there a financial impact associated with the paper?</i>

R		Outstanding
A		In Progress
G		Complete
U		Not yet started/due

NHS Staff Survey 2018/19 Action Plan				
Organisational response to staff feedback has identified two priorities for improvement. 1. Safety Culture 2. Staff Engagement This response cannot be viewed in isolation as it is cross cutting with prioirites within the broader Organisational Development Plan.		Lead	By when	Status
1	SAFETY CULTURE			
1.1	Specific Staff group conversation Area of focus identified and agreed actions to support May include specific patient safety concerns and/or raising concerns, behavioural issues These conversations are now led at Care group level with feedback to OD/patient safety team	Paula Dabbs/Pete Jefferies	Jun-19	G
1.2	Approach to sharing feedback from Datix submitted Appreciate look at high performing organisations Pilot a process eg from rapid review meeting to give in the moment feedback PDSA process and identify an additional area of focus	Pete Jefferies	May-19	G
1.3	Sharing our Learning Quarterly learning events with a Safety focus -linking to Leadership Academy Inspiring Culture of Excellence (ICE) sessions Monthly learning shared through newsletter	Pete Jefferies/Paula Dabbs	Jun-19	G
1.4	Embed Human Factors Proposal to executive Directors re development of a Faculty for Human Factors, to include Commitment for clinical support through PA allocation: Awareness raising of Human Factors Human factors in the Team enviroment Practical application- what experise is required to support patient safety team and Care group governance Systemic factors - active in use of serious incident investigations Agreed to move completion due to refocus following scoping work	Pete Jefferies/Paula Dabbs	Oct-19	A
1.5	Safer steps to surgery Value Stream Communicate the learning Support sponsor team as required	Exec sponsor	May-19	G
1.6	Launch strategic approach to Talksafe- 'Just saying' Learn from ITU test bed Pilot approach in scheduled care in harnessing the breadth of safety champions (includes all staff groups) in methodolgy and language Safety champions provide organisational learning Patient Safety and Governance teams trained in Talk safe methodology Moved to green as further cohort safety champions completed training and strethgened governance thourgh USC to start to embed learning	Paula Dabbs/Pete Jefferies	Jul-19	G
1.7	Board Development session- Safety- session diarised to be delivered in October/November	Paula Dabbs	Dec-19	A
1.8	Learning from Excellance Increase use of paper template Work to develop a user friendly intranet form Identify coordinator thorough admin support (0.05 wte)	Pete Jefferies/ Charlotte Banks	May-19	G
1.9	Launch Peer to Peer listening service	Paula Dabbs/Teresa Love	Apr-19	G
2	FTSU Recruit FTSU champions	Kate Adney	Apr-19	G
2	STAFF ENGAGEMENT- specific to staff survey (further and broader actions in OD Plan)			
2.1	Corporate Communication			
2.12	Organisational Video Share Organisational scores and say thank you to those for completing. Video will also highlight key areas of focus and our commitment to share Intranet links to staff survey feedback at Organisational, Department and Team level Free text comments themed and shared with SLT for further cascade and dicussion	David Burrows/Paula Dabbs	Mar-19	G
2.13	Cascade monthly briefing to include: Reflection on the months activity in response to staff survey Short Film clip of staff member talking about the conversations in their area Engagement champions to pre meet with CEO 2 days prior to cascade to share any key points to address	Comms/ Paula Dabbs	May-19	G
2.14	Director message Each Director make an explicit link to one item they are discussing and staff feedback- message of the week replaced with Paulas Monday message (although still Director on adhoc basis) All have explicit links to actions as a result of staff feedback	Comms	Sep-19	G
2.15	Social media Maximise opportunity to promote staff conversations Increase frequency of Staff Friends and Family test Use of staff App launch to harness feedback and pulse check on the question 'How was work today?' Explore models of gaining increased feedback eg Crowdsourcing	Workforce/comms/web dev	Sep-19	G
2.16	FTSU Recruit FTSU champions	Kate Adney	Apr-19	G
2.2	Leadership Engagement			
2.21	Increase Visible Leadership One SaTH conversation to be held in summer (links with Health and WellBeing events) CEO Breakfast sessions- structure conversation to explicitly link actions on staff feedback Three areas identified to develop bespoke engagment sessions, Workforce Director led CEO Breakfast sessions ceased whilst interim CEO In post (Interims decision) . Single large scale engagment event has been scheduled for October to accomodate exec avaliabilty and include new members	OD	Aug-19	A

Organisational response to staff feedback has identified two priorities for improvement. 1. Safety Culture 2. Staff Engagement		Lead	By when	Status
2.22	Staff conversations At staff group level share the feedback and work to identify two areas of focus Every people leader is aware of why we use staff engagement as a measure and links to organisational performance and know their score and can identify area of improvement At department team level- focused discussion on engagement score with output to identify two key areas of focus that support improvements This is being led through Workforce BP with feedback to the OD teams on themes	OD	Jun-19	G
2.23	People managers workshops 3 Organisational workshops to build confidence with our people managers/ leaders to: Have a shared understanding of the impact of their role on our peoples experience at work Share tools and techniques that will support them in their role - 2 delivered with final 26th September	Rhia Boyode/Paula Dabbs	Sep-19	G
2.24	Recruit to engagement champions Supports the work of improvement plan Wider engagement to support the OD plan, clear role description and expectations articulate Will have opportunity to influence CEO cascade agenda	OD and Comms	May-19	G
2.3	Continuous Improvement TCI			
2.31	Link with Lean for Leaders porgrammes to build understanding on staff engagement as a Lean Leaders their role in driving improvements Staff engagement central to People board discussions Exemplar wards and baseline assessment uses engagment as a key indicator - exemplar under review from DNQS. Link involvement and solution focused thinking	TCl and OD	Sep-19	A

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Organisational Development delivery plan April-October 2019

The OD plan details four key areas of focus; Behaviours and respect, Leadership Development, Pyscological safety and Innovation and change with a cross cutting theme of staff engagement. The plan below details the first six month delivery to support our cultrual improvement		Lead	By When	Status
1	Values and Behaviours			
1.1	Refreshed Womens and Childrens bespoke OD plan agreed and programme identified	John Skelton	Mar-19	G
1.2	Agreed bespoke OD plan for Emergency Department and programme of work commenced	Charlotte Banks	Apr-19	G
1.3	Train 8 Values, Behaviour and Attitude interviewers to be able to deliver training and increase capacity across the organisation	Kerry Cleary/ OD team	Apr-19	G
1.4	Train a cohort of trainers to be able to deliver Values Based conversation training	Kerry Cleary/ OD team	Apr-19	G
1.5	Reengage with Trust coaches, gain commitment and review intranet resource	Workforce Director/OD team	Mar-19	G
1.6	Develop and support two peer supervision sessions for Trust Coaches	OD team	May 2019 & Sept 2019	G
1.7	Annual Recognition award ceremony	Yarringtons/OD team	Sep-19	G
1.8	Organisational adoption of Values in Practice agreement with supporting behavioural indicators- focus changed within Well led ISG	Workforce Director/OD team	Oct-19	A
2	Leadership Development			
2.1	2 Master Classes - running on the 11th October for managers, leaders, staff members seeking a personal development opportunity or staff looking to develop their own personal leadership.	OD team	Oct-19	G
2.2	People Managers 1 day workshop- 3 delivered	Workforce Director/OD team	Jun-19	G
2.3	200 leaders have individualised development identified- Training needs analysis underway	OD team	Oct-19	A
2.4	Three cohorts undertaking leadership development programmes- Training needs analysis underway	OD team	Oct-19	A
2.5	1 Masterclass > 200 people - resilience and emotional intelligence	OD team	Jul-19	G
3	Pyscological Safety			
3.1	Embed Human Factors Proposal to executive Directors re development of a Faculty for Human Factors, to include Commitment for clinical support through PA allocation: Awareness raising of Human Factors Human factors in the Team enviroment Practical application- what expertise is required to support patient safety team and Care group governance Systemic factors - active in use of serious incident investigations NHSI supported paper identifying a refreshed approach - deadline changed to reflect	Pete Jefferies/Paula Dabbs	Oct-19	A
3.2	Safer steps to surgery Value Stream Communicate the learning Support sponsor team as required	Cathy Smith/ Exec sponsor	ongoing	G
3.3	Launch strategic approach to Talksafe- 'Just saying' Learn from ITU test bed Pilot approach in scheduled care in harnessing the breadth of safety champions (includes all staff groups) in methodolgy and language Safety champions provide organisational learning Patient Safety and Governance teams trained in Talk safe methodology Additional training to safety champions scheduled , improved links and shared learning with strengthened governace in USC	Paula Dabbs/Pete Jefferies	Jul-19	G
3.4	Board Development session- Safety - Fire Safety Training Session scheduled for NEDs and any EDs – 3rd October	Rhia Boyode	Oct-19	G
3.5	Learning from Excellance Increase use of paper template Work to develop a user friendly intranet form Identify coordinator through admin support (0.05 wte) Identify and work with teams who have identified a systemic issue to feed into Transforming Care Institute	Pete Jefferies/ Charlotte Banks	Aug-19	G
3.6	Launch Peer to Peer listening service	Paula Dabbs/Teresa Love	Apr-19	G
3.7	FTSU Recruit FTSU champions	Kate Adney	Apr-19	G
4	Innovation and change			
4.1	Link with Lean for Leaders programmes to build understanding on staff engagement as a Lean Leaders their role in driving improvements Staff engagment central to People board discussions Exemplar wards and baseline assessment uses engagment as a key indicator Link involvement and solution focused thinking	OD team	Jun-19	G
4.2	Commence partnership with Go MAD thinking (Go Make a Difference)	Workforce Director/Paula Dabbs	Mar-19	G
4.3	Executive Development session Go MAD	Workforce Director/Paula Dabbs	Mar-19	G
4.4	SLT development session (NEDs to be invited)	Workforce Director/Paula Dabbs	Apr-19	G
4.5	Guiding group meet bimonthly - 5 meetings	Workforce Director/Paula Dabbs	ongoing	G
4.6	20 Mastercoaches trained	Paula Dabbs	May-19	G

The OD plan details four key areas of focus; Behaviours and respect, Leadership Development, Pyscological safety and Innovation and change with a cross cutting theme of staff engagement. The plan below details the first six month delivery to support our cultural improvement		Lead	By When	Status
5	STAFF ENGAGEMENT- specific to OD Plan (additional within staff survey plan)			
5.1	Use of staff App launch to harness feedback and pulse check on the question 'How was work today?'	Enagagment and enablement group	Jun-19	G
5.2	3 'How was work today' survey and analysis undertaken to test efficacy of interventions	OD team	Oct-19	A
5.5	A model of gaining increased feedback from staff eg Crowdsourcing . Initial approach through engagement champion network (100+) and narrative feedback through pulse	Executive team/ OD team	Jun-19	G
5.6	Recruit to Trust engagement champions	Engagement and enablement group/ OD team	Apr-19	G