

The Shrewsbury and Telford Hospital NHS Trust

2020 NHS Staff Survey

Summary Benchmark Report

Organisation details



The Shrewsbury and Telford Hospital NHS Trust





This organisation is benchmarked against:

Acute and Acute & Community Trusts

_	

2020 benchmarking group details

Organisations in group:

128

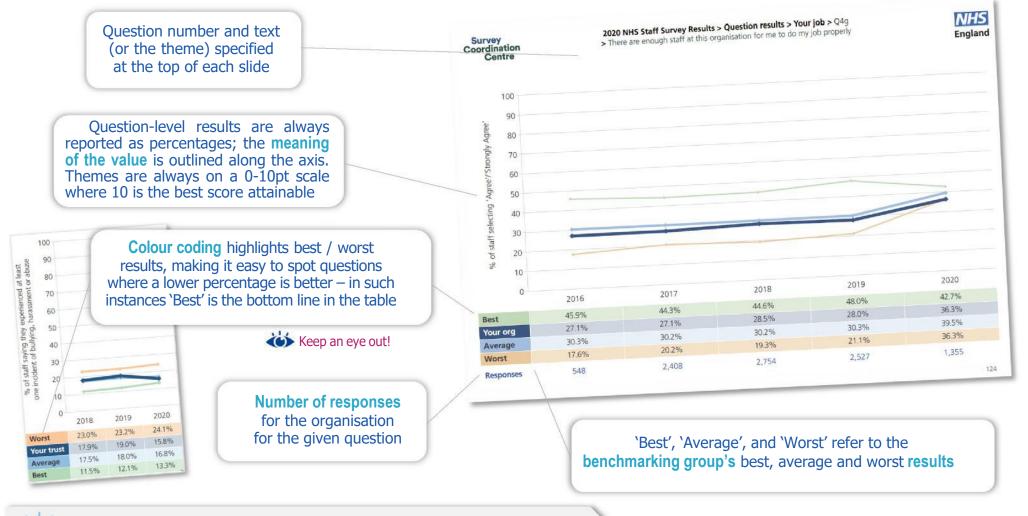
Median response rate: 45%

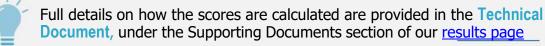
No. of completed questionnaires:

Using the report



Key features







Theme results

The calculation for the immediate managers theme has changed this year due to the omission of one of the questions which previously contributed to the theme. This change has been applied retrospectively so data for 2016-2020 shown in the charts are comparable for this theme, however these figures are not directly comparable to the results reported in previous years. For more details please see the <u>technical document</u>.

The Shrewsbury and Telford Hospital NHS Trust

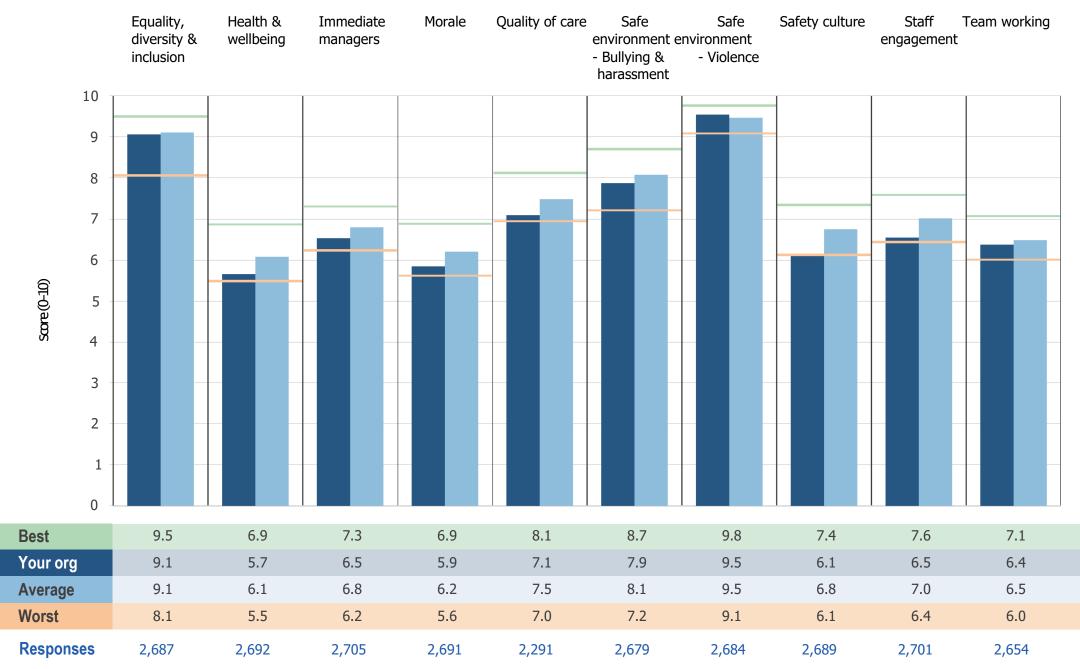
2020 NHS Staff Survey Results

2020 NHS Staff Survey Results > Theme results > Overview

Survey Coordination

Centre







Theme results – Trends

The Shrewsbury and Telford Hospital NHS Trust 2020 NHS Staff Survey Results



Worst

Responses

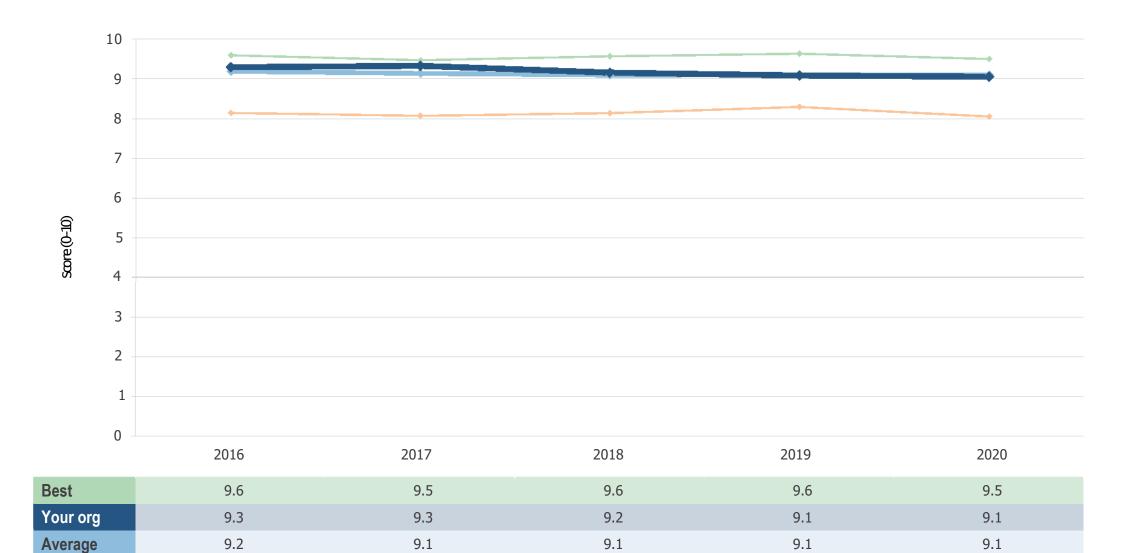
8.2

2,025

8.1

2,309





8.1

2,536

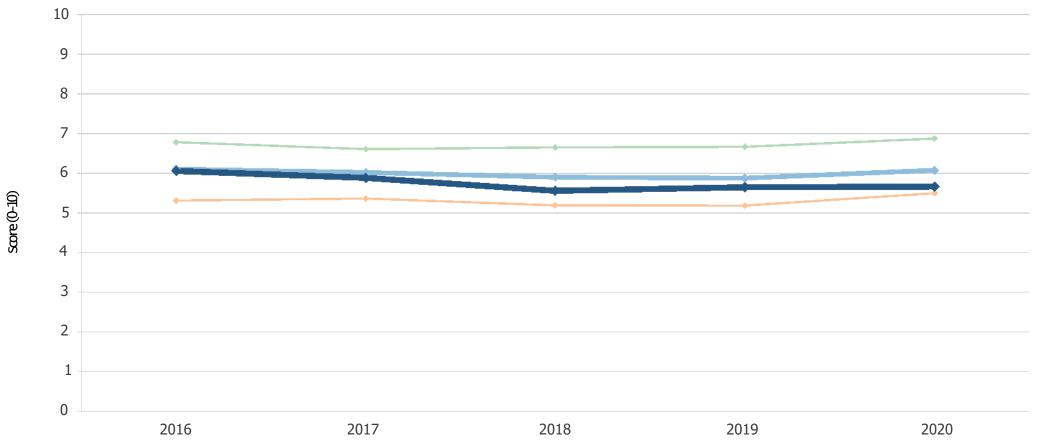
8.3

2,415

8.1



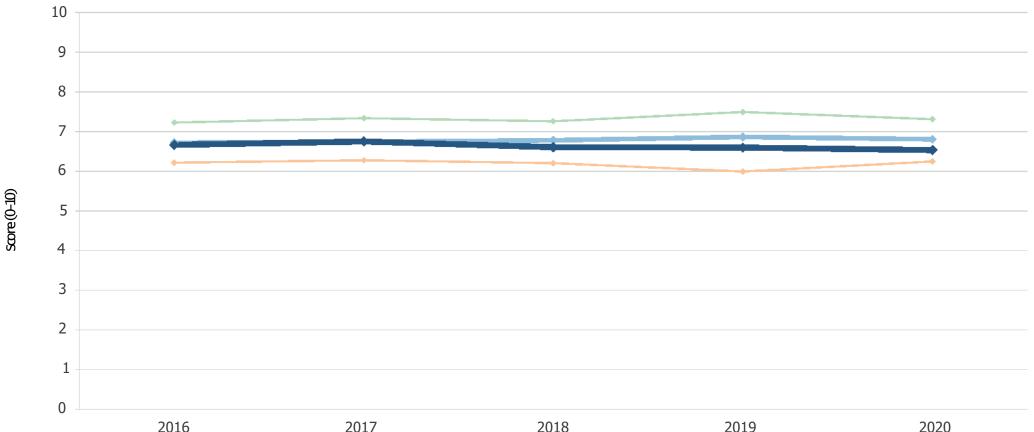




Best	6.8	6.6	6.7	6.7	6.9
Your org	6.1	5.9	5.6	5.6	5.7
Average	6.1	6.0	5.9	5.9	6.1
Worst	5.3	5.4	5.2	5.2	5.5
Responses	2,036	2,338	2,552	2,428	2,692







	2010	2017	2010	2019	2020
Best	7.2	7.3	7.3	7.5	7.3
Your org	6.7	6.8	6.6		6.5
Average	6.7	6.7	6.8	6.9	6.8
Worst	6.2	6.3	6.2	6.0	6.2
Responses	2,034	2,335	2,552	2,426	2,705

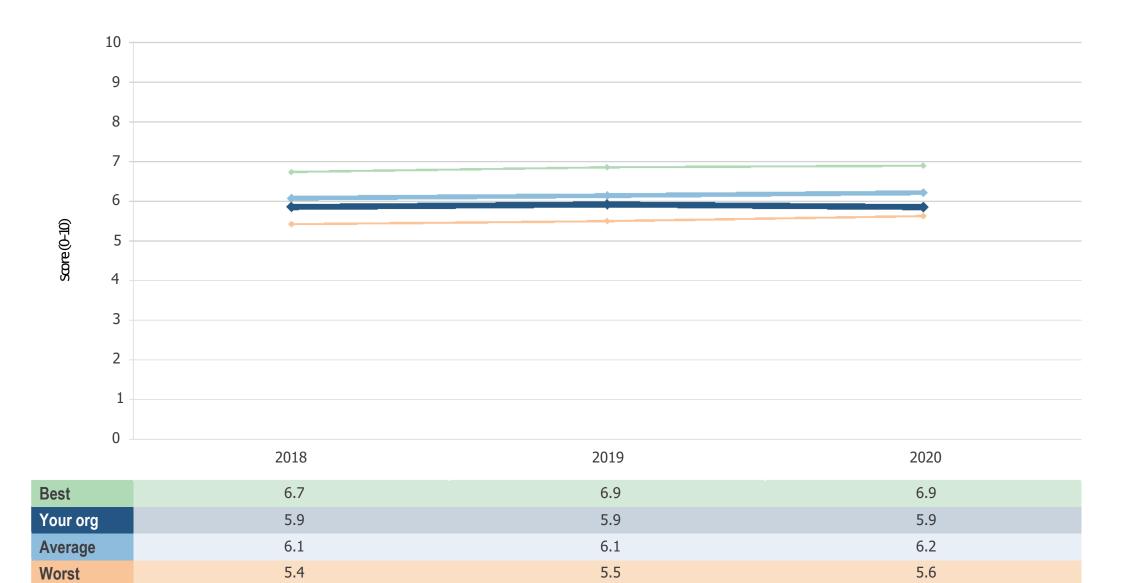


Responses

2,526



2,691





Worst

Responses

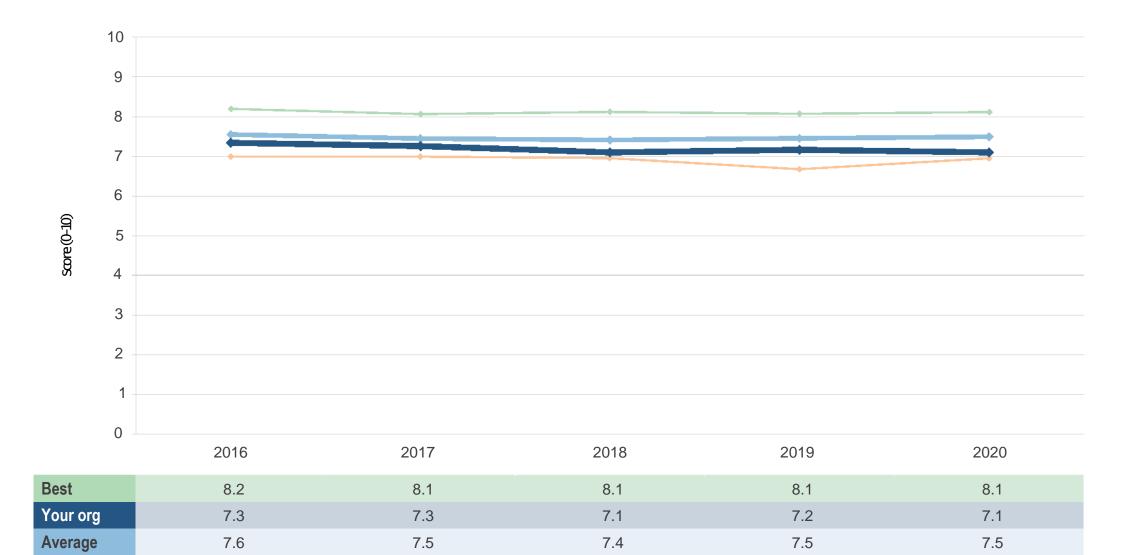
7.0

1,728

7.0

1,965





7.0

2,172

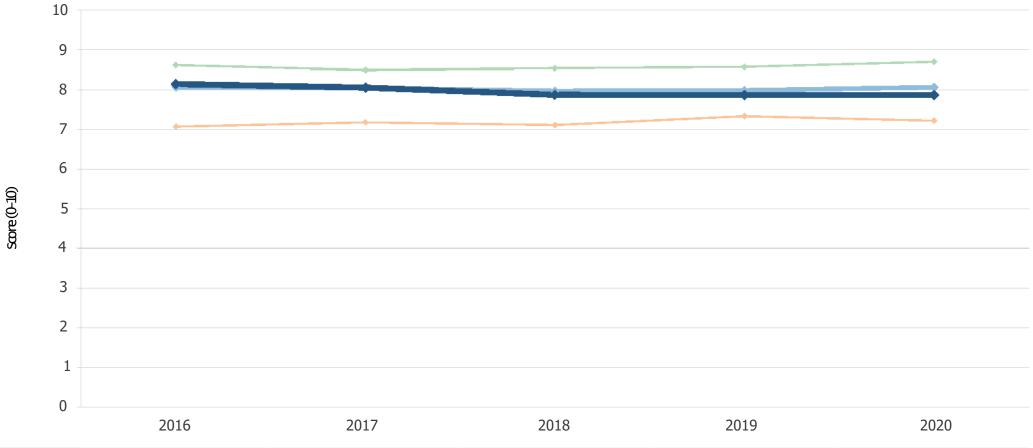
6.7

2,073

7.0



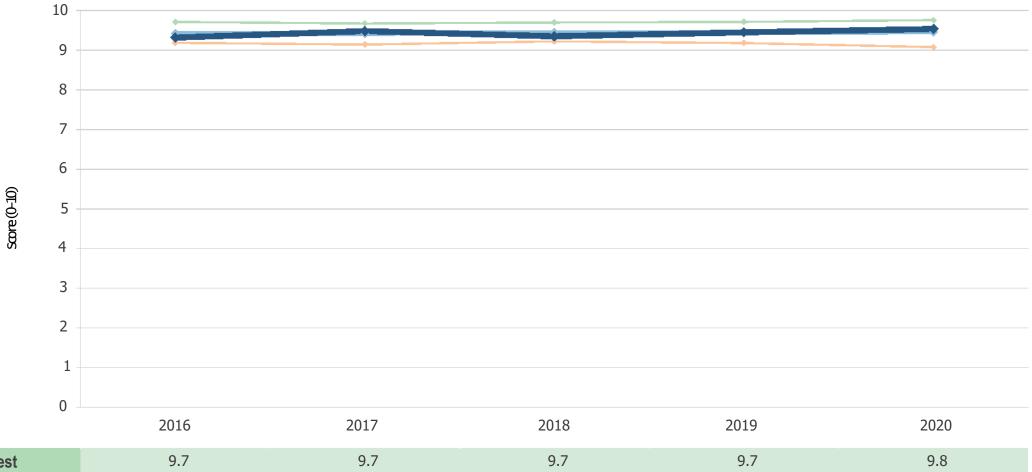




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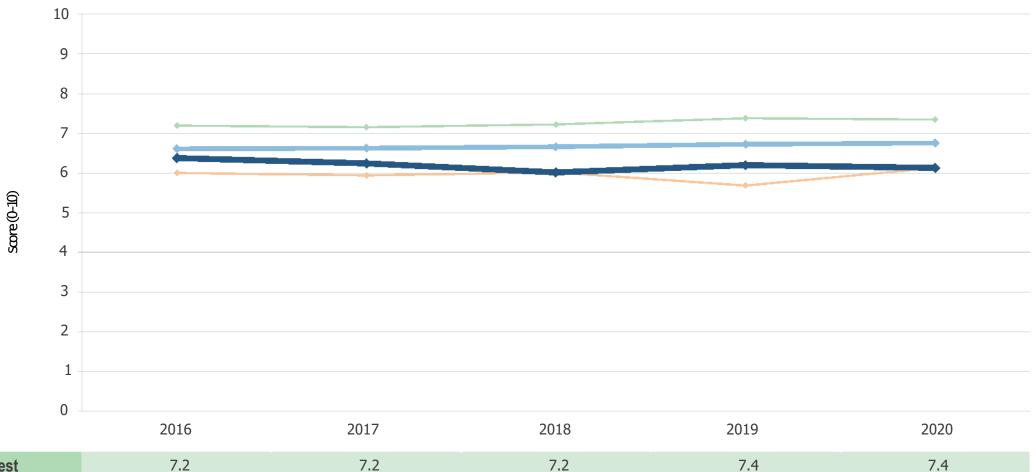




Best	9.7	9.7	9.7	9.7	9.8
Your org	9.3	9.5	9.4	9.5	9.5
Average	9.4	9.4	9.4	9.4	9.5
Worst	9.2	9.1	9.2	9.2	9.1
Responses	2,025	2,304	2,521	2,414	2,684



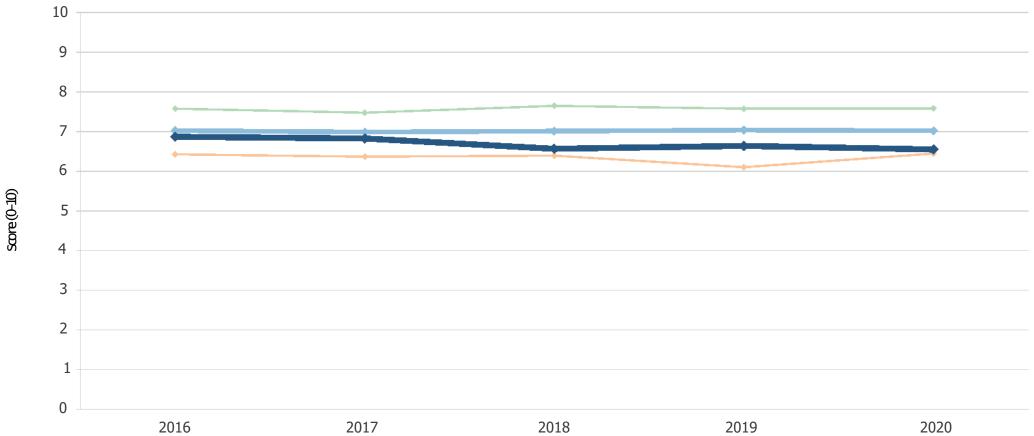




Best	7.2	7.2	7.2	7.4	7.4
Your org	6.4	6.2	6.0	6.2	6.1
Average	6.6	6.6	6.7	6.7	6.8
Worst	6.0	5.9	6.0	5.7	6.1
Responses	2,026	2,317	2,537	2,407	2,689



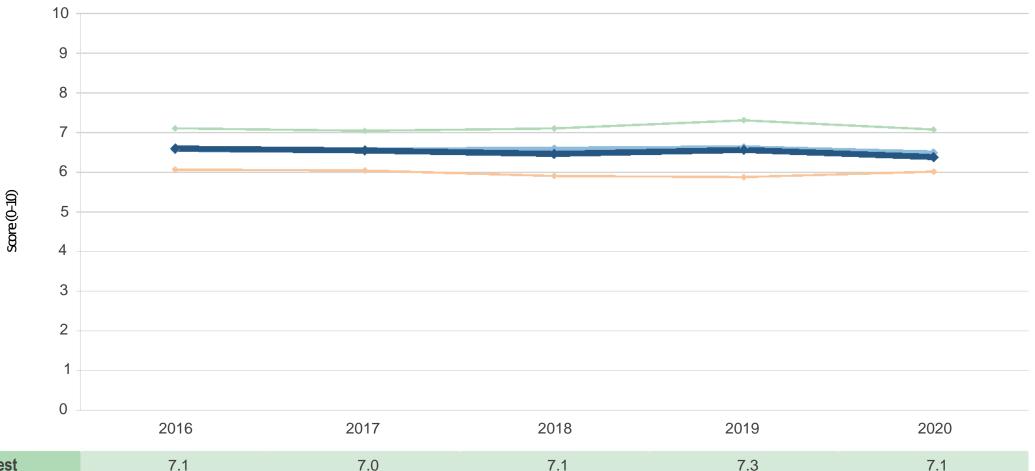




Best	7.6	7.5	7.6	7.6	7.6
Your org	6.9	6.8	6.6	6.6	6.5
Average	7.0	7.0	7.0	7.0	7.0
Worst	6.4	6.4	6.4	6.1	6.4
Responses	2,048	2,355	2,556	2,437	2,701







Best	7.1	7.0	7.1	7.3	7.1
Your org	6.6	6.5	6.5	6.6	6.4
Average	6.6	6.6	6.6	6.6	6.5
Worst	6.1	6.0	5.9	5.9	6.0
Responses	2,011	2,311	2,538	2,410	2,654



Theme results – Covid-19 classification breakdowns

The Shrewsbury and Telford Hospital NHS Trust 2020 NHS Staff Survey Results



Covid-19 questions

Staff were asked four classification questions relating to their experience during the Covid-19 pandemic:

a.	Have you worked on a Covid-	19 specific ward or area at any time?	Yes	No	
b.	Have you been redeployed du	ue to the Covid-19 pandemic at any time?	Yes	No	
c.	c. Have you been required to work remotely/from home due to the Covid-19 pandemic?				
d.	Have you been shielding?	Yes, for myself Yes, for a member of my hous	ehold	No	

The charts on the following pages show the breakdown of theme scores for staff answering 'yes' to each of these questions, compared with the results for all staff at your organisation. Results are presented in the context of the highest, average and lowest scores for similar organisations.

Comparing your data

To improve overall comparability, the data have been weighted to match the occupation group profile of staff at your organisation to that of the benchmarking group, as in previous charts. However, there may be differences in the occupation group profiles of the individual COVID-19 subgroups. For example, the mix of occupational groups across redeployed staff at your organisation may differ from similar organisations. This difference would not be accounted for by the weighting and therefore may affect the comparability of results. As such, a degree of caution is advised when interpreting your results.

Further information

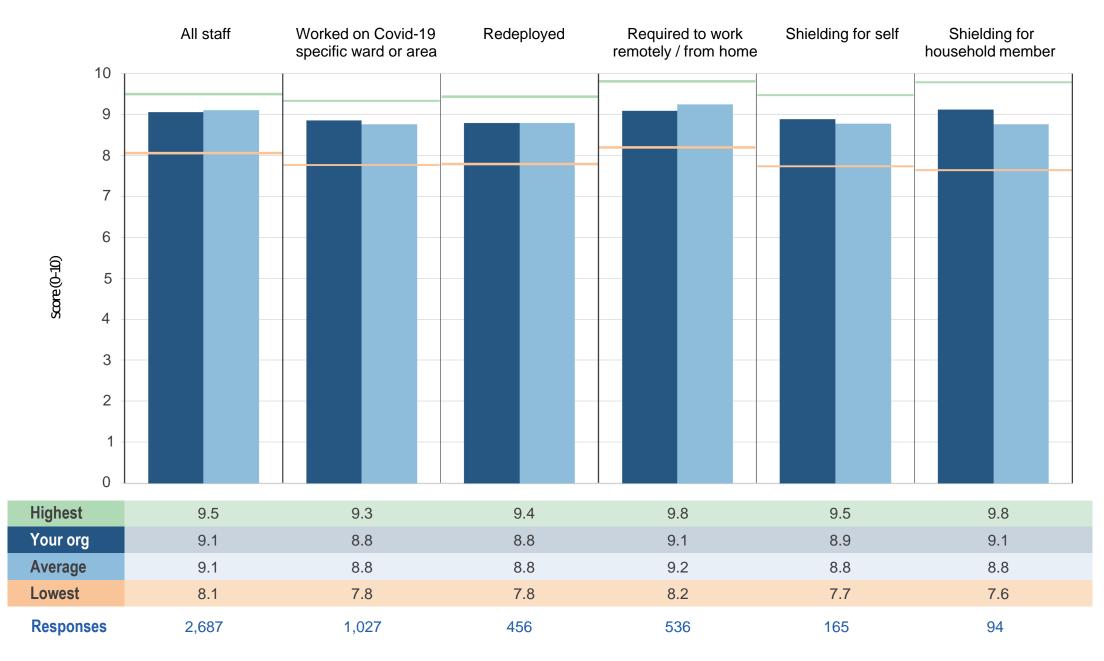
Results for these groups of staff, including data for individual questions, are also available via the <u>online dashboards</u>. Please note that results presented in these dashboards have not been weighted where no benchmarking takes place and so may vary slightly from those shown in this report.





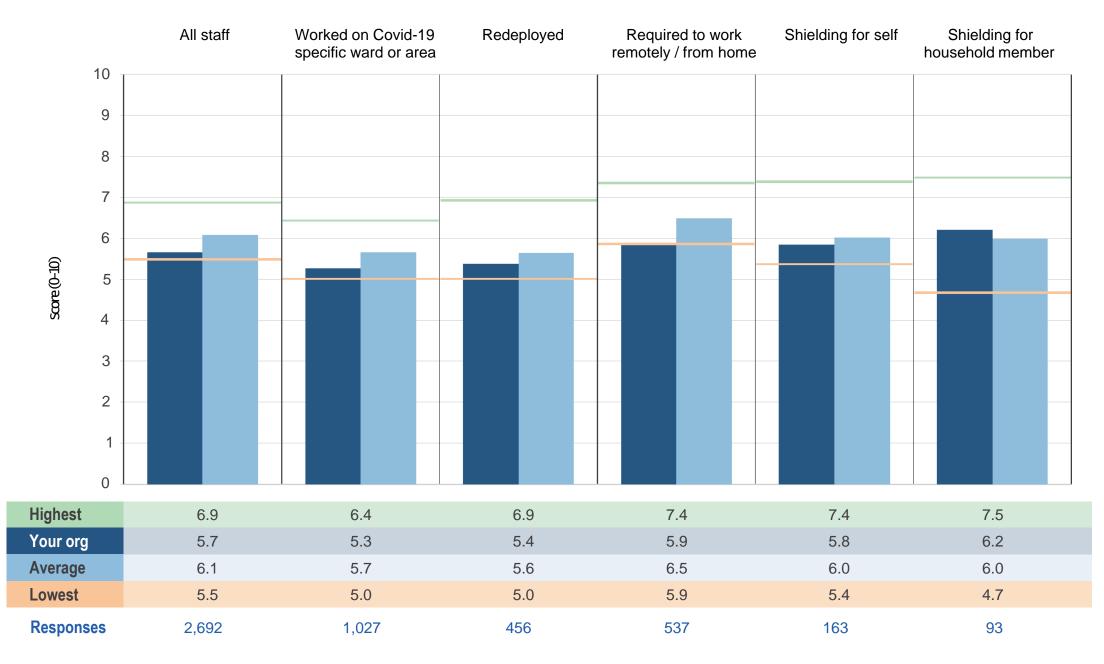
2020 NHS Staff Survey Results > Theme results – Covid-19 classification breakdowns > Equality, diversity & inclusion





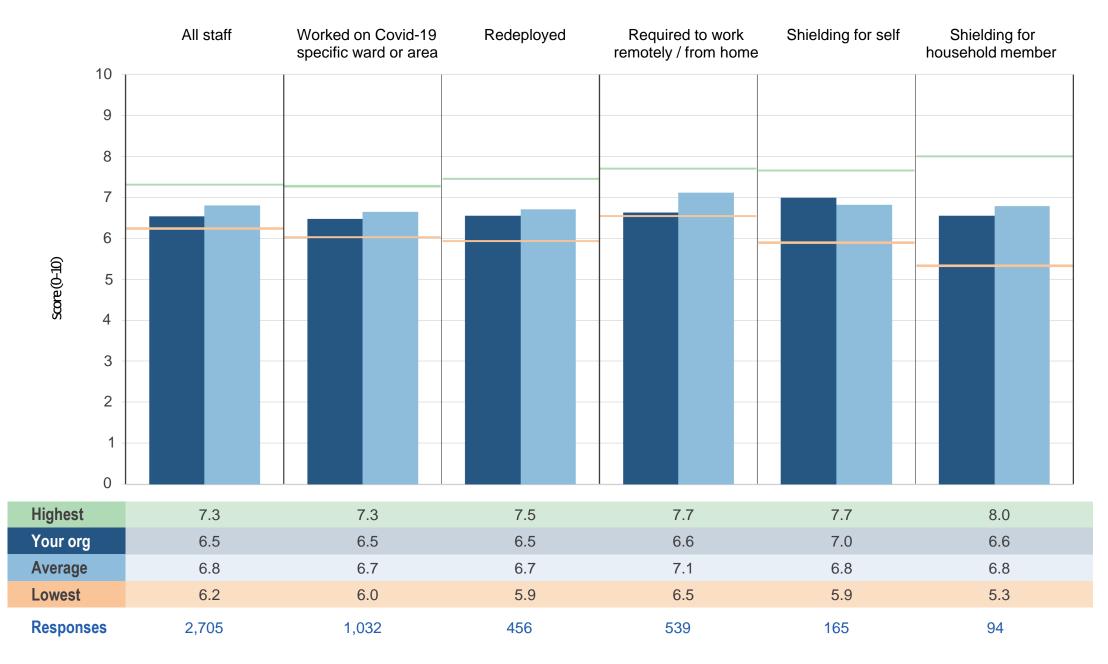






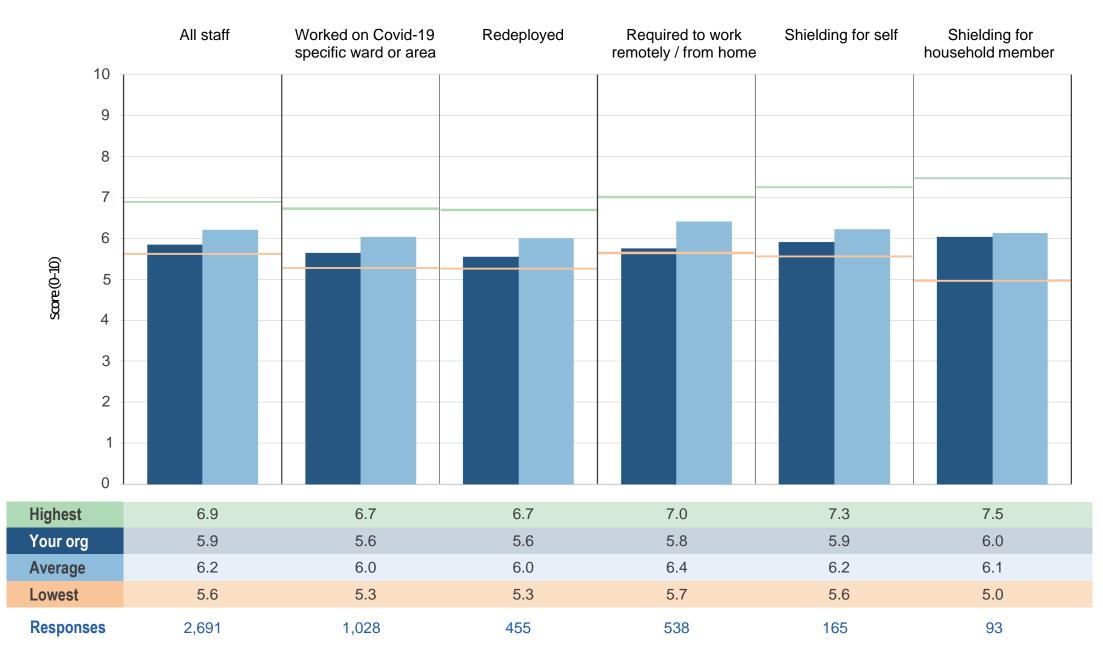






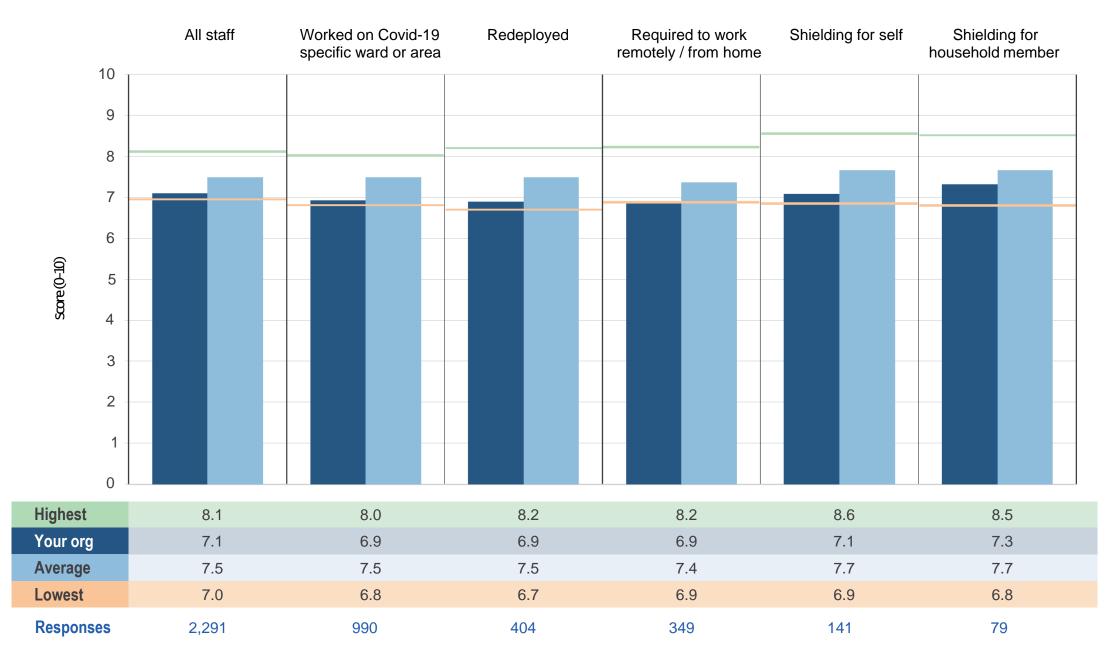








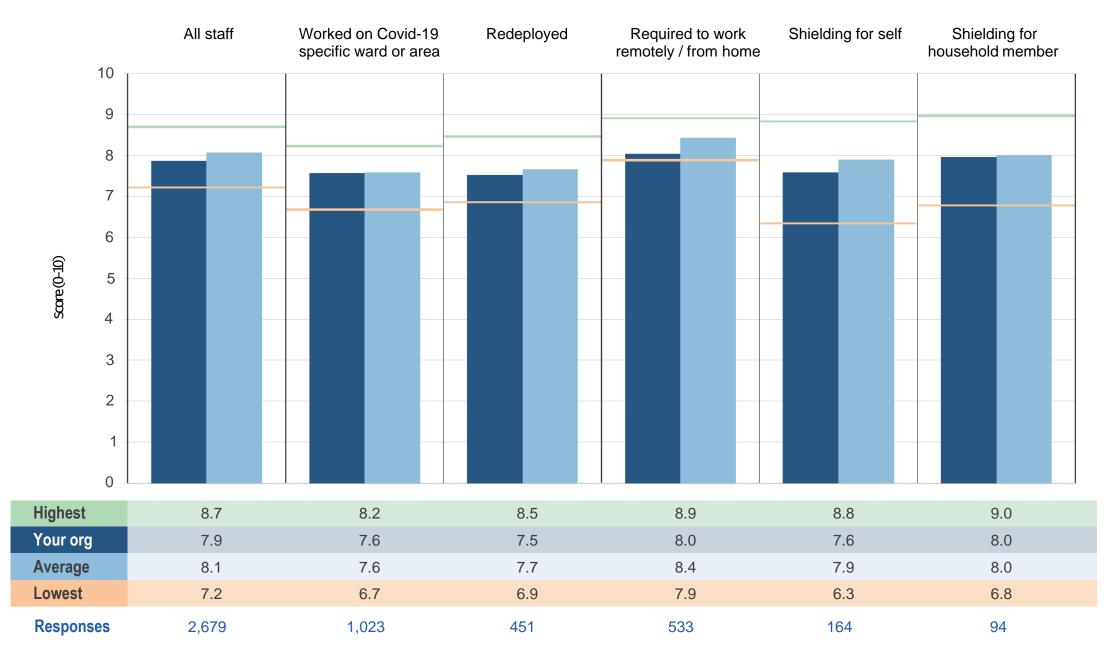






2020 NHS Staff Survey Results > Theme results – Covid-19 classification breakdowns > Safe environment - Bullying & harassment



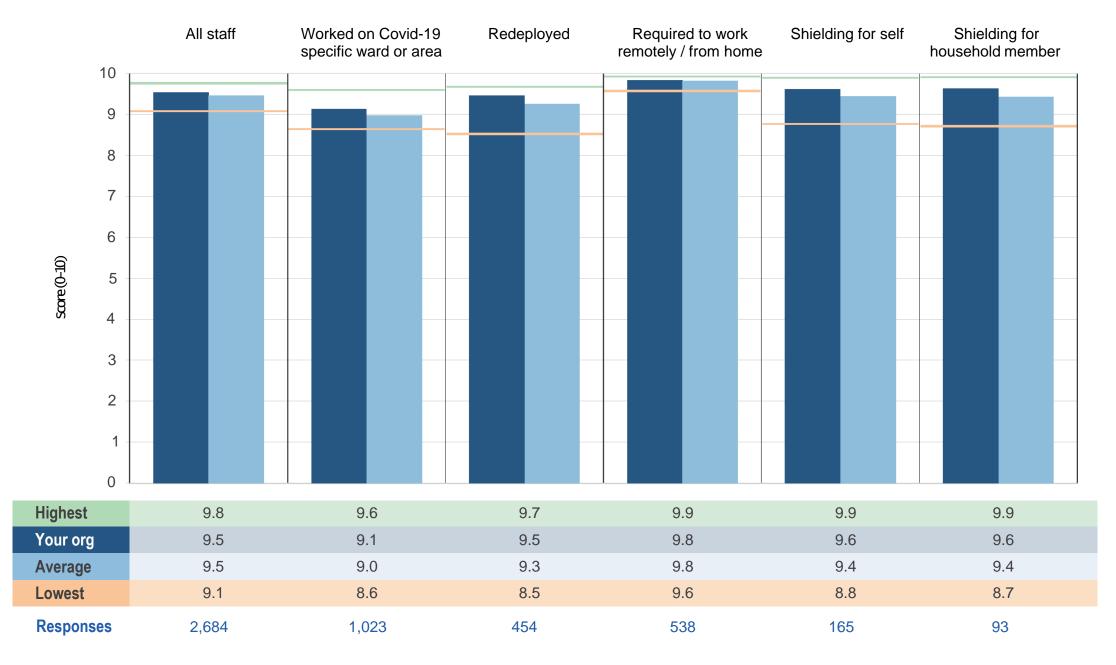




2020 NHS Staff Survey Results > Theme results - Covid-19

NHS England

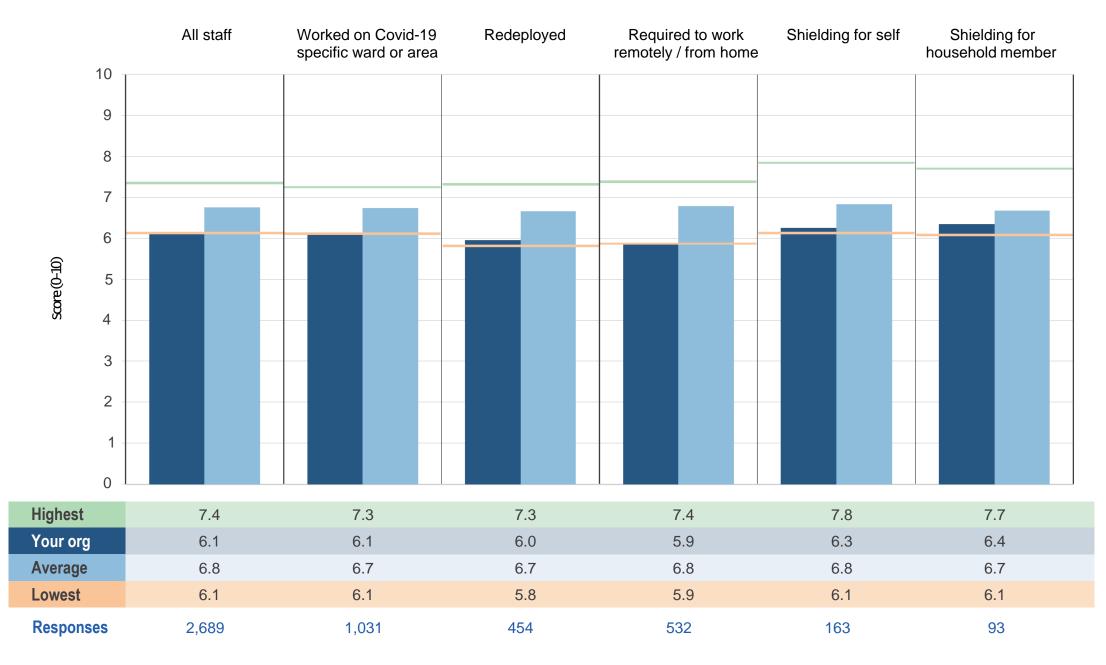
classification breakdowns > Safe environment - Violence





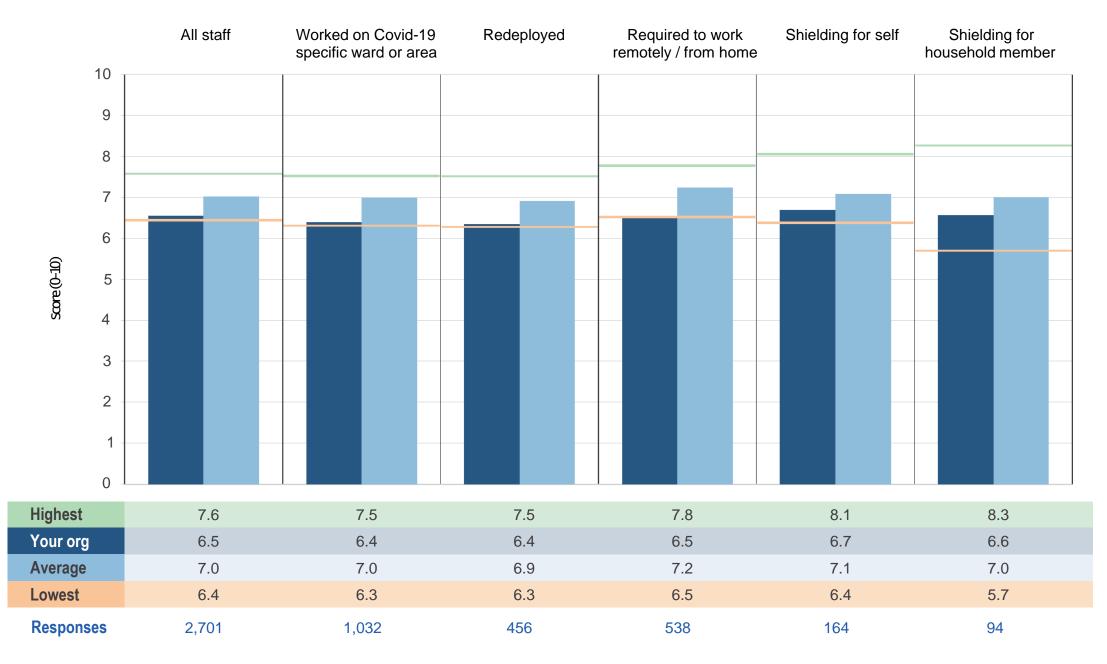
2020 NHS Staff Survey Results > Theme results – Covid-19 classification breakdowns > Safety culture





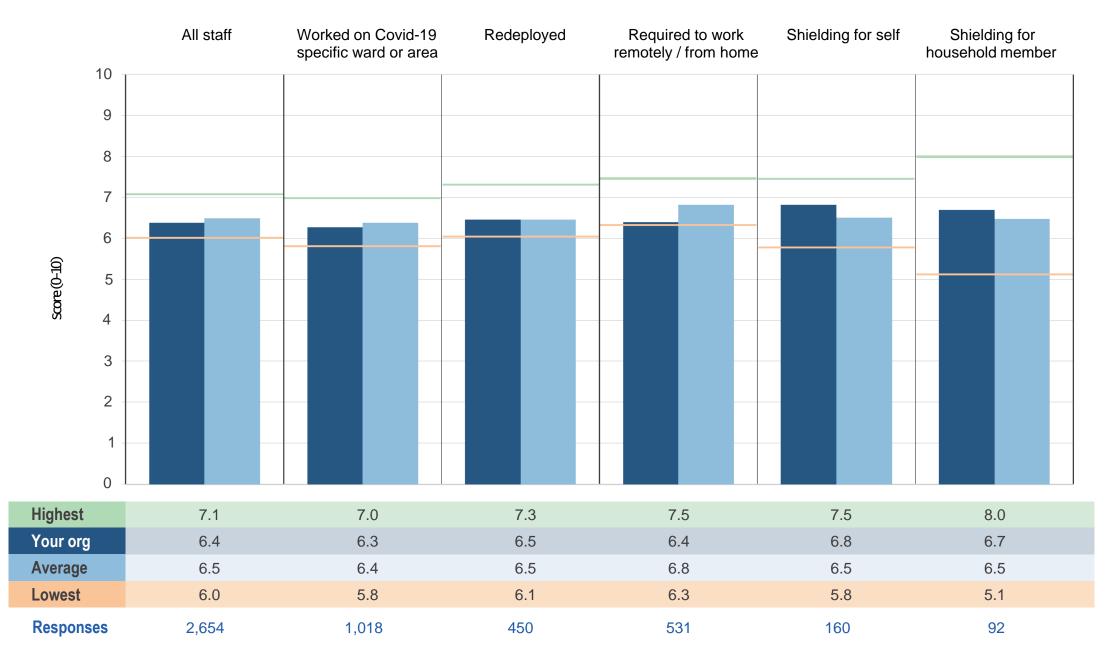












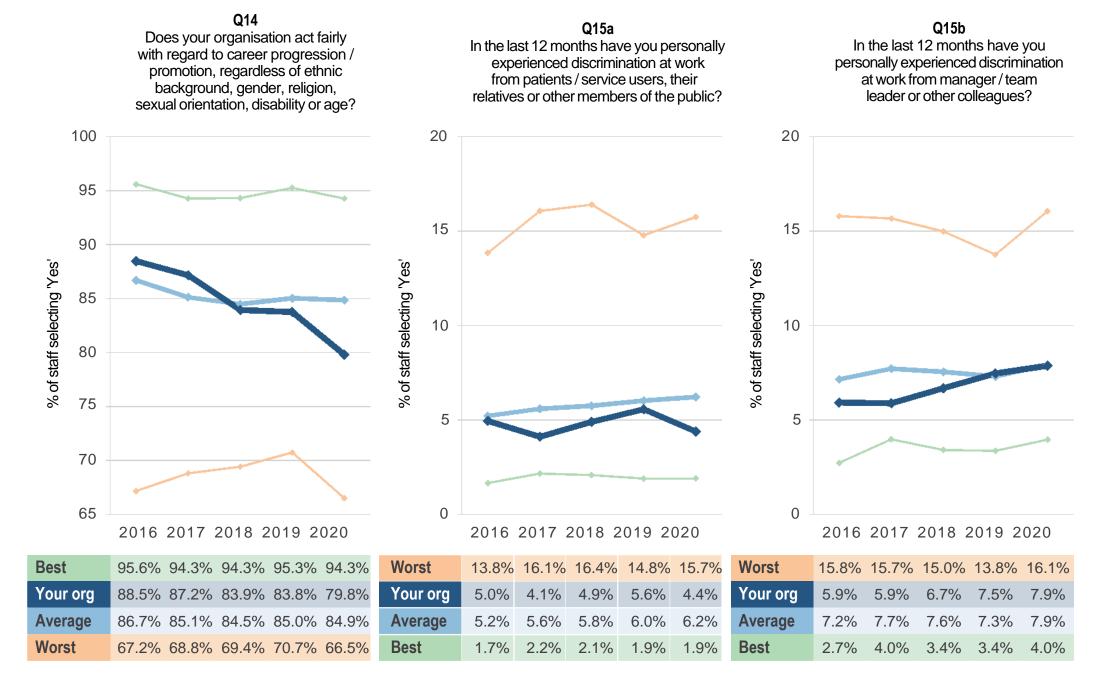


Theme results – Detailed information

The Shrewsbury and Telford Hospital NHS Trust 2020 NHS Staff Survey Results

2020 NHS Staff Survey Results > Theme results > Detailed information > Equality, diversity & inclusion 1/2





Coordination

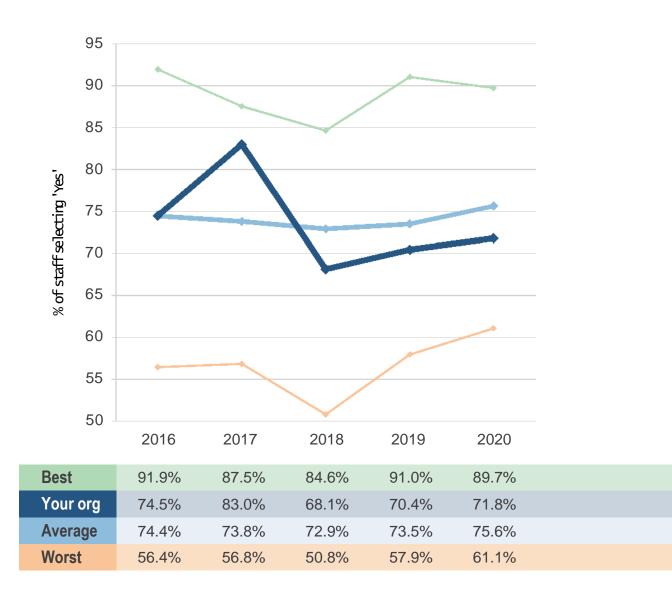
Survey

Centre

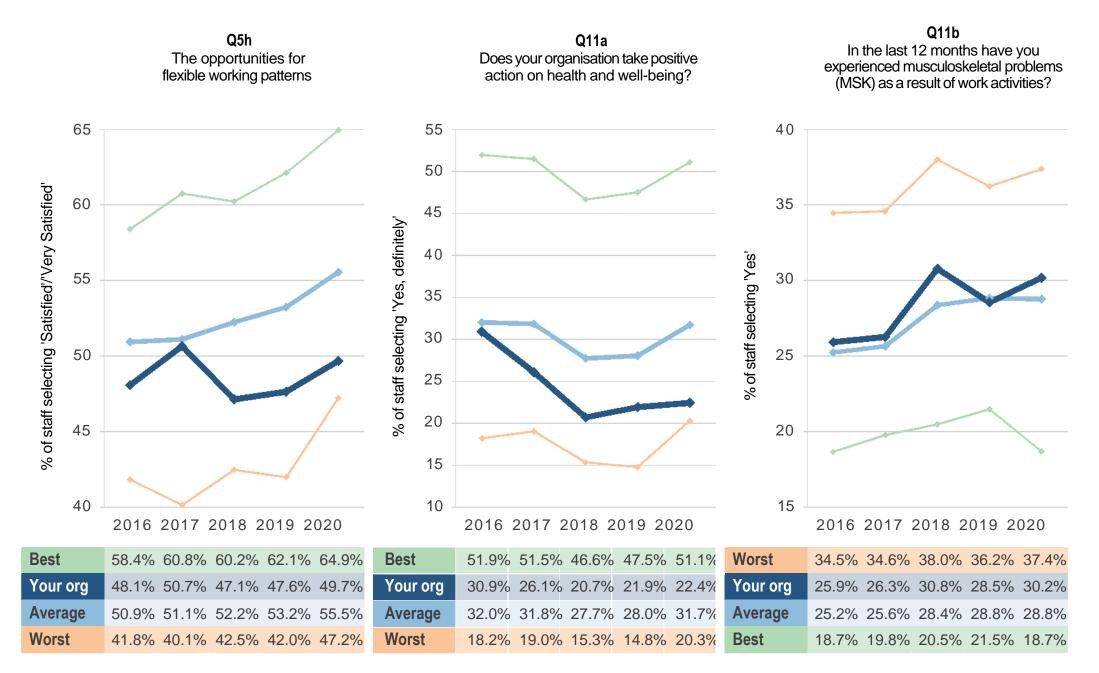




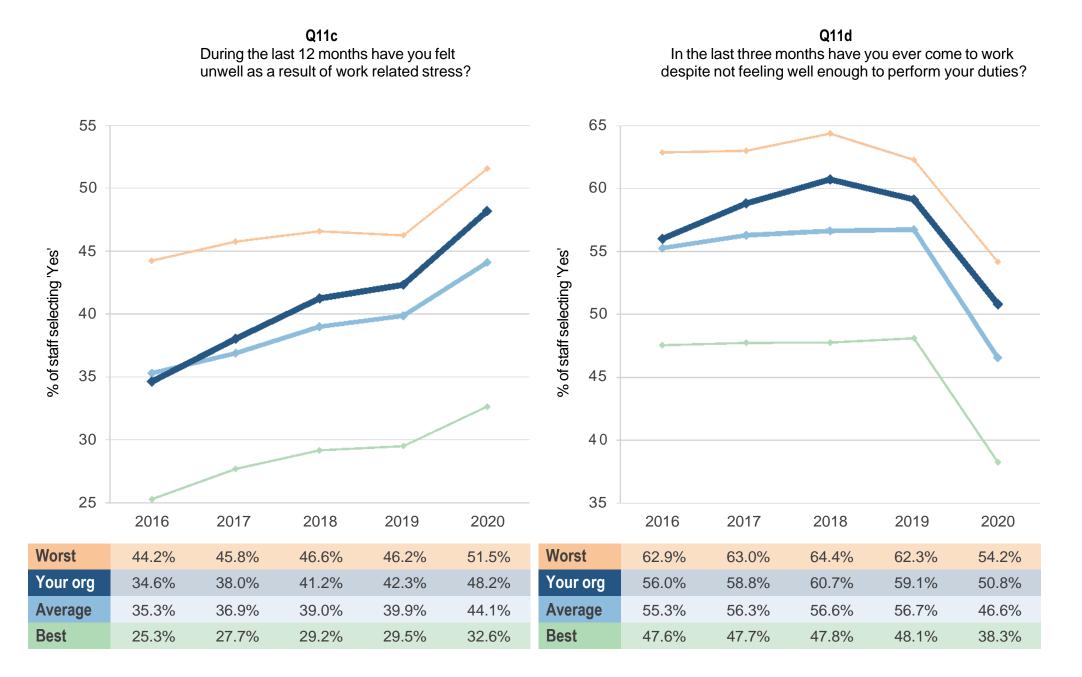
Q26b Has your employer made adequate adjustment(s) to enable you to carry out your work?



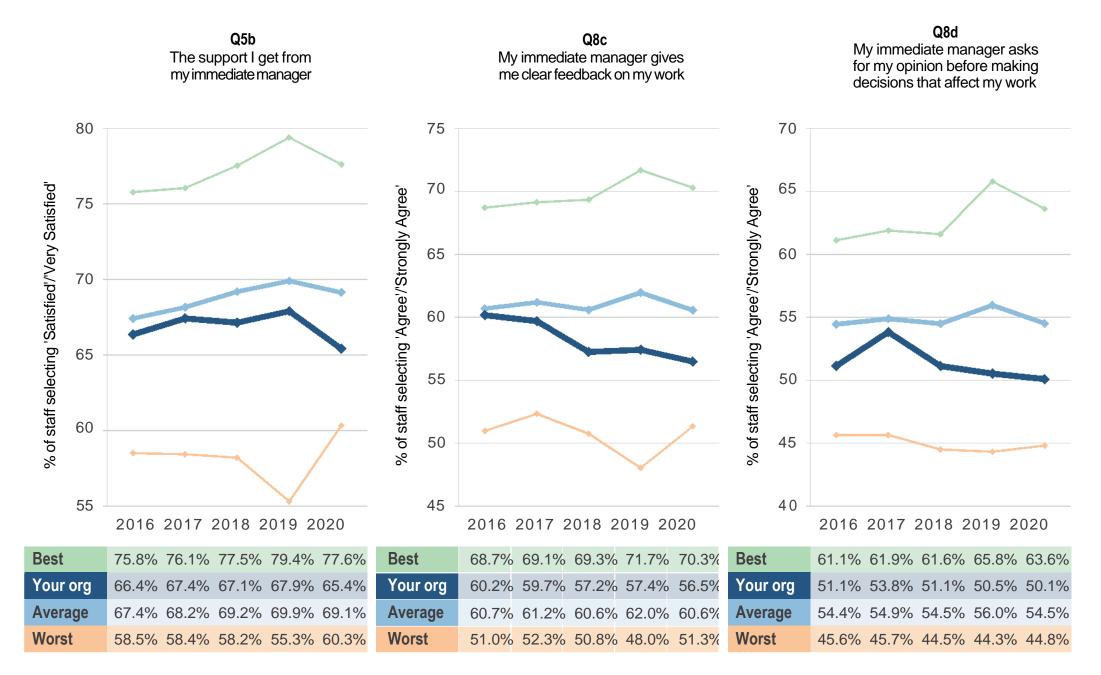






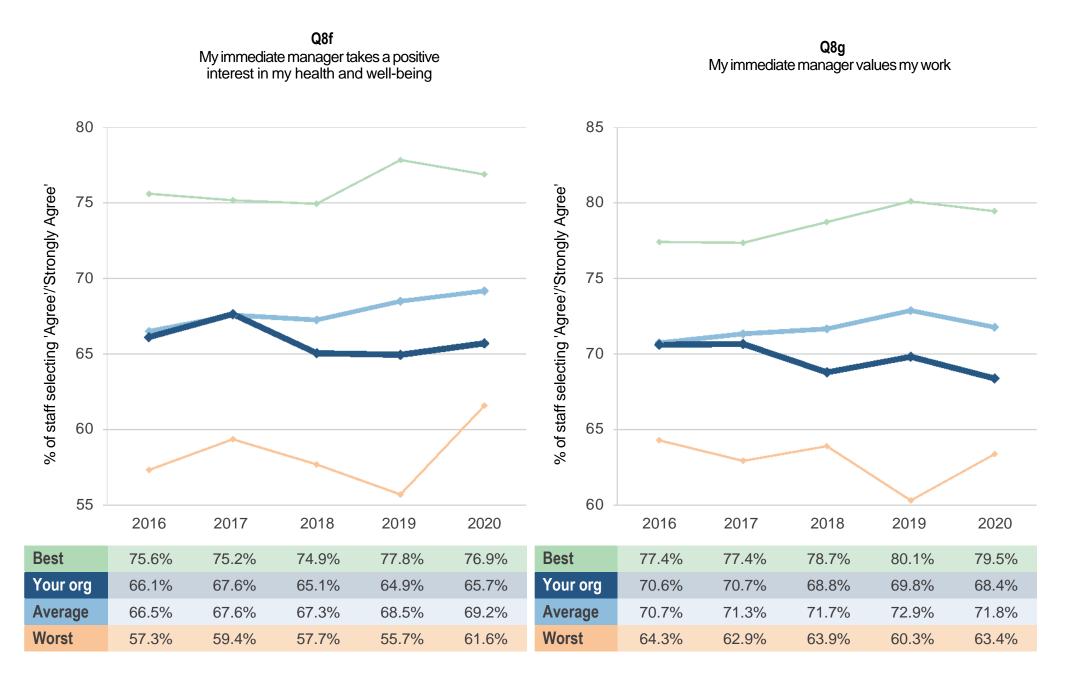






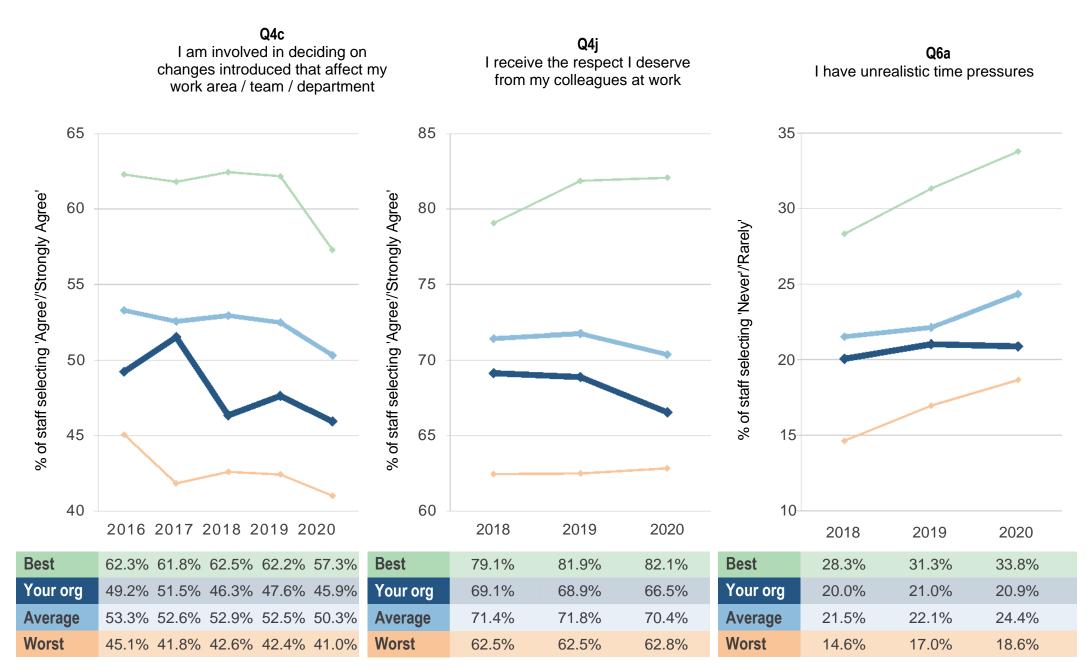






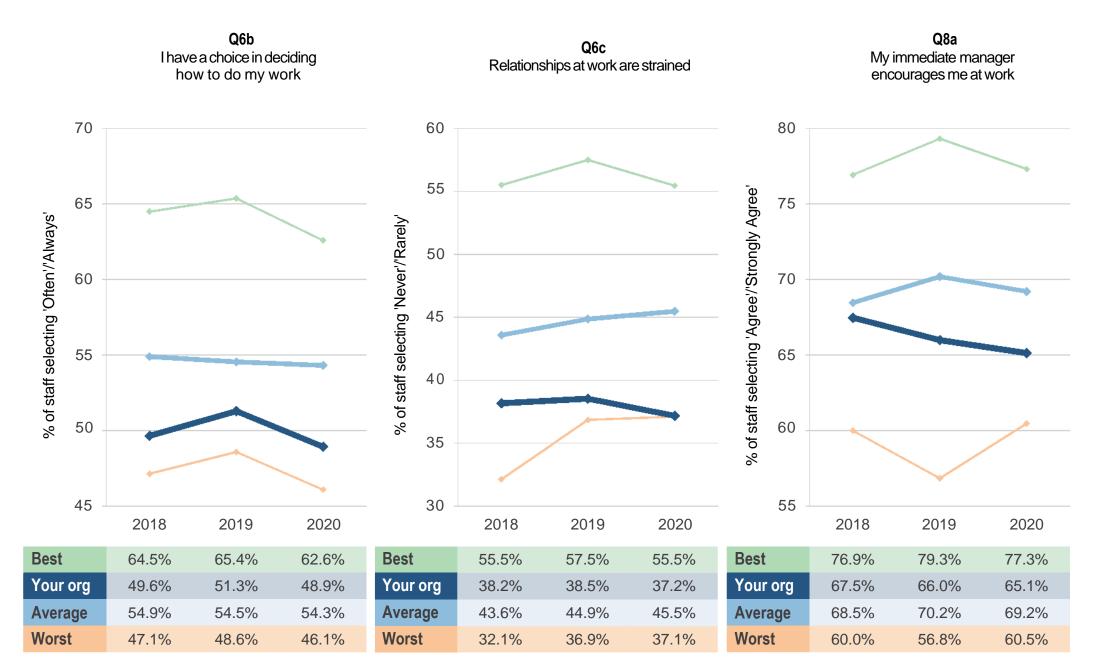
2020 NHS Staff Survey Results > Theme results > Detailed information > Morale 1/3











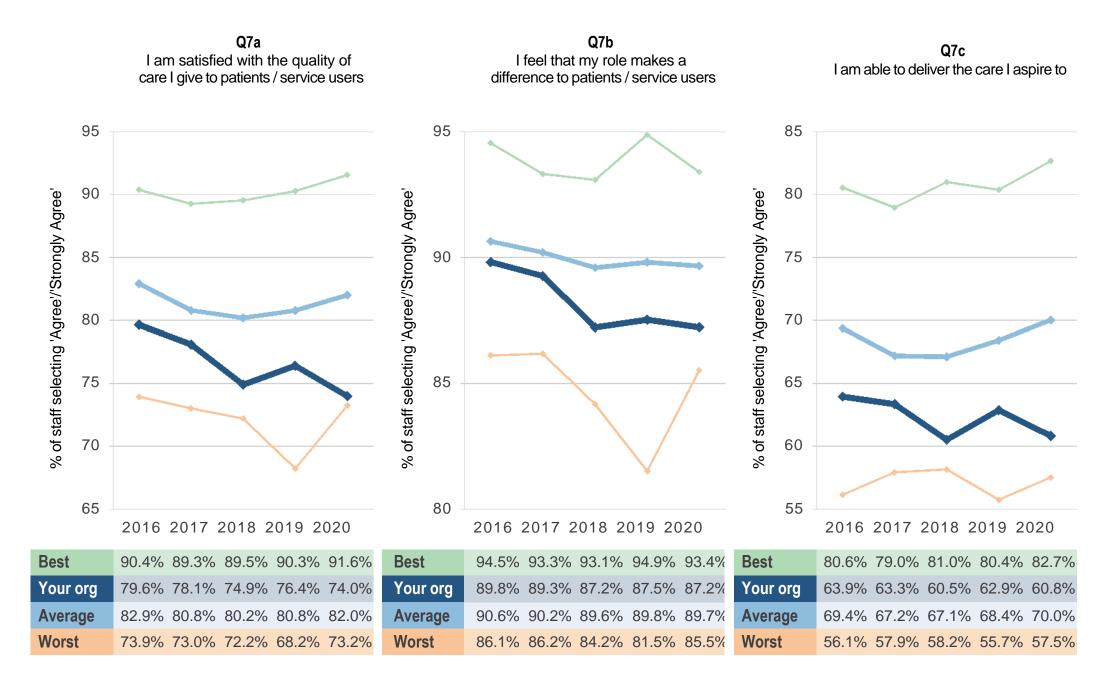


Q19a Q19b Q19c I will probably look for a job at a new I often think about As soon as I can find another organisation in the next 12 months leaving this organisation job, I will leave this organisation 35 30 45 40 % of staff selecting 'Agree'/Strongly Agree' % of staff selecting 'Agree'/ Strongly Agree' % of staff selecting 'Agree'/'Strongly Agree' 30 25 35 25 20 30 20 15 25 15 10 20 15 10 5 2018 2019 2020 2018 2019 2020 2018 2019 2020 Worst Worst Worst 42.0% 41.7% 36.7% 32.6% 30.4% 29.5% 25.4% 23.6% 23.7% Your org Your org 37.5% 35.3% Your org 22.2% 17.1% 34.0% 23.1% 21.6% 16.9% 16.6% 29.7% 28.1% 26.7% Average 20.6% 19.9% 18.7% 15.0% 14.1% 13.2% Average Average **Best** 19.1% **Best** 13.9% 11.2% **Best** 7.5% 7.5% 18.7% 16.9% 12.9% 8.5%

2020 NHS Staff Survey Results > Theme results > Detailed information > Quality of care

Survey Coordination Centre

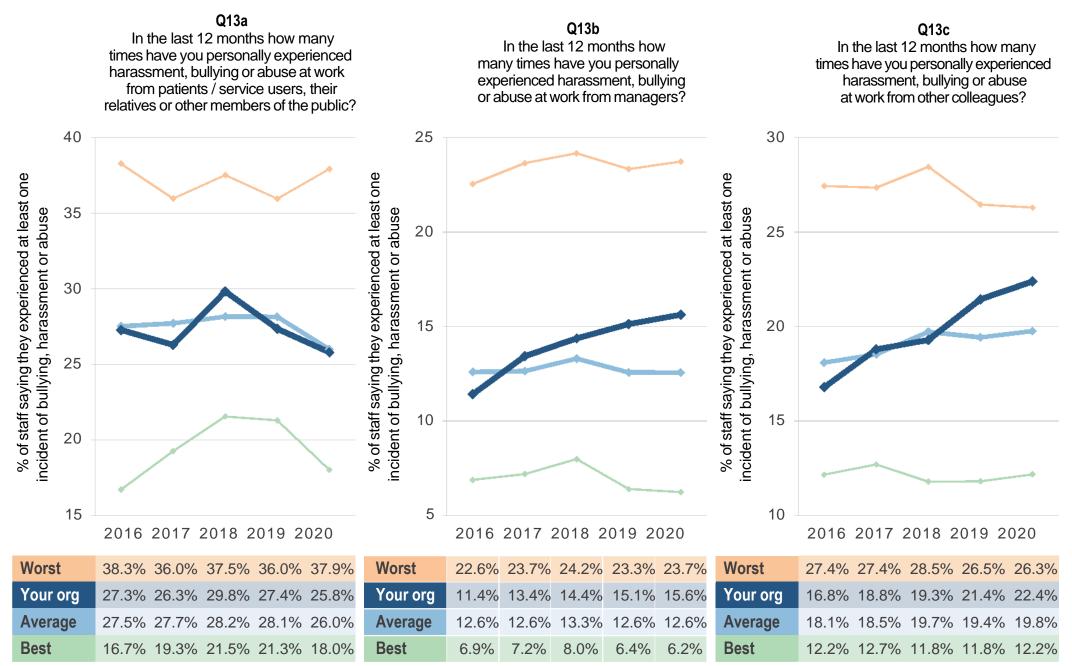




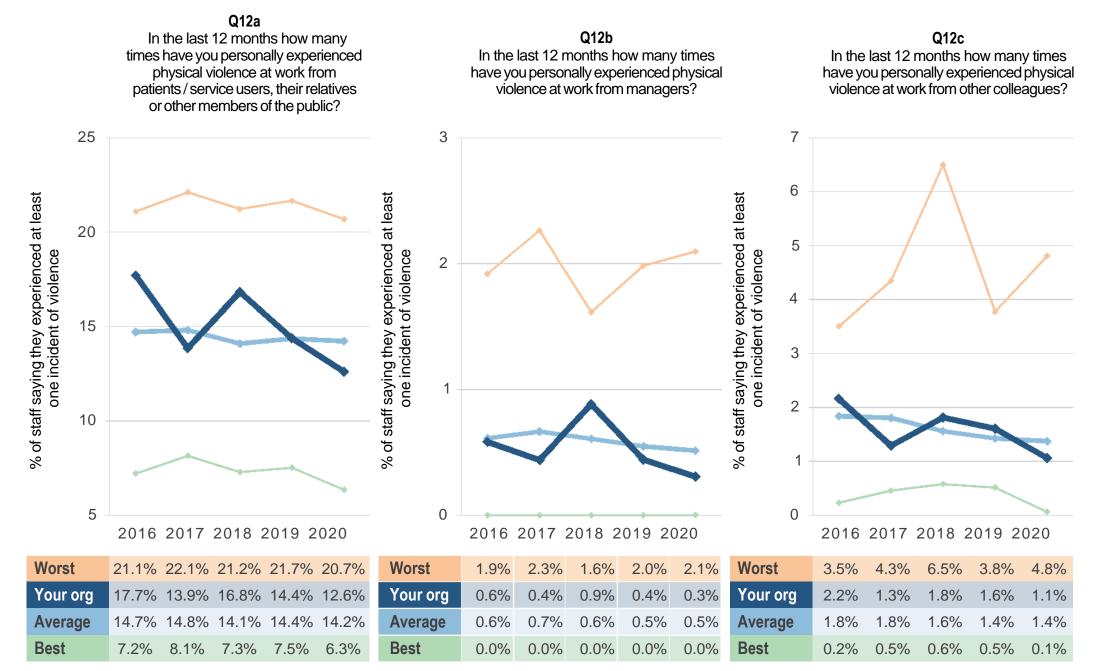
2020 NHS Staff Survey Results > Theme results > Detailed

information > Safe environment - Bullying & harassment



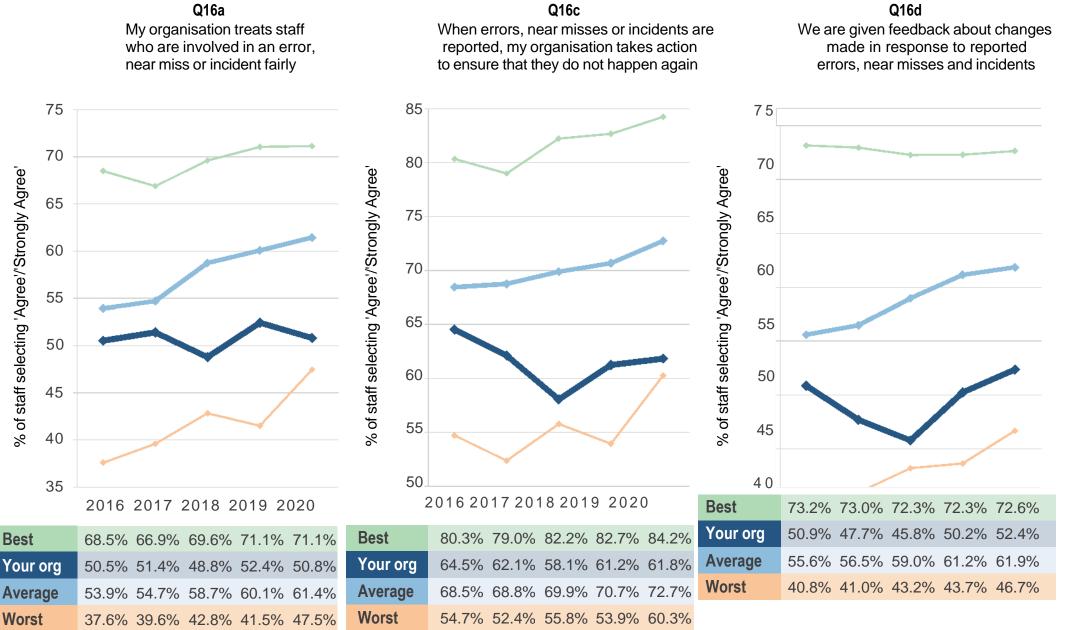






2020 NHS Staff Survey Results > Theme results > Detailed information > Safety culture 1/2

Survey Coordination Centre



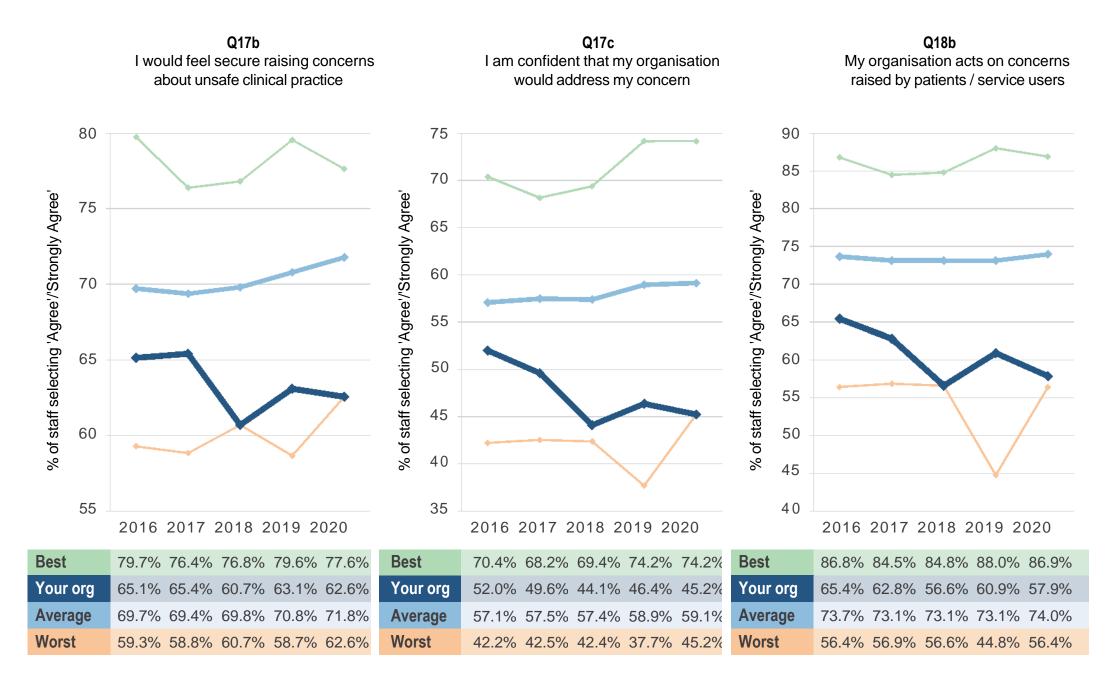
2016 2017 2018 2019 2020



2020 NHS Staff Survey Results > Theme results > Detailed information > Safety culture 2/2

Survey Coordination Centre





Survey Coordination

Centre

NHS England



2020 NHS Staff Survey Results > Theme results > Detailed

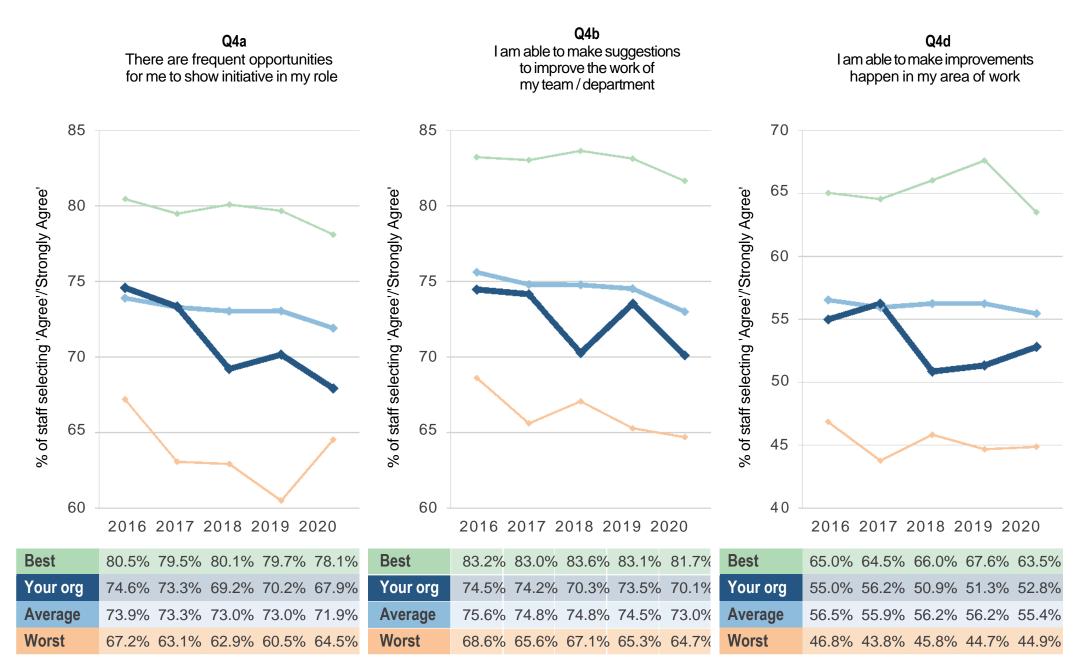
Survey

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information > Staff engagement – Ability to contribute to improvements





2020 NHS Staff Survey Results > Theme results > Detailed information > Staff

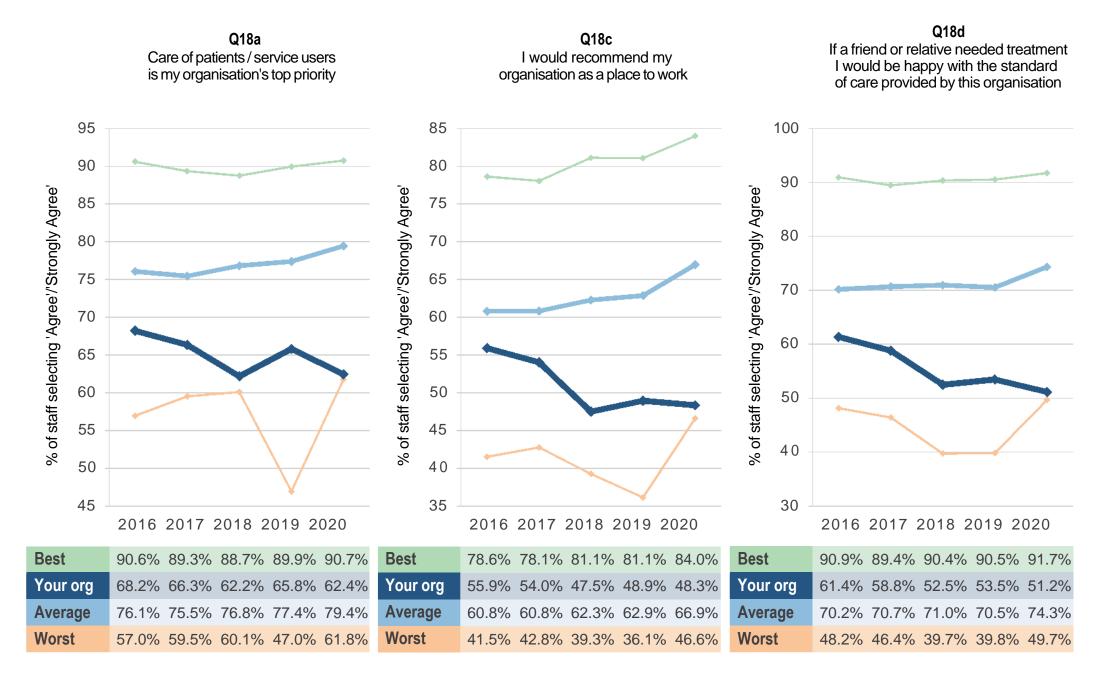
Survey

Coordination

Centre

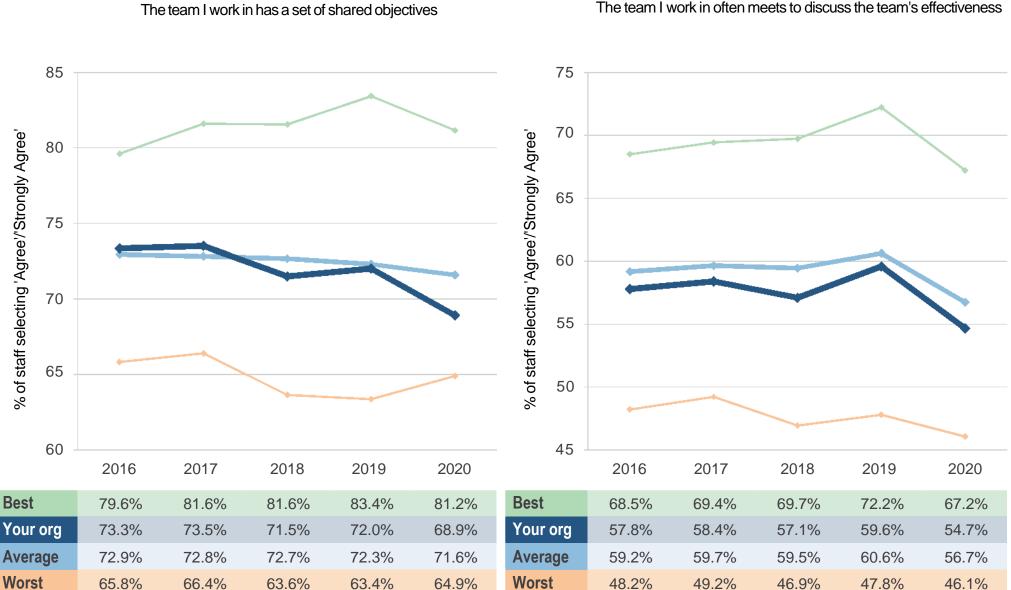
engagement - Recommendation of the organisation as a place to work/receive treatment











Q4h The team I work in has a set of shared objectives

Q4i The team I work in often meets to discuss the team's effectiveness



Workforce Equality Standards

The Shrewsbury and Telford Hospital NHS Trust 2020 NHS Staff Survey Results

Workforce Equality Standards



This section contains data required for the NHS Staff Survey indicators used in the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES). Data presented in this section are unweighted.

Full details of how the data are calculated are included in the Technical Document, available to download from our results website.

Workforce Race Equality Standard (WRES)

This contains data for each organisation required for the NHS Staff Survey indicators used in the Workforce Race Equality Standard (WRES). It includes the 2017, 2018 and 2019 trust/CCG and benchmarking group median results for q13a, q13b&c combined, q14, and q15b split by ethnicity (by white / BME staff).

Workforce Disability Equality Standard (WDES)

- This contains data for each organisation required for the NHS Staff Survey indicators used in the Workforce Disability Equality Standard (WDES). It includes the 2018 and 2019 trust/CCG and benchmarking group median results for q5f, q11e, q13a-d, and q14 split by staff with a long lasting health condition or illness compared to staff without a long lasting health condition or illness. It also shows results for q26b (for staff with a long lasting health condition or illness only), and the staff engagement score for staff with a long lasting health condition or illness, compared to staff without a long lasting nor illness and the overall engagement score for the organisation.
- The WDES breakdowns are based on the responses to q26a Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more? In 2020, the question text was shortened and the word 'disabilities' was removed but the question and WDES results still remain historically comparable.



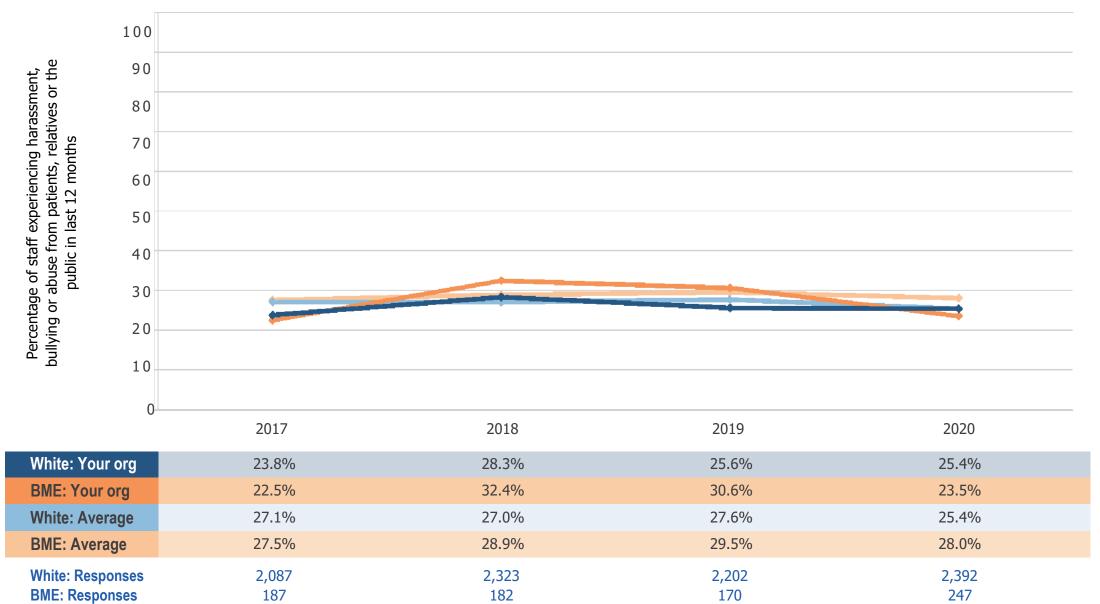
Workforce Race Equality Standard (WRES)

The Shrewsbury and Telford Hospital NHS Trust 2020 NHS Staff Survey Results

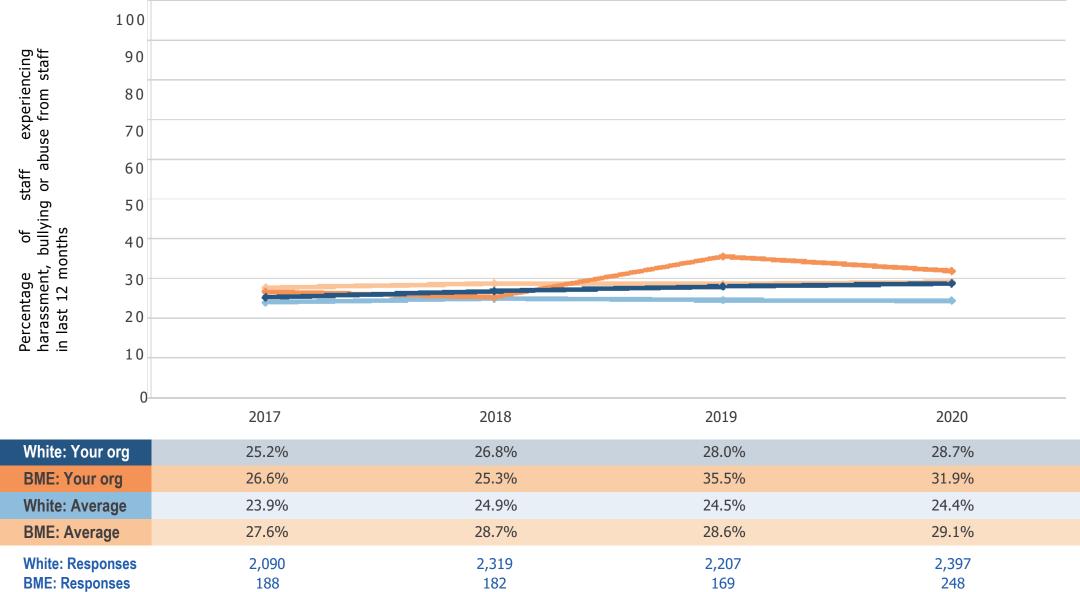


2020 NHS Staff Survey Results > WRES > Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months





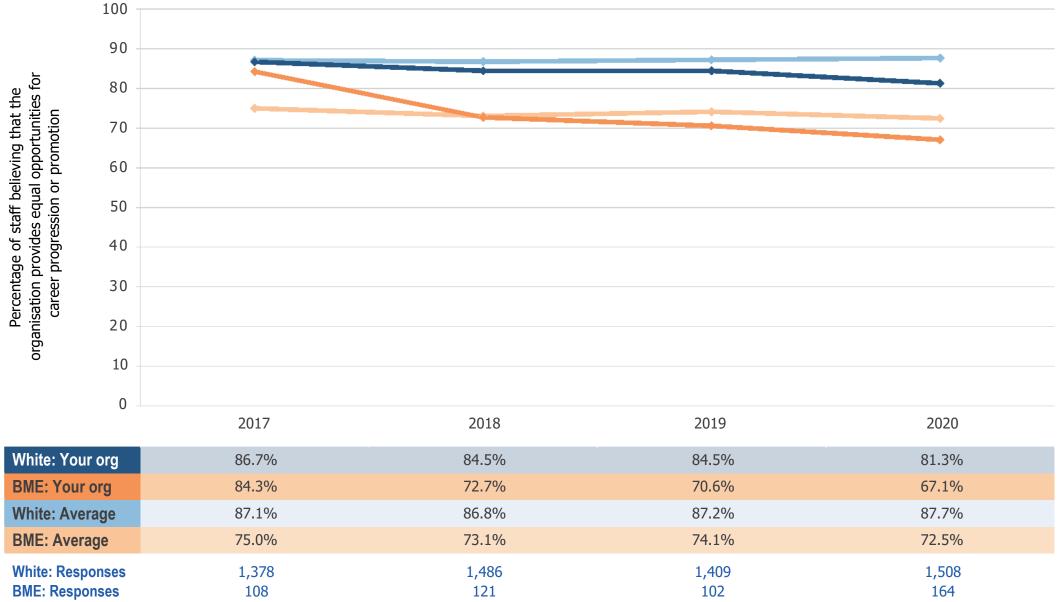






2020 NHS Staff Survey Results > WRES > Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion

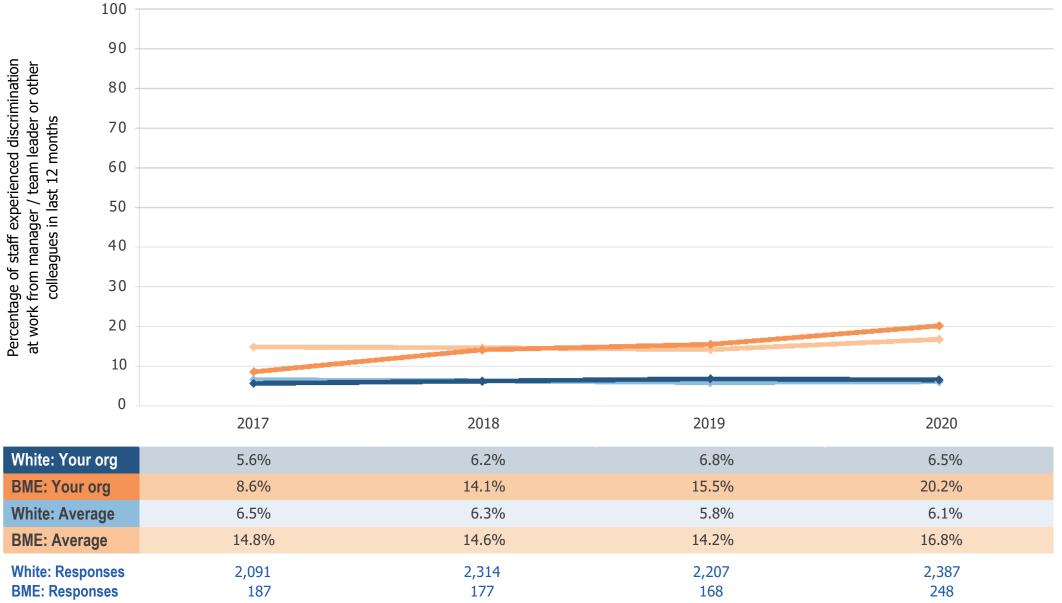






2020 NHS Staff Survey Results > WRES > Percentage of staff experienced discrimination at work from manager / team leader or other colleagues in last 12 months



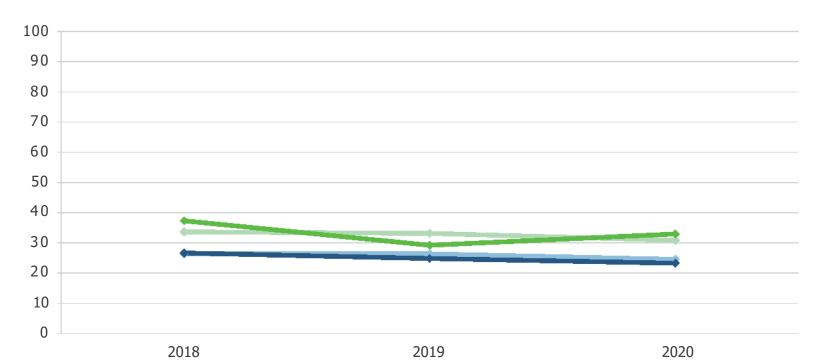




2020 NHS Staff Survey Results > WDES > Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months



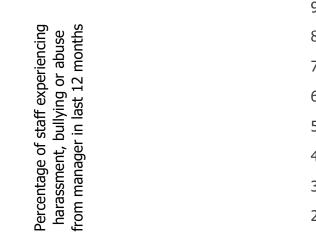
Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

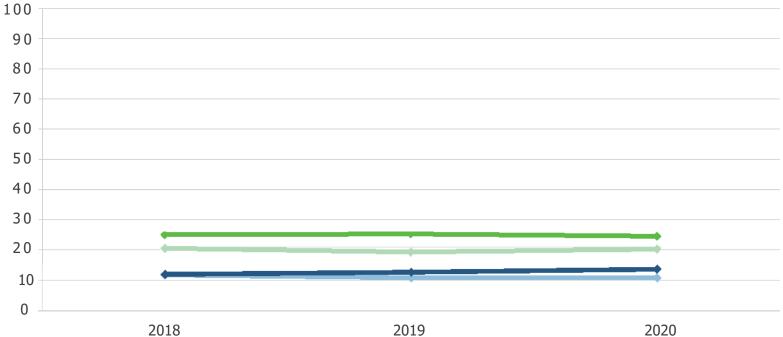


Staff with a LTC or illness: Your org	37.3%	29.2%	33.0%	
Staff without a LTC or illness: Your org	26.7%	24.8%	23.3%	
Staff with a LTC or illness: Average	33.6%	33.2%	30.9%	
Staff without a LTC or illness: Average	26.5%	26.4%	24.5%	
Staff with a LTC or illness: Responses	461	469	531	
Staff without a LTC or illness: Responses	2,052	1,917	2,119	
Average calculated as the median for the benchmark group				









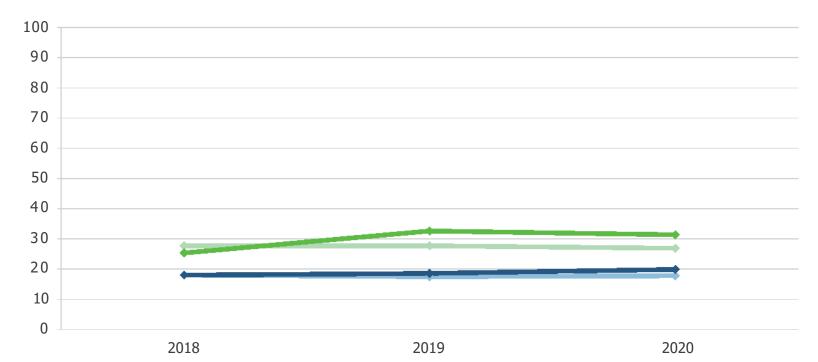
Staff with a LTC or illness: Your org	24.6%	24.8%	24.0%
Staff without a LTC or illness: Your org	11.9%	12.6%	13.6%
Staff with a LTC or illness: Average	19.6%	18.5%	19.3%
Staff without a LTC or illness: Average	11.7%	10.8%	10.8%
Staff with a LTC or illness: Responses Staff without a LTC or illness: Responses Average calculated as the median for the benchm	452 2,037	467 1,909	524 2,108



2020 NHS Staff Survey Results > WDES > Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months



Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months

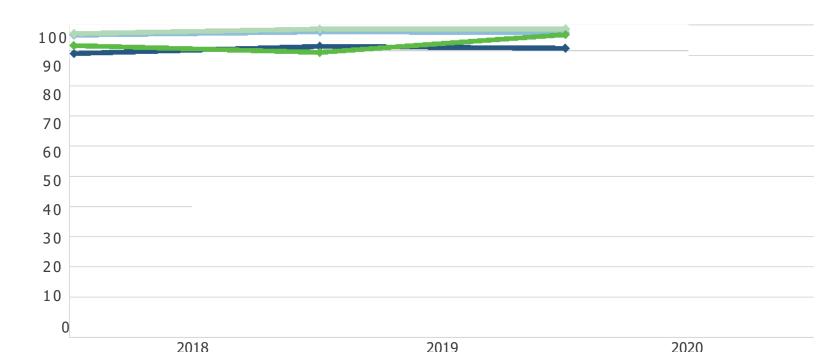


Staff with a LTC or illness: Your org	25.3%	32.6%	31.4%
Staff without a LTC or illness: Your org	18.0%	18.6%	19.9%
Staff with a LTC or illness: Average	27.7%	27.7%	26.9%
Staff without a LTC or illness: Average	18.0%	17.5%	17.8%
Staff with a LTC or illness: Responses	454	469	523
Staff without a LTC or illness: Responses Average calculated as the median for the benchmark	2,021 a group	1,901	2,092

2020 NHS Staff Survey Results > WDES > Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it



Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it



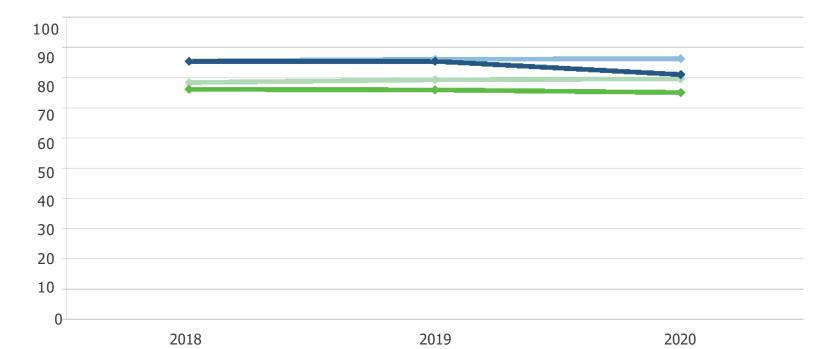
	2018	2015	2020	
Staff with a LTC or illness: Your org	41.6%	39.4%	45.2%	
Staff without a LTC or illness: Your org	39.0%	41.4%	40.8%	
Staff with a LTC or illness: Average	45.5%	47.0%	47.0%	
Staff without a LTC or illness: Average	45.0%	46.1%	45.8%	
Staff with a LTC or illness: Responses	209	241	259	
Staff without a LTC or illness: Responses	638	643	746	
Average calculated as the median for the benchmark group				



2020 NHS Staff Survey Results > WDES > Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion



Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion



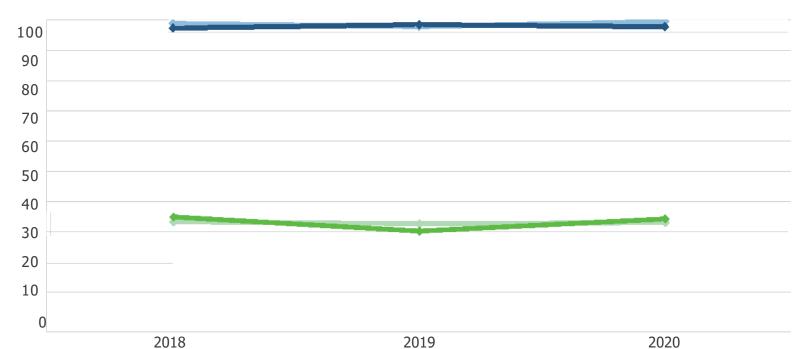
Staff with a LTC or illness: Your org	76.2%	75.9%	75.1%
Staff without a LTC or illness: Your org	85.4%	85.4%	81.0%
Staff with a LTC or illness: Average	78.4%	79.3%	79.6%
Staff without a LTC or illness: Average	85.5%	86.1%	86.3%
Staff with a LTC or illness: Responses Staff without a LTC or illness: Responses Average calculated as the median for the benchman	281 1,325 k group	291 1,226	313 1,364



2020 NHS Staff Survey Results > WDES > Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties



Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties

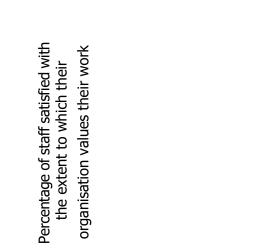


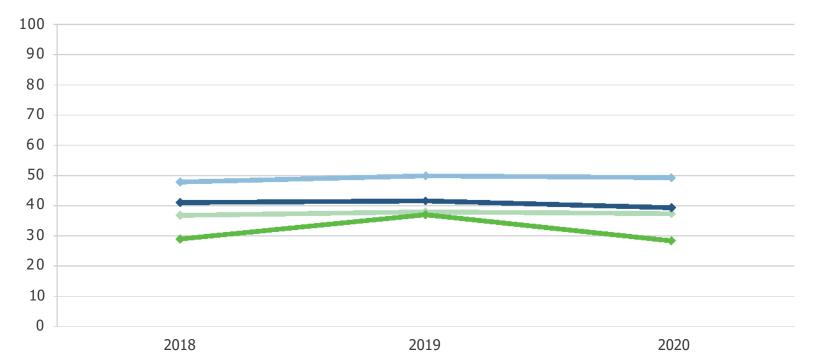
Staff with a LTC or illness: Your org	34.8%	30.2%	34.2%
Staff without a LTC or illness: Your org	21.3%	22.4%	21.8%
Staff with a LTC or illness: Average	33.2%	32.6%	33.0%
Staff without a LTC or illness: Average	22.8%	21.8%	23.4%
Staff with a LTC or illness: Responses	359	354	392
Staff without a LTC or illness: Responses Average calculated as the median for the benchma	1,149 rk group	1,029	956



2020 NHS Staff Survey Results > WDES > Percentage of staff satisfied with the extent to which their organisation values their work





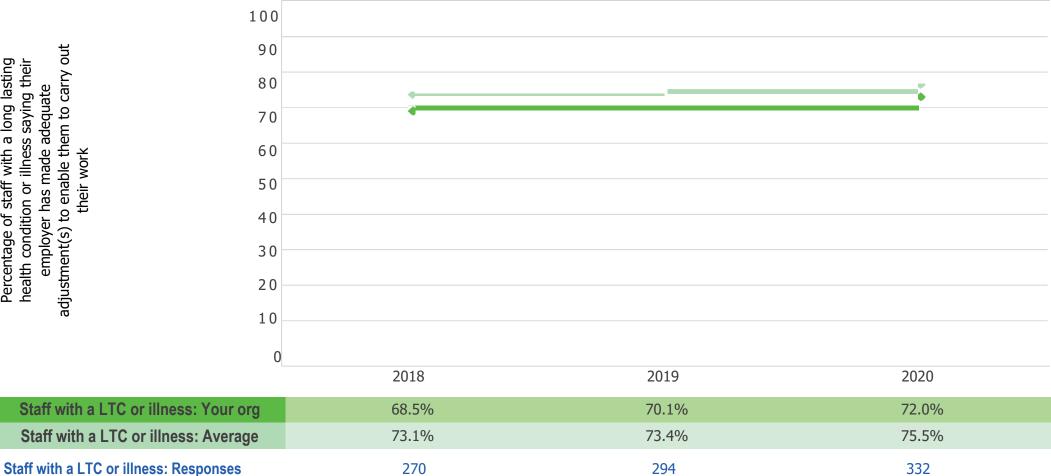


Staff with a LTC or illness: Your org	29.0%	37.0%	28.4%
Staff without a LTC or illness: Your org	41.0%	41.6%	39.3%
Staff with a LTC or illness: Average	36.8%	37.9%	37.4%
Staff without a LTC or illness: Average	47.8%	49.9%	49.3%
Staff with a LTC or illness: Responses	466	473	529
Staff without a LTC or illness: Responses	2,040	1,924	2,121
Average calculated as the median for the benchma	rk group		·

2020 NHS Staff Survey Results > WDES > Percentage of staff with a long lasting health condition or illness saying their employer has made adequate adjustment(s) to enable them to carry out their work

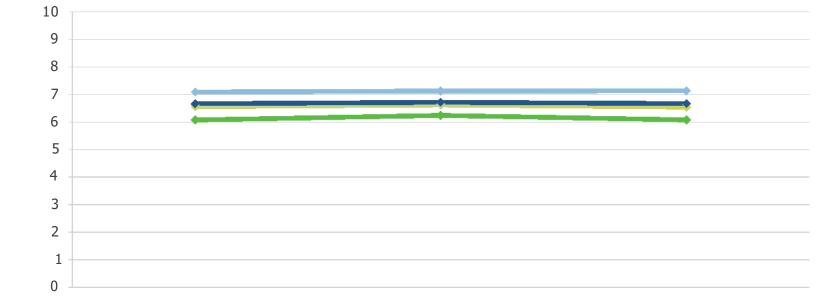


90 adjustment(s) to enable them to carry out Percentage of staff with a long lasting health condition or illness saying their 80 employer has made adequate 70 60 their work 50 40 30 20 10





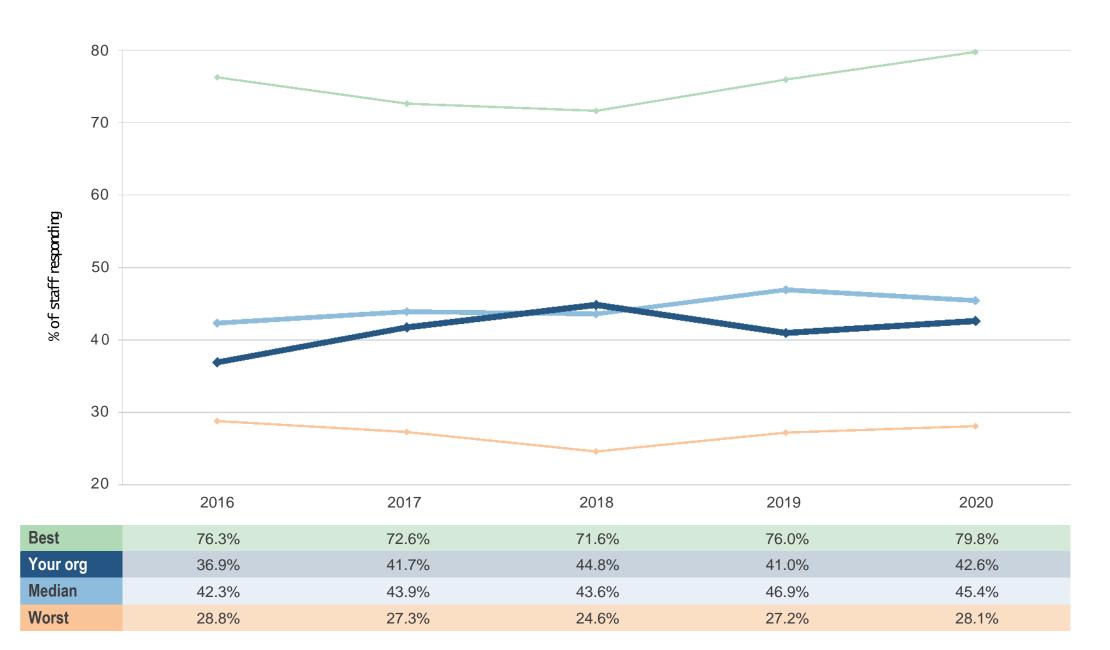
Staff engagement score (0-10)



	2018	2019	2020
Organisation average	6.6	6.6	6.5
Staff with a LTC or illness: Your org	6.1	6.2	6.1
Staff without a LTC or illness: Your org	6.7	6.7	6.7
Staff with a LTC or illness: Average	6.6	6.7	6.7
Staff without a LTC or illness: Average	7.1	7.1	7.1
Organisation Responses Staff with a LTC or illness: Responses	2,556 467	2,437 476	2,701 533
Staff without a LTC or illness: Responses	2,056	1,930	2,135









The table below presents the results of significance testing conducted on this year's theme scores and those from last year*. It details the organisation's theme scores for both years and the number of responses each of these are based on.

The final column contains the outcome of the significance testing: indicates that the 2020 score is significantly higher than last year's, whereas indicates that the 2020 score is significantly lower. If there is no statistically significant difference, you will see 'Not significant'. When there is no comparable data from the past survey year, you will see 'N/A'.

2019 Theme respondents	2019 score		2020 score	2020 respondents	Statistically significant change?
Equality, diversity & inclusion	9.1	2415	9.1	2687	Not significant
Health & wellbeing	5.6	2428	5.7	2692	Not significant
Immediate managers †	6.6	2426	6.5	2705	Not significant
Morale	5.9	2403	5.9	2691	Not significant
Quality of care	7.2	2073	7.1	2291	Not significant
Safe environment - Bullying & harassment	7.9	2409	7.9	2679	Not significant
Safe environment - Violence	9.5	2414	9.5	2684	↑
Safety culture	6.2	2407	6.1	2689	Not significant
Staff engagement	6.6	2437	6.5	2701	Not significant
Team working	6.6	2410	6.4	2654	¥

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

[†] The calculation for the immediate managers theme has changed this year due to the omission of one of the questions which previously contributed to the theme. This change has been applied retrospectively so data for 2016-2020 shown in this table are comparable. However, these figures are not directly comparable to the results reported in previous years. For more details please see the <u>technical document</u>.



Be Collectively Brilliant

Co-creating culture change at the Shrewsbury and Telford Hospital NHS Trust

Participation and Insights from the first all-staff conversation

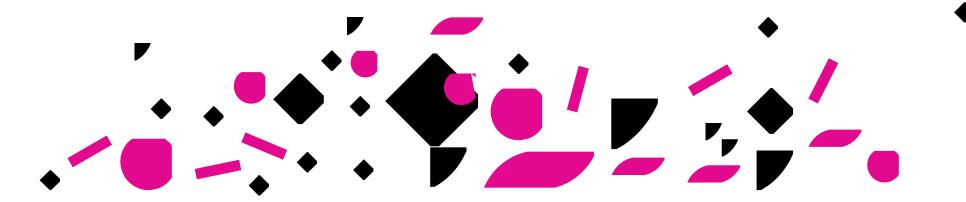
clevertogether.com @clever_together +44(0)208 3695 1251

Appendix 2

Making a difference together.

Your context and brief

- In December 2020, The Shrewsbury and Telford Hospital NHS Trust (SaTH) committed to a journey of culture change that would seek to improve the organisational culture by placing the voice of staff at the heart of change.
- Some key developments, internally and externally, provide a unique context for this work:
 - A new Chief Executive and more permanent and stable Executive Team
 - A new relationship with NHSI/E and CQC
 - The launch of the 2020/21 People Plan
 - The impact of the global Covid-19 pandemic, the increased demand on the NHS and an increasingly complex workforce supply
 - The publication of Donna Ockenden's first report following the Independent Review of Maternity Services at SaTH
 - The need and desire to work better as an integrated care system
 - The need to truly live and embed SaTH's values
- The Trust was responding to significant scrutiny and recognising the need to become an organisation that listens, learns and improves collectively.

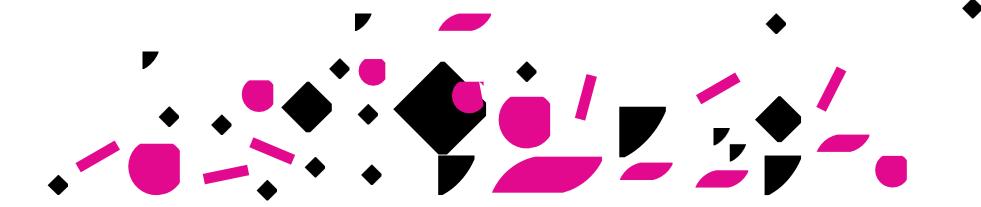




Project aims

The aim of this work was to carry out a large scale listening and engagement exercise to:

- Listen deeply to the voice of people, giving the opportunity for all staff to share their experiences, their concerns and their hopes for the future of SaTH;
- Co-create a behaviour framework to support and embed the Trust's values and create a shared sense of what behaviours should be consistently expected and what will not be tolerated;
- Work collaboratively, at pace and with scale to engage staff and to utilise their collective insight to improve organisational culture and performance;
- Develop capabilities for engaging with staff so that staff have a greater voice and can take part in this strategic journey.



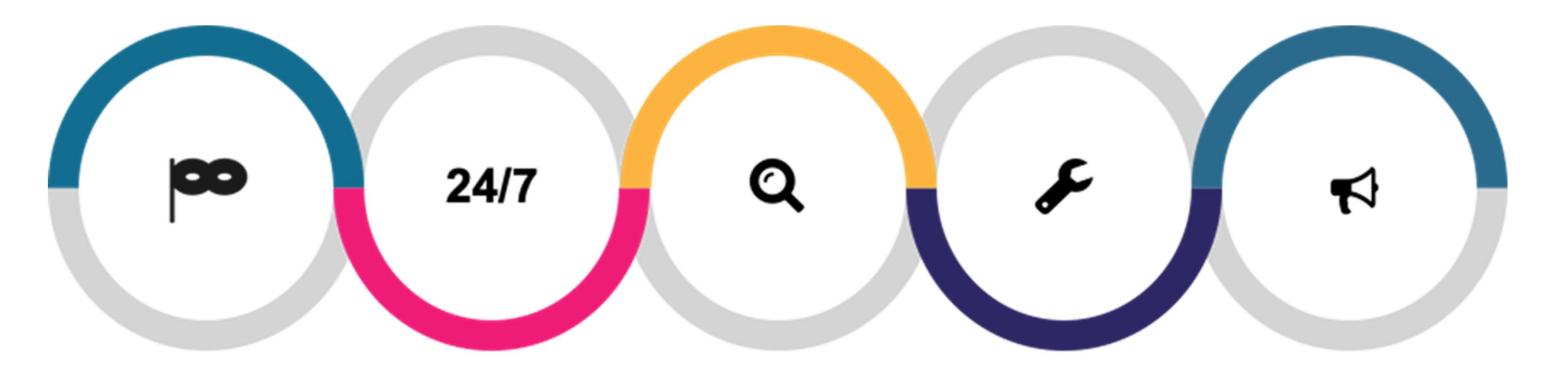


Your online conversation

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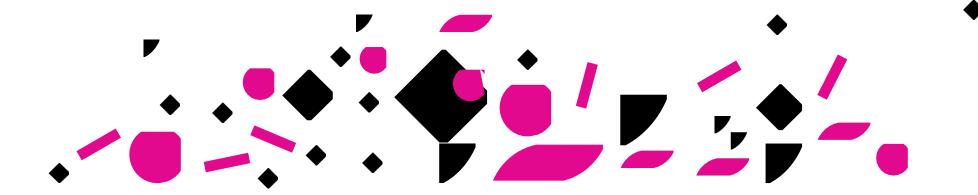


Why use an online conversation?



Always anonymised Open 24/7 so you can join at a time that suits

Read, vote and comment on others' ideas Judged on the quality of the idea, not by who said it



Psychologically safe space where even the quieter voices can be heard



How you generated interest

Making a difference together.

find out more , you can watch a short video at the pether website. " Just click the play button to get there.



Making a difference together.

For more information visit: SaTHMakingADifferenceTogether.org



Making a ifference together.

Making a Difference Together will enable every member of our organisation to have their say, share experiences of working in the Trust and help paint the picture of what our culture looks like.

This is our opportunity to give an honest view on what it is like to work at SaTH, and to be part of creating a positive culture that will benefit our working lives and the care we provide to our patients.

For more information visit:

SaTHMakingADifferenceTogether.org or email sath.stafffeedback@nhs.net



Dear colleague,

Welcome to your weekly Staff Information Bulletin. This bulletin will keep you up-to-date on information regarding patient care, useful training dates, events and staff discounts and routine maintenance work that may affect you.





Making a Difference Together is our first all staff conversation, where every member of our organisation can have their say, share experiences of working in the Trust and help paint the picture of what our culture looks like, and it is now live!

The Making a Difference Together platform gives all staff an opportunity to share their ideas and insights in a safe, anonymous online space. It is open 24 hours a day, 7 days a week until 8th Feb. You can join the Making a Difference Together online workshop from a PC, tablet or smartphone!

To access via smartphone or tablet:









For more information visit SaTHMakingADITlerenceTogethenorg or email sath stafffeedback@nhs.net.

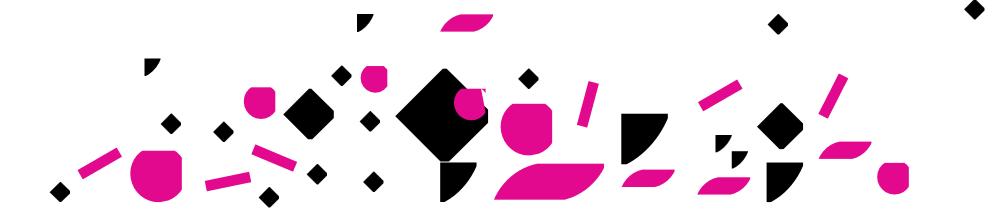


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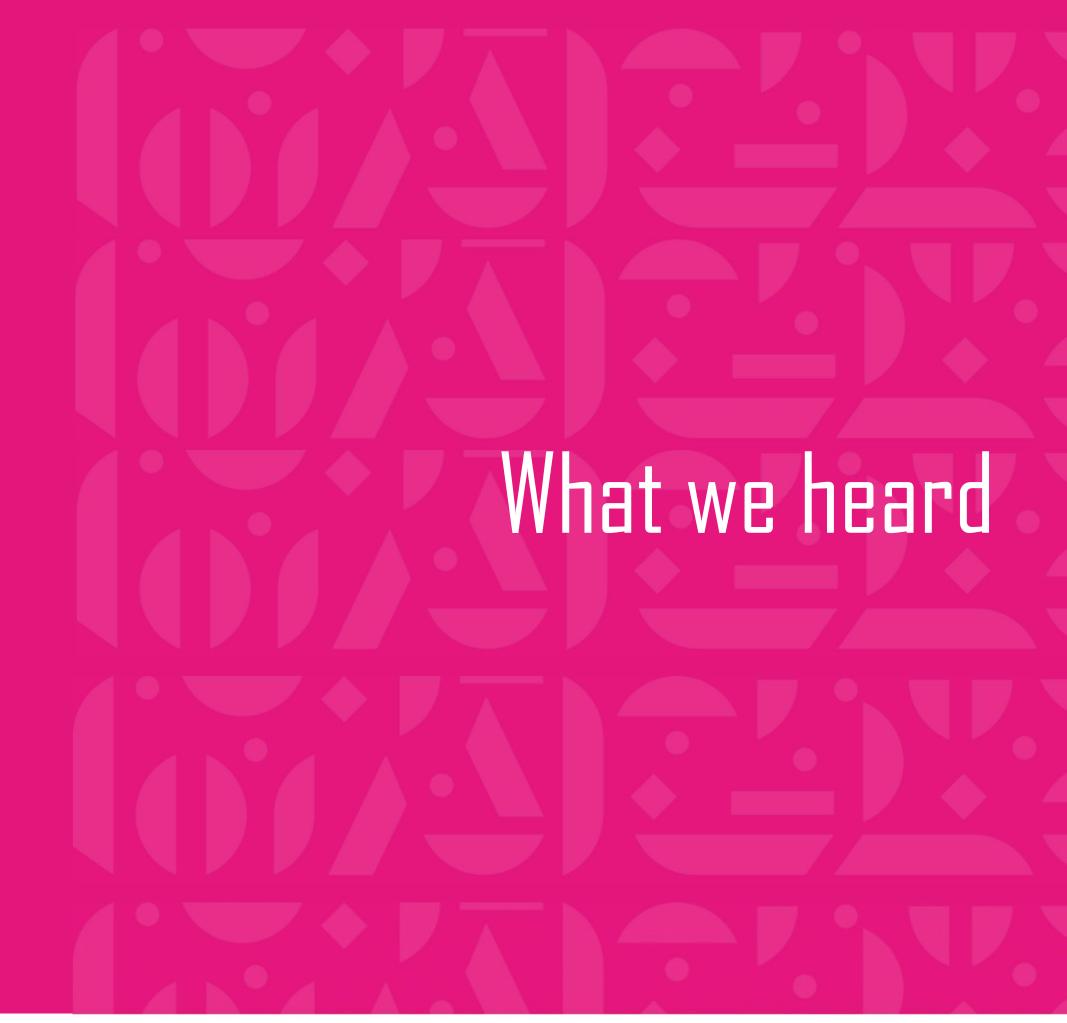


Overview of participation and contributions

- SaTH's first all-staff online conversation ran for four weeks from 12 January 8 February 2021. It was a chance for every member of staff to have their voice heard.
- 8,031 members of staff were invited to participate in the online conversation.
- **1,116** members of staff logged onto the platform to share ideas and experiences and to read what others have shared. This means that **14%** of the organisation joined the Making a Difference Together conversation.
- Together, they shared nearly **8,000** contributions a combination of ideas, comments and votes.
- Participants were drawn from every staff group and represent the diverse views of staff across SaTH by care group, band, site, and protected characteristics.





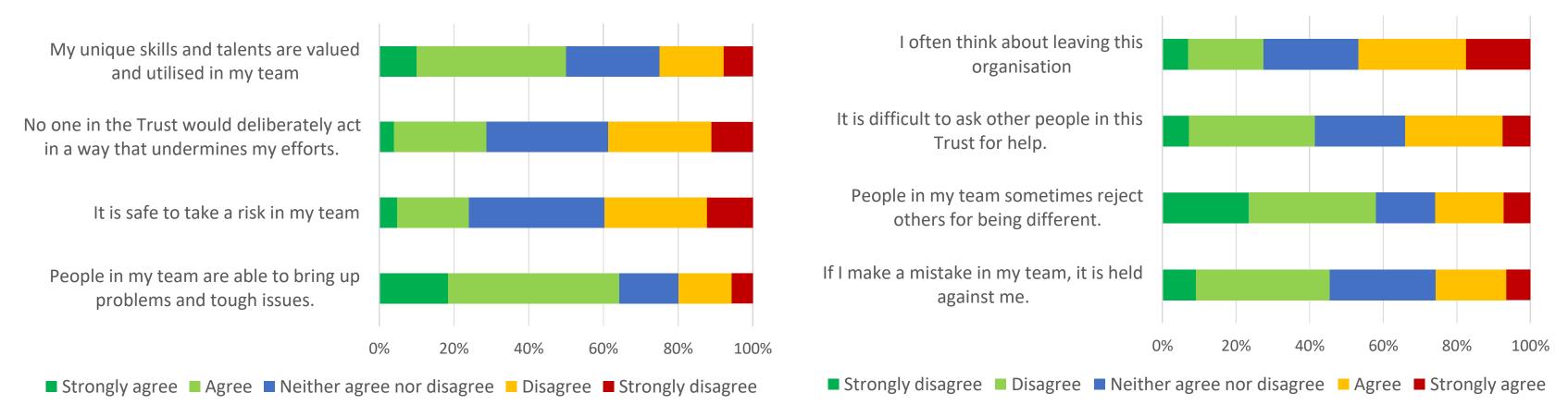


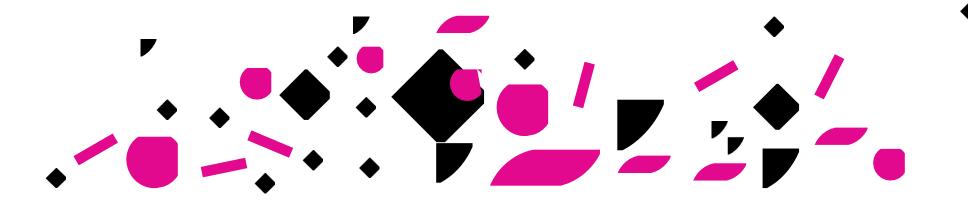
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Psychological safety at SaTH

- As staff joined the online conversation, we asked them some questions that sought to understand how easy it is to 'speak up' in the Trust, how they feel about the future, and how well the Trust values are lived.
- **47%** of participants (467) often think about leaving. This is higher than SaTH's latest 2020 Staff Survey results where **35%** of respondents (950) said they often think about leaving. The average across the benchmark group was **27%** so in both cases, this is an area of concern for SaTH.



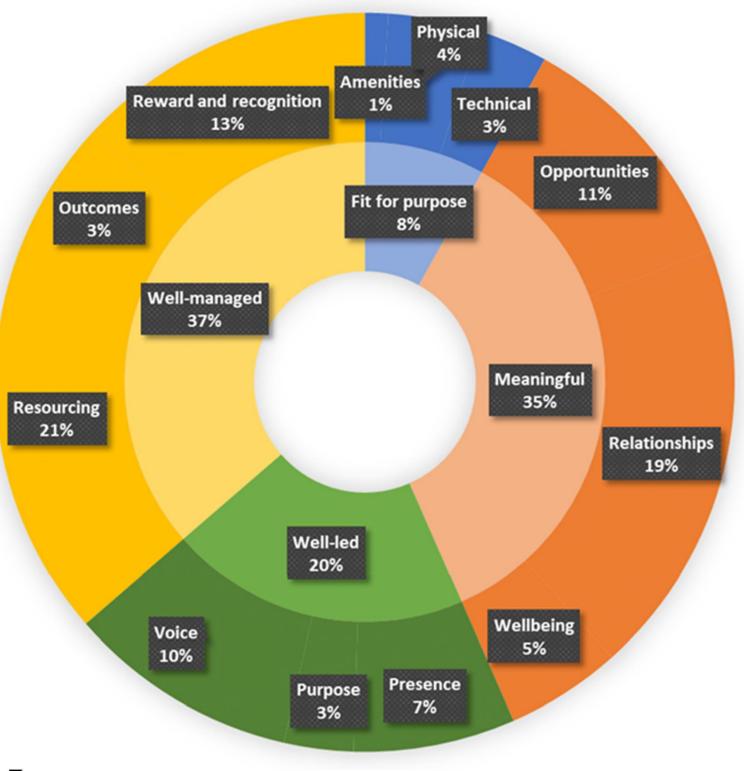


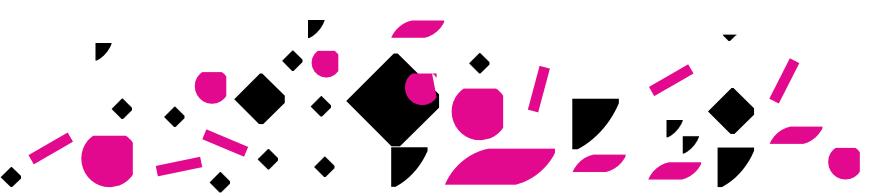


What matters to SaTH

Our coding and analysis showed;

- The majority of the discussions were centred around resourcing (21%) – the need to have the right people, in the right places at the right time, and effective HR policies in place.
- Just under a fifth of the discussions (19%) related to relationships – the need to have relationships based on trust and respect, teams that are inclusive with differing views encouraged and welcomed, and bullying and harassment is not tolerated.
- This was followed by discussions on reward and recognition (13%) and specifically on recognising and valuing people's contributions and effort. When asked how satisfied they are with the level of recognition and thanks they receive, 257 participants (26%) answered that their work is rarely or never appreciated.





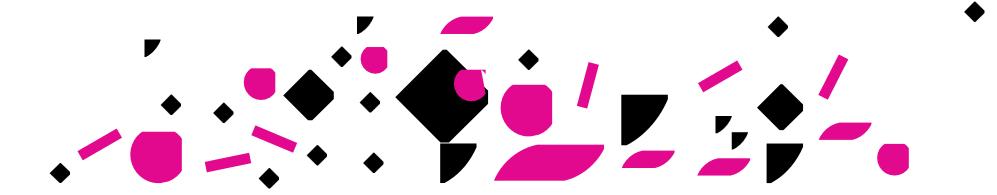
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Cross cutting themes

When we looked across the whole data set for the whole the conversation, we also learnt that there was:

- Evidence of bullying and blame between individuals, teams and departments
- A sense of favouritism and nepotism where opportunities are given to people without fair processes being followed
- A sense that there is more care demonstrated for patients than towards each other
- An instinct to shy away from anything perceived to be negative and to not fully acknowledge what has been said

Every single idea, comment and vote has been read, coded and analysed to give us a series of insights. These insights become the areas where the Trust can focus its efforts to make changes.



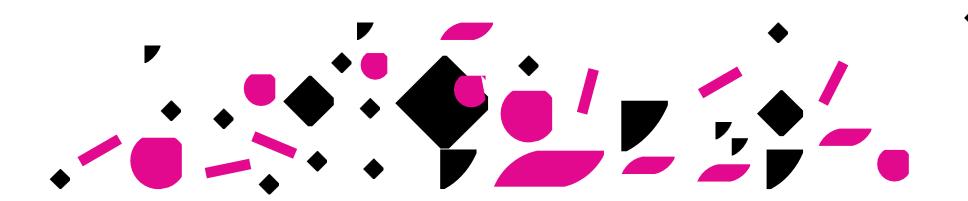




Insights and findings

Our analysis revealed that there were clear areas where the Trust could focus, and where identifying the right actions to take would encourage the culture change. We grouped all our analysis in to these 5 main insights;

- Leadership development
- Staff engagement
- Values and behaviours
- Workforce development
- Working better together





Insights – Leadership development

- There was a lack of clarity around what leadership is (and who the leaders are), and some uncertainty around the difference between leadership/management and clinical/strategic leadership.
- Staff felt leaders were out of touch with the delivery of care and needed to reconnect more closely with frontline demands.
- They also felt there was a need to be more visible to staff including those at home.
- There was a request to empower people to offer ideas and solutions, and to be open when things have gone wrong so you can learn and improve.
- Leaders need to connect across teams and to actively break down siloes of working.
- Most importantly leaders need to be fair and consistently good role models for staff.





Insights – Staff engagement

- Participants do not always feel listened to and even when views are shared, often it is not acted upon.
- Staff want to have an active voice in change and to be part of the improvement journey.
- There is concern that negative feedback is disregarded and not properly considered and a clear ask for greater honesty and transparency. Staff want to be part of the solution but this requires more openness.
- One of the top topics of conversation was a perceived lack of recognition or appreciation for work done. This has the impact of leaving people feeling ignored, disposable and not valued.





Insights – Values and behaviours

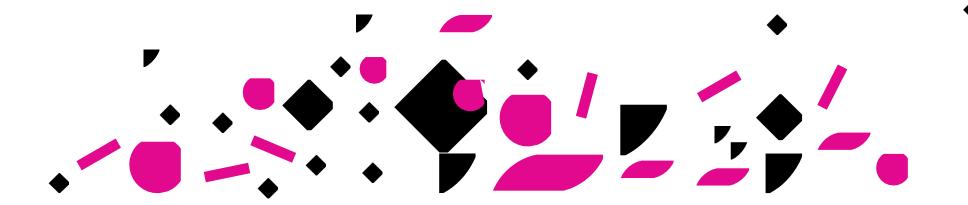
- Over 50% of the conversation focussed on the behaviours of fellow staff.
- There was mixed feedback on the values, specifically that only around 50% of participants felt staff are living the values of partnering and ambitious, and 14% do not understand what partnering means.
- While caring was the value that felt most lived (83%), there is a disconnect between care given to patients and care between staff.
- There is inconsistency of expectations and this allows for poor behaviours to be tolerated and to become normalised over time.





Insights – Workforce development

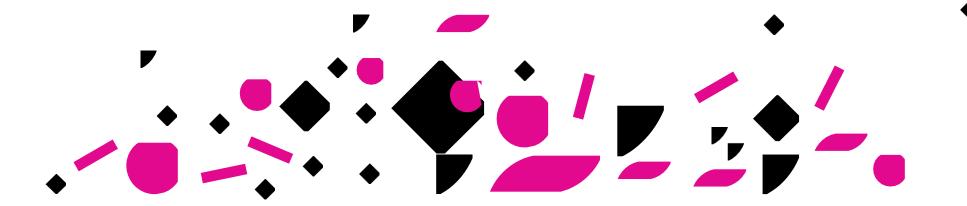
- Participants felt that resourcing is not well managed with issues around numbers and skills mix, and the support of other team members.
- Recruitment processes and development opportunities are not consistently open or fair and there is a feeling of nepotism and favouritism.
- There is a worrying degree of instability in the workforce as evidenced by the volume of staff who say they often think about leaving the Trust.
- 18% of participants felt their wellbeing is not supported.





Insights – Working better together

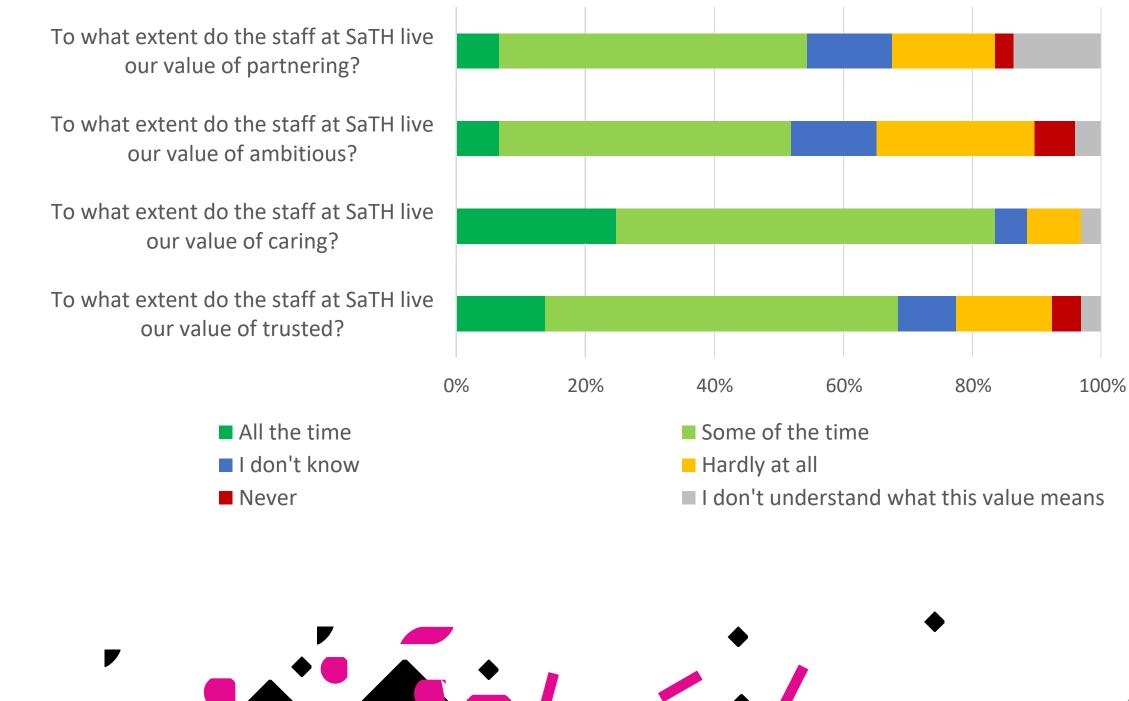
- Participants spoke a lot about the relationships they have with their colleagues, with different departments, and with their managers and leaders. It made up a fifth of the whole conversation.
- Relationships are a huge part of what makes work meaningful for staff and so they must be based on trust and respect. Teams need to be inclusive with differing views encouraged and welcomed, and bullying and harassment cannot be tolerated.
- Collaboration across individuals, teams and departments is core to improving relationships and a quality service. The focus needs to be on a learning culture as opposed to a blame culture.
- Bullying and harassment must be acknowledged and tackled.





Living our values

On entering the conversation staff were asked their views on how well the organisation lives its values.

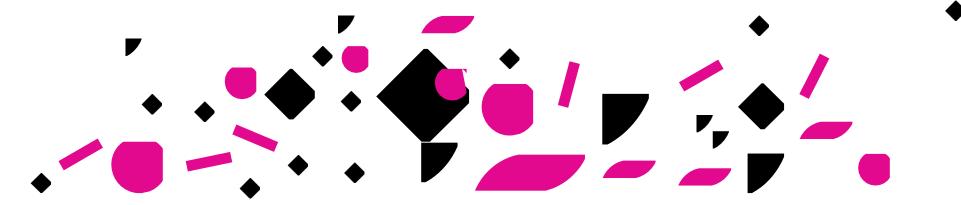






General recommendations

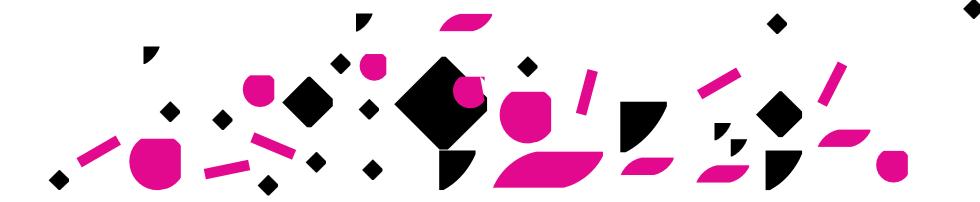
- Some aspects of culture change can take time to fix as these items are deep within the organisation and may require processes or policies to be changed.
- However some aspects are very quick to implement, such as showing more appreciation for people's hard work and demonstrating respect for other peoples views. These require no time and no money but make a significant impact on the relationship between people.
- Some aspects require focus from the Executive Team but there are many actions that will make a big difference that are in the power of every member of staff to do.
- Keeping a focus on people living the values will be helpful to creating the culture shift needed and there is further work to do, to embed those values and have more consistent behaviours.
- Giving people a voice in the changes they want to see will help ensure the right changes happen.
- Creating stability in the organisation will help to create an environment where changes can be made.





Leadership development

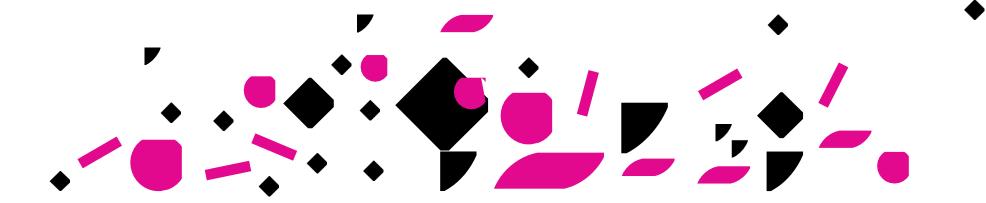
- Clarify SaTH's definition of its leaders, the expectations placed on those in leadership roles. Co-create a 'leadership commitment/promise' to set clear expectations on leaders.
- Insist that leaders connect more with teams and are actively visible, appreciative and supportive to staff.
- Encourage leaders to empower staff to speak up, offer suggestions for improvement, and to help make changes happen.
- Leadership development interventions including gaining collective agreement on what good leadership looks like, to ensure quality and consistency of role modelling and psychological safety.





Staff engagement

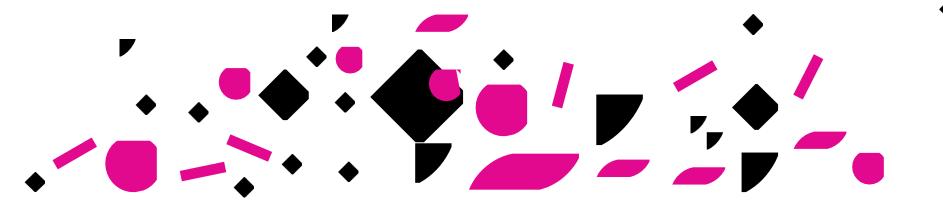
- The outcomes of this conversation must be shared with all staff with honesty and transparency along with a plan to address the points raised.
- Ongoing engagement must be built into the way SaTH operates. Consider asking staff what future conversations they would like to have.
- Appreciation and recognition must become a priority for all staff, role modelled by leaders.
- Consider how to ensure all staff have the opportunity to have their voice heard including targeting specific groups who are often under-represented (ie BAME staff, estates staff, and band 2 staff).





Values and behaviours

- Embed and create more visibility and links to the values. Consider asking teams for nominations and examples of people living the values. These can be used as case studies and as a way to recognise and celebrate the demonstration of these behaviours.
- Use the Making a Difference Together platform to share the draft behaviour framework (co-created with staff through this conversation), to check and refine it, and to gain buy-in form staff for the final framework.
- More work is needed to clarify what SaTH means by 'partnering' and this may be helped by the draft behaviours that sit underneath this value, and that staff themselves have said they want to see.
- It will be vital to encourage all staff to be caring towards each other as well as to patients. Unkind or uncaring behaviours must be called out and addressed, and everyone can play a role in doing this.
- Consider the need for training to help managers with some practical ways to embed the new values and behaviours framework into the everyday workings of their teams.





Workforce development

- Be honest and take practical steps to ensure the balance of staff is sufficient, acknowledging the additional challenges presented by the pandemic.
- Ensure recruitment policies are applied consistently and fairly and that managers are aware of the process and the rationale.
- Where possible, offer assurance and stability to the workforce by reconsidering temporary contracts, providing financial incentive for staff to pick up additional shifts, and creating a narrative that encourages and motivates people to stay the course of 'we're in this together' and 'we need you' etc.
- Improve and publicise the wellbeing offer for staff, ensure all managers are actively promoting what is available. Leaders must role model the need to support their own wellbeing as well as that of their teams.





Working better together

- Focus attention on relationships and always show respect for others and their views. This came through strongly in the draft behaviour framework.
- Wherever possible collaboration and shared learning should be encouraged and celebrated.
- Bullying and harassment must be stopped. The introduction of a behaviour framework should support shared expectations and enable conversations about behaviour and performance to happen more easily. HR processes and the Freedom to Speak Up Guardian must support this with both informal and formal options for dispute resolution.





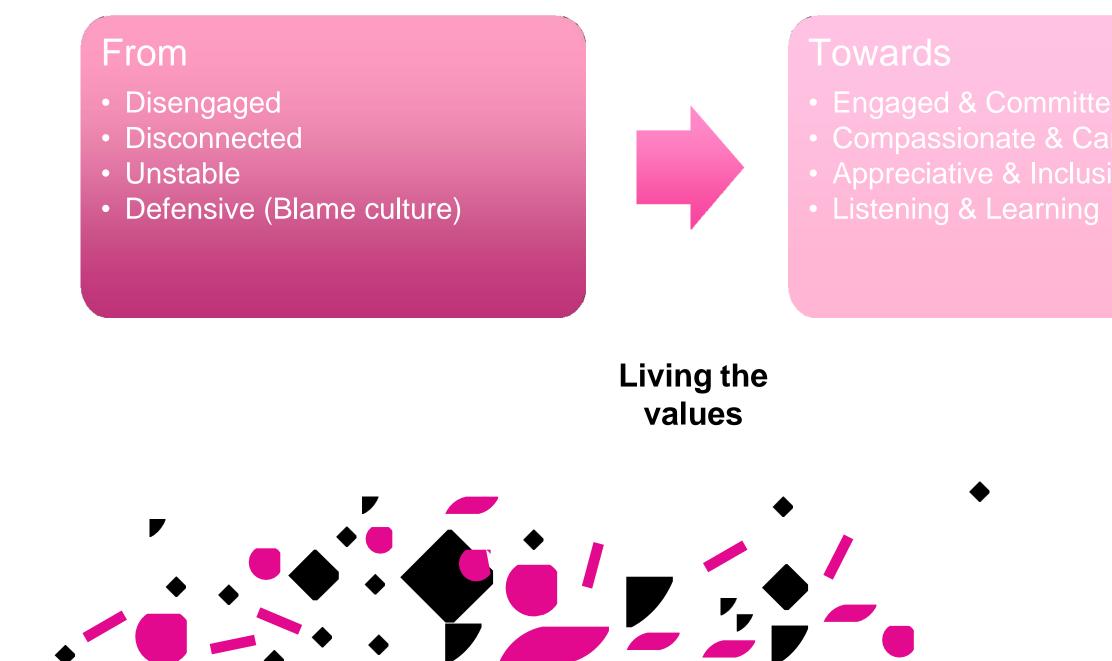
The culture change journey

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Culture change shift

It is helpful to be clear about the culture shift we want to make. Participants in the first conversation gave a baseline of how things are today and a clear sense of how they would like things to be in the future. Moving from 'current' to 'future' requires consistently living the values.



Compassionate & Caring



"I think this forum is a fantastic idea, but I can't help but have this gut feeling that once again, we will not be heard... SATH, it would be wonderful if you could do us proud and actually listen to our concerns and actively make changes for all to see on all levels across the board." - Anonymous participant

clever

together



