


Board of Directors 11 August 2022

Agenda item	155/22			
Report Title	Annual NHS Staff Survey Results			
Executive Lead	Rhia Boyode, Director People and OD			
Report Author	Emma Wilkins, Deputy Director of People and OD Dawn Thompson, Assistant Director of People, Leadership and OD			
	Link to strategic goal:		Link to CQC domain:	
	Our patients and community	√	Safe	√
	Our people	√	Effective	√
	Our service delivery	√	Caring	√
	Our governance	√	Responsive	√
	Our partners	√	Well Led	√
	Report recommendations:		Link to BAF / risk:	
	For assurance		BAF 3, 4	
	For decision / approval		Link to risk register:	
	For review / discussion			
	For noting			
	For information	√		
	For consent			
Presented to:	<ul style="list-style-type: none">2022.07.18: Operational People Group2022.07.21: Senior Leadership Committee - T2022.07.27: Quality and Safety Audit Committee2022.08.11: Board of Directors			
Executive summary:	<p>This paper shares our Staff Survey 2021 results, our work to date, our culture priority areas, Trust wide and Divisional schemes. Given its impact on the quality and safety of patient care and overall performance, ensuring the best possible experience for our staff is arguably the most important thing we can do as a Trust.</p> <p>The areas of focus continue to include civility, respect & inclusion, bullying & harassment, flexible working, career development, health & wellbeing and recognition.</p> <p>The Board of Directors is asked to review and consider our results and to endorse the Divisional and Trust wide Plans in the appendices.</p>			
Appendices	Appendix 1: Themed Analysis – Divisional People Plan Schemes Appendix 2: Results overview Appendix 3: Culture Dashboard Priority Areas Appendix 4: Civility Respect & Inclusion Appendix 5: Flexible Working			
Executive Lead				

1.0 Purpose

- 1.1 This report seeks to update the Board of Directors on the results of the Annual National Staff Survey 2021.
- 1.2 It also seeks to provide assurance that the proposed action planning will contribute to improvements across the Trust, and an increase in response rate for the 2022 survey later this year and in line with our People plan.
- 1.3 The experience of staff impacts engagement and thereby quality and performance. There is a direct correlation between staff experience and patient outcomes. Ensuring the best possible experience for our staff is therefore arguably the most important thing for us to do as a Trust.
- 1.4 Given the detailed report already provided to the Board, this report provides a headline summary of the results and the proposed plan (Appendix 1).

2.0 Situation

- 2.1 We scored below average for all elements of the People Promise, our lowest scores are 'we are always learning', 'morale', 'being recognised and rewarded', 'safe and healthy' and 'working flexibly'. Other categories including 'being compassionate and inclusive' scored below the sector average.
- 2.2 Compared with other Acute Trusts, our staff morale has shown a gradual decline (Appendix 2), currently sitting in the bottom quartile. Our engagement score is now at 6.29 which is the lowest compared with other Trusts in our sector (Appendix 2).

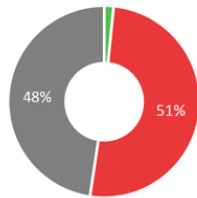
3.0 Background

- 3.1 Quality Health on behalf of 126 of acute Trusts were commissioned to run the 2021 staff survey. This report represents the Trusts results in comparison with those organisations.
- 3.2 The 2021 survey ran between October and December 2021, we achieved a 45% response rate, meeting our response rate target and the highest response rate since 2013. The full report can be found at [NHS Staff Survey 2021 Benchmark Reports \(nhsstaffsurveys.com\)](https://www.nhs.uk/staffsurvey2021benchmarkreports/).
The attached link <https://www.youtube.com/watch?v=074w9hCIHYo> takes you to our staff briefing by Rhia Boyode, Director People & OD.

4.0 Analysis - overview of the Staff Survey 2021 Findings and Headline Results

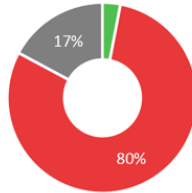
- 4.1 A total of 99 questions can be positively scored. 63 questions could be compared with 2020 staff survey data.

Historical comparison



- 1 (2%) question(s) have shown significant improvements since 2020
- 32 (51%) question(s) have shown significant declines since 2020
- 30 (48%) question(s) have shown no significant movements since 2020

Comparison with sector

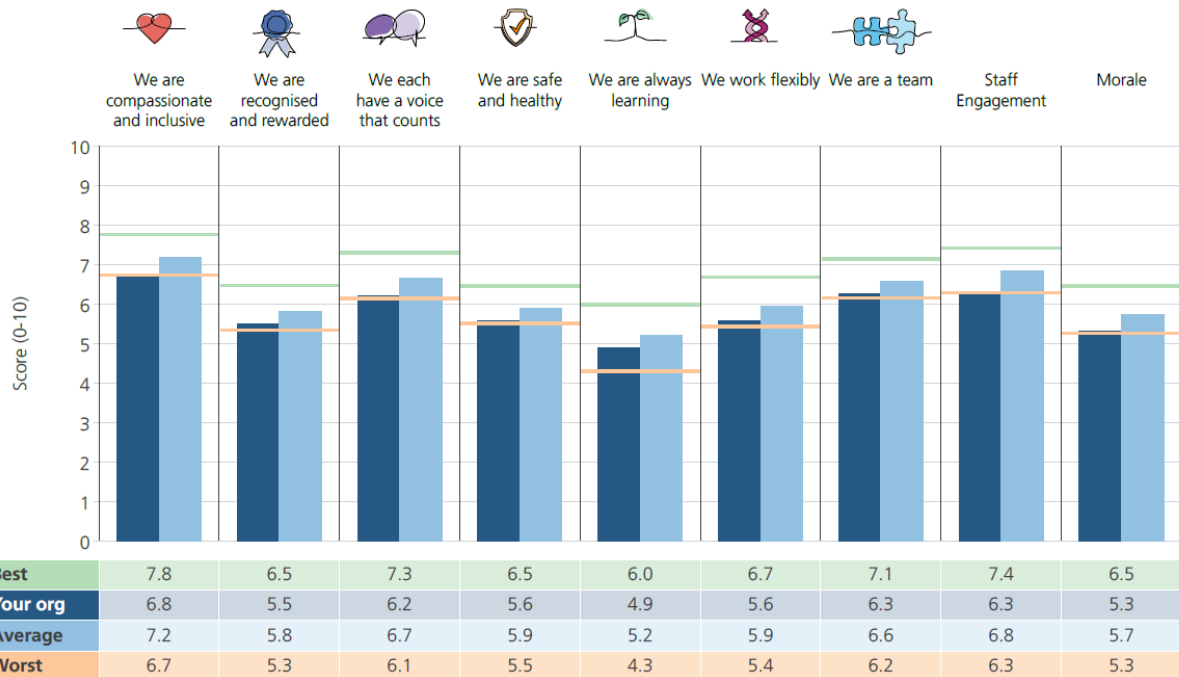


- 3 (3%) question(s) scored significantly better than the sector
- 79 (80%) question(s) scored significantly worse than the sector
- 17 (17%) question(s) showed no significant difference in relation to the sector average or comparisons could not be drawn

- 4.2 Where the reports refer to the 'average', this is referring to the average within our comparator group, which is all Acute and Acute & Community Trusts.
- 4.3 Our response rate was 45% against a median average of 46% in our sector. This has increased since 2019 from a low of 41%.
- 4.4 This year's survey results are, for the first time, presented against the seven NHS People Promise themes. The themes of Engagement and Morale have been included in previous surveys so enable longer term trend analysis.
- 4.5 The table below provides a summary by themes against the national average. Our Trust is below average across all themes. Further detail about this can be seen in section 5.

Survey
Coordination
Centre

2021 NHS Staff Survey Results > People Promise and theme results > Overview



- 4.6 Questions we scored higher than average for our sector in areas relating to discrimination from patients/service users/members of the public, as well as on grounds of ethnic background. Also scored better than average for our sector in staff experiencing violence at work from managers.

Question	SaTH	Sector	Difference
In the last 12 months I have personally experienced physical violence at work from managers	0%	1%	-0.32%
In the last 12 months I have personally experienced discrimination at work from patients / service users, their relatives or other members of the public.	6%	8%	-1.54%
Experienced discrimination on grounds of ethnic background.	39%	48%	-8.78%

- 4.7 We scored lower than average for our sector in questions relating to advocacy, patient priority and acting on their concerns, and also raising concerns.

Question	SaTH	Sector	Difference
If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation.	44%	68%	-24.22%
I would recommend my organisation as a place to work.	41%	59%	-18.36%
Care of patients / service users is my organisation's top priority.	59%	75%	-16.05%
My organisation acts on concerns raised by patients / service users.	56%	71%	-14.51%
If I spoke up about something that concerned me I am confident my organisation would address my concern.	34%	48%	-13.29%

- 4.8 We showed significant improvements in staff raising concerns during the 2021 survey compared to findings from the 2020 Survey.

Question	2020	2021	Difference
I would feel secure raising concerns about unsafe clinical practice.	63%	67%	+4.74%
I would feel confident that my organisation would address my concern	45%	47%	+2%

- 4.9 We showed significant declines in 32 questions when compared to 2020 Staff Survey results, worst scoring below relating to staff experiencing discrimination on the grounds of ethnic backgrounds, coming to work when unwell, a lack of staff within the organisation and advocacy.



Question	2020	2021	Difference
Experienced discrimination on grounds of ethnic background.	26%	39%	+12.59%
In the last three months I have come to work despite not feeling well enough to perform my duties.	51%	60%	+8.74%
There are enough staff at this organisation for me to do my job properly.	27%	19%	-7.71
I would recommend my organisation as a place to work.	48%	41%	-7.68%
If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation.	51%	44%	-7.53%

5.0 Analysis - People Promise Themes and Culture

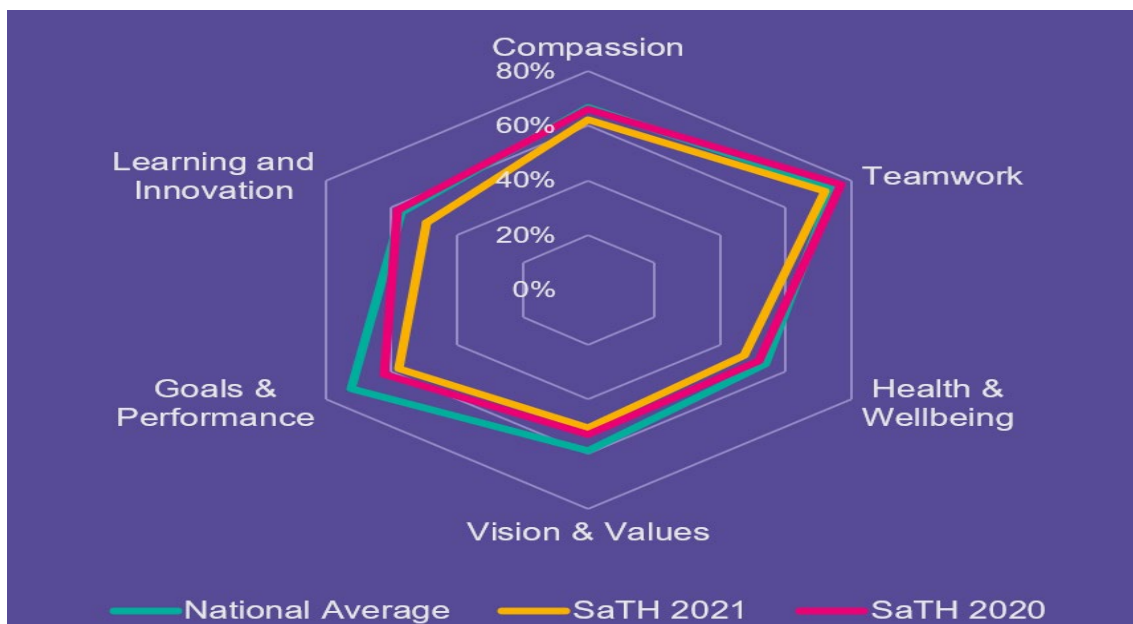
- 5.1 Under the People Promise Themes our lowest scores are 'we are always learning', 'we are recognised and rewarded', 'safe and healthy' and 'working flexibly'. Other categories including 'being compassionate and inclusive' also scored below the sector average – see below table. Appendix 1 highlights the Trust wide and Divisional Schemes under each Theme. The table below highlights how we compare against the sector average in the People Promise Themes and engagement and morale.

People Promise/Theme	Your Org.	Sector	Difference	
People Promise 1 We are compassionate and inclusive	6.76	7.17	-0.41	
People Promise 2 We are recognised and rewarded	5.51	5.81	-0.30	
People Promise 3 We each have a voice that counts	6.21	6.66	-0.45	
People Promise 4 We are safe and healthy	5.59	5.88	-0.29	
People Promise 5 We are always learning	4.90	5.23	-0.34	
People Promise 6 We work flexibly	5.58	5.95	-0.37	
People Promise 7 We are a team	6.26	6.56	-0.30	
Theme Staff engagement	6.29	6.81	-0.52	
Theme Morale	5.32	5.74	-0.42	

- 5.2 Compared with other Acute Trusts, our staff morale has shown a gradual decline, currently sitting in the bottom quartile. Our engagement score is now at 6.29 which is the lowest compared with other Trusts in our sector and has seen a gradual decline over the last five years.

Theme	2020	2021	Difference	
Staff engagement	6.55	6.29	-0.26	
Morale	5.62	5.32	-0.30	

- 5.3 During the last 12 months we have developed Our Culture Programme – from Discover to Design – and our culture dashboard focusses on the areas of compassion, teamwork, health and wellbeing, goals and performance and learning and innovation. The dashboard below measures our improvement which is aligned to the staff survey.



- 5.4 The staff survey results feed into this dashboard, the dashboard will be used to identify cultural interventions which will then be measured to understand the impact. The below table shows the alignment to the staff survey questions and themes.

Compassion	Goals & Performance	Health & Wellbeing	Learning & Innovation	Teamwork	Vision & Values
Q8c The people I work with are polite and treat each other with respect.	Q6a I feel that my role makes a difference to patients / service users.	11c During the last 12 months I have felt unwell as a result of work related stress.	Q20b There are opportunities for me to develop my career in this organisation.	Q16b In the last 12 months I have personally experienced discrimination at work from a manager / team leader or other colleagues.	Q21e I feel safe to speak up about anything that concerns me in this organisation.
Q8d The people I work with show appreciation to one another.	Q21a Care of patients / service users is my organisation's top priority.	Q11a My organisation takes positive action on health and well-being.	Q20d I feel supported to develop my potential.	Q7a The team I work in has a set of shared objectives.	Q3f I am able to make improvements happen in my area of work.
Q9d My immediate manager takes a positive interest in my health and well-being.	Q21c I would recommend my organisation as a place to work.	Q6b My organisation is committed to helping me balance my work and home life.	Q20e I am able to access the right learning and development opportunities when I need to.	Q7e I enjoy working with the colleagues in my team.	Q8a Teams within this organisation work well together to achieve their objectives.
Q9f My immediate manager works together with me to come to an understanding of problems.	Q21d If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation.	Q6d I can approach my immediate manager to talk openly about flexible working.	Q21b My organisation acts on concerns raised by patients / service users.	Q7g In my team disagreements are dealt with constructively.	Q8b The people I work with are understanding and kind to one another.

5.5 A Culture Steering group has been formed along with a change team to support this work. SaTH Improvement principles indicate that you should identify your biggest constraint (or issue) and try to 'fix' this first, rather than dilute your efforts over lots of areas that may have less opportunity for improvement.

With that in mind, the People and OD Directorate have reviewed the staff survey responses and numbers of respondents to see which areas would have the highest impact on the areas covered in the Trust's culture dashboard and prioritise the top 10 areas for interventions against each of the questions.

The tables below show the Top Ten areas for improvement against "compassion theme", full question themes, can be found (Appendix 3).

Dashboard Area Question	Compassion	Compassion	Compassion	Compassion
	Q8c The people I work with are polite and treat each other with respect.	Q8d The people I work with show appreciation to one another.	Q9d My immediate manager takes a positive interest in my health and well-being.	Q9f My immediate manager works together with me to come to an understanding of problems.
1	Domestic Services	Domestic Services	Domestic Services	Domestic Services
2	Oncology Services	Catering Services	Pathology Services	Surgical Services
3	Accident and Emergency	Pharmacy Services	Theatre Services	Trauma & Orthopaedic Services
4	Catering Services	Accident and Emergency	Trauma & Orthopaedic Services	Catering Services
5	General Internal Medicine Services	Oncology Services	Surgical Services	Cardiology Services
6	Pharmacy Services	Surgical Services	General Internal Medicine Services	Theatre Services
7	Surgical Services	Pathology Services	Neonatal Services	Inpatient Therapy

8	Theatre Services	Obstetrics and Gynaecology Services	Care of the Older Person Services	Neonatal Services
9	Pathology Services	Theatre Services	Accident and Emergency	Care of the Older Person Services
10	Neonatal Services	Portering Services	Portering Services	Radiology & Imaging Services

5.6 A key focus for teams across People & OD will be to work with Divisions and departments to identify the appropriate intervention to support local improvements addressing the area of concern. This will also feed into the Divisional people plan priorities and enable us to align appropriate resources to the areas of need.

5.7 In addition to these interventions at a local level, we are supporting a number of Trust wide interventions to support a change across our Trust which are detailed in Appendix 1. However our flagship programmes include:

- How it feels to work at SaTH- Civility Respect & Inclusion (Appendix 4)
- Our mindset to approaching Flexible Working (Appendix 5)
- Reviewing Appraisal process and Career Conversations supported by Scope for Growth

6.0 Conclusion

6.1 Despite lots of great work since the 2020 Staff Survey this is not yet translating in improvements in our Staff Survey results. While this is disappointing, we are determined to continue our improvement journey and our key priority areas have been identified which are also aligned to our Getting to Good Journey.

7.0 Risks

7.1 Failure to act on the results risks undermining staff confidence in the Leadership of the Trust and would be a reputational risk to the Organisation.

8.0 Trust Wide and Divisional People Plan Themes


8.1 The People Plan themes at Appendix 1 sets out priority areas for focus and measures of success. This takes account of the feedback from staff through the survey, from our staff networks and broader intelligence, for example, themes arising from employee relations cases and Freedom to Speak Up reporting. Whilst the plan provides a focus for the next year, making a notable difference in these areas would have sustained positive benefits. There is further work now required in the areas to develop this further, including engaging staff in regard to the 'how' for delivery. Monitoring progress and impact will be given attention. Progress with the delivery of the plan will be overseen by the OPG. Divisions have also been asked to continue to develop their own people plans to focus on local priorities. These will be monitored through Divisional PRM's.



9. Recommendation


9.1 The Board of Directors is asked to review and consider our results and to endorse the Divisional and Trust wide Plans in the appendices.


12 July 2022

Appendix 1 – Staff Survey- 2022 Trust Wide and Divisional People Plan schemes



Theme	Analysis	Trust wide schemes	Divisional Action schemes
<p>We are compassionate and inclusive</p> 	<p>Below average at 6.8 compared to an average of 7.2. The worst is 6.7. The best is 7.8.</p>	<p>Reviewed progress against our Equality Diversity and Inclusion Strategy and updated our action plans.</p> <p>During the last 12 months we have developed our Cultural Dashboard to measure our improvement progress year on year which is aligned to the staff survey results. We have also established a change team of individuals across SaTH to work with us to challenge and support us all with key improvements.</p> <p>Civility & Respect and Compassionate, Inclusive & Effective Leadership masterclasses in place over 100 staff attended.</p> <p>Review and update of several policies to provide additional support to staff who experience baby loss prior to week 24 and premature baby.</p>	<p>All Divisions: Cultural Reviews identified in hotspot areas.</p> <p>All Divisions: Presentation regarding the Culture Dashboard and Culture Strategy and the compassionate and inclusion agenda.</p> <p>SAC: Civility Saves Lives at June Surgical Governance Day. Attending Anaesthetics Governance Day in October.</p> <p>MEC: Compassionate, Inclusive & Effective Leadership masterclasses undertaken. 6 MEC staff attend</p> <p>MEC Unconscious Bias masterclass 1 MEC staff attended</p> <p>MEC: Civility Saves Lives planned in.</p> <p>MEC: A special day is being planned for ED Band 7, & ENP staff on Behaviours and compassionate leadership</p> <p>MEC: Transformation programme – one of the workstreams is compassionate and inclusion – workshops on racism</p> <p>WAC Transformation programme – MDT - People and Culture workstream</p> <p>WAC Stay conversations taken place</p> <p>CSS: Once a quarter people focused divisional committee. Culture Ambassador attends DMGs reviewing cases in ER cases.</p>
<p>We are recognised and rewarded</p>	<p>Below average at 5.5 compared to an average of 5.8. The worst is 5.3. The best is 6.5.</p>	<p>We have an annual calendar of events, and we will continue to recognise key dates including celebratory days and special occasions including key cultural and religious events throughout the year.</p> <p>Plans are in place for the Values Awards.</p>	<p>All Divisions: Thank you cards for Ward Support and Mutual Aid.</p> <p>All Divisions: Use of Golden Tickets in Nursing, AHP and Medical Engineering roles.</p>

		<p>Star Cards are continually used across the organisation.</p>	<p>Retained apprentices and students as a result. SAC: Had interest from 2 Oncologists to apply for hard to fill posts. SAC: Consulting on changes to the obstetric anaesthetic rota to make it compliant MEC: Reviewing recruitment requirements in Acute Medicine WAC: International Day Midwife in collaboration with Unions CSS: Divisional Committee was used to present all teams with thank you plaque. E&F – First national E&F day recognised, and all staff were presented with a £5.00 voucher to spend in Restaurants/Café Bistro as a thank you.</p>
<p>We each have a voice that counts</p> 	<p>Below average at 6.2 compared to an average of 6.7. The worst is 5.3. The best is 7.3.</p>	<p>We continue to support our Divisions and corporate areas and have facilitated 72 café conversations with teams.</p> <p>In May 2022 our fourth Making a Difference Together conversation on flexible working was also facilitated by the People & OD team. (Appendix 5)</p> <p>FTSU, support a just and learning culture where leaders and managers foster a listening, speaking up culture. Appraisal Workshops. Pulse Survey.</p> <p>Mandating of FTSU e-learning 868 drop-in sessions, visibility walk-arounds, team awareness session conducted by FTSU in 2021/22 Focus on BAME voice for 2022/23</p>	<p>All Divisions: Stay Conversations in hotspot areas. SAC & CSS: Listening Events arranged. MEC: Regularly revisiting behaviour framework in Medicine specialities MEC – ED Listening events taken place with excellent feedback MEC: Regularly FTSU sessions and actions plans MEC: Sharing staff stories and videos being planned MEC: PACE Panel – patient and carer experience panel CSS: Highest ever response rate for staff survey at 57%. CSS: FTSU asked to support in hot spot areas.</p>

		<p>Over 100 team behaviour conversations have been supported which has informed our Trust wide Behaviour Framework. We now wish to expand this further as part of our Civility & Respect work</p> <p>A survey is being rolled out to all our current international recruits to establish their views and plans after they reach three years of service which will aid our planning for future cohorts and understand what it feels like to work here.</p> <p>We have a ¼ people pulse that goes to all staff aimed at how staff are supported, informed, motivated and anxious they may feel. % of staff accessing this survey is on the rise.</p>	<p>WAC: Maternity Drop-in fortnightly sessions with DoM – well received</p> <p>WAC: Improvewell pilot a success and now a business case pending for this to be across the Trust</p> <p>Facilities: Weekly sessions held with Porters RSH to gather suggestions to improve ways of working.</p>
<p>We are safe and healthy</p> 	<p>Below average at 5.6 compared to an average of 5.9. The worst is 5.5. The best is 6.5.</p>	<p>We have continued to build and offer an excellent health and wellbeing offer to our People which is set to expand further with the launch of our Psychology Hub later in 2022.</p> <p>Over the last 12 months we have invested in our management data and partnerships with Finance and Divisional colleagues to help us understanding our gaps, develop a mechanism to manage our recruitment plans and monitor progress against this. This is an area that will continue to improve.</p> <p>We have over 20 health and wellbeing champions across the Trust who promote our wellbeing offer to the organisation.</p> <p>We have 27 Trim Practitioners who support areas when needing support sessions following traumatic events or incidents.</p>	<p>All Divisions: TRIM support following serious incidents.</p> <p>All Divisions: Health and wellbeing conversations taking place</p> <p>SAC: TRIM Practitioners trained in Critical Care and Theatres.</p> <p>SAC: Anaesthetic workforce planning – Ockenden requirement. Theatres workforce planning.</p> <p>SAC & MEC: Review of medical workforce in line with footprint and minimum staffing requirements ongoing which will improve coverage, safety OOH and flow across the sites.</p> <p>MEC: New Rosters being planned for medics and nurses</p> <p>MEC: The average number of days, from the first day of absence to refer to OH has reduced from 30 days to 16 days.</p>

		<p>Our sleep programme has already launched.</p> <p>One of the key priorities is to support many of our people that are feeling the impact of the cost-of-living rises. Our hardship group has launched a support booklet and work is under way on the living wage and they are working in partnership with Marches Energy Agency and linking in with other partners such as CAB</p> <p>We held a wellbeing week in June and incorporating PRIDE EDI walks, including healthy snacks and fruit will be available and Menopause/HWB stand in the restaurants during the week.</p> <p>We launched our first Schwartz round in June, where a panel of speakers presented personal stories, inspiring and engaging the audience in conversation.</p> <p>We have formally been recognised as an 'Employer with Heart' by the premature baby charity The Smallest Things. This is in recognition of our work to support staff whose baby is born prematurely.</p>	<p>MEC absence is at the lowest for the last 12 months at 5.48%</p> <p>WAC: Mental Health First Aiders, weekly drop-in sessions PMA and TRIM. Helen Jones - Catch your breath sessions.</p> <p>WAC: Health and Wellbeing diagnostic tool used within teams – quick wins on environment – fridges, space for breaks and water coolers etc</p> <p>CSS: Radiology workforce plan being recruited to.</p> <p>CSS: CSS absence is at the lowest for the last 12 months at 4.33%</p>
<p>We are always learning</p> 	<p>Below average at 4.9 compared to an average of 5.2. The worst is 4.3. The best is 6.0.</p>	<p>We have a suite of Leadership Development and monthly masterclasses available.</p> <p>We held a successful Improvement week and conference in May 2022. We are working with this year's results to also help us identify and target teams and managers to further support development in the key priority areas, which also aligned to our talent mapping and scope for growth projects</p>	<p>All Divisions: CD development. Roots Leadership for Band 7's. Use of CPD monies for Nursing and AHP posts.</p> <p>SAC: Theatres structure being reviewed, looking to introduce more career development opportunities and a grow our own structure.</p> <p>MEC: Specific Training undertaken for managers in Sickness Absence</p> <p>MEC: Growing own staff – Managers are being encouraged to undertake leadership/apprentice training in September</p>

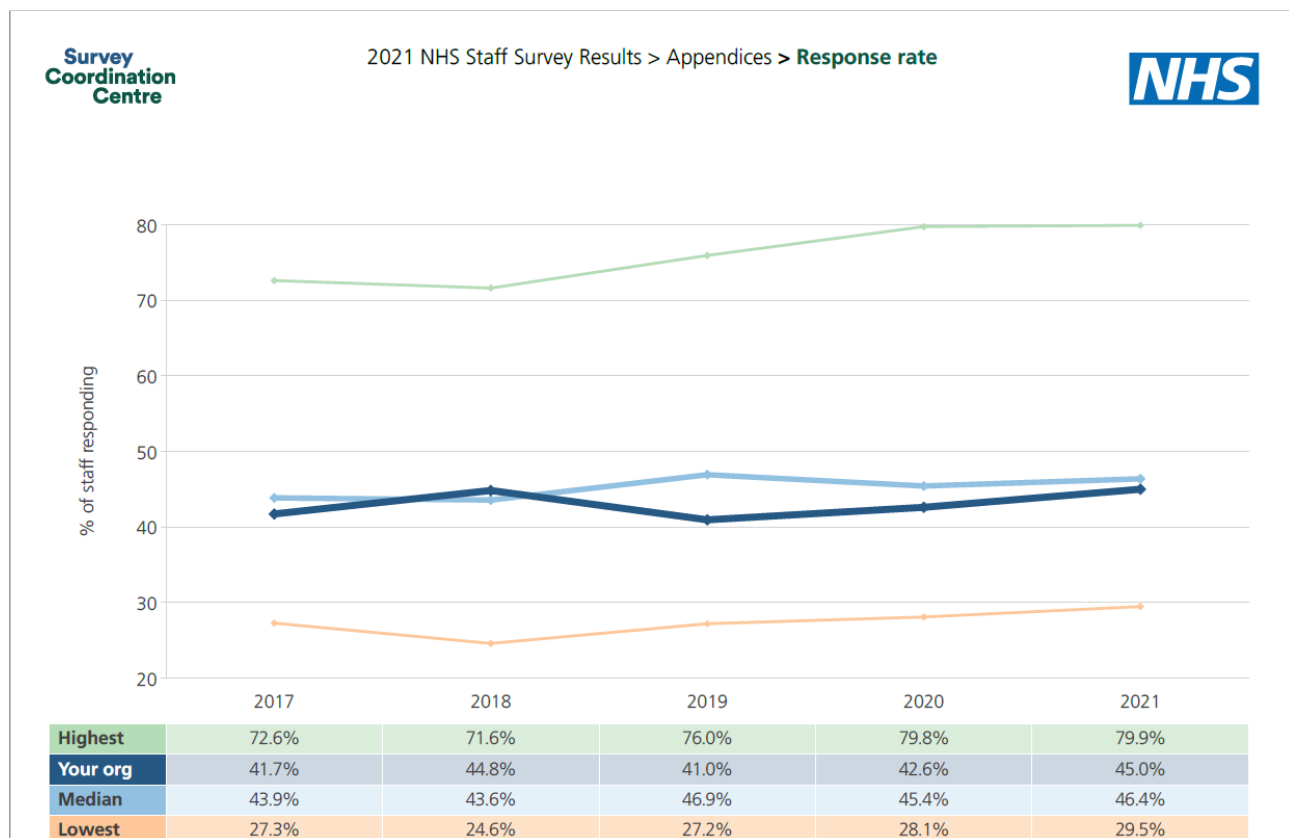
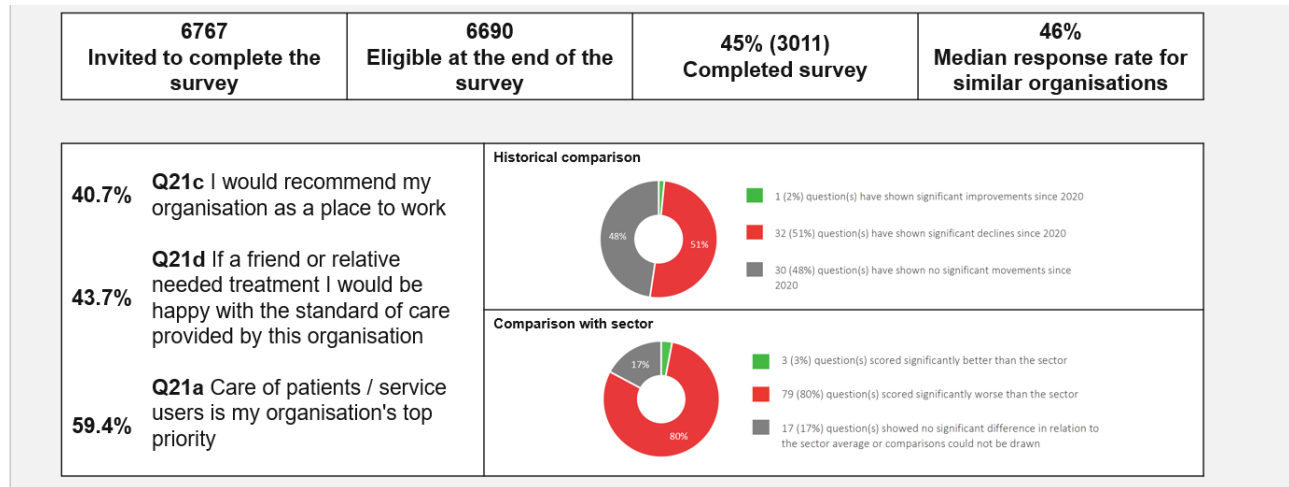
		<p>We are embarking on a new, Leadership Development & Coaching programme for up to 30 delegates over 2 cohorts. The aim is to this will be a 12 month modular in person programme to develop current senior leaders and rising stars. In addition, we are developing a BAME mentorship Programme to commence in September, to increase opportunities and BAME representation in leadership positions.,</p> <p>We are also working with the ICS on the High Potential Scheme, a uniquely tailored two-year career development opportunity aimed at band 8a-8d to help 'accelerate your progress'.</p> <p>In partnership with colleagues across the Trust, our management technical competency programme to ensure a consistent standard across our leaders to improve staff experience will be launched.</p> <p>Over the last 12 months we have launched our new Learning Management System 'Learning Made Simple' and we hope to see the real benefits of moving to this system in the coming months.</p> <p>Work is underway to review our appraisal process and holding working parties, to alignment to succession planning and career development. We will be training managers on conducting career conversations which will be great notwithstanding our real challenge in releasing staff for development.</p>	<p>MEC: 4 band 5 nurses attending Glyndwr University to undertake post graduate certificate specifically in Emergency Care</p> <p>MEC: Working on Lessons Learnt sessions and SOP's following incident's</p> <p>MEC: 2 x ACP Apprentices in MEC to be completed Sep 24</p> <p>WAC: CPD money used for student sessions – speakers attending learning events. MSW band 3 level new.</p> <p>WAC: Investment into MSW workforce to support talent pipeline and we were asked to present as a good practice case study on the regional webinar hosted by NHSE/I</p> <p>CSS: AHP Project Lead post established.</p> <p>Estates: Apprenticeship posts expanded to include Carpentry, Electrical and Mechanical.</p> <p>Facilities: Supervisory skills training held for band 3,4 & 5 across all services.</p> <p>Facilities: Further Managers leadership day to be held in July.</p>
We work flexibly	Below average at 5.6 compared to an average of 5.9.	<p>MADT Flexible working campaign and video launch</p> <p>1135 people engaged in this which is the highest to date. We are now aiming to share the feedback with our</p>	All Divisions: Working with managers to be open to flexibility and hold flexible conversations

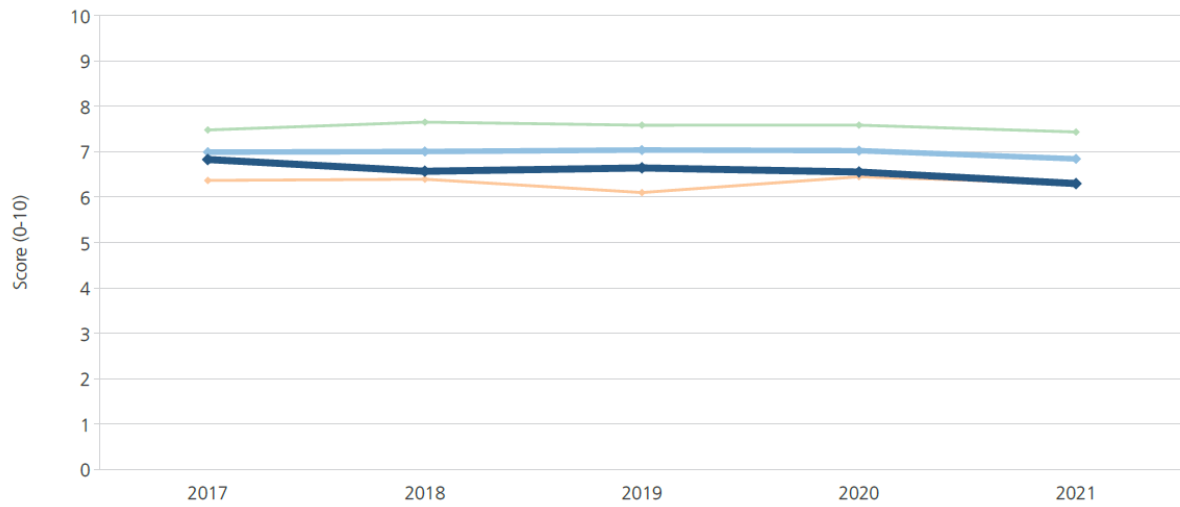
	<p>The worst is 5.4. the best is 6.7.</p>	<p>leaders and people to support and develop a change in mindset when it comes to Flexible Working.</p> <p>We are updating the policies to support working Flexible working.</p> <p>We have some teams who work agile, and trials are starting in areas across the Trust.</p>	<p>SAC: Rotational posts with RJAH in T&O and Anaesthetics MEC: Redesigning of Rotas to maximise coverage at peak time. A&E implemented May 2022. Tier 2 rota due to go live August 2022. A&E Tier 1 rotas at both PRH and RSH fully established for August 2022. WAC: Review of Flexible working rotas in community teams. Peads had a significant increase to 60% in staff survey around flexible options being offered CSS: Rotational posts in Therapies. Facilities: Review of shift hours in Catering and Cleanliness to aid filling vacancy gaps.</p>
<p>We are a team</p> 	<p>Below average at 6.3 compared to an average of 6.6. The worst is 6.2. the best is 7.1.</p>	<p>Team behaviours and values Café conversations. Leadership development.</p> <p>A number of cultural assessments have taken place across the Trust to support team working.</p> <p>Affina Team Journey Launch Pad initiative is taking place with a number of teams.</p> <p>Staff Survey Incentives</p>	<p>SAC: Away days in Critical care, Theatres, Matrons, Anaesthetics, CDs. Nursing: Nursing Associates Away Day SAC: Affina Team Journey for Matrons and Colorectal team. MEC: Away days planned across the Division MEC: Affina Team Journey in MEC?? MEC: AMU Teams supported recruitment events to show case their work WAC: Funding secured for Leadership sessions WAC: Away days planned for band 6&7 Neonates and already invested in Delivery Suite/ Anti Natal on two away days focussing on Human Factors, Culture and Behaviour CSS: Affina Team Journey for Cell Pathology and Pharmacy Facilities: One stop shop event in Catering planned</p>

Staff Engagement	Below average at 6.3 compared to an average of 6.8. Worst is 6.3. Best is 7.4.	<p>Making a difference together, engagement platform with specific topics each month.</p> <p>Appraisal workshops held across the Trust to engage managers and staff in a new process.</p> <p>Listening events taking place across the Trust</p> <p>Monthly Cascade takes place across the Trust for teams to hear what is happening across areas</p>	<p>All Division: Café Conversations regarding last staff survey</p> <p>SAC: Management walkabouts and Listening sessions in staff areas.</p> <p>SAC: Theatres RSH Staff Survey responses shown a significant improvement above national average in many areas and % increase on last year.</p> <p>MEC: Listening events across MEC</p> <p>MEC: Appraisal increase from 78% to 85% in June</p> <p>MEC: Met their internal target of 5% increase of staff responding to the SS - 34% 2021, 29% 2020, 18% 2019.</p> <p>WAC: 168 people actively using the Improvewell platform</p> <p>WAC: Rotational task and finish groups as a result from stay conversations</p> <p>CSS: Listening Events building on previous success and hold their own Staff Engagement Meetings to discuss topics such as Civility saves lives, staff survey etc.</p>
Morale	Below average at 5.3 compared to an average of 5.7. Worst is 5.3. Best is 6.5.	<p>¼ People pulse to monitor progress of staff.</p> <p>Leadership development as outlined above with programmes from band 3 to 9.</p> <p>Health and wellbeing offer and sleep school.</p> <p>Recognition schemes such as Values Awards. Staff Survey Incentives</p> <p>Involvement in Schwartz rounds</p>	<p>SAC: Away Days and Management walkabouts/listening sessions.</p> <p>MEC: Engagement sessions across the Division</p> <p>WAC: Cultural review with Secretaries due to high turnover staff – working with the improvement team</p> <p>WAC: Leadership Team investment – all positions filled</p> <p>CSS: Carry out bespoke survey perhaps later this year to see what effect the various</p>

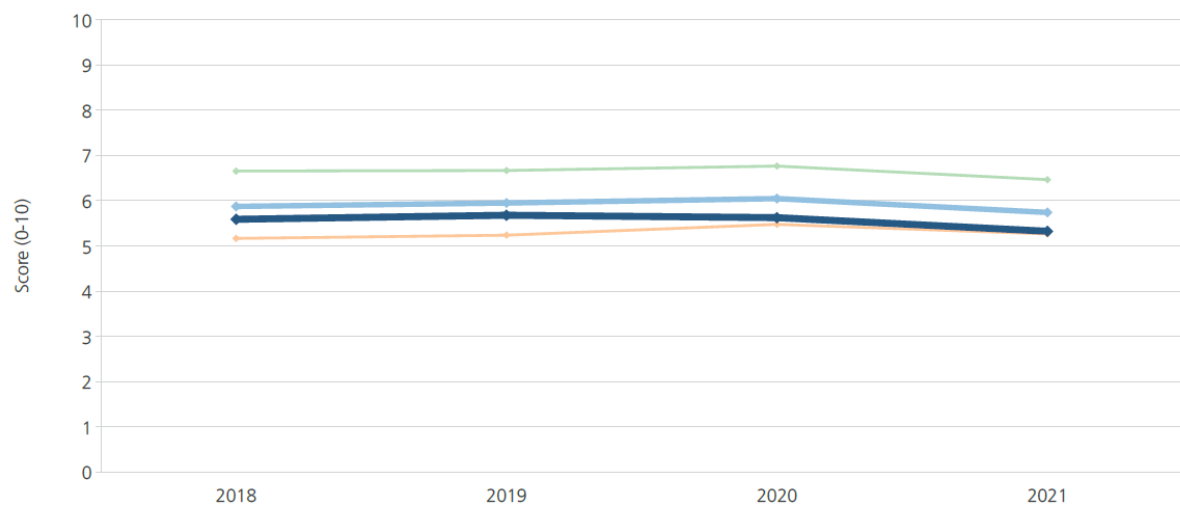
		Celebrations - NHS Birthday	things below has had on morale and engagement. Facilities: Plans in progress to address issues with culture in Cleanliness Evening team at PRH.
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Appendix 2 – Results overview





	2017	2018	2019	2020	2021
Best	7.5	7.7	7.6	7.6	7.4
Your org	6.8	6.6	6.6	6.6	6.3
Average	7.0	7.0	7.0	7.0	6.8
Worst	6.4	6.4	6.1	6.4	6.3



	2018	2019	2020	2021
Best	6.7	6.7	6.8	6.5
Your org	5.6	5.7	5.6	5.3
Average	5.9	5.9	6.0	5.7
Worst	5.2	5.2	5.5	5.3

Appendix 3

Culture Dashboard Priority Areas 2021



Dashboard Area	Compassion	Compassion	Compassion	Compassion
Question	Q8c The people I work with are polite and treat each other with respect.	Q8d The people I work with show appreciation to one another.	Q9d My immediate manager takes a positive interest in my health and well-being.	Q9f My immediate manager works together with me to come to an understanding of problems.
1	Domestic Services	Domestic Services	Domestic Services	Domestic Services
2	Oncology Services	Catering Services	Pathology Services	Surgical Services
3	Accident and Emergency	Pharmacy Services	Theatre Services	Trauma & Orthopaedic Services
4	Catering Services	Accident and Emergency	Trauma & Orthopaedic Services	Catering Services
5	General Internal Medicine Services	Oncology Services	Surgical Services	Cardiology Services
6	Pharmacy Services	Surgical Services	General Internal Medicine Services	Theatre Services
7	Surgical Services	Pathology Services	Neonatal Services	Inpatient Therapy
8	Theatre Services	Obstetrics and Gynaecology Services	Care of the Older Person Services	Neonatal Services
9	Pathology Services	Theatre Services	Accident and Emergency	Care of the Older Person Services
10	Neonatal Services	Portering Services	Portering Services	Radiology & Imaging Services

Dashboard Area	Goals & Performance	Goals & Performance	Goals & Performance	Goals & Performance
Question	Q6 a I feel that my role makes a difference to patients / service users.	Q21a Care of patients / service users is my organisation's top priority.	Q21c I would recommend my organisation as a place to work.	Q21d If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation.
1	Catering Services	Inpatient Therapy	Pharmacy Services	Inpatient Therapy
2	Pathology Services	Surgical Services	Surgical Services	Radiology & Imaging Services
3	Estates Services	Trauma & Orthopaedic Services	Inpatient Therapy	Trauma & Orthopaedic Services
4	Domestic Services	Radiology & Imaging Services	General Internal Medicine Services	Pharmacy Services
5	Maternity Services	Acute Admissions	Critical Care Services	Surgical Services
6	Surgical Services	General Internal Medicine Services	Trauma & Orthopaedic Services	Chief Nurse Services
7	General Internal Medicine Services	Medical Director Service	Maternity Services	General Internal Medicine Services
8	Medical Director Service	Outpatient Services	Theatre Services	Critical Care Services
9	Patient Scheduling Services	Pharmacy Services	Paediatric Services	Care Closer to Home Centre
10	IT Services	Cardiology Services	Chief Nurse Services	Medical Director Service

Dashboard Area	Health & Wellbeing	Health & Wellbeing	Health & Wellbeing	Health & Wellbeing
Question	Q11 c. During the last 12 months I have felt unwell as a result of work related stress.	Q11a My organisation takes positive action on health and well-being.	Q6b My organisation is committed to helping me balance my work and home life.	Q6d I can approach my immediate manager to talk openly about flexible working.
1	Maternity Services	Maternity Services	Pharmacy Services	Pharmacy Services
2	General Internal Medicine Services	Surgical Services	Maternity Services	Domestic Services
3	Surgical Services	Pharmacy Services	Pathology Services	Surgical Services
4	Acute Admissions	Trauma & Orthopaedic Services	Inpatient Therapy	Pathology Services
5	Pathology Services	General Internal Medicine Services	Radiology & Imaging Services	Cardiology Services
6	Accident and Emergency	Acute Admissions	Critical Care Services	Theatre Services
7	Cardiology Services	Pathology Services	Catering Services	Inpatient Therapy
8	Critical Care Services	Inpatient Therapy	Neonatal Services	Neonatal Services
9	Neonatal Services	Theatre Services	Theatre Services	Trauma & Orthopaedic Services
10	Theatre Services	Accident and Emergency	Obstetrics and Gynaecology Services	Critical Care Services

Dashboard Area	Learning & Innovation	Learning & Innovation	Learning & Innovation	Learning & Innovation
Question	Q20b There are opportunities for me to develop my career in this organisation.	Q20d I feel supported to develop my potential.	Q20e I am able to access the right learning and development opportunities when I need to.	Q21b My organisation acts on concerns raised by patients / service users.
1	Catering Services	Radiology & Imaging Services	Pharmacy Services	Accident and Emergency
2	Inpatient Therapy	Domestic Services	Inpatient Therapy	Surgical Services
3	Domestic Services	Inpatient Therapy	Cardiology Services	General Internal Medicine Services
4	Theatre Services	Maternity Services	Theatre Services	Cardiology Services
5	Surgical Services	Catering Services	Domestic Services	Chief Nurse Services
6	Trauma & Orthopaedic Services	Trauma & Orthopaedic Services	Surgical Services	Theatre Services
7	Care Closer to Home Centre	Care of the Older Person Services	Maternity Services	Care of the Older Person Services
8	Pharmacy Services	Surgical Services	Radiology & Imaging Services	Trauma & Orthopaedic Services
9	Outpatient Services	Pharmacy Services	Pathology Services	Pathology Services
10	Maternity Services	Outpatient Services	Care Closer to Home Centre	Estates Services

Dashboard Area	Teamwork	Teamwork	Teamwork	Teamwork
Question	Q16b In the last 12 months I have personally experienced discrimination at work from a manager / team leader or other colleagues.	Q7a The team I work in has a set of shared objectives.	Q7e I enjoy working with the colleagues in my team.	Q7g In my team disagreements are dealt with constructively.
1	Inpatient Therapy	Domestic Services	Surgical Services	Domestic Services
2	Domestic Services	Catering Services	Catering Services	Pathology Services
3	Maternity Services	Surgical Services	General Internal Medicine Services	Oncology Services
4	Pharmacy Services	General Internal Medicine Services	Oncology Services	Surgical Services
5	Critical Care Services	Neonatal Services	Accident and Emergency	Catering Services
6	Radiology & Imaging Services	Care of the Older Person Services	Domestic Services	Pharmacy Services
7	Oncology Services	Trauma & Orthopaedic Services	Pathology Services	Radiology & Imaging Services
8	Paediatric Services	Maternity Services	Theatre Services	General Internal Medicine Services
9	Care Closer to Home Centre	Acute Admissions	Care of the Older Person Services	Neonatal Services
10	Medical Engineering Services	Cardiology Services	Obstetrics and Gynaecology Services	Maternity Services

Dashboard Area	Vision & Values	Vision & Values	Vision & Values	Vision & Values
Question	Q21e I feel safe to speak up about anything that concerns me in this organisation.	Q3f I am able to make improvements happen in my area of work.	Q8a Teams within this organisation work well together to achieve their objectives.	Q8b The people I work with are understanding and kind to one another.
1	Surgical Services	Maternity Services	Radiology & Imaging Services	Domestic Services
2	Pathology Services	Surgical Services	Care of the Older Person Services	Oncology Services
3	Care of the Older Person Services	Radiology & Imaging Services	Trauma & Orthopaedic Services	Catering Services
4	Trauma & Orthopaedic Services	Theatre Services	Pharmacy Services	General Internal Medicine Services
5	General Internal Medicine Services	Trauma & Orthopaedic Services	Maternity Services	Surgical Services
6	Portering Services	Cardiology Services	Domestic Services	Theatre Services
7	Critical Care Services	Inpatient Therapy	Medical Engineering Services	Accident and Emergency
8	Pharmacy Services	Care of the Older Person Services	Surgical Services	Care of the Older Person Services
9	Oncology Services	Pharmacy Services	Inpatient Therapy	Neonatal Services
10	Maternity Services	General Internal Medicine Services	Pathology Services	Pathology Services

Civility, Respect & Inclusion

How we are going to tackle
bullying and harassment at
SaTH – June 2022



We have a problem with bullying and harassment at SaTH.

- 10% of respondents in the staff survey reported experiencing discrimination at work of which 39% cited the discrimination was based on their ethnic background which is a worsening position
- Our people are telling us-

Bullying is still going on within this Trust and nothing is being done still except the usual "We are dealing with it".

There is a culture of bullying by the same people within this Trust they simply continue to get away with it regardless of HR being informed and people leaving the Trust because of their behaviours.

Language used would be not to report issues to CQC and HR are to look after the Trust only

The whole Trust still has a bullying and harassment culture which is still being covered up

Truly horrendous organisation where managers are arrogant, overpaid bullies who do not care or value any of the lower Band staff. Progression is discouraged and bullying is prominent.

I have encountered bullying and intimidation within the last 12 months

Over the last year I have witnessed a colleague making derogatory comments and insults towards my management behind their back, they are a senior and should be respectful.

Background

- More than 3000 colleagues supported the NHS Staff Survey
- Results help us better understand how staff are feeling and help us pinpoint where more change is needed

The Winning Principles of Our People Strategy will develop the culture of our organisation creating an environment where individuals can thrive.



The actions developed from our Staff Survey results will feed into our Culture Dashboard and will support the Trust to:

- Attract and recruit staff - making SaTH an employer of choice
- Develop and retain our staff
- Support and reward our people and teams
- Enable us to meet our future service needs and achieve our Trust Vision.

Part of our Getting to Good journey and our People Plan is to make our organisation a great place to work for everyone

What we have done to date is not working- now is the time for a different approach to tackle bullying and harassment at SaTH

Our Building blocks to a better future

- Leadership Accountability & Ownership
- Lets get talking about Civility & Respect
- Lets be open and transparent
- Lets create a safe and inclusive environment



Leadership Accountability & Ownership

Take a moment to reflect on your role, and please consider the following questions

- How does this feedback make you feel about our Trust?
- What is it really like working in your team?
- Are you always role modelling the right behaviours?
- What are you doing to tackle behaviours that do not align to the Trust Values?
- Are you leading by example?
- What are you going to do differently to make the change?



Leadership Accountability & Ownership

- As leaders within this Trust we must take personal accountability to listen, reflect and take action following this feedback.
- Today we are asking for you to show your commitment to a better future to unite together and take ownership to tackle bullying and harassment at SaTH.
- The change starts with us – We ask you as senior leaders to sign up to the following commitments-



- I will role model our PACT values in everything I do
- I will actively seek feedback on my behaviour and impact within my teams and others
- I will work with my colleagues to support positive behaviours and feedback to others in the moment to improve our culture

Senior Leader targets	20/21 Baseline	21/22 Target	21/22 Actual	22/23 Target
NHS Staff Survey Response Rate	41%	45%	45%	48%
Staff Survey Engagement Score	6.6	6.8	6.29	7.0
% of people experience discrimination at work in Staff Survey	7.5%	6.9%	9%	5.6%
% of people reporting effective leadership in Staff Survey	57.9%	66.3%	56%	74.5%
% of people recommending the Trust as a place to work or receive treatment	49%	55%	44%	58%

Make your personal
commitment today –
add to the chat function
during this meeting or
email [I.baker-
murray@nhs.net](mailto:I.baker-murray@nhs.net)

Lets get talking about civility and respect

Civility & Respect sessions with Dr Chris Turner to be mandatory for every member of staff over the next 18 months.

Masterclasses to reinforce and remind.

Short take reminder training daily/weekly/monthly to embed this culture.

Each team with their manager to have a team conversation to generate a team commitment aligned to the Trust values and behaviour framework.

Support group for you and leaders across the Trust to provide action learning support to help us to tackle bullying and harassment alongside a restorative culture approach.

**Lets start a
social
movement**

Lets be open and transparent

New feedback
processes to all
affected

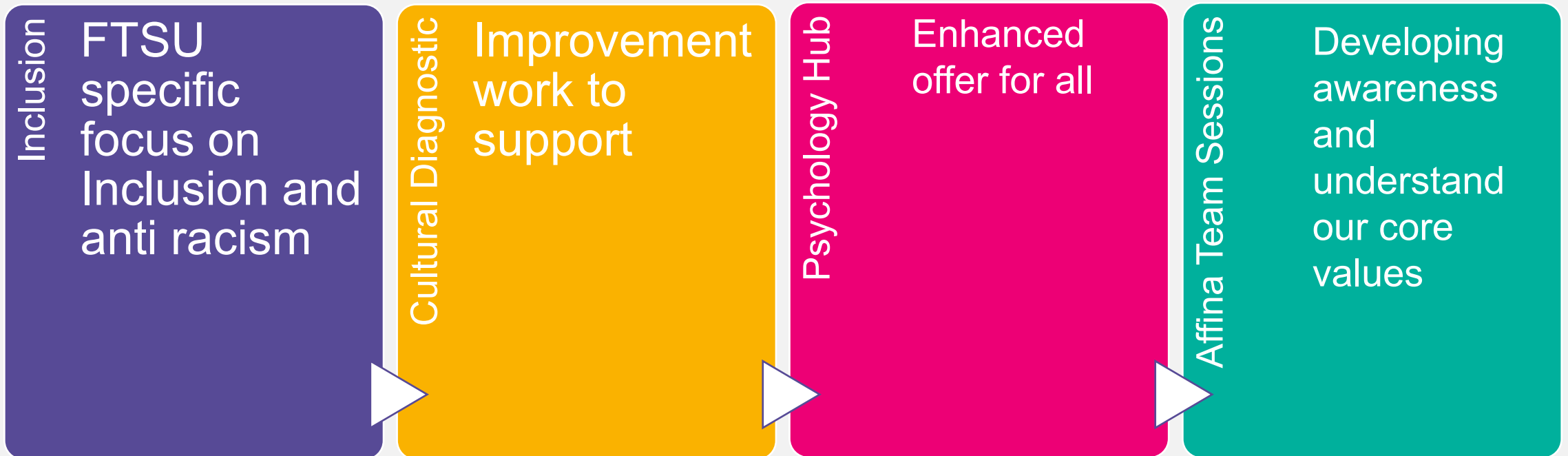
Share our stories as part of
communication campaign aligned to
behaviours and values

A reporting tool 'Stop, Change, challenge'
tool – allowing staff to report issues or on
behalf of others

Monthly Divisional and ¼ Trust Board reports on our
bullying and harassment cases to include time taken, the
outcomes and staff experience feedback

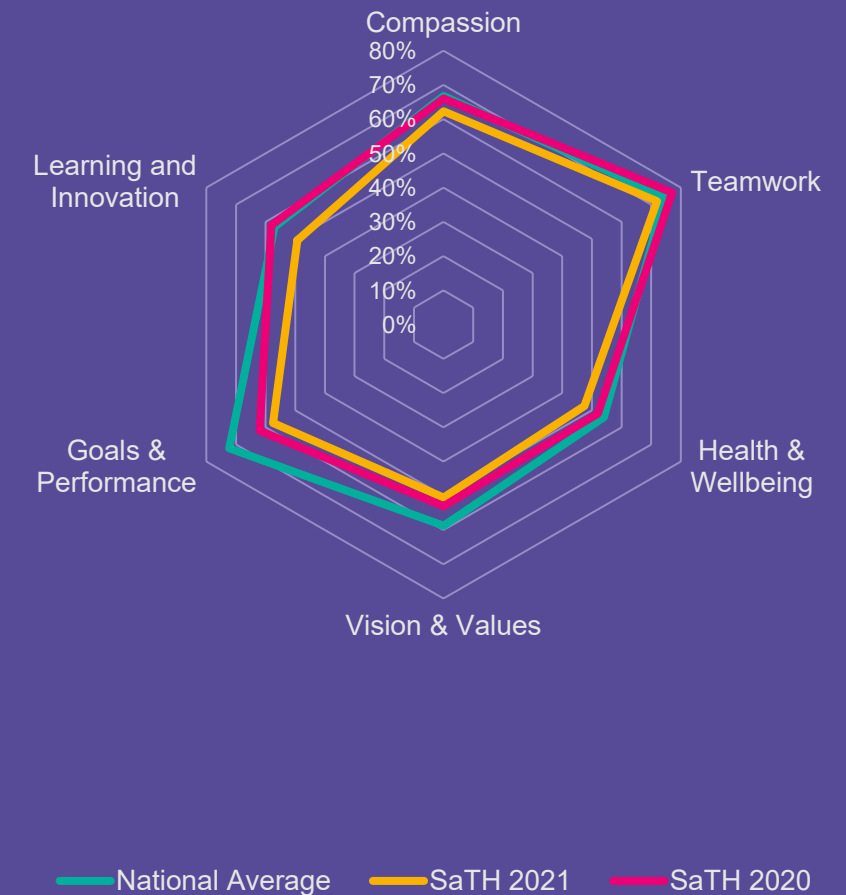


Lets create a psychologically safe and inclusive environment



Recommendation

- We continue to measure progress via the cultural dashboard, our KPI's, our people pulse survey and FTSU feedback and review our actions along this journey.
- **We seek full commitment from the SLC to actively support the proposals and to-**
 - Support our approach to tackling bullying and harassment at SaTH
 - Make your commitment
 - Seek an executive sponsor to join our Civility & Respect Steering Group



Appendix 5

Making A Difference Together

Flexible Working Online Conversation

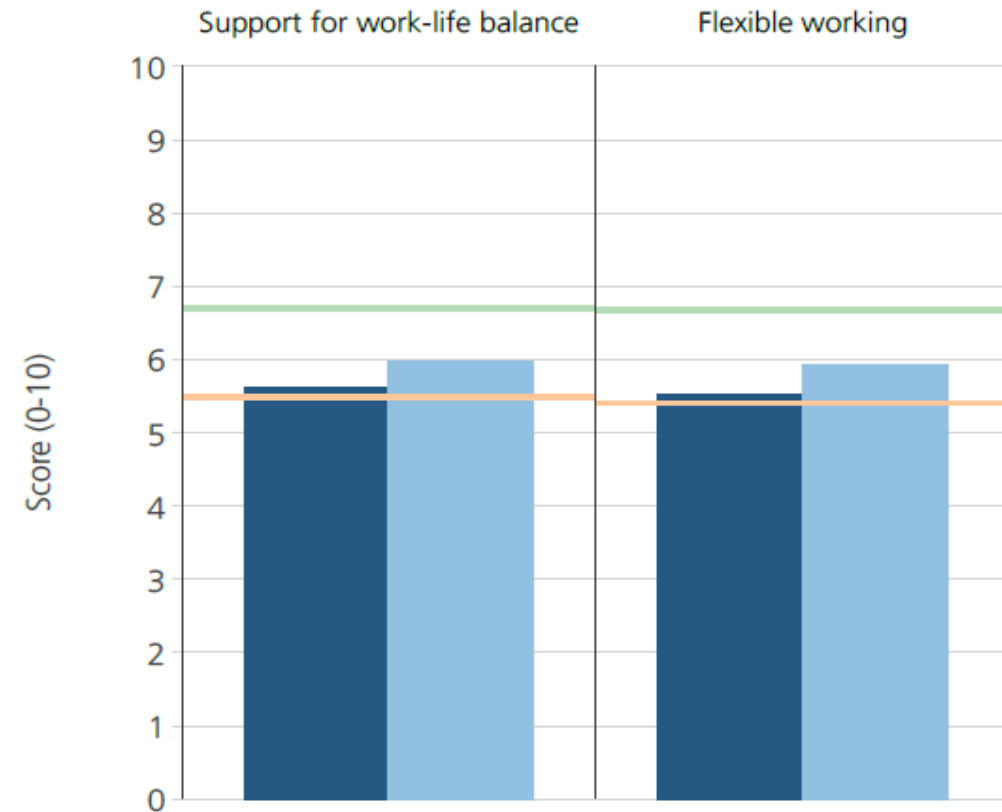


Making a Difference Together - Aims

Following below average scores for the People Promise element – We Work Flexibly in our 2021 Staff Survey, the aim of the online conversation was to carry out a large scale listening and engagement exercise to:

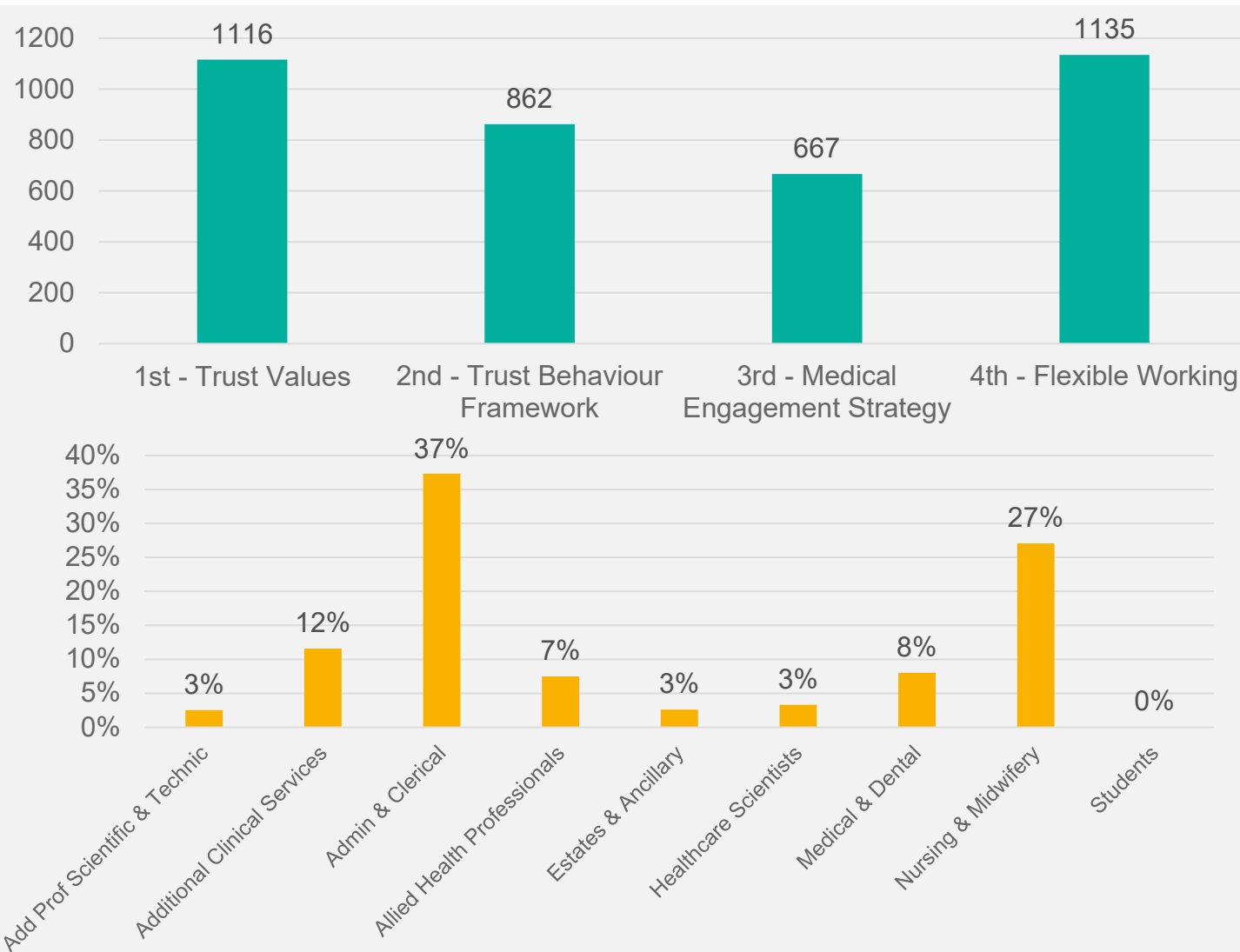
- Listen deeply to the voice of our workforce, giving the opportunity for all staff to share their experiences, their concerns and their hopes for working flexibly at SaTH.
- Work collaboratively, at pace and with scale to engage staff and to utilise their collective insight to improve organisational culture and performance.

Promise element 6: We work flexibly



Best	6.7	6.7
Your org	5.6	5.5
Average	6.0	5.9
Worst	5.5	5.4

Participation and Contributions



- The fourth online conversation via Making a Difference Together on Flexible working ran from 25th April – 16th May 2022.
- All members of the organisation were invited to take part in the conversation including bank staff, and staff members on fixed term contracts.
- **1135** members of staff contributed to the conversation – 13% of the organisation. Giving us the highest participation number since launching Making a Difference Together in January 2021.
- Together they shared 222 ideas, 148 comments and 2832 votes.
- Representatives from all staff groups took part with the most contributing from Admin and Nursing & Midwifery roles.

Flexible Working Conversation

We asked staff to anonymously contribute to the online conversation on flexible working by asking for their thoughts, experiences and ideas on the following questions:

- **What does Flexible Working mean to you?**
What types of flexible working should we offer within the Trust?
- **What stops you from working flexibly?**
What barriers are there that stop you from working flexibly?
What gets in the way of you accessing flexible working?
- **What can we do better to promote & support flexible working?**
What do we need to stop, start or do differently?



Themes

Theme	Score
Lack of trust or support from manager	71
Flexible fairness	67
Improve staff retention/attracting staff	47
Support health & wellbeing	41
Childcare / care of family member	35
Working from home - benefits my work	24
Shorter shifts	23
Support work / life balance	23
Service need	19
Utilise Digital Resources/Lack of equipment to support home working	19
Staffing Issues – unable to accommodate flexible working	19
Open discussions with managers	16
Save on parking / fuel / commute time	15
Flexible resentment / guilt	15
Better process to access Flexible working	15

- Top 15 themes from our online flexible working conversation.
- Staff stated that managers not showing support for flexible working was their biggest hurdle.

Themes

Lack of trust or support from manager

Staff feel a lack of support from their manager is what stops them working flexibly. A feeling that flexible working requests inconvenience rotas and make managers difficult to approach with the request. Many staff felt they were not trusted to work from home by their manager, despite their role allowing them to do so.

Flexible fairness

Fairness needs to be in place to allow flexible working to work. It should be available to all staff, not just staff with children or family members that require care. Regular reviews of flexible working agreements need to take place. Working from home to be considered where possible for staff at all levels, not just for senior managers.

Improve staff retention/attracting staff

Allowing more staff to work flexibly where possible would help with staff retention, as staff members would be less likely to leave the organisation in search of a role that supports their work/life balance. Some staff described how as they are nearing retirement age they would benefit from working shorter shifts, or coming off on-call rotas. It will also make SaTH more attractive as a place to work, supporting recruitment levels.

Support health and wellbeing & work/life balance

Many staff described how working from home or working shift patterns that suited them had a positive effect on their health and wellbeing and their home life. Some described feelings of anxiety and stress when being asked to return to the office or when previously agreed arrangements were being reviewed to suit service demand.

Childcare / care of family member

Many clinical staff described how they have struggled provide care for their children or to a family member due to the length of shifts and the inflexibility of the shift pattern. Some shared how they are unable to respond to unexpected events due to being booked 8 weeks in advance. Those that worked flexibly around childcare/care of a family member described how they felt resented by their team/manager and often felt guilty for working flexibly.

Themes

Working from home - benefits my work

Staff who have been working from home described the benefits of this flexible working, They stated how they were able to work without distraction and felt they were more productive. Also saving money on fuel, benefiting themselves and the environment. Their health and wellbeing has improved as they are often working in a better environment than their previous office (lack of windows/overcrowded). 2 comments described how they did not enjoy working from home and felt they were being treated unfairly by being made to work from home.

Shorter shifts

Many staff described how the option of shorter shifts would benefit their health and wellbeing and that they could also be more available to cover a shift if it was shorter.

Service need

Staff stated that the needs of the service meant they were unable to accommodate flexible working in their area.

Utilise Digital Resources/Lack of equipment to support home working

Some found working from home difficult due to a lack of equipment e.g. laptops in their department. Staff suggested that more flexible working could be accommodated if patient records were digital.

Staffing Issues

Many staff members felt that staffing levels made it impossible for flexible working to be available within the Trust.

Themes

Open discussions with Managers

Some staff described having open discussions with their managers where they are able to discuss what flexible working options would work in their department with positive outcomes. Many stated that their manager was not open to having a discussion on flexible working in their department and some felt uncomfortable approaching their manager to discuss flexible working. There were suggestions from staff that managers need further support to have flexible working conversations.

Save on parking / fuel / commute time

Many staff described how working from home had many benefits. Freeing up the parking spaces for other colleagues, saving money on fuel and better for the environment and how they are able to start their day earlier due to no commute time.

Flexible resentment/guilt

Staff with already agreed flexible working agreements described how they often felt resented by their colleagues or managers, and described how they were made to feel guilty for finishing work early, or working a 9-day fortnight/4 day week etc.

More accessible process/policy for flexible working

Some described how their needs to be a fair and robust process for accessing flexible working, in particular regarding improvements to the appeal process e.g. someone within the Division makes the final decision, not just the line manager.

Ideas from Flexible Working Conversation

Shorter Shifts

"Why not a blend of long and short shifts? Yes it will require administration, but you will be able to offer flexibility to all staff whatever their requirements are."

If you take into consideration our aging workforce (no insult intended as I'm in that demographic of that aging workforce), working a long shift may be too tiring and they may like to do 3 or 4 shorter shifts rather than 2 long ones."

Dedicated Hot Desk Areas

"It isn't ok to have some offices with desks empty with others overcrowded. We need a wholesale change of attitude towards ownership of space and a decent, managed hot desking facility (I don't mean a room booking system alone, but an actually managed service)."

"Dedicated hot desking zones with adequate facilities, the ability to do this across multiple building and sites where possible is also important."

Less On-call for Older Workforce

"It seems very unfair to me that staff in some areas are allowed to stop doing 'on calls' at a certain age but others are not, it feels as though we are driven to retire as our knowledge & skills are not valued enough to consider a more flexible working pattern."

"Yes I agree with this, I am 60 and now doing 30 hours a week but I'm still expected to do my on call and also pressured into covering more on call shifts, so I could be out all night and after a short rest be back at work again. As you get older the recovery time becomes longer and harder."

Core Hours

"Currently I have to start at 9am and expected to finish at 5pm with lunch hours between 12 and 2pm. At other trust it is normal for Core Hours to be between 10am to 12pm and 2pm to 4pm, this I think should be adopted"

"In previous jobs I have had a Core Hours arrangement - usually 1000-1200 then 1400-1600, then the remaining hours could be worked between 0700 and 1900. I would personally find this useful, accepting that ability to use the flexibility would depend on my calendar."

Block Bookings of Days and Nights

"Within the 24/7 environment shift working is notoriously bad for the health of staff especially when juggling life. The majority of staff will work a tougher shift pattern if given some say in it, against being given an pattern by someone else. Why not look at staff being given the option to work a stint of nights together instead of flipping from days to nights to days again. Eg 2 weeks nights, 2 weeks days in a month."

Try Self Rostering

"Allow band 5 staff to have visual access to the entire off duty. Currently band 5s can't see the entire off duty so this makes seeing staff to swap shifts with impossible."

"I agree, a few years ago, before E roster, my ward used to write our off duty down so we would look what other hcas have put down and we would make sure we would cover days, and it worked. Sometimes the manager would make adjustments but shifts were always covered when we self rostered"

What does flexible working mean to you?

Top 5 Ideas/comments	Likes	Dislikes	Score
Flexible working is important to support my family and my wellbeing.	70	0	70
Since 2020 far more of my meetings have been done by MS Teams. This has massively reduced the amount of time I spend travelling between sites and, of course, has reduced petrol use which is far better for the environment. It also means I can work flexibly from home sometimes which also means less travel. In most situations, using MS teams is perfectly acceptable but obviously some meetings are better being done face to face. The Trust should continue to support using MS Teams and reducing travel	45	0	45
If the Trust promotes Flexible working as a reason to join, but then the managers dictatorially reject any forms of flexible working "due to needs of the service" and will not enter into any type of consultation to meet somewhere in the middle	41	2	39
Flexible working should mean working flexibly for all. It is often only considered in the context of childcare/care of a relative. Those without care responsibilities shouldn't feel they cannot work flexibly or are lower priority when flexible arrangements are discussed.	40	2	38
I would prefer to, where possible, to work from home some of the time. I currently work 4 days a week and have been working from home for the last few months due to lack of office space. The plan is that everyone returns full time to the hospital now which does not make sense due to lack of space, lack of parking and sometimes poor facilities. I believe hybrid working would be a better solution, in my case 2 days in the office and 2 from home. From an employer point of view, I do feel I achieve more working from home as they are less interruptions and I can finish tasks as I am not in rush to get home. Whilst I do not expect to be able to WFH full-time, it would be financially beneficial because as lower grade admin staff, the rise in the cost of living will make it difficult for some of us to even get to work.	38	0	38

What stops you from working flexibly?

Top 5 Ideas/comments	Likes	Dislikes	Score
Staff are often promoted to managerial positions but without proper training in place. People may excel in their clinical field, however, people management skills is something that is definitely lacking in a lot of areas in SaTH. It's encouraging to see that the Leadership Masterclasses that have recently been launched are open to all who are interested, for all levels/bandings to support general culture in SaTH and EDI. However managerial courses should be mandatory and review points put in place to monitor progress/ challenges. The attitude towards bandings needs to be addressed as often this is used to assume somebodies capabilities, rather than their current responsibilities.	27	0	27
Managers often control what flexibility they will offer to suit their own personal agenda. One rule for one and different rules for managers when it comes to fairness around flexible days.	27	0	27
The trust appears to actively promote flexible working, however when it is requested it is often refused. I have been part of a rigid rota for over twenty years and have applied to work flexibly twice in the last two years and have been refused on both occasions. However other equivalent members of my same team team have been permitted to do all manner of variations on flexible working during that time. Thus a small group within my team feel that we are being treated unfairly My feeling is that you will be granted whatever you want if your face fits. If you are thought to be more useful to the trust, you are not granted any flexibility at all. (Currently going through an appeal process)	26	1	25
The expectation placed on staff at all levels to work long hours, back to back meetings, short deadlines to write reports, no time to talk and listen to staff needs to stop. The culture of SaTH is getting worse. Some of our executive team are driving the decay in staff experience. When they should be leading by example they don't - it is incredibly difficult for a manager to work as a compassionate leader when they are not receiving compassionate leadership from the top. I have great professional respect for our Director of Nursing, Acting Medical Director and Acting COO who are there for staff but currently under crazy pressure - how can they make a difference in meetings 8-8. Meetings are not compassionate leadership. Things need to change quick and only the CEO can set the standard for the rest of the hospital.	22	0	22
Some line managers are against home working without having any evidence its a bad thing.	20	0	20

What do we need to do better to promote flexible working?

Top 5 Ideas/comments	Likes	Dislikes	Score
<p>We were all asked to take part in a "Making a Difference Together" survey awhile ago and we had many global emails saying how important it was that we took part</p> <p>I don't see that that made any real difference to working in the Trust, So how are staff to have any faith that it will be any different if we take part this time??</p> <p>If you really want to make a difference to staff getting to work flexibly then support them and support managers in making a balanced & fair decision and not just discouraging staff from applying in the first place by emphasizing just how short staffed we are</p> <p>Stop managers from saying "Its twelve hour shifts or nothing"</p> <p>Some staff are just plain worn out and need support, Not just a pat on the back</p> <p>Encourage flexible working and not just talk about it</p>	20	0	20
<p>We need a culture where managers encourage their staff to ask for flexible working. Managers need to make clear - "it's OK to ask". I know of staff who want it but are afraid to ask and think that by just asking their manager will think they're unhelpful.</p>	20	0	20
<p>Pay us fairly for mandatory training. These modules used to be several days of in person training, that we are now expected to do somehow on shift. There is not enough staff, if we need to do training we need more staff. Or we need to be paid to do it at home.</p>	17	0	17
<p>Try self rostering.....</p> <p>Allow band 5 staff to have visual access to the entire off duty. Currently band 5s can't see the entire off duty so this makes seeing staff to swap shifts with impossible.</p> <p>Personal patterns on e roster.....so you can actually plan your life without waiting for the roster to be approved.</p> <p>More than 4-5 weeks of off duty available.....maybe 12 weeks would make planning ahead easier.</p> <p>E learning time on the roster. Flexible. Elearning working from home as its almost impossible to complete meaningfully at work...in a clinical area.</p> <p>Link nurse/student nurse assessor/preceptor meetings scheduled automatically on roster so that off duty can be fitted around it. Many meetings missed if staff are on nights when the meetings are happening.</p> <p>Yearly review of roster/Flexible working/patterns between manager,HR and employee.</p> <p>Term time only working?</p> <p>Emergency pattern/flexibility. Due to sudden family illness I have asked for an urgent but temporary change to my shifts. This could not be accommodated and ended up in my going off sick to enable me to care(temporarily) for elderly parents. This could have been avoided if I could have adjusted shift start and finish times/worked from home (like staff who are pregnant have been able to do)</p> <p>Flexible/family friendly should not just mean staff with children. Everyone has a family.</p>	17	0	17
<p>Put trust in staff to balance their workload between being on site and working from home to ensure that work is completed around home life.</p>	20	3	17

Immediate actions

- Changes have been made to Flexible Working policy and are awaiting sign off. Potential future changes include:
 - Making the appeal process more robust by having appeals chaired by a completely independent manager
 - The People Advisory Team being involved with requests at an earlier stage to provide advice and support to managers and staff
 - Gathering more data about flexible working requests so we can identify areas of good practice and areas where flexible working isn't happening
- A prompt has been added for recruiting managers to consider flexible working (including home and hybrid working) in their job adverts
- OBS & Gynae to commence trial of team-based rostering



Next Steps

- Share the findings and make the case for change to the Trust to seek reflections and change via videos, conversations at all levels
- Be open with the feedback and utilise existing communication channels such as Cascade and Chatterbox
- Track our trail areas and share our learning
- Review our leadership training and support managers with practical skills
- Share flexible working success stories
- Measure impact via 1/4 people pulse and annual staff survey – cultural dashboard

