

Trust Board Meeting: Wednesday 13 March 2013
TB2013.45

Title	Staff Survey 2012
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Status	A paper for noting
History	The staff survey is conducted annually for each NHS Trust and is a measure of the engagement of staff within the organisation and the NHS as a whole

Board Lead(s)	Ms Sue Donaldson, Director of Workforce			
Key purpose	Strategy	Assurance	Policy	Performance

Summary

1. Staff survey 2012 results have shown significant improvements in many areas compared to 2011.
2. The national indicator of the extent to which staff feel engaged continues to rise with an increase to 3.73 from 3.68 in 2011.
3. The Trust Board is asked to NOTE the staff survey 2012 results.

Staff Survey 2012

Introduction

1. A key measure of staff engagement is the annual staff survey. A national process is organised under the auspices of the Care Quality Commission which uses a representative sample of employees, for the Oxford University Hospitals this is a sample of 850 staff. Simultaneously, the Trust runs a local survey which invites all 11,000 employees to provide feedback of their experiences of working for us.
2. The survey is conducted independently in the period September to November with the results made available at the end of February. This paper provides Trust Board with an overview of the emerging themes of both the national and local staff surveys. It also sets out the programme of work underway across the Trust.
3. Extensive work has been undertaken within the context of the Staff Engagement Programme linked to the strategic objective, 'Delivering Compassionate Excellence'. This work includes developing new Trust Values and standards of behaviour, using these values to inform our recruitment, induction, appraisal, recognition and management approaches. The Trust is also an early adopter of 'Listening into Action' methodology to interact and engage with staff.

National Survey versus Local Survey

4. The national staff survey is conducted by the Care Quality Commission using up to a maximum of 850 staff for Trusts with headcount of 3,000 and above. The Trust recognised that this sample is not representative of its 11,000 headcount and, for the second consecutive year, agreed to open the staff survey to all staff.
5. The local survey results incorporate 3,793 responses and the national survey results 384 responses. Due to the tenfold difference, the local survey is more statistically valid, and therefore this paper focuses on those results. Details are included at Appendix 1.
6. The results for the local and national surveys show consistency in the majority of questions, however, there are a few questions where the direction differs. Such questions include recommending the Trust as a place to work or to friends for treatment, and delivery of care to patients. The national survey shows a reduction in staff perceptions in respect of these measures, whereas the local survey shows an improvement.

Staff Survey Results

7. The overall staff engagement score at the Trust has significantly increased to 3.73 out of a maximum 5. The average score for all 142 Acute Trusts in England is 3.69. The engagement scores for previous years at the Trust are as follows:

Year	Engagement Score
2010	3.66
2011	3.68
2012	3.73

Staff Survey Themes

8. The emerging themes where employee feedback is more positive than 2011 are:
 - 8.1. 'Statutory and Mandatory Training', particularly Equality and Diversity and Health and Safety.
 - 8.2. The number of 'Appraisals' conducted.
 - 8.3. Establishing clear objectives and responsibilities for individuals and staff feeling able to perform the role to a standard they are pleased with.
 - 8.4. 'Bullying, Harassment and Whistleblowing' incorporating a reduction in perceived discrimination; an improved perception of reporting concerns; confidence that the organisation would address them and staff receiving feedback following an incident.
 - 8.5. 'Management Behaviour' through greater involvement, communication and feedback.
 - 8.6. 'Team Working and Involvement' where there are improved opportunities for showing initiative and input into decisions.
 - 8.7. 'Motivation and Job Satisfaction' with improved recognition, support and opportunity to use skills.

9. Areas where employees have provided more negative feedback compared to 2012 are:
 - 9.1. 'Health and Wellbeing' where work related stress and pressure to come to work scores have increased.
 - 9.2. 'Senior Managers acting on feedback' is one anomalous question in an overall positive trend on management.
 - 9.3. Fair treatment following errors or incidents with concerns around blame and confidentiality.
 - 9.4. 'Satisfied with quality of care I provide'.

Patient Care and Incident Reporting Measures

10. The local survey demonstrated a positive trend in the patient related questions, including 'care of patients being the organisation's top priority' and 'recommending the Trust as a place to work or for treatment'.

11. In addition, there were improvements in the incident reporting measures, including knowing how to report, action to prevent reoccurrence and providing feedback to staff. However, staff feedback in respect of how staff felt they were treated having reported an incident shows a negative trend.

Trust-wide Action

12. Following the staff survey in 2011, the Trust has focused on a number of key measures around staff engagement, such as communication, including the Listening into Action events; appraisals; statutory and mandatory training, including the introduction of a new e-Learning Management System; and electronic incident reporting. The 2012 staff survey results reflect the positive response as a consequence of this work.
13. In 2012, emerging themes for Trust-wide action include:
 - 13.1 Appraisals – a new electronic system will be introduced from April 2013 to support managers in conducting appraisals at the right time, linking to values and providing greater clarity around the role, objectives and contribution.
 - 13.2 Recognition – continuing the work on recognition of employees with a ‘Good Idea!’ staff suggestion scheme to be launched in April 2013 and other local mechanisms for thanking staff.
 - 13.3 Health and Wellbeing – a new manager has been appointed with responsibility for leading the health and wellbeing agenda.

Divisional Action

14. The positive trend in staff feedback is largely mirrored within Divisions and Directorates and they have all been provided with their individual staff survey results for 2012.
15. Each Division and Corporate Directorate have taken responsibility for the following actions, with agreement from Trust Management Executive:
 - 15.1 Analysing the results for their area and reviewing against the 2011 staff survey feedback and the action plans developed; determining what has been successful and what needs further attention.
 - 15.2 Communicating the Divisional results of the staff survey and the above analysis to staff, paying particular attention to what has improved following the action plan, where as a Trust we are successful, and identifying where further improvement is needed.
 - 15.3 Developing a 2012 action plan to determine the focus for 2013 and communicating to staff.

Communication

16. The results for the local staff survey 2012 have been released to the Trust with individual area results to each Division and Corporate Directorate.
17. An article will be placed in OUH News detailing the improvements made in the past year, including a pull out document on the Staff Engagement Programme.
18. The Trust’s intranet has been updated with the Trust’s key results.

19. Discussion will take place with staff side representatives at the forthcoming Joint Staff Consultation and Negotiating Committee.

Next Steps

20. The Divisions will be reporting on their local action plans during April and a paper will be developed for Workforce Committee and Trust Management Executive in May showing the consolidated position. This will be shared with Trust Board in June.
21. Staff survey scores are being triangulated with other key workforce and patient indicators to better understand the level of staff engagement with the Trust. This work will be included in the papers identified above.
22. During 2013 the annual survey results will be enhanced by more regular localised surveys within the Trust.

Conclusion

23. The results show a positive trend in the staff survey responses when compared to 2011 for both local and national surveys.
24. Local analysis and communication is underway in the Divisions and Corporate Directorates.

Recommendations

25. The Trust Board is asked to NOTE the staff survey 2012 results.

Executive Sponsor: Sue Donaldson, Director of Workforce
Author: Lynne Thorn, HR Manager – Policy and Reward

March 2013

Appendix 1 - Extracts from the Local Staff Survey

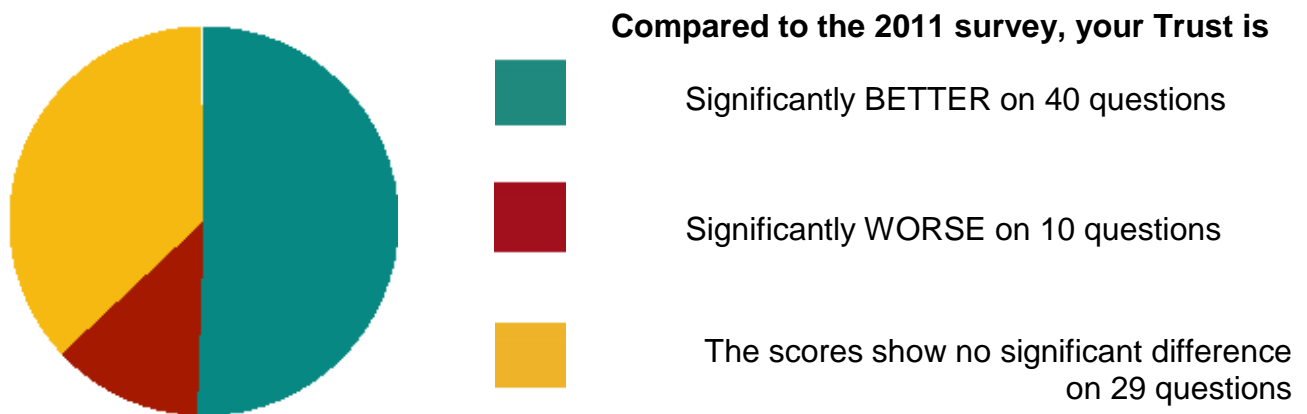
Introduction

This document summarises the findings from the Staff Survey 2012 carried out by Picker Institute Europe on behalf of Oxford University Hospitals NHS Trust. The Department of Health report is due for publication later in 2013.

Your results at a glance

Have we improved since the 2011 survey?

A total of 79 questions were used in both the 2011 and 2012 surveys.



The Trust has improved significantly on the following questions:

	2011	2012
1a No health and safety training	5 %	4 %
1b No equality and diversity training	20 %	6 %
1c No training in how to handle violence to staff/patients/service users	37 %	30 %
1d No infection control training	9 %	3 %
1e No training in how to handle confidential information	13 %	5 %
1f No training in how to deliver a good patient / service user experience	39 %	26 %
3d Appraisal/performance review: left feeling work not valued	44 %	37 %
6a Do not have clear, planned goals and objectives	12 %	10 %
6b Do not always know what work responsibilities are	9 %	7 %
6d Not able to do my job to a standard am pleased with	25 %	11 %
7a Opportunities to show initiative infrequent in my role	13 %	11 %
7c Not involved in deciding changes that affect work	30 %	22 %
7f Do not have adequate materials, supplies and equipment to do my work	29 %	24 %
7g Not enough staff at organisation to do my job properly	54 %	46 %
8a Dissatisfied with recognition for good work	30 %	23 %
8b Dissatisfied with support from immediate manager	19 %	15 %
8c Dissatisfied with freedom to choose own work method	14 %	9 %
8e Dissatisfied with amount of responsibility given	11 %	9 %
8f Dissatisfied with opportunities to use skills	15 %	11 %
8g Dissatisfied with extent organisation values my work	37 %	30 %
10a Immediate manager does not encourage team working	14 %	11 %
10b Immediate manager cannot be counted upon to help with tasks	16 %	13 %
10c Immediate manager does not give clear feedback	23 %	20 %
10d Immediate manager does not ask for my opinion	26 %	23 %
10e Immediate manager not supportive in personal crisis	11 %	8 %
11a Do not know who senior managers are	18 %	10 %
11b Communication between senior management and staff is not effective	47 %	32 %
11c Senior managers do not try to involve staff in important decisions	45 %	37 %
12a Care of patients/service users is not organisation's top priority	20 %	15 %
12c Would not recommend organisation as place to work	17 %	15 %
14b Immediate manager does not take a positive interest in my health & well-being	21 %	19 %
15a In last 3 months, have come to work despite not feeling well enough to perform	55 %	49 %
17b In last month, saw errors/near misses/incidents that could hurt patients	31 %	28 %
18e Organisation does not take action to ensure errors not repeated	7 %	5 %
18f Staff not informed about errors in organisation	27 %	22 %
18g Staff not given feedback about changes made in response to reported errors	25 %	22 %
19b Would not feel safe raising concerns about fraud / malpractice / wrongdoing	11 %	8 %
19c Would not feel confident that organisation would address concerns about fraud / malpractice / wrongdoing	20 %	15 %
20c+ Last experience of physical violence not reported	28 %	18 %
23b Discrimination from manager/team leader or other colleagues	10 %	7 %

The Trust has worsened significantly on the following questions:

	2011	2012
5c Never/rarely does time pass quickly when I am working	4 %	5 %
9a Dissatisfied with quality of care I give	5 %	7 %
11d Senior managers do not act on staff feedback	27 %	32 %
13a Hot water, soap etc not available to staff	4 %	7 %
13b Hot water, soap etc not available to patients/service users	4 %	5 %
14a My job is not good for my health	24 %	27 %
16 Felt unwell due to work related stress in last 12 months	31 %	36 %
18a Organisation does not treat fairly staff involved in errors	4 %	5 %
18c Organisation does not treat error reports confidentially	3 %	4 %
18d Organisation blames/punishes people involved in errors/near misses or incidents	8 %	10 %