

ULHT National Staff Survey

Summary

2017 - Issues

- Lack of belief in the future of ULHT
- More focussed on finance than patient safety
- Not confident in raising issues
- Lack of support to staff health and wellbeing
- Lack of engagement with change
- Lack of quality management
- Limited development opportunities
- Negative behaviours of staff members towards each other



Actions taken from 2017 results

A lot of work has been undertaken by the whole organisation throughout 2018 following the 2017 results. Some of the actions taken following your comments were:

- Vast amount of work around 2021 including new vision & ambitions, with key messages about quality and finance and new vision "Excellence in Rural Healthcare". Which will continue with a communications and development plan.
- Values relaunched with staff charter to bring values to life embedding throughout the organisation
- Joined the patient experience team with the OD team to ensure we are fully patient centric in our approach
- "FAB" campaign around what we doing to improve patient care, including a patient experience conference
- Quality Improvement Programme to introduce quality improvement techniques
- 2021 People Reference Groups to build in key messages to discuss and debate to resolve and build ideas
- Further campaigns around zero tolerance of bullying.



Actions taken from 2017 results

- Team brief introduced as part of suite of communications tools
- A update of all the development opportunities in the Trust offered by our Leadership and Management workshops and the Talent Academy who work to create development pathways for staff which include shadowing opportunities
- Started the review of our induction process and content
- Multiple development centres for senior leaders and management assessment centres following the TOM structure
- New values based performance management system
- Big conversations to capture the organisation thoughts on Health and Wellbeing and 2021
- Updated the leavers approach to ensure we capture both internal moves as well as leavers, offering support and learning where needed
- Launch of cohesive benefits package
- Finance workshops offered to all appropriate managers

2018 - National data

Key changes in the 2018 Staff Survey results

Survey Coordination Centre

Level of pay



36.3% of staff were satisfied with their salary, an increase of over 5 percentage points from last year, but below the 2016 result of 36.8%

Errors & near misses



27.8% reported seeing an error, near miss or incident in the last month that could have hurt patients / service users, close to a 3 percentage point increase compared to 2017 (g16b 2017: 25.0%)

Health & wellbeing



of staff feel their organisation definitely takes positive action on health & wellbeing, which is a 3 percentage point decline from ast year (q11a 2017: 31.8%)

experienced musculoskeleta

problems as a result of work

27.6%

activities in the last year, dose to a 2 percentage point increase from 2017 (q11b 2017: 25.8%)

5.9

There was an **overall dedine** in staff health and wellbeing, as indicated by the lower theme score compared to 2017 (6.0)

58.2%



said their organisation treats staff who are involved in an error, near miss or incident **fairly**, which is a **4** percentage point improvement from ast year (g17a 2017 54.2%)

Staff recognition



of staff said they were satisfied with the extent to which their organisation values their work, a 3 percentage point increase from 2017 (q5f 2017: 43.0%)

56.4%

of staff said they were satisfied with the recognition they get for good work, an almost 4 percentage point increase compared to 2017 (q5a 2017: 52.7%)



There was an overall improvement in quality of appraisals, with the theme scoring 5.5 (5.4 in 2017), continuing a positive trend since 2015 (5,2)

National theme trends

Equality, diversity and inclusion – 9.0, which was the same for 2017, has shown a decline since 2015 (9.1)

Health and wellbeing – 5.9, which is a decline since 2017 (6.0)

Immediate managers – 6.8, which was also the score for 2017, but has been improving since 2015 (6.7)

Morale – 6.1, this theme does not have comparable data for previous years

Quality of appraisals – 5.5, which is an improvement since 2017 (5.4) and continue year on year improvement since 2015 (5.2)

Quality of care – 7.4, having previously score 7.5 in 2017

Safe environment bullying and harassment – 8.0, which is the same core as in 2017

Safe environment Violence – 9.4, which is the same as in 2017

Safety culture – 6.7, which is an improvement since 2017

Staff engagement – 7.0, which was also the score for 2017



2018 - ULHT

These results are presented in the context of the best, average and worst results for similar organisations where appropriate. Data in this report is weighted to allow for fair comparisons between organisations.

2018 – Theme overview

The table below details the organisation's theme scores 2017 and 2018 along with the number of responses each of these are based on. The final column contains the outcome of the significance testing: \uparrow indicates that the 2018 score is significantly higher than last year's, whereas \downarrow indicates that the 2018 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'.

Theme	2017 score	2018 score	Statistically significant change?	Question change
Equality, diversity and inclusion	9.1	8.9	₽	No questions improved
Health and wellbeing	5.6	5.4	₽	2 out of 5 improved
Immediate managers	6.4	6.3	Not significant	1 out of 6 improved
Morale		5.6	N/A	8 new questions, only 1 comparable
Quality of appraisals	4.9	5.0	Not significant	2 out of 4 improved
Quality of care	7.2	7.0	₽	No questions improved
Safe environment – Bullying and harassment	7.8	7.6	↓	No questions improved
Safe environment – Violence	9.4	9.4	Not significant	1 out of 3 improved
Safety culture	6.1	6.1	Not significant	4 out of 6 improved
Staff engagement	6.6	6.5	₽	No questions improved

Response rates



Year	2015	2016	2017	2018
ULHT	33 %	39 %	45 %	46 %
Average	41 %	43 %	44 %	44 %

Friends and Family



Engagement National best 7.6						
	6.5					
		National average	7.0			
		National worst	6.4			
Chief Operating OfficerOrthopaedics BostonOrthopaedics BostonTACC BostonTACC BostonGen Surgery and Urology Trust wideOrthopaedics LincolnOrthopaedics LincolnA&E LincolnA&E LincolnA&E LincolnTACC LincolnTACC LincolnCotte Medicine LincolnTACC LincolnTACC LincolnCotte Medicine LincolnCotte Medicine LincolnTACC Lincoln	Acute Medicine Boston Director of Estates and Facilities General Surgery Boston	Grantham Head and Neck Trust wide Women and Children's Pan Trust Women and Children's Pan Trust Deputy Chief Executive Director of Nursing Director of Nursing Haem and Oncology Trust wide Clinical Support Services	Director of Finance and Corporate Affair Director of HR and Organisational Development Medical Director Picker Average Chief Executive Chief Executive			
6 6 6.2 6.2 6.3 6.3 6.3 6.4	6.4 6.4 6.4	6.4 6.4 6.5 6.5 6.5 6.6 6.5	.7 6.8 6.8 6.8 7.0 8.2			

Excellence in rural healthcare

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Some good news



Some good news



Q17d

Q19e The values of my organisation were discussed as part of the appraisal process



Some good news





Headline concerns – deterioration since 2017

- Fair access to career progression
- Work related stress
- Involvement in change
- Quality of care staff feel able to give
- Bullying and harassment from manager and colleagues
- ULHT not acting on patient concerns

Across all the questions, ULHT scores the same as the worst performing Trust on 2 questions

- The organisation takes positive action on health and wellbeing
- I am able to deliver the care I aspire to



Areas of most concern

Q11c

During the last 12 months have you felt

unwell as a result of work related stress?

Health and wellbeing

Q11a

Does your organisation take positive action on health and well-being?



Immediate managers

for my opinion before making me clear feedback on my work decisions that affect my work 100 100 90 90 % of staff selecting 'Agree'/'Strongly Agree' of staff selecting 'Agree'/'Strongly Agree' 80 80 70 70 60 60 50 50 40 40 30 30 20 20 % 10 10 0 0 2016 2017 2016 2017 2018 2014 2015 2018 2014 2015 67.5% 70.4% 68.4% 69.0% 69.2% Best 63.9% 63.9% 60.3% 61.2% 61.3% Best 47.1% 55.9% 54.3% 55.5% 53.8% 43.6% 48.4% 50.2% 48.9% 47.1% Your org Your org 56.6% 58.2% 60.3% 60.5% 60.0% 51.4% 51.7% 53.6% 54.7% 54.1% Average Average 46.1% 50.7% 51.6% 52.1% 50.6% 41.8% 40.0% 45.5% 45.3% 44.3% Worst Worst

Q8d

My immediate manager asks

My immediate manager gives

Q8c

Morale



Q4c I am involved in deciding on changes introduced that affect my work area / team / department

Quality of appraisals

Q19c It helped me agree clear objectives for my work



Quality of care



Q7a

Q7c I am able to deliver the care I aspire to



Bullying and harassment



Safety culture

100 90 % of staff selecting 'Agree'/'Strongly Agree' 80 70 60 50 40 30 20 10 0 2014 2015 2016 2017 2018 Best 86.6% 85.8% 83.6% 82.7% 84.6% 57.6% 67.0% 70.4% 62.3% 58.7% Your org 71.8% 72.8% 73.5% 72.8% 72.6% Average 44.9% 55.0% 56.3% 56.8% 56.6% Worst

Q21b My organisation acts on concerns raised by patients / service users



Ability to contribute to change



Fairness





Site in comparison to Trust average

Below is a table which shows how many times each site appeared above or below the organisational average for each question

Site	Above Trust average	Below Trust average	
Grantham	45	42	
Lincoln	50	41	
Louth	75	14	
Pilgrim	19	70	



People Strategy Refresh - Priorities

- Addressing the permanent/temporary workforce mix.
- Being clear around our 2021 narrative as a means to give hope to the organisation, ensure our future is seen to be as part of the Lincolnshire system and emphasise that patients (and not finance) are our top priority at all times.
- Re-establishing a connection between the Trust and its leaders and the people who work for it.
- A revised leadership strategy, building on the work undertaken to date, Creating a sense that the organisation really cares about its staff (looking at the health and well-being issue more broadly)
- Building that sense of the Trust being an organisation with a consistent focus on safety and learning –.
- Identifying and managing talent, so that people can build their careers with us.



People strategy refresh - Priorities

- People at all levels personally owing the challenges, rather than seeing that the solutions lie with the Trust Executives or HR/OD.
- Empowerment of staff and teams, through earned autonomy. Focus on teambuilding Invest in communications
- Understanding and addressing the issues about bullying and harrassment



Free Text Response

- Awaiting analysis
- Initial assessment
 - Car parking
 - The focus on the uniform policy to the detriment of the real issues
 - Quality of communication
 - Involvement in decision-making
 - The quality of middle management (e.g. Matrons)
 - The focus on finance rather than the patient
 - The impact of staffing levels on the ability to deliver the care they aspire to
 - Too many managers
 - Senior managers not visible enough and understanding of the issues staff face
 - Focus on targets rather than the patient (and this leads to bullying behaviours by managers)
 - Favouritism in recruitment process
 - Lack of opportunity to access training and to progress
 - Flexible working



Next steps – Divisional action

- We will focus one or two positives and one or two real negatives
- We will work with Divisional teams on their results. A report for each division will give them the data, some analysis and suggested 3 top areas to work on.
- We then propose running focus groups starting in March in partnership with local managers in each Division asking staff, what's the most important thing that you/we could do to improve
- Ensure a quick turnaround to feedback what can be done now, what can be done later, what can't be done and why.
- We will then run a small survey based on the top three issues for each Division to be run quarterly
- The baseline data from the NSS top 3 issues and subsequent pulse checks should be an integral part of PRM framework to hold managers to account