

SHEFFIELD TEACHING HOSPITALS NHS FT

UPDATE ON STAFF ENGAGEMENT

REPORT TO THE BOARD OF DIRECTORS

17 JULY 2013

1. INTRODUCTION

Staff engagement is measured via the annual NHS CQC benchmarked staff survey with a staff engagement score calculated for each Trust. In 2012 a larger sample of STH staff were surveyed at the same time as the NHS staff survey was undertaken. A total of 5000 surveys were sent out and a total of 2398 returned giving a response rate of 50% (once ineligible returns had been excluded). The additional data enabled more directorate staff survey results reports to be produced. This report refers to the results of the larger sample

2. STAFF ENGAGEMENT SCORE TEMPLATE

From these staff survey results a template has been developed to calculate a Trust staff engagement score which further breaks down the score into the component elements i.e. staff involvement, advocacy and motivation. The trust template is attached (appendix 1) for information which shows that the area where the most improvement needs to be made is in staff Involvement. NB the Trust staff engagement score of 3.67 shown on this template is slightly higher than the one reported in the CQC benchmarked survey. This is due to the fact that the data is weighted in the CQC survey whereas this is based on actual data.

Using the directorate staff engagement results a staff engagement score has been calculated for every directorate which not only gives a directorate staff engagement score but also shows the scores for staff involvement, advocacy and motivation. This information is proving valuable for action planning purposes as the issues vary between directorates, even within the same care group.

Through the performance review process all directorates are now being monitored on their staff engagement scores and were asked to produce a staff engagement action plan for the end of June.

3. STAFF ENGAGEMENT ACTION PLAN

In addition to addressing staff involvement all directorates were asked to include the following in their directorate action plans

- To identify actions to raise awareness of and embed the PROUD values and behaviours
- To ensure all staff have an appraisal which is recorded on ESR moving over to PROUD appraisals as appropriate
- To better understand why some staff don't feel able to recommend the trust as a place to work
- Ensure all staff know how /feel able to raise concerns
- Plus at least 2 directorate specific issues identified via the staff survey/e CAT staff survey data/let's talk groups

In addition a Trust wide staff engagement action plan which addresses the five factors which impact on staff engagement and the staff survey results has been approved by TEG and the

Finance & Performance Committee (appendix 2). Both the Trust and directorate action plans will be monitored by the Trust's Staff Engagement Lead and the newly formed Staff Engagement Executive Group chaired by the Director of HR and OD. The terms of reference of this group are attached at appendix 3

4. 2013 NHS STAFF SURVEY

The 2013 NHS staff survey will take place as usual this autumn. In addition to the CQC sample of 850 staff the Trust will once again have the option to sample additional staff.

Although it was beneficial to undertake a larger sample of staff last year as this enabled many directorates to have directorate data, there were still some directorates where the sample size is too small to be reliable e.g. plastic surgery, vascular services. There are also some staff every year who are disappointed not to receive a staff survey which does not help them feel engaged.

TEG have recently approved that in future a full staff survey for all staff annually will be undertaken, which would have the benefit of

- Enabling more staff to share their views
- Providing better quality directorate data for action planning.
- Reducing staff side concerns about confidentiality
- Results being returned sooner which will enable more timely feedback and action planning

It is important to note that as we would be using our own raw data staff survey results for action planning rather than the CQC data, the results would be available by the beginning of January 2014. This would give directorates more time to identify and address issues specific to them through designing their own staff surveys as appropriate before the 2014 NHS staff survey is run again in Autumn 2014. Directorate surveys will be easier and more cost effective to do when the new learning management system (PALMS) is fully implemented

RB/ July13