

Sheffield Teaching Hospitals NHS Trust

Notes of the Staff Engagement Executive Group

Tuesday 22nd May 2013

Present

Mark Gwilliam, Director of Human Resources and Organisational Development (Chair)

Linda Crofts, Head of Learning and Development

Rhian Bishop, Staff Engagement Lead

Claire Fretwell, Leadership and Management Development Coordinator

Steve Burgin, Head of Health and Wellbeing

Julie Phelan, Director of Communications

Kevin O'Regan, Operations Director

Michael Harper, General Manager

David Lyon, Staff Side Representative

Chris Monk, Staff Governor

Apologies – Phil Brennan Estates Director, Frank Edenborough Staff governor, Tracey Harding Informatics Director , Mandy Yates, Nurse Director

1. Welcome

Mark Gwilliam welcomed everyone to the inaugural meeting of the staff engagement executive group. He explained that each year a staff engagement score is calculated for each Trust based on the CQC benchmarked staff survey results. Despite a slight year on year increase the Trust staff engagement score was currently classed as below average and as an organisation we needed to improve this given that there is now research linking good staff engagement to increased productivity.

Rhian Bishop gave a brief overview of the 5 factors which both the Department of Health research and the Kings Fund research have identified as important in influencing staff engagement i.e.

Engaging Leadership and Management styles

Enabling staff to be involved in decisions

Supporting personal development (appraisal)

Ensuring every role counts (valuing staff/inclusivity)

Promoting a healthy and safe work environment (i.e. health and wellbeing)

Further research by Michael West et al has also identified a strong correlation between good staff survey results and the quality of the patient experience.

2. Terms of reference

The draft terms of reference for the staff engagement executive group were discussed. Although it was acknowledged that there was a good cross section of members it was thought it would be useful to have a community representative. Rhian Bishop agreed to seek a nomination from Penny Brooks. It was also agreed that the group also needed to understand good practice in staff engagement both within and external to the NHS, to ensure it was promoted throughout STHFT and that the terms of reference should be amended to reflect this. Rhian reported that she participates in regular NHS Employers webinars on good practice in staff engagement which include speakers from external organisations and that it should be noted that some good practice in staff engagement does exist within STHFT. The issue is in ensuring consistency across the Trust and it was thought that the sharing of good practice through the staff engagement leads forum would facilitate this.

Action: Rhian Bishop

3. PROUD Values and behaviours

The PROUD values have been launched in the Trust and Claire Fretwell gave an update on how they are being used. This included

- The launch of the new PROUD appraisal which is currently being rolled out across the Trust supported by a significant investment in training. All band 8a staff and above should be on the PROUD appraisal by the end of September.
- All new starters are introduced to the PROUD values on their first day of Trust induction which includes a DVD and a practical session on the PROUD values
- All new apprentices have a practical session on PROUD as part of their training.
- Directorate staff engagement leads are also starting to use the induction DVD to introduce PROUD to current staff and encourage conversations about what this means in practice.
- PROUD values and behaviours being used in the recruitment process for newly qualified nurses and support workers
- Discussions with SHL regarding extending the use of PROUD values and behaviours in all recruitment

It was acknowledged that it will take time to embed the PROUD values as it is about changing culture. We need to help staff 'live and breathe' the values however there are still staff who are unaware of 'PROUD'. Julie Phelan reported that there are plans to have photos of staff at work displaying the PROUD values as part of an exhibition on hospital sites. All directorates have also been asked to include raising awareness of the PROUD values in their staff engagement action plans.

Action: Julie Phelan

Dave Lyon reported that there is a degree of cynicism about the PROUD values amongst 'shopfloor' staff with some staff perceiving them as the latest gimmick, partly because they don't always see them displayed by senior staff and partly because good practice such as appraisals for all staff introduced for other workforce initiatives such as Investors in People and Improving Working Lives has not been maintained. However Steve Burgin explained that a key difference with the PROUD values are that they are about individual behaviour and have been developed locally by involving STH staff, whereas that IIP and IWL were both national organisational performance standards.

Dave suggested that it would be useful to make it clearer to staff that PROUD is STH driven which it was agreed to do. He also pointed out that some staff were unaware who their staff engagement leads are which Rhian agreed to discuss with the staff engagement leads. It was also questioned whether some directorates have a suitable staff engagement lead however. Mark explained that this was being addressed via the performance review process. It was also questioned whether staff

engagement leads should be incentivised however experience shows that they need time and senior management support to undertake the role effectively.

Action: Rhian Bishop

4. 2012 Staff Survey Results

Rhian gave a brief overview of the CQC benchmarked 2012 staff survey results which showed 2 significant areas of improvement.

- Staff feeling able to make improvements at work up to 63% (from 52% in 2011)
- Staff having an appraisal up to 76% (67% 2011)

The Trust staff engagement score is 3.61

Although STHFT is above average for the number of staff recommending the Trust to work or receive treatment (ie. 3.65 compared to 3.57 average for acute Trusts), it is not in the top quartile for staff engagement therefore this score needs to improve in the 2013 survey.

Unfortunately the staff survey results also showed some areas of deterioration which are being addressed via the Trust and Directorate staff engagement action plans. This year most directorates have also received a survey results report due to surveying a larger sample of staff. Staff engagement scores were in the process of being calculated from these results for every directorate and these would be brought to the next meeting.

Action: Rhian Bishop

Directorates have been asked at the performance reviews to produce a staff engagement action plans by 30 June.

Action: Directorate

5. Draft Trust Staff Engagement Action plan

A Trust staff engagement plan to address issues identified via the staff survey and 'Let's talk' events was circulated and members asked to forward comments to Rhian Bishop.

Action: All

6. Health and Wellbeing update

Steve Burgin reported that a staff Health and Wellbeing lottery would be introduced shortly which will be used to fund other health and wellbeing initiatives e.g. providing recreational facilities for staff in rest rooms etc.

Steve had also participated in the NHS working longer review which will be identifying good practice for working with and managing an ageing workforce.

The occupational health staff are also participating in an 'Every contact counts' initiative

There are a number of other actions currently being considered to help reduce stress for staff such as increasing the amount of annual leave that can be purchased and increasing the number of internal mediators following the successful introduction of the internal mediation service in the Trust last year which has proved to be cost effective.

7. Ongoing staff feedback/measurement of staff engagement

Mark suggested that it would be beneficial to introduce an annual local staff survey in addition to the NHS staff survey however the added value of this was queried. The directorate staff survey data has shown there is considerable variance in results within care groups and it was agreed that it would be more beneficial for directorates to be able to design their own directorate survey in order to identify and address issues pertinent to them. This could be done on a rolling programme by Care group. However this would be easier and more cost effective to do when the new learning management system (PALMS) is introduced which has a staff survey facility as Survey Monkey is not suitable for larger surveys.

Consideration is also being given to sending out a full Trust NHS Staff Survey in 2013 in order to further improve the quality of directorate data.

Action: Rhian Bishop

However concern was also expressed that additional surveys could impact on the response rate of the NHS staff survey and there is already a staff survey in e CAT which includes staff engagement data which is not fully utilised. Having asked staff for their views it would be really important to address the issues identified as there is already a perception amongst some staff that 'nothing ever changes' so there is no point in completing a survey. It was agreed that feedback to staff on staff survey actions needed to be better and Julie Phelan agreed to give consideration as to how this could be done. It was also agreed that directorate staff surveys should not be undertaken during September to December to reduce any adverse impact on the NHS staff survey response rate.

Action Julie Phelan

It was also agreed to go back and look at some of the 'Let's talk' issues to see if any of the outstanding ones can be addressed

Action Rhian Bishop

8. Date and time of next meeting

The next meeting will be held at 10 am on Friday 5th July in the Wentworth Seminar Room at the Rivermead Training Centre, NGH.