Yorkshire Ambulance Service NHS
NHS Trust

MEETING TITLE Trust Board		**MEETING DATE** 30/05/2017	
TITLE of PAPER	National Staff Survey Briefing Paper	**PAPER REF**	6.1
STRATEGIC OBJECTIVE(S)	Develop and retain a highly skilled, engaged and motivated workforce Ensure continuous service improvement and innovation		
PURPOSE OF THE PAPER	To inform the Trust Board on the results of the 2016 NHS Staff Survey along with an overview of the high level conclusions and recommendations for consideration.		
For Approval	☐	**For Assurance**	☒
For Decision	☐	**Discussion/Information**	☒
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DISCUSSED AT / INFORMED BY – include date(s) as appropriate (*free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper)*:

PREVIOUSLY AGREED AT:	**Committee/Group:** Trust Executive Group Choose an item.	**Date:** 20/03/2017 Click to enter date
RECOMMENDATION(S)	It is recommended that the Trust Board note:- 1. The content of the report and its demonstration of improvement against the data from 2015. 2. The outputs from the working group will be reported back into TEG and monitored through the Trusts Quality Committee.	

RISK ASSESSMENT	~~**Yes**~~	**No**
Corporate Risk Register and/or Board Assurance Framework amended *If 'Yes' – expand in Section 4. / attached paper*	☐	☒
Resource Implications (Financial, Workforce, other - specify) *If 'Yes' – expand in Section 2. / attached paper*	☐	☒
Legal implications/Regulatory requirements If 'Yes' – expand in Section 2. / attached paper	☐	☒
Diversity and Inclusion Implications If 'Yes' – please attach to the back of this paper	☐	☒

ASSURANCE/COMPLIANCE	
Care Quality Commission Choose a DOMAIN(s)	5: Well led 4: Responsive
NHSI Single Oversight Framework Choose a THEME(s)	6. Leadership & Improvement Capability (Well-Led) Choose an item.

National Staff Survey Briefing Paper

1. PURPOSE/AIM

1.1 To inform the Trust Board on the results of the 2016 NHS Staff Survey along with an overview of the high level conclusions and recommendations for consideration.

2. BACKGROUND/CONTEXT

2.1 The NHS Staff Survey is an important means by which the experience of staff at work and their engagement with patients, colleagues and managers are explored. NHS organisations are obliged to conduct the survey every year and have an opportunity to add local questions to those which are set nationally. Research has shown the relationship between positively engaged staff and positive patient experience at an individual and organisational outcome level.

2.2 It should be noted that the time table assigned to the National Staff Survey is predefined with all NHS Trusts and approved suppliers due to the combined national publishing of the reports by the Department of Health.

2.2 The feedback reports produced for each organisation focus on 32 key areas (known as 'Key Findings'). These are mostly summary scores for groups of questions which, when taken together, give more information about each area of interest.

This year there are 32 Key Findings. The Key Findings are presented in the feedback reports under the following nine themes:

- Appraisals & support for development
- Equality & diversity
- Errors & incidents
- Health & wellbeing
- Job satisfaction
- Managers
- Patient care & experience
- Violence, harassment & bullying
- Working patterns

2.3 The reports include an overall staff engagement measure. This indicator score for staff engagement arising from the NHS Staff Survey is presented on a scale of 1 to 5, where 1 represents poor engagement and 5 strong engagement.

2.4 The overall indicator of staff engagement is calculated utilising the data drawn from questions that represent the following key findings:

- Staff ability to contribute towards improvements at work
- Staff recommendation of the trust as a place to work or receive treatment;
- Staff motivation at work.

3. COMPARATIVE ANALYSIS OF 2016 STAFF SURVEY RESULTS INCLUDING KEY FINDINGS

The Brief Summary of the Trusts National Staff Survey Report can be found in Appendix 1. The Full Report of the Trusts National Staff Survey Report can be found in Appendix 2.

3.1 Survey Approach and Return Rates

3.1.1 The Trusts Staff Survey for 2016 was carried out as a census survey – with every member of staff being invited to respond and share their views. This should be taken into consideration with the response rate and number of responses as shown in the table below.

	2015 (Sample Survey)	2016 (Census Survey)
Number of responses	397	1681
Response rate	41%	37%

The increased number of responses in 2016 increases the validity of the 2016 report compared to 2015 even though the percentage response rate has dropped.

3.1.2 The table below benchmarks response rates across other NHS Trusts and other Ambulance Trusts. The Trust's 2016 response rate of 37% puts us above average for an Ambulance service.

Organisation Type	**TOP**	**BOTTOM**	**AVERAGE**
Acute Trust	64%	29%	44%
Ambulance Trust	40%	28%	34%
Mental Health Trust	65%	36%	45%
Community Health	69%	40%	50%
CCG / Other specialist organisation	100%	70%	81%

3.1.3 Response rates for each directorate are listed below. It should be noted that Chief Executive and Business Development Directorates have been excluded from reporting figures as per CQC guidelines due to the numbers returned.

Directorate	**Surveys sent**	**Surveys returned**	**% return rate**
People & Engagement Directorate	95	58	64%
Quality, Governance & Performance Assurance Directorate	53	38	78%
Clinical Directorate	44	32	74%
Finance and Performance Directorate	333	190	58%
Operations Directorate	2910	998	35%
Planned and Urgent Care Directorate	1116	352	32%
Total	4570	1681	37%

3.2 Staff Engagement Scores

3.2.1 The Staff Engagement score consists of 9 questions that feature within the staff survey. This overall indicator of staff engagement has been calculated using the questions that make up Key Findings 1, 4 and 7. These Key Findings relate to the following aspects of staff engagement:

- staff members' perceived ability to contribute to improvements at work - **Involvement**
- their willingness to recommend the trust as a place to work or receive treatment - **Advocacy**
- the extent to which they feel motivated and engaged with their work - **Motivation**

The specific questions used are shown below:

Question from the Survey	**Engagement aspect**
Care of patients/service users is my Trust's top priority	Advocacy
I would recommend the Trust as place to work	Advocacy
If a friend or relative needed treatment, I would be happy with the standard of care provided by this Trust	Advocacy
I look forward to going to work	Motivation
I am enthusiastic about my job	Motivation
Time passes quickly when I'm working	Motivation
There are frequent opportunities for me to show initiative in my role	Involvement
I am able to make suggestions to improve the work of my team/department	Involvement
I am able to make improvements in my area of work	Involvement

3.2.2 For YAS, the 2016 overall staff engagement indicator score was 3.38 which represented a very slight increase on the 2015 result of 3.31. The Trust score is below the national average for Ambulance services which is 3.41.

3.2.3 The table below shows that Operational areas in particular have a lower staff engagement score than other areas of the Trust. By breaking down the questions that constitute the staff engagement score into 'Advocacy', 'Motivation' and 'Involvement', you can better ascertain the areas that might require some particular focus.

Staff Survey Results 2016 – Engagement Scores

	Staff Engagement Score	**Advocacy**	**Motivation**	**Involvement**	Number of Respondents
Overall Trust Total	3.38	3.40	3.61	42%	1681
Clinical Directorate	3.85	3.81	3.74	72%	32
Finance and Performance	3.72	3.85	3.73	65%	190
Operations	3.30	3.26	3.60	37%	998
People and Engagement	3.63	3.65	3.71	56%	58
Planned and Urgent Care	3.52	3.72	3.73	44%	352
Quality, Governance & Performance	3.76	3.90	3.68	71%	38

The colour coding in the table reflects green where the scores are equal to or higher than the overall Trust engagement score, or the component scores for Advocacy, Motivation and Involvement, and red where scores are lower.

3.2.4 A breakdown of staff engagement scores for Advocacy, Motivation and Involvement can be found in Appendix 3.

3.3 Key Findings Summary

3.3.1 Overall responses were grouped into 32 key findings which are used to compare the performance of the Trust against other Ambulance Trusts. The 2016 survey results compared to the 2015 results show that no key findings have deteriorated whilst 5 have improved, with 27 remaining statistically similar.

The tables below give you a visual of these results by summarising the changes within these Key finding areas between the 2015 and 2016 results for the Trust.

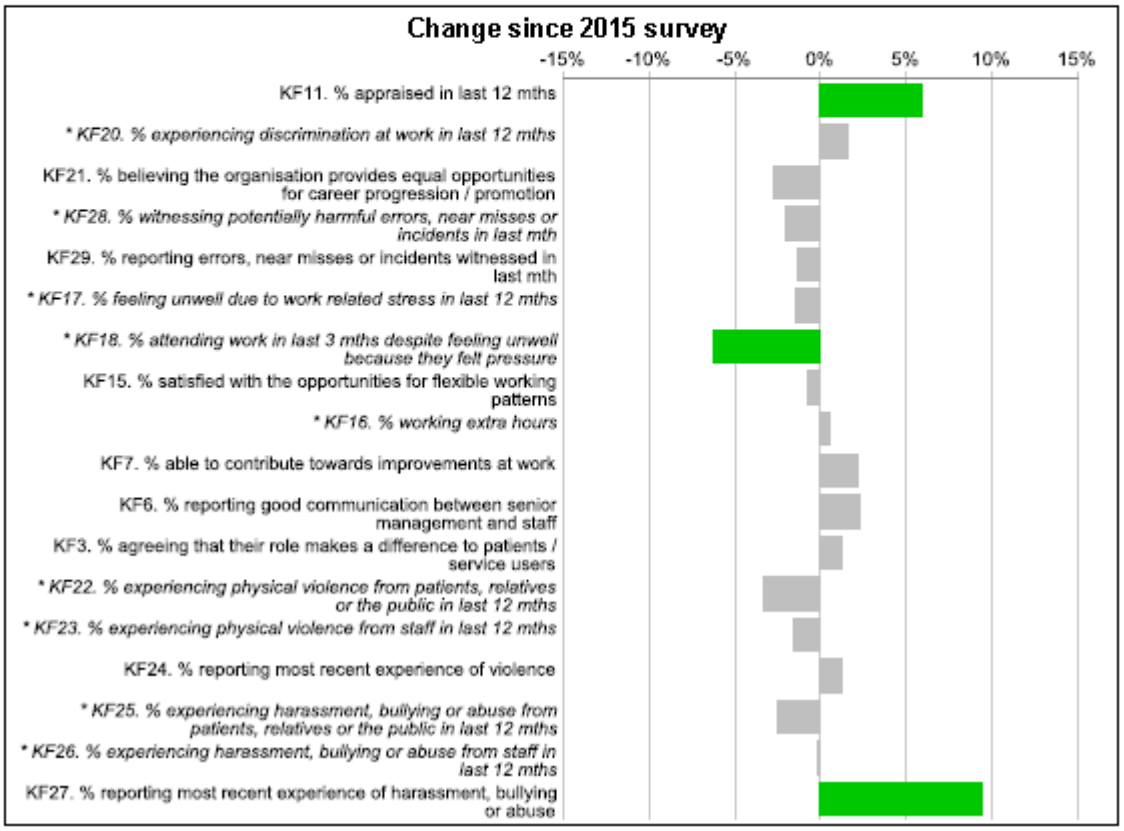
KEY

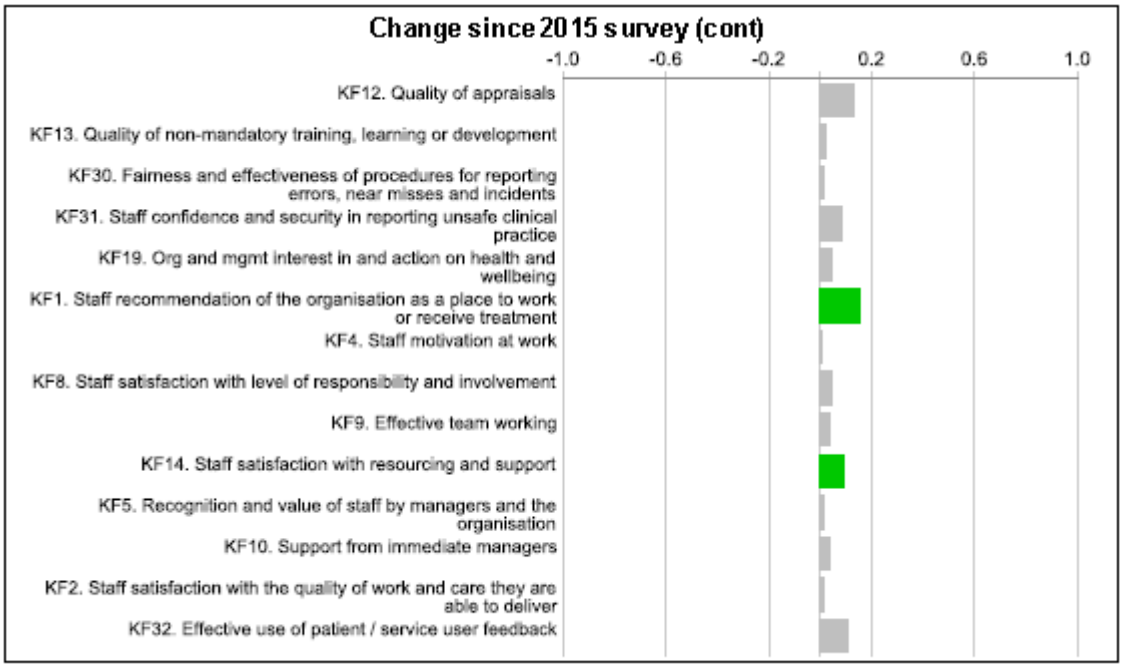
Green = Positive finding, e.g. there has been a statistically significant positive change in the Key Finding since the 2015 survey.

Red = Negative finding, e.g. there has been a statistically significant negative change in the Key Finding since the 2015 survey.

Grey = No change, e.g. there has been no statistically significant change in this Key Finding since the 2015 survey.

For most of the Key Finding scores in this table, the higher the score the better. However, there are some scores for which a high score would represent a negative finding. For these scores, which are marked with an asterisk and in *italics*, the lower the score the better.





3.3.2 The 5 Key findings for which Yorkshire Ambulance Service NHS Trust compares most favourably with other Ambulance Trusts in England are:

- KF2. Staff satisfaction with the quality of work and care they are able to deliver
- KF3. Percentage of staff agreeing that their role makes a difference to patients / service users
- KF11. Percentage of staff appraised in last 12 months
- KF16. Percentage of staff working extra hours
- KF29. Percentage of staff reporting errors, near misses or incidents witnessed in the last month

The 5 key findings for which Yorkshire Ambulance Service NHS Trust compares least favourably with other Ambulance Trusts in England are:

- KF6. Percentage of staff reporting good communication between senior management and staff
- KF7. Percentage of staff able to contribute towards improvements at work
- KF9. Effective team working
- KF10. Support from immediate managers
- KF24. Percentage of staff / colleagues reporting most recent experience of violence

3.3.3 The visual shows the summary of all Key Findings for YAS Compared with all Ambulance Trusts in 2016 as defined in 3.3.2.

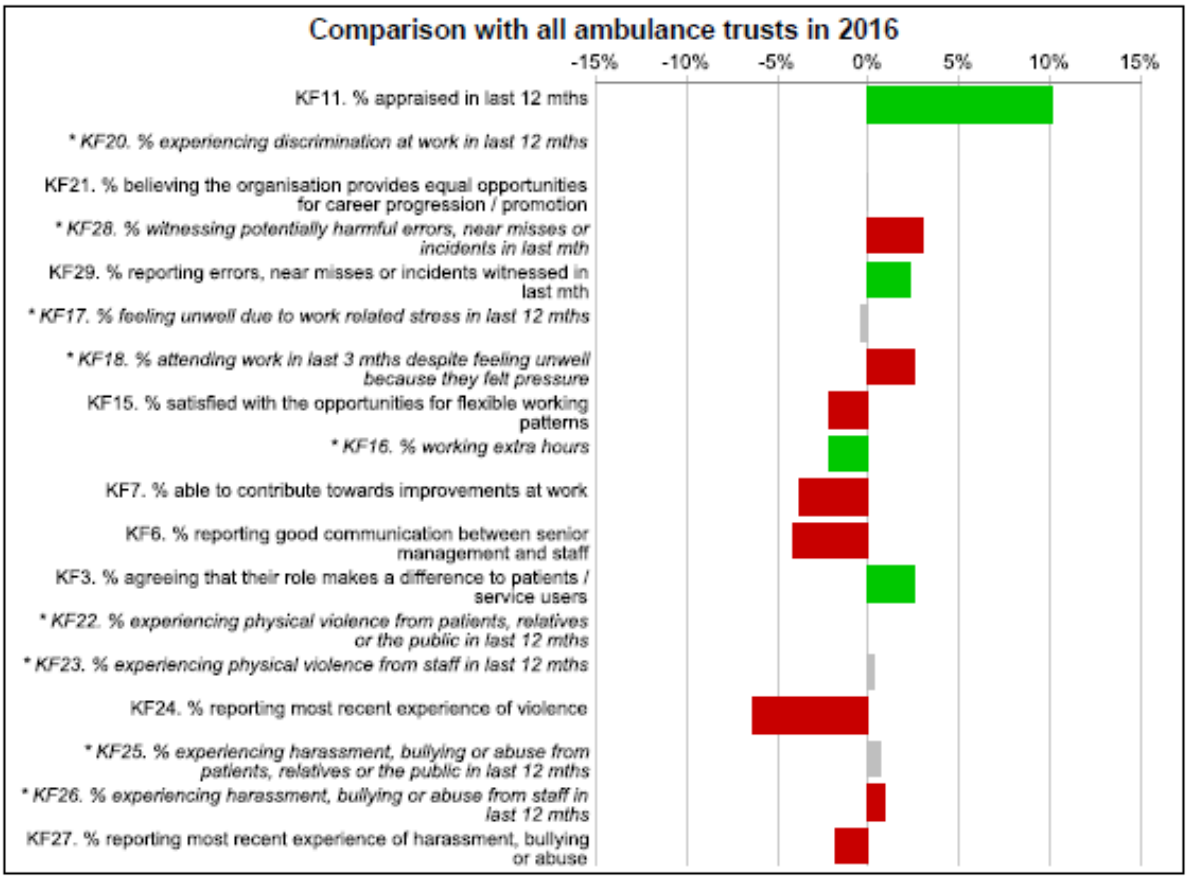
KEY

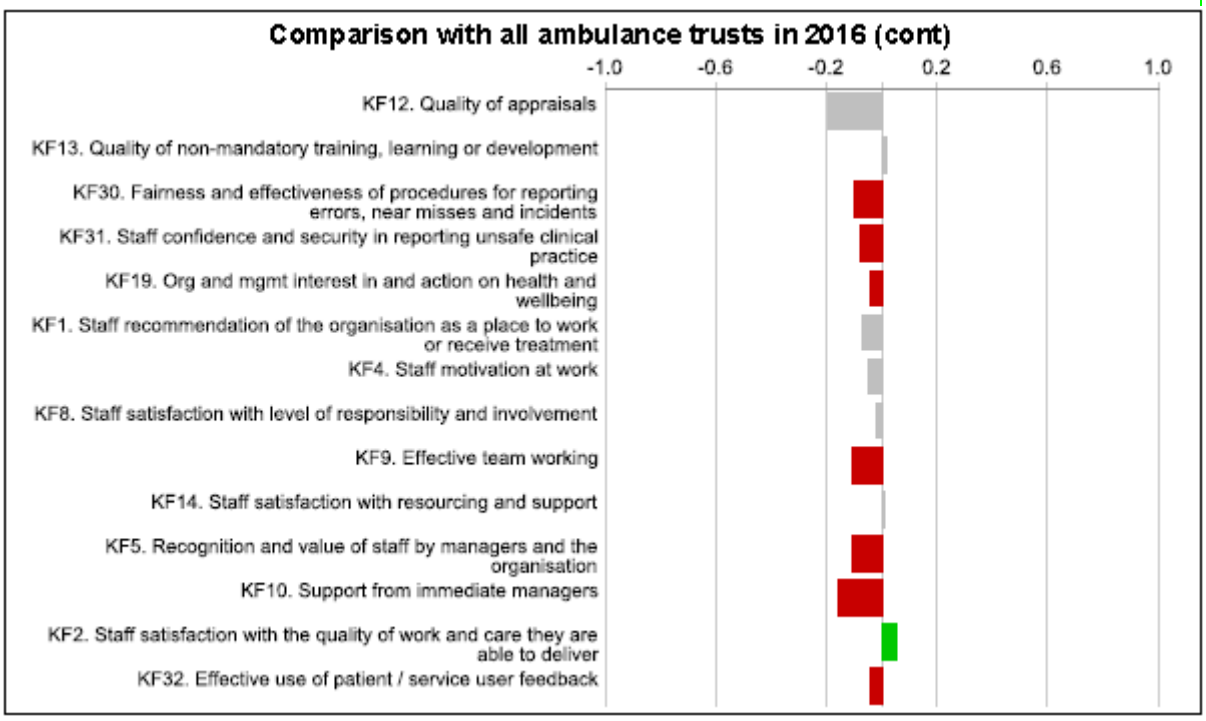
Green = Positive finding, e.g. better than average.

Red = Negative finding, i.e. worse than average.

Grey = Average.

For most of the Key Finding scores in this table, the higher the score the better. However, there are some scores for which a high score would represent a negative finding. For these scores, which are marked with an asterisk and in *italics*, the lower the score the better.





3.4 Staff Experience

3.4.1 The areas where we have seen the most improvement in staff experience since the 2015 survey are:

- KF1. Staff recommendation of the organisation as a place to work or receive treatment
- KF11. Percentage of staff appraised in the last 12 months
- KF14. Staff satisfaction with resourcing and support
- KF18. Percentage of staff feeling pressure in the last 3 months to attend work when feeling unwell
- KF27. Percentage of staff/ colleagues reporting most recent experience of harassment, bullying or abuse

3.5 National CQUIN on Health and Wellbeing

3.5.1 On the 05 March 2016, NHS England set out a plan to improve the Health and Wellbeing of staff through the introduction of a National CQUIN on health and wellbeing. The CQUIN use the NHS staff survey results from 2015 onwards and will track the increase in YAS staff saying that the Trust is taking positive action to support their health and wellbeing, and reduce work related stress and back injuries.

3.5.2 Results for the Questions used for the National CQUIN will include:

Questions	2015	2016
Does your organisation take positive action on health and well-being?	22%	22%
In the last 12 months have you experienced musculoskeletal problems (MSK) as a result of work activities?	39%	39%
During the last 12 months have you felt unwell as a result of work related stress?	45%	45%

4. CONCLUSIONS

4.1 Adopting a census approach has provided the Trust with a more meaningful and statistically relevant data set.

4.2 The Trusts response rate of 37% is above average for Ambulance Services (only 3% off the highest response rate received by an Ambulance Trust).

4.3 The lowest return rates were from Operational Areas.

4.4 The overall staff engagement score has increased from 3.31 to 3.38. This is only 0.03 off the average engagement score for Ambulance Trusts.

4.5 The lowest engagement scores were from operational areas.

4.6 Comparing the Trusts 2016 report against the 2015 data – all Key finding areas have remained statistically similar or improved.

4.7 Comparing the Trusts 2016 report against other ambulance services gives more mixed scenario with 15 areas comparing less favourably and 5 areas comparing more favourably. It should be noted however that the Yorkshire Ambulance Service response to staff receiving an appraisal in the last 12 months is significantly favourable against other ambulances service by 10%.

4.8 There is strong evidence to show that employee engagement is intrinsically linked to high performance and improved Patient outcomes (Dawson et. al. 2011)[1], and that quality staff appraisal are a key tool to support levels of engagement, along with the ability to influence within our own work area

4.9 There has been no change to the measures used in the National CQUIN for Health and Wellbeing (3.5.2).

5. Next Steps

5.1 A working group has been arranged to review the 2016 results with a view to:

- Establishing a corporate level action plan to be presented to TEG for approval
- To define a future process for staff opinion surveys which would see Directorate leads taking responsibility for effecting change within their own areas

5.2 The working group will include senior representative from HR, Education and Learning and Corporate Communications.

5.2 The outputs from the working group will be reported back into TEG.

[1] Dawson JF, West MA, Admasachew L, Topakas A, NHS Staff Management and Health Service Quality; London, Department of Health, 2011

6. RECOMMENDATIONS

It is recommended that the Trust Board note:-

3. The content of the report and its demonstration of improvement against the data from 2015.
4. The outputs from the working group will be reported back into TEG and monitored through the Trusts Quality Committee.

7. APPENDICES/BACKGROUND INFORMATION

Appendix 1 – The Brief Summary of the Trusts National Staff Survey Report
Appendix 2 – The Full Report of the Trusts National Staff Survey
Appendix 3 – The Departmental breakdown on the staff engagement score components