

Staff Survey Results and Action Plan Report for the AWP NHS Trust Board			
Meeting Date: 27 April 2012	Meeting Time: 10:00	Agenda Item: 10	Serial: 12.0110
This Report is presented by the Executive Director for People for Noting in the Public session of the Board.			

Report Summary	
Purpose of this Report: To brief the Board on the 2011 Staff Survey results and resulting next steps.	
Board Decisions Recommended: The Board is recommended to note the report and associated next steps	
Actions Arising from the Report: Implementation of the actions defined in the report.	
Report Links	
Quality and Safety Implications	The link between Staff satisfaction and Service User outcomes is well evidenced. Significant action and altered focus is required in order to influence these results
CQC	Outcomes 12,13,14
Corporate Risk Register	Staff Satisfaction
List of Appendices	
<ul style="list-style-type: none"> • Appendix A – Staff Survey Potential Actions • Enclosure A – 2011 National Staff Survey Summary results 	

1. Introduction

- 1.1. The Board is aware that the Trust annually participates in the national NHS Staff Survey. The survey was undertaken during October – December 2011 and the results were published in March 2012. In previous years we have made variable progress. The Board is aware of the amount of organisational change underway within the Trust as well as potential for staff uncertainty associated with upcoming tendering etc and it is believed that these as well as other factors have had an impact on the results.

2. Analysis and Discussion

- 2.1.1. The response rate to the survey was 58.04% which puts us in the top 20% of mental health/learning disability trusts for our response. It is also comparable with last year's response rate.
- 2.1.2. the results are appended at Appendix A and present a disappointing picture. Our results are broadly similar to last year, however other mental health trusts have obviously improved their results and therefore our relative position has worsened.
- 2.1.3. The Board will recall that last year's action plan particularly focussed on 2 areas which were timely implementation of Adults redesign and a shift in the perception of the focus on performance management. These were challenging items to progress, particularly given other delay factors associated with implementing redesign.
- 2.1.4. The 2011 trust wide and SBU/directorate specific results have been shared with the relevant directors who have taken them into their team meetings to discuss with staff in order to inform action planning. An XEMT workshop was then held on April 11 in order to start the development of our trust wide action plan. The event was structured to focus on the 4 Staff Pledge areas in the NHS Constitution
- Pledge 1: Provide all staff with clear roles, responsibilities and rewarding jobs that make a difference
 - Pledge 2: Provide all staff with relevant personal development, training and support to succeed
 - Pledge 3: Provide support and opportunities for staff to maintain their wellbeing and safety
 - Pledge 4: Engage staff in decisions affecting them. Empower staff to put forward ideas for better and safer services

and groups, using a solutions focussed approach, identified draft actions.

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- 2.1.5. The potential actions from the 11 April workshop are appended at App B and are for further exploration/ co creation with SBU/Directorate teams.
- 2.1.6. Further actions which are clear and obvious for us to take will also be added to the action plan including e.g. hand washing facilities. These will be approached on a 'you said, we did' basis.
- 2.1.7. It should also be noted that much more significant actions as described within the 'Case for Change' paper discussed at the Board Seminar on 18 April are likely to have a very significant impact upon the organisation and perceptions of staff towards the organisation.

3. Conclusion

- 3.1. This paper presents the 2011 Staff Survey results and actions taken in relation to them. It is a dynamic piece of work and ongoing progress will be reported via the quarterly People status report. It will also be discussed at the May Quality and Healthcare Governance Committee.

4. Recommendation

- 4.1. The Board is asked to note the report, results and next steps

5. Additional Report Contributors

- 5.1. Name – Toria Nelson, HR Business Partner

Staff Survey (2011) Potential Actions from April 11 workshop for further exploration/ co creation with SBU/Directorate staff

1. Provide all staff with clear roles, responsibilities and rewarding jobs that make a difference

Draft Actions	<p>1.1 Ongoing effective appraisal and supervision push including ‘Golden Thread’ (individual and team link to principal objectives) exploration</p> <p>1.2 Effective implementation of INSPIRE appraisal and supervision system, including trust wide behaviours workshops and staff consultation</p> <p>1.3 Exploration and understanding of roles through latter stages of redesign – team building days (PCLS and Adult Community, then Adult Inpatients).</p> <p>1.4 Focus on senior management performance and accountability</p> <p>1.5 Ensure clear, explicit rationale included into communications on change processes</p> <p>1.6 Recognise staff who have ‘made a difference’ – continue to review Staff Awards to ensure categories give opportunity for all staff groups, individuals, teams, geographies, SBUs etc to be recognised</p> <p>1.7 Further develop the work in SDAS on Experience Based co Design so that staff become involved in finding solutions to improve service user experience</p> <p>1.8 Ensure staff are recognised through ‘Team of the Month’ initiative for fulfilling their role and making a difference to service user experience</p>
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2. Provide all staff with relevant personal development, training and support to succeed

Draft Actions	<p>2.1 Review/redesign newly registered staff preceptorship programme to include internal rotation, rapid development programme, rapid progression potential</p> <p>2.2 Extend work currently in Estates and Facilities Management to whole Trust on career paths</p>
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Staff Survey and Action Planning

	2.3	Develop internal and external leadership (explore reciprocal) secondment relationships with stakeholders
	2.4	Maximise use of succession planning and talent management potential from INSPIRE system
	2.5	Review existing Managers' Toolkit. Develop next stage Managers' Toolkit – particularly focussing on Continuous Quality Improvement tools and techniques
	2.6	SBU's annual training plans to inform Learning and Development workplan
3. Provide support and opportunities for staff to maintain their wellbeing and safety		
Draft Actions	3.1	Carry out trust wide behaviours workshops ensuring senior leadership ownership and commitment to these
	3.2	Co create with staff on further well being initiatives e.g. exercise classes, yoga +++ other ideas
	3.3	Use these and other opportunities including significant communications plan to make the links and raise awareness with staff on existing wellbeing initiatives
	3.4	Trust policies to make the link to relevant Staff Pledges e.g Health and Safety policies link to third pledge
	3.5	People Directorate review of its ways of working including e.g. revised focus on total reward and benefits package
4. Engage staff in decisions affecting them. Empower staff to put forward ideas for better and safer services		
Draft Actions	4.1	Focus at all levels of the organisation on involving staff and staff/professional groups in decision making and co creating solutions whenever possible – Development programme in support of this as per 2.5
	4.2	Explore with staff side the representative nature of their role with staff and enabling them to better do this
	4.3	Explore with staff groups where there is lack of clarity, tension between functions e.g. managerial / clinical, managerial / medical, role of Service Director / Clinical Director in order to ensure the ability for all groups to effectively engage with and contribute to service development

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