

enabling and empowering people to reach their potential and live fulfilling lives

Summary Report – Trust Board Meeting (Part 1)	Date: 26th September 2012
Report Title: Staff Patient Safety Survey	
Agenda Item: 14	Enclosures: Appendix 1
Sponsor: Hazel Watson	Presenter: Hazel Watson
Report Author: Linda Hutchings, Head of Risk and Compliance	
Report discussed previously at:	This report has come directly to Board

Purpose of the Report and Action required		
The purpose of this report is to share the findings of the staff survey on patient safety	Approval	
	Discussion	
	Information	X

Executive Summary of Key Issues
<p>The Fit for the Future Implementation Plan required the Trust to survey staff on their views on patient safety.</p> <p>This report reports the survey findings. Headline feedback is:</p> <ul style="list-style-type: none"> The response rate to the survey was very low. Overall the feedback is quite mixed Staff felt more positive about the contributions to patient safety that their team and their managers made than they did about the contribution of AWP as a corporate body.

Which Strategic Objective does this paper address	
A sustainable value for money business	No
Excellent service user access and experience	Yes
Excellent partnership working with other organisations	No
Effective engagement and improvement in staff satisfaction	Yes

Link to Fit for the Future Implementation Plan	
Objective number	3.4

Corporate Impact Assessment	
Quality and Safety implications	This feedback supports the patient safety agenda within the Trust

Recommendations to other committees
None

Patient Safety Survey Report

Recommendation/Decision
The Board is recommended to note the report.

Report for the Avon & Wiltshire Mental Health Partnership Trust Dated 2012-09-26		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 14	Serial: 12.0676	Page 2 of 7

Patient Safety Survey Report

1. Introduction

- 1.1. The Fit for the Future Implementation Plan required a patient safety survey to be undertaken. The Trust has used the survey methodology and questionnaire published on the internet by the US Agency for Healthcare Research and Quality, as it was assessed as meeting the Trust's needs.
- 1.2. The survey was published on Ourspace for all staff to complete, and was supported by a communications strategy to encourage staff participation. Adherence to the required timescales in the Fit for the Future Implementation Plan meant that the survey had to be conducted in the month of August, which was probably the least preferred month of the year for such work.
- 1.3. The purpose of this paper is to share the survey results.

2. Analysis and Discussion

- 2.1. There was a very low response rate to the survey, only 204 respondents, which no doubt in part reflects that the survey was conducted at the height of the holiday season, but may also suggest staff apathy, workload pressures or survey fatigue. Responses were received from most directorates and all SBUs, but the low response rate means that sub-trust level analysis is not statistically viable. 92% of respondents have a direct role in patient care.
- 2.2. The different sections of the survey responses are described below, with the detailed findings pictorially available in the appendices to this report.
- 2.3. Statements about Work Areas/Units**
- 2.4. This section's results show the level of agreement/disagreement with statements about staff's own work area. For visual impact, the net score is shown, ie, the level of agreement minus the level of disagreement.
- 2.5. Staff are very positive about how people support one another in their team, how colleagues treat each other with respect and how team working is effective under pressure. There is also a strong sense that teams are working together to improve patient safety.
- 2.6. There is strong feedback that staff do not feel that there are enough staff to handle the workload and that they operate regularly in crisis mode.

Report for the Avon & Wiltshire Mental Health Partnership Trust Dated 2012-09-26		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 14	Serial: 12.0676	Page 3 of 7

Patient Safety Survey Report

- 2.7. There was very mixed feedback as to whether staff felt they had patient safety problems in their unit:

Question: “We have patient safety problems in this unit”

View	%
Strongly Disagree	13
Disagree	22
Neutral	23
Agree	25
Strongly Agree	17

2.8. Statements about Supervisors/Managers

- 2.9. Section B’s results show staff’s views of their supervisor/manager’s attitude towards safety. The results are very positive, suggesting that safety is central to the work of managers.

2.10. Statements about Communication

- 2.11. Section C shows staff’s willingness to communicate about patient safety issues.
- 2.12. There is good evidence that staff will speak freely if they see something that is adversely affecting patient care, even if they do not feel as confident to challenge management decisions.
- 2.13. Again, some of the feedback is quite mixed. 47% of respondents said that they sometimes/most of the time/always are afraid to ask questions when something does not seem right, as opposed to 53% who never or rarely have these fears.

2.14. Frequency of Incidents Reported

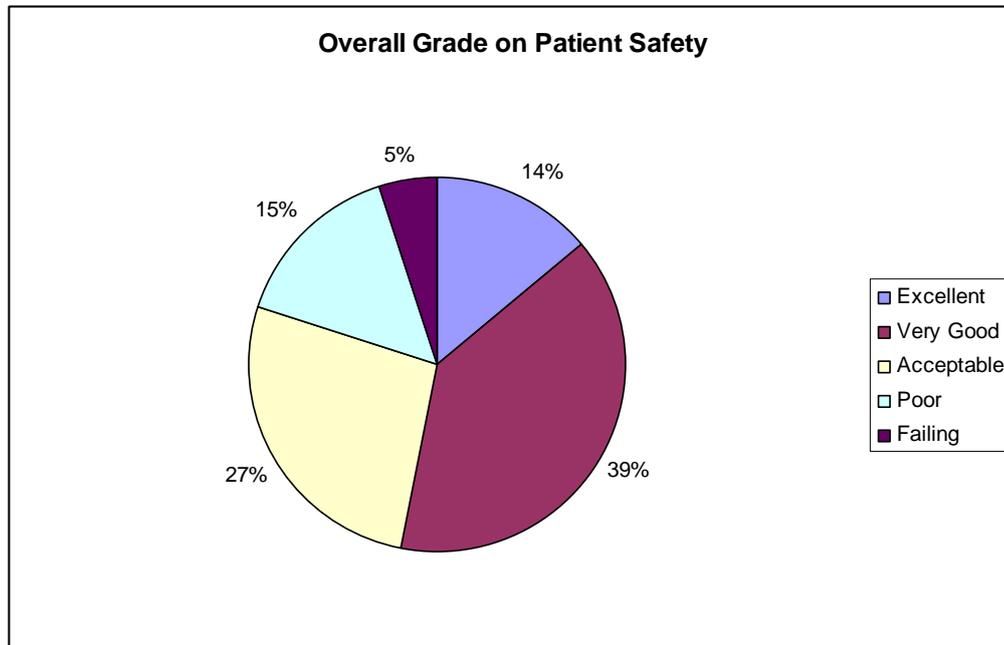
- 2.15. Section D shows staff attitude towards incident reporting, particularly near miss type events.
- 2.16. A mean of 79% of respondents said that they would sometimes/most of the time/always report the different types of incident described. This response is somewhat at odds with the Trust’s near miss incident data (which has low reporting), however does indicate a strong staff willingness to report a full range of incident types, suggesting that attitude is not a significant barrier to reporting.

Report for the Avon & Wiltshire Mental Health Partnership Trust Dated 2012-09-26		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 14	Serial: 12.0676	Page 4 of 7

Patient Safety Survey Report

2.17. Overall Grade of Patient Safety

2.18. The pie chart below shows respondents' views on how they grade patient safety overall:



2.19. Statements About AWP

2.20. Respondents have tended to be a lot more negative when asked questions about safety by "AWP" or about teams other than their own than they are about their own team

2.21. Section F shows that there is a strong sense that units within AWP do not co-ordinate well with each other and that "things fall between the cracks" between services. There is a strong sense that "management" only seems interested in patient safety after an incident has occurred.

2.22. Overall, it appears that respondents perceive AWP as a corporate body to have a reactive patient safety culture.

2.23. Free Text Responses

2.24. Staff were invited to comment generally at the end of the questionnaire with their anonymity protected. 89 respondents chose to comment and all of these comments were shared with the Executive at the end of the survey period. There were 11 comments deemed high risk in nature that may warrant investigation and action and executives were tasked with addressing these, as necessary, immediately.

Report for the Avon & Wiltshire Mental Health Partnership Trust Dated 2012-09-26		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 14	Serial: 12.0676	Page 5 of 7

Patient Safety Survey Report

- 2.25. Three examples of comments are given for information; the first is one that was deemed high risk and the final example reflects several comments about the need to improve staff safety:

“Trust policy states that staff must carry a pit at all times. So why do we have to walk around the ward looking for the security nurse to ask for one? Also why are housekeeping not allowed the front door code? Are we not trusted? That is health and safety.”

“Patient safety is not as good as it used to be. Staff shortages, minimum numbers on all units, no help in emergencies even though on a big site due to this. Lack of resources, and refusal of extras when they are needed, even to bring up to minimal safe staffing levels. Incident forms are complicated to complete, and not electronic which would be easier to submit, especially giving staff the knowledge that they are going through not being ignored/left. It feels that patient safety is being compromised due to monetary issues and lack of appropriate placements for difficult to place patients, and loss of inpatient beds, leading to more risk in the community, and patients being very unwell by the time they are admitted.”

“Shortage of staff is a major issue regarding patient and staff safety, incidents of repeated verbal abuse to staff should be recorded on incident forms this is often not time because of time and pressure of work. Patients don't get leave because of shortage of staff stressful for them and creating a stressful atmosphere to work in. Would AWP care to issue a survey regarding staff safety.”

3. Conclusion

- 3.1. There has been a disappointingly low response rate to the survey, which means that data analysis is more limited than would have been wished.
- 3.2. Staff perceptions of safety within their team and with their manager seem much more positive than their perception of how AWP treats safety.
- 3.3. Some of the messages from the survey data are quite mixed, and work is already underway to address some of the issues highlighted, eg, web incident reporting, increased staff recruitment, etc. It will therefore be desirable to repeat the survey in the future to see if these changes influence staff views. Guidance states that at least 6 months must be left between surveys.

Report for the Avon & Wiltshire Mental Health Partnership Trust Dated 2012-09-26		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 14	Serial: 12.0676	Page 6 of 7

Patient Safety Survey Report

4. Recommendation

4.1. The Trust Board is asked to note this report.

5. Additional Report Contributors

5.1. Linda Hutchings, Head of Risk and Compliance

Report for the Avon & Wiltshire Mental Health Partnership Trust Dated 2012-09-26		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 14	Serial: 12.0676	Page 7 of 7