Ashford and St. Peter's Hospitals NHS
NHS Foundation Trust

**COUNCIL OF GOVERNORS**
**4th March 2014**

| | |
|---|---|
| **TITLE** | **National Staff Survey 2013** |
| **EXECUTIVE SUMMARY** | The results of the National NHS Staff Survey (NSS) 2013 were published by NHS England on 25th February 2014.<br><br>This paper describes:<br>• The overall results of the staff survey;<br>• A description of the staff experience and culture programme activities from 2013, with an assessment of where the Trust has improved and deteriorated against this;<br>• A summary of the progress made from the 'hot spot' areas from 2012;<br>• A description of how the Trust compares with external acute sector benchmarks; and<br>• The headline priority actions (although further work is needed to develop a comprehensive programme of work for 2014). |
| **The Council is asked to:** | Discuss the paper. |
| **Submitted by:** | Louise McKenzie, Director of Workforce Transformation |
| **Date:** | February 2014 |
| **Decision** | For Discussion |

Ashford and St. Peter's Hospitals NHS
NHS Foundation Trust

# NATIONAL STAFF SURVEY 2013 BRIEFING PAPER

## INTRODUCTION

1. The results of the National NHS Staff Survey (NSS) 2013 were published by NHS England on 25th February 2014. The survey is the eleventh national annual survey and is recognised as an important way of ensuring that the views of staff working in the NHS inform local improvements and input in to local and national assessments of quality, safety and delivery of the NHS Constitution.

2. This paper describes:
   - The overall results of the staff survey.
   - A description of the staff experience and culture programme activities from 2013, with an assessment of where the Trust has improved and deteriorated against this.
   - A summary of the progress made from the 'hot spot' areas from 2012.
   - A description of how the Trust compares with external acute sector benchmarks.
   - The headline priority actions (although further work is needed to develop a comprehensive programme of work for 2014).

## OVERALL SUMMARY

3. In total 1,259 staff (43.5% of the Trust's permanent workforce) responded to the survey. This was just below the 49% national average response rate for acute Trusts. The 91 questions in the survey are grouped into 28 Key Findings, which are used to describe and compare with ASPH results in 2012 and against other acute trusts nationally.

4. Results compared to last year (i) improved (ii) static (iii) deteriorated; and compared with national benchmark.

| Key: | ✓✓ | Above Average & Top 20% |
|---|---|---|
| | ✓ | Average |
| | **X** | Below Average |
| | **XX** | Bottom 20% |

(i) Improved:

KF12. Hand washing materials being available. **X**
KF24. Staff recommending the Trust as a place to work or receive treatment. **X**

(ii) Remained static:

KF1. Satisfaction with the quality of work and patient care they are able to deliver. **XX**
KF2. Role makes a difference to patients. **X**
KF3. Work pressure felt by staff. **X**
KF4. Effective team working. **X**
KF5. Staff working extra hours. **XX**
KF6. Job relevant training, learning & development. **XX**
KF7. Appraisals. ✓
KF8. Well-structured appraisals. ✓
KF9. Support from immediate manager. **XX**
KF11.Staff suffering work-related stress. ✓✓
KF13. Staff witnessing potentially harmful errors, near misses or incidents in the last month. ✓✓
KF14. Reporting errors, near misses or incidents witnessed in that last month.✓
KF15. Fairness and effectiveness of incident reporting procedures. **XX**
KF16. Staff experiencing physical violence from patients, relatives or the public.✓✓

KF17. Staff experiencing physical violence from staff.✓✓
KF18. Staff experiencing harassment, bullying or abuse from patients, relatives or the public.✓
KF19. Staff experiencing harassment, bullying or abuse from staff. **XX**
KF20. Staff feeling pressure to attend work when unwell. **X**
KF21. Good communication between senior management and staff. **X**
KF22. Contributing to improvements at work. **X**
KF23. Staff job satisfaction. **XX**
KF25 Staff motivation at work. ✓
KF27 Equal opportunities for career progression. **XX**
KF28 Discrimination at work. **X**

(iii) Deteriorated:

KF10. Health & safety training. **X**
KF26. Equality & diversity training. **X**

5. The Trust's top ranking scores (percentage of staff suffering stress, physical violence, harassment & reporting of incidents) appear to show that on a day to day basis staff feel secure in their work environment, are in control and able to meet their daily demands. However, the Trust's bottom ranking scores (management support, harassment & bullying from staff, staff receiving training, job satisfaction, career progression) illustrate a perceived lack of support in their line manager relationships, work climate issues and their on-going job satisfaction & development.

**STAFF ENGAGEMENT**

6. The Staff Engagement score is a significant indicator for the Trust. The survey asks a range of questions to calculate the engagement score including questions around :
   - Contribution towards improvements at work.
   - F&F test – recommendation of the trust as a place to work or receive treatment.
   - Staff motivation at work.

7. Given the significance of this indicator it is reassuring to see that the Trust has improved its overall engagement score from 3.62 in 2012 (on a scale of 1-5), to 3.68 in 2013. In particular the Friends & Family test score has increased from 53.5% in 2012 to 62.19% in 2013, ensuring that we will receive the CQUIN payment for this improvement. However it is important to note that the national average overall engagement score has also risen to 3.74 in 2013 and so our overall score still places us in the 'below average' category.

**STAFF EXPERIENCE & CULTURE PROGRAMME**

8. During 2013 /14, the Trust has been implementing a staff experience and culture plan in recognition of the need to set a refreshed 'cultural tone' for the Trust, and as an action plan from the 2012 NSS. The programme of work is focusing on 4 key priorities – citizenship, leadership, teamwork, employee experience. It is useful to reflect on what we have done in relation to these key priorities and whether they appear to have had a positive impact on the survey results.

9. The first priority was to create and sustain a greater sense of citizenship across the Trust i.e. building a commitment and a loyalty to the Trust through a more natural two way communication style, an active staff engagement methodology at all levels and real time feedback. There has been significant activity in relation to this for example:
   - Introduction of the CEO Sounding Board, which has been a strong forum using a different type of engagement. In this first year Andrew has been building trust and relationships with Sounding Board members and testing ideas around communication and staff experience. In

Year 2 we will be putting more emphasis on using the Sounding Board members an advocate for improvement and as a catalyst for change.

- Using an online space to create a discussion with staff – The Wall, which has enabled us to open up the conversation, build honesty and openness.
- Using the Wall to develop new Values Based Behaviours that staff want to see in the organisation.
- Developing a culture where non clinical staff experience can make closer links to the patient experience for example Mealtime Volunteers.

10. The results of the survey (which also triangulate with the pulse survey) show that we have made an improvement in this priority area, although it is also clear that developing a strong organisational loyalty, the right culture, and an engaged & motivated workforce will take time to embed.

11. The second priority was to demonstrate 'Habits of Leadership' for the Trust i.e. a consistent and competent values-based leadership style at all levels, resulting in improved people management capability and more inclusive change management practice. During 2013/14 we have concentrated on developing the current and future medical leaders in the Trust through a leadership programme delivered by The Hay Group and part funded/commissioned by the NHS Leadership Academy. This was considered a priority area and one which required a substantial focus. It is clear from the staff survey that we now need to put as much energy into developing our leadership & management skills of our other staff groups. This will start in early 2014/15 with a management training programme. The first programme will be aimed at new managers (Bands 5&6) and the second programme aimed at existing managers (Bands 7&8). Both programmes will have compulsory and optional modules, and have been designed for those who want to, to gain a management accreditation from the Institute of Leadership and Management [ILM].

12. The third priority was to use high performing team working and a stronger coaching style as the vehicle for building teams encouraging innovation, improving job satisfaction, as well as driving performance. There has been significant investment in this work programme through activities such as Team ASPH and the CEO's innovation fund, so it is a surprise that the staff survey results have stayed static on this area. Moreover, these results do not reflect the positive feedback around team working that we have seen on The Wall, the pulse survey, through the inspirational Team ASPH stories at the Board, or through the recent CQC feedback. Our priority for next year will be to continue with the Team Coaching programme and continue to champion & encourage bottom up innovation such as the '*Be The Change'* junior doctor project.

13. The fourth priority was to improve the staff experience and our "offer" as a good employer, through effective health and wellbeing support, by improving the appraisal and training experience, and eliminating our tolerance of unacceptable behaviours. Once again we have made good progress developing the 'employee promise' although delivery of all aspects of this is clearly at an early stage. Our priority for next year will be to focus on areas of 'the promise' that are perceived to be weak. From the staff survey feedback these areas will include tackling pockets of bullying & harassment, improving the training & development & career pathways for staff, and continuing to find ways to value and recognise staff.

**DIVISIONAL / DEPARTMENTAL SCORES**

14. There a number of departments / specialties worthy of a mention in terms of their staff survey results.
    - **Health Informatics & Gastroenterology.** The results have shown that both of these teams have made significant progress in 20 questions or more, with more than a 50% response rate from both teams. Teams have described feeling valued and involved in making decisions, satisfaction with the appraisal & feedback systems and effectiveness of communications with senior management. The Health Informatics team scored their

relationships with their line managers very highly. Further analysis of this with the teams will enable us to identify what makes these areas perform well.

- 74% of the **Workforce & OD Division** responded to the questionnaire, with 24 scores significantly better than other Divisions, citing good practice in the appraisal system, its values, immediate manager support and ability to influence decisions in their work area.
- **Hotel Services** (within Facilities). Over the past 12 months there has been a focus on training and appraisals for staff within Hotel Services. This has certainly influenced the 2013 results, with favourable comments from respondents about how such training has influenced them in providing a better patient experience. The appraisal process, team effectiveness, opportunities to get involved in decision-making and feelings that the senior management are responsive are all positive attributes of this service.

**'HOTSPOTS' IN 2012**

15. Following the publication of the 2012 NSS, the Chief Executive met with staff from areas of the Trust which were deemed to be 'hotspot' areas in terms of poor staff survey results. Department leads were asked to investigate issues further and draw up a local remedial action plan. The top 5 of these 'hotspots' were identified as:
    - Trauma & Orthopaedics Division.
    - Diagnostics & Therapeutic department.
    - Pathology department.
    - Imaging department.
    - Estates department.

16. Similarly to the overall survey results, the position of the 'hotspots' is relatively static, although there has been a notable improvement within Imaging in terms of both their engagement score, which has improved (score of 75) and is now marginally above the organisational average (score of 74) and their general scores. It is likely that the rest of the hotspot areas from 2012/13 will require continued focus in the 2014 action plan. Pharmacy is a new hotspot area.

17. **Imaging**. During 2013, the Imaging department have put additional resources into tackling issues raised in the 2012 NSS. The focus of attention looked at work pressures and the underlying issues leading to a high level [more than twice the organisational average] of reports of discrimination from managers/team leaders or other colleagues. In 2013, they have scored significantly better in terms of staff engagement, expressing particular enthusiasm for their work. It appears that the team has benefited from the implementation of its staff survey action plan last year, which included a focus on training and appraisal development, although the latter requires more attention by the appraisers within the team. This year's respondents are more enthusiastic and feel valued by the organisation, which suggests that investment in them as a 'hotspot' has reaped benefits. It is noted that the response rate is down from 60% in 2012 to 41% in 2013, so the department need to take this into account.

18. **Trauma & Orthopaedics and Diagnostics & Therapeutics Division.** Results from this division indicate that staff are the most dissatisfied staff in the organisation although it should be noted that the response rate was below the organisational average (215 responses out of 549). The Division is significantly better than other Divisions on only 1 question and significantly worse on 21 questions. It also scored 'red' in nearly every element of the staff engagement score in terms of motivation, involvement and advocacy. Staff feedback refers to a need for improvement in terms of the effectiveness and helpfulness of their appraisals and a strong sense that their work is not valued. Other feedback points to being demotivated by a lack of staff and materials, not able to make improvements to their work, and do not feel able to do their job to a standard they are pleased with. They have particularly flagged up a lack of communication with senior management and relationship issues with team colleagues.

19. **Therapists.** Of these 215 divisional respondents, 54 of them were therapists who said there was not enough staff in the organisation to allow them to do their job properly, there was a

reduction in how satisfied they are with standards of care, and 28% would not recommend the Trust as a place to work compared to the 15% organisational average.

20. **Pathology.** Following the NSS 2012 the Trust sought to understand the issues relating to the reconfiguration of services and the impact that this had had on team morale. In 2013, respondents have reiterated some concerns (illustrated by a poor engagement score) but it should be noted that there is an improving picture in terms of staff being able to meet the demands of the job, that more staff look forward to going to work, and an improved feeling of the value the organisation places.

21. **Estates.** Almost all the 57 members of the Estates team filled in a questionnaire in 2013. Their responses were significantly worse than the organisational average in 21 out of the 91 questions and highlighted dissatisfaction in relation to training, appraisals and communication.

22. **Pharmacy.** This department should be considered a new 'hotspot' as more than half of the staff indicates that things are significantly worse than 2012 in 16 areas. Work pressure appears to be affecting them as they do not feel there is enough staff to enable them to do their job properly and, as a result, they do not look forward to and have little enthusiasm for their work. They also feel that communication is ineffective with senior management and their appraisal system is lacking.

23. Other areas that may need focussed attention include **Specialist Medicine & Critical Care.** Whilst there is a relatively small sample of respondents, the staff engagement scores are poor.

24. Respondents' dissatisfaction is evidenced in the free text section at the end of the questionnaire. The majority of the comments[1] focus on concerns around working relationships, especially communication problems from line & senior managers. They also comment about the impact of the higher cost of living in the last 12 months and a lack of associated pay reward to meet those increasing needs is affecting their motivation. Indicators triangulate with anecdotal evidence from staff queries to Workforce & OD colleagues, feedback from the summer pulse survey and on-going feedback from exit interviews.

## CONCLUSION & NEXT STEPS

25. The results of the staff survey are disappointing. They describe a feel in the organisation where there is still a lot to do to make every member of staff feel valued and to have the best possible working environment. Whilst the results are an important barometer for the organisation, we are cognisant of other sources of feedback, which in some cases describe a different, more positive feel. Triangulating the staff survey with feedback we get from staff on a day to day basis, from the CEO Sounding Board, the interactive discussion Wall, the previous & future pulse surveys, reflections from the CQC inspection, and data from exit interviews is a start to understanding the whole picture.

26. It is critical that we support directorates in understanding the issues that the staff survey raises, and with the hot spot areas in particular that we support and enable them to develop a robust local improvement plan. Further thought needs to be given to a mechanism for assurance that local plans are in place and are having a positive impact.

27. It is also noted that the formal staff experience & culture programme had only been operational for some 4 months before we started the 2013 staff survey process, and that it will take time to see the positive impact of this work. This programme will continue to be the formal mechanism with which the Trust will design the priorities for 2014/15 and deliverables around the 4 existing workstreams and an additional workstream on training, development and career pathways.

**Louise McKenzie,**
**Director of Workforce Transformation**

[1] Collated by Picker Europe on our behalf and remain anonymous.

# 2013 National NHS staff survey

# Brief summary of results from Ashford and St Peter's Hospitals NHS Foundation Trust

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## 1. Introduction to this report

This report presents the findings of the 2013 national NHS staff survey conducted in Ashford and St Peter's Hospitals NHS Foundation Trust.

In section 2 of this report, we present an overall indicator of staff engagement. Full details of how this indicator was created can be found in the document ***Making sense of your staff survey data***, which can be downloaded from www.nhsstaffsurveys.com.

In sections 3 and 4 of this report, the findings of the questionnaire have been summarised and presented in the form of 28 Key Findings.

These sections of the report have been structured around 4 of the seven pledges to staff in the NHS Constitution which was published in March 2013 (http://www.nhs.uk/choiceintheNHS/Rightsandpledges/NHSConstitution) plus two additional themes:

- Staff Pledge 1: To provide all staff with clear roles and responsibilities and rewarding jobs for teams and individuals that make a difference to patients, their families and carers and communities.

- Staff Pledge 2: To provide all staff with personal development, access to appropriate education and training for their jobs, and line management support to enable them to fulfil their potential.

- Staff Pledge 3: To provide support and opportunities for staff to maintain their health, well-being and safety.

- Staff Pledge 4: To engage staff in decisions that affect them and the services they provide, individually, through representative organisations and through local partnership working arrangements. All staff will be empowered to put forward ways to deliver better and safer services for patients and their families.

- Additional theme: Staff satisfaction

- Additional theme: Equality and diversity

Please note that the NHS pledges were amended in 2013, however the report has been structured around 4 of the pledges which have been maintained since 2009. For more information regarding this please see the “Making Sense of Your Staff Survey Data” document.

As in previous years, there are two types of Key Finding:

- percentage scores, i.e. percentage of staff giving a particular response to one, or a series of, survey questions

- scale summary scores, calculated by converting staff responses to particular questions into scores. For each of these scale summary scores, the minimum score is always 1 and the maximum score is 5

A longer and more detailed report of the 2013 survey results for Ashford and St Peter's Hospitals NHS Foundation Trust can be downloaded from: www.nhsstaffsurveys.com. This report provides detailed breakdowns of the Key Finding scores by directorate, occupational groups and demographic groups, and details of each question included in the core questionnaire.

## Your Organisation

The scores presented below are un-weighted question level scores for questions Q12a - 12d and the weighted score for Key Finding 24. The percentages for Q12a – Q12d are created by combining the responses for those who “Agree” and “Strongly Agree” compared to the total number of staff that responded to the question.

The Q12d score is related to CQUIN payments for Acute trusts participating in the National NHS Staff Survey. 2013/2014 guidance on CQUIN payments can be found via the following link https://www.supply2health.nhs.uk/eContracts/Documents/cquin-guidance.pdf.

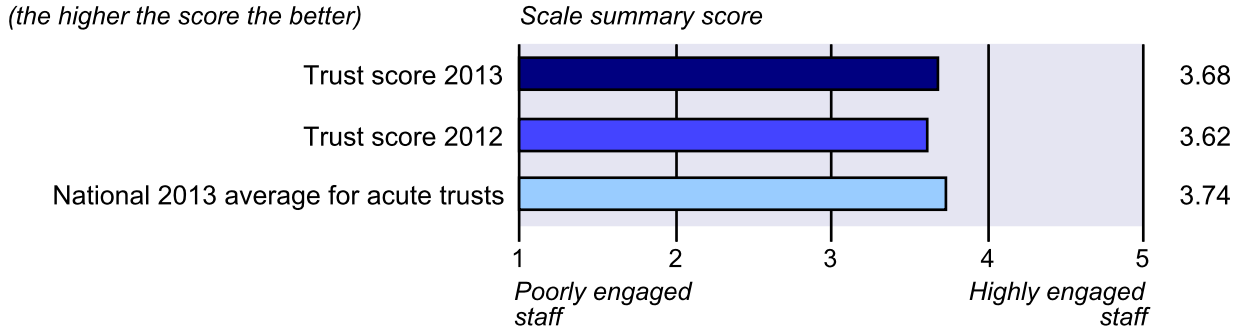
Q12a, Q12c and Q12d feed into Key Finding 24 “Staff recommendation of the trust as a place to work or receive treatment”.

| | | Your Trust in 2013 | Average (median) for acute trusts | Your Trust in 2012 |
|---|---|---|---|---|
| Q12a | "Care of patients / service users is my organisation's top priority" | 68 | 68 | 61 |
| Q12b | "My organisation acts on concerns raised by patients / service users" | 68 | 71 | 62 |
| Q12c | "I would recommend my organisation as a place to work" | 54 | 59 | 48 |
| Q12d | "If a friend or relative needed treatment, I would be happy with the standard of care provided by this organisation" | 62 | 64 | 54 |
| KF24. | Staff recommendation of the trust as a place to work or receive treatment (Q12a, 12c-d) | 3.61 | 3.68 | 3.43 |

## 2. Overall indicator of staff engagement for Ashford and St Peter's Hospitals NHS Foundation Trust

The figure below shows how Ashford and St Peter's Hospitals NHS Foundation Trust compares with other acute trusts on an overall indicator of staff engagement. Possible scores range from 1 to 5, with 1 indicating that staff are poorly engaged (with their work, their team and their trust) and 5 indicating that staff are highly engaged. The trust's score of 3.68 was below (worse than) average when compared with trusts of a similar type.

### OVERALL STAFF ENGAGEMENT




This overall indicator of staff engagement has been calculated using the questions that make up Key Findings 22, 24 and 25. These Key Findings relate to the following aspects of staff engagement: staff members' perceived ability to contribute to improvements at work (Key Finding 22); their willingness to recommend the trust as a place to work or receive treatment (Key Finding 24); and the extent to which they feel motivated and engaged with their work (Key Finding 25).

The table below shows how Ashford and St Peter's Hospitals NHS Foundation Trust compares with other acute trusts on each of the sub-dimensions of staff engagement, and whether there has been a change since the 2012 survey.

| | Change since 2012 survey | Ranking, compared with all acute trusts |
|---|---|---|
| **OVERALL STAFF ENGAGEMENT** | • No change | ! Below (worse than) average |
| **KF22. Staff ability to contribute towards improvements at work** *(the extent to which staff are able to make suggestions to improve the work of their team, have frequent opportunities to show initiative in their role, and are able to make improvements at work.)* | • No change | ! Below (worse than) average |
| **KF24. Staff recommendation of the trust as a place to work or receive treatment** *(the extent to which staff think care of patients/service users is the Trust's top priority, would recommend their Trust to others as a place to work, and would be happy with the standard of care provided by the Trust if a friend or relative needed treatment.)* | ✓ Increase (better than 12) | ! Below (worse than) average |
| **KF25. Staff motivation at work** *(the extent to which they look forward to going to work, and are enthusiastic about and absorbed in their jobs.)* | • No change | • Average |

Full details of how the overall indicator of staff engagement was created can be found in the document ***Making sense of your staff survey data***.

## 3. Summary of 2013 Key Findings for Ashford and St Peter's Hospitals NHS Foundation Trust

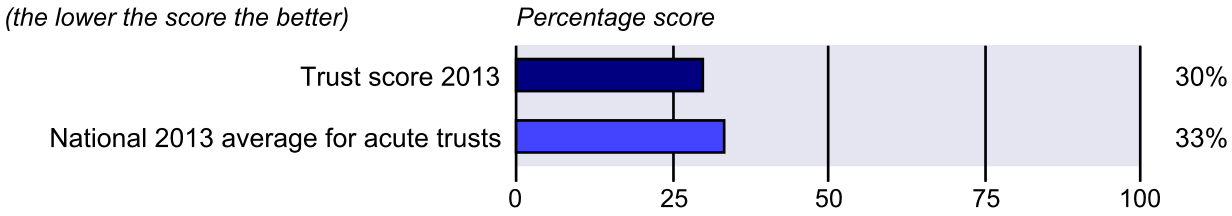
### 3.1 Top and Bottom Ranking Scores

This page highlights the five Key Findings for which Ashford and St Peter's Hospitals NHS Foundation Trust compares most favourably with other acute trusts in England.

**TOP FIVE RANKING SCORES**

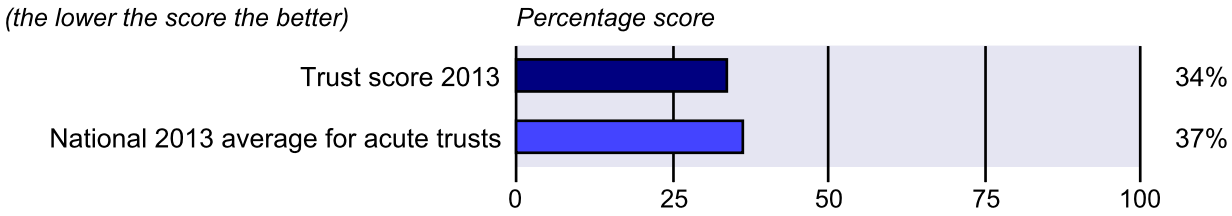
**✓KF13. Percentage of staff witnessing potentially harmful errors, near misses or incidents in last month**

*(the lower the score the better)*



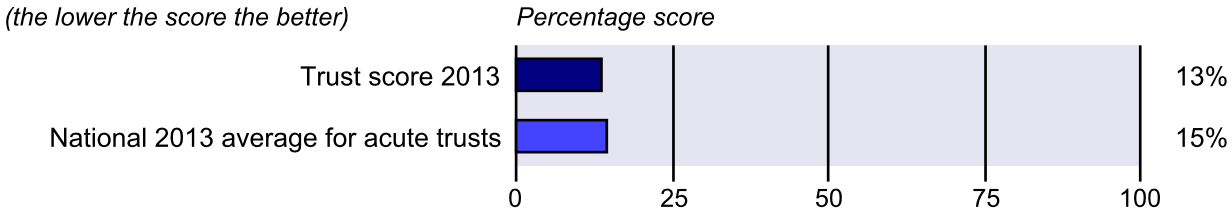

**✓KF11. Percentage of staff suffering work-related stress in last 12 months**

*(the lower the score the better)*



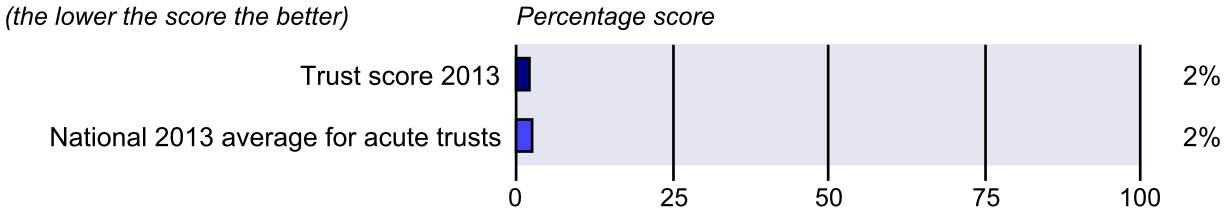

**✓KF16. Percentage of staff experiencing physical violence from patients, relatives or the public in last 12 months**

*(the lower the score the better)*



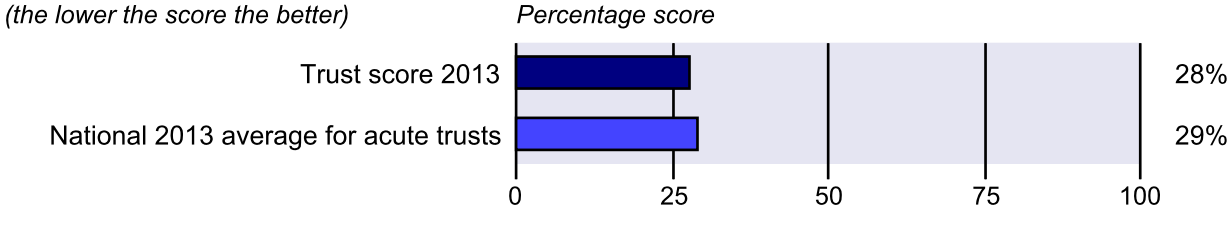

**✓KF17. Percentage of staff experiencing physical violence from staff in last 12 months**

*(the lower the score the better)*




**✓KF18. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months**

*(the lower the score the better)*

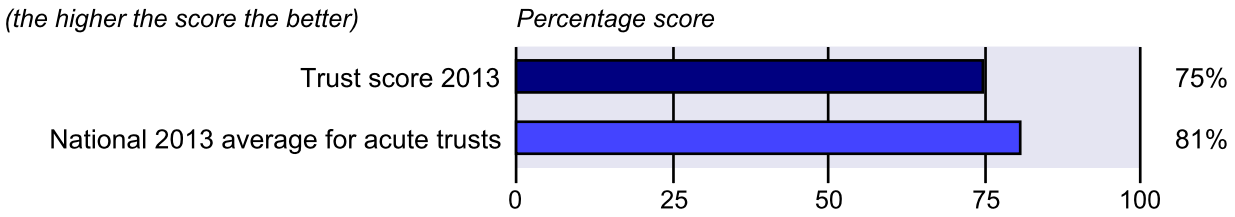


This page highlights the five Key Findings for which Ashford and St Peter's Hospitals NHS Foundation Trust compares least favourably with other acute trusts in England. It is suggested that these areas might be seen as a starting point for local action to improve as an employer.

## BOTTOM FIVE RANKING SCORES

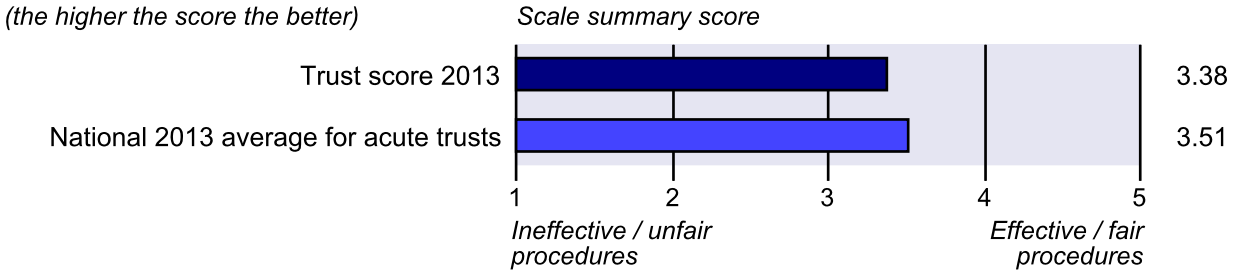
### ! KF6. Percentage of staff receiving job-relevant training, learning or development in last 12 months

*(the higher the score the better)*



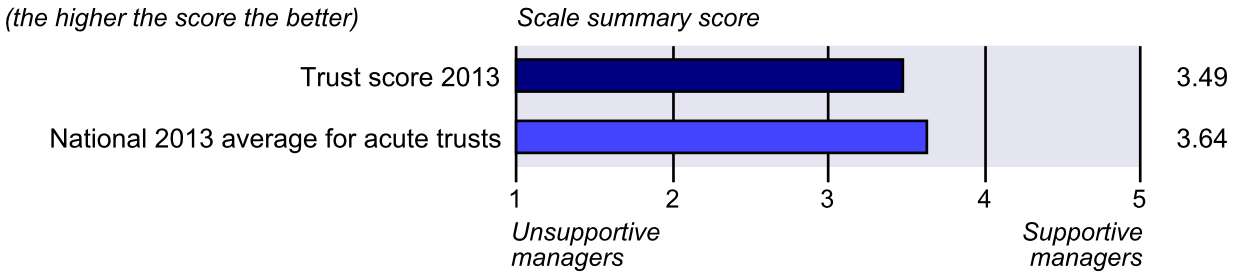

### ! KF15. Fairness and effectiveness of incident reporting procedures

*(the higher the score the better)*



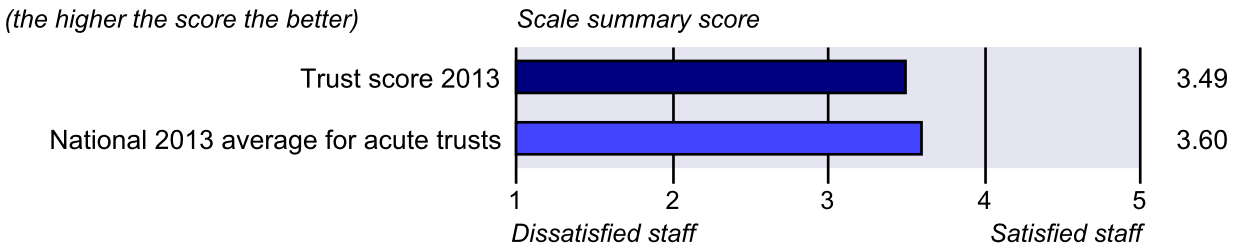

### ! KF9. Support from immediate managers

*(the higher the score the better)*



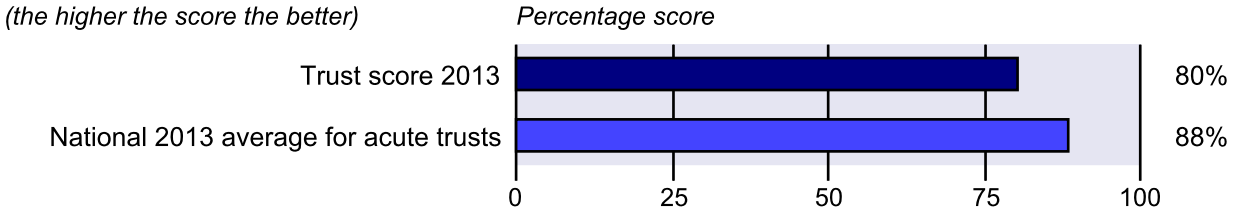

### ! KF23. Staff job satisfaction

*(the higher the score the better)*




### ! KF27. Percentage of staff believing the trust provides equal opportunities for career progression or promotion

*(the higher the score the better)*



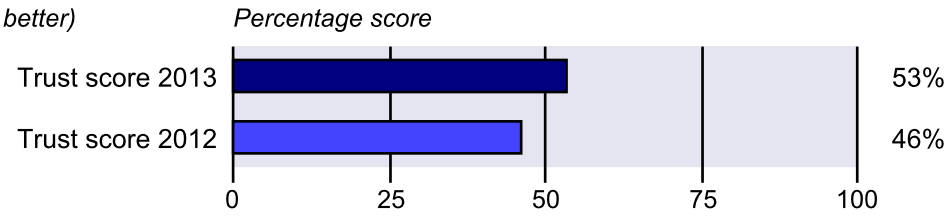
## 3.2 Largest Local Changes since the 2012 Survey

This page highlights the two Key Findings where staff experiences have improved at Ashford and St Peter's Hospitals NHS Foundation Trust since the 2012 survey. (This is a positive local result. However, please note that, as shown in section 3.3, when compared with other acute trusts in England, the scores for Key findings KF12, and KF24 are worse than average).

### WHERE STAFF EXPERIENCE HAS IMPROVED

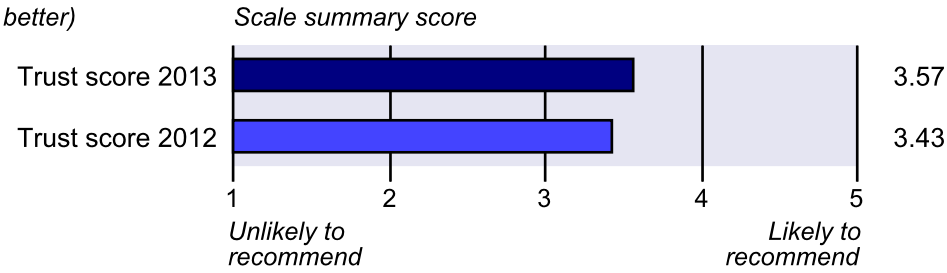
**✓ KF12. Percentage of staff saying hand washing materials are always available**

*(the higher the score the better)*




**✓ KF24. Staff recommendation of the trust as a place to work or receive treatment**

*(the higher the score the better)*

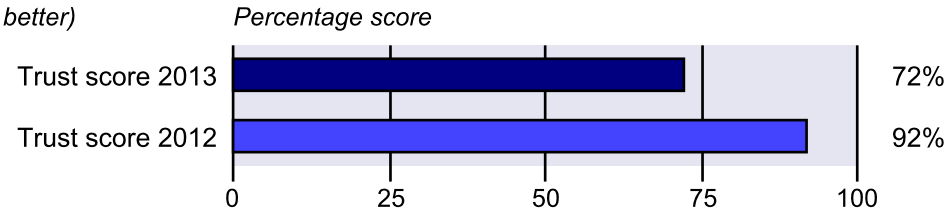


This page highlights the two Key Findings where staff experiences have deteriorated since the 2012 survey. It is suggested that these areas might be seen as a starting point for local action to improve as an employer.

## WHERE STAFF EXPERIENCE HAS DETERIORATED

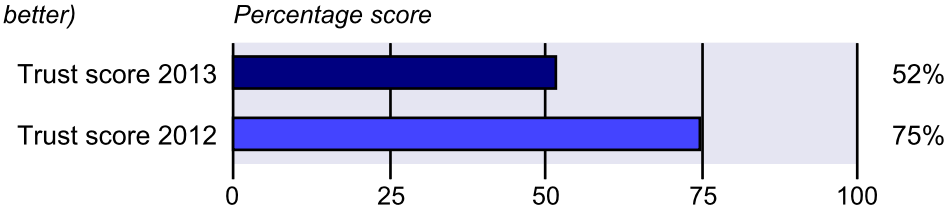
### ! KF10. Percentage of staff receiving health and safety training in last 12 months

*(the higher the score the better)*




### ! KF26. Percentage of staff having equality and diversity training in last 12 months

*(the higher the score the better)*



## 3.3. Summary of all Key Findings for Ashford and St Peter's Hospitals NHS Foundation Trust

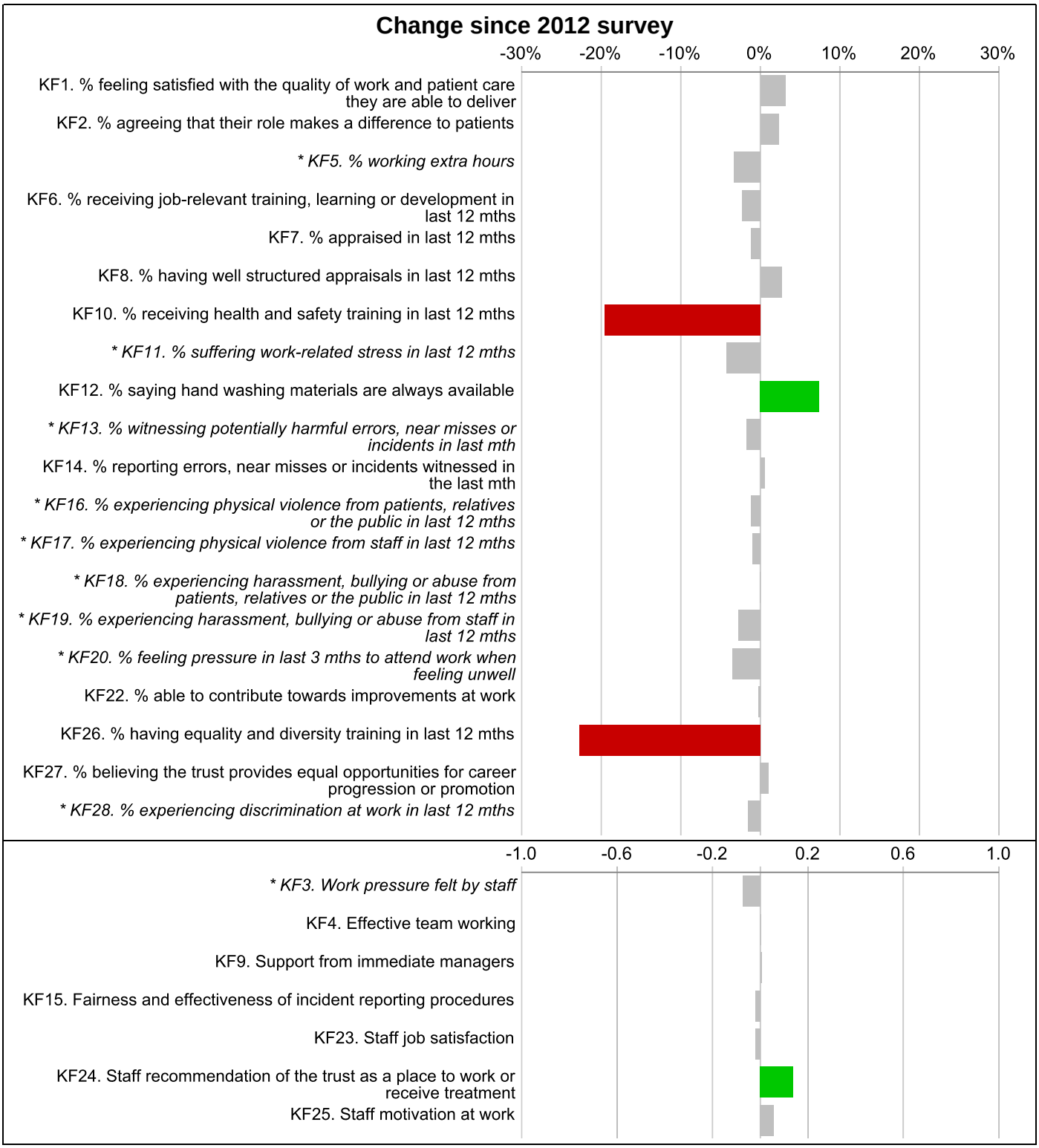
KEY

Green = Positive finding, e.g. there has been a statistically significant positive change in the Key Finding since the 2012 survey.

Red = Negative finding, e.g. there has been a statistically significant negative change in the Key Finding since the 2012 survey.

Grey = No change, e.g. there has been no statistically significant change in this Key Finding since the 2012 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 asterix and in *italics*, the lower the score the better.



## 3.3. Summary of all Key Findings for Ashford and St Peter's Hospitals NHS Foundation Trust

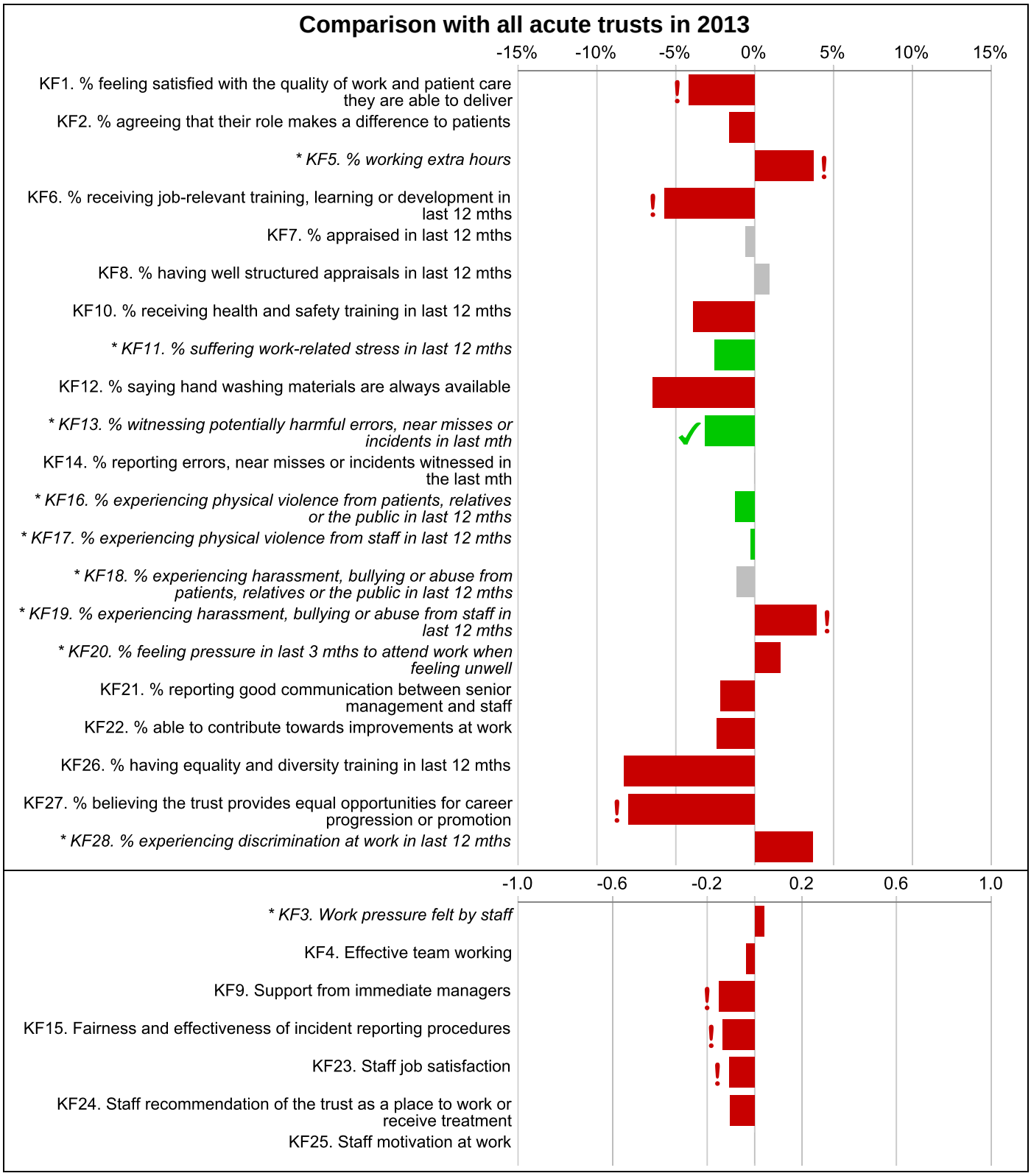
KEY

Green = Positive finding, e.g. better than average. If a ✓ is shown the score is in the best 20% of acute trusts

Red = Negative finding, e.g. worse than avearge. If a ! is shown the score is in the worst 20% of acute trusts.

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 asterix and in *italics*, the lower the score the better.



## 3.4. Summary of all Key Findings for Ashford and St Peter's Hospitals NHS Foundation Trust

KEY

✓ Green = Positive finding, e.g. in the best 20% of acute trusts, better than average, better than 2012.

! Red = Negative finding, e.g. in the worst 20% of acute trusts, worse than average, worse than 2012.

'Change since 2012 survey' indicates whether there has been a statistically significant change in the Key Finding since the 2012 survey.

-- Because of changes to the format of the survey questions this year, comparisons with the 2012 score are not possible.

* 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 asterix and in *italics*, the lower the score the better.

| | Change since 2012 survey | Ranking, compared with all acute trusts in 2013 |
|---|---|---|
| **STAFF PLEDGE 1: To provide all staff with clear roles, responsibilities and rewarding jobs.** | | |
| KF1. % feeling satisfied with the quality of work and patient care they are able to deliver | • No change | ! Lowest (worst) 20% |
| KF2. % agreeing that their role makes a difference to patients | • No change | ! Below (worse than) average |
| * *KF3. Work pressure felt by staff* | • No change | ! Above (worse than) average |
| KF4. Effective team working | • No change | ! Below (worse than) average |
| * *KF5. % working extra hours* | • No change | ! Highest (worst) 20% |
| **STAFF PLEDGE 2: To provide all staff with personal development, access to appropriate education and training for their jobs, and line management support to enable them to fulfil their potential.** | | |
| KF6. % receiving job-relevant training, learning or development in last 12 mths | • No change | ! Lowest (worst) 20% |
| KF7. % appraised in last 12 mths | • No change | • Average |
| KF8. % having well structured appraisals in last 12 mths | • No change | • Average |
| KF9. Support from immediate managers | • No change | ! Lowest (worst) 20% |
| **STAFF PLEDGE 3: To provide support and opportunities for staff to maintain their health, well-being and safety.** | | |
| **Occupational health and safety** | | |
| KF10. % receiving health and safety training in last 12 mths | ! Decrease (worse than 12) | ! Below (worse than) average |
| * *KF11. % suffering work-related stress in last 12 mths* | • No change | ✓ Below (better than) average |
| **Infection control and hygiene** | | |
| KF12. % saying hand washing materials are always available | ✓ Increase (better than 12) | ! Below (worse than) average |
| **Errors and incidents** | | |
| * *KF13. % witnessing potentially harmful errors, near misses or incidents in last mth* | • No change | ✓ Lowest (best) 20% |
| KF14. % reporting errors, near misses or incidents witnessed in the last mth | • No change | • Average |
| KF15. Fairness and effectiveness of incident reporting procedures | • No change | ! Lowest (worst) 20% |

## 3.4. Summary of all Key Findings for Ashford and St Peter's Hospitals NHS Foundation Trust (cont)

| | Change since 2012 survey | Ranking, compared with all acute trusts in 2013 |
|---|---|---|
| **Violence and harassment** | | |
| * *KF16. % experiencing physical violence from patients, relatives or the public in last 12 mths* | • No change | ✓ Below (better than) average |
| * *KF17. % experiencing physical violence from staff in last 12 mths* | • No change | ✓ Below (better than) average |
| * *KF18. % experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 mths* | • No change | • Average |
| * *KF19. % experiencing harassment, bullying or abuse from staff in last 12 mths* | • No change | ! Highest (worst) 20% |
| **Health and well-being** | | |
| * *KF20. % feeling pressure in last 3 mths to attend work when feeling unwell* | • No change | ! Above (worse than) average |
| **STAFF PLEDGE 4: To engage staff in decisions that affect them, the services they provide and empower them to put forward ways to deliver better and safer services.** | | |
| KF21. % reporting good communication between senior management and staff | -- | ! Below (worse than) average |
| KF22. % able to contribute towards improvements at work | • No change | ! Below (worse than) average |
| **ADDITIONAL THEME: Staff satisfaction** | | |
| KF23. Staff job satisfaction | • No change | ! Lowest (worst) 20% |
| KF24. Staff recommendation of the trust as a place to work or receive treatment | ✓ Increase (better than 12) | ! Below (worse than) average |
| KF25. Staff motivation at work | • No change | • Average |
| **ADDITIONAL THEME: Equality and diversity** | | |
| KF26. % having equality and diversity training in last 12 mths | ! Decrease (worse than 12) | ! Below (worse than) average |
| KF27. % believing the trust provides equal opportunities for career progression or promotion | • No change | ! Lowest (worst) 20% |
| * *KF28. % experiencing discrimination at work in last 12 mths* | • No change | ! Above (worse than) average |

## 4. Key Findings for Ashford and St Peter's Hospitals NHS Foundation Trust

1259 staff at Ashford and St Peter's Hospitals NHS Foundation Trust took part in this survey. This is a response rate of 43%[1] which is below average for acute trusts in England, and compares with a response rate of 51% in this trust in the 2012 survey.

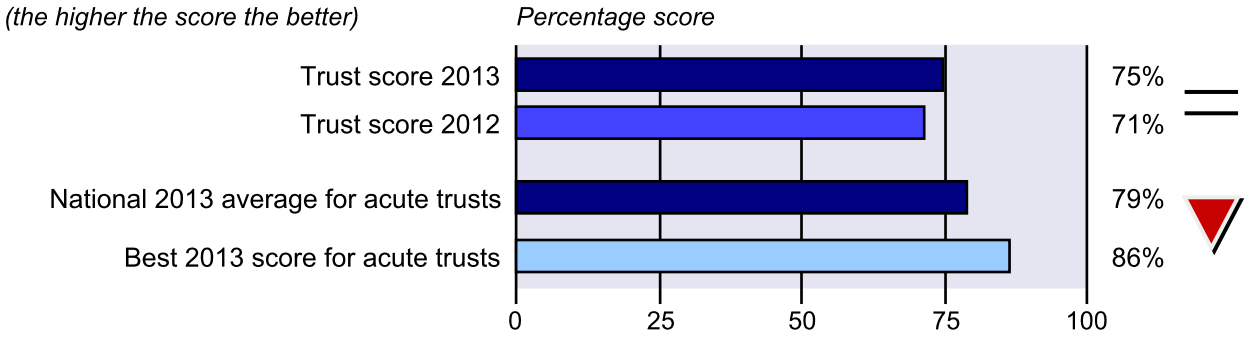
This section presents each of the 28 Key Findings, using data from the trust's 2013 survey, and compares these to other acute trusts in England and to the trust's performance in the 2012 survey. The findings are arranged under six headings – the four staff pledges from the NHS Constitution, and the two additional themes of staff satisfaction and equality and diversity.

Positive findings are indicated with a green arrow (e.g. where the trust is in the best 20% of trusts, or where the score has improved since 2012). Negative findings are highlighted with a red arrow (e.g. where the trust's score is in the worst 20% of trusts, or where the score is not as good as 2012). An equals sign indicates that there has been no change.

### STAFF PLEDGE 1: To provide all staff with clear roles, responsibilities and rewarding jobs.

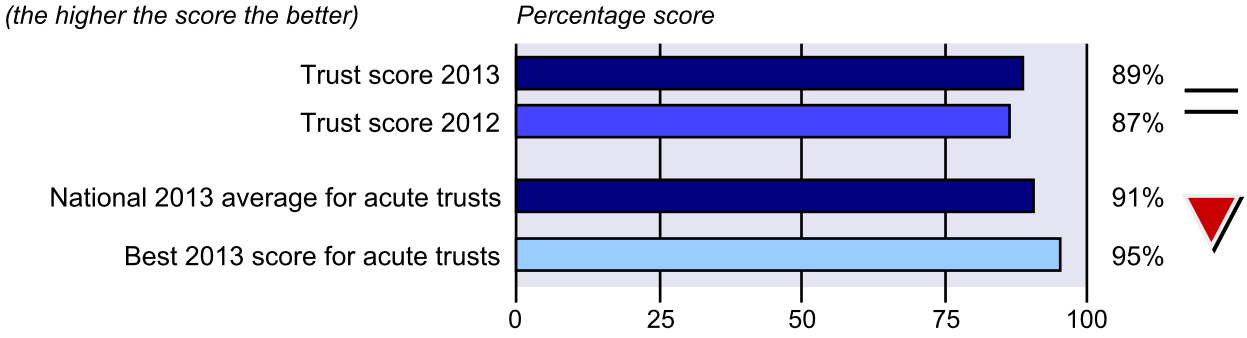
#### KEY FINDING 1. Percentage of staff feeling satisfied with the quality of work and patient care they are able to deliver

*(the higher the score the better)*




#### KEY FINDING 2. Percentage of staff agreeing that their role makes a difference to patients

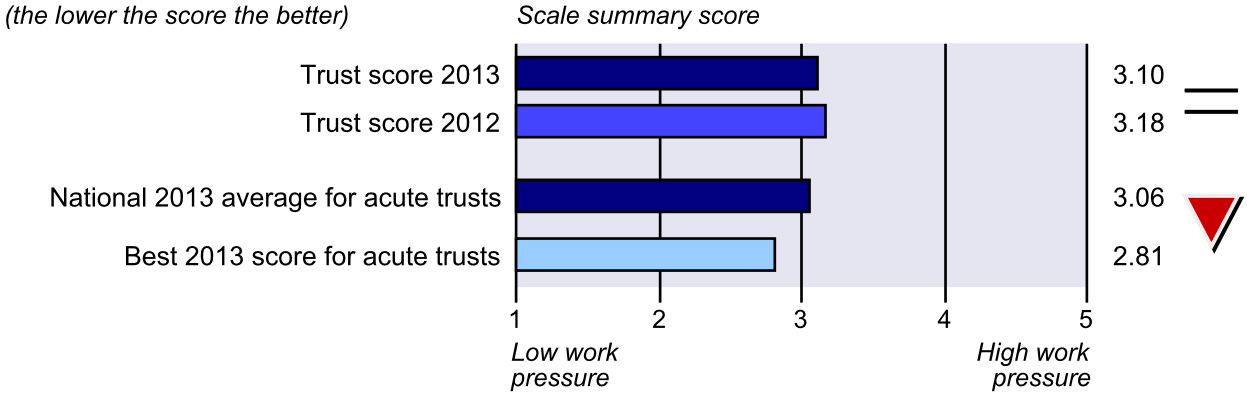
*(the higher the score the better)*




[1]Questionnaires were sent to all 2895 staff eligible to receive the survey. This includes only staff employed directly by the trust (i.e. excluding staff working for external contractors). It excludes bank staff unless they are also employed directly elsewhere in the trust. When calculating the response rate, questionnaires could only be counted if they were received with their ID number intact, by the closing date.

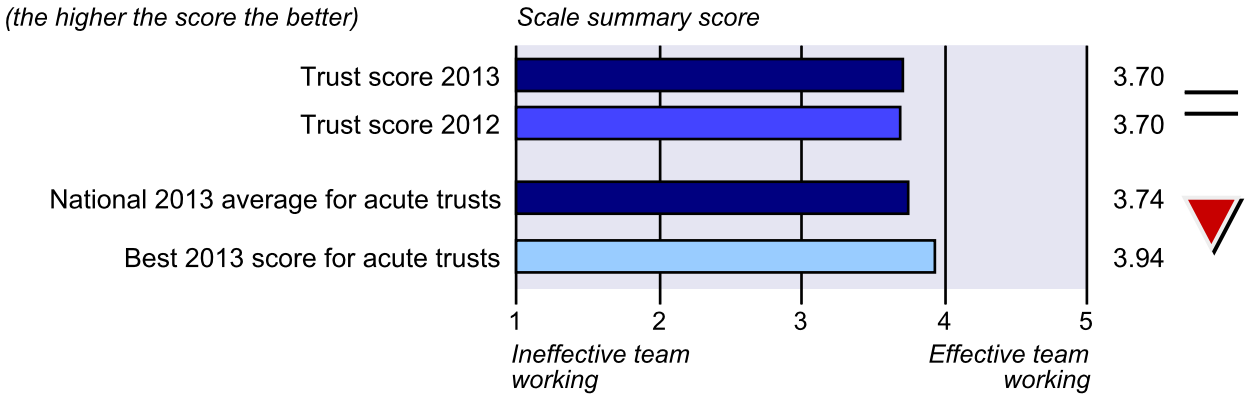
## KEY FINDING 3. Work pressure felt by staff

*(the lower the score the better)*



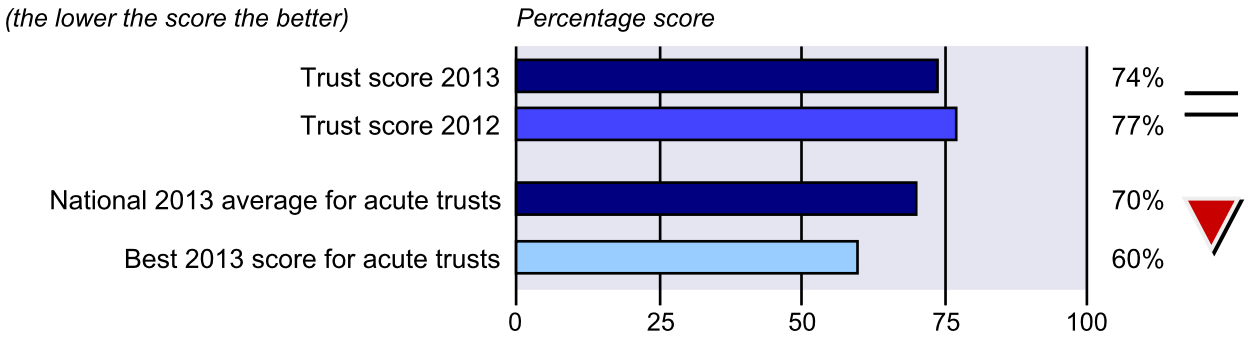

## KEY FINDING 4. Effective team working

*(the higher the score the better)*




## KEY FINDING 5. Percentage of staff working extra hours

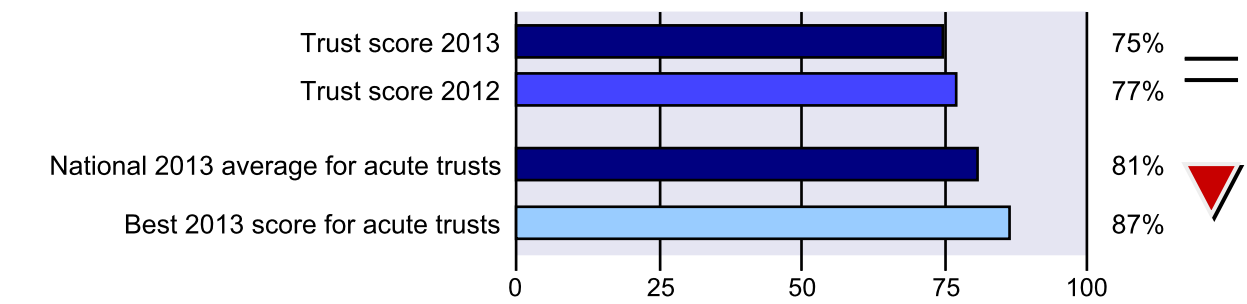
*(the lower the score the better)*




**STAFF PLEDGE 2: To provide all staff with personal development, access to appropriate education and training for their jobs, and line management support to enable them to fulfil their potential.**

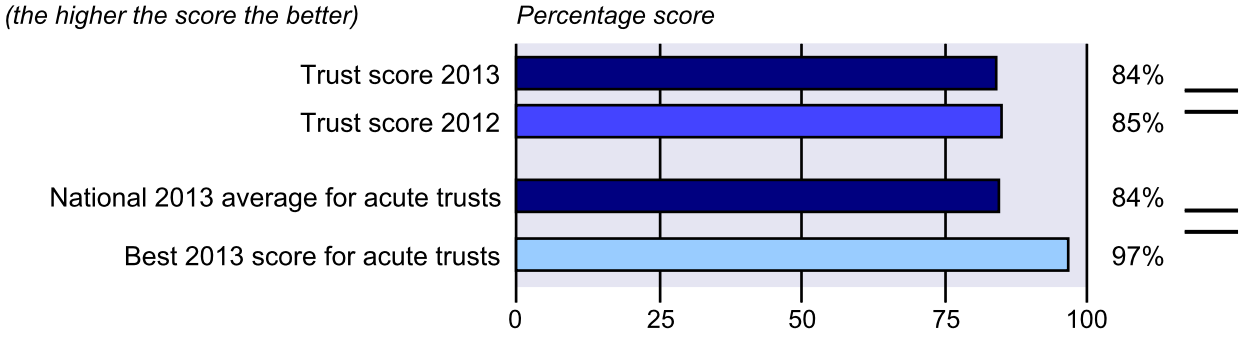
## KEY FINDING 6. Percentage of staff receiving job-relevant training, learning or development in last 12 months

*(the higher the score the better)*



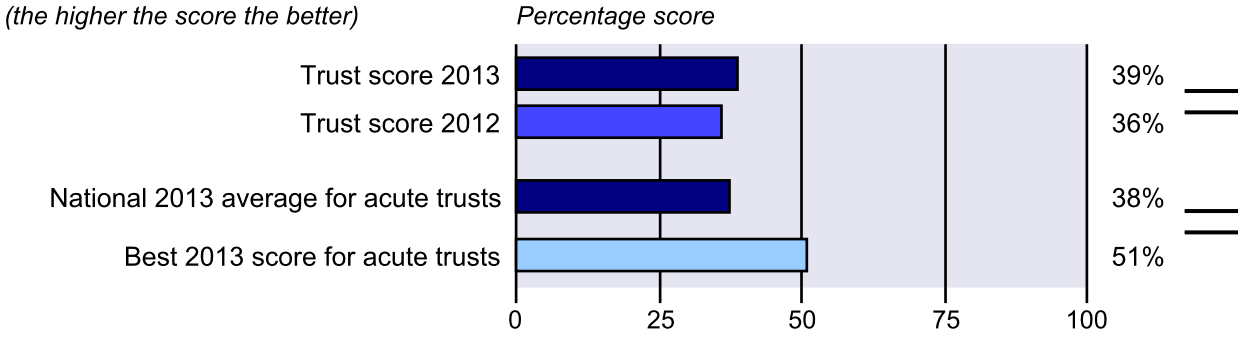
### KEY FINDING 7. Percentage of staff appraised in last 12 months

*(the higher the score the better)*



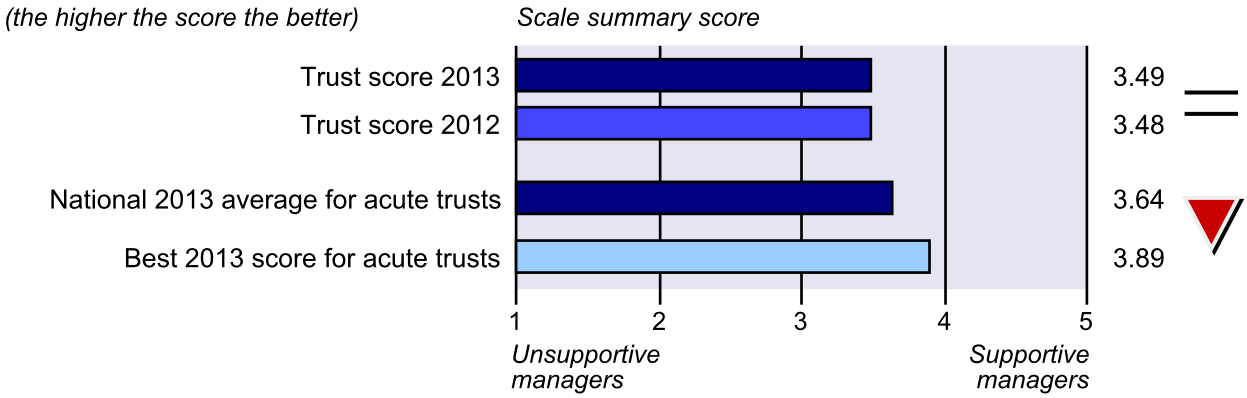

### KEY FINDING 8. Percentage of staff having well structured appraisals in last 12 months

*(the higher the score the better)*




### KEY FINDING 9. Support from immediate managers

*(the higher the score the better)*

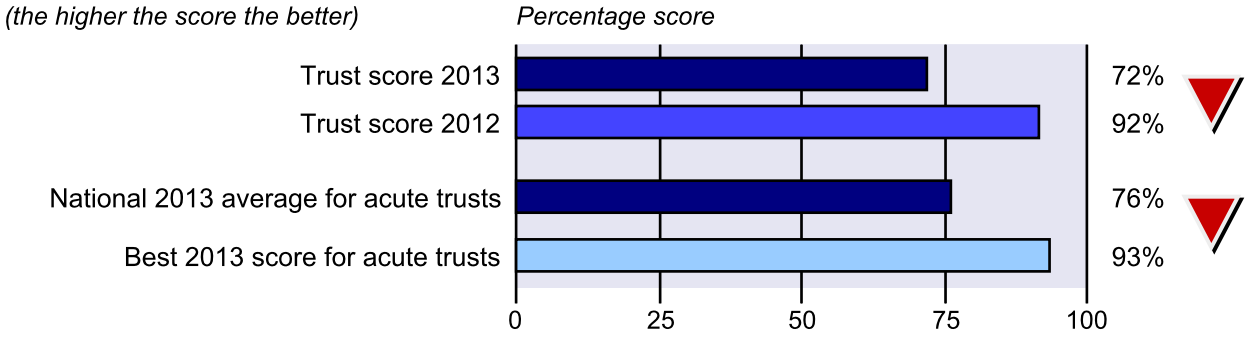



## STAFF PLEDGE 3: To provide support and opportunities for staff to maintain their health, well-being and safety.

## Occupational health and safety

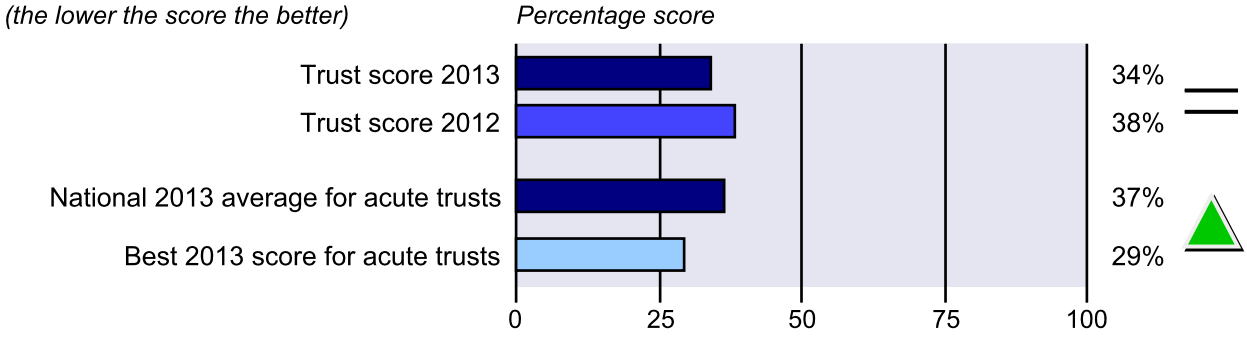
### KEY FINDING 10. Percentage of staff receiving health and safety training in last 12 months

*(the higher the score the better)*



### KEY FINDING 11. Percentage of staff suffering work-related stress in last 12 months

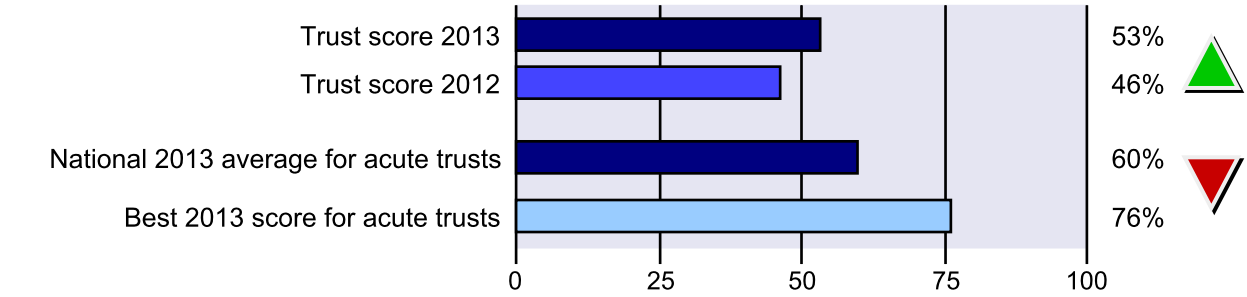
*(the lower the score the better)*




## Infection control and hygiene

### KEY FINDING 12. Percentage of staff saying hand washing materials are always available

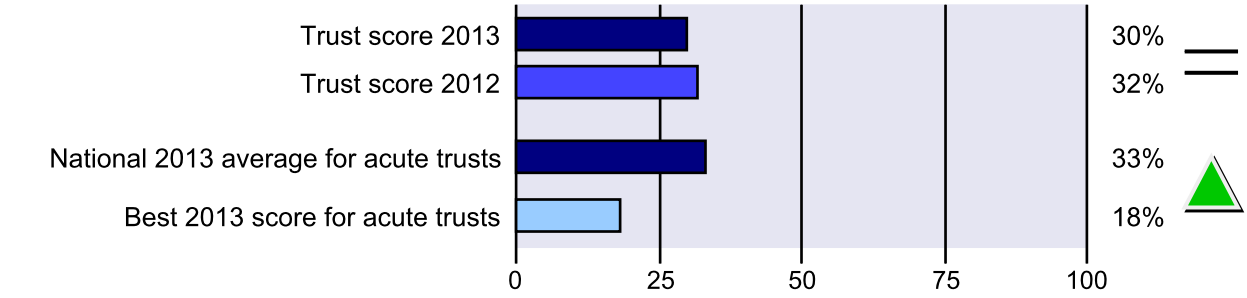
*(the higher the score the better)*




## Errors and incidents

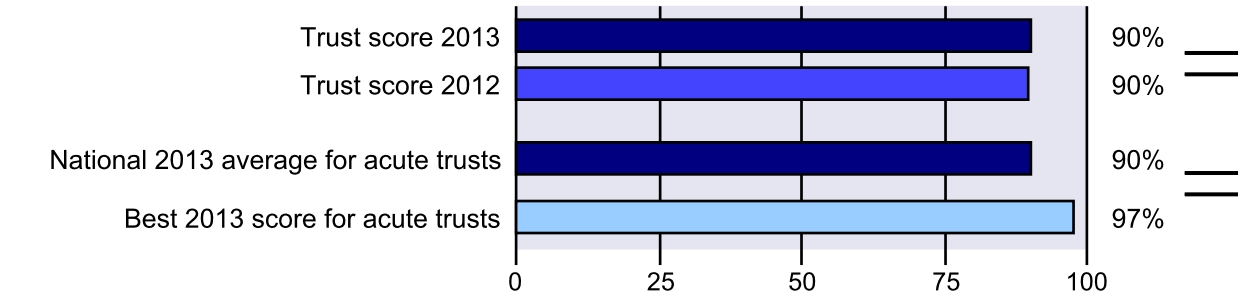
### KEY FINDING 13. Percentage of staff witnessing potentially harmful errors, near misses or incidents in last month

*(the lower the score the better)*



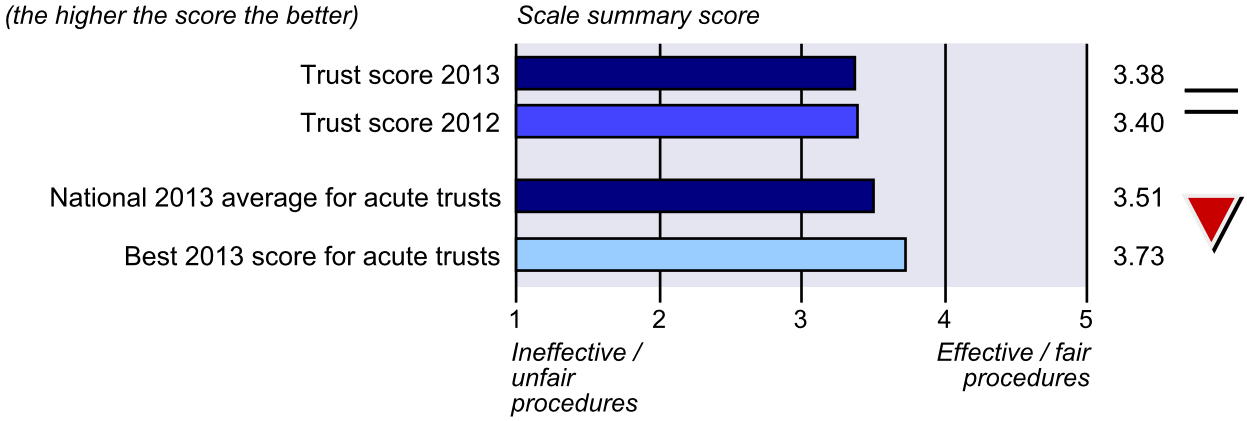

### KEY FINDING 14. Percentage of staff reporting errors, near misses or incidents witnessed in the last month

*(the higher the score the better)*



### KEY FINDING 15. Fairness and effectiveness of incident reporting procedures

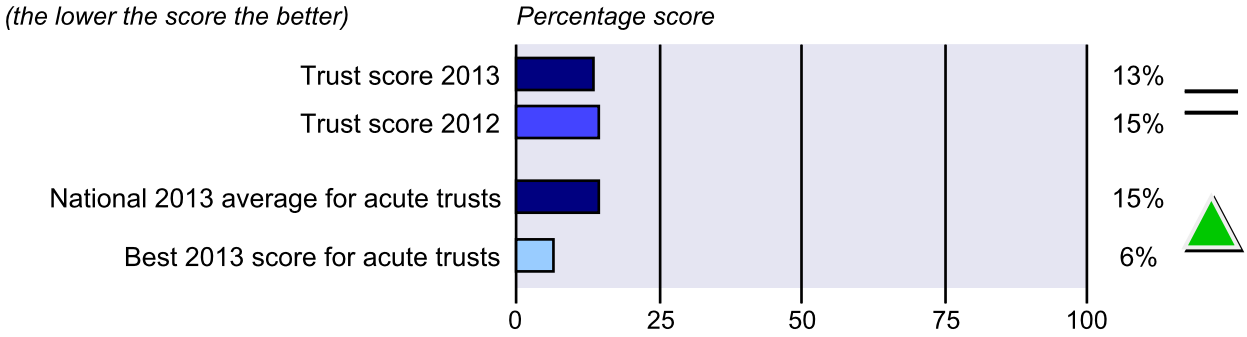
*(the higher the score the better)*




## Violence and harassment

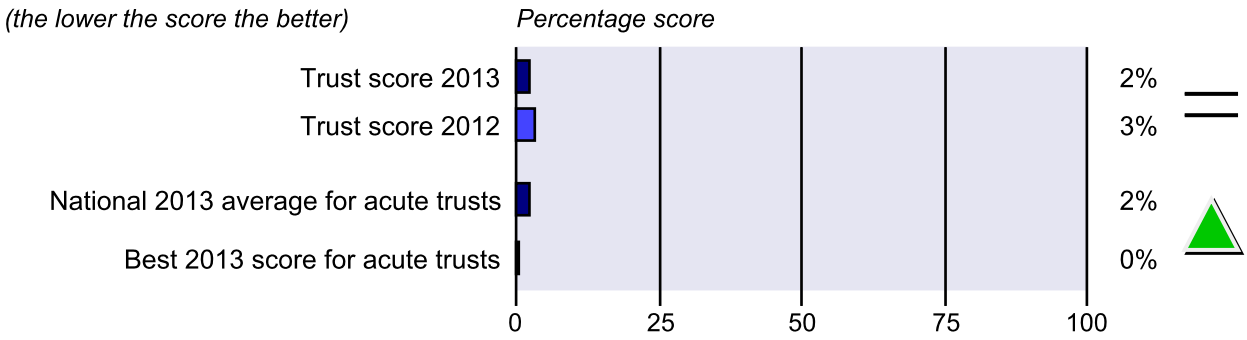
### KEY FINDING 16. Percentage of staff experiencing physical violence from patients, relatives or the public in last 12 months

*(the lower the score the better)*



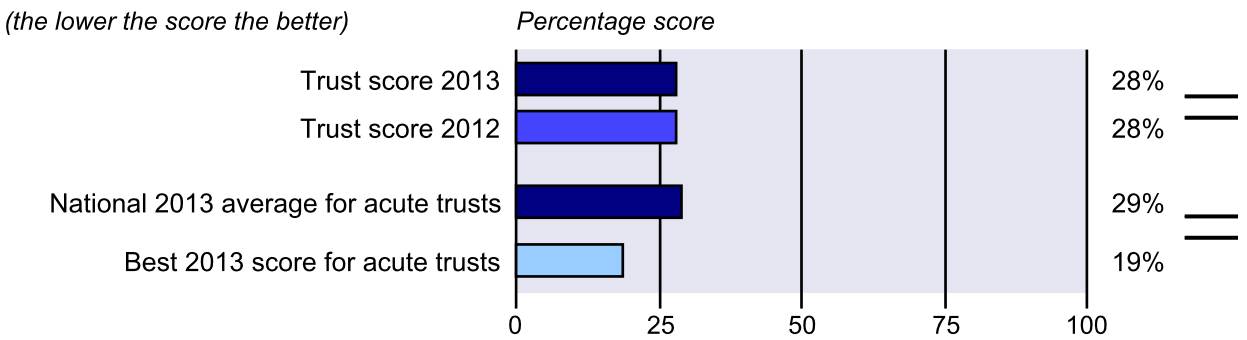

### KEY FINDING 17. Percentage of staff experiencing physical violence from staff in last 12 months

*(the lower the score the better)*



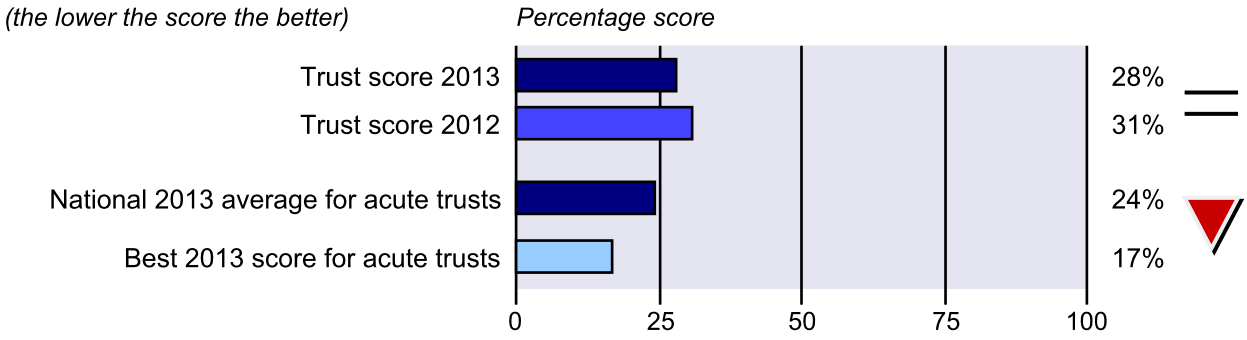

### KEY FINDING 18. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

*(the lower the score the better)*



### KEY FINDING 19. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months

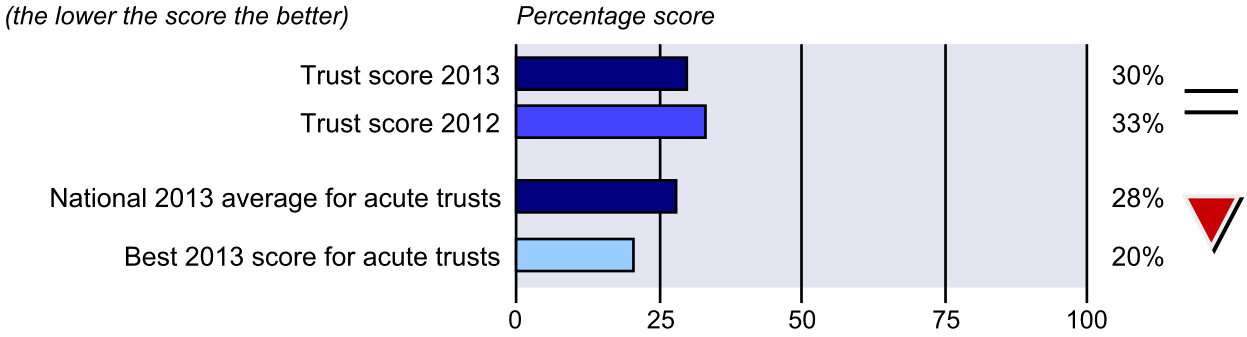
*(the lower the score the better)*




## Health and well-being

### KEY FINDING 20. Percentage of staff feeling pressure in last 3 months to attend work when feeling unwell

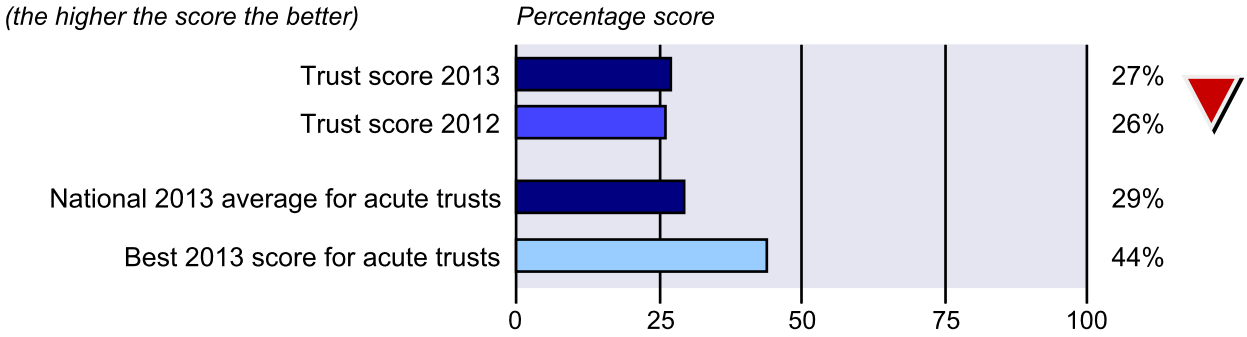
*(the lower the score the better)*




## STAFF PLEDGE 4: To engage staff in decisions that affect them, the services they provide and empower them to put forward ways to deliver better and safer services.

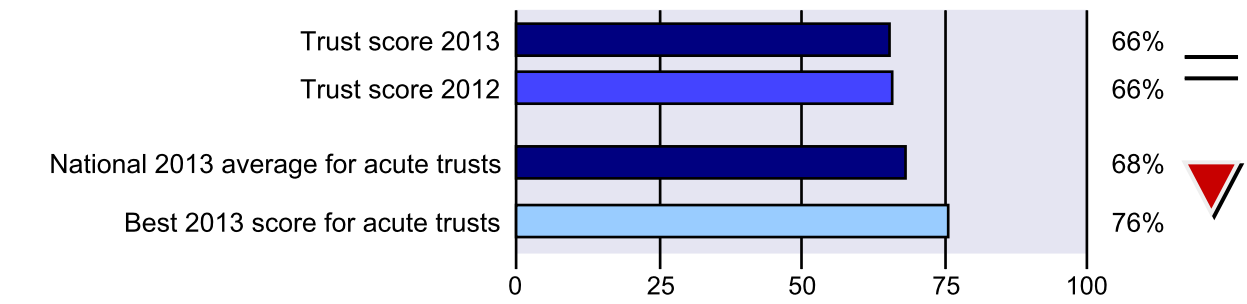
### KEY FINDING 21. Percentage of staff reporting good communication between senior management and staff

*(the higher the score the better)*




### KEY FINDING 22. Percentage of staff able to contribute towards improvements at work

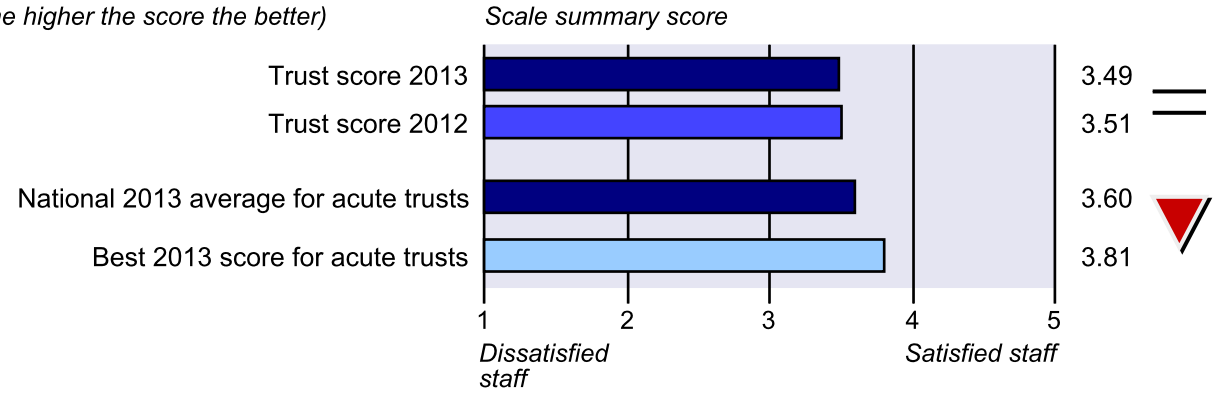
*(the higher the score the better)*



## ADDITIONAL THEME: Staff satisfaction

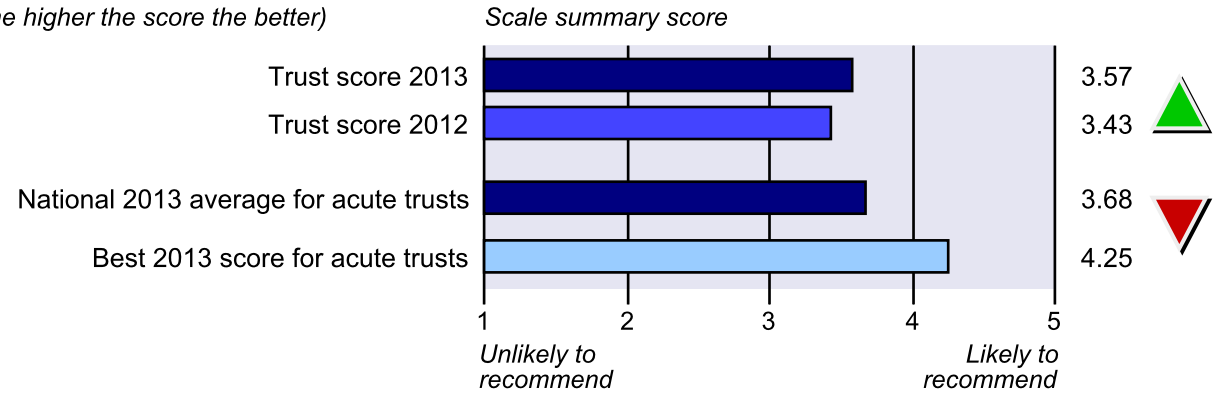
### KEY FINDING 23. Staff job satisfaction

*(the higher the score the better)*



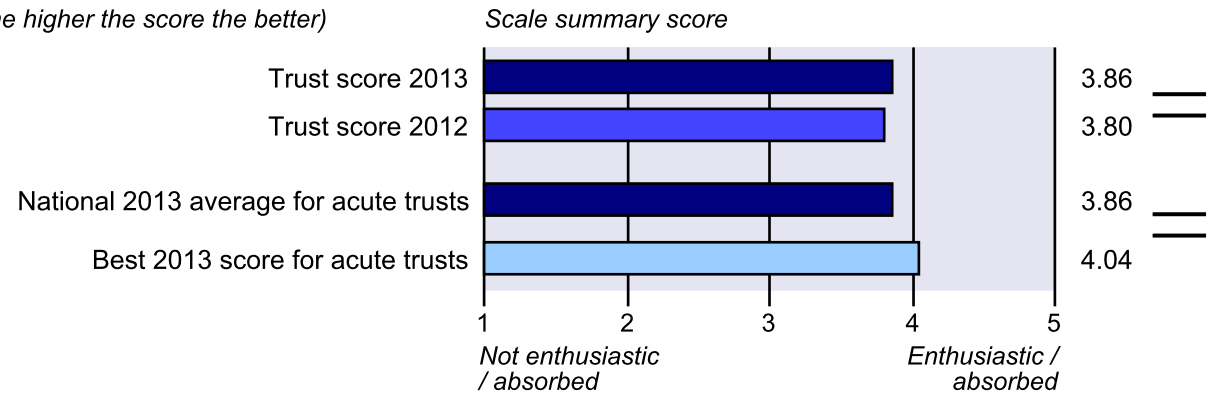

### KEY FINDING 24. Staff recommendation of the trust as a place to work or receive treatment

*(the higher the score the better)*




### KEY FINDING 25. Staff motivation at work

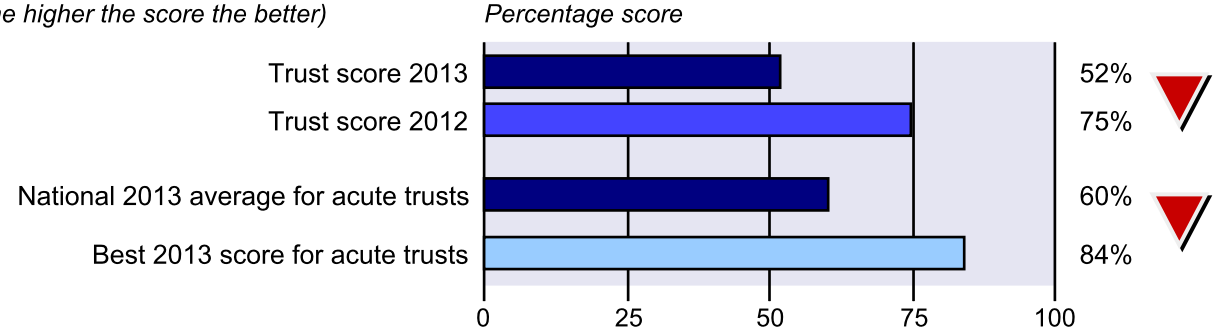
*(the higher the score the better)*




## ADDITIONAL THEME: Equality and diversity

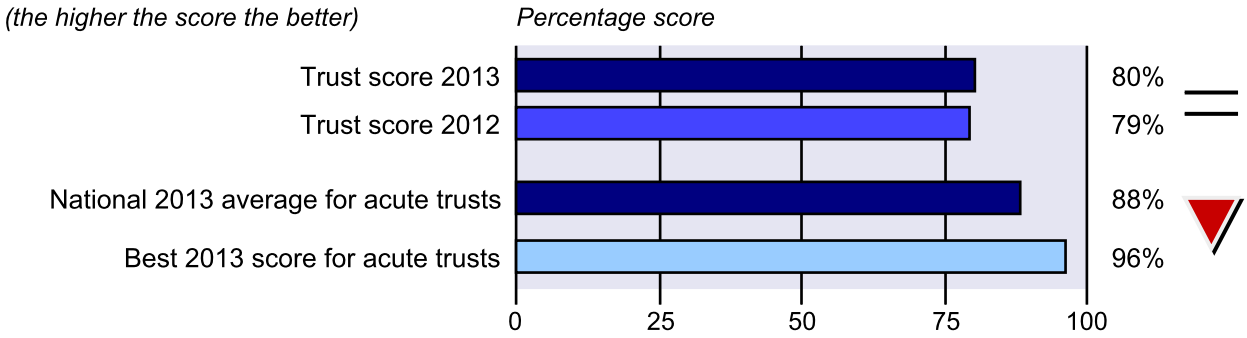
### KEY FINDING 26. Percentage of staff having equality and diversity training in last 12 months

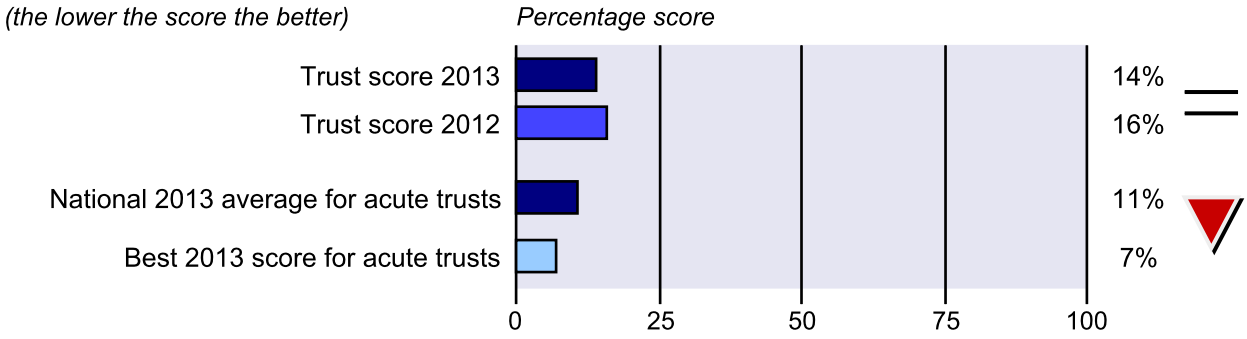
*(the higher the score the better)*



## KEY FINDING 27. Percentage of staff believing the trust provides equal opportunities for career progression or promotion

*(the higher the score the better)*




## KEY FINDING 28. Percentage of staff experiencing discrimination at work in last 12 months

*(the lower the score the better)*