

<b>Report to:</b>	Trust Board (Public)	<b>Agenda item:</b>	<b>SFT 4025</b>
<b>Date of Meeting:</b>	12 April 2018		

<b>Report Title:</b>	2017 Staff Survey Results			
<b>Status:</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
		X		
<b>Prepared by:</b>	Mark Geraghty, Head of Workforce Information and Planning Helen Cridland, Deputy Director of OD and People			
<b>Executive Sponsor (presenting):</b>	Paul Hargreaves, Director of OD and People			
<b>Appendices (list if applicable):</b>	Comparison of SFT staff survey results with STP NHS Trusts Staff Survey Summary 2015-2017 Staff Survey Communications Plan			

<b>Recommendation:</b>
It is recommended that the Trust Board note the staff survey results and the recommended next steps.

<b>Executive Summary:</b>
<p>This report provides the Trust Board with a detailed breakdown of the 2017 national NHS staff survey results for the Trust. It also provides some national, regional and STP context.</p> <p>The national picture for the 2017 NHS staff survey is best described as ‘challenging’ and shows a reversal of the last 4 year’s trend of key findings improving. The Trust ranked top out of 4 Trusts within the STP.</p> <p>The response rate improved significantly in 2017 (46%) and arguably provides more accurate results. The overall staff engagement score has decreased since the 2016 survey (in line with national trend) but the score of 3.90 was still in the highest 20% when compared with Trusts of a similar type.</p> <p>Areas to further explore include staff recommending the Trust as a place to work or receive treatment as the score as the score has declined. There is a theme around safety which needs exploring also as the scores relating to staff confidence in reporting possible unsafe clinical practice and the effectiveness of procedures for reporting errors, near misses and incidents declined.</p>

## **1. Purpose**

The purpose of this report is to provide the Trust Board with a detailed breakdown and analysis of the 2017 national NHS staff survey results for the Trust along with recommendations for next steps.

## **2. Background**

The national NHS staff survey is carried out annually to obtain staff views of their experiences at work and of NHS services. The 2017 staff survey was carried out in November 2017, 1525 staff completed the survey for Salisbury NHS Foundation Trust which was a 46% response rate (average for the region). The results were embargoed until Tuesday 6<sup>th</sup> March after which were made available on the national NHS Staff Survey website:

Summary report

[http://www.nhsstaffsurveys.com/Caches/Files/NHS\\_staff\\_survey\\_2017\\_RNZ\\_sum.pdf](http://www.nhsstaffsurveys.com/Caches/Files/NHS_staff_survey_2017_RNZ_sum.pdf)

Full report

[http://www.nhsstaffsurveys.com/Caches/Files/NHS\\_staff\\_survey\\_2017\\_RNZ\\_full.pdf](http://www.nhsstaffsurveys.com/Caches/Files/NHS_staff_survey_2017_RNZ_full.pdf)

## **3. Staff Survey Response Rates**

The staff survey response rates over the past 3 years have been:

2015 - 31%

2016 - 35%

2017 - 46%

In 2015 the Trust moved to an 'all email' survey, resulting in a reduced response rate among Ancillary Staff and Health Care Assistants who do not have easy access to email. Therefore, although our results were among the best nationally, our response rate was among the lowest. This questions the validity of the 2015 results, given the low representation of groups who do not have access to email, and a disproportionately high response from Corporate and Admin staff who have easy email access.

In 2017, the Trust decided that difficult to reach staff groups should receive paper surveys, ensuring they were able to contribute to the survey. The response rate has therefore increased with the results being arguably more valid and accurate as a result.

## **4. National Context**

The national picture for the 2017 NHS staff survey is best described as 'challenging' and shows a reversal of the last 4 year's trend of key findings improving. 32 key findings have deteriorated this year including staff engagement.

Positive improvements nationally are:

- Support from line managers
- Quality of appraisals
- Action around health and wellbeing

The main deteriorated scores nationally are:

- Quality of care

- Staff willing to recommend the Trust as an employer
- Workload and pressure on staff

Staff engagement fell nationally in three key areas:

- Staff satisfaction with their job
- Looking forward to going to work
- Willing to recommend their trust as place to work

Additionally, there is a 5% drop in satisfaction with pay nationally.

## 5. STP Context

**Appendix 1** compares the Trust's results with the STP Trusts. Each question in the survey is scored according to whether the response was better than average (green, 3 points), average (amber, 2 points), worse than average (red, 1 point). Total points are then RAG rated in order to rank the Trusts. The 2016 score is included also for reference.

### 5.1 STP

**Appendix 1** compares the Trust's results with our STP partner Trusts. Key points are:

- The Trust ranked top out of the 4 Trusts with a significantly higher overall score than the other Trusts (84% compared to 61% (RUH), 58% (GWH), 45% (AWP)).
- All of the Trusts overall scores declined from 2016 to 2017, GWH quite significantly by 15% (and therefore moving from green to amber RAG rated).
- All 3 Trusts had similar response rates to Salisbury (45% (RUH), 46% (GWH) and 52% (AWP).

## 6. Summary of results

### 6.1 Overview

The Trust scored in the top 20% of Acute Trusts in 10 of the 32 key survey findings, compared with 16 in 2016.

The Trust score was:

- above (better than) average for 11 key findings (compared to 6 in 2016);
- average for 7 key findings (compared to 6 in 2016);
- below (worse than) average for 3 key findings (compared to zero in 2016);
- in the worst 20% of Trusts for 1 key finding (compared to 2 in 2016).

**Appendix 2** provides an overview of the scores for each survey question (for 2015, 2016 and 2017) indicating whether the score was:

- In the top 20% of Trusts
- Above (better than) average
- Average
- Below (worse than) average
- In the worse 20% of Trusts

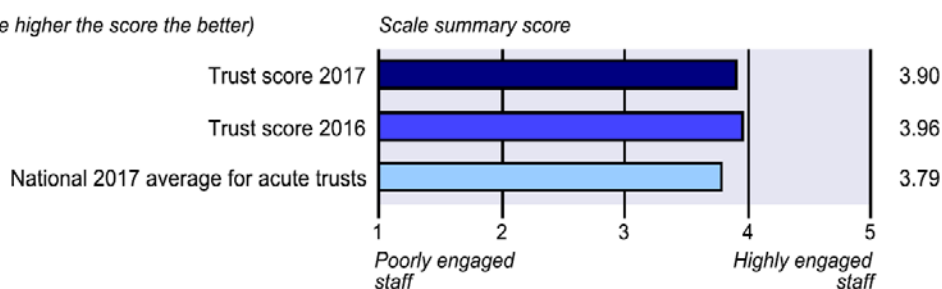
Please refer to the key at the bottom of the appendix table.

### 6.2 Staff Engagement

The chart below shows how the Trust compares with other Acute Trusts on an overall indicator of staff engagement:

### OVERALL STAFF ENGAGEMENT

(the higher the score the better)



The Trust's score of 3.90 was in the highest (best) 20% when compared with Trusts of a similar type however has decreased since the 2016 survey (in line with national trend).

## 7. Staff Survey results compared to other Acute NHS Trusts

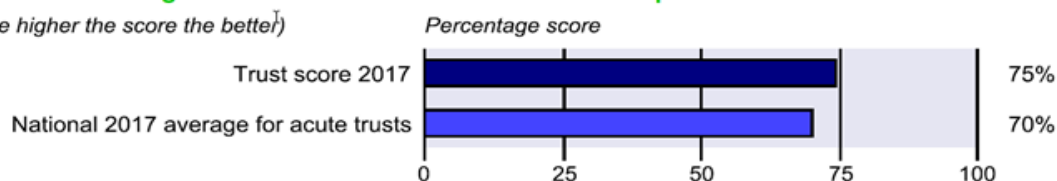
### 7.1 Top scores compared to the national average

The following charts highlight the five key findings for which the Trust compared most favourably with other Acute Trusts in England.

#### TOP FIVE RANKING SCORES

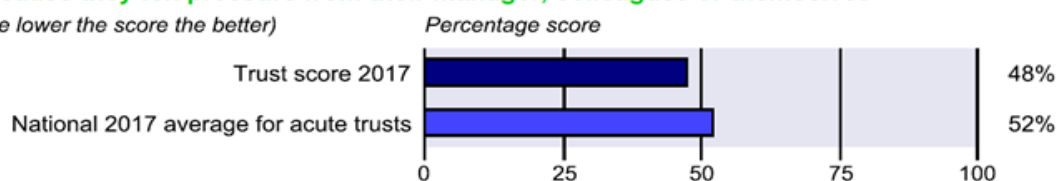
##### ✓ KF7. Percentage of staff able to contribute towards improvements at work

(the higher the score the better)



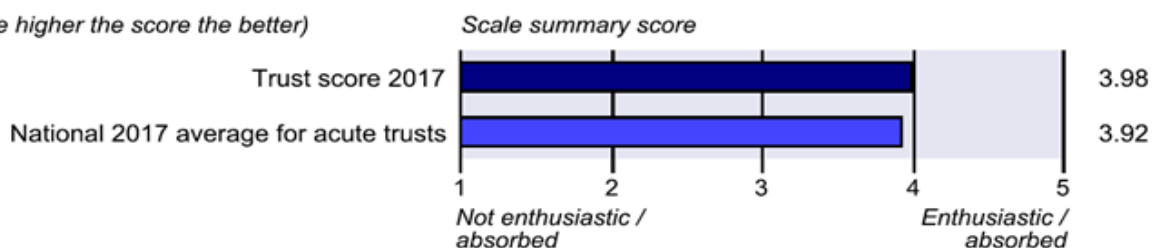
##### ✓ KF18. Percentage of staff attending work in the last 3 months despite feeling unwell because they felt pressure from their manager, colleagues or themselves

(the lower the score the better)



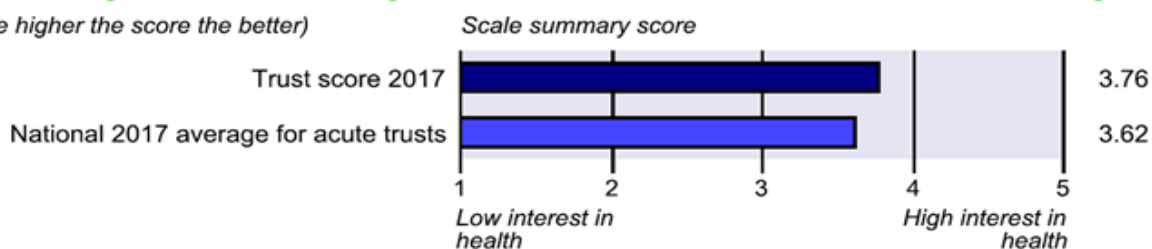
#### ✓ KF4. Staff motivation at work

(the higher the score the better)



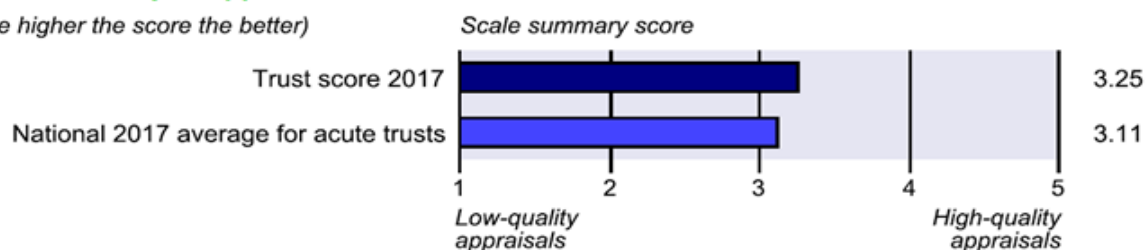
#### ✓ KF19. Organisation and management interest in and action on health and wellbeing

(the higher the score the better)



#### ✓ KF12. Quality of appraisals

(the higher the score the better)



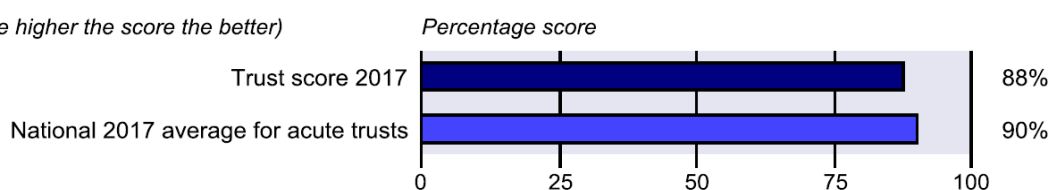
### 7.2 Bottom scores compared to the national average

The following charts highlight the five key findings for which the Trust compared least favourably with other Acute Trusts in England.

#### BOTTOM FIVE RANKING SCORES

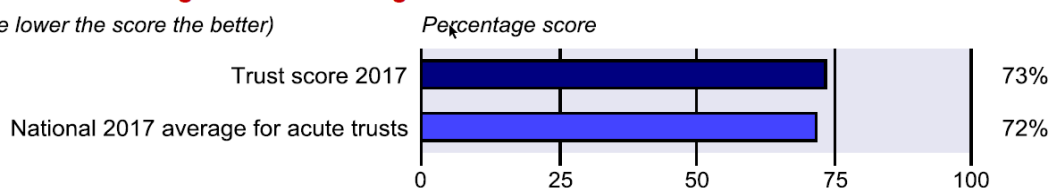
##### ! KF29. Percentage of staff reporting errors, near misses or incidents witnessed in the last month

(the higher the score the better)



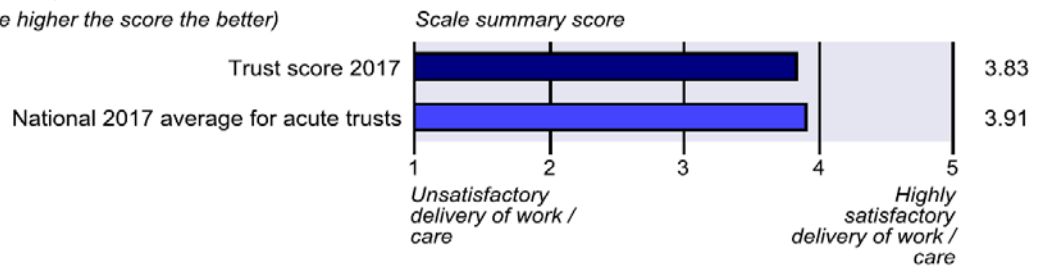
##### ! KF16. Percentage of staff working extra hours

(the lower the score the better)



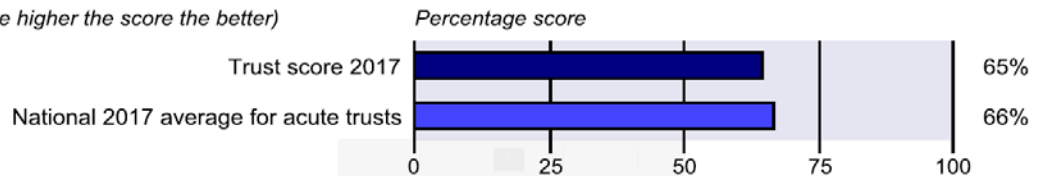
**! KF2. Staff satisfaction with the quality of work and care they are able to deliver**

(the higher the score the better)



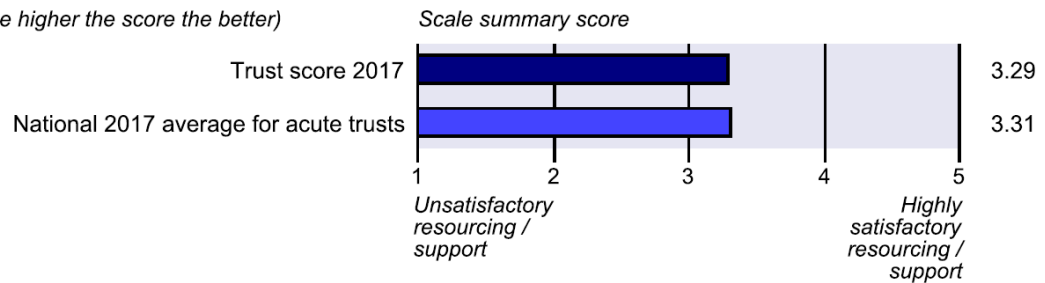
**! KF24. Percentage of staff / colleagues reporting most recent experience of violence**

(the higher the score the better)



**! KF14. Staff satisfaction with resourcing and support**

(the higher the score the better)



## 8. 2017 versus 2016 results

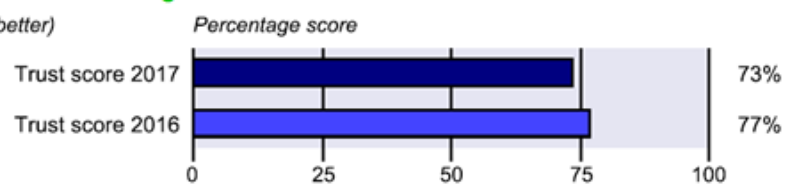
### 8.1 Where we have improved most since last year

The chart below is the key finding that has improved at the Trust since the 2016 survey:

#### WHERE STAFF EXPERIENCE HAS IMPROVED

**✓ KF16. Percentage of staff working extra hours**

(the lower the score the better)



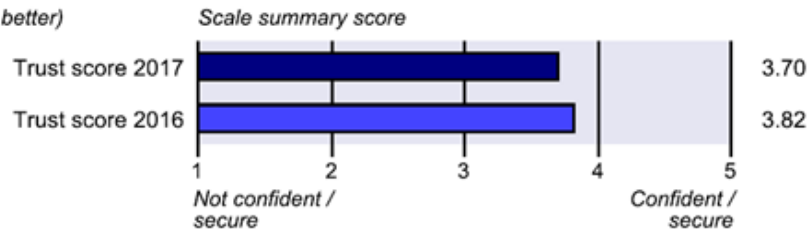
## 8.2 Where we have deteriorated most since last year

The following charts highlight the five key findings where staff experiences have deteriorated since the 2016 survey.

### WHERE STAFF EXPERIENCE HAS DETERIORATED

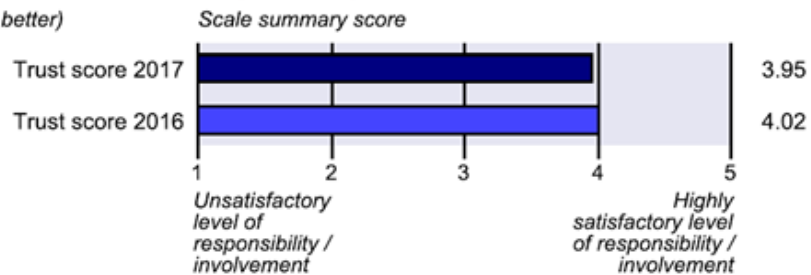
#### ! KF31. Staff confidence and security in reporting unsafe clinical practice

(the higher the score the better)



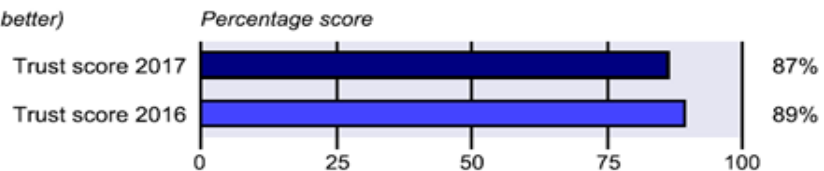
#### ! KF8. Staff satisfaction with level of responsibility and involvement

(the higher the score the better)



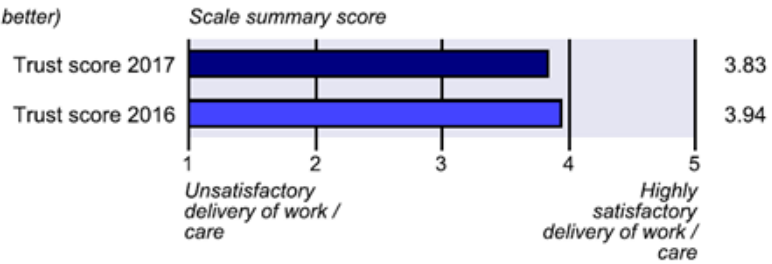
#### ! KF11. Percentage of staff appraised in last 12 months

(the higher the score the better)



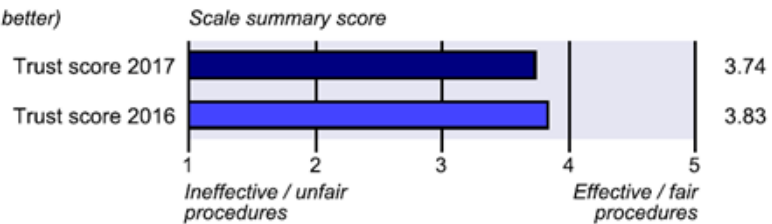
**! KF2. Staff satisfaction with the quality of work and care they are able to deliver**

(the higher the score the better)



**! KF30. Fairness and effectiveness of procedures for reporting errors, near misses and incidents**

(the higher the score the better)



### 8.3 Results comparison 2015 – 2017

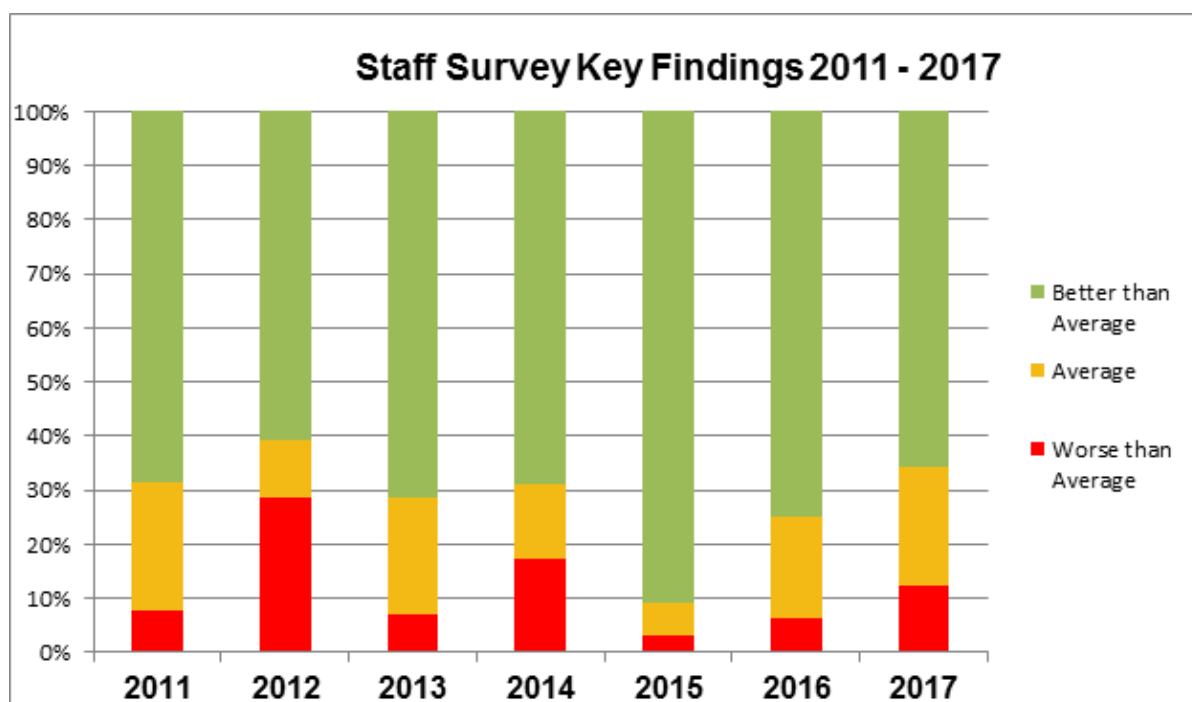
**Appendix 3** shows a comparison of the results for the Trust across 2015, 2016 and 2017.

As mentioned in section 3, response rates should be taken into consideration when reviewing the changes over time, particularly as the response rate was low in 2015 (in which the number of amber and red RAG rated scores reduced significantly). The table below illustrates this:

	2015	2016	2017
<b>Response rate</b>	31%	35%	46%
<b>Green</b>	29	24	21
<b>Amber</b>	2	6	7
<b>Red</b>	1	2	4



Over the extended period 2011-2017 the RAG ratings have changed as shown below:



## 9. Staff Survey Communications Plan

The Executive Directors have agreed a plan for communicating the staff survey results within the Trust over the coming months to ensure communications are as frequent and as wide as possible. This will hopefully encourage staff to get involved in understanding the results and identify areas for improvement. Please note some of the actions have been delayed purposely due to the major incident.

## 10. Conclusion

The response rate improved significantly in 2017 and arguably provides more accurate results. It is encouraging to see that nearly 50% of our staff completed the survey and gave their views on what it is like to work at the Trust. There should be a focus on increasing this response rate even further for the 2018 survey, aiming for above 50%.

The Trust compares favourably to both our regional and STP counterparts. Given our neighbouring Trusts results (Bournemouth and Christchurch, Southampton and Poole), we will be undertaking further work to understand what these Trusts are doing specifically to improve staff experiences.

Overall staff engagement levels are good and in the top 20% compared with Trusts of a similar type which is very positive and we need to build on this through the staff engagement forums. We will therefore be undertaking a detailed piece of work with this staff engagement group.

Staff motivation and ability to contribute to improvements at work remains a positive result and in the top 20% compared with Trusts of a similar type.

Percentage of staff recommending the Trust as a place to work or receive treatment has declined. This question in itself can give us a real sense of how staff feel about the Trust so

it would be useful to understand this result in more detail. Again, we will be consulting with the staff engagement group to understand this result in more detail.

It is concerning to see that results have declined around staff confidence in reporting possible unsafe clinical practice and the effectiveness of procedures for reporting errors, near misses and incidents. Safety is crucial to the care we provide so we will be liaising with the Risk & Safety team to explore the reasons behind these results.

Whilst the national staff survey is a good method of obtaining staff feedback, it is only one means. There is a plan in development to improve our mechanisms for communicating, engaging and gaining feedback from staff e.g. staff engagement forums. A detailed communication and engagement structure is due to launch in April to ensure we provide effective feedback mechanisms for different staff groups.

## **11. Recommendations**

It is recommended that the Workforce Committee endorse the following recommended next steps:

1. Complete the actions in the communication plan agreed by Executive Directors.
2. Research our neighbouring Trusts to understand what they are specifically doing to improve staff experiences at work.
3. Set up staff engagement forums to obtain feedback on the results and agree priority areas to focus on specifically:
  - Building on the positive staff engagement score;
  - Understanding why staff recommending the Trust as a place to work or receive treatment has declined.
4. Liaise with the Risk & Safety Team to explore why staff confidence in reporting possible unsafe clinical practice and the effectiveness of procedures for reporting errors, near misses and incidents has declined and agree appropriate actions.
5. Directorates to conduct analysis of their results and agree key priorities to focus on. To be facilitated by People Business Partners and reported back at Performance Reviews (recommended that dedicated agenda item in future performance review packs).

## Appendix 1 – Comparison of SFT staff survey results with STP NHS Trusts

Key		Score		Points	Appraisals and Support for Development		Equality and Diversity		Errors and Incidents			Health and Wellbeing		Working Patterns		Job Satisfaction			Managers		Patient Care and Experience		Violence, Harassment and Bullying																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
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## Appendix 2 – Staff Survey Summary 2015-2017

Response Rate			2017	2016	2015
Salisbury NHS Foundation Trust	Response Rate		46%	36%	31%

2017 Findings in Worst 20% of Trusts		Theme	2017	2016	2015
KF29	% reporting errors, near misses or incidents witnessed in the last mth	Errors and Incidents	R	R	G

2017 Worse than Average Findings		Theme	2017	2016	2015
KF16	% working extra hours	Working Patterns	-	R	-
KF2	Staff satisfaction with the quality of work and care they are able to deliver	Patient Care and Experience	-	A	A
KF24	% reporting most recent experience of violence	Violence, Harassment and Bullying	-	G	G

2017 Average Findings		Theme	2017	2016	2015
KF11	% appraised in last 12 mths	Appraisals and Support for Development	A	+	+
KF21	% believing the organisation provides equal opportunities for career progression / promotion	Equality and Diversity	A	A	+
KF9	Effective team working	Job Satisfaction	A	+	G
KF14	Staff satisfaction with resourcing and support	Job Satisfaction	A	A	+
KF3	% agreeing that their role makes a difference to patients / service users	Patient Care and Experience	A	G	G
KF22	% experiencing physical violence from patients, relatives or the public in last 12 mths	Violence, Harassment and Bullying	A	+	G
KF23	% experiencing physical violence from staff in last 12 mths	Violence, Harassment and Bullying	A	A	G

2017 Better Than Average Findings		Theme	2017	2016	2015
KF13	Quality of non-mandatory training, learning or development	Appraisals and Support for Development	+	G	G
KF20	% experiencing discrimination at work in last 12 mths	Appraisals and Support for Development	+	G	G
KF28	% witnessing potentially harmful errors, near misses or incidents in last mth	Errors and Incidents	+	+	G
KF30	Fairness and effectiveness of procedures for reporting errors, near misses and incidents	Errors and Incidents	+	G	G
KF31	Staff confidence and security in reporting unsafe clinical practice	Errors and Incidents	+	G	G
KF17	% feeling unwell due to work related stress in last 12 mths	Health and Wellbeing	+	A	G
KF15	% of staff satisfied with the opportunities for flexible working patterns	Health and Wellbeing	+	+	G
KF1	Staff recommendation of the organisation as a place to work or receive treatment	Job Satisfaction	+	G	G
KF8	Staff satisfaction with level of responsibility and involvement	Job Satisfaction	+	G	G
KF6	% reporting good communication between senior management and staff	Managers	+	G	G
KF27	% reporting most recent experience of harassment, bullying or abuse	Violence, Harassment and Bullying	+	+	A

2017 Findings in Best 20% of Trusts		Theme	2017	2016	2015
KF12	Quality of appraisals	Appraisals and Support for Development	G	G	G
KF18	% attending work in last 3 mths despite feeling unwell because they felt pressure last 12 mths	Health and Wellbeing	G	G	G
KF19	Org and mgmt interest in and action on health and wellbeing	Health and Wellbeing	G	G	G
KF4	Staff motivation at work	Job Satisfaction	G	G	G
KF7	% able to contribute towards improvements at work	Job Satisfaction	G	G	G
KF5	Recognition and value of staff by managers and the organisation	Managers	G	G	G
KF10	Support from immediate managers	Managers	G	G	G
KF32	Effective use of patient / service user feedback	Patient Care and Experience	G	G	G
KF25	% experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 mths	Violence, Harassment and Bullying	G	G	G
KF26	% experiencing harassment, bullying or abuse from staff in last 12 mths	Violence, Harassment and Bullying	G	A	+

Key

Worst 20%	R
Worse than Average	-
Average	A
Better than Average	+
Best 20%	G

**Appendix 4 – Staff Survey Communication Plan**  
(agreed with Executive Directors in February 2018)

**Key:** Grey box - complete

Method/Meeting	Frequency	Lead	Comments
Trust Board (March)  <b>Complete</b>	5 <sup>th</sup> March	Director of OD & People	Provide headlines/short paragraph on the results. Explain that embargo lifted 6 <sup>th</sup> March.
Staff Side Briefing & Engagement  <b>Completed 19<sup>th</sup> March (delay due to major incident)</b>	6 <sup>th</sup> March – day embargo lifted (09:30)	Director of OD & People	Email to Staff Side with the headlines reported to Board day before, encouraging them to review the results, highlight the positive results and ask them to work with the Trust on plans to improve. Ask them to discuss the results with staff during their interactions. Involve them in comms to staff (i.e. give them any leaflets/posters to cascade to their members)
Message from CEO to all staff  <b>Completed 19<sup>th</sup> March (delay due to major incident)</b>	6 <sup>th</sup> March – day embargo lifted (09:30)	Patrick Butler	Use the weekly message from Cara to give the key headline results to staff
Press Release  <b>Date tbc (delay due to major incident)</b>	6 <sup>th</sup> March – day embargo lifted (09:30)	Patrick Butler	Dependant on results Patrick will do a press release
Exec Walkabouts	From 6 <sup>th</sup> March	Executive Directors	To share any updates from the top staff survey item during the course of their walkabouts and collate views/feedback.
Social Media (Facebook, Twitter, LinkedIn)	From 6 <sup>th</sup> March – weekly?	Deputy Director of OD & People / Patrick Butler	Communicate that results are available, encourage staff to

<i>Benefits: reaches a wide audience and reaches both staff and members of the community</i>			review
Briefings in lecture theatre  <b><i>Scheduled for w/c 26<sup>th</sup> March (delay due to major incident)</i></b>	From W/C 12 <sup>th</sup> March	Director of OD & People	Similar to those held for CQC sessions - Executive Directors rotate to present
Broadcast  <b><i>Delay due to major incident</i></b>	From W/C 12 <sup>th</sup> March – weekly?	Deputy Director of OD & People / Patrick Butler	Communicate key results (positive and negative)
Sessions in Springs  <b><i>Delay due to major incident</i></b>	From W/C 12 <sup>th</sup> March	Director of OD & People / Deputy Director of OD & People	Pop up banners displaying the positive messages from the results – to be displayed permanently? This would be seen by both staff and patients.
ArtCare  <b><i>Delay due to major incident</i></b>	From W/C 12 <sup>th</sup> March	Director of OD & People / Deputy Director of OD & People	Ask ArtCare to help display our key messages in Main Reception/Hedgerows/ Springs. Again would be seen by both patients and staff.
Leaflets and posters  <b><i>Delay due to major incident</i></b>	From W/C 12 <sup>th</sup> March	Director of OD & People / Deputy Director of OD & People	Could have key positive results on and could be made available at areas where staff frequent regularly.
Cascade Brief	Monthly: March April May	Director of OD & People / Patrick Butler	Include a headline summary in the cascade brief as has been done in previous years
Workforce Committee  <b><i>Complete</i></b>	26 <sup>th</sup> March	Director of OD & People	Detailed paper and presentation on the results with recommendations for next steps
Trust Board (April)	12 <sup>th</sup> April	Director of OD & People	Summary of results - paper and presentation (using information presented to Workforce Committee)



Create a video for display in Main Reception (and for use on social media)	Monthly from March	Deputy Director of OD & People / Patrick Butler	Could have key messages on from the results and what action we will be taking going forward. Messages from staff on what it's like to work here. Could change weekly/monthly? Each week have a different message?
Staff Survey Improvement of the Month	Monthly from March through to November (2018 staff survey)	Director of OD & People / Patrick Butler	Using lessons learnt from previous years we have focussed on several improvements all at the same time. Could we instead focus on one per month in the lead up to this year's survey?

# NHS STAFF SURVEY 2017

Summary of Results for Salisbury NHS Foundation Trust  
March 2018

# National Picture

- National picture is best described as ‘challenging’.
- Results show a reversal of the last 4 year’s trend of key findings improving.
- The main positive improvements nationally are:
  - Support from line managers;
  - Quality of appraisals;
  - Action around health and wellbeing.
- The main deteriorated scores nationally are:
  - Quality of care;
  - Staff willing to recommend the Trust as an employer;
  - Workload and pressure on staff.

# Local Picture

- The Trust ranked top out of the 4 Trusts with a significantly higher overall score than the other Trusts (84% compared to 61% (RUH), 58% (GWH), 45% (AWP)).
- All of the Trusts overall scores declined from 2016 to 2017, GWH quite significantly by 15%.
- All 3 Trusts had similar response rates to Salisbury (45% (RUH), 46% (GWH) and 52% (AWP)).

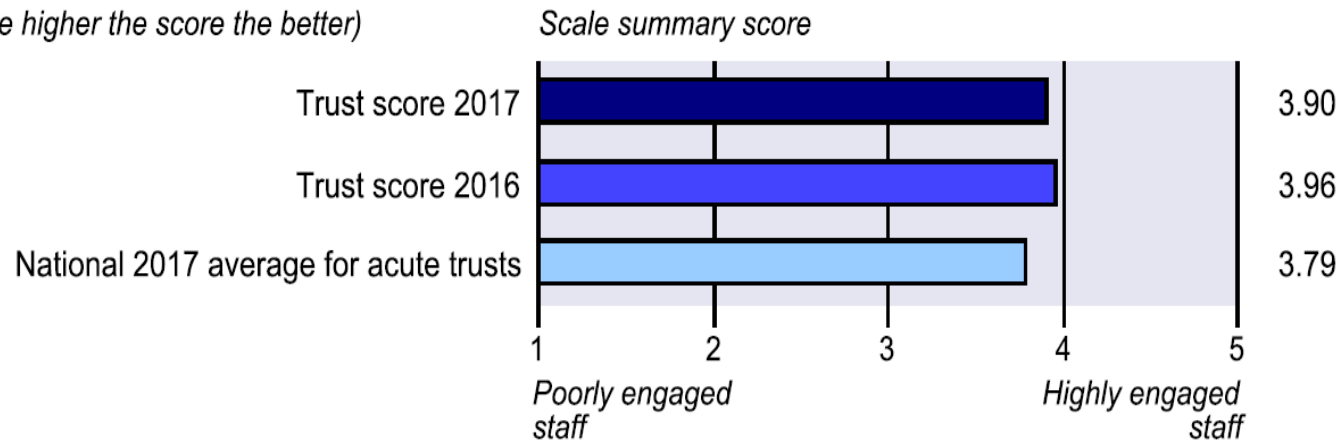


# Staff Engagement

The chart below shows how Salisbury NHS Foundation Trust compares with other acute Trusts on an overall indicator of staff engagement:

## OVERALL STAFF ENGAGEMENT

*(the higher the score the better)*



The Trust's score of 3.90 was in the highest (best) 20% when compared with Trust's of a similar type however has decreased since the 2016 survey (in line with national trend).

# Top five ranking scores (1)

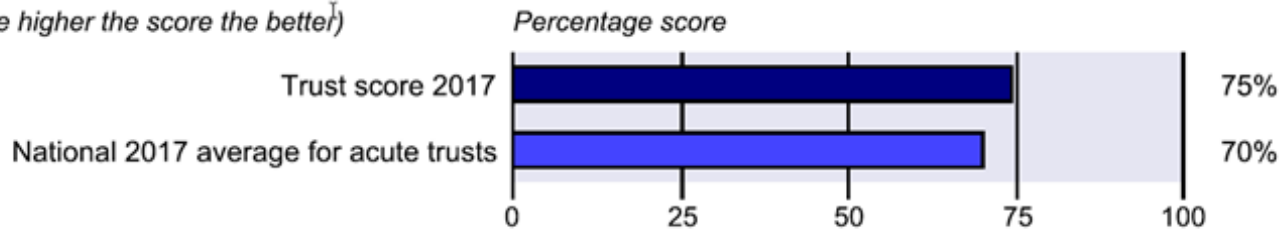
(compared to the national average)

The following slides highlight the five Key Findings for which Salisbury NHS Foundation Trust compared most favourably with other acute Trusts in England.

## TOP FIVE RANKING SCORES

### ✓ KF7. Percentage of staff able to contribute towards improvements at work

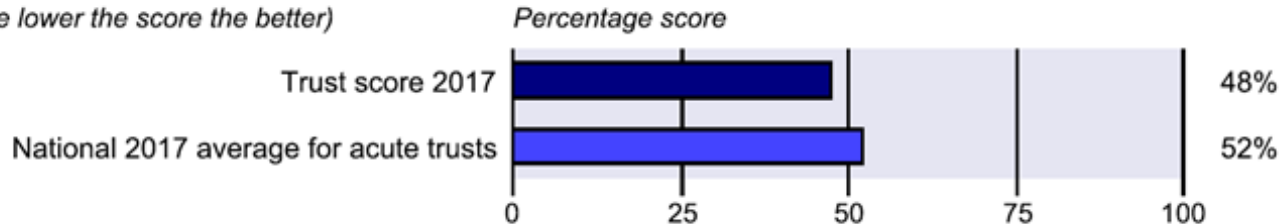
(the higher the score the better)



2016  
score:  
76%

### ✓ KF18. Percentage of staff attending work in the last 3 months despite feeling unwell because they felt pressure from their manager, colleagues or themselves

(the lower the score the better)



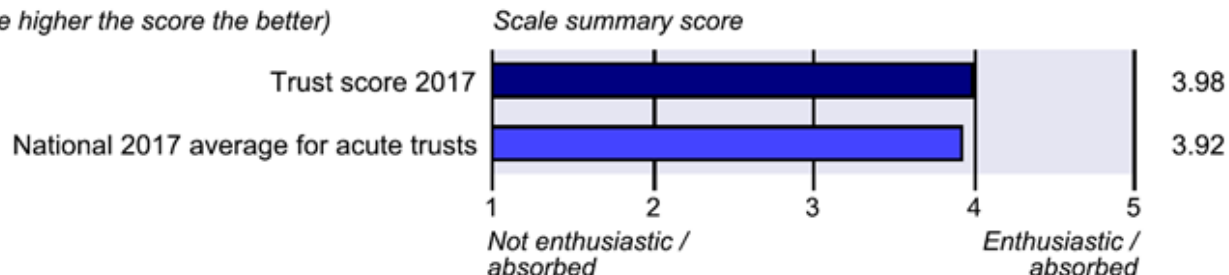
2016  
score:  
48%

# Top five ranking scores (2)

(compared to the national average)

## ✓ KF4. Staff motivation at work

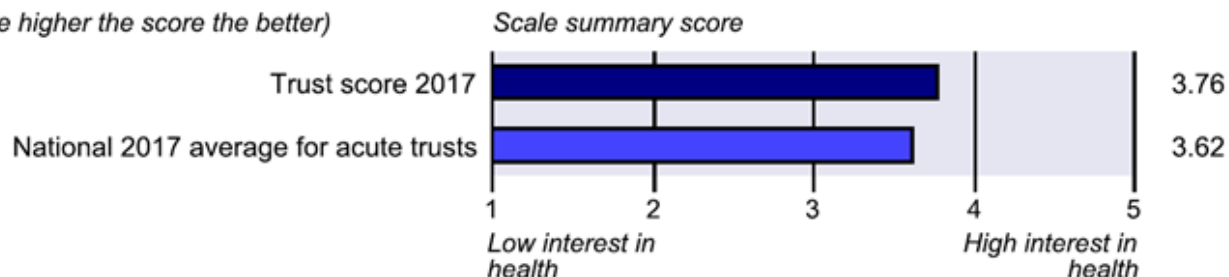
(the higher the score the better)



2016  
score:  
4.01

## ✓ KF19. Organisation and management interest in and action on health and wellbeing

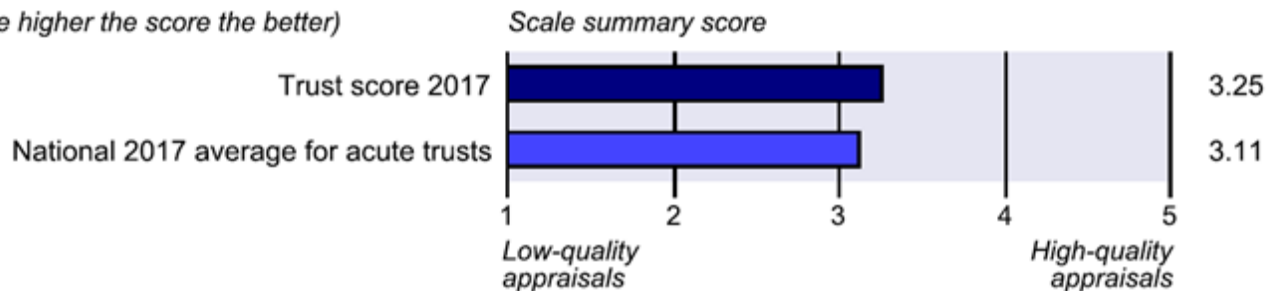
(the higher the score the better)



2016  
score:  
3.84

## ✓ KF12. Quality of appraisals

(the higher the score the better)



2016  
score:  
3.28

# Bottom five ranking scores (1)

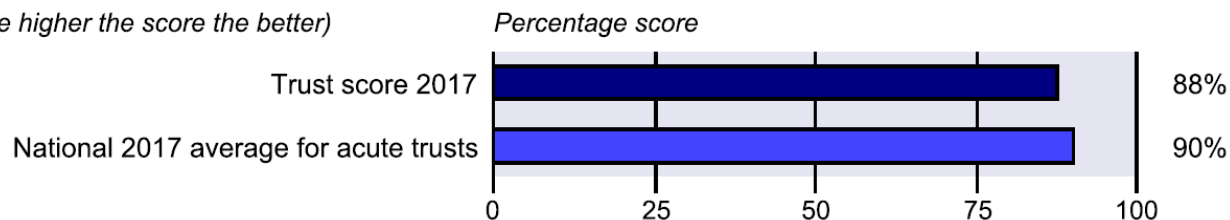
(compared to the national average)

The following slides highlight the five Key Findings for which Salisbury NHS Foundation Trust compared least favourably with other acute Trusts in England.

## BOTTOM FIVE RANKING SCORES

### ! KF29. Percentage of staff reporting errors, near misses or incidents witnessed in the last month

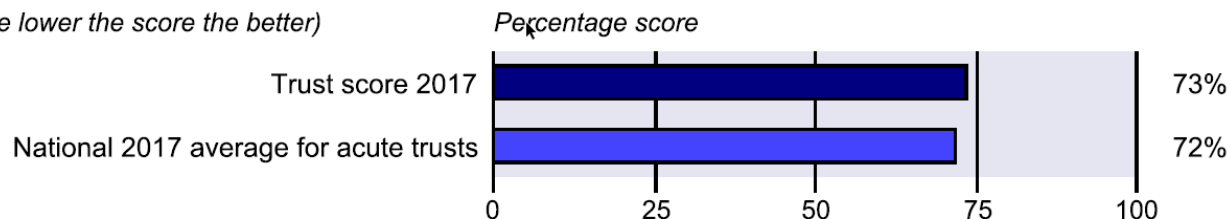
*(the higher the score the better)*



2016  
score:  
88%

### ! KF16. Percentage of staff working extra hours

*(the lower the score the better)*



2016  
score:  
77%

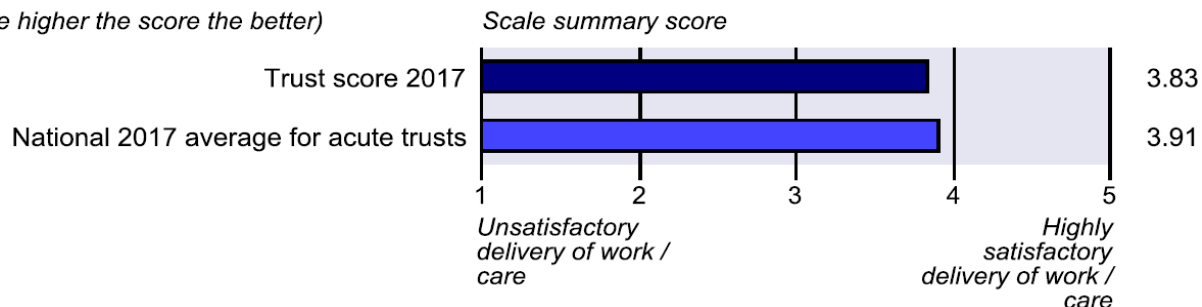


# Bottom five ranking scores (2)

(compared to the national average)

## ! KF2. Staff satisfaction with the quality of work and care they are able to deliver

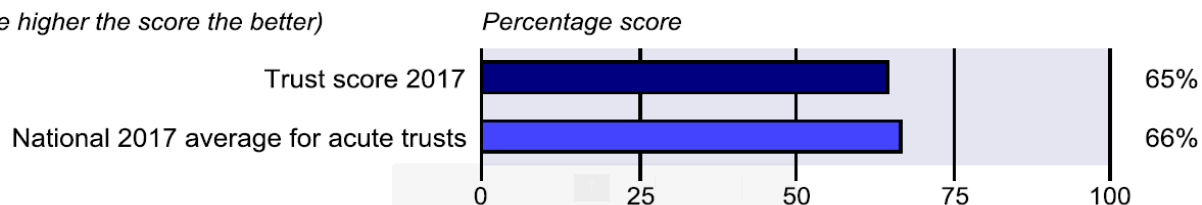
(the higher the score the better)



2016  
score:  
3.94

## ! KF24. Percentage of staff / colleagues reporting most recent experience of violence

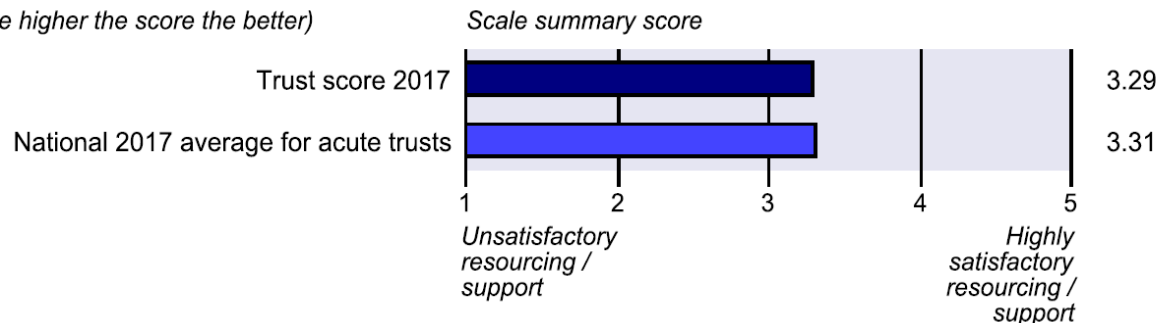
(the higher the score the better)



2016  
score:  
75%

## ! KF14. Staff satisfaction with resourcing and support

(the higher the score the better)



2016  
score:  
3.33

# Trend 2015-2017

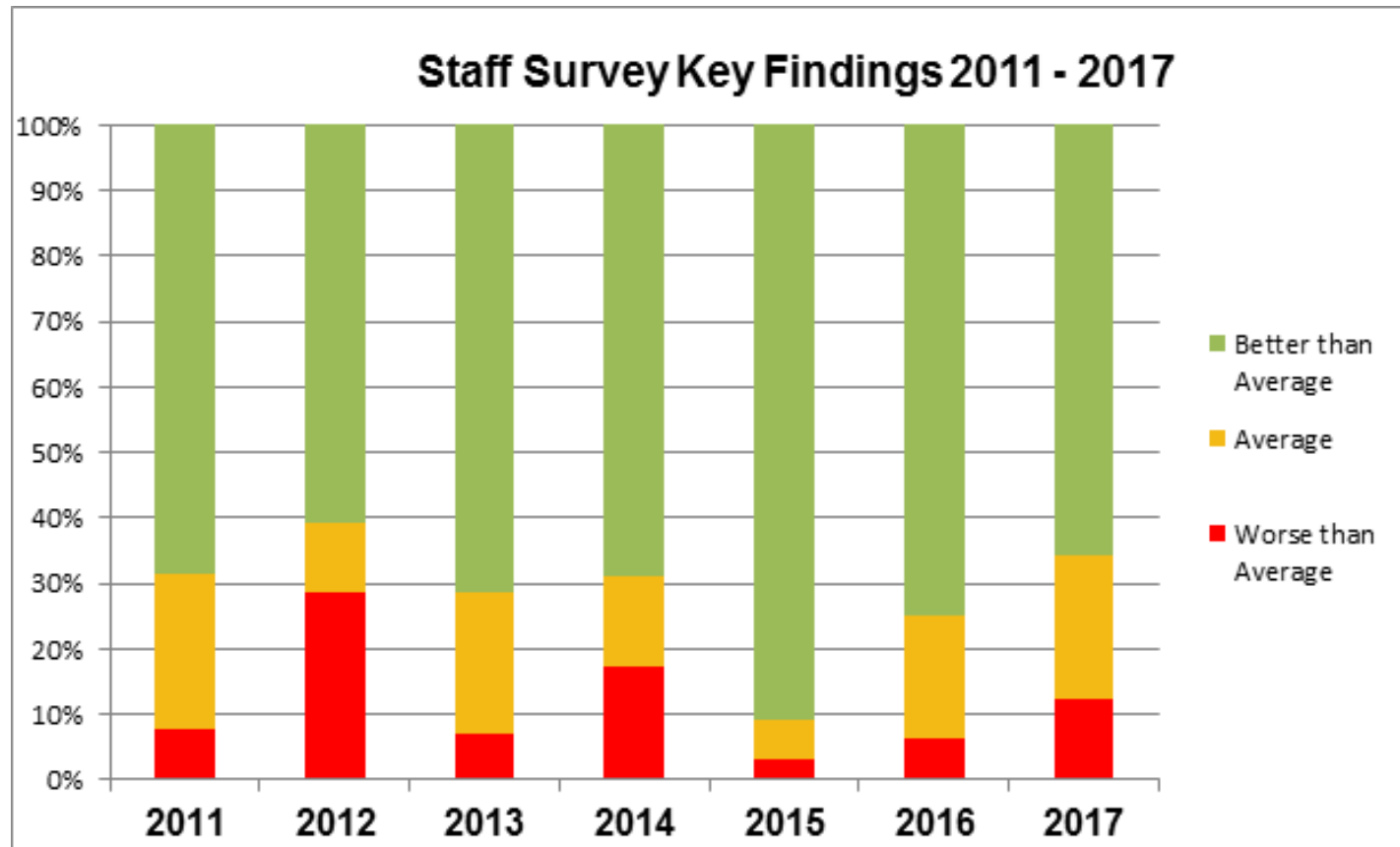
The table below shows a comparison of the results for the Trust across 2015, 2016 and 2017 using the RAG ratings Green (above average), Amber (average) and Red (below average).

	2015	2016	2017
<b>Response rate</b>	31%	35%	46%
<b>Green</b>	29	24	21
<b>Amber</b>	2	6	7
<b>Red</b>	1	2	4

Response rates should be taken into consideration when reviewing the changes over time, particularly as the response rate was low in 2015 (in which the number of amber and red RAG rated scores reduced significantly).

# Trend 2011-2017

Over the period 2011-2017 the RAG ratings have changed as shown below.



# Key Points /Conclusion



- Overall staff engagement levels are good and in the top 20% compared with Trust's of a similar type.
- Staff motivation and ability to contribute to improvements at work remains a positive result and in the top 20%.
- Good levels of engagement not only benefits our staff, but also our patients. It is also good for our reputation as we look to attract the best staff to Salisbury.
- *Need to build on these positive results...engagement plan*

# Key Points /Conclusion



- Percentage of staff recommending the Trust as a place to work or receive treatment has declined.
- Concerning to see that results have declined around staff confidence in reporting possible unsafe clinical practice and the effectiveness of procedures for reporting errors, near misses and incidents.
- Need to listen and act on staff views, perception and experiences ...

# Recommendations (Trust wide)

- Set up staff engagement forums to obtain feedback on the results and agree priority areas to focus on specifically:
  - Building on the positive staff engagement score;
  - Understanding why staff recommending the Trust as a place to work or receive treatment has declined.



# Recommendations (Directorates)

- Directorates to address Trust wide themes and local contexts
- To be facilitated by People Business Partners and reported back at Performance Reviews (dedicated agenda item in future performance review packs).



# Questions and comments?

