

**NHSBT Board Meeting****NHSBT'S Our Voice- Check Up!  
Survey Results and Actions Moving Forward**29<sup>th</sup> November 2018**1. Status – Official****2. Executive Summary**

This paper describes the **Our Voice - Check Up!** Staff Survey process and outcomes for 2018. This was a detailed survey of all staff across NHSBT and follows the last full survey undertaken in 2016. The purpose of this survey was to determine how engaged our colleagues feel compared to previous years, and to identify whether action taken in response to the survey in 2016 is starting to make a difference, whilst also highlighting any new areas of interest. A copy of the organisation survey response is shown in Appendix 1.

The survey was managed by the Your Voice Project Board in collaboration with a business intelligence and survey company, ORC International. ORC International was responsible for producing this year's survey and two previous surveys in 2016 and 2015 (pulse). ORC worked with NHSBT to develop a customer focussed, evidence based survey strategy, resulting in improved overall scores as well as an impressive response rate of 69%. This was lower than the survey in 2016 which achieved a response rate of 80% - however at 69% it is the highest pulse survey response we have had and is considerably ahead of the response rates seen in the wider NHS.

**3. Action Requested**

The Board is therefore asked to:

- Review the high level results attached
- Review and agree the suggested recommendations for corporate action plans.
- To seek support to drive directorate responses to the survey outcomes. Remembering that this should not only be focused on areas of improvement but also ensuring we celebrate success, consider how we can leverage areas of progress, share best practice and continue to spend time doing the things that see higher colleague engagement scores.

**4. Survey Development**

A Project Board was established in 2016 with senior representatives from across the organisation including our trade unions and one Head of Centre.

It was considered important that the questions this year were consistent with those asked in 2016 to test whether the actions taken as a result of the last survey had started to make a difference.

## **5. Results and Key Highlights from the Report**

### **5.1 Overall Outcomes**

The last pulse survey that was undertaken in 2015 had a disappointing response rate of 42%. Our 2018 Pulse survey received a response rate of 69%, an increase of 37% but 11% decrease from the Full Your Voice survey in 2016. The lower response rate was likely due to colleagues in some of our frontline teams not having ease of access to enable them to complete the survey this year as response rates in Blood Donation/M&L (which represent over half of our workforce) significantly impacted our response rate. However, this is still much higher than the overall NHS response rate (45%) and the support for the survey this year should be commended.

The NHSBT overall engagement score was 3.80, compared to 3.73 in 2016, 3.79 in 2015, and 3.56 in 2014. **This is a significant improvement, year on year, and the highest engagement score proportionate to the survey response rate since these reports were implemented.**

For example:

2014 yielded a **3.56 engagement score** with a **68%** response rate  
2018 yielded a **3.80 engagement score** (a 6.7% increase from 2014) with a **69%** response rate.

### **5.2 Progress against previous outcomes**

The purpose of the 2018 pulse survey was to measure progress since 2016 in key areas of importance arising from that year. These were:

- Senior leadership visibility
- Communication
- Opportunities for career development
- Harassment, Bullying, Abuse and Colleague Well Being
- Impact of Line Managers
- Perceived response to the survey
- Engagement scores

Each of these areas have seen improvement as follows:-

#### **5.2.1 Senior leadership visibility**

We noticed an improvement in the Senior Leadership question 'Senior Leaders are Approachable and Listen to my Feedback,' as this question **improved by 6%.**

#### **5.2.2 Communication**

Overall, NHSBT's communication score is now 52% positive as opposed to 49% in 2016, an **improvement of 3%**.

### **5.2.3 Opportunities for Career Development:**

Colleagues noted improvements in career development opportunities – as the score for this question **improved by 4% from 2016**.

### **5.2.4 Bullying and Harassment**

In 2016, 17% of colleagues noted they had experienced Bullying and Harassment, whereas only 14% had said they'd experienced bullying and harassment in 2018, a **decrease of 3%**.

### **5.2.5 Impact of line managers**

On average, our management scores **improved by 6.5%**. For example, the question regarding 'managers motivating, inspiring colleagues to do a good job' **improved by 8% from 2016**.

### **5.2.6 Wellbeing**

One of our focus areas following the survey in 2016 was on well being. Results this time highlight a increase of 7% of colleagues saying their manager cared about their wellbeing which is very positive.

### **5.2.7 Perceived response to the survey**

There was a **decrease of 10%** of colleagues this year who felt action wouldn't be taken in response to the survey.

### **5.2.8 Engagement Scores**

This score is derived from the following question outcomes:

- Employee ability to contribute towards improvement at work.
- Employee recommendation of the organisation as a place to work or receive treatment.
- Employee Motivation at Work.

NHSBT's Engagement score has improved since last year. This year it is **3.80**, whereas in 2016 it was **3.73**, an improvement of 0.07 or 1.2%.

## **6. Areas for action/improvement**

### **6.1 Survey Action Planning:**

35% of colleagues indicated they agreed action had been taken a result of the previous survey, however 46% were unsure, which indicates more needs to be done to communicate action planning and its sources.

### **6.2. Discrimination:**

Discrimination scores have remained steady since 2018 - 8% year on year of colleagues indicated that they had experienced it. This means that more work needs to continue to be done to address discrimination, perhaps through researching colleague experiences in this area.

### **6.3. Patient Experience:**

Colleagues feel slightly less confident in the service being provided to patients and service users, as the score for this question decreased by 3%

Care of Patients/Service Users is NHSBT's Top Priority overall changes:

- 70% Positive in 2014
- 79% Positive in 2016
- 76% Positive in 2018

## **7. Benchmarking information**

### **7.1 Public Sector Benchmarking**

The outcome of this report includes benchmark information comparing NHSBT to public sector organisations, including a number of councils, Universities, NHS trusts, government agencies as well as arm's length bodies.

NHSBT had a response rate of 69%, which was three percentage points lower than the Public Sector Comparison- 72%. Despite this, NHSBT has achieved a response rate 34% higher than the NHS overall (2017).

NHSBT performed better than the benchmark organisations in:

- Career Progression
- Discrimination
- Communication

Areas for Improvement are:

- Equal opportunities for development
- Senior Leadership Decision-Making
- Motivation

This tells us more needs to be done in areas such as equality and diversity, and we can continue to improve our management offering, despite these areas having made progress at NHST since 2016. This is also indicative that NHSBT has made progress within its career development and diversity and inclusion strategy.

### **7.2 NHS Benchmarking**

The overall NHS has not planned on releasing any reports yet for 2018, but it released its 2017 scores in March. NHSBT has achieved a higher response rate and engagement score than the NHS in its most recent national staff survey.

#### **Engagement Score Comparison:**

NHS Overall in 2017- 3.78

NHSBT in 2018- 3.8

#### **Response Rate Comparison**

NHS Overall in 2017- 44%  
NHSBT Overall in 2018- 69%

More detailed analysis in comparison to the individual questions is not available as we do not follow the format of the national NHS survey. This decision was taken because it does not align to our organisation closely and some of the questions contained do not result in information that you can then take action against.

## 8. Action Planning Recommendations

Having reviewed the reports available, the following suggested corporate actions are recommended. These follow the 70/20/10 model with 70% of actions ensuring we continue with what is going well, 20% being modified and 10% being new or areas for change:-

Action	Action Area	Next Steps
70% - continue with what is going well	<ul style="list-style-type: none"><li>• <b>Career Development:</b>- It is clear that the focus on highlighting career opportunities within NHSBT has proved successful and highlighting secondments etc has demonstrated that we are serious about providing opportunities where possible.</li><li>• <b>Senior Leadership Visibility:</b>- Connect to a Region, Director Roadshows etc and local team/department visits are clearly having an impact. This must be maintained as colleagues are viewing this as positive.</li><li>• <b>Communication:</b>- Team Talk, Inside NHSBT (our outward facing internet), Yamma and now Link our new intranet have all supported more positive scores in relation to communication</li><li>• <b>Wellbeing:</b>- With a 7% increase in colleagues feeling their manager cares about their wellbeing this is an areas that we need to continue to focus on.</li></ul>	<ul style="list-style-type: none"><li>• We are currently developing improved career path options which should be finalised in the next few months. This will provide greater visibility of how colleagues can identify their current skills and then look to</li><li>• We need to continue to identify more ways of engaging with colleagues across the organisation – we are currently trialling new town hall exec meetings, and using our Leadership Conference day to visit teams/depts. There will be further opportunity with the development of both the Blood Supply and ODT Strategies in the coming year to increase our engagement with colleagues across the organisation which will hopefully drive a further improvement.</li><li>• We need to continue the communication methods used and allow both Link and Yammer to embed and for this to become more of the culture at NHSBT – this in itself should continue to see improvements in colleagues views on communication.</li><li>• Well being initiatives to continue to be communicated and new initiative identified as this is having such a positive effect.</li></ul>
20% - modify what you are	<ul style="list-style-type: none"><li>• <b>Impact of Line Managers:</b>- There are now 659 front line managers and leaders who have accessed our leadership development in the last 12 months alone. We have also</li></ul>	<ul style="list-style-type: none"><li>• Although we would not wish to change the line management development offering we have, of programmes and our focus on coaching, more could be done to</li></ul>

already doing	<p>provided a range of online tools to support leaders including</p> <ul style="list-style-type: none"> <li>• <b>People Aspects of change tool</b> (<i>Which has had over 500 'hits' since its launch in July</i>)</li> <li>• <b>Developing your team toolkit</b> (866 hits this year)</li> <li>• <b>Career development tool</b> (2,693 hits)</li> </ul> <p>We also have 52 leadership apprentices, across levels 2-5, who have either completed their programs (21) or are working on them (31). This development is now starting to result in improved performance by our line managers. In addition to programmes there has been a strong focus on 'coaching' of managers:</p> <ul style="list-style-type: none"> <li>• 60 senior leaders have received coaching support from our coaching faculty with a further 16 currently being coached;</li> <li>• through HR Direct,</li> <li>• HR Consult and</li> <li>• by offering one day workshops on 'Coaching conversations' which 78 managers have completed in the last 12 months.</li> </ul> <p>• <b>Harassment, bullying and discrimination:-</b> Despite improvements year on year in this area it is clear that a survey suggesting that 14% of those who responded feel that they have been harassed, bullied or discriminated against is not acceptable. It is recognised that not all of this is from other colleagues but from patients/donors or service users – if you review the data presented the bigger proportion across all directorates is between the individual and their manager/colleague. An organisation that is ambitious in relation to its inclusivity agenda cannot be satisfied with responses of this nature.</p>	<p>continue to raise the expectation of what NHSBT needs from its leaders. We are about to launch our new Leadership Ladder which will consist of a number of levels making the manager development and competence more visible. It is likely that development in this area will become more crucial with the implementation of the pay deal and the pay progression elements based on performance.</p> <ul style="list-style-type: none"> <li>• Need to urgently understand, through focus groups, what is driving this response and what can be done to reduce and ultimately stop this behaviour from managers and colleagues and service users.</li> </ul>
10% - create initiatives or change	<p>• <b>Colleagues perception of the patient experience:-</b> this is a new action but as a service dedicated to improving and saving lives again any decrease in scores in this area must be seen as a priority area for action.</p>	<ul style="list-style-type: none"> <li>• We will need to identify how best to tackle this issue and ask for the support of the Our Voice Project Board to make recommendations as to how this could be done. We need to consider how we identify areas of good or great practice and how we encourage colleagues to seek it out, share and implement.</li> </ul>

In addition to the suggested corporate actions above, each member of the Executive Team will be responsible for developing their own directorate actions plans taking into consideration their directorate and team/department reports using the suggested format above. It is important to ensure that throughout these discussions as much attention is paid to those interventions that are seeing a positive effect as those that require development. Otherwise so much energy is focussed on the development areas that the elements that colleagues value either get forgotten about or the time spent on them reduced.

## **9. Next Steps**

In terms of next steps these are:-

- To agree the corporate action plans and communicate them to the wider organisation
- To ask each directorate to develop their own action plans
- To ensure the reports are disseminated to each directorate/department and team (each team with a response rate of 6 people or more will receive a report) – encouraging all to discuss the responses and seek views.
- To encourage colleagues to join four webinars that have been set up to support line managers in developing their own conversations and action plans.
- To communicate all of the activity happening as a result of the survey outcomes through Connect Magazine, Yamma, Link and Team Talk.

This most recent survey was a ‘pulse’ survey which is a short survey designed to test out whether interventions are seeing an improvement in some key areas. It does not include some other areas of interest for questioning depending on what is current in the organisation at the time or allow the freedom for freetext and commentary which can be very useful to provide a supporting narrative around some areas.

In addition there are also new ways of seeking realtime engagement scores/levels from colleagues through apps and other formats and these need to be explored and then a future approach recommended in due course.

## **10.0 Summary**

The Our Voice- Check up! 2018 survey achieved a significantly increased response rate since the 2015 NHSBT pulse survey (37% higher) as well as a slightly improved engagement score. This demonstrates that we’re achieving better results and this is reflected by higher numbers of our colleagues taking part. NHSBT performed better than the NHS in its response rate and engagement scores as well.

We have seen improvements in nearly every question on NHSBT's pulse survey except for the discrimination and patient experience categories. This tells us that the actions taken by our colleagues and managers are making a difference and will continue to make NHSBT a better place to work if we maintain a targeted action planning strategy. With effective action planning and implementation of a full 2020 survey we can continue to ensure that we'll be continuing to make NHSBT a great place to work for our colleagues.

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