

OD Direct Line: 020 7288 3554 www.whittington.nhs.uk The Whittington Hospital NHS Trust Magdala Avenue London N19 5NF

# Whittington Health Trust Board

2<sup>nd</sup> April 2014

Title:		Trust Staff Survey – presentation of the results						
Agenda item:			14/	072		Paper		8
Action requested	d:		To note				i	
Executive Summ	cutive Summary: Presented here are the findings from the bespoke engagement survey commissioned as part of the OD strates was created specifically for the Trust by ORC and staff levels helped to shape the questions. It was circu throughout the Trust and received a response rate of 40 per or some 1626 members of staff.				strategy. It staff at all circulated			
Summary of recommendation	IS:		This report is presented for information only, having been discussed in detail at the March Board Seminar.					been
Fit with WH strat	egy:		Culture of i	innovatio	n and impro	ovement		
Reference to rela	ated / ot	her	These findings are presented alongside the findings from the national 2013 NHS Staff Survey.					
Reference to are and corporate ris Board Assurance Framework:	sks on t	-	3.1 "If we fail to maintain staff engagement then staff morale will decrease and the delivery of changes in services and patient pathways will not happen in line with the plan"					
Date paper comp	oleted:		11 <sup>th</sup> March 2014					
Author name and	d title:	Crai OR(	ig McMahon C		Director na title:	me and	Jo Ridgway Director of (	
Date paper seen by EC 12.03.14 (TB Seminar)		Ass	ality Impact essment plete?		Quality Impact Assessmen complete?	t	Financial Impact Assessmen complete?	t







# Whittington Health Staff Survey 2014

# Summary report

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Whittington Health

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February 2014



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# **1** Introduction

This report provides Whittington Health with ORC International's summary of the key findings for the staff engagement survey. The survey was conducted between November 2013 and January 2014 to measure employee engagement and attitudes concerning a range of work related issues in Whittington Health. The survey was completed by 1,626 staff which represents a response rate of 40%.

This report is designed to provide a headline summary of the results which should be used alongside full data reports. This summary and accompanying data reports are designed to provide a full outline of survey results in a format which aids prioritisation of improvements and assists action planning.

# 2 Employee Engagement

The employee survey was designed to measure employee engagement within Whittington Health. Employee engagement can be described as a mutually beneficial relationship between the employer and the employee. It is a relationship which harnesses the potential of employees and drives organisational performance.

The engagement model used by ORC International is tried and tested across a range of scenarios in both the public and private sector. It focuses on 3 key concepts: Say, Stay and Strive.



A set of 5 questions, designed to measure overall employee engagement, were included within the survey. These questions can also be combined to create an overall 'engagement index' for Whittington Health. The chart below shows the questions included in the index and Whittington Health's performance compared to the external benchmark norm.

The engagement score for Whittington Health is 60%. This is an average of the % positive responses across the five engagement questions. This is a solid base to build from and across the five questions there is little negativity. However, there is still very much work to be done for Whittington to fully engage staff and the neutral responses represent both an opportunity and a risk. It is essential that Whittington addresses some of the key issues arising to ensure these neutral staff move to a more positive viewpoint rather than falling into the negative category across these questions.



# The Say element of engagement has some way to go to align with the benchmark scores.

Results relating to staff feeling proud to work for Whittington Health and recommending Whittington as a great place to work fall below the external benchmark. 15% of staff responding would also not advocate Whittington Health.

### There seems to be some uncertainty in future plans from Whittington Health staff.

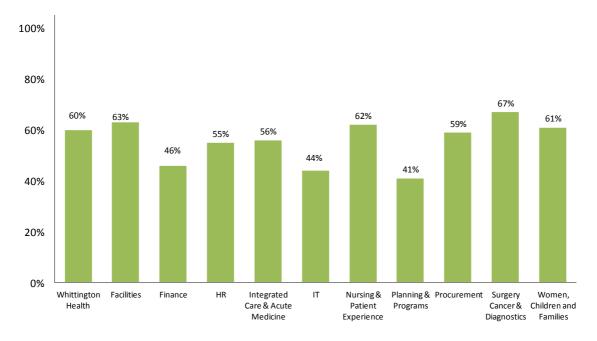
Almost one third of staff feel uncertain around whether they feel a sense of belonging to Whittington, however results are in line with other organisations. The intention to stay question has a higher positive score, but generally staff in other organisations are more likely to want to remain in their organisaton than we currently see here. Do these views represent uncertainty around the future?

### The Strive element of engagement represents the most positive response.

Two thirds of staff believe that working at Whittington makes them want to do the best work they can. There is very little negativity in this area suggesting that staff are committed to doing their best for the service user, but perhaps not for Whittington. Can the employee-employer relationship be strengthened?

### Moving from good to great.

To align with Whittington Health's vision *"to be an outstanding provider of high quality joined up healthcare to local people in partnership with GP's, councils and local providers"* staff engagement will be critical in this process. The engagement questions chosen for Whittington Health are reasonably stretching measures, so is useful to compare these scores against some of the highest performing organisations. Within the benchmark group, the highest score for recommending the organisation as a great place to work is 92% positive which is 37 points above Whittington Health, 76% feeling a sense of belonging which is 23 points above and 89% positive that working here makes me want to do the best work I can, 22 points above Whittington. This illustrates that there remains a long way to go to move from good to great engagement in Whittington but continual focus on the key areas arising from the survey results will be a step in the right direction.



## Levels of engagement differ across the main business areas

### Finance, IT and Planning and Programs represent the lowest performing areas.

These three business areas have quite noticeably lower engagement scores than other areas. In particular, only 22% of IT and 28% of Planning and Programs staff would recommend Whittington as a great place to work. In addition to this, 39% of Planning and Programs and 45% of Finance intend to be working for Whittington in 12 months' time, calling their commitment into question. This is backed up by only 50% of Finance and 44% of Planning and Programs feeling that working at Whittington makes them do the best work they can, compared to 67% overall.

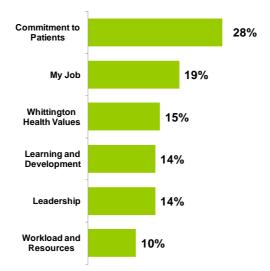
### Surgery Cancer and Diagnostics have the highest engagement levels in Whittington.

Facilities, Nursing and Patient Experience and Women, Children and Families are all performing above the average; however it is Surgery Cancer and Diagnostics that represents the greatest performance. 69% are proud to work for Whittington compared with 62% overall and 67% feel a sense of belonging, compared with 53% overall. Can areas of high engagement be utilised to share best practice to low performing business areas in Whittington?

## How can we increase engagement levels in Whittington Health?

Since employee engagement in itself cannot be directly actioned, Whittington Health needs to identify and take action on the areas which have the biggest impact on engagement in order to see improvements. ORC International has conducted Key Driver Analysis on the results of the survey. This analysis uses a combination of factor analysis and regression analysis to identify the themes and individual questions which are having a significant impact on engagement. Further details about the analysis is provided within the Appendices of this report.

Six key themes were identified as being significant drivers of employee engagement within Whittington Health. These themes, along with their relative level of impact, are outlined below:



Staff at Whittington Health have identified 'Commitment to Patients' as having the strongest relationship with engagement levels. Also critical to engaging staff are 'My Job', 'Whittington Health Values', 'Learning and Development', 'Leadership' and 'Workload and Resources'. The remainder of the report will focus on these key themes and also others which may be indirectly impacting on engagement levels at Whittington Health.

# 3 Key Results

## Commitment to Patients in Whittington is being called into question

A number of questions were asked in the survey focusing on Whittington's commitment to Patients and these are detailed below. Also, key questions arising from the Key Driver Analysis have been highlighted. While results across this theme represent very low levels of negativity, the high neutral responses in many areas suggest that further clarification on Whittington's commitment to service users may be needed.

	positive neu	utral negative	Positive	Variance from Benchmark
5. Health and safety is taken seriously in Whittington Health	75	17 8	75	-3
62. Whittington Health is committed to putting service users at the heart of everything they do	58	33 9	58	-
63. Whittington Health is doing a good job at prioritising the services that are most important to our service users	43	46 10	43	-
64. Whittington Health delivers value for money services to its service users	44	48 7	44	-
65. We act on the feedback we receive from patients	55	39 6	55	-17
66. Being an integrated care organisation has improved the way we deliver care to patients	41	47 12	41	-
67. I feel like it is easy to work in an integrated way across the whole organisation	36	43 21	36	-



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Key question driving engagement

### Neutral scores are dominating this theme.

46% of staff are unsure as to whether Whittington is doing a good job at prioritising services, 48% are neutral as to Whittington delivers value for money services and 47% are uncertain if being an integrated care organisation has improved the way Whittington delivers care. Neutral responses are very interesting and can be described as "sitting on the fence" or "swing voters". Respondents like this are the easiest to shift to a more positive viewpoint compared to those who are actively negative. "Quick wins" could be gained by ensuring regular communications are keeping staff informed around Whittington's commitment to service users.

# The basics for engagement are in place

	positive neu	tral negative	Positive	Variance from Benchmark
1. My job makes good use of my skills and abilities	81	10 9	81	+3
2. My work gives me a feeling of personal accomplishment	76	<mark>13</mark> 11	76	+1
3. I am clear about what I am expected to achieve in my job	81	11 8	81	-3
4. I understand how my work contributes to the success of Whittington Health	80	14 6	80	-5

### Staff enjoy their jobs, skills are utilised and contribution is clear.

The majority of staff feel their jobs make good use of their skills and abilities and that their work gives them a feeling of personal accomplishment. This theme should be celebrated as a key area of strength for Whittington. Question 4 is a key question which is very closely linked to engagement levels. While the majority of staff do understand how their work contributes to the success of Whittington Health, although results are below the benchmark average.

# **Whittington Health Values**

		positive	neutral	negative		Positive	Variance from Benchmark	
	28. I am familiar with our Whittington Health values		84	13	I	84	-1	
	29. I share the Whittington Health values		80	19	I	80	-	
	32. I understand how my work contributes to the objectives of my team / directorate		77	18	5	77	-13	
)	33. I feel committed to Whittington Health's strategy	6	<b>59</b>	27	I	69	-12	

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# Staff understand the Whittington Values but are uncertain how they link to local objectives or to the strategy of the Trust.

84% of staff are familiar with the values and while over three quarters understand how their work links to the objectives of their team, is this enough? There remains some uncertainty and results are considerably below the benchmark results. There is an opportunity for managers to reinforce these messages and act as leaders to ensure staff are aware of how their work not only aligns to team or directorate objectives, but also to the wider Whittington Health strategy.

## **Relationships with Managers could be improved**

While the theme around line managers is not having a significant impact on engagement levels directly, results have indicated that behaviours could be improved to ensure managers are motivating and inspiring staff and act as leaders to those they manage.

An area in need of improvement is in relation to recognition, 26% of staff are not satisfied with the recognition they receive for doing a good job. Results also suggest that managers could be doing more to motivate and inspire staff, identify ways their direct reports could improve performance and encourage innovation within their teams with all these areas performing well below the benchmark.

	positive r	negative	Positive	Variance from Benchmark
9. I am satisfied with the recognition I receive for doing a good job	51	23 26	51	-7
10. I generally feel supported when a mistake is made	56	27 17	56	-
12. My manager listens to my thoughts and feelings and takes action where appropriate	66	19 15	66	-
13. My manager motivates and inspires me to be more effective in my job	56	24 20	56	-8
14. I have confidence in the decisions my line manager makes	60	24 16	60	-13
15. My manager helps me to identify ways I can improve my performance	56	27 17	56	-12
16. My manager encourages me to come up with new or better ways of doing things	58	26 17	58	-16

# Performance management also performs below the benchmark

Less than two thirds of staff believe that their last appraisal accurately reflected their performance, 17 percentage points below the benchmark. There remains a proportion of staff who have identified that they have not had their performance reviewed in the last twelve months. Assessing across key

business areas, it appears that performance appraisals are more commonplace in some areas over others. 80% of staff in Women, Children and Families have had their performance reviewed while only 48% on IT and 53% in Planning and Programs responded positively. Can areas where these performance management conversations are not taking place be targeted?

When analysing results around how poor performance is managed, it is worth noting that the high neutral scores seen in Whittington are reasonably typical and generally reflect uncertainty as to how this is handled. Staff can be uncertain of how poor performance is dealt with if it is not something they have been directly involved with.

	positive neutra	negative	Positive	Variance from Benchmark
17. My line manager treats me with fairness and respect	75	16 9	75	-10
18. I have agreed objectives from my appraisal that I am working on this year	71	17 12	71	-1
19. My last appraisal accurately reflected my performance	64	26 10	64	-17
20. I have access to my line manager and can discuss all work related matters	81	11 8	81	-
21. I have had my performance reviewed in the last twelve months	72	12 16	72	-
22. Poor performance of colleagues is dealt with adequately	35 38	27	35	-7

# Learning and Development opportunities are viewed relatively favourably across Whittington Health

While there is still work to be done surrounding learning and development opportunities, results compare relatively positively to other organisations. Almost two thirds of staff believe that Whittington Health is committed to ensuring staff have an equal opportunity to learn and develop and results around career development are encouraging. Despite less than half of staff being satisfied with career development opportunities, this is a challenge in a number of organisations and represents an area where Whittington performs above the benchmark average. Given that this question is having a strong impact on engagement levels within Whittington, it is important that action is taken to at te very least maintain and improve these opportunities where possible.

The differentiating results on opportunities to get a better job in Whittington broken down by key business area suggest where improvement actions are needed most; Only 11% of Planning and Programs, 22% IT and 31% HR staff responded positively compared to 44% overall. What role are managers playing in these development discussions?

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	positive	neutral negative	Positive	Variance from Benchmark
46. I believe that Whittington Health is committed to ensuring that everyone has an equal opportunity to learn and develop	63	22 15	63	-
47. Any learning and development I undertake is prioritised in line with my agreed aims and objectives	64	24 12	64	-
48. There are sufficient opportunities for me to receive training to improve my skills in my current job	57	22 20	57	-3
49. The training and support I received as part of my Induction gave me the knowledge and information I needed to start doing my job effectively	53	31 17	53	-11
50. I am satisfied with the development opportunities I have to get a better job within Whittington Health	44	30 26	44	+5

# Leadership, Change Management and Communication

It is reasonably typical to see questions on senior managers receiving low positive scores and particularly high neutral results. In many organisations staff respond neutrally as they do not have regular contact with senior managers or do not know what grade level senior management refers to. However the negative results across this theme indicate that improvement is needed in this area in Whittington.

Improvements could be made regarding the visibility of senior managers across Whittington, the open and honesty in the ways in which they communicate and the information provided to staff. How can senior management visibility be increased in a sustainable and compelling way?

The individual question having the greatest impact on engagement levels in Whittington is the belief that the senior management team has a clear vision for the future of Whittington Health. Overall, there is scepticism of this vision with 39% of staff responding neutrally. How strongly has the vision been communicated? Are managers and leaders supporting in the delivery of this vision to ensure it is engaging for staff?

# **ORC**International

	positive	neutral	negative	Positive	Variance from Benchmark
23. Senior managers are sufficiently visible	52	23	25	52	-4
24. Senior managers are open and honest in their communications with staff	42	32	26	42	-8
25. Senior managers make the effort to listen to staff	44	32	25	44	-
26. Senior managers are open to new ideas	41	39	20	41	-
27. Senior management give enough detailed information to staff	37	35	28	37	-
30. I believe that the decisions and behaviours of senior managers and the Leadership team are consistent with	43	40	17	43	-4
31. I believe the senior management team has a clear vision for the future of Whittington Health	44	39	17	44	-2

On the subject of change management, results show a similar trend with high neutral responses indicating uncertainty around this area. The results relating to change suggest a lack of faith in change, how it is managed and whether changes have a positive impact. Do these results suggest a challenge around communications or the way change is actually managed?

	positive	neutral	negative	Positive	Variance from Benchmark
36. The reasons behind change are well communicated	38	37	25	38	-
37. Whittington Health manages change effectively	28	47	25	28	-8
38. When changes are made they are usually for the better	29	47	24	29	+1
39. I think Whittington Health takes the time to reflect on the impact of changes when they are made	29	45	26	29	-
40. I have the opportunity to contribute my views before changes are made which affect my job	34	35	30	34	-8
42. I am regularly informed about what is going on at Whittington Health	70		20 10	70	+8
43. Whittington Health does a good job of keeping me informed about matters affecting me	57		28 15	57	-2
44. I believe the channels of communication are the right ones	47	3	5 18	47	-

#### Resources and Workload are seen as an issue in Whittington Health.

The negativity across this theme is very evident and the comparisons to the benchmark are concerning. 49% of respondents feel there are not enough staff to get the job done and a similar proportion (44%) do not feel they can meet the requirements of their job without working excessive hours.

Workload and resources is an area which can have a negative impact on engagement levels if these problems are not addressed. It is worth looking across Whittington to understand where particular instances of workload issues exist. Planning and Programs (17%), Nursing and Patient Experience (27%) and Women Children and Families (30%) are the three areas where results are least positive relating to being able to meet the requirements of the job without working excessive hours. What can be done to address the workload issues, particularly in highly engaged areas such as Nursing and Patient Experience and Women, Children and Families?

	positive	neutral	negative	Positive	Variance from Benchmark
51. Where I work we have the resources we need to complete our work effectively	46	20	34	46	-19
52. Where I work there are enough staff to get the job done	30	21	49	30	-5
53. I can meet the requirements of my job without regularly working excessive hours	35	22	44	35	-24
54. I am comfortable with the pressure placed upon me in my job	39	28	33	39	-23
55. I am happy with the balance between my work and home life	47	22	30	47	-21

# 4 Conclusions

### The basics for building engagement are in place.

The survey has highlighted a number of key strengths which should be celebrated.

- Whittington Health have achieved an engagement score of 60% across the Trust which is something to build on and staff generally feel that working at Whittington makes them do the best work they can.
- Surgery Cancer and Diagnostics, Facilities, Nursing and Patient Experience and Women, Children and Families have achieved the highest engagement levels in Whittington.
- Staff are engaged with their job, feel their skills are utilised and their contribution is clear.
- Learning and Development opportunities do appear to be available, with staff identifying opportunities to get a better job in Whittington performing notably above the benchmark.

# There is a need to tackle concerns around leadership and the future direction of Whittington head on to increase engagement.

- Improving the visibility of senior managers and to ensure they are communicating with staff in an open and honest way, if done in an effective way and a way that is sustainable, should have a positive impact on wider perceptions of areas such as change management.
- There is scepticism of the direction of Whittington with a lack of belief that the senior management team has a clear vision for the future. There is also general uncertainty around how the work that staff do contributes to both the objectives of their team or the strategy of Whittington Health.

### Address management behaviours to inspire and motivate staff.

• Management to staff relationships are not as strong as they could be. Managers are not seen as recognising staff, being supportive when mistakes are made or encouraging innovation within their teams. These softer skills should be addressed and ensure that managers are acting as leaders in the organisation by inspiring and motivating staff and ensuring they are aware of how their work contributes to the vision and strategy of Whittington.

### Ensure Whittington is Committed to Patients.

• The results around Whittington's commitment to patients are dominated by neutral response. It is important that feedback is acted upon and patients are put at the heart of what they do which will be essential to move from a good to great Trust. The high neutral areas are worth investigation more locally, but suggest further clarification is needed on Whittington's commitment to patients.

It is very important that Whittington does not lose sight of the overarching aims and vision of the Trust during times of change, and to communicate how these changes will ultimately benefit service users.

# Appendix 1 Understanding this report

### **Attitudinal questions**

Most attitudinal questions in the survey were asked on a five point scale from 'strongly agree' to 'strongly disagree' with 'neither agree nor disagree' representing the neutral point. The questions were phrased positively, whereby agreement represents a response that is favourable for the organisation. Results are reported as "percentage positive" scores. As all questions in the survey were positively phrased this indicates the percentage of respondents who selected an "agree/strongly agree" response. The "percentage negative" scores represent the percentage of respondents who selected a "disagree/strongly disagree" response. The neither agree nor disagree responses equate to a neutral opinion.

## Rounding

It should be noted that in some cases when numbers are rounded to the nearest whole number, the total percentages may not always add up to 100%, but rather 101% or 99%.

### **Benchmark comparisons**

Further context is provided by comparing the survey results to external benchmark norms, as held within ORC International's benchmarking database, *Perspectives*. ORC's *Perspectives* database holds survey data from over 350 organisations, representing the views of 1.4 million colleagues, all of whom have been surveyed in the past 24 months.

Throughout this report, Whittington's results are compared to a bespoke benchmarking norm consisting of employers that work within a similar field and/or employers of choice.

The benchmarks provided refer to the median score across the organisations selected. Details of the organisations included in this benchmark are included later in the Appendices of this report.

### **Demographics**

Where useful and relevant, key demographic differences have been included in this report to provide further insight into the results. The number of responses upon which the data is based is important, particularly when looking at comparisons between demographic groups.

It should be noted that:

- Data based on a small number of responses should be treated with caution as each individual's response has a large impact on the group score.
- Data based on less than ten respondents is not reported both for reasons of statistical reliability and to protect respondent anonymity.

### Percentage points difference

The term "percentage point" is used to get around an ambiguity in English when we are comparing two different percentages. The problem is that "percent" implicitly refers to a relative change (a fraction of an original amount) rather than an absolute change (a specified amount).

Generally speaking, percentage points should be used to measure the difference between two percentages, since it gives a more clear view of the difference than when percentages are used (for example, the percentage point difference between 50% and 70% is 20 percentage points).

# Appendix 2 Benchmark Comparators

Organisations included within the external benchmark group chosen by Whittington Health. All data from the respective organisations has been captured in the employee surveys completed in the last two years.

ACAS Action for Children Affinity Sutton Aldwyck Housing Group Anchor Animal Health & Veterinary Laboratories Agency Bedfordshire Pilgrims Housing Association (BPHA) Biotechnology and Biological Sciences Research Council Bournemouth Borough Council **Brighter Futures** Bristol Community Health Broadway CEFAS Central & Cecil Housing Trust Cestria Housing Charities Aid Foundation (UK) **Charity Commission** City University London Conwy CBC CPS Criminal Injuries Compensation Authority Crown Office and Procurator Fiscal Service Debt Management Office Defence Medical Services Defence Support Group Denbighshire County Council Department for Education Department for International Development (DFID) Department for Transport (DfT) Department of Energy and Climate Change Department for Communities and Local Government Department of Health DVLA East Midlands Housing Group East Riding of Yorkshire Council Eastlands Homes EPSRC Essex County Council **European Training Foundation** Fairtrade FCO Services **Golding Homes** Greater London Authority Guinness Care and Support **Guinness Partnership** Health and Safety Executive Herefordshire Council Hertfordshire County Council Herts for Learning Hestia Housing and Support Hexagon Housing Highways Agency Historic Scotland HM Courts and Tribunals Service HM Revenue & Customs HM Treasury (excl agencies) Hyde Housing Group ICO Identity and Passport Service Immigration Enforcement Insolvency Service Intellectual Property Office L&Q

LB of Hammersmith & Fulham LB of Newham LB of Tower Hamlets LB of Waltham Forest Legal Services Commission Leonard Cheshire Disability Lewisham Homes Liverpool John Moores University Local Government Association London School of Economics London South Bank University Marie Stopes International Maritime and Coastguard Agency Medical and Healthcare Products Regulatory Agency Medical Research Council (MRC) Merlin Housing Met Office Ministry of Justice HQ Money Advice Service (MAS) National Audit Office National Crime Agency National Measurements Office National Records of Scotland National Savings & Investments Network Housing Group Newlon Housing Trust NHS Wales SSP - Procurement Services North Tyneside Council Northern Ireland Tourist Board (NITB) Notting Hill Housing Group Office for National Statistics Office of Fair Trading (OFT) Office of Gas and Electricity Markets Office of the Public Guardian Office of the Scottish Charity Regulator Ofsted Orbit Group Ltd Origin Group Oxfam Planning Inspectorate Plymouth City Council Porchlight Ports of Jersey Public Health England Radian Housing Group **Red Kite Housing** Rotherham MBC Royal Borough of Kensington & Chelsea Scope Serious Fraud Office Severnside Housing South Essex Homes South London YMCA Southend-on-Sea Borough Council Southern Housing Group Southway Housing Sovereign Housing Group St Albans District Council St Martin of Tours St Mungos Staffordshire Housing States of Jersey Stockton-on-Tees Student Awards Agency Tate Catering Tate Gallery TfL The Law Society (TLS\_1) The National Archives The Pensions Regulator The Royal Parks Transport Scotland Treasury Solicitors

Two Saints Housing Association University College London (UCL) University of Aberdeen University of Bedfordshire University of Bedfordshire University of Cambridge - School of Biological Sciences University of Cambridge - School of Clinical Medicine University of Cambridge (UAS, ICE, UL) University of Cambridge (UAS, ICE, UL) University of Greenwich University of Greenwich University of Sheffield University of Southampton University of Southampton University of Surrey University of Warwick University of West of England Victim Support Victim Support - Volunteers Welsh Assembly Government West Berkshire Council Westminster City Council Wiltshire Police WM Housing Group Worcester City Council Yorkshire Housing

# Appendix 3 Methodology

### Methodology

The questionnaire was designed by ORC International in conjunction with the Whittington project team. This helped to ensure that not only was the questionnaire designed in accordance with employee research good practice, but also measured topics of particular pertinence to Whittington. The questionnaire was designed to be succinct and provide actionable results to help inform the organisation and highlight areas for improvement.

All staff were given the opportunity to complete the survey between 11<sup>th</sup> November – 10<sup>th</sup> January. ORC International set up and hosted the survey, which was accessed via a unique link, sent to colleagues. Paper copies were provided should colleagues have not been able to complete the survey online. Throughout the survey period, response rates were tracked to help maintain momentum and target the communications.

This project was conducted in compliance with ISO 20252. Further information on the standard and associated processes can be provided by ORC International upon request.

### **Key Driver Analysis**

Key driver analysis uses statistical techniques to identify relationships between attitudinal questions in the questionnaire and the overall employee engagement index. The technique supports the prioritisation of actions coming out of the survey by identifying those questions which have the strongest relationship with overall employee engagement.

Prior to conducting the key driver analysis for this employee survey, it was necessary first to carry out a factor analysis to group the questions into independent factors. The purpose of factor analysis is to identify patterns in banks of attitude questions, highlighting whether the attitudinal questions are measuring the same underlying characteristic, or to discover whether amongst the range of responses there are any particular patterns. The use of factor analysis is based on the view that responses to particular questions are caused or affected by underlying factors. The assumption is that, if this is the case, such questions will be answered similarly and hence will correlate with each other.

Once the factors have been established, they are measured against the engagement index through a process of multiple regression analysis. This regression analysis measures the relative impact on engagement of each of the factors, and the subsequent questions that sit within each respective factor.

This project was conducted in compliance with ISO 20252.

- Target Group: Whittington Health employees
- Fieldwork dates: 11 November 2013 10 January 2014
- Sampling method: Census survey
- Response rate: 1,626 responses, 40% response rate.

Appendix 4 Staff survey: Communications plan March 2014

Date	Activity	Detail/content	Method	Lead
25/03	Draft comms plan to Executive Team			Exec
27/03	Managers' briefing	Overview of key findings Q&A for managers Details of action planning workshop Details of roll out of local results		Comms in conjunction with LM
28/03	Full results	Headline results, announcement of next steps/webinar and roadshow details	All staff email	
AM	released to staff	Intranet: Page dedicated the results	Intranet	Comms/OD
		Contents – Corporate results/overview/next steps		
28/03 PM	Trust Board papers published	Includes ORC survey report		JR/CT
2/04	Trust Board meeting	ORC survey report/NHS Staff Survey		
3/04	Direct email: Formal ORC	Formal senior staff invite to action plan workshop outlining importance to attend.	Direct email	RG
w/c 7/04 and w/c 14/04	Reminder of results and webinar registration	Reminders to staff on noticeboard of results and webinar registration. Emails via divisions encouraging webinar registration.	Noticeboard	AC
23/04	Webinar	Webinar takes place 1pm-2pm		RG/Jo
25/04	Webinar follow up, roadshows reminder	Conclusions of the webinar Q&A write up Where you can access it to see it if you missed it	Noticeboard Intranet	RG/comms
30/04	ORC Action Planning Workshop	Senior staff attend workshop		RG

01/05	Area results sent to managers	Individual results sent to managers, with clear set of actions required	Individual email with their results	RG
6/7/8	Three	Hospital site:		Comms/Exec
May	roadshows held	Exec support:		lead
	(one hospital,	OD support		
	one Haringey and one	Comms support		
	Islington)	Haringey:		
		Exec support:		
	More	OD support		
	information on results,next	Comms support		
	steps, Q&A	Islington:		
	opportunity	Exec support:		
		OD support:		
		Comms support		
W/C	Overview of	Noticeboard	Comms	AC/RG
12 May	roadshow and next steps			
TBC	CEO staff	Overview of results and update on progress	Staff briefing	Jo/CEO
	briefing	Winners of prizes announced		
Мау	Trust wide	Action plan		
	group to			TBC
	develop action			
	plan			
Oct 14	Update on	Board report on progress	Intranet	Leads/AC/JR
	action plans to		Noticeboard	
	Trust Board			