

Introduction

This is the sixth annual national survey of NHS staff, in which almost 290,000 NHS staff were asked for their views on working in the NHS. The aim of this survey is to gather information that will improve the working lives of NHS staff and help to provide better care for patients. This briefing highlights some of the key findings.

This survey provides the most reliable source of national and local data on how staff feel about working in the NHS and what they experience in their day-to-day working lives.

The NHS Next Stage Review¹ and the NHS Constitution² have brought a renewed focus on the NHS as an employer. The latter includes four pledges to staff that set out, for the first time, what the NHS expects from its staff and what staff can expect from the NHS as an employer. They are part of the commitment of the NHS to being a good employer and helping staff feel valued.

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 to communities.

Pledge 2: To provide all staff with personal development plans, access to appropriate training for their jobs and the support of line management to succeed.

Pledge 3: To provide support and opportunities for staff to maintain their health, wellbeing and safety

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 better ways to deliver better and safer services for patients and their families.

As the independent regulator for healthcare in England, with responsibility for assessing and reporting on the quality and safety of NHS services, the Healthcare Commission welcomes the emphasis on improving the experiences of staff. Our own research, and that of others, shows that positive experiences for staff are associated with positive experiences for patients. In short, better engagement with staff is critical to improving the experiences of patients.

Underlying the four pledges to staff is research commissioned by the Department of Health on *What Matters to Staff*. As a result of the findings of this research, we made a number of changes to the questionnaire for the 2008 NHS staff survey. The results of these new questions are reported here

for the first time. Where the same questions were asked in previous NHS staff surveys, we provide recent trend figures. We also highlight significant differences between staff working in different parts of the NHS because, for some questions, responses from staff vary widely by the type of trust (for example, ambulance services, acute hospitals, mental health services, and primary care trusts). Only providing the national aggregate figures could obscure results, and could potentially make it harder for policy makers to prioritise their response to the findings of the survey.

The results

The results of the 2008 NHS staff survey show high, and rising, levels of job satisfaction, with 90% of staff feeling that they make a difference to patients. There is an improvement in the proportion of staff receiving appraisals (although most staff think these could be more effective), better targeted training, and a fall in the proportion of staff reporting work-related stress. Overall, the survey provides some 36 key scores about working in the NHS. Of these, 18 show improvements over 2007, three have deteriorated and five have remained unchanged (the remaining 10 key scores are new to the survey in 2008).

The survey shows substantial improvements in the provision of hand washing and cleaning facilities, the proportion of staff receiving training in the control of infection and in the promotion of infection control to staff, patients and the public. There has also been a reduction in the proportion of NHS staff experiencing harassment, bullying and abuse from patients and from other staff, though not in the proportion experiencing physical violence.

The NHS Constitution was published in January 2009 (after the survey was conducted) and outlines the principles and values of the NHS in England. There is still some way to go before all staff understand the vision of the NHS and are aware of the contribution they can make as individuals and as a trust. Equally, only about half of staff are clear advocates of the NHS as being a good place to work. Many staff also feel excluded from decision-making and there is a strong view that senior managers do not act on their feedback. Overall, less than a third are satisfied with the extent to which their trust values their work, although this has increased substantially since 2007.

On all of these issues, staff working in NHS ambulance trusts report poorer experiences. However, it should be noted that ambulance staff work in a distinct and different environment to others in the NHS and that significant change and reorganisation across ambulance services in the last three years will have put extra pressures on staff and management. The trend for changes year-on-year among ambulance staff generally match those of the NHS as a whole, with the exception of appraisal. This highlights the need for further research to explain and understand these differences.

In this briefing, we have grouped the results of the survey broadly under the topic areas described in the four pledges to staff in the NHS Constitution.

1. Roles, responsibilities and rewarding jobs

It is very positive to find that 90% of NHS staff feel that they are making a difference to patients and that the majority say they have rewarding jobs. However, while most staff work in teams, many of those teams do not appear to work as effectively as they could and a high proportion of staff said that they don't have enough time or that there aren't enough staff to enable them to do their jobs properly.

Making a difference to patients

The survey asked a series of questions about the perceptions of staff of their contribution to the care of patients and service users. Ninety per cent of staff felt that their role ultimately made a difference to patients. Eighty-three per cent reported being satisfied with the quality of the care they provided, and around two-thirds (66%) felt that they were able to deliver the level of care to which they aspired, and that they were able to do their job to a standard with which they were pleased (60%). A little under half (46%) of staff felt that they did not have enough time to complete all their work, while 47% felt that there were not enough staff to enable them to do their jobs properly (although this is a substantial improvement over 2007, when 51% reported this).

Rewarding jobs

The survey asked staff how they perceived their jobs. Eighty per cent reported that they had an interesting job, 79% knew their responsibilities and nearly two-thirds had clear objectives (65%), similar to previous years. Staff across the NHS had similar views on whether their jobs were rewarding and interesting, but the survey shows that a lower proportion (55%) of ambulance staff have planned goals and objectives.

Team working

While over 90% of NHS employees said that they work in teams, only 39% felt that they work in well-structured teams in which staff have clear objectives, work closely together to meet these objectives, and regularly review and reflect on performance. There are striking differences across the NHS: half (49%) of staff in PCTs work in effective teams compared with only one in six (17%) of ambulance trust staff. While 83% of ambulance staff say that they work in a team, only 28% of these staff reported meeting regularly to discuss how team working could be improved. This compares with 60% in acute trusts and 64% overall. Sixty-nine per cent of staff overall felt that they were encouraged to work as a team.

Line management

The levels of satisfaction with support from line management are comparable with 2007, but were lower in ambulance trusts than in other NHS organisations. Sixty-seven per cent reported that their manager helped them with difficult tasks, and 70% felt supported in a personal crisis. However, only just over half (53%) felt that their manager gave them feedback or asked for their opinion (51%) before making decisions that affected their work.

Working hours and work-life balance

Two-thirds (66%) of staff across the NHS reported working more than their contracted hours, the same as in 2007. Thirty-three per cent of all staff were paid for these extra hours (31% in 2007) and 52% regularly worked extra unpaid hours (compared with 53% in 2007). Ambulance staff were both more likely to work additional hours (83% said they had done so) and to be paid for them (73% compared with 25% in the rest of the NHS).

The proportion of staff taking up flexible working opportunities is similar to previous years: 72% compared with 73% in 2007 and 71% in 2006. The most common types of flexible working were reduced hours (32%), flexi-time (31%) and teams making their own decisions about rotas (28%).

Sixty-four per cent of staff felt that they could discuss flexible working with their manager (63% in 2007 and 2006), and 55% of staff felt that their manager would help them to achieve a good work-life balance (slightly higher than in 2006 and 2007). And, although only 44% of staff felt that their trust was committed to helping its staff balance their work and home life, this is higher than in previous years (40% in 2007 and 37% in 2006).

2. Personal development, access to training and support from line management

Results from the survey show a widespread investment in the NHS workforce with high levels of training and appraisal, and a commitment to the development of staff. While an increasing proportion of staff are receiving appraisals, the majority feel that these could be more effective. The investment in training seems to be better targeted, with an increasing number of staff saying that training had helped them to do their job better or to keep up to date.

Staff appraisals

In 2008, 64% of staff had an appraisal (or a knowledge and skills development review). This is markedly higher than in 2006 (58%) and an improvement on 2007 (61%). However, just over a quarter (27%) of all staff (up from 24% in 2007) felt that their review was 'well structured' in that it

improved how they worked, set clear objectives and left them feeling that their work was valued. Fifty-five per cent of those staff who were appraised said that their appraisal was well-structured. Overall, only a third (34%) said that they received clear feedback on how they were doing (32% in 2007 and 30% in 2006).

Fifty-five per cent of staff had agreed a personal development plan as part of their review, up from 52% in 2007 and 48% in 2006. However, only half (49%) of these staff said that they had received the training, learning or development identified within the plan (a further 29% said it was “too early to say”).

Figures on appraisals are poorer for ambulance trusts than elsewhere: only 41% of ambulance trust staff had an appraisal; only one in 10 (11%) felt that the review was well-structured and only a third (35%) said that they had received the training identified. The proportion of staff having an appraisal has increased in all other types of trust (from 58% in 2006 to 64% in 2008), while rates among ambulance staff have fallen from 46% in 2006 to 41% in 2008.

Opportunities to develop and access to training

Forty per cent of staff across the NHS reported that they had good development opportunities at work, with 45% agreeing that there was strong support for training in their area of work. Fifty-seven per cent of all staff felt that they were both supported to keep up to date with developments in their field and encouraged to develop their own expertise, but a smaller proportion of ambulance staff, 32% and 37% respectively, agreed with these statements.

Opportunities for development were reflected by the majority (95%) of staff reporting having had some type of training in the previous 12 months. Attending taught courses was the most common form of training, learning or development (68%), but there was also an increase in self-accessed learning (34%) compared with 26% in 2007 and 20% in 2006. Crucially, 80% of those who had accessed training in the past year felt that it had helped them to do their job better or to keep up to date with their job and/or professional requirements. This is a clear improvement on previous years, up from 77% in 2006 and 2007.

3. Maintaining health, wellbeing and safety

The survey shows substantial improvements in the provision of hand-washing and cleaning facilities, in the proportion of staff being trained in the control of infection and in the promotion of infection control to staff, patients and the public. The proportion of staff suffering work-related injuries and work-related

stress has fallen. Although the number of staff who had witnessed an error, near miss or incident that could have hurt staff or patients has risen, so too has the proportion of staff saying that such incidents were reported. Encouragingly, more staff now feel encouraged to report errors, near misses and incidents. The extent to which NHS staff experience violence from patients (or their relatives) is largely unchanged, but fewer staff say they were subject to bullying, harassment or abuse from patients. Again, staff appeared more likely to report such incidents, and were more confident that their trust would take effective action when they did so.

Availability of hand-washing materials

There has been a considerable increase (71% in 2008 compared with 61% in 2007) in the proportion of staff saying that hot water, soap and paper towels or alcohol rubs were “always” available when they needed them. A further 23% reported that they were available “most of the time”. Sixty-three per cent of staff said that hand-washing materials were always available to patients (and 20% said most of the time). This is an equally dramatic increase – the equivalent figures for 2007 being 52% and 26%.

These improvements are echoed by the substantial rise in the proportion of staff saying that they have had training from their trust in the control of infection over the last 12 months. This proportion has have risen from 50% in 2006 and 53% 2007, to 62% in 2008. Among staff that had frequent contact with patients, 85% said that they had received infection control training – including 68% who had received this training in the last year.

Promotion of infection control

The majority of staff in acute trusts agreed that their trust does enough to promote hand-washing for staff (88%), and for patients or visitors (79%). In both cases, the figures are substantially higher than last year (82% and 71% respectively). Overall, 85% of staff agreed that infection control applies to them in their role, a figure that rises to 89% among staff that have face-to-face contact with patients and to 93% among those with **frequent** face-to-face contact with patients (these figures are the same as in 2007).

Work-related stress and injuries

There has been a marked reduction in the proportion of staff (28%) who said they had suffered from work-related stress in the last year compared with 2007 (33%) and 2006 (33%).

Moving and handling injuries (10%) were the second most common cause of work-related injuries or illness across the NHS, but were unsurprisingly substantially higher (30%) among ambulance trust staff. Seventy-four per cent of staff across the NHS had received health and safety training in the last 12

months, a rise from 71% in 2007 and 70% in 2006, but the figure for ambulance staff was strikingly lower at 34%.

Errors, near misses and incidents

Thirty-five per cent of staff said that they had seen at least one error, near miss or incident that could have hurt staff or patients in the last month. This is higher than the 31% in 2007, but down from 38% in 2006. Among staff on the front line, 43% said that they had witnessed at least one such adverse event.

The NHS Constitution calls for a climate in which the views of staff can be heard. The importance of open cultures in securing safety is clear in other sectors. It is therefore encouraging that nearly all staff (96%) reported the most recent error, near miss or incident they had witnessed, which is two percentage points higher than in 2007. Data were comparable across all types of trust with the exception of ambulance trusts, where a lower percentage (89%) of staff said that they reported witnessed errors, incidents and near misses.

Eighty per cent of staff felt encouraged to report errors, near misses and incidents, an increase of five percentage points from 2007, and only a small proportion (11%) felt that reporting of errors would lead to punishment or blaming of those involved, similar to in 2007. Nearly 60% of staff felt that incident reporting was handled confidentially, an increase from 54% in 2007, and 54% of staff thought that action was taken to prevent similar errors occurring in the future. Although reporting rates were high, the percentage of staff that felt informed about (32%), or given feedback (35%) on changes made as a result of errors, near misses and incidents is low. However, both figures have increased slightly from the respective 31% and 33% seen in 2007. Comparatively, a lower proportion of staff in ambulance trusts felt informed about (17%) or received feedback on the trust's response (20%) to adverse events.

Violence, harassment, bullying and abuse

Twelve per cent of NHS staff reported experiencing physical violence from patients (or their relatives) in the previous 12 months. This figure has remained relatively unchanged over the past four years. Not surprisingly, the figures are higher (at 16%) among front-line staff and among all staff in mental health (20%) and ambulance (27%) trusts.

While levels of physical violence remained unchanged, fewer staff (23% in 2008 compared with 26% in 2007 and 28% in 2006) report that they experienced bullying, harassment and abuse from patients (or their relatives). Among front-line staff, 28% said they experienced this abuse from patients or their relatives, a fall from 32% in 2007. Fifty-three per cent of staff said they had received training in the prevention or handling of violence and aggression

(28% had this training in the last 12 months). This is an increase from 49% in 2007, (26% of staff received the training in the last 12 months).

Around 2% of all staff said they had experienced physical violence from other staff (an increase from a little over 1% in previous years). However, around one in six (18%) had experienced bullying, harassment or abuse from either their line manager or other colleagues, similar to previous years.

The survey also suggests an improvement in the reporting of incidents of violence and abuse. Nearly three-quarters (71%) of incidents of physical violence and over half (53%) of bullying, harassment or abuse cases were reported, an increase from 66% and 49% respectively in 2007. There is an increase in the proportion of staff who feel that their trust would take effective action if staff were physically attacked by patients, relatives or other members of the public, from 53% in 2007 to 56% in 2008. About half of the staff who have actually experienced an incident of physical violence themselves, and four out of 10 of those who have experienced bullying, harassment or abuse, felt that their trust would take effective action, which is an increase of two percentage points from 2007.

4. Engaging staff in decisions that affect them

The NHS Constitution was published in January 2009 (after the survey was conducted) and outlines the principles and values of the NHS in England. There is still some way to go before all staff understand the vision of the NHS and are aware of the contribution they can make as individuals and as a trust. Many staff feel they have an opportunity to improve the way they work in their team or department, they tend to feel excluded from wider decision-making and there is a strong view that senior managers don't act on feedback from staff. Overall, less than a third are satisfied with the extent to which their trust values their work – although this has increased substantially since 2007. In some trusts, over half (56%) of staff are satisfied with the extent to which the trust values their work; in others it is only 11%.

Vision

Staff were asked four new questions in 2008 on how they viewed their role in the context of the objectives of their trust, and the NHS as whole. Just over half (51%) of all staff said they understood the national vision for the NHS and that they knew how their trust contributes to what the NHS is trying to achieve (52%). On both of these statements, around a third (33% and 35% respectively) of staff neither agreed nor disagreed. Equally, a little over half (55%) of all staff said that they know how their role contributes to what their trust was trying to achieve. Again, around a third (30%) neither agreed nor disagreed.

However, fewer than half (47%) of all staff believed that their trust communicates clearly on these aims, with one in five (21%) saying that it does not do so and a third being neutral. Among staff in ambulance trusts, the proportion disagreeing with this statement is markedly higher at 39% with just under a third (31%) agreeing.

Improving the way we work

The majority of staff felt able to make suggestions on how they could improve the work of their team or department (72%), and felt that they have frequent opportunities to show initiative in their role (63%), although fewer (55%) agreed that they were able to make these improvements a reality.

Trust management

The 2008 survey asked new questions on how organisations were managed, and found that under half (44%) of all staff felt that healthcare professional and managers worked well together. While two-thirds of staff (68%) could identify who the senior managers are in their trust, only a quarter (27%) felt that their managers involved staff in important decisions, with a third feeling that managers encouraged staff to suggest new ideas. Less than a third of staff in acute trusts (29%), PCTs (32%) and mental health trusts (31%), and only 13% of staff in ambulance trusts, reported that senior managers acted on feedback from staff.

5. Other Key findings

Job satisfaction

The concept of job satisfaction has several facets and the survey asks about these in detail. Overall, although job satisfaction fell in 2006 and 2007, results have improved in 2008. Overall, the majority of staff were satisfied with the support they received from colleagues (76%) and from their immediate manager (59%). Similarly, most were satisfied with the levels of responsibility given to them (71%) and the opportunities they have to use their skills (66%) and to choose their working methods (63%). However, only a third (34%) were satisfied with their level of pay and, while the majority (85%) of staff felt valued by their work colleagues, less than a third (31%) were satisfied with the extent to which their trust values their work. Although this is a substantial increase from the 26% seen in 2007, we note that satisfaction is considerably lower among staff in ambulance trusts (18%).

Staff turnover

Intention to leave was significantly lower than in previous years, with only 31% of staff reporting that they often felt like leaving their trust compared with 36% in 2007. Twenty-one per cent reported that they would probably look for another job in the next year, three percentage points lower than in 2007, and 15% said that they would leave as soon as they could find another job (18% in 2007). The most common reasons for leaving were the same as in 2007: not feeling valued, need for career development and dissatisfaction with the level of pay. There were no differences between sectors in the reasons for leaving, but we note that a larger proportion of ambulance staff (22%) cited “not feeling valued by their employer” as a reason to leave compared with the 16% average across all staff.

Staff as advocates

A new question in 2008 tells us that just over half (51%) of all staff would recommend their trust as a place to work. Again, the figure is significantly lower in ambulance trusts at 37%. Note that a comparatively high proportion (34%) of NHS staff neither agree nor disagree with this statement. Overall, the proportion who disagree (that is, they would not recommend their trust as a place to work) is comparatively small at 15%.

Equality and diversity

Equality and diversity are at the heart of the NHS workforce strategy. Overall, 89% of staff across the NHS agree that their trust acts fairly with regard to career progression and promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age. This is an improvement on the 2007 figure of 87%. However, 8% of staff said that they had experienced some sort of discrimination at work in the previous 12 months. This is the same as the figure reported in both 2007 and 2006. This includes 3% who said that they experienced discrimination on the basis of their ethnic background (12% among black and minority ethnic employees) and 1% each on the basis of gender (2% of men and less than 1% of women), disability and age (2% of staff over the age of 50). Less than 0.5% of staff said that they experienced discrimination on the grounds of sexual orientation or religion. All of these figures are unchanged from 2007 and from 2006.

In 2008, 55% of all NHS staff had received training in equality and diversity during their employment at their NHS trust, including a third who had attended such training in the last 12 months.

Next steps

The NHS Next Stage Review recognised the importance of the national NHS staff survey and highlighted its potential to support greater emphasis on engaging with staff. The survey is a vital tool for NHS employers to improve working conditions and practices at a local level. It will contribute to assessing how well NHS organisations are delivering the NHS Constitution and its pledges to staff, and should help organisations to address the issues that really matter to staff.

The survey found that less than a third of staff agree that senior managers act on feedback from staff. All trusts have now received their individual survey results, including detailed feedback on how they compare with other similar trusts. They need to convey these results to staff, involve them in tackling the issues where performance is weakest and communicate what actions they are taking. Reports on each NHS trust are available on the Care Quality Commission's website:

<http://www.cqc.org.uk/usingcareservices/healthcare/nhsstaffsurveys/2008nhsstaffsurvey/trustsurveyreports.cfm>

These findings will also be used in the annual health check for 2008/2009, which assesses whether healthcare organisations are meeting the standards and targets set by Government.

1. www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_08582
2. www.dh.gov.uk/nhsconstitution