

REPORT TO THE TRUST BOARD 20 MAY 2021

Title	Progress Report People Plan
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Purpose of the Report:

To update the Trust Board on the progress as outlined in the ELFT People Plan. This paper also provides assurance in terms of the response to COVID-19 as well as an update in terms of general People & Culture activities.

Summary of Key Issues:

This paper sets out to give an update in terms of People & Culture activities. We continue to support staff in terms of COVID-19 i.e. staff swab and lateral flow testing, COVID-19 vaccination, parking, vitamin D supplements for staff accommodation and childcare support.

The Trust continues to promote risk assessments all staff including new joiners and to review risk assessments for existing staff when an individual's circumstances change. The Trust have also rolled out Wellbeing conversations as required in the NHS People Plan.

ELFT as lead employer for NEL mass vaccinations sites is progressing well and we have received very positive feedback from the deep dive that was commissioned by NHS England, in terms of the pace and efficiency within which ELFT mobilised. There is an infrastructure in place and we have been able to respond to the requests for staffing – across NEL including Primary Care Networks despite the concerns about the staffing pipeline from NHS Professional and Bank Partners.

All asymptomatic ELFT staff (except for those who regularly work from home) have access to a regular twice-weekly lateral flow testing programme. A pilot for saliva based LAMP (loop-mediated amplification (LAMP) technology) testing is currently being set up across NEL. Staff vaccination continues to take place with staff being able to access service at Westfield vaccination site in London, in Luton and Bedfordshire via a dedicated CCG route.

The demand for accommodation has significantly reduced and consideration is being made to route requests via the normal accommodation booking process. We continue to process parking permits – but we expect the local authority provision to curtail given the easing of restrictions.

We continue to encourage managers and staff to continually review risk assessments in order to mitigate the risk to staff and their families.

Employee Relations activity remains high, although a number of cases have been closed in the previous month. There are two high-risk cases that we are trying to settle and a number of cases that we seek to settle in terms of value for money. All are subject to HM treasury approval. We are commencing a project called Respectful Resolution to increase the uptake of informal solutions for aggrieved staff whilst decreasing formal investigations. Statutory and mandatory training is remains around 83% compliance. Organisational Development (OD) activity is on the increase and the demand continues to rise. A request for additional non-recurrent OD resources has been made in order to meet the demand from services.

Chair: Mark Lam 1 Chief Executive: Paul Calaminus

Strategic priorities this paper supports

Improved patient experience	\boxtimes	There is a strong evidence base that engaged staff provide better patient care and outcomes for service users.
Improved health of the communities we serve	×	We are taking a population health approach to staff wellbeing.
Improved staff experience	X	The approach to improvement sets out in this paper are designed to directly improve staff experience
Improved value for money	×	There is a strong evidence base that engaged staff and more health and productive at work and, therefore, contribute to value for money

Committees/Meetings where this item has been considered:

Date	22 April 2021
Various	This paper was discussed at the Appointments and Remuneration Committee.

Implications:

Equality Analysis	The Trust's action plan is designed to improve equality through the
	reduction in variation between different staff groups.
Risk and Assurance	If staff are not engaged at work, there is a clear risk that patient care will
	be adversely affected.
Service	As above, the work in this area is designed to improve staff experience.
User/Carer/Staff	Evidence shows a clear link between staff experience and patient care.
Financial	Evidence shows that high staff engagement is strongly correlated with
	low sickness absence levels, which has a financial benefit to the Trust.
Quality	Evidence shows a clear link between staff satisfaction and patient care.

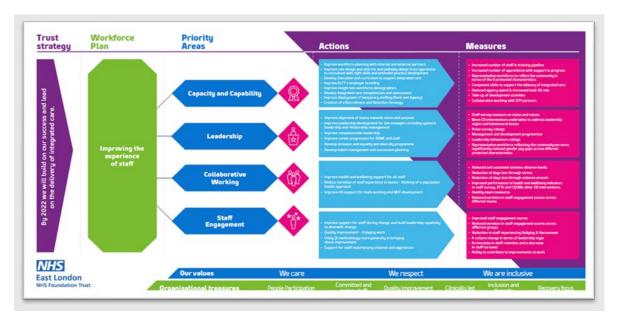
Glossary:

B&H	Bullying & Harassment
BLS	Basic Life Support
BHRUT	Barking, Havering and Redbridge University NHS Trust
C&H	City & Hackney
CCG	Clinical Commissioning Group
CHS	Community Health Services
COT3	Is a legally binding enforceable contract
CTM	Corporate Travel Management
EDI Activity	Equality, Diversity Inclusion Activity
ELFT	East London Foundation Trust
ER	Employee Relations
ET	Employment Tribunals
FTSU	Freedom To Speak Up
GMC	General Medical Council
HUFT	Homerton University Hospital, , and
ICS	Integrated Care System
LAMP	Loop-Mediated Amplification (LAMP) Technology
NEL	North-East London
NELFT	North East London NHS Foundation Trust
NGO	Non-Government Organisation
NSS	National Student Survey

NTS	National Training Survey
OD	Organisational Development
P&C	People & Culture
PCR	Polymerase Chain Reaction
TH CHS	Tower Hamlets Community Health Services
TUPE	Transfer of Undertakings (Protection of Employment) Regulations

1. Background

1.1 Delivery of the Trust people plan (formally the Workforce plan) continues to progress well.



- 1.2 This paper sets out to provide assurance as well as a progress report on the delivery against the People Plan. The Trust's four key priorities are:
 - Improved Population Health Outcomes
 - Improved experience of Care
 - Improved Staff Experience
 - Improved Value.

2. COVID-19

2.1 We continue to have People & Culture (P&C) silver command meeting once a week. For efficiency, we have amalgamated the COVID-19 project and Mass Vaccination project teams who continue to focus on testing, vaccination and risk assessments. The COVID-19 team also continue to support staff with accommodation, for which the demand is minimal and car parking.

3. Large Scale Vaccination Sites - NEL Lead Employer

3.1 ELFT have been confirmed by North East London (NEL) Integrated Care System (ICS) to be the lead employer for large vaccination sites, to deploy staff across North East London. These include Homerton University Hospital (HUFT), Barking, Havering and Redbridge University NHS Trust (BHRUT), North East London NHS Foundation Trust (NELFT) and East London Foundation Trust (ELFT). Barts Health NHS Foundation Trust are excluded as they are responsible for staffing the large vaccination site at Excel.

A 'deep dive' was commissioned by NHS England and very positive feedback was received in terms of the pace and efficiency within which ELFT mobilised. There is an infrastructure in place and we are able to respond to the requests for staffing – despite the concerns about the staffing pipeline from NHS Professional and Bank Partners.

4. Staff Testing

- 4.1. Now all asymptomatic ELFT staff (except for those who regularly work from home) have access to a regular twice-weekly lateral flow testing programme. Testing kits re being made available across the trust, with monitoring and reporting systems put in place. Staff with COVID-19 symptoms are required to access test via national NHS testing service.
- 4.2. A pilot for saliva based LAMP (loop-mediated amplification (LAMP) technology) testing is currently being set up across NEL, prioritising staff who regularly visit care homes as part of their work. Pilot will be taking place in Tower Hamlets and Newham Community Health Services starting end of April.
- 4.3. As part of the LAMP project, East London Foundation Trust have also requested access to the LAMP tests for service users and patients who have a learning disability, who are requiring a negative COVID-19 test prior to accessing respite services. This has been approved as a pilot in order to offer a reasonable adjustment when this cohort of people are unable to tolerate more invasive procedures such as a Lateral Flow or PCR Test. the testing pathway for this project is currently being developed.

5. Staff Vaccinations for COVID-19

5.1. Staff vaccination continues to take place with staff being able to access service at Westfield vaccination site in London, in Luton and Bedfordshire via a dedicated CCG route.

6. Staff Accommodation

6.1. Following the end of the national lockdown, and the significant decline in request for accommodation, the P&C Silver command group are considering stopping the additional offer of accommodation outside of the regular accommodation booking process i.e. the CTM (Corporate Travel Management) platform, which was put in place to support staff who needed accommodation because they have relatives who are protecting due to vulnerabilities. Staff should approach their managers to discuss their eligibility for accommodation based on the criteria outlined in the guidance, which includes their risk assessment.

7. Car parking

7.1. Some local London Boroughs are continuing to support free car parking for healthcare staff if their travel is related to legitimate NHS business. COVID-19 team continues issuing parking permits for ELFT key workers. However, with lockdown easing up in London, we anticipate that some boroughs will stop the support free parking. We continue to monitor and share the updates.

8. People & Culture Policy and Guidance

8.1. During the main phase of the COVID-19 pandemic, some of our People & Culture policies were revised to make special, temporary provisions to support staff, for example, to support taking certain types of leave. We are regularly reviewing these policies and guidance documents to ensure that these changes remain fit for purpose.

9. Communications

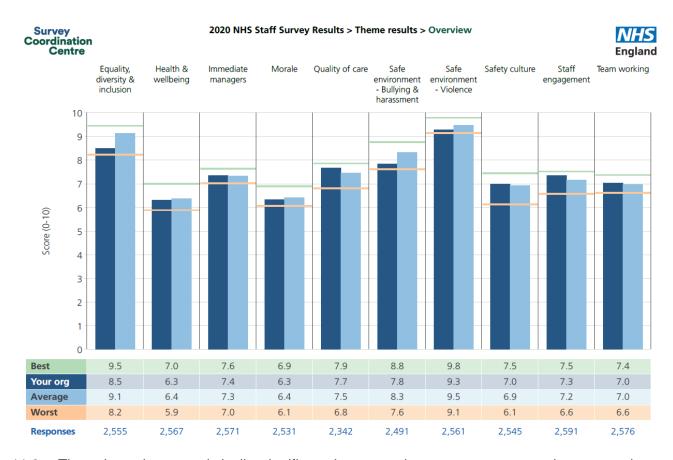
9.1. We are in the process of updating our staff-facing communications related to ELFT's provision for staff during the pandemic. These changes reflect developments in the wider environment as the country emerges from lockdown, as well as changes to some of the arrangements that we put in place for staff at the start of the pandemic. We are seeking to reflect upon and learn from ELFT's experience of supporting and protecting staff through the pandemic. We want to understand how we can best strengthen and build on this for the future.

10. Risk Assessments for staff

- 10.1. We continue to encourage managers and staff to continually review risk assessments in order to mitigate the risk to staff and their families.
- 10.2. We have continued to review and update the risk assessment process, form and guidance with our Occupational Health provider, Team Prevent, and have engaged with the ELFT Ability Network. We are always working through how to sustain the risk assessments and to make it a part of the on-boarding process. We are working collaboratively with Staff side to focus on how we support managers to have meaningful conversations in order to mitigate the risks to our staff.

11. NHS Staff Survey 2020

11.1. A summary of the Trust Staff Survey themes can be found below:



11.2. There have been statistically significant increases in responses to questions around wellbeing and staff morale.





The table below presents the results of significance testing conducted on this year's theme scores and those from last year*. It details the organisation's theme scores for both years and the number of responses each of these are based on.

The final column contains the outcome of the significance testing: \uparrow indicates that the 2020 score is significantly higher than last year's, whereas \checkmark indicates that the 2020 score is significantly lower. If there is no statistically significant difference, you will see 'Not significant'. When there is no comparable data from the past survey year, you will see 'N/A'.

Theme	2019 score	2019 respondents	2020 score	2020 respondents	Statistically significant change?
Equality, diversity & inclusion	8.5	2779	8.5	2555	Not significant
Health & wellbeing	6.0	2798	6.3	2567	1
Immediate managers †	7.2	2800	7.4	2571	Not significant
Morale	6.2	2737	6.3	2531	1
Quality of care	7.7	2549	7.7	2342	Not significant
Safe environment - Bullying & harassment	7.8	2763	7.8	2491	Not significant
Safe environment - Violence	9.2	2767	9.3	2561	Not significant
Safety culture	7.0	2764	7.0	2545	Not significant
Staff engagement	7.3	2834	7.3	2591	Not significant
Team working	7.0	2801	7.0	2576	Not significant

 $[\]star$ Statistical significance is tested using a two-tailed t-test with a 95% level of confidence.

11.3. The full staff survey report can be found in Appendix 2. Details of how the Trust performed against other Trusts can be found overleaf.

NHS Staff Survey Themes	ALL TRUSTS	ALL ACUTE TRUSTS	LONDON AVERAGE	LONDON UPPER QUARTILE	LONDON LOWER QUARTILE	East London NHS Foundation Trust
Response Rate	47%	45%	53%	59%	44%	44%
Equality, diversity & inclusion	9.03	9.01	8.53	8.72	8.38	8.5
Safety culture	6.83	6.75	6.85	7.00	6.67	7.0
Health & wellbeing	6	6	6	6	6	6.3
Immediate managers	6.96	6.80	6.96	7.24	6.71	7.4
Quality of care	7.50	7.50	7.67	7.81	7.57	7.7
Morale	6	6	6	6	6	6.3
Staff engagement	7	7	7	7	7	7.3
Safe Environment - Bullying & harassment	8.12	8.05	7.84	8.06	7.62	7.8
Safe Environment - Violence	9.47	9.46	9.43	9.57	9.29	9.3
Teamwork	6.59	6.49	6.68	6.99	6.50	7.0
Top quartile scores						4
Bottom quartile scores						1

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[†] The calculation for the immediate managers theme has changed this year due to the omission of one of the questions which previously contributed to the theme. This change has been applied retrospectively so data for 2016-2020 shown in this table are comparable. However, these figures are not directly comparable to the results reported in previous years. For more details please see the technical document.

11.4 Details of the Trust's 5 best and 5 worst performing scores can be found below.

Satisfied with level of pay	37%
Organisation definitely takes positive action on health and well-being	37%
Don't work any additional unpaid hours per week for this organisation, over and above contracted hours	35%
I have realistic time pressures	26%
Not put myself under pressure to come to work when not feeling well enough	8%

Not experienced physical violence from managers	99%
Not experienced physical violence from other colleagues	98%
Know how to report unsafe clinical practice	96%
Feel trusted to do my job	91%
Feel my role makes a difference to patients/service users	91%

11.5 **Staff Survey Themes 2017- 2020**

- **Wellbeing** in 2020 we have seen an improvement to 6.3 which is just below the national average of 6.4, having been static at 6.0 in 2018 and 2019.
- Immediate Line Managers in 2020 we have seen an improvement to 7.4 which is just above the national average of 7.3, having been static at 7.2 in 2018 and 2019.
- **Morale** We have seen morale increase year on year from 6.1 in 2018, 6.2 in 2019 and 6.3 2020 against a national average of 6.4.
- Quality of Care in 2016 this was 7.9 and this has reduced in 2017 to 7.7 and has remained static at 7.7 between 2018 and 2020 against a national average of 7.9 in 2020.
- Safe Environment Harassment and Bullying reduced from 8.0 in 2017 to 7.9 in 2018. This figure reduced again in 2019 to 7.8 and has remained static against a national average of 8.3.
- Safe Environment Violence a static score of 9.2 in 2017, 2018 and 2019 improving to 9.3 in 2020 against a national average of 9.5.
- **Safety Culture** the score has been consistent at 7.0 between 2017 and 2020 against a national average of 6.9.
- Staff Engagement scores have been static at 7.3 in 2018, 2019 and 2020 against a national average of 7.2
- **Team Working** the scores have been static at 7.0 in 2018, 2019 and 2020 at 7.0 against a national average of 7.0

The staff survey results and themes can be found in Appendix 2.

12. Employee Relations Activity Report March 2021

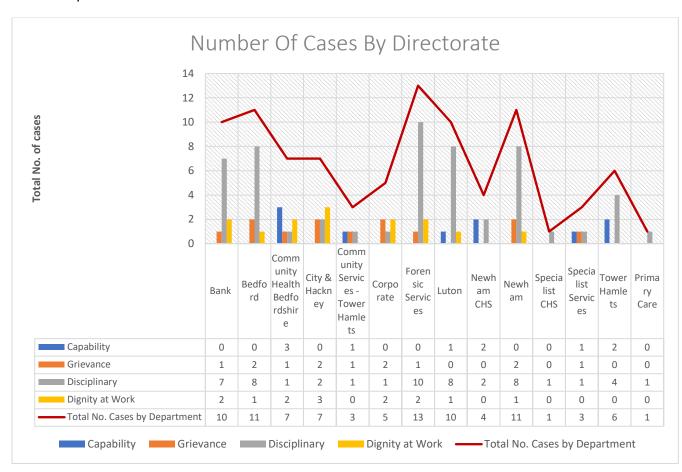
- 12.1. In total, there are: 92 live ER cases plus 8 Employment Tribunal cases, 1 EAT & 2 ACAS, 91 long-term sickness cases, (this figure does not include long term COVID-19 cases which are being managed informally) and 300 short-term sickness cases being managed by the People Relations team.
- 12.2. Employee Relations activity remains high, although a number of cases have been closed in the previous month.

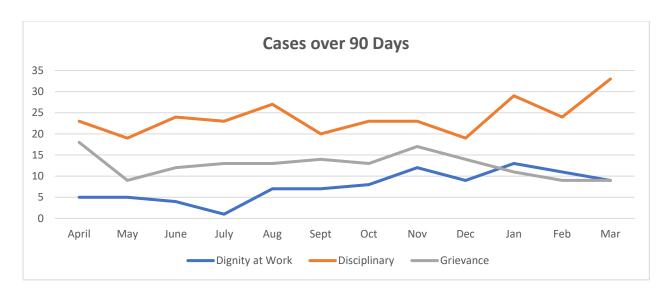
12.3. We are commencing a project called Respectful Resolution to increase the uptake of informal solutions for aggrieved staff whilst decreasing formal investigations.

13. ER Case Breakdown by Month

Case Type	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Capability	18	15	14	14	13	11	11	11	10	10	10	10	10
Dignity at Work	5	5	7	10	9	12	13	14	20	15	16	12	14
Disciplinary	41	42	43	48	46	41	41	38	36	40	40	55	53
Disciplinary (Medical)	1	1	1	1	1	1	1	1	1	1	1	1	2
Grievance	21	21	17	19	17	21	21	20	23	20	18	14	13
Tribunals	8	8	9	8	9	9	8	11	10	10	10	11	8
Total	94	92	91	100	95	95	96	95	100	95	95	103	100

The number of Disciplinary cases has decreased by 2. Capability cases have remained the same. Dignity at Work have increased by 2 and & Grievances cases have decreased by 1 since the last report.



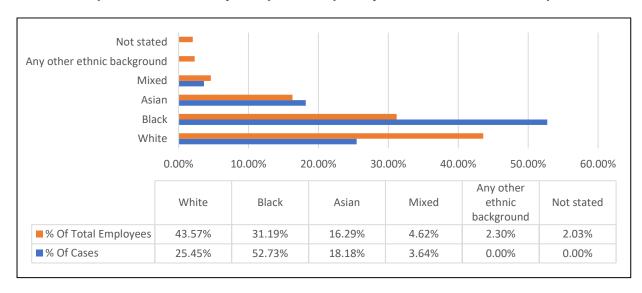


The highest numbers of cases beyond 90 days are Disciplinary cases. A review is underway to look at further ways to reduce the length of ER cases.

14. Number of suspensions per month

Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
2	2	2	2	2	2	2	1	1	1	2	2	2	4	4	5

15. Comparison of Ethnicity of Open Disciplinary cases with the Ethnic split of Trust



16. Summary of Employment Tribunal cases

- 16.1. There are currently 8 ETs. (Three closed this month. 2 settled via a COT3 agreement & 1 withdraw his claim). One of the 8 ETs has been re-scheduled to June 2021 due to COVID-19, one is on hold due the person being ill, but an application has been submitted to strike the claim out and one is awaiting a decision from the ET.
- 16.2. There are two high risk ET cases that we are trying to settle and a small number of cases that we seek to settle in terms of value for money. All are subject to HM treasury approval.

17. Triangulation of Bullying & Harassment Cases

The People Business Partners have triangulated the cases which are live – focusing on Dignity at Work (Bullying & Harassment), Grievances, Freedom to Speak up, Whistleblowing and Mediation cases against Staff Survey data. In most instances the staff survey data was congruent with the case activity.

Directorate	Narrative	Live Cases
Corporate Services	The Staff Survey 2020 data for Corporate Directorate gives a Safe Environment (B&H) score of 8.6 out of 10, compared to the ELFT score of 7.8 out of 10. The Staff Survey 2020 data, it is clear that both Corporate and Specialist Services Directorates scored higher on the Safe Environment (B&H) category when compared to the average ELFT score of 7.8. This would indicate that the majority of staff have not experienced B&H at work. However, this is in contrast to the high number of B&H cases detailed (21). This could be because some staff who may have experienced B&H did not complete their staff survey in 2020. It could also be assumed that staff feel comfortable to report B&H in Corporate and Specialist Services, due to the high number of B&H cases.	Grievances 8 Bullying & Harassment 2 Freedom to Speak Up 0 Medication 4
Specialist Services	The Staff Survey 2020 data for Specialist Services Directorate gives a Safe Environment (B&H) score of 8.2 out of 10, compared to the ELFT score of 7.8 out of 10. The Staff Survey 2020 data for Specialist CHS Directorate gives a Safe Environment (B&H) score of 8.7 out of 10, compared to the ELFT score of 7.8 out of 10.	Grievances 1 Dignity at Work (Bullying & Harassment) 1 Freedom to Speak Up 2 Mediation 3
Newham Mental Health	Out of the 15 FTSU cases reported 7 (4 Live/Open) cases have been related to B&H concerns. Out of the 163 respondents that filled in the annual staff survey 89% reported not experiencing B&H behaviour from managers and 82% reported not experiencing from colleagues which is higher than scores in 2019. Overall Newham scored 7.7 on Safe Environment (B&H) theme which is slightly lower than the overall ELFT score of 7.8. Only 59% of the respondents said that they had reported their last experience of B&H which is 8% lower than last year survey results.	Grievances 1 Bullying & Harassment 1 Freedom to Speak Up 1 Whistleblowing 5 Mediation 1

Chair: Mark Lam 11 Chief Executive: Paul Calaminus

Tower Hamlets Mental Health	Out of the total 26 FTSU cases reported so far 12 cases (6 Live/Open) have been related to B&H concerns. Out of the 280 respondents that responded to the annual staff survey 88% reported not experiencing B&H behaviour from managers and 83% reported not experiencing from colleagues. Overall TH scored 7.5 on the Safe Environment Theme as compared to the over ELFT score of 7.8.Only 63% of the respondents said that they had reported their last experience of B&H which is 3% lower than last year survey results.	Grievances 0 Dignity at Work (Bullying & Harassment) 0 Freedom to Speak Up 12 Mediation 0
Bedfordshire Community Health	The staff survey results present a static picture compared to NSS19 with regards to B&H with no statistically significant differences year on year. The NSS indicates that 5% of respondent's equating to approx. 12 people have experienced B&H from Line Managers. With only 5 formal cases related to B&H within BCHS it would indicate that a significant amount of people who used to the NSS to indicate they had experienced B&H are either not coming forward for support and resolution or that informal methods of resolution have been successful. With only 49% of respondents indicating they had reported the last incident. Although 87% of respondents report no experience of B&H from other colleagues - that leaves approx31 people who were unable to say that had not experienced B&H from colleagues out of a headcount of approx. 450 It's positive to note that 100% of respondents had not experienced physical violence from ELFT employees. Although 5% of respondents approx. 12 people have experienced violence from other work related contacts.	Grievances 1 Bullying & Harassment 4 Freedom to Speak Up Mediation 0
Community Health Newham	The Grievance cites working relationships, working practices, working environment, working conditions and management decisions. There are a series of Freedom to Speak up concerns and Whistleblowing complaints which are being investigated via an external review commissioned by the Chief Nurse.	Grievances 1 Bullying & Harassment 3 Freedom to Speak Up 3 Whistleblowing 1 Mediation 1

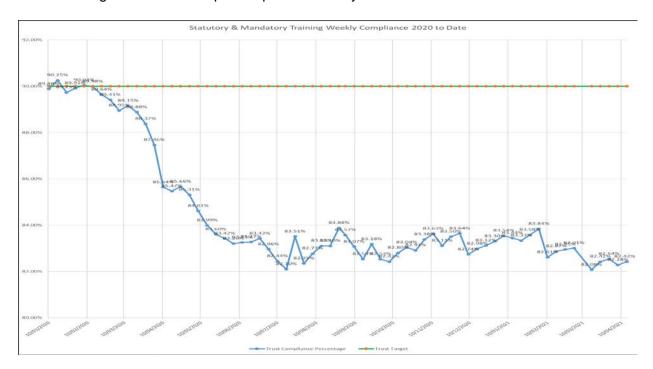
Chair: Mark Lam 12 Chief Executive: Paul Calaminus

Community Health Tower Hamlets	TH CHS directorate at(7.3%)is lower compared to The trust wide result of 7.8%	Grievances 1 Bullying & Harassment 0 Freedom to Speak Up Whistleblowing 1 Mediation 3
City & Hackney	The reasons outlined for the majority of the cases are: Grievance Working relationship, working practice, working environment Dignity at Work Victimisation. The staff survey results for Safe Environment – Bullying & Harassment indicated C&H - Inpatient ward (6.7%)	Grievances 2 Bullying & Harassment 2 Freedom to Speak Up 0 Whistleblowing 10 Mediation 0
Forensics	Forensics - Male Medium Secured Ward (5.6%) and Other clinical service (6.9%) compared to the Trust wide result of 7.8%.	Grievances Bullying & Harassment 1 Freedom to Speak Up Whistleblowing 2 Mediation
Bedfordshire	These cases are reflective of the staff survey data, as the majority of them sit within crisis pathway. The cases with inpatient areas and admin are reflective in the staff survey.	Grievances 3 Bullying & Harassment 1 Freedom to Speak Up Whistleblowing Mediation
Luton	Again the staff survey feedback is congruent with the concerns raised in the staff survey results.	Grievances Bullying & Harassment 1 Freedom to Speak Up Whistleblowing Mediation

13

18. Statutory and Mandatory Training Compliance

- 18.1. Compliance levels remain at around 83% as they have done for the past few months. Work continues to promote the completion of e-learning which forms the mainstay of the compliance learning as well as attendance on the limited number of classroom courses that are currently being delivered due to COVID-19 and social distancing concerns.
- 18.2. The delivery model for Basic Life Support (BLS) will be changed from April to change to a blended approach where learners will attend a theory lesson delivered via Zoom and will then be followed up with an individual assessment. This approach will increase the number of individuals that can be trained as well as significantly reducing the social distancing risks. We anticipate improvements by the summer 2021.



19. Medical Education Update - Experiential Learning Centre

- 19.1. Refurbishments are currently taking place on 2nd floor of Alie Street for the new experiential learning centre which will consist of an agile working space, a large multipurpose room to be used for simulation and arts-based education, including somatic learning opportunities (e.g. drama, movement and music work) and 2 simulation rooms equipped with cameras for short teaching videos and reflection exercises.
- 19.2. This will be an excellent opportunity to develop multi-disciplinary team simulation training and innovative learning methods across the Trust. COVID permitting, we are hoping to arrange a face to face grand opening, once works are complete.

20. Impact of COVID on Medical Education

20.1. This has been an exceptional year dominated by clinical and educational efforts to manage the COVID pandemic. The Medical Education Team operating across ELFT's footprint managed to deliver all psychiatry training and student teaching schemes with blended learning arrangements, predominantly through webinars, zoom training sessions. 20.2. With the hard work and dedication of excellent Consultants and Trainees, COVID-19 webinars were delivered very quickly at the start of the pandemic. At the time where there was a lot of uncertainty and anxiety, these webinars provided a platform for all Drs to come together, raise queries, influence policy and have direct contact with Medical management.

21. Medical Education Website

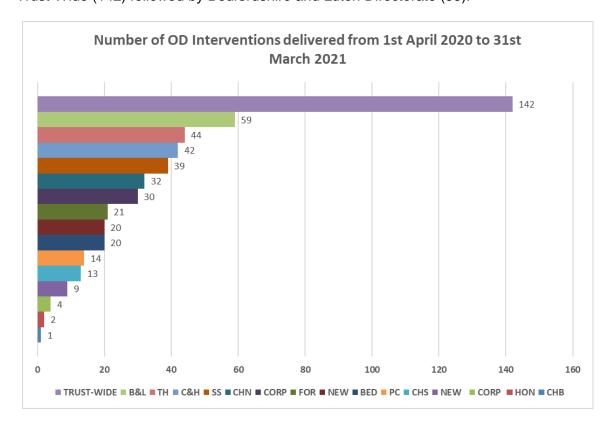
21.1. The Medical Education website is the outward face of Medical Education for prospective Students and Doctors where they can get information on the Medical Education team, details on the different training schemes we cover and job descriptions. We also have a resources section added for internal staff where we store all videos, articles, learning tools we have developed over the years, particularly all the e-resources during COVID.

22. GMC National Training Survey

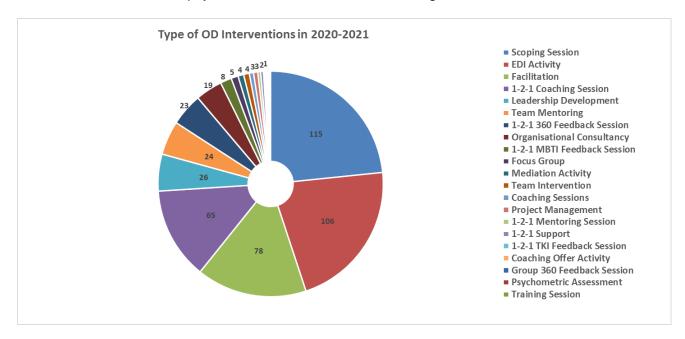
22.1. The GMC will run the 2021 survey slightly later in the hope and expectation that clinical pressures will ease and the survey results will therefore be less impacted by extreme pressures. The new survey live dates are: 20 April 2021 – 18 May 2021 (5 weeks). The GMC are committed to running a regular, full NTS which include programme-specific questions, pandemic specific questions to help prepare for future events, and the bullying/patient safety section. Engagement sessions with Trainees are ongoing informing them of the work that has been done as a result of past feedback.

23. Organisational Development Activity

23.1. In 2020-2021, 492 OD interventions took place. The most OD activity has taken place Trust-Wide (142) followed by Bedfordshire and Luton Directorate (59).



24. In 2020-2021, of the 492 OD activities that took place, the most popular interventions were scoping sessions (115) followed by EDI Activity (106). The least popular interventions were psychometric assessment and training session.



25. Freedom to Speak Up update: 1 March to 13 April 2021

- 25.1. There were 13 FTSU cases recorded from 1 March to 13 April 2021. In this reporting period, the concerns raised by colleagues in Bedfordshire related to Processes / Organisational Structure, in City & Hackney to Processes/Organisational Structure, Patient Safety / Quality of Care, Bullying & Harassment, in CHS Tower Hamlets to COVID-19 related concerns, in Specialist Services to Patient Safety/Quality of Care, Bullying & Harassment, and Processes / Organisational Structure and in Tower Hamlets to Processes / Organisational Structure.
- 25.2. In this reporting period, the theme with the highest frequency was Processes / Organisational Structure / Other. Those were associated with recruitment processes, poor performance management, fraud and unfair treatment of staff.

Table 1.1: Number of concerns raised - by Directorate

FTSU Data for this reporting period by DIRECTORATE	1 st March to 13 th April 2021
Bedfordshire	2
City & Hackney Services	3
Community Health Services - Bedfordshire	0
Community Health Services - Newham	0
Community Health Services - Tower Hamlets	2
Corporate Services	0
Forensic Services	0
Luton	0
Newham	0
Primary Care Directorate	1
Specialist Services	3
Tower Hamlets	2
UNKNOWN	0
TOTAL	13

Bar Chart 1.1: Number of concerns raised - by Directorate

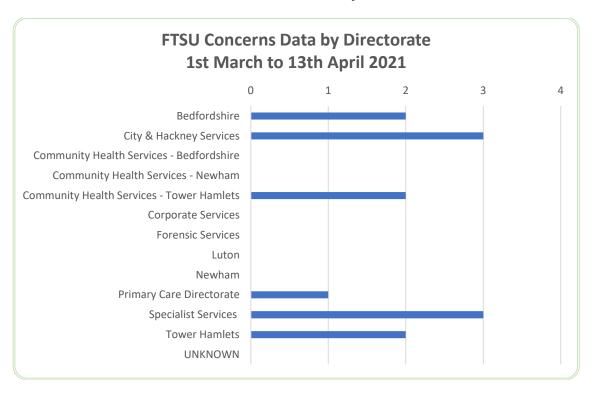


Table 1.2.1: Number of concerns raised - by Theme

FTSU Concerns Data by THEME	1st March to 13th April 2021	
Patient Safety/Quality of Care	2	
Bullying/Harassment/Negative Behaviours	1	
Processes/Organisational Structure/ Other	8	
COVID-19 related	2	
Unknown	0	
TOTAL	13	

Bar Chart 1.2.1: Number of concerns raised - by Theme

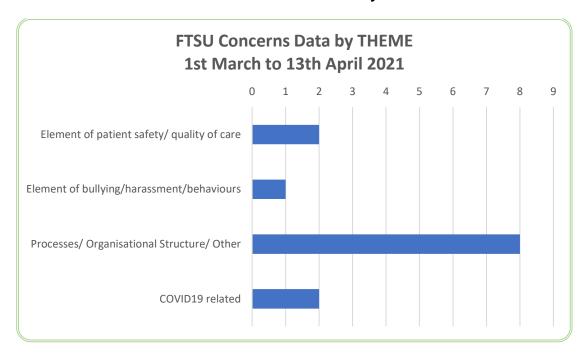


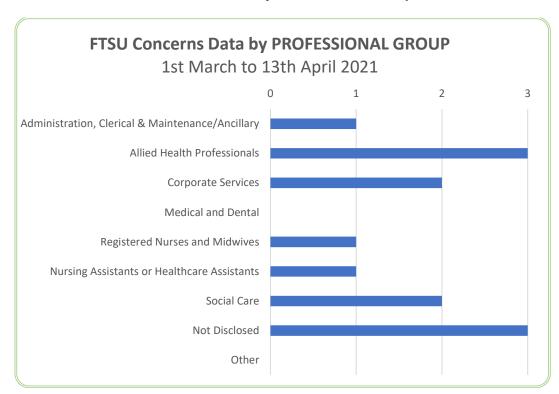
Table 1.2.2: Number of concerns raised - by Theme March and 1 - 13 April 2021

FTSU Concerns Data by THEME	March 2021	1 st - 13 th April 2021	Total
Patient Safety / Quality of Care	2	0	2
Bullying/Harassment/Negative Behaviours	1	0	1
Processes/ Organisational Structure/ Other	6	2	8
COVID-19 Related	2	0	2
TOTAL NUMBER OF CONCERNS RAISED	11	2	13
NUMBER OF CONCERNS RAISED ANNONYMOUSLY	3	1	4
DETRIMENT AS A RESULT OF SPEAKING UP	0	0	0

- 25.3. The Professional Group with the highest concerns were Allied Health Professionals. The Allied Health Professional's concerns regarded patient safety, bullying and harassment and COVID-19 related concerns surrounding health and safety for staff on site.
- 25.4. Concerns raised have been elevated to Service Directors and/or HR as appropriate to the nature of the concern raised.
- 25.5. The Communications Team continue to support FTSU by sharing information in the 'What's New' email:
- 25.6. The FTSU Training packages available via e-Learning for Healthcare (a collaboration between the National Guardian Office and Health Education England) for workers and managers
- 25.7. The National Guardian's Office Annual Report on Freedom to Speak Up
- 25.8. The drive to recruit Freedom to Speak Up Champions continues. The FTSU Champions support an open and honest culture of speaking up in their area/team of work. They will also support colleagues who want to 'speak up' and will signpost and advise them in terms of which avenue is best to bring their concern.
- **26.** FTSU Induction Training was delivered in January and February via virtual sessions during the Corporate Induction Training day.

Table 1.3.1: Concerns raised - by Professional Group

Concerns raised - By PROFESSIONAL GROUP	1 st March to 13 th April 2021
Administration, Clerical & Maintenance/Ancillary	1
Allied Health Professionals	3
Corporate Services	2
Medical and Dental	0
Registered Nurses and Midwives	1
Nursing Assistants or Healthcare Assistants	1
Social Care	2
Not Disclosed	3
Other	0
TOTALS	13



Bar Chart 1.3.2: Concerns raised - by Professional Group

27. Whistleblowing Cases

- 27.1. Currently there are 7 live whistleblowing cases. 5 of which, are within East Ham Care Centre and allege poor patient care, poor management practices and bullying & harassment. An external review has been commissioned by the Chief Nurse and the review is ongoing.
- 27.2. There is a collective complaint in Luton and is being investigated. The complaint alleges bullying and harassment. One is in Forensic services alleging boundary and breaches and is under investigation.

28. Organisational Changes

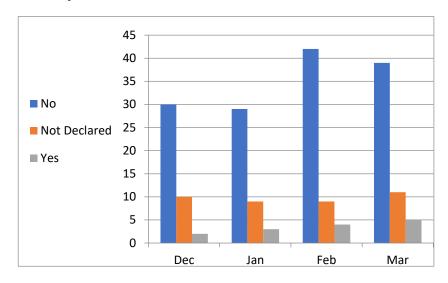
28.1. There are currently 19 organisational changes across the Trust. Which includes TUPE transfers in or out, transformation, changes in delivery models and relocations. There are 177.5 posts affected placing 18.5 people potentially at risk. However, there are 4 possible redundancies expected which we will endeavour to mitigate through redeployment.

29. Action being requested

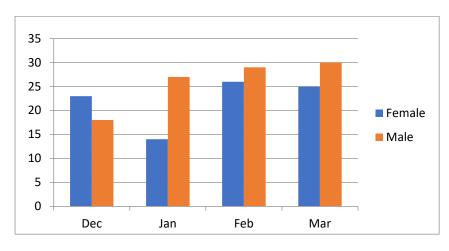
29.1. The Committee is asked to **RECEIVE** and **DISCUSS** the report.

Appendix 1 - Summary of Disciplinary cases by Demographics

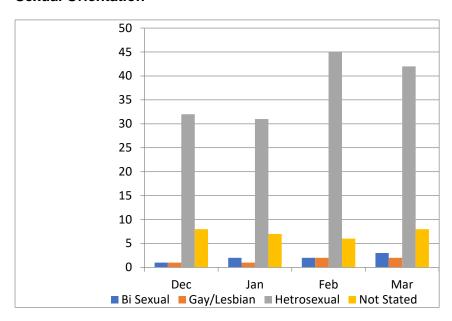
Disability



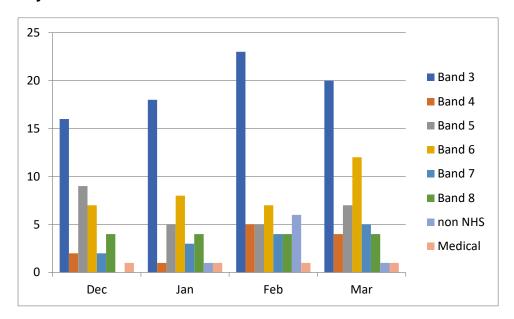
Gender



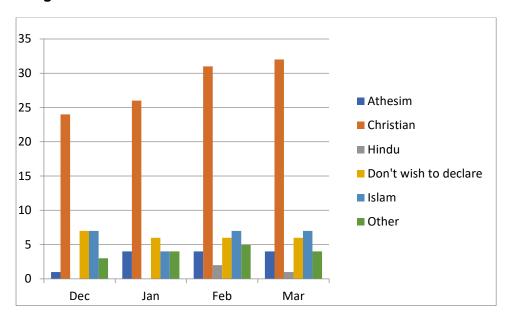
Sexual Orientation



Pay scales



Religion







East London NHS Foundation Trust

2020 NHS Staff Survey

Summary Benchmark Report

Organisation details



East London NHS Foundation Trust

2020 NHS Staff Survey



Organisation details

Completed questionnaires 2,621

2020 response rate 44%

See response rate trend for the last 5 years

Survey details

Survey mode Mixed

Sample type Census

This organisation is benchmarked against:

Mental Health & Learning
Disability and Mental
Health, Learning Disability
& Community Trusts



2020 benchmarking group details

Organisations in group: **52**

Median response rate: 49%

No. of completed questionnaires:

109,280

Using the report



Key features

Ouestion number and text (or the theme) specified at the top of each slide

Question-level results are always reported as percentages; the **meaning** of the value is outlined along the axis. Themes are always on a 0-10pt scale where 10 is the best score attainable

> **Colour coding** highlights best / worst results, making it easy to spot questions where a lower percentage is better – in such instances 'Best' is the bottom line in the table

Keep an eye out!

Number of responses for the organisation for the given question



'Best', 'Average', and 'Worst' refer to the benchmarking group's best, average and worst results



Worst

100

90

70

60

50

2019

19.0%

18.0%

12.1%

2020

24.1%

15.8%

16.8%

13.3%

% of staff saying they experienced at least one incident of bullying, harassment or abuse

Full details on how the scores are calculated are provided in the Technical **Document**, under the Supporting Documents section of our results page

Survey Coordination Centre



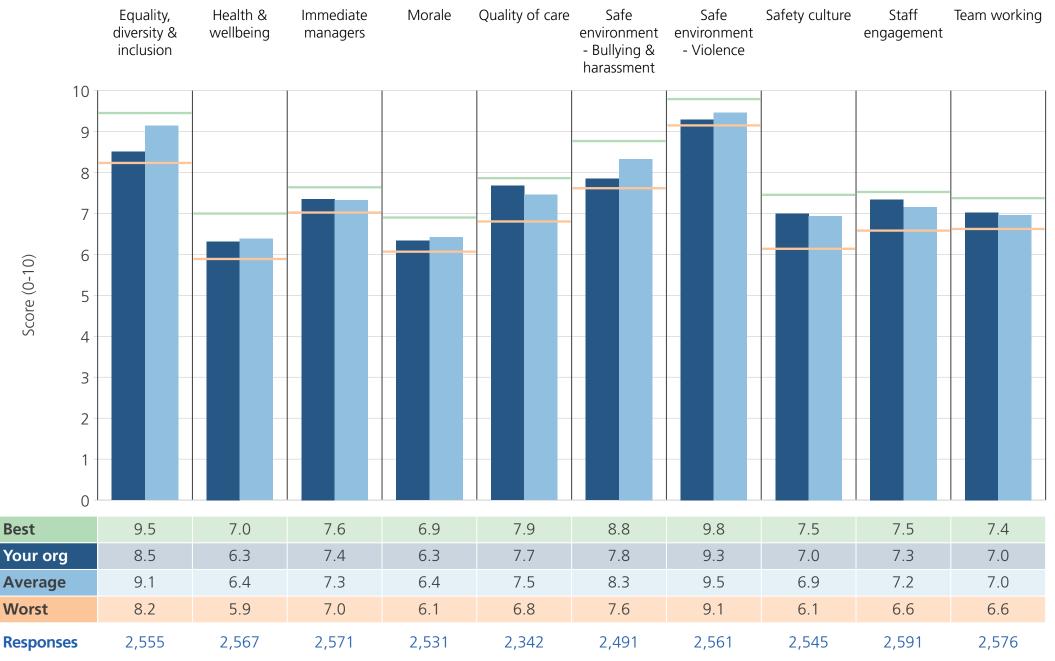
Theme results

The calculation for the immediate managers theme has changed this year due to the omission of one of the questions which previously contributed to the theme. This change has been applied retrospectively so data for 2016-2020 shown in the charts are comparable for this theme, however these figures are not directly comparable to the results reported in previous years. For more details please see the <u>technical document</u>.

East London NHS Foundation Trust 2020 NHS Staff Survey Results







Survey Coordination Centre

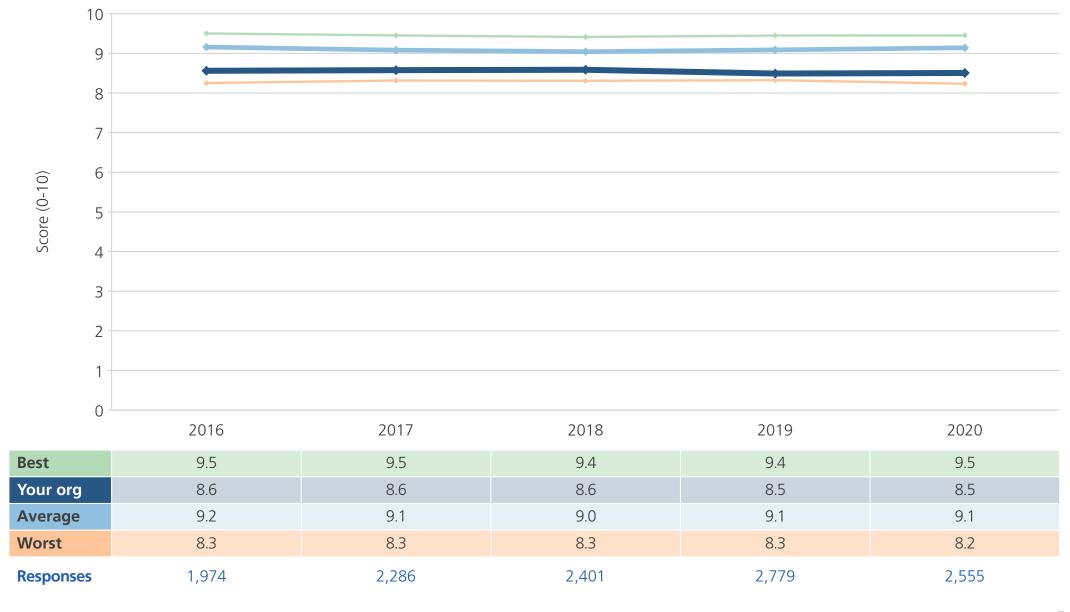


Theme results – Trends

East London NHS Foundation Trust 2020 NHS Staff Survey Results

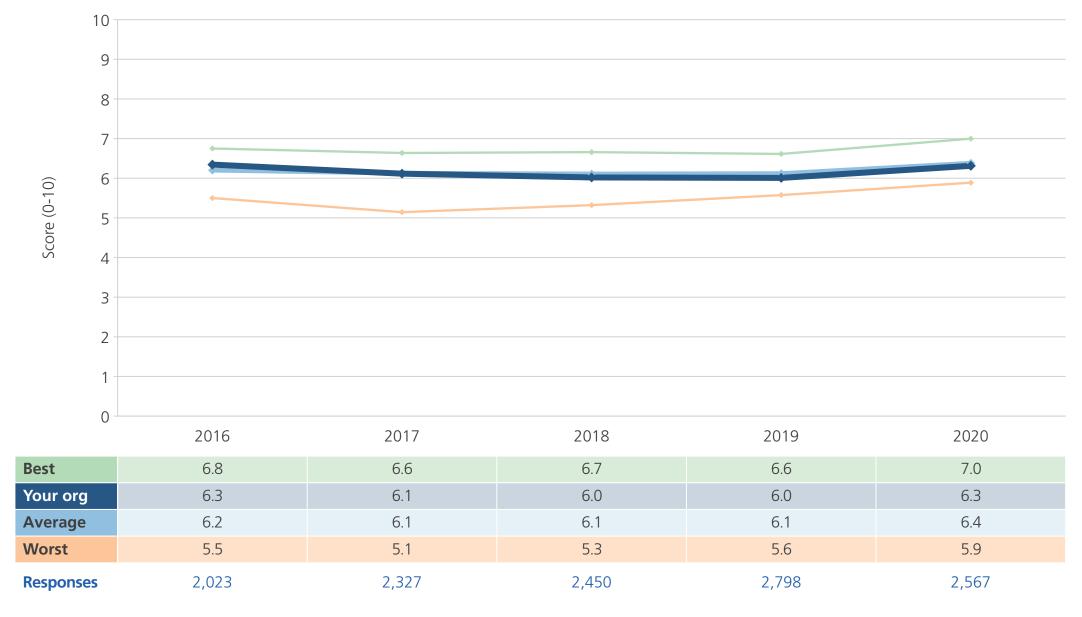






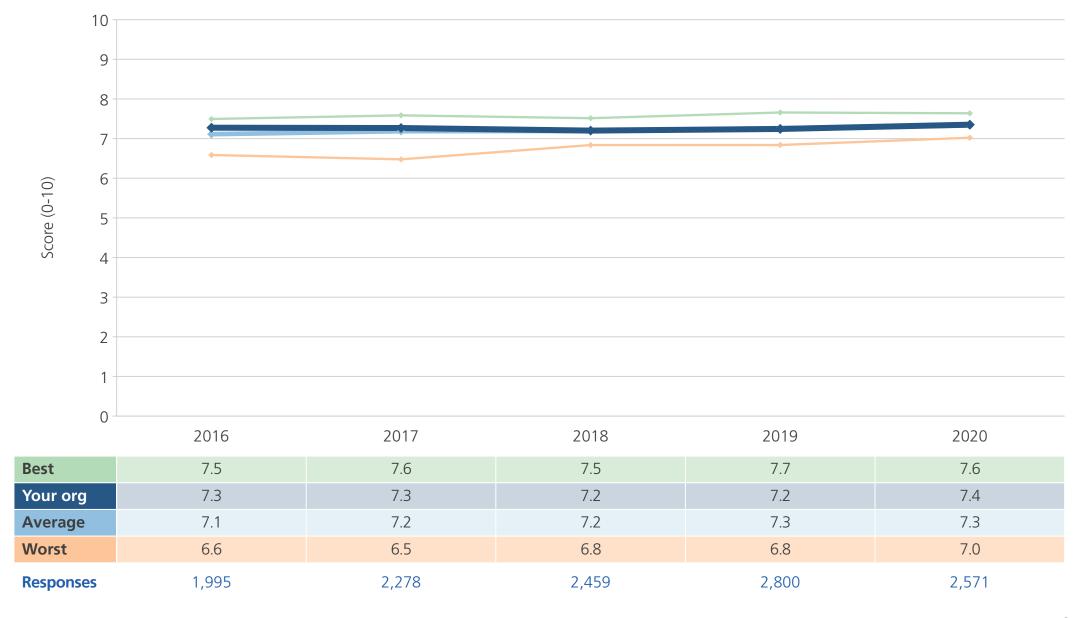






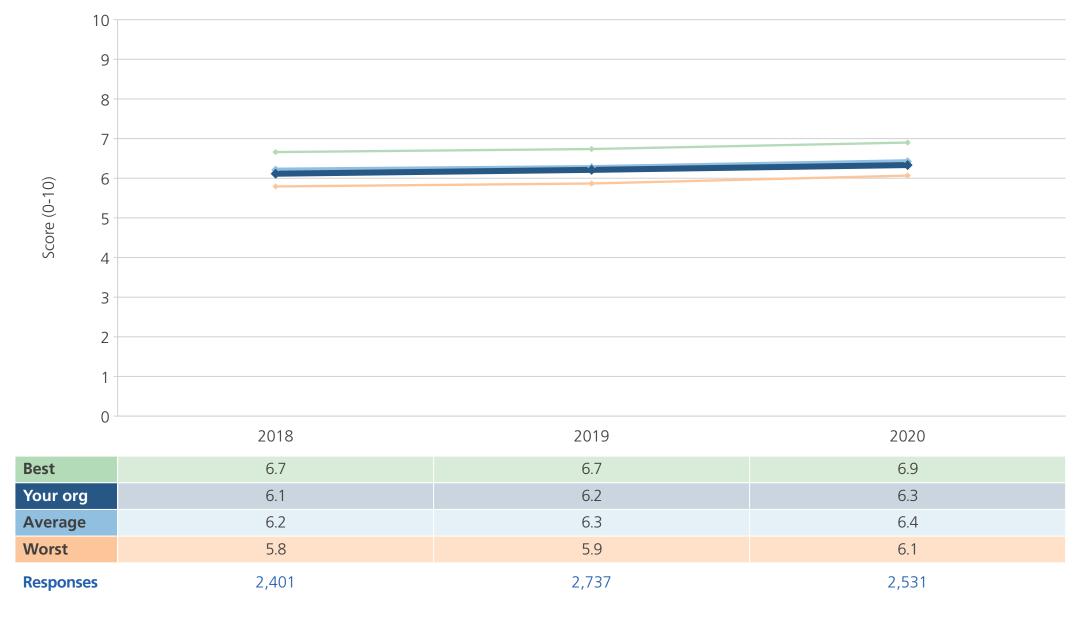






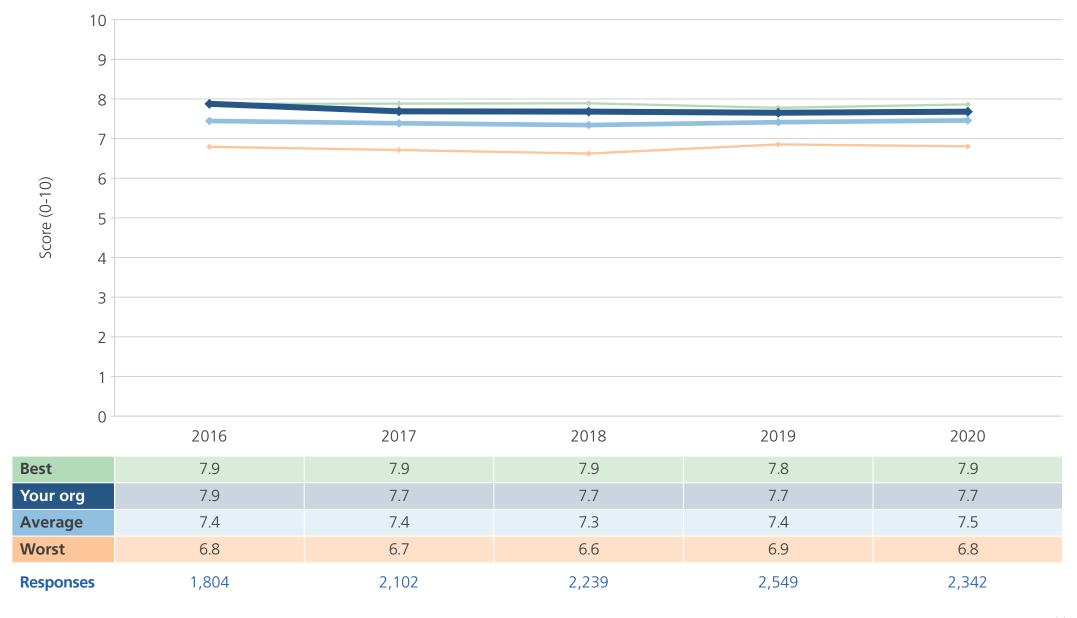






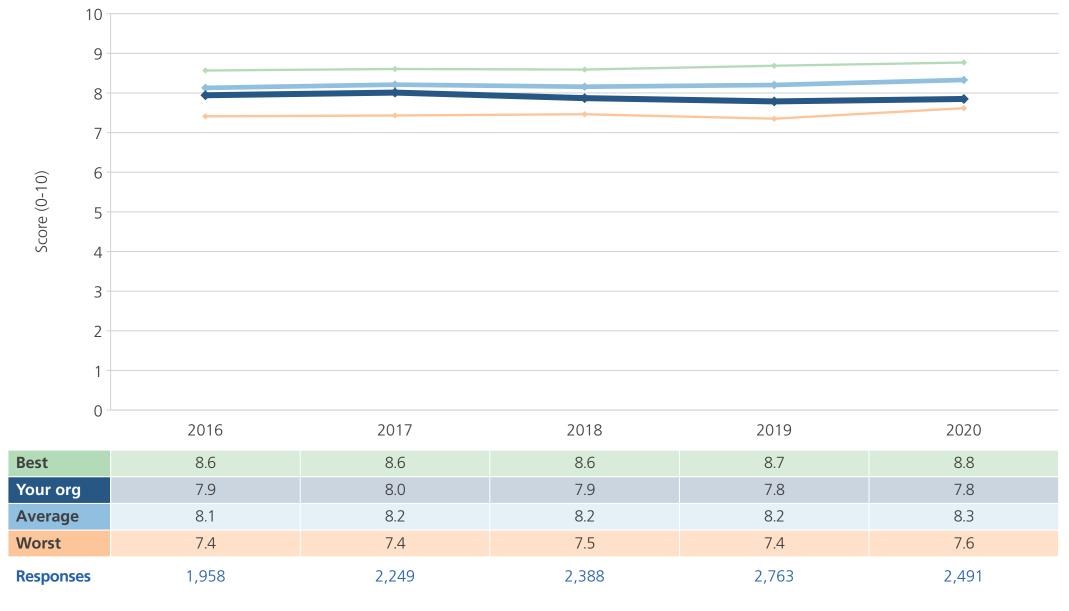






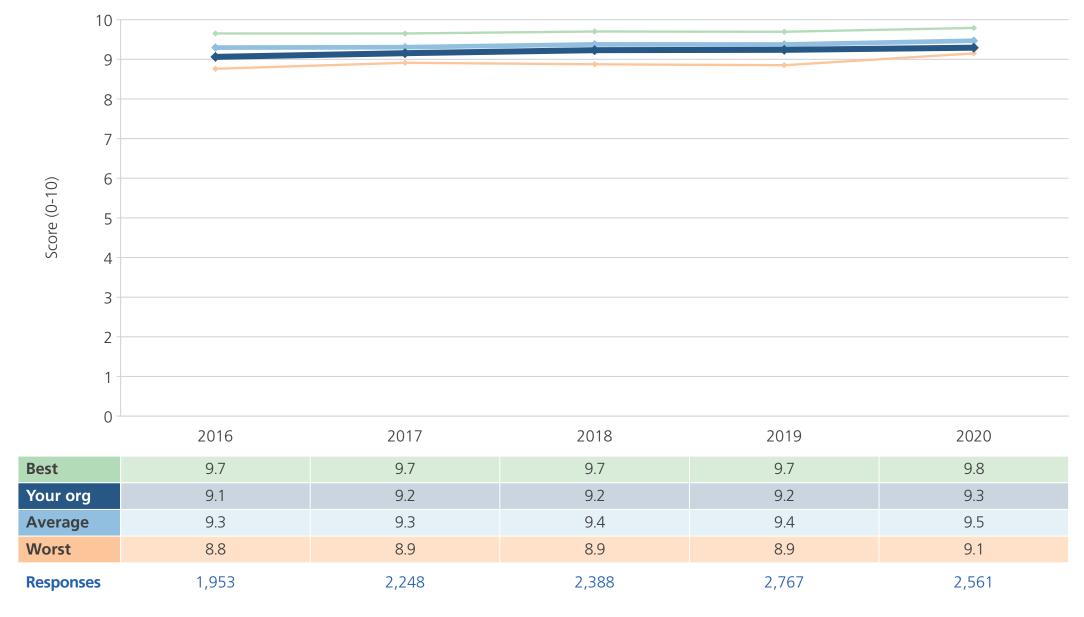






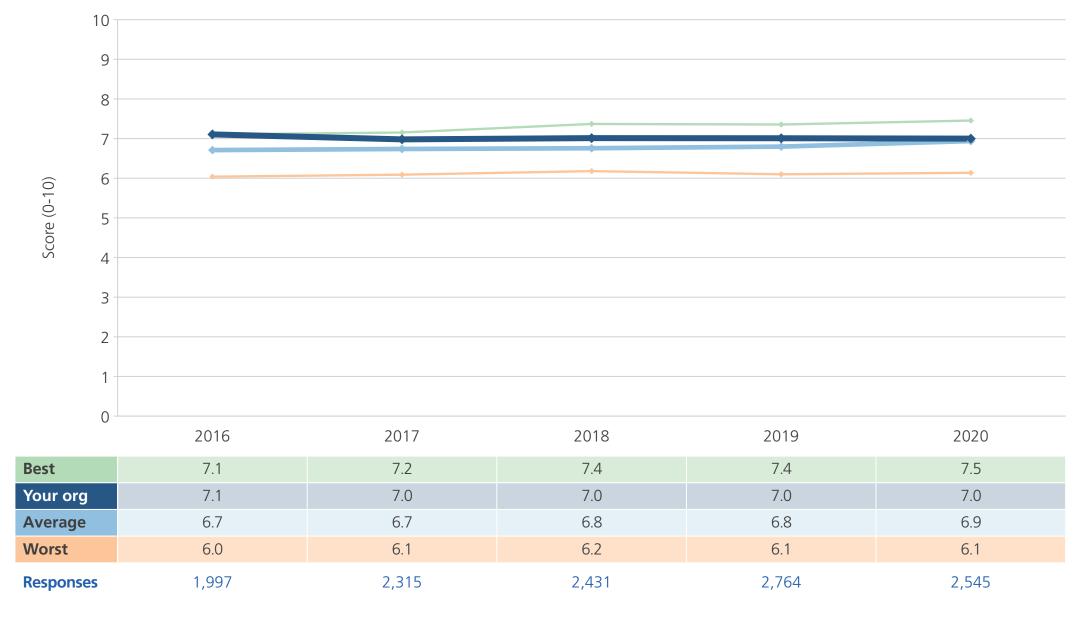






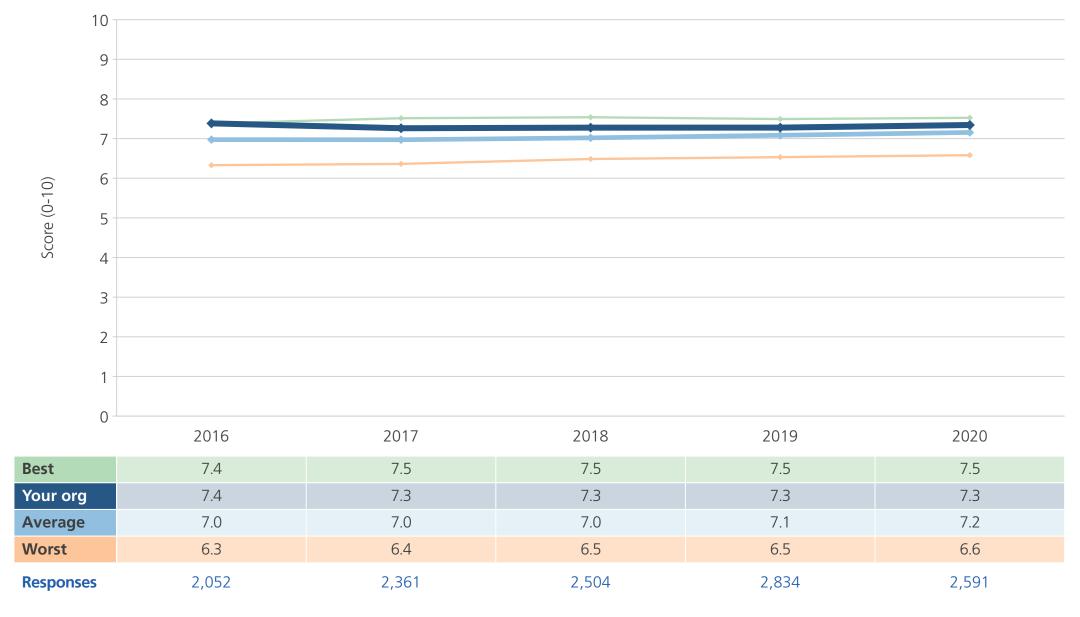






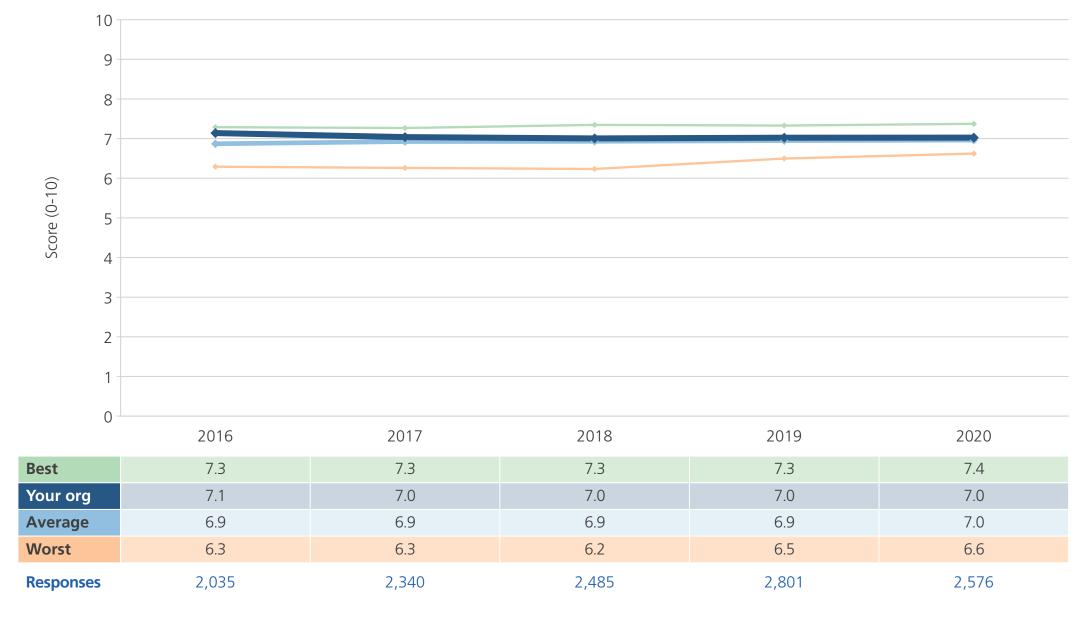














Theme results – Covid-19 classification breakdowns

Covid-19 classification breakdowns



Covid-19 questions

Staff were asked four classification questions relating to their experience during the Covid-19 pandemic:

a.	Have you worked on a Covid-19 specific ward or area at any time?	Yes	☐ No
b.	Have you been redeployed due to the Covid-19 pandemic at any time?	Yes	☐ No
c.	Have you been required to work remotely/from home due to the Covid-19 pandemic?	Yes	☐ No
d.	Have you been shielding? Yes, for myself Yes, for a member of my ho	usehold	☐ No

The charts on the following pages show the breakdown of theme scores for staff answering 'yes' to each of these questions, compared with the results for all staff at your organisation. Results are presented in the context of the highest, average and lowest scores for similar organisations.

Comparing your data

To improve overall comparability, the data have been weighted to match the occupation group profile of staff at your organisation to that of the benchmarking group, as in previous charts. However, there may be differences in the occupation group profiles of the individual COVID-19 subgroups. For example, the mix of occupational groups across redeployed staff at your organisation may differ from similar organisations. This difference would not be accounted for by the weighting and therefore may affect the comparability of results. As such, a degree of caution is advised when interpreting your results.

Further information

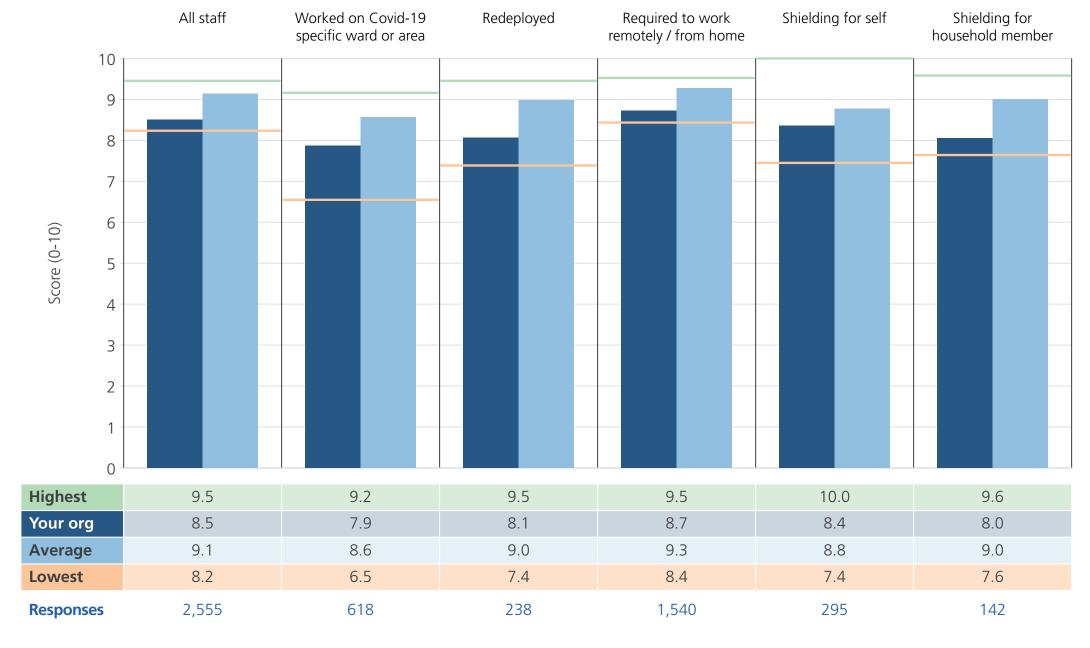
Results for these groups of staff, including data for individual questions, are also available via the <u>online dashboards</u>. Please note that results presented in these dashboards have not been weighted where no benchmarking takes place and so may vary slightly from those shown in this report.





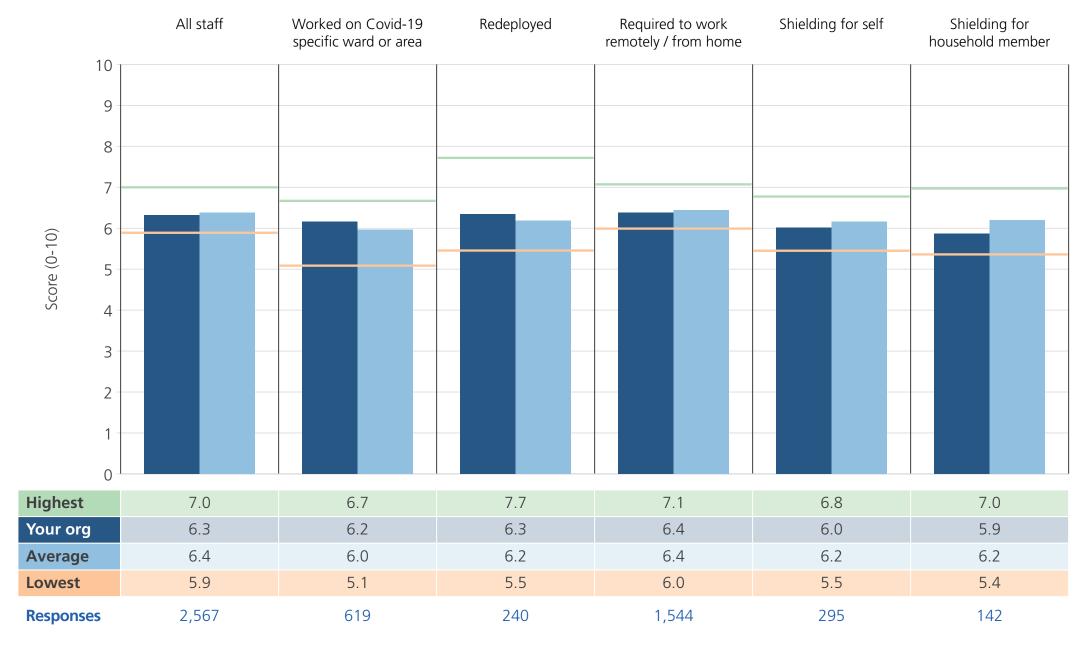
2020 NHS Staff Survey Results > Theme results - Covid-19 classification breakdowns > Equality, diversity & inclusion





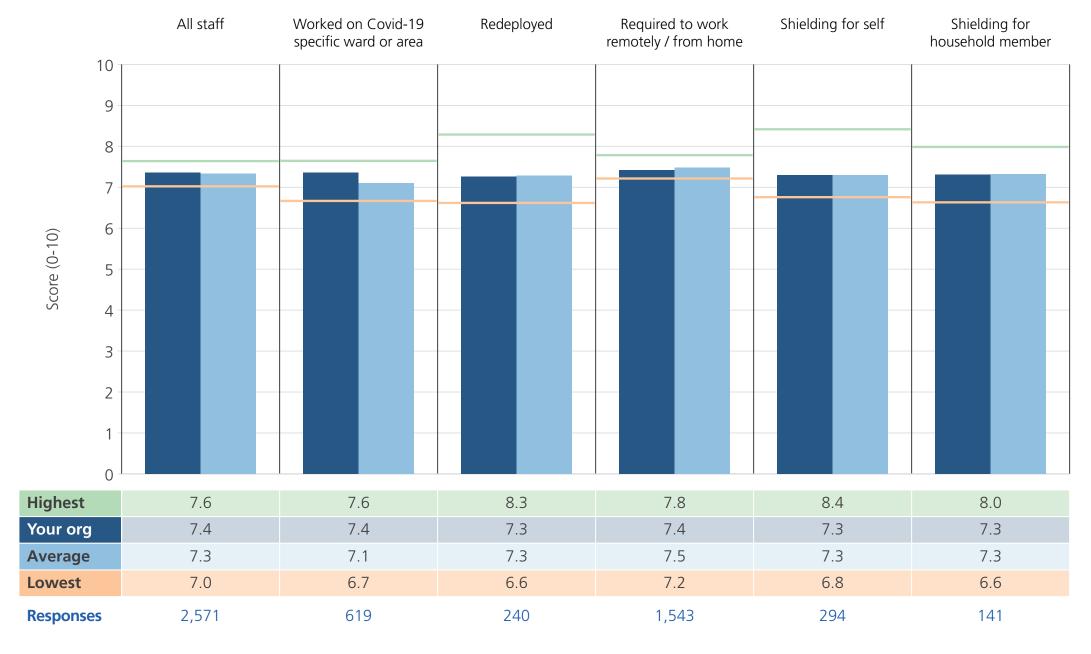






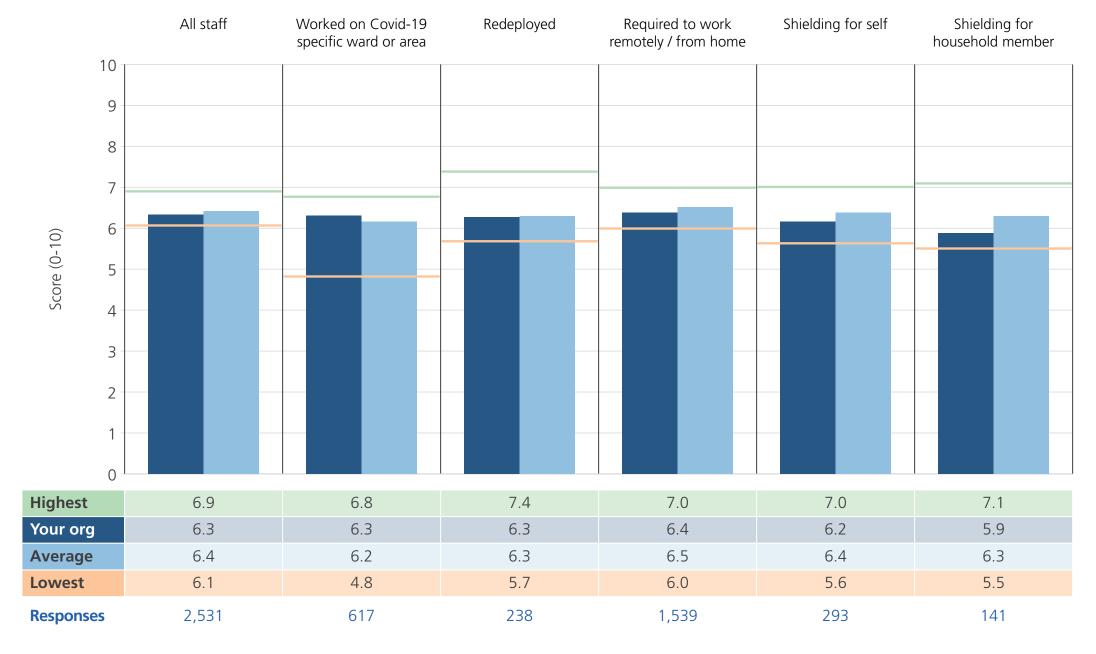






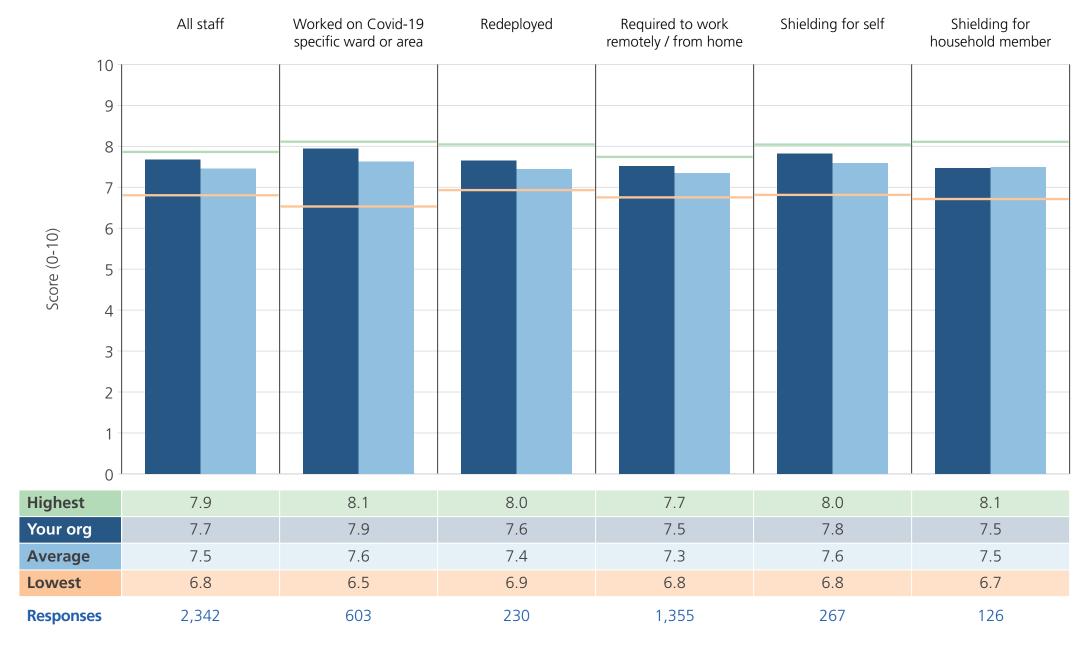








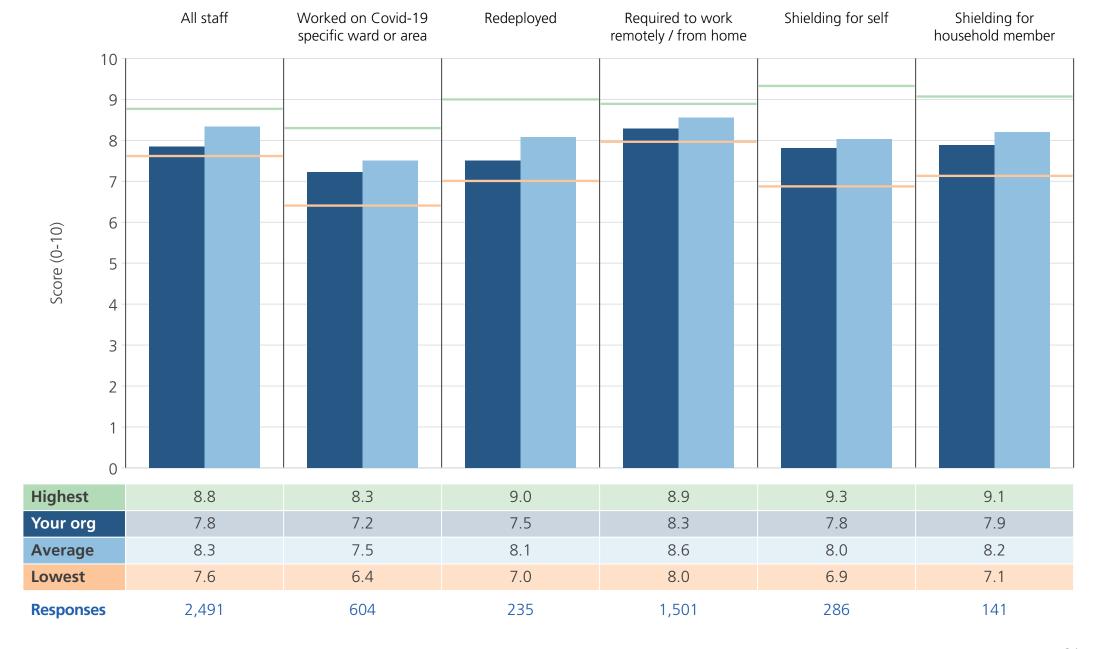






2020 NHS Staff Survey Results > Theme results – Covid-19 classification breakdowns > Safe environment - Bullying & harassment

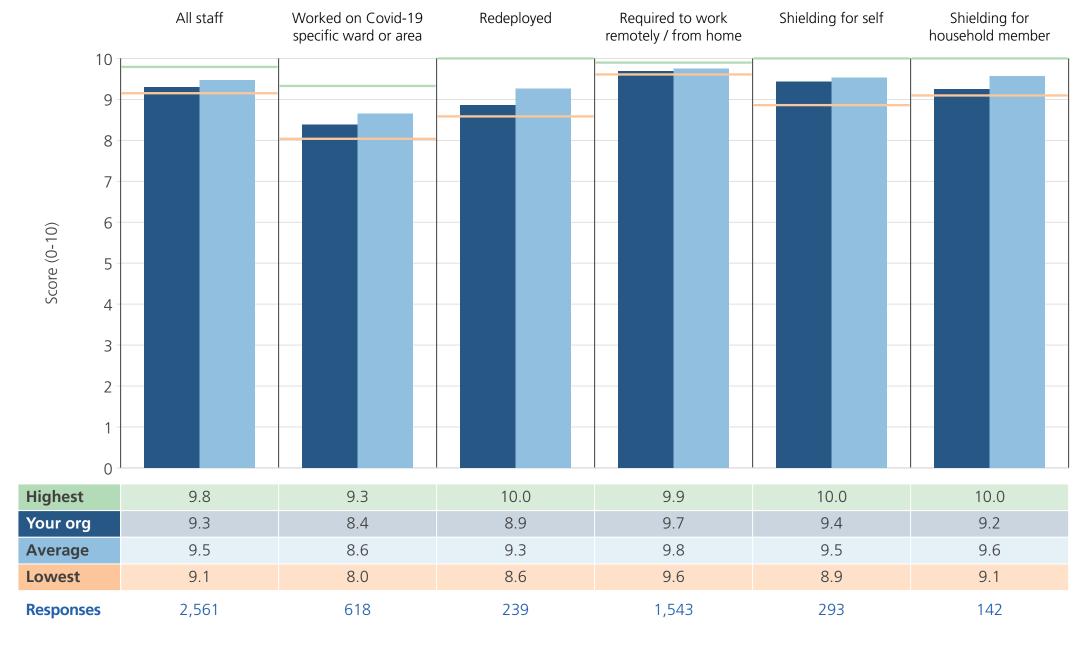






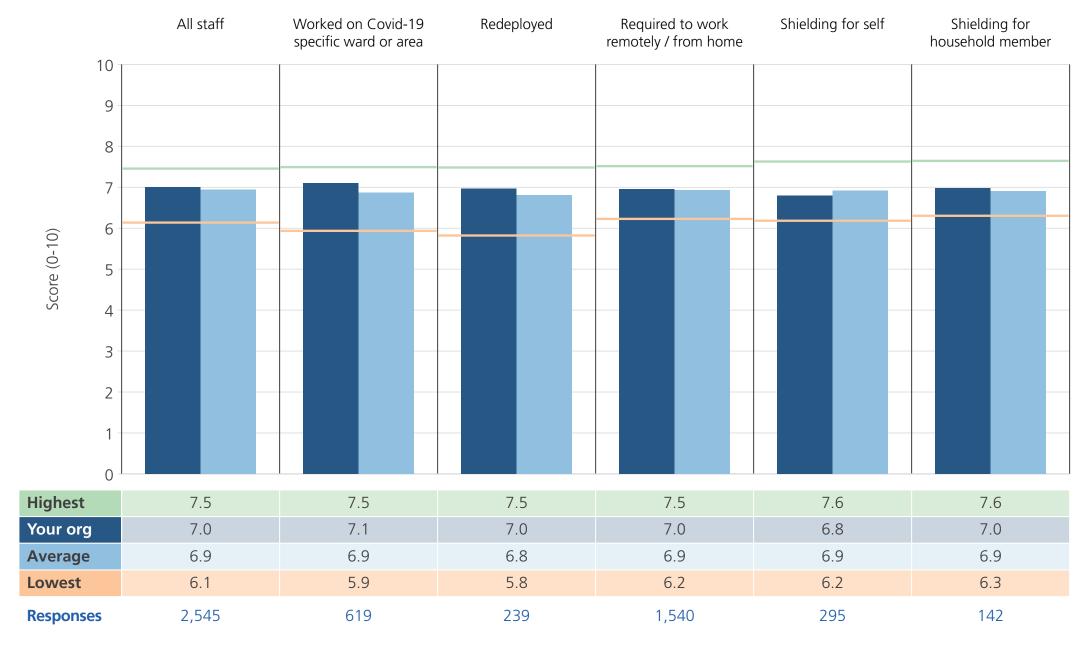






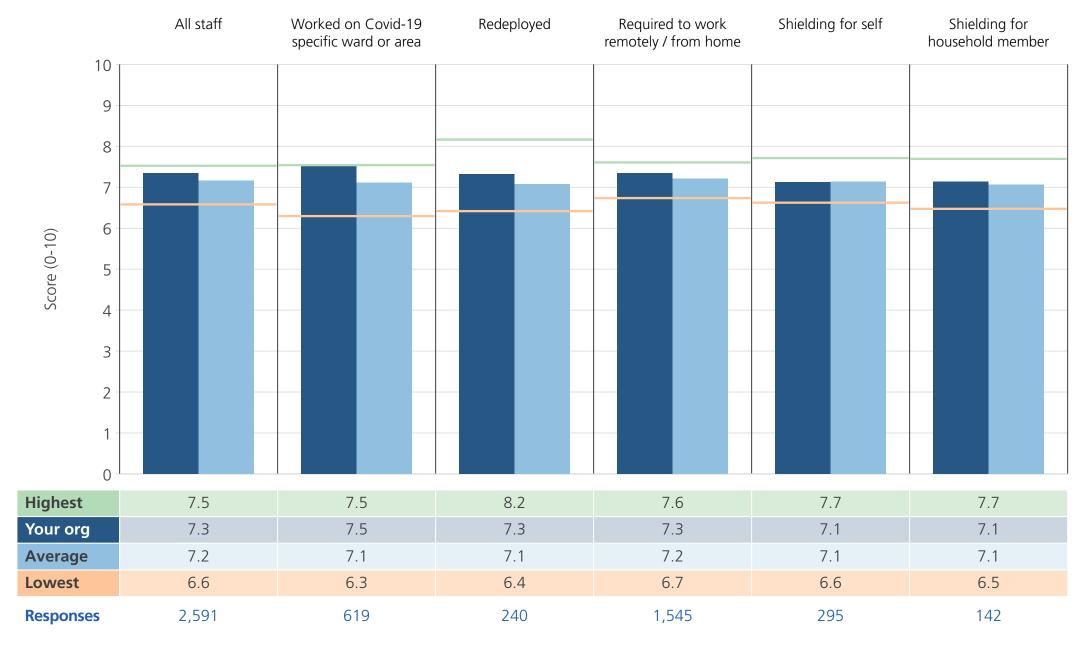






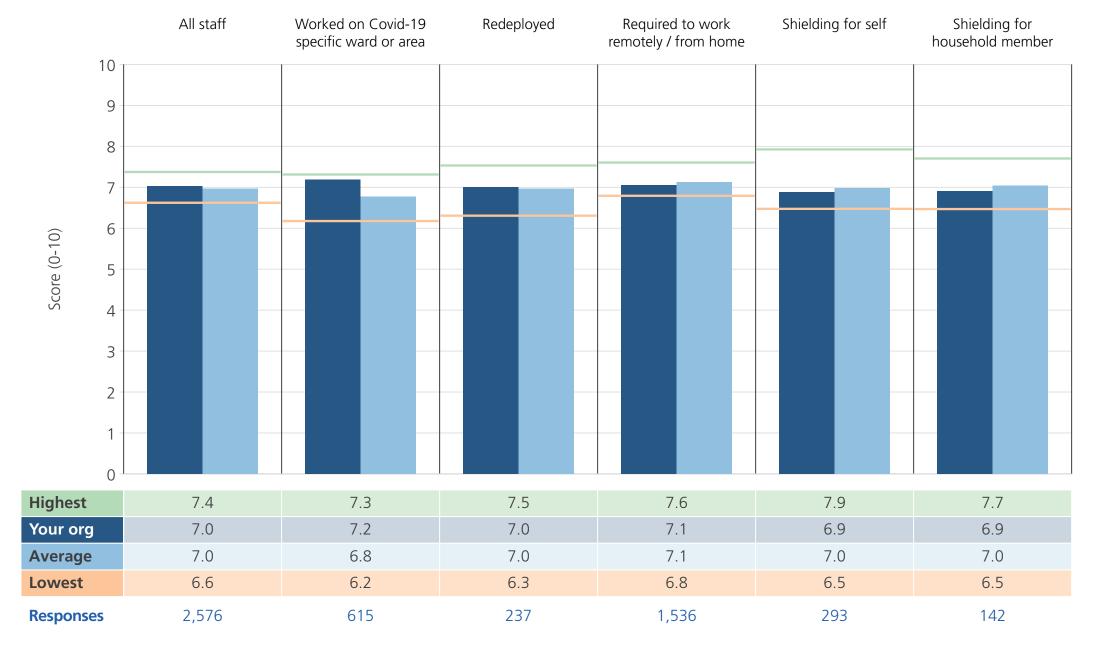














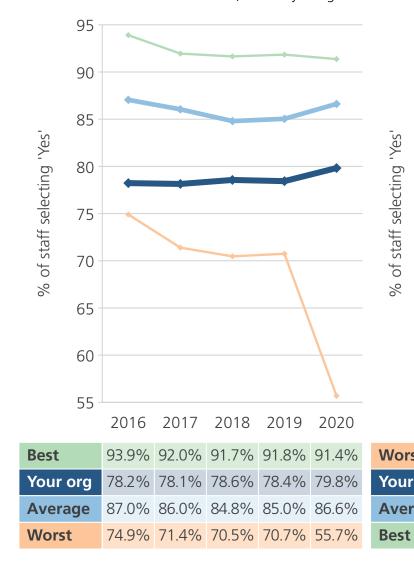
Theme results – Detailed information





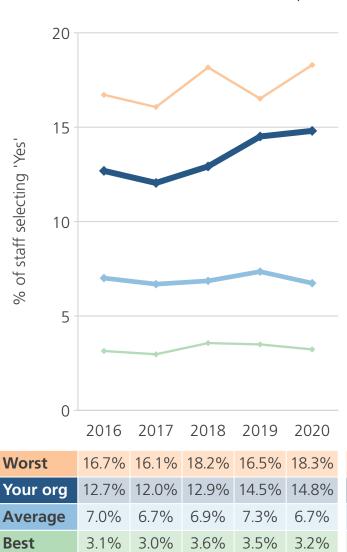
014

Does your organisation act fairly with regard to career progression / promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age?

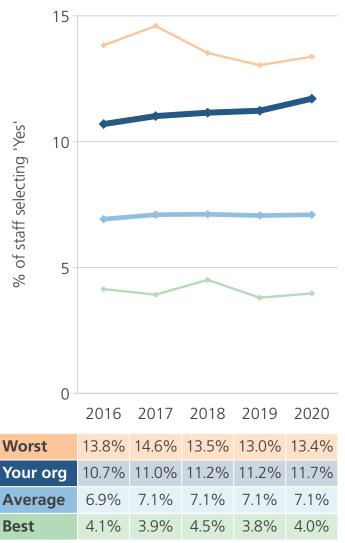


Q15a

In the last 12 months have you personally experienced discrimination at work from patients / service users, their relatives or other members of the public?



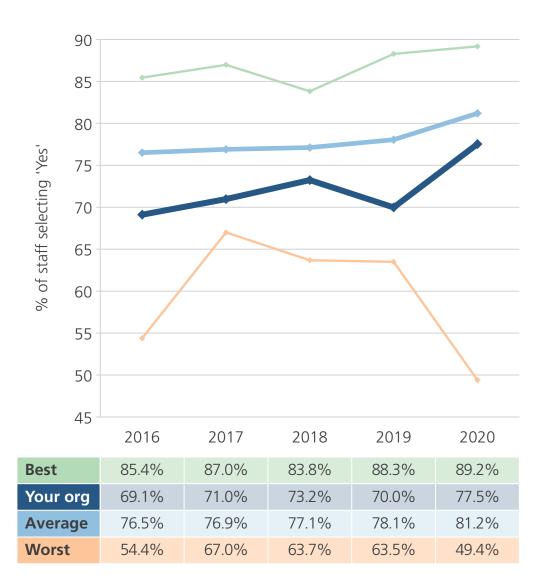
Q15b
In the last 12 months have you personally experienced discrimination at work from manager / team leader or other colleagues?







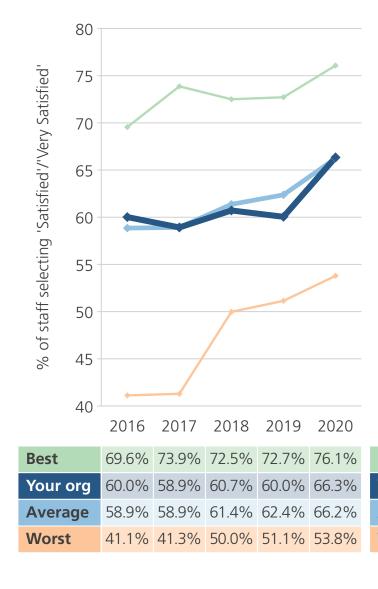
Q26b
Has your employer made adequate adjustment(s) to enable you to carry out your work?



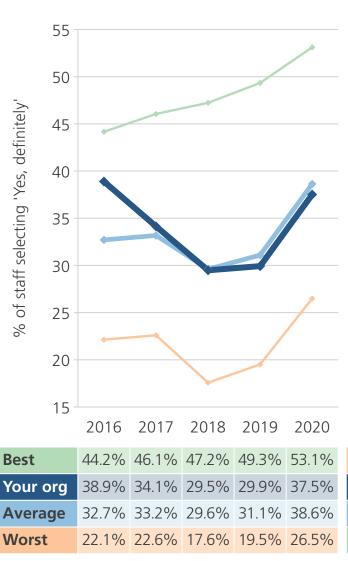




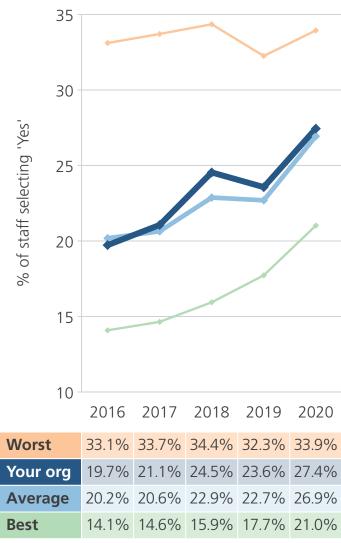
Q5hThe opportunities for flexible working patterns



Q11aDoes your organisation take positive action on health and well-being?



Q11b
In the last 12 months have you experienced musculoskeletal problems (MSK) as a result of work activities?

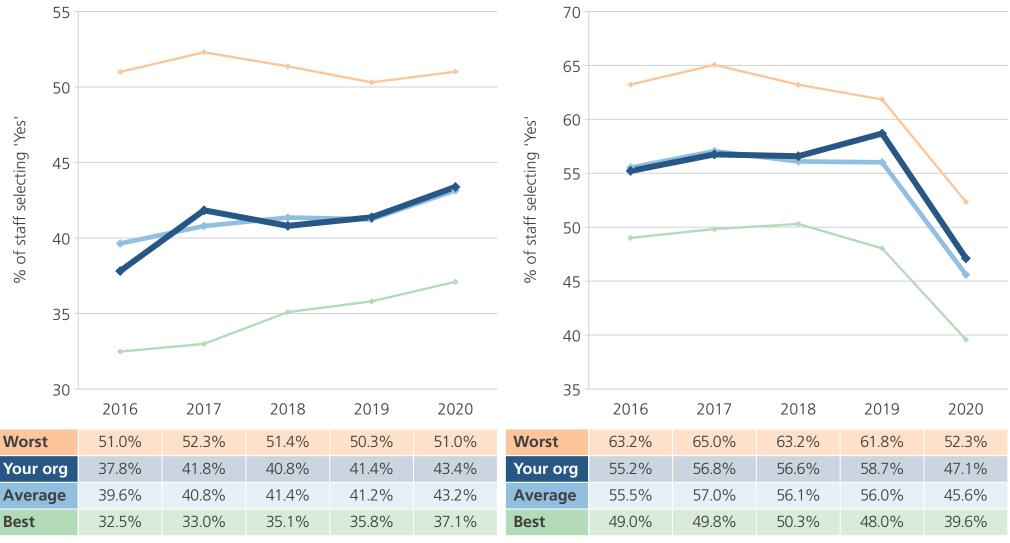






Q11cDuring the last 12 months have you felt unwell as a result of work related stress?

Q11dIn the last three months have you ever come to work despite not feeling well enough to perform your duties?



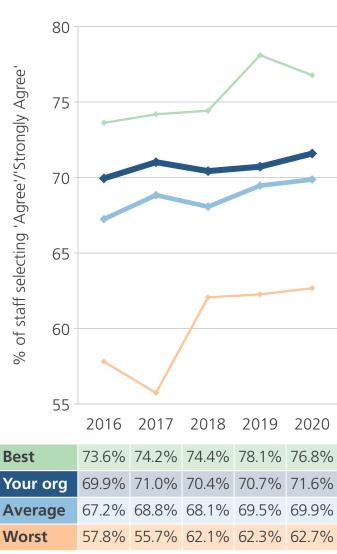




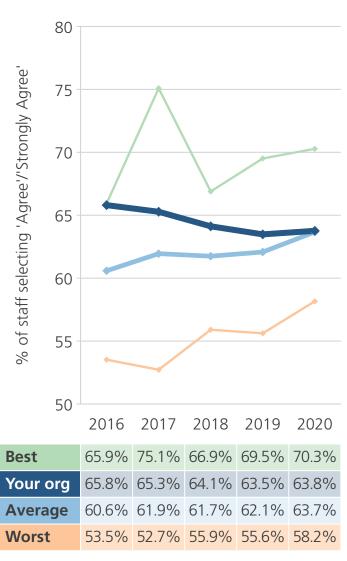
Q5bThe support I get from my immediate manager



Q8cMy immediate manager gives me clear feedback on my work



Q8dMy immediate manager asks for my opinion before making decisions that affect my work







Q8g

My immediate manager values my work

Q8fMy immediate manager takes a positive interest in my health and well-being

85 85 % of staff selecting 'Agree'/'Strongly Agree' % of staff selecting 'Agree'/'Strongly Agree' 80 80 75 75 70 70 65 65 60 60 2016 2018 2020 2016 2020 2017 2019 2017 2018 2019 **Best** 79.6% 79.6% 81.8% 83.2% **Best** 80.9% 84.8% 82.6% 79.6% 80.6% 83.5% 73.1% 74.4% 75.2% 75.6% 77.1% Your org 78.7% 78.4% 78.2% 79.1% 79.5% Your org **Average** 73.5% 74.4% 74.8% 75.6% 77.0% **Average** 76.7% 76.9% 77.4% 78.6% 78.8% 64.4% 61.9% 67.7% 72.0% 69.1% 63.2% 73.0% 71.6% 74.1% Worst 67.4% Worst

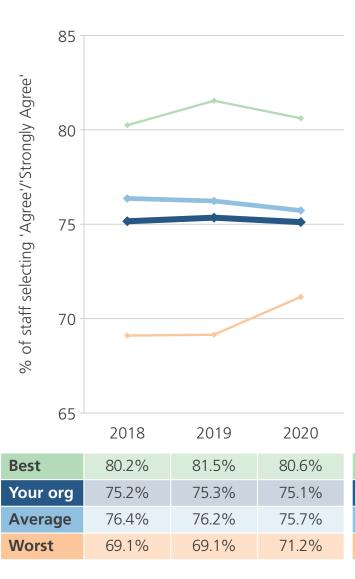




Q4cI am involved in deciding on changes introduced that affect my work area / team / department

70 % of staff selecting 'Agree'/'Strongly Agree' 65 60 55 50 45 40 2016 2017 2018 2019 2020 60.8% 65.7% 62.1% 61.6% 63.4% **Best** 60.5% 59.6% 58.8% 56.8% 58.1% Your org **Average** 54.5% 54.6% 54.8% 54.9% 55.5% Worst 45.9% 42.0% 48.0% 47.4% 48.2%

Q4jI receive the respect I deserve from my colleagues at work



Q6aI have unrealistic time pressures





56.1%

Worst

54.5%

57.0%

Worst



Q6b Q8a Q6c I have a choice in deciding My immediate manager Relationships at work are strained how to do my work encourages me at work 85 75 60 % of staff selecting 'Agree'/'Strongly Agree' % of staff selecting 'Often'/'Always' 70 % of staff selecting 'Never'/'Rarely' 55 80 65 50 60 75 45 55 50 40 70 2018 2019 2020 2018 2020 2018 2020 2019 2019 **Best** 72.2% 70.3% 74.7% **Best** 58.3% 59.9% **Best** 79.5% 81.6% 58.6% 82.3% 62.0% 61.0% 61.2% 48.9% 50.8% 50.9% 77.2% 78.5% 79.4% Your org Your org Your org **Average** 62.5% 62.1% 63.8% **Average** 50.2% 51.2% 53.6% Average 75.7% 77.1% 77.3%

43.1%

40.7%

43.5%

Worst

70.8%

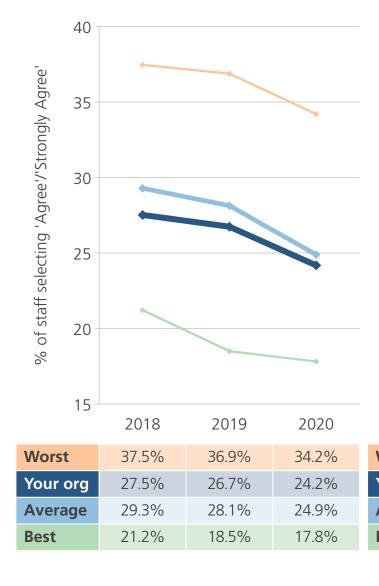
70.3%

72.5%

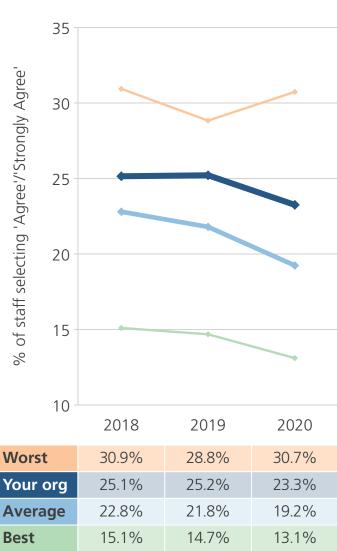




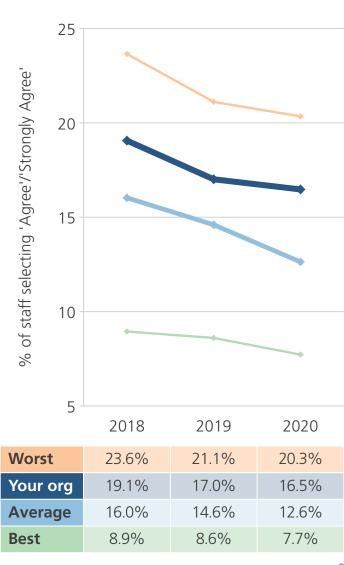
Q19aI often think about leaving this organisation



Q19bI will probably look for a job at a new organisation in the next 12 months



Q19cAs soon as I can find another job, I will leave this organisation



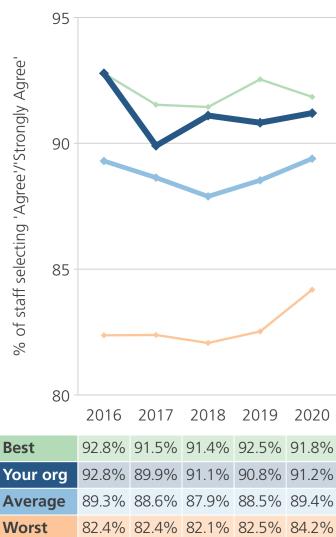




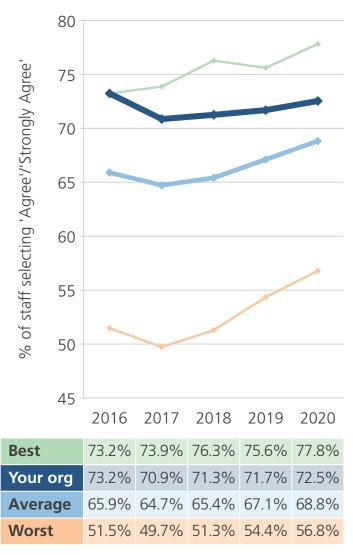
Q7aI am satisfied with the quality of care I give to patients / service users



Q7bI feel that my role makes a difference to patients / service users



Q7cI am able to deliver the care I aspire to

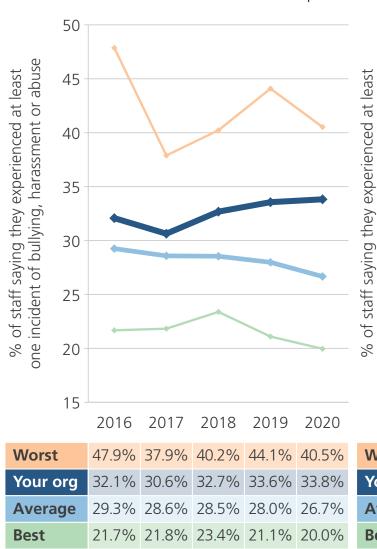






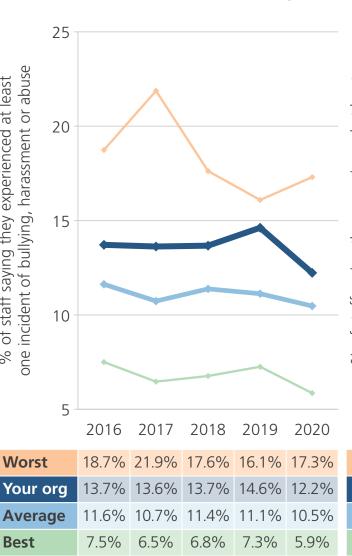
O13a

In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from patients / service users, their relatives or other members of the public?

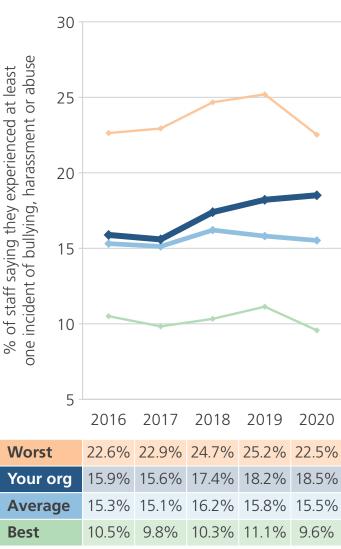


Q13b

In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from managers?



Q13c
In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from other colleagues?

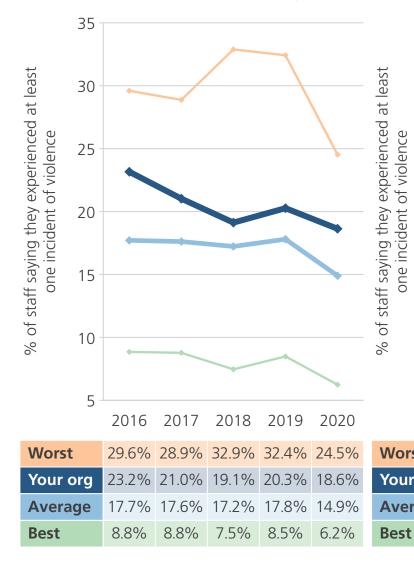




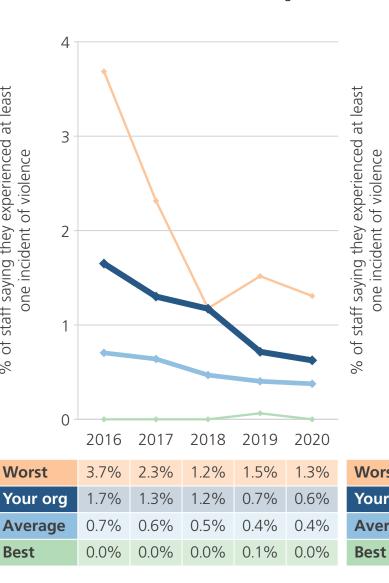


O12a

In the last 12 months how many times have you personally experienced physical violence at work from patients / service users, their relatives or other members of the public?

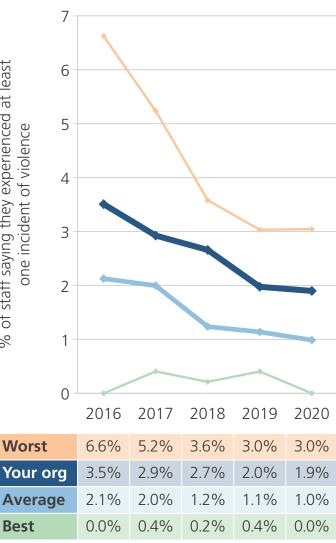


Q12b In the last 12 months how many times have you personally experienced physical violence at work from managers?



one incident of violence

Q12c In the last 12 months how many times have you personally experienced physical violence at work from other colleagues?

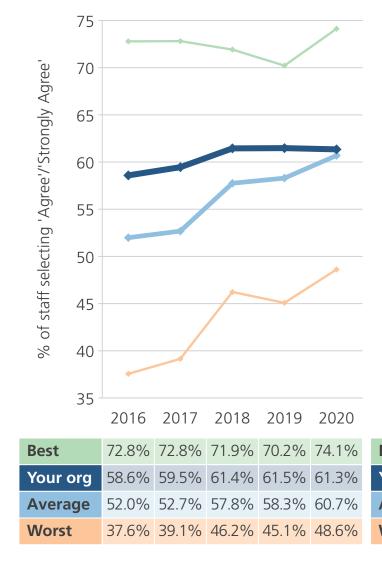


one incident of violence

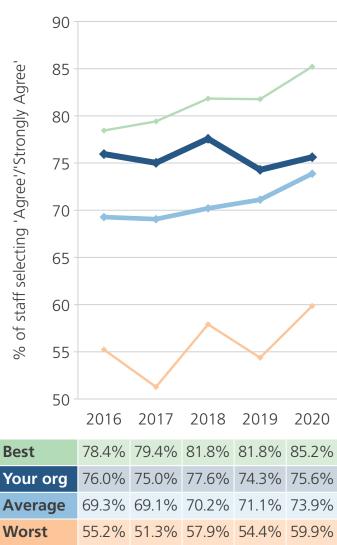




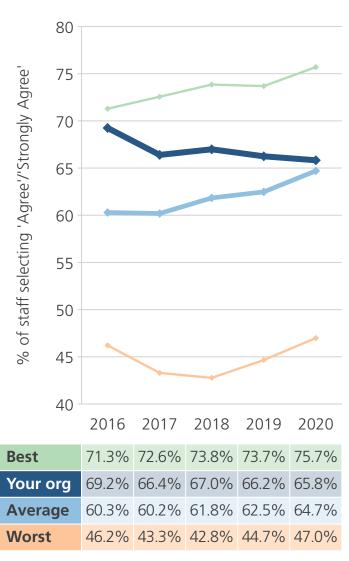
Q16aMy organisation treats staff who are involved in an error, near miss or incident fairly



Q16cWhen errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again



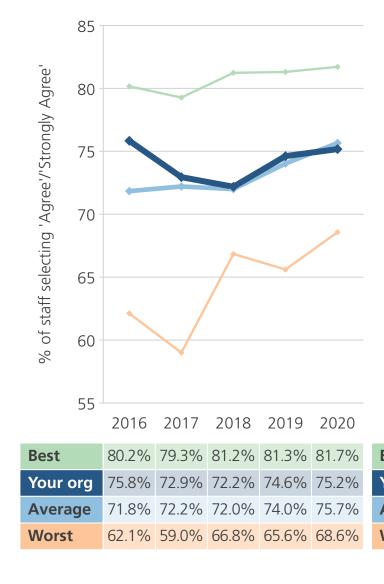
Q16dWe are given feedback about changes made in response to reported errors, near misses and incidents



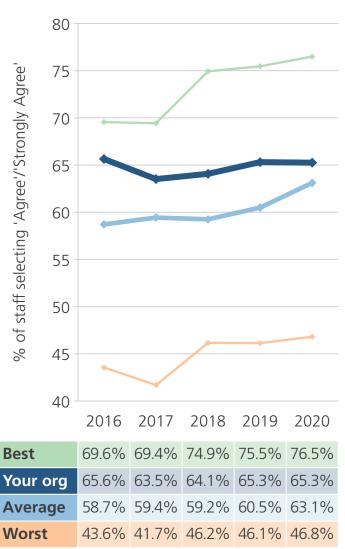




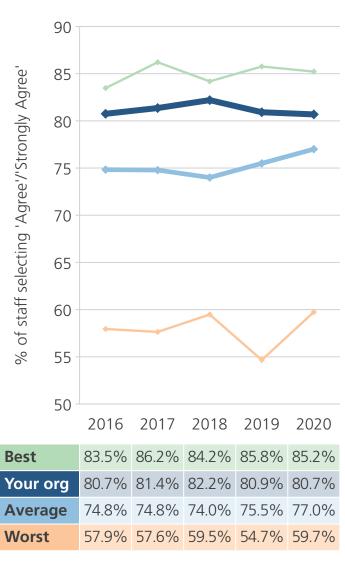
Q17bI would feel secure raising concerns about unsafe clinical practice



Q17c
I am confident that my organisation would address my concern



Q18bMy organisation acts on concerns raised by patients / service users







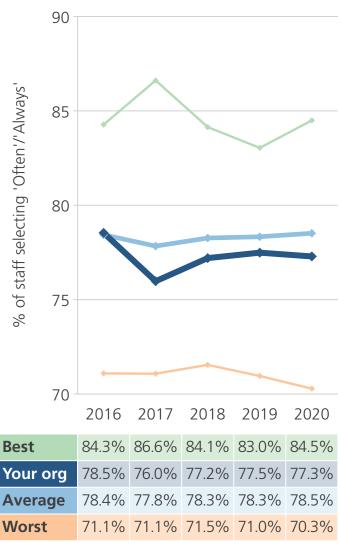
Q2aI look forward to going to work



Q2bI am enthusiastic about my job



Q2cTime passes quickly when I am working



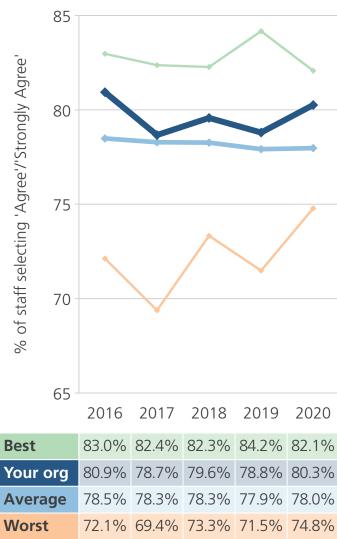




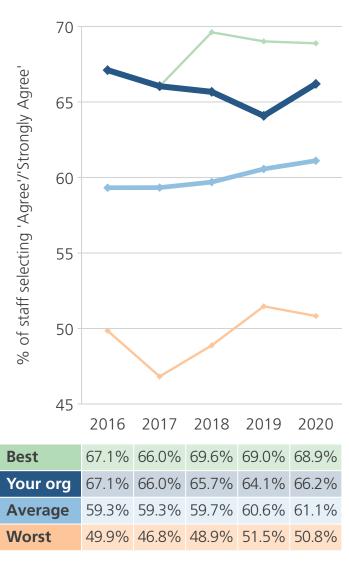
Q4aThere are frequent opportunities for me to show initiative in my role



Q4bI am able to make suggestions to improve the work of my team / department



Q4dI am able to make improvements happen in my area of work





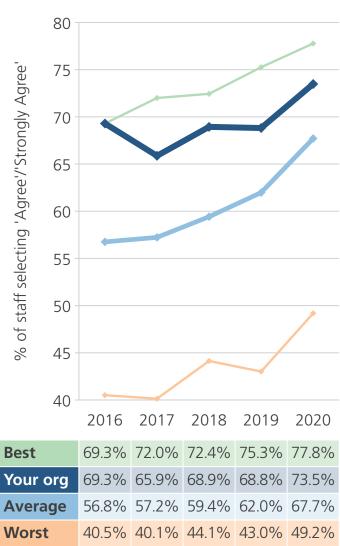




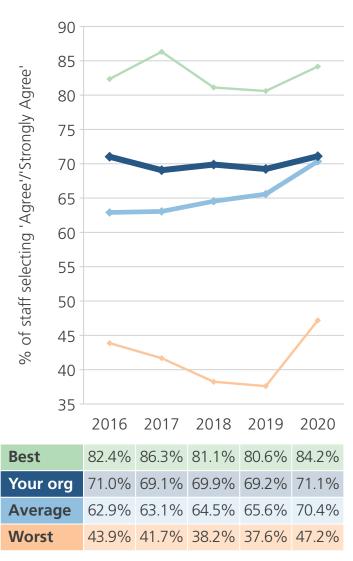
Q18aCare of patients / service users is my organisation's top priority



Q18cI would recommend my organisation as a place to work



Q18dIf a friend or relative needed treatment I would be happy with the standard of care provided by this organisation

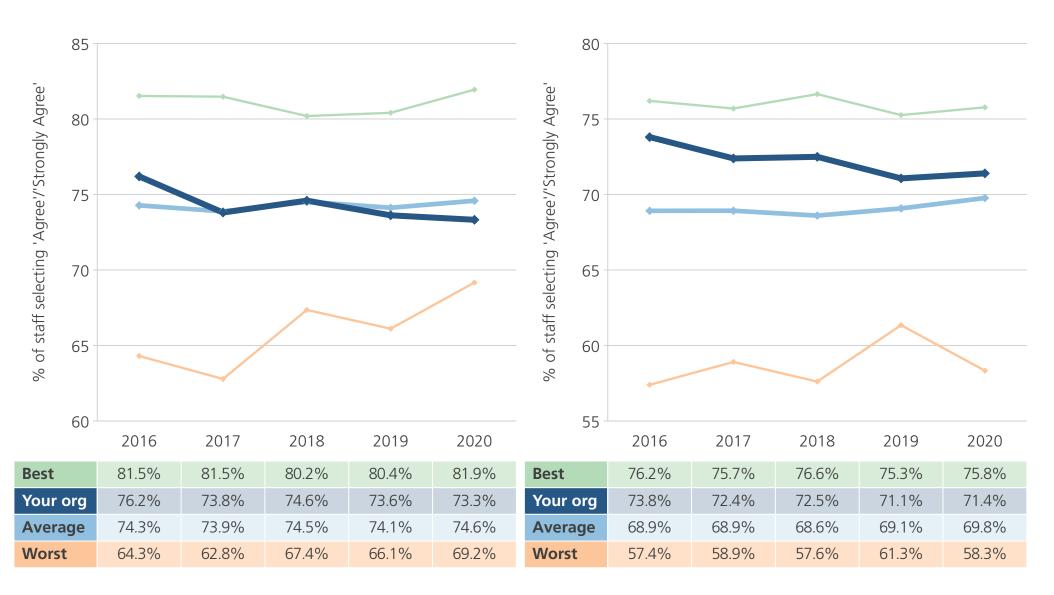






Q4hThe team I work in has a set of shared objectives

Q4iThe team I work in often meets to discuss the team's effectiveness





Workforce Equality Standards

Workforce Equality Standards



This section contains data required for the NHS Staff Survey indicators used in the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES). Data presented in this section are unweighted.

Full details of how the data are calculated are included in the Technical Document, available to download from our results website.

Workforce Race Equality Standard (WRES)

This contains data for each organisation required for the NHS Staff Survey indicators used in the Workforce Race Equality Standard (WRES). It includes the 2017, 2018 and 2019 trust/CCG and benchmarking group median results for q13a, q13b&c combined, q14, and q15b split by ethnicity (by white / BME staff).

Workforce Disability Equality Standard (WDES)

- This contains data for each organisation required for the NHS Staff Survey indicators used in the Workforce Disability Equality Standard (WDES). It includes the 2018 and 2019 trust/CCG and benchmarking group median results for q5f, q11e, q13a-d, and q14 split by staff with a long lasting health condition or illness compared to staff without a long lasting health condition or illness. It also shows results for q26b (for staff with a long lasting health condition or illness only), and the staff engagement score for staff with a long lasting health condition or illness and the overall engagement score for the organisation.
- The WDES breakdowns are based on the responses to q26a *Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?* In 2020, the question text was shortened and the word 'disabilities' was removed but the question and WDES results still remain historically comparable.



Workforce Race Equality Standard (WRES)

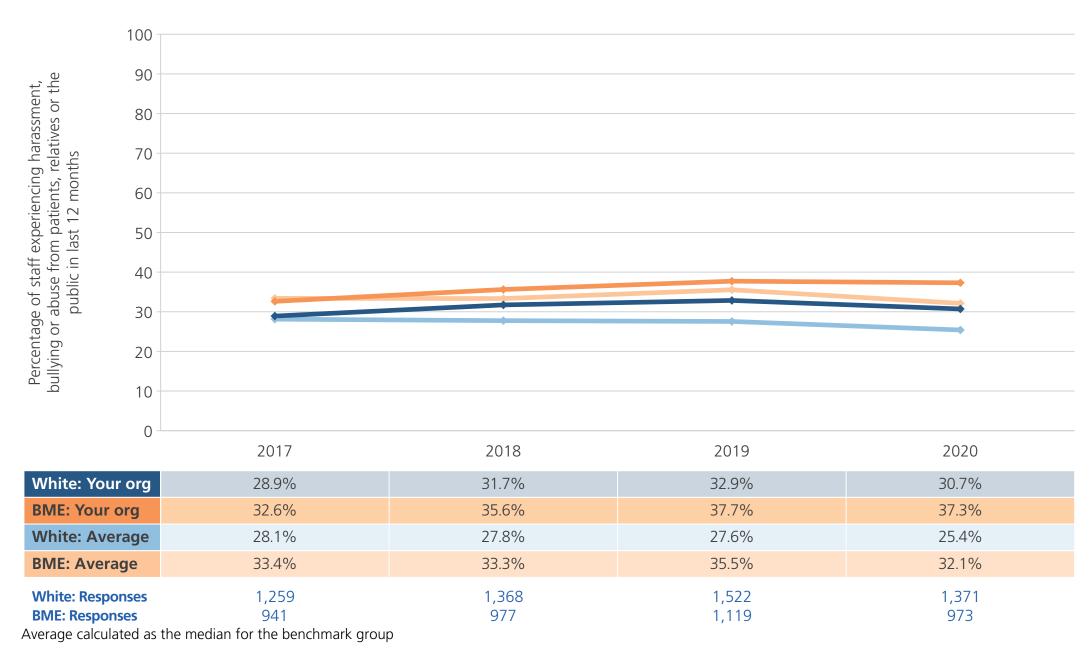


Survey Coordination

Centre

2020 NHS Staff Survey Results > WRES > Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months







2020 NHS Staff Survey Results > WRES > Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months

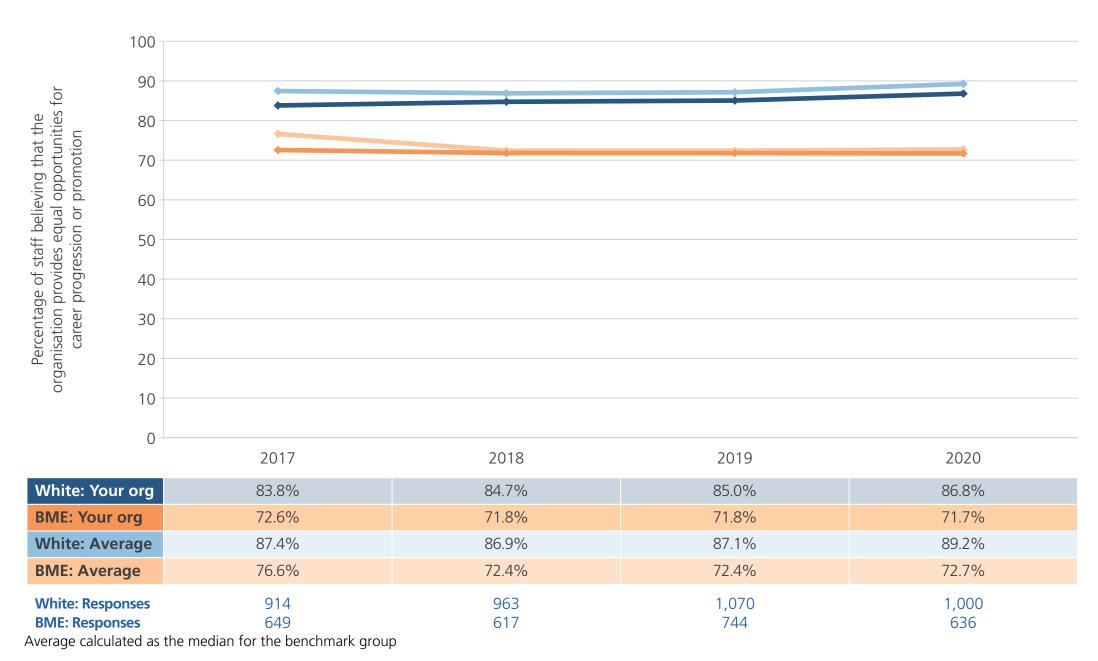


100 90 Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months 80 70 60 50 40 30 20 10 0 2017 2018 2019 2020 White: Your org 23.2% 23.0% 23.6% 22.5% **BME: Your org** 22.6% 24.5% 27.9% 25.7% 21.2% 20.6% **White: Average** 20.4% 19.6% **BME: Average** 23.8% 27.1% 24.8% 25.0% **White: Responses** 1,252 1,351 1,371 1,524 **BME: Responses** 926 958 1,119 970 Average calculated as the median for the benchmark group





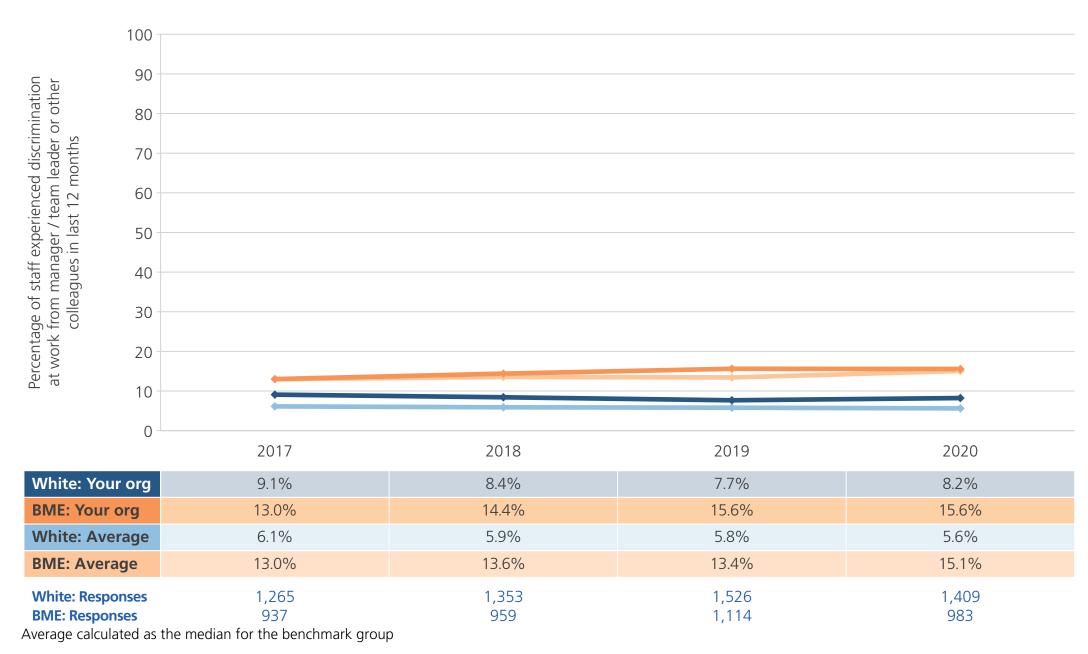






2020 NHS Staff Survey Results > WRES > Percentage of staff experienced discrimination at work from manager / team leader or other colleagues in last 12 months







Workforce Disability Equality Standard (WDES)

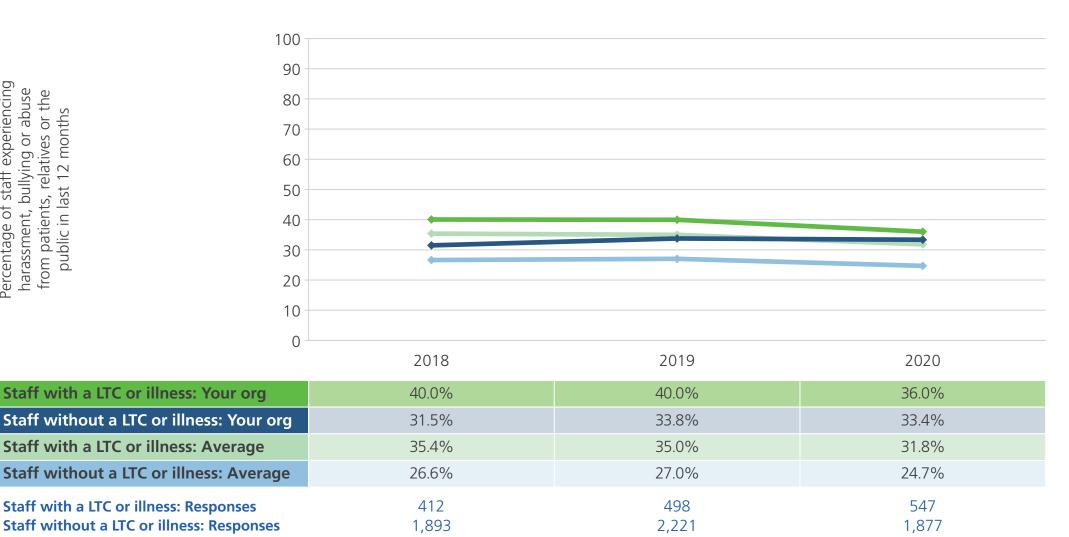
The approach to calculating the benchmark median scores and the way in which the data for Q13d are reported has changed this year. These changes have been applied retrospectively so historical data shown in the average calculations and all figures for Q13d are comparable. However, these figures are not directly comparable to the results reported in previous years. For more details please see the <u>technical document</u>.







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

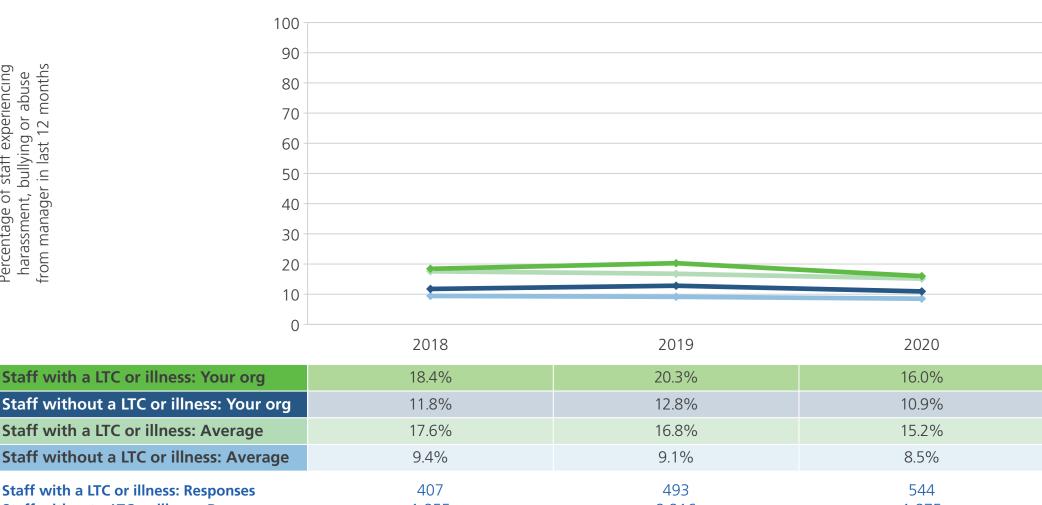




2020 NHS Staff Survey Results > WDES > Percentage of staff experiencing harassment, bullying or abuse from manager in last 12 months



harassment, bullying or abuse from manager in last 12 months Percentage of staff experiencing



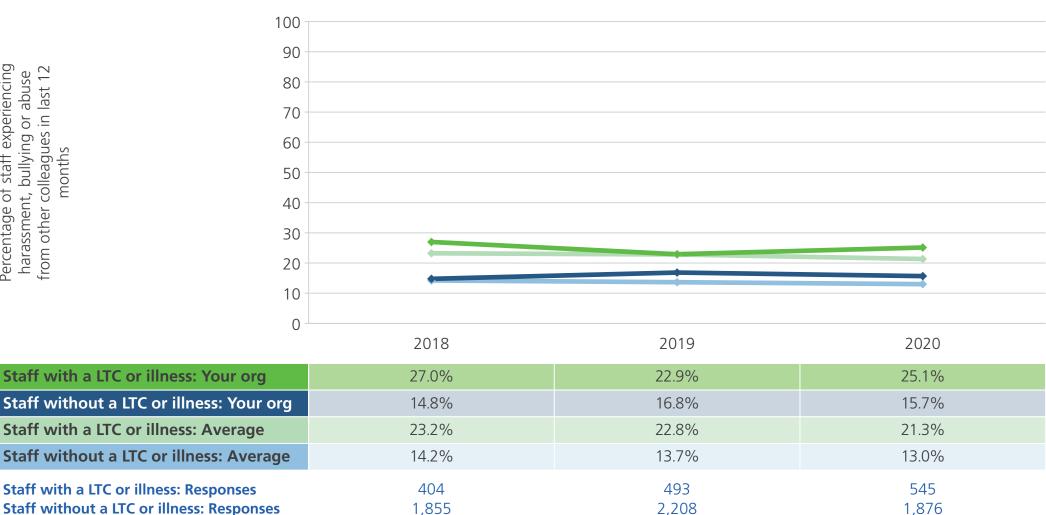
Staff without a LTC or illness: Your org Staff with a LTC or illness: Average Staff without a LTC or illness: Average **Staff with a LTC or illness: Responses Staff without a LTC or illness: Responses** 1,855 2,216 1,875 Average calculated as the median for the benchmark group







Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months



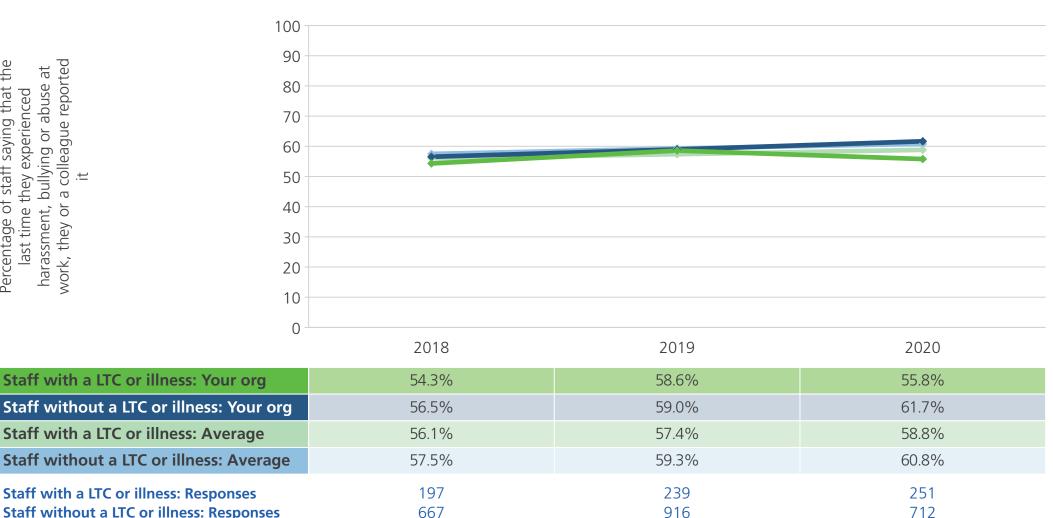
Staff without a LTC or illness: Responses Average calculated as the median for the benchmark group







harassment, bullying or abuse at work, they or a colleague reported Percentage of staff saying that the last time they experienced



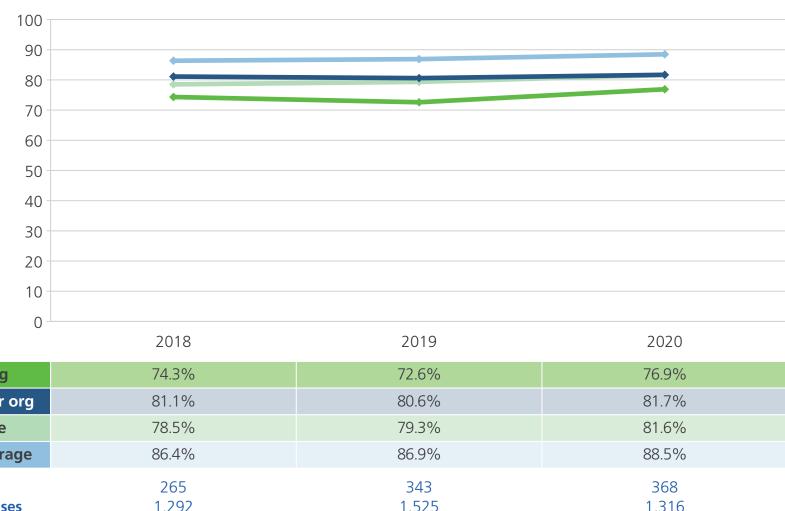
Staff without a LTC or illness: Responses Average calculated as the median for the benchmark group







Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion



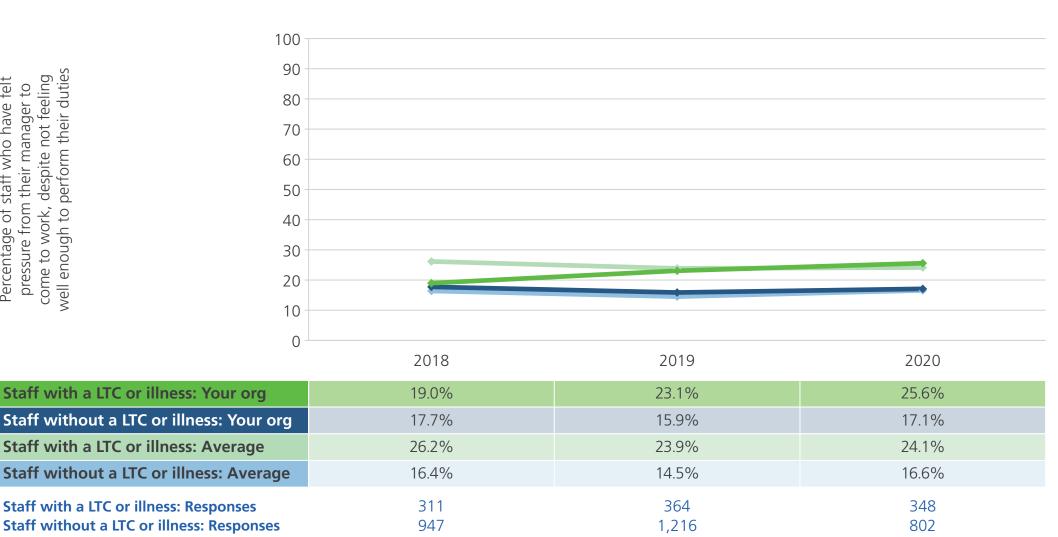
Staff with a LTC or illness: Your org Staff without a LTC or illness: Your org Staff with a LTC or illness: Average Staff without a LTC or illness: Average Staff with a LTC or illness: Responses **Staff without a LTC or illness: Responses** 1,292 1,525 1,316







come to work, despite not feeling well enough to perform their duties Percentage of staff who have felt pressure from their manager to

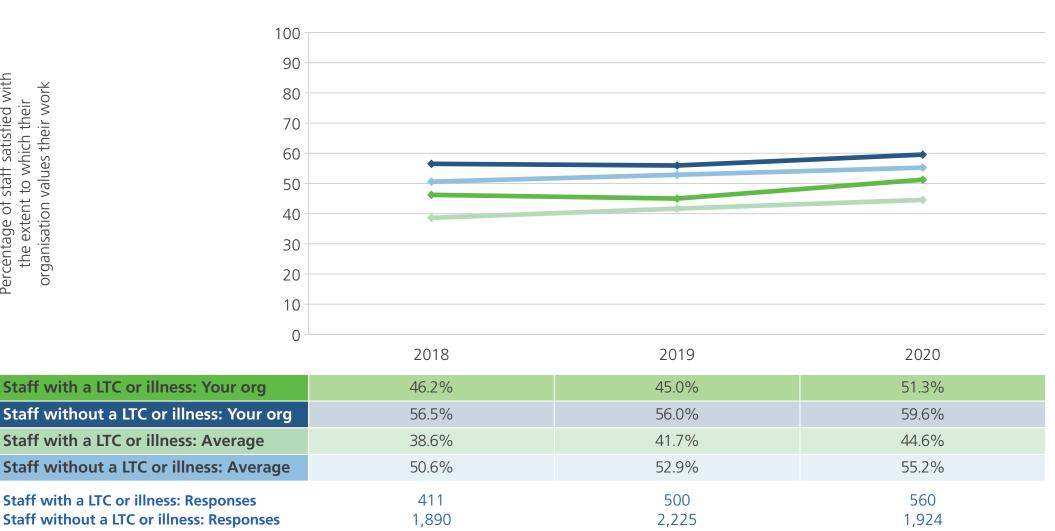


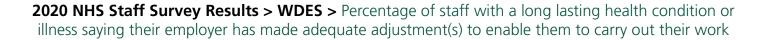






Percentage of staff satisfied with organisation values their work the extent to which their

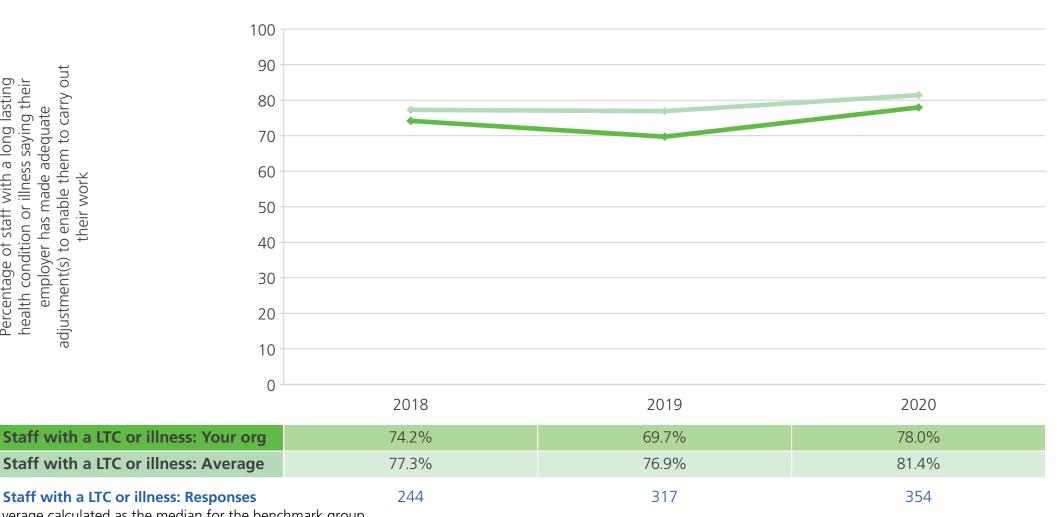








adjustment(s) to enable them to carry out Percentage of staff with a long lasting health condition or illness saying their employer has made adequate their work





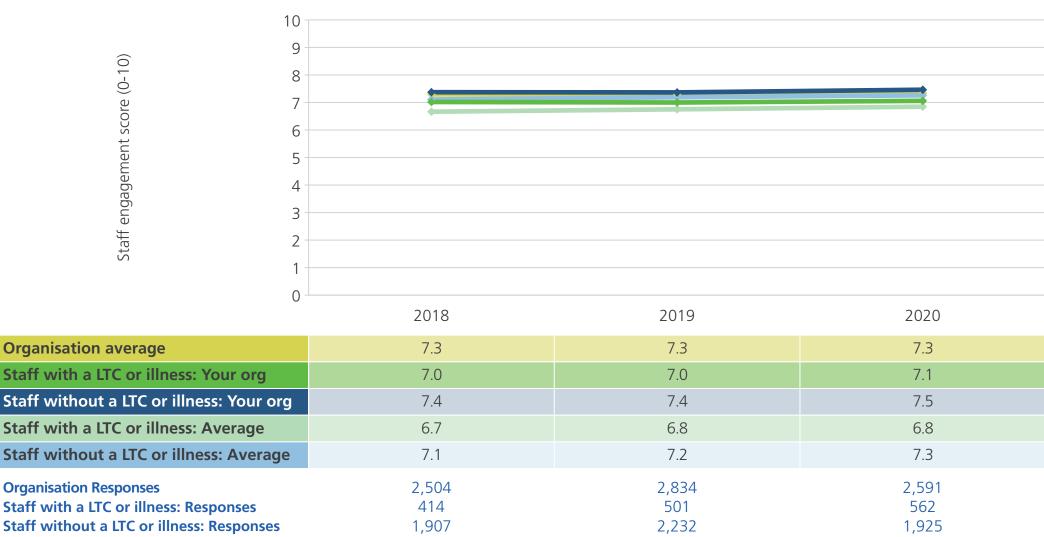


Staff engagement score (0-10)

Organisation average

Organisation Responses

Staff with a LTC or illness: Responses





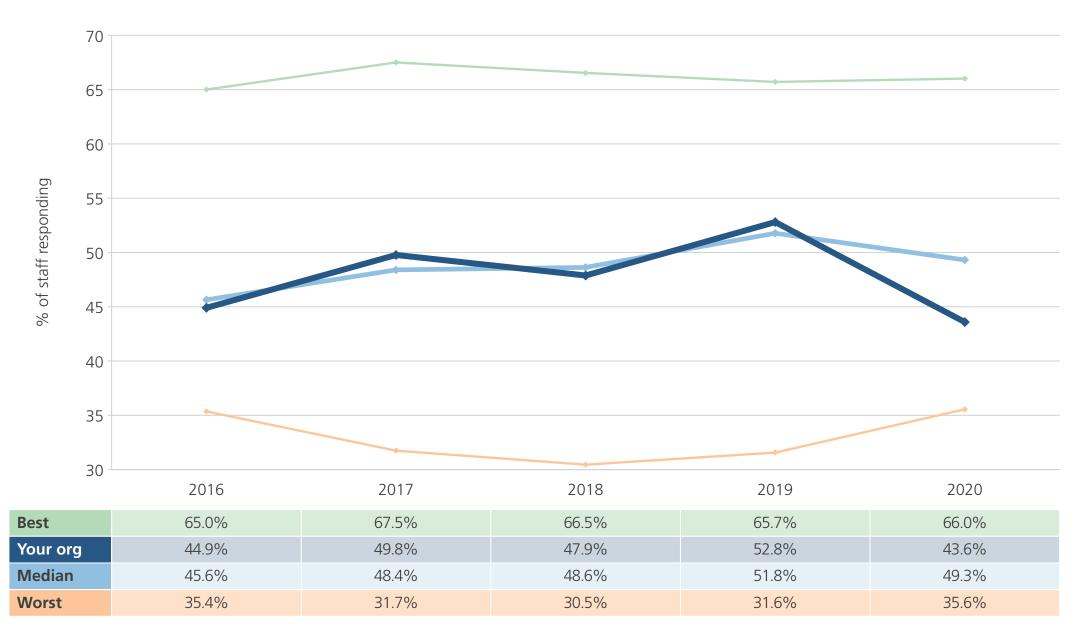
Appendices



Appendix A: Response rate

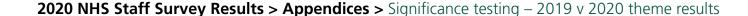








Appendix B: Significance testing - 2019 v 2020 theme results







The table below presents the results of significance testing conducted on this year's theme scores and those from last year*. It details the organisation's theme scores for both years and the number of responses each of these are based on.

The final column contains the outcome of the significance testing: ↑ indicates that the 2020 score is significantly higher than last year's, whereas ↓ indicates that the 2020 score is significantly lower. If there is no statistically significant difference, you will see 'Not significant'. When there is no comparable data from the past survey year, you will see 'N/A'.

Theme	2019 score	2019 respondents	2020 score	2020 respondents	Statistically significant change?
Equality, diversity & inclusion	8.5	2779	8.5	2555	Not significant
Health & wellbeing	6.0	2798	6.3	2567	↑
Immediate managers †	7.2	2800	7.4	2571	Not significant
Morale	6.2	2737	6.3	2531	1
Quality of care	7.7	2549	7.7	2342	Not significant
Safe environment - Bullying & harassment	7.8	2763	7.8	2491	Not significant
Safe environment - Violence	9.2	2767	9.3	2561	Not significant
Safety culture	7.0	2764	7.0	2545	Not significant
Staff engagement	7.3	2834	7.3	2591	Not significant
Team working	7.0	2801	7.0	2576	Not significant

^{*} Statistical significance is tested using a two-tailed t-test with a 95% level of confidence.

[†] The calculation for the immediate managers theme has changed this year due to the omission of one of the questions which previously contributed to the theme. This change has been applied retrospectively so data for 2016-2020 shown in this table are comparable. However, these figures are not directly comparable to the results reported in previous years. For more details please see the <u>technical document</u>.